



# TRiO Student Support Services (SSS) ANOKA-RAMSEY COMMUNITY COLLEGE



TRiO SSS is a federally funded program with in-kind support from Anoka-Ramsey Community College

## PERSONAL DATA

Date of this Application: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Student ID Number \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number/Street Apt. Number

\_\_\_\_\_ City State Zip Code

Phone: Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Metnet Address (required): \_\_\_\_\_

Birth Date: Mo \_\_\_\_\_ Day \_\_\_\_\_ Yr \_\_\_\_\_  Male  Female  Single  Married

Emergency Contact (someone who will always know how to reach you):

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Relationship to You \_\_\_\_\_  
(City/ State/ZIP code)

**Predominant Ethnic Background: (check one)**  
\_\_\_\_ American Indian or Alaskan Native  
\_\_\_\_ Asian  
\_\_\_\_ Black or African-American  
\_\_\_\_ Hispanic or Latino  
\_\_\_\_ Caucasian  
\_\_\_\_ Native Hawaiian or Other Pacific Islander  
\_\_\_\_ More than One Race

**Citizenship:**  
\_\_\_\_ United States Citizen  
\_\_\_\_ Permanent Resident\*  
\_\_\_\_ Refugee\*  
\_\_\_\_ Other

\* Documentation verifying citizenship **is required** with your application (copy of green card or letter stating refugee status).

### For Office Use Only:

<input type="checkbox"/> Accept	<input type="checkbox"/> Wait List
<input type="checkbox"/> Deny	<input type="checkbox"/> Defer
<input type="checkbox"/> Not Qualified	

TRiO SSS Entry Date: \_\_\_\_\_

First School Enrollment Date \_\_\_\_\_

Cohort Year \_\_\_\_\_ No Publications \_\_\_\_\_

Academic Need:

- Low HS Grades
- Low admissions scores
- Predictive indicator
- Diagnostic tests
- Low college grades
- HS equivalency
- Failing grades
- Out of pipeline 5+yrs
- Other
- Limited English proficiency
- Lack of educational and/or career goals
- Lack of preparedness for college level work
- Need for academic support to raise grade(s)

Eligibility:

- FG - date verified \_\_\_\_\_
- LI - date verified \_\_\_\_\_
- Taxable Income \$ \_\_\_\_\_
- Number in household \_\_\_\_\_
- D- date documented \_\_\_\_\_

Program entry level:

- 1<sup>st</sup> year, never attended
- 1<sup>st</sup> year, attended before
- 2<sup>nd</sup> year, sophomore

Major \_\_\_\_\_

Transfer Institution \_\_\_\_\_

Advisor \_\_\_\_\_

When did/will you first enroll at Anoka-Ramsey? \_\_\_\_\_ Term \_\_\_\_\_ Year

Current/Anticipated number of credits: \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time

\_\_\_\_\_ Day Student \_\_\_\_\_ Evening Student \_\_\_\_\_ Both Day/Evening

**ELIGIBILITY INFORMATION**

If you/your family filed for income tax last year, what was the taxable income (not adjusted gross)? A copy of your federal tax forms (first two pages) is required with your application. If you are 24 or under, a copy of your parent's 1040 tax form is required.

\_\_\_\_\_ Less than \$15,315  
\_\_\_\_\_ Less than \$20,535  
\_\_\_\_\_ Less than \$25,755  
\_\_\_\_\_ Less than \$30,975  
\_\_\_\_\_ Less than \$36,195

\_\_\_\_\_ Less than \$41,415  
\_\_\_\_\_ Less than \$46,635  
\_\_\_\_\_ Less than \$51,855  
\_\_\_\_\_ More than \$51,855

Number of people in your family \_\_\_\_\_

Who are the family members in your household (excluding yourself)?

Family Members	Relationship to You	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

What is the highest level of education COMPLETED by the parent(s) you grew up with?

	Grade	High School	2-Year School	4-Year College	Beyond College	4-Year
Mother	_____	_____	_____	_____	_____	
Father	_____	_____	_____	_____	_____	

Please identify any disabilities (medical, psychological, learning) you have and any services you have received:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE: DOCUMENTATION OF YOUR DISABILITY IS REQUIRED WITH YOUR APPLICATION. DISABILITY DOCUMENTATION FOR ANY ANOKA-RAMSEY STUDENT IS RETAINED IN CONFIDENTIAL FILES IN ACCESS SERVICES.**

**HAVE YOU INCLUDED YOUR FEDERAL TAX INFORMATION?**  
**FEDERAL TAX INFORMATION IS REQUIRED WITH YOUR APPLICATION.**  
**(SEE NOTE ON PAGE TWO)**



**STUDENT PUBLICITY RELEASE**

I agree that if I am accepted into the TRIO SSS program, the staff may include my name or picture in publications, including our website, which list the names of TRIO SSS students receiving academic awards, such as the Dean's List, scholarships, service awards, and other academic achievements and accomplishments.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

**RELEASE OF INFORMATION**

I certify that the information I have provided on this application is, to the best of my knowledge, complete and correct. Furthermore, I understand that by applying for the TRIO SSS program, I authorize TRIO SSS staff to obtain records or data pertinent to my participation from other sources, and to release information, as required by law or the terms of the Student Support Services grant, to the grant-funding agency of the United States government. The TRIO SSS staff has my permission to communicate verbally or otherwise with staff, faculty, and/or off-campus professionals on my behalf.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

**PARTICIPANT CONTRACT**

I understand that I have been given the opportunity to participate in the Anoka-Ramsey Community College TRIO SSS program. I understand that if I am to receive services from this program I must accept the following responsibilities as a program participant:

1. To show academic progress toward my educational goal at Anoka-Ramsey Community College;
2. To pursue a degree from Anoka-Ramsey with the intent to transfer to a four-year institution to complete a bachelor's degree or complete a two-year degree at ARCC.
3. To arrange and attend an appointments with your advisor at least three times per semester;
4. To give up my spot in TRIO SSS if I fail to actively participate in the program.

I understand that I will have access to many services provided by the TRIO SSS program staff at no additional cost beyond my regular tuition and fees as an Anoka-Ramsey student. I also understand that my records will be treated confidentially by program staff as required by law and/or the terms of the federal TRIO program.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Advisor Signature*

\_\_\_\_\_  
*Date*

**Submit this application to:**

**TRIO SSS**  
**Anoka-Ramsey Community College**  
**(Coon Rapids Campus)**  
**11200 Mississippi Boulevard NW**  
**Coon Rapids, MN 55433-3470**  
**Phone: 763.433.1170 Fax: 763.433.1521**

*For further information, visit our website at [www.ar.cc.mn.us/ss](http://www.ar.cc.mn.us/ss)*