



# TRIO-STUDENT SUPPORT SERVICES APPLICATION

Year — 2024-2025

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

Prefer to be called: \_\_\_\_\_

NUID#: \_\_\_\_\_

Gender Given at Birth M \_\_\_ F \_\_\_ Gender You Identify With \_\_\_\_\_

Pronouns: He/Him, She/Her, They/Them \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ ACT Score: \_\_\_\_\_ (if known)

Year in HS/College: (Circle one) HS SR or College FR SO JR SR

Are you a new transfer student to UNK? [ ] Yes [ ] No Referred by \_\_\_\_\_

Received High School Diploma/GED from \_\_\_\_\_ Current UNK students only Cumulative GPA at UNK \_\_\_\_\_

For Office Use Only: Approved \_\_\_\_\_ Not Approved \_\_\_\_\_

\_\_\_\_\_ G \_\_\_\_\_ I \_\_\_\_\_ D \_\_\_\_\_ DQ \_\_\_\_\_ ETRIO \_\_\_\_\_

EN \_\_\_\_\_ MA \_\_\_\_\_ RE \_\_\_\_\_ SCR \_\_\_\_\_ ACT \_\_\_\_\_

AN Codes \_\_\_\_\_

Advisor \_\_\_\_\_

CAS \_\_\_ / \_\_\_ AA \_\_\_ FA \_\_\_ LTR \_\_\_ / \_\_\_ FLD \_\_\_

SC \_\_\_ CS \_\_\_ FENDT \_\_\_ / \_\_\_ / \_\_\_ FSDT \_\_\_ / \_\_\_ / \_\_\_

Final-HSGPA \_\_\_\_\_ RK \_\_\_ / \_\_\_ % \_\_\_\_\_ ADM \_\_\_\_\_

PRC \_\_\_\_\_

**Your answers to the following questions will determine your eligibility for the TRIO-Student Support Services program.**

- ◆ Did either parent receive a four-year degree from any college or university? [ ] Yes [ ] No  
If yes, which parent? \_\_\_\_\_ Degree received from \_\_\_\_\_
- ◆ Have you completed the FAFSA for 2024-2025? (for financial aid assistance) [ ] Yes [ ] No Did you receive a Pell Grant? [ ] Yes [ ] No
- ◆ Do you have a **documented** disability? [ ] Yes [ ] No **Have you registered with the UNK Disability Services for Students Office?** [ ] Yes [ ] No  
(Documentation of disability *must* be on file with the UNK Disability Services for Students (DSS) Office (www.unk.edu/iso). Services are networked at UNK and the DSS Office maintains documentation of disabilities in addition to working with students to coordinate accommodations. TRIO-SSS provides academic strategies, coaching, and support.
- ◆ Have you previously participated in any of the following programs? [ ] TRIO-Student Support Services [ ] EOC [ ] Upward Bound  
[ ] Veteran's Upward Bound [ ] Talent Search. **If yes, where:** \_\_\_\_\_
- ◆ Your academic major: \_\_\_\_\_, or indicate "undecided" \_\_\_\_\_
- ◆ Are you a U.S. Citizen? [ ] Yes [ ] No Permanent Resident Alien? [ ] Yes [ ] No *If yes, please attach a copy of both the front & back of your permanent Resident Card.*
- ◆ Do you have a Social Security number? [ ] Yes [ ] No Are you a Veteran? [ ] Yes [ ] No Are you Active Military? [ ] Yes [ ] No
- ◆ Ethnicity [ ] American Indian or Alaskan Native [ ] Native Hawaiian or Pacific Islander [ ] Asian [ ] African American [ ] Hispanic  
[ ] White
- ◆ Is English your second language? [ ] Yes [ ] No

### TRIO-SSS PROGRAM INCOME ELIGIBILITY— School Year 2024– 2025

**Please follow directions carefully.** Federal regulations **require** income information to determine which applicants meet TRIO-SSS federal income eligibility guidelines. Income eligibility is determined by your family's **2023 ADJUSTED GROSS INCOME (from your 1040 Income Tax form, Line 11)** and **TAXABLE INCOME (from your 1040 Income Tax form, Line 15)** and your family's **NUMBER OF HOUSEHOLD MEMBERS/FAMILY UNIT**. To determine your parent's number of household members, include: (a) yourself; (b) your parents; (c) the number of other children (other than yourself and even if they do not live with your parents) who received more than half of their support from your parents between July 1, 2023 and June 30, 2024; and (d) the number of people who are not your parents' children but who live with your parents and receive more than half of their support from your parents, and will continue to receive more than half of their support from your parents between July 1, 2023 and June 30, 2024.

- ◆ For federal financial aid purposes, are you considered a **DEPENDENT STUDENT** or **INDEPENDENT STUDENT**? Please mark selection with an "X".  
\_\_\_\_\_ **DEPENDENT STUDENT**: You are considered **DEPENDENT** if you do not meet one or more of the criteria for independent status on the line below.  
\_\_\_\_\_ **INDEPENDENT STUDENT**: A financially **INDEPENDENT** student must meet at least one of the following criteria: (a) be at least 24 years old by Dec. 31; (b) be an orphan or ward of the court at 18 years old; (c) is married; (d) is a veteran or active duty military; (e) have legal dependents; (f) was homeless as a minor.
- ◆ **Number of Household Members.** Using information from the directions above, please put in the "**Number**" of household members/family unit.  
\_\_\_\_\_ **Number** of household members/family unit if student is a **DEPENDENT STUDENT** or \_\_\_\_\_ **Number** if student is an **INDEPENDENT STUDENT**
- ◆ Did your family (or you, if you are an independent student) file **2023** taxes? [ ] Yes [ ] No If no, what was your family's reason (or yours if you are an independent student) for not filing taxes? \_\_\_\_\_

**\*\* IMPORTANT—PLEASE NOTE: Your TAXABLE INCOME and your ADJUSTED GROSS INCOME on the following lines should not be the same amount. Your TAXABLE INCOME should be less than your ADJUSTABLE GROSS INCOME.**

- ◆ If you are a **DEPENDENT STUDENT**, please provide: Parent(s) 2023 **TAXABLE** Income: \$ \_\_\_\_\_ **ADJUSTED GROSS** Income: \$ \_\_\_\_\_
- ◆ If you are an **INDEPENDENT STUDENT**, please provide: Your 2023 **TAXABLE** Income: \$ \_\_\_\_\_ **ADJUSTED GROSS** Income: \$ \_\_\_\_\_
- ◆ **DEPENDENT STUDENT:** Parent printed name: \_\_\_\_\_ Parent signature: \_\_\_\_\_
- ◆ **INDEPENDENT STUDENT:** Your printed name: \_\_\_\_\_ Your signature: \_\_\_\_\_

(OVER)

# STUDENT REQUIREMENTS FOR TRIO-SSS PROGRAM PARTICIPATION

## INITIAL EACH LINE OF THE FOLLOWING INDICATING THAT YOU UNDERSTAND AND AGREE TO THE TRIO-SSS REQUIREMENTS.

- \_\_\_\_\_ 1. **Grade Forms** must be completed and turned in to the TRIO-SSS office each semester by the due date. (Filling out a Grade Form is required by all TRIO-SSS students.) Information and the form will be sent to your UNK Loper email.
- \_\_\_\_\_ 2. Meet with your TRIO-SSS advisor each semester and confirm a **Semester Course Plan** for the following semester. (Filling out a Semester Course Plan form is required of all TRIO-SSS students.) Information and the form will be sent to your UNK Loper email.
- \_\_\_\_\_ 3. Take advantage of one or more **TRIO-SSS services** (TRIO-SSS advisor appointments, TRIO-SSS sponsored events, etc.) for a minimum of 30 minutes each semester.

## NEW FALL 2024 SEMESTER FRESHMEN TRANSITION REQUIREMENTS

- \_\_\_\_\_ 4. Enroll in the TRIO-SSS **Foundations for Learning (FFL)** course which includes participation in the TRIO-SSS Mentoring Program. (Mentoring Program information will be given to you in your UF class.)

**-OR-**

- \_\_\_\_\_ 5. **Non-traditional freshmen students** (graduated from high school five or more years ago) may elect to meet with their TRIO-SSS advisor twice each month, September through November, and utilize at least one TRIO-SSS service per month in lieu of participation in the University Foundations class and Mentoring Program. If you choose this option, you must contact the TRIO-SSS office at 308.865.8988 to set up regular meeting times with your TRIO-SSS advisor within the first two weeks of the semester.

**BY SIGNING BELOW**, 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 various UNK offices. I also understand that the TRIO-SSS staff will assist me in achieving my goals only if I meet the student requirements for participation. **Failure to meet the TRIO-SSS student requirements can result in suspension or termination from the program.**

I certify that the information contained on this application is true and complete to the best of my knowledge. I understand that TRIO-Student Support Services will use the data provided on this application form to assist in assessing my program eligibility and academic need. Furthermore, I understand that information on this application and in my TRIO-Student Support Services file may be provided by TRIO-Student Support Services staff to Student Affairs, the Registrar's Office, Financial Aid, Admissions, and Advising and Career Services and other offices on campus on a need-to-know basis. **By signing this form, I give the UNK Financial Aid Office permission to release my information from the Free Application for Federal Student Aid (FAFSA) to the TRIO-SSS office to determine financial eligibility for the program and in future years in which I am enrolled at the University of Nebraska at Kearney.**

**PUBLICITY:** At times, student academic achievements or other honors and awards are published through UNK or other local media. If you wish to restrict publicity or use of any photographic material, you must come to the TRIO-Student Support Services office in MSAB, Room 172 and sign a **Publicity Restriction Form.**

|  |  |
|--|--|
| _____  | _____  |
| <b>STUDENT SIGNATURE (Required)</b>              | <b>DATE</b>  |
| _____  | _____  |
| <b>Permanent Home Address</b>                    | <b>UNK or Local Address</b>  |
| _____  | _____  |
| <b>City State Zip</b>                            | <b>City State Zip</b>  |
| <b>MAILING ADDRESS (if different from above)</b> | _____  |
| _____  | <b>Cell Phone: (_____) _____</b>                                   |
| <b>Mailing Address</b>                           | _____  |
| _____  | <b>UNK Loper E-mail: _____</b>                                     |
| <b>City State Zip</b>                            | (TRIO-SSS uses UNK Loper email to regularly contact participants.) |

PLEASE RETURN COMPLETED FORM TO:

TRIO-STUDENT SUPPORT SERVICES  
Memorial Student Affairs Building, #172  
2510 11th Avenue  
University of Nebraska—Kearney  
Kearney, NE 68849-2365  
Phone: 308.865.8988  
TRIOSSS@unk.edu

