



## Application Form

<b>Personal Information</b>			
Date of Application (MM/DD/YYYY)	Social Security #	Student ID#	
Name <small>Last</small>	<small>First</small>	<small>MI</small>	Date of Birth (MM/DD/YYYY)
Local Address <small>Street/Box Number</small>		<small>City</small>	<small>State</small> <small>ZIP</small>
Permanent Address (if different) <small>Street/Box Number</small>		<small>City</small>	<small>State</small> <small>ZIP</small>
Phone # (    )	Alternate Phone # (    )	Email Address	
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Ethnicity/Race (please mark ALL that apply) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian/Pacific Islander	When did you first enroll at LCCC? (MM/DD/YYYY)	
<b>Eligibility Information</b>			
Are you a citizen, national or permanent resident of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do either of your parents have a four-year college degree? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Did you complete your FAFSA? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you receiving Federal Aid? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type? (Check all that apply) <input type="checkbox"/> Pell Grant <input type="checkbox"/> SEOG <input type="checkbox"/> Work Study <input type="checkbox"/> Subsidized Loan <input type="checkbox"/> Unsubsidized Loan	
Are you receiving additional funding? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type? <input type="checkbox"/> Scholarships <input type="checkbox"/> DVR <input type="checkbox"/> Other: _____		Do you have a documented disability? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, are you working with Disability Support Services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Educational Services</b>			
Which TRIO services interest you? (Check all that apply) <input type="checkbox"/> Academic Advising/Educational Planning <input type="checkbox"/> Financial Aid Advising/Application Assistance <input type="checkbox"/> Financial Literacy/budgeting <input type="checkbox"/> Academic enhancement skills/online learning <input type="checkbox"/> Campus Referrals <input type="checkbox"/> Community Resources <input type="checkbox"/> Connection to: <input type="checkbox"/> Math Lab <input type="checkbox"/> Writing Center <input type="checkbox"/> Tutoring		<input type="checkbox"/> Motivation <input type="checkbox"/> Personal Advising and Mentoring <input type="checkbox"/> Academic esteem enhancement <input type="checkbox"/> Time Management <input type="checkbox"/> Study Skills/Strategies <input type="checkbox"/> Test-taking Skills <input type="checkbox"/> Working with Faculty <input type="checkbox"/> Career Exploration/Planning through Career Center <input type="checkbox"/> Transfer Assistance <input type="checkbox"/> Other (specify) _____	
<b>Authorization</b>			
<p>I hereby certify that the information provided in this application is accurate and complete to the best of my knowledge. I hereby authorize TRIO to obtain necessary information from my educational record (e.g. transcripts, entrance/placement test scores, grades, instructor contacts, etc). I also authorize TRIO to share information about me with other LCCC offices (e.g. the DSS, Records, Counseling, Financial Aid, etc.) on a need-to-know basis in compliance with Family Education Rights and Privacy Act (FERPA). If selected into TRIO, I agree to participate in any activities that may be pertinent to my academic success; to work with my TRIO Advisor to develop and implement a Comprehensive Success Plan; and to complete the terms of my TRIO Partnership Agreement.</p>			
Applicant Signature _____			Date _____

**FOR OFFICE USE ONLY**

**Date RCVD:** \_\_\_\_\_

**Comments:**

- Orientation complete
- Income Verification
- TRIO Partnership Agreement
- Assessments
  - Connection made with Career Center

Acceptance letter sent on: \_\_\_\_\_

**Added to:**

- Excel
- D2L
- Colleague
- Facebook
- Blue File Folder
- Electronic Folder
- Print Prior Classes (STAC)

**Eligibility/Participant Status/Need (Check all that apply)**

- Low Income     
  First Generation     
  Disability     
 Cohort Year: \_\_\_\_\_

**Need:**

- |   |  |
|---|--|
| <input type="checkbox"/> Low HS grades                        | <input type="checkbox"/> Out of school 5 years                                   |
| <input type="checkbox"/> Low ACT/SAT scores                   | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> Predictive indicator                 | <input type="checkbox"/> Limited English proficiency                             |
| <input type="checkbox"/> Academic proficiency tests (Compass) | <input type="checkbox"/> Lack of educational or career goals                     |
| <input type="checkbox"/> Low college grades                   | <input type="checkbox"/> Lack of academic prep for college                       |
| <input type="checkbox"/> HS equivalency/GED                   | <input type="checkbox"/> Needs support to raise grades in required courses/major |
| <input type="checkbox"/> Failing grades                       |  |

**Educational Background**

High School: \_\_\_\_\_

Grad Year: \_\_\_\_\_ GPA: \_\_\_\_\_

GED Date: \_\_\_\_\_ Score: \_\_\_\_\_

Degree sought:    AA    AS    AAS

Major: \_\_\_\_\_

Advisor: \_\_\_\_\_

Developmental Courses

Transfer College \_\_\_\_\_ # of Credits \_\_\_\_\_ GPA \_\_\_\_\_

**Enrollment Information (STAT)**

Currently enrolled:    FT: 12 + credits (1)    ¾: 9-11 credits (2)    ½: 6-8 credits (3)    <½: 0-5 credits (4)

Grade level at program entry:    1<sup>st</sup> year, never attended college – no credits attempted (1)  
     1<sup>st</sup> year, attended before – 1 to 29 credits earned (2)  
     2<sup>nd</sup> year – 30+ credits earned (3)

First date of enrollment at LCCC: \_\_\_\_\_

LCCC credits:   Attempted: \_\_\_\_\_   Earned: \_\_\_\_\_   Cumulative GPA: \_\_\_\_\_

Academic Standing:    New – no GPA    Good – 2.000 Cum GPA    Probation – 1<sup>st</sup> term with Cum GPA < 2.000    Suspended

Completed by \_\_\_\_\_ Date \_\_\_\_\_



## Intake Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Student ID# \_\_\_\_\_

*Please answer the following questions as thoroughly and as thoughtfully as possible.*

1. What do you do in your free time? (Hobbies, family, church, sports, etc.)
2. Are you involved with any activities on campus?  Yes  No If yes, what activities?
3. Are you currently employed?  Yes  No If yes, where do you work and for how many hours per week?
4. What is your selected program of study?
5. Do you plan to transfer to another college or university after attending LCCC?  Yes  No  
If yes, what colleges or universities are you considering?
6. What are your goals for this academic school year (fall through spring)?
7. What obstacles could potentially stop you from reaching your goals?  
(Finances, academic difficulty, home/family, employment, other?)
8. What do you hope to gain from your involvement in TRIO?





## Exit Form

**FOR OFFICE USE ONLY**

<i>Graduation</i>	<i>Transfer</i>
Graduation Date: _____ Degree: <input type="checkbox"/> AA <input type="checkbox"/> AS <input type="checkbox"/> AAS <input type="checkbox"/> Certificate Program of Study: _____	Transferring to another College or University: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure If Yes: <input type="checkbox"/> 4 year <input type="checkbox"/> another 2-year School: _____
<i>Withdrawal from School</i>	
Withdrawing? <input type="checkbox"/> Yes <input type="checkbox"/> No Reason: _____	
<i>Exit Code(s)</i>	
<input type="checkbox"/> Academic Dismissal (29-1) <input type="checkbox"/> Non-academic dismissal (29-2) <input type="checkbox"/> Withdrew/Did not return-Financial Reasons (29-3) <input type="checkbox"/> Withdrew/Did not return-Health Reasons (29-4) <input type="checkbox"/> Withdrew/Did not return-Academic Reasons (29-5) <input type="checkbox"/> Withdrew/Did not return-Personal Reasons (29-6) <input type="checkbox"/> Called for Military Service or deceased (29-7) <input type="checkbox"/> Graduated or Transferred (29-8)	<input type="checkbox"/> Transferred to another 2-year institution (30-1) <input type="checkbox"/> Transferred to another 4-year institution (30-2) <input type="checkbox"/> Did not Transfer OR Graduate (30-8) <input type="checkbox"/> Did not Transfer, not enrolled (30-9) <input type="checkbox"/> Graduated w/Cert/Diploma <2Yr Not Trans (31-1) <input type="checkbox"/> Graduated w/Cert/Diploma 2Yr Not Trans (31-2) <input type="checkbox"/> NO degree, not enrolled, trans w/o degree (31-9) <input type="checkbox"/> Graduated AA/AS Not Trans to 4Yr (31-10) <input type="checkbox"/> Graduated AA/AS DID Trans to 4Yr (31-11) <input type="checkbox"/> Certificate and DID Trans to 4Yr (31-12)

Exit Code(s) (from list): \_\_\_\_\_

Comments:

Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

## Program Overview

### VISION

To ensure students who are low-income, first-generation, and/or have a disability reach their full academic potential.

### MISSION

TRIO Student Support Services is a federally funded program that provides collaborative and intensive services to empower eligible LCCC students to overcome the social, economic, academic, and situational barriers to obtaining accessible educational opportunities.

### VALUES

TRIO values:

- ❖ Equal access to education
- ❖ Utilizing a strengths-based approach in working with all participants
- ❖ Individual, academic, and personal experiences
- ❖ Cultural diversity
- ❖ Minimizing student debt
- ❖ Campus and community collaboration

### How we accomplish our mission

We provide collaborative and intensive services to help students identify and overcome educational barriers. These services are available in individual appointments, group trainings or workshops, and through online access. We encourage and empower our students to take ownership of their academic efforts and successes. Our services include:

- ❖ Academic advising
- ❖ Financial aid advising and application assistance
- ❖ Financial literacy
- ❖ Personal advising and mentoring
- ❖ Linking to applicable resources on campus and within the community
- ❖ Facilitation of career exploration through the Career Center
- ❖ Academic skills enhancement
- ❖ Transfer assistance
- ❖ Academic esteem enhancement

### How students participate and what they accomplish

Students meet with their TRIO advisor on a regular basis to monitor and update their Comprehensive Success Plan, which identifies their educational barriers, concerns, goals, and achievements. Students participate in advising sessions, workshops, social or cultural activities, and community service projects. Students are retained at LCCC into their second year at a rate of 55%, will graduate at a rate of 27% within four years, and will transfer to four-year schools at a rate of 18% within four years.

## **Vision**

To ensure students who are low-income, first-generation, and/or have a disability reach their full academic potential.

## **Mission**

TRIO Student Support Services is a federally funded program that provides collaborative and intensive services to empower eligible LCCC students to overcome the social, economic, academic, and situational barriers to obtaining accessible educational opportunities.

## **Goals**

- Provide students with the knowledge and skills to be successful academically.
- Provide students with the social support to address non-cognitive needs.
  - Assist students in becoming informed financial-aid-consumers.
  - Assist students in transferring to four-year programs.

## **Outcomes**

- 85% of participants will maintain good academic standing.
- 55% of participants will persist from one academic year to the beginning of the next and/or graduate or transfer.
- 27% of participants served each year will graduate from LCCC with an associate degree or certificate within 4 years.
  - 18% of new participants served each year will receive an associate degree or certificate and transfer to a four-year institution within four years.

## **Objectives**

- Develop, monitor, and complete the comprehensive success plan.
  - Individual and group training to aid in academic success.
  - Provide appropriate campus and community referrals.
    - Financial aid education and assistance.
      - Financial literacy.
      - Transfer assistance.