

Student Support Services

Western Nebraska Community College 1601 E. 27th St. Scottsbluff, NE 69361 (308) 635-6190 or (308) 635-6121 Toll-free 1-800-348-4435

DATE:			Office Use Only	Codes 1=LI/FG 4=DI	
	_		_ Does not Qualify Need (1-15)	0 II 5 DI/II	
LAST 4 of SSN:			Semester/Year	1 3-10	
			Pell Eligible?		
STUDENT ID:			ren Engible:		
DIDEND A ME					
BIRTHDATE:					
CENDED. DE DMD					
GENDER: F M Pronoun	18	Ject Entry Date		(b) eak iii sei vice)	
CAMPUS (select all that apply): ALLIANCE SCOTTSBLUFF SIDNEY ONLINE					
NAME					
(Last)	(MI) (Fi				
Residence Hall? (Check one)	Pioneer Conestogs	a N/A I	Previous name?		
		~	am.		
MAILING ADDRESS		CITY	STA	ATE ZIP	
DHONE		AT THE DAIA THE	DILONE		
PHONE ALTERNATE PHONE ARTERNATE PHONE Yes No					
Are you willing to receive text in	essage reminders of events:	1 es 1	NO		
WNCC EMAIL ADDRESS		OTHE	R EMAIL:		
D.C. 11					
Referred by:					
Student/Friend			Career Pathways		
Professor	Student Life		Financial Aid	Other	
WHICH ASSESSMENT/TESTS HAVE YOU COMPLETED? ☐ Accuplacer ☐ COMPASS ☐ ACT/ SAT					
Please respond to the following	ıg two items:				
1. ETHNICITY: Hispanic or La	atinx?				
2. RACE: Select one or more ra		llowing:			
American Indian or Alaskan N		_		Black or African American	
White			her Pacific Islander	Black of Affican Afficient	
winte		z Hawaiiaii Oi Ou	ilei Facilic Islandei		
Please complete the following idocumentation purposes only.				up data for program	
Did either parent complete a 4-year college degree? \[Y \[\] N \] If yes, which parent?					
Did you apply for Financial Assistance? (FAFSA)?					
Do you have a disability as defined	d by Section 504 of the ADA?	? 🗌 Y 🔠 N			
Is your Taxable family income at	or below the limits in the cha	art below?	Y 🔲 N		
Size of family unit	Continental U.S.		Alaska	Hawaii	
1	\$19,320		\$24,135	\$22,230	
2	\$26,130		\$32,655	\$30,060	
3	\$32,940		\$41,175	\$37,890	
4	\$39,750		\$49,695	\$45,720	
5	\$46,560		\$58,215	\$53,550	
6	\$53,370		\$66,735	\$61,380	
7 8	\$60,180 \$66,900		\$75,255 \$83,775	\$69,210 \$77,040	

For family units with more than 8 members, add the following amount for each additional family member: \$6,810 for the 48 Contiguous States, The District of Columbia, and outlying jurisdictions; \$8,520 for Alaska; and \$7,830 for Hawaii. The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount. The figures shown under family income represent amounts equal to 150 percent of the family income levels established by the Census Bureau for determining poverty status. The poverty guidelines were published by the U.S. Department of Health and Human Services in the <u>Federal Register on January 13, 2021.</u>

Previous TRIO program participant? Please check all that apply.

☐ Upward Bound ☐ Student Support Services ☐ Veterans Upward Bound ☐ Talent Search ☐ EOC Where did you participate in the program?						
Check One:						
Do you already have a college degree?						
College(s) transferred from: Do you work? No Yes Hours per week?						
Check One:						
nic Major? Career Goal?						
CITIZENSHIP: US citizen International student eligible for federal student aid Have alien registration Card						
<u>VETERAN?</u> ☐ Yes ☐ No <u>PARENT?</u> ☐ Yes ☐ No <u>SINGLE PARENT?</u> ☐ Yes ☐ No						
ASSISTANCE NEEDS ▼ (Please check all that apply)						
☐ Supplemental Instruction: Human Anatomy and Physiology? Chemistry? Algebra?						
Other Math? Other Science? Other?						
TUTORING:						
OTHER: Scholarship Assistance Study Skills/Learning Styles Parent Support Group Stress/Time Management Transfer Assistance College Visits FAFSA Assistance (Pell Grant) Test Taking Budgeting for Students Money Management Career Information Other Other						
LONG-TERM EDUCATIONAL GOALS: Please note: Top priority is given to students who plan to pursue an Associate's Degree and/or transfer to a four-year college.						
□ One-year Certificate □ Two-year Certificate □ Diploma □ Associate's Degree □ Bachelor's Degree □ Master's Degree □ Doctoral Degree/Law Degree/Medical Doctor Degree						
Do you plan to transfer your credits to a four-year college?						
NEED CATEGORIES						
For Office Use Only—Check OneLow high school grades (1)Low admission test scores (02)						
Predictive indicator (05)Academic proficient tests (Accuplacer/COMPASS/ACT or SAT Scores) (06)						
Low college grades (07)High school equivalency (08)						
Out of academic pipeline 5 years or more (10)						
Other (11) Limited English proficiency (12)						
Lack of educational and/or career goals (13)Lack of academic preparedness for college level work (14)						
Need for academic support to raise grade(s) in required course(s)/academic major (15)						
No response/Unknown (0)						

PARTICIPATION AGREEMENT

- 1. Graduate from WNCC within 4 years with a certificate, diploma, or degree.
- 2. Attend Supplemental Instruction sessions and tutoring as needed.
- 3. Meet with a TRIO SSS Advisor or Assistant Director at least 2 times a semester to review your academic progress.
- 4. Meet with the WNCC Transfer Advisor if considering transfer.
- 5. Attend provided workshops, field trips and cultural events as possible.
- 6. Turn in paperwork needed for the TRIO SSS Program's federal records.
- 7. Maintain at **least half-time** (6 credits) enrollment.
- 8. Inform TRIO SSS staff <u>immediately</u> of changes in enrollment, address, and phone number.
- 9. File FAFSA and income information with the WNCC Financial Aid office.
- 10. Maintain at least a **2.0** cumulative grade point average.
- 11. Keep the TRIO SSS staff informed of current address and phone number.
- 12. Notify TRIO SSS staff if you drop classes or withdraw from college.
- 13. Complete the Financial Literacy requirements.
- 14. Check Blackboard Community and WNCC email for announcements and email.

Do you agree to the a	bove terms? Check One:	Yes		
I certify that the information contained on this application is true and complete to the best of my knowledge. I understand that the TRIO SSS program staff will use the data provided on this application to assist in assessing academic need. Furthermore, I understand that information on this application and in my TRIO SSS paper and electronic files may be provided by TRIO SSS staff to Student Services personnel on a need-to-know basis.				
Student Signature	INK PLEASE	Date		
Staff Signature	INK PLEASE	Date		

Release of Information

By signing this form, I authorize the TRIO SSS staff to obtain any and all information and documentation necessary for ongoing evaluation of my academic pursuits, including the information on file at WNCC, as required by the United States Education Department. Furthermore, I agree to allow the SSS Program staff to release information to colleges to which I have applied for transfer, and to allow colleges to which I transfer to release information to the SSS program for tracking purposes.

WNCC Website Policy

Policy for use of Names, Images, Photographs, Video/Digital Recordings, Comments, or Voice in College Marketing, Advertisements, and Promotions.

In consideration of acceptance of enrollment at WNCC, or participation in college sponsored or hosted events, I authorize Western Nebraska Community College to use my name, image, and comments, including but not limited to photographs, video and audio recordings created or used for the purposes of publicity, marketing, and advertising for the College.

To avoid having this information released, a student must contact the Office of the Registrar to submit a request that the student's name, image, photograph, comments, video and/or digital recordings not be used by WNCC. This form may be printed, filled out, and sent to the Office of the Registrar.

TRIO Student Support Services is funded by the U.S. Department of Education at \$400,554

A COPY OF THIS APPLICATION IS AS VALID AS THE ORIGINAL