



Western Michigan University
TRiO Student Success Program Application
Year 2011/2012



Membership requirements:

1. Successful completion of FYE 2100 class for incoming freshmen
2. One-on-one goal setting meetings with your TRiO Advisor (twice per semester until graduation)
3. Registration and successful completion of UNIV 1030: *How to Market Yourself* class in the spring. (All TRiO class requirements are free to TRiO students.)

Name: _____

Western WIN Number: _____ E-Mail Address: _____

Social Security Number: _____ Date of Birth: _____

Campus/Local Address: _____ Permanent Address: _____

City, State and Zip _____

Local Phone/Cell Number: _____ Permanent Phone Number: _____

Male Female

Ethnic Background (Check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Native American/Alaskan Native | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> Black (non-Hispanic) | <input type="checkbox"/> White (non-Hispanic) |
| <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> Other |

College Standing:

- Freshman Sophomore Junior Senior

Do any of your parents/guardians have a Bachelor's Degree? YES NO

Did you apply for financial aid for this academic year? YES NO

Are you a U.S. Citizen, Resident Alien or Permanent Resident? YES NO

Do you have children? YES How many? _____ NO

Taxable income statement: To determine your eligibility in the TRiO SSP program we must have your family's federal taxable income. If you are a dependent, please list taxable income for you and your parents as filed on your **2010** Federal tax return form 1040 line 43, form 1040A line 27, and form 1040EZ line 6.

Student Federal Taxable Income: _____

Parents Federal Taxable Income: _____

Total federal Taxable Income: _____

Please indicate family size: _____ (student, siblings, and parents that live with you and claimed on your federal tax return)

Mark each area you need help in (Please choose at least 3):

- | | | |
|--|--|---|
| <input type="checkbox"/> Academic Advising | <input type="checkbox"/> Personal Support/Referral | <input type="checkbox"/> Financial Aid Advising |
| <input type="checkbox"/> Scheduling | <input type="checkbox"/> Career Advising | <input type="checkbox"/> Study Skills/Tutoring |
| <input type="checkbox"/> Goal Setting | <input type="checkbox"/> Graduate School Advising | <input type="checkbox"/> Motivation |
| <input type="checkbox"/> Cultural Enrichment | <input type="checkbox"/> Peer Mentoring | <input type="checkbox"/> Other: _____ |

PLEASE READ BEFORE SIGNING:

I am willing to make the commitment to participate in TRiO SSP. I give SSP permission, in compliance with Family Educational Rights and Privacy Act (FERPA) of 1974, to review my financial record and collect information about my academic progress at WMU. This information will be used to develop statistical data for reports/publications, to evaluate the program, and to assess my academic and career needs. To the best of my knowledge the information on this form is true and accurate at this time.

Signature (parent) _____

Date _____

Signature (student) _____

Date _____