



TRIO Supportive Educational Services & TRIO STEM

1450 Jayhawk Blvd., 7 Strong Hall, Lawrence, KS 66045
 (785) 864-3971 (785) 864-5188 (fax) apex.ku.edu

- FOR OFFICE USE ONLY -

Eligib. Status _____

TRIO SES TRIO STEM

Other groups _____

APPLICATION FOR SERVICES

All information will remain confidential and will be used for

A) Eligibility determination; B) Student demographic recordkeeping, C) Need assessment, D) Federal reporting, E) Other administrative purposes.

PERSONAL INFORMATION	Name: Last: _____ First: _____ MI: ____ Gender: ____ M ____ F
	Date of Birth: _____ KU ID: _____ SSN: _____
	Address:
	Local (KU): _____ City/State/Zip: _____
	Permanent (Parent's): _____ City/State/Zip: _____
	Cell phone: (_____) _____ Home (parent's) phone: (_____) _____
	Email address: _____ (required)
	Citizenship Status: ____ U.S. Citizen ____ International Student ____ Permanent Resident ____ Other
	Ethnicity: Are you Hispanic/Latino (a)? ____ Y ____ N
	Race:
____ American Indian/Alaskan Native ____ Asian ____ Black/African American	
____ Native Hawaiian/Pacific Islander ____ White	

SERVICE INFORMATION	• What Semester/Year are you requesting services for with TRIO SES or TRIO STEM? _____
	• If you are a returning TRIO SES or TRIO STEM participant, what was your las semester/year of participation? _____
	• If you are a new applicant, how did you hear about this program? _____
	• Have you participated in other federally funded or TRIO programs (Talent Search, Upward Bound, Educational Opportunity Center, McNair Scholars) or a GEAR UP program? ____ Y ____ N If so, which one? _____
	• Are you currently participating in other TRIO programs? ____ Y ____ N If so, which one? _____
	• Are you a Hixson Scholar? ____ Y ____ N Are you an OPTIONS participant? ____ Y ____ N Year? _____

EDUCATION & ACADEMIC NEED	DEGREE(S) AND DIPLOMAS HELD:	KU Classification:	Services Requested:	Other:
	____ High school or GED ____ Associate's ____ Bachelor's ____ Master's or Doctorate ____ Other High school graduation date: _____ HS GPA: _____	____ Freshman ____ Sophomore ____ Junior ____ Senior ____ Other Major _____ ____ Undecided ____ I am accepted into a major ____ I have applied for entrance into a major ____ I will apply for a major (semester/year): _____	(Check all that apply) ____ Course specific tutoring assistance ____ Reading skills ____ Math skills ____ Writing skills ____ Study skills ____ Cultural and academic enrichment ____ English proficiency (ESL) ____ Academic Counseling/Advising ____ Personal support ____ Career counseling ____ Financial Aid counseling ____ Managing money/personal finances ____ Graduate school counseling ____ Laptop/calculator loaner ____ Computer/equipment skills	(Check all that apply) ____ English is not my first language ____ I am a veteran ____ I am/have been in foster care ____ I am/have been homeless Tutoring Needs: If you are requesting tutoring, please provide the course number and name of the class: _____ _____ _____ Note: Tutors will be assigned according to availability at the time of your request.

	INCOME STATUS	FIRST GENERATION STATUS			DISABILITY STATUS
	Are you currently receiving financial aid through the KU Office of Financial Aid and Scholarships? <input type="checkbox"/> Y <input type="checkbox"/> N If <u>NO</u> , why? <input type="checkbox"/> I have not applied, but I will apply to receive aid for the year <input type="checkbox"/> I am not eligible <input type="checkbox"/> For financial reasons <input type="checkbox"/> For academic reasons <input type="checkbox"/> Other	Your mother's highest degree: <input type="checkbox"/> 8th grade or less <input type="checkbox"/> Some H.S. <input type="checkbox"/> H.S. diploma <input type="checkbox"/> Some college <input type="checkbox"/> Technical degree <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctoral	Your father's highest degree: <input type="checkbox"/> 8th grade or less <input type="checkbox"/> Some H.S. <input type="checkbox"/> H.S. diploma <input type="checkbox"/> Some college <input type="checkbox"/> Technical degree <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctoral	Your guardian's highest degree (<i>if applicable</i>): <input type="checkbox"/> 8th grade or less <input type="checkbox"/> Some H.S. <input type="checkbox"/> H.S. diploma <input type="checkbox"/> Some college <input type="checkbox"/> Technical degree <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctoral	Do you have a disability? <input type="checkbox"/> Y <input type="checkbox"/> N If so, is documentation regarding your disability filed with The Academic Achievement and Access Center (AAAC)? <input type="checkbox"/> Y <input type="checkbox"/> N If so, an AAAC verification form must be attached to this application. Attached? <input type="checkbox"/> Y <input type="checkbox"/> N

STATEMENT OF VERIFICATION: To the best of my knowledge, all information provided on this application, including the above eligibility information, is true. (Student Signature) _____

STATEMENT OF AGREEMENT AND CONSENT: I authorize TRIO SES/TRIO STEM to gather my ACT scores, financial aid reports, and other necessary information in order to provide me with the services that I have requested, and to make reports to the U.S. Department of Education for the re-funding of the program. I also authorize TRIO SES/TRIO STEM to obtain periodic reports from my instructors regarding my academic progress for courses in which I am enrolled. I understand that all information will be kept confidential and will be used for the following specified purposes: a. Student demographic data and record keeping b. program evaluation c. needs assessment d. federal reporting e. other administrative purposes

I have read and agree with the **Statement of Agreement and Consent:**

Student signature _____ Staff member signature _____ Date _____

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ELIGIBILITY CRITERIA	ACADEMIC NEED	ACADEMIC STRENGTHS	
First Generation: Y N	01 - HS GPA (<2.5)	09 - Failing grades	<input type="checkbox"/> ACT 21 or higher
Disability: Y N	02 - Admission test scores (ACT ≤ 19)	10 - 5+ years out of school	<input type="checkbox"/> Most recent Cum GPA is 2.5 or higher
Documentation? Y N	05 - Predictive indicator (Freshman status, transfer student, multiple)	11 - Other _____	<input type="checkbox"/> Course/assignment grades above "C" in particular subject
Low income: Y N	06 - Diagnostic tests	12 - English proficiency	<input type="checkbox"/> Other: Persistence toward graduation, letter of recommendation
Documentation? Y N	07 - College GPA (<2.5) KU GPA _____ Transfer GPA _____	13 - Education/Career goals	
Cont. Student? Y N	08 - GED	14 - Academic preparedness	
Term last participated: _____		15 - Need for academic support	

APPROVAL	NO APPROVAL	Person(s) Determining Eligibility
Continuing student: Y N	REASON: <input type="checkbox"/> Citizenship req. <input type="checkbox"/> No eligibility met <input type="checkbox"/> Beyond 1/3 cutoff	Director _____ Date _____
First Year of participation: _____ (eligib. doc. in original file)		Staff _____ Date _____
Academic Need _____		
<input type="checkbox"/> FG <input type="checkbox"/> LI <input type="checkbox"/> FG/LI <input type="checkbox"/> D <input type="checkbox"/> D/LI		