TRiO
STUDENT SUPPORT SERVICES
Lake Tahoe Community College

Application

Staff Use Only
Date Received: _____

Legal Name: _____ **Student ID#:**_____
(Print your name as stated on your birth certificate or ID card)

Date of Birth: _____ **Gender:** ◯ Male ◯ Female ◯ Decline to state gender

Mailing Address: _____
PO Box or Street Address City State Zip Code

Home Phone: _____ **Cell Phone:** _____ **Email:** _____

What are the best <u>TWO</u> ways to contact you? 1. _____ 2. _____

Academic Goals:
- ☐ Earn an AA degree in (list major) _____
- ☐ Earn a certificate in (list title of cert.) _____
- ☐ Transfer to a 4-year school (name of school) _____
- ☐ Other—please describe: _____

Did you graduate from high school? ☐ Yes _____ (Date of graduation) ☐ No

Have you already earned a degree or certificate? ☐ Yes: _____
Type of Degree/Certificate Name of College Date earned

☐ No, I have not earned a degree or certificate

Citizenship: ☐ Non-Citizen ☐ US Citizen Social Security # (<u>required</u>): _____ ☐ Legal Permanent Resident LPR Number: _____ Date issued: _____

Academic status:
- ☐ I enrolled/intend to enroll full-time (12 units)
- ☐ I enrolled/intend to enroll part-time (less than 12 units)

Did the parent(s) you lived with while growing up graduate from a <u>4-year</u> college? Choose Y or N

Taxable income (look on tax returns for the line that states <u>taxable</u> income)--if under 24, you must use your parents' income + your income, combined: $ Choose from these options

How many <u>family members</u> live in your household? Choose one

Marital and Family Status:
- ☐ Single, no children
- ☐ Single, with children # of children: _____
- ☐ Married, no children
- ☐ Married, with children # of children: _____

Do you have a documented disability of any kind?

☐ **Yes,** I have a documented disability.
→ If YES, do you receive services through the Disability Resource Center? Choose Y or N

☐ **No,** I do not have a documented disability

☐ **No,** I do not have a documented disability, but I would like to take some tests to increase my academic success

Other Information

Are you a Veteran? Choose Y or N

Do you currently live with foster parents? Choose Y or N

Are you homeless? Choose Y or N

Do you currently work? Choose Y or N

If yes, where do you work, and how many hours per week?

Have you participated in a TRiO program in the past?

How did you hear about the program?

Is there anything else you would like us to know about you?

Please check at least one item in this box:

☐ I received my GED
☐ I had low grades in high school
☐ I want help raising my college grades
☐ I am not 100% sure about my goals or my major
☐ My Math assessment placed me into MAT 187
☐ My English assessment placed me in ENG 151, ENG 152 or ENG 156
☐ Have not been in a school environment for 5 or more years
☐ I am an English language learner with limited English proficiency

Ethnicity (check one): ☐ Hispanic/Latino of any race ☐ Non-Hispanic/Latino

Race (check at least one): ☐ American Indian or Alaska Native ☐ Asian ☐ White ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander

Academic Support

I could use some help in these subjects:

I certify that the information I have provided is true and is accurate to the best of my knowledge. I understand that falsification or misrepresentation of the information provided may invalidate my application.

_____ _____

Student Signature Date

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☐ Not Eligible ☐ Eligible

____C/LPR
____FG
____LI
____SWD

Date admitted: _____

Mentor assigned: _____

Program entry level: ☐ 1st year (<45 units) ☐ 2nd year (45+ units)

Director Signature: _____

Cohort:
☐ 10-11
☐ 11-12
☐ 12-13
☐ 13-14
☐ 14-15