APPLICATION/ELIGIBILITY FORM TRIO STUDENT SUPPORT SERVICES APPALACHIAN STATE UNIVERSITY

The TRIO Student Support Services Program is a federally funded program through the Department of Education. We are required to have on file certain information about our students. This information includes family income and educational status. Therefore, it is very important that you complete the following information and return this form to Student Support Services as soon as possible. The information will be held in strict professional confidence and will be used to meet the program guidelines imposed by the Department of Education. PLEASE INCLUDE A SIGNED COPY OF YOUR PARENT'S 2023 TAX RETURN WITH THE STUDENT'S NAME LISTED ON THE RETURN. Please contact us if your parent's did not file taxes this year or if they received Social Security Income. *FOR CONFIDENTIAL REASONS, DO NOT EMAIL THE TAX FORMS.

CONTACT AND BASIC INFORMATION			
Application Date:			
Date of Birth:	Age:	Geno	der:
Full Legal Name: Last:	First:	Mid	dle Initial:
Check only one: U.S. Citizen OR Permanent Resident OR Other:			
Check all that apply: ☐ American Indian/Alaska Native ☐ Asian ☐ Black or African American ☐ Latino or Hispanic			
☐ White ☐ Pacific Islander ☐ More than one race ☐ Other:			
Permanent Address:	City:	State:	Zip Code:
Cell Phone #: Home Phone #:		Work Phone	#:
Parent Phone #: Parent/Guardian Name:			
Student's @appstate.edu Email:			
Do you have a documented physical or learning disability? Yes No Banner ID Number			
Intended major:			
INCOME INFORMATION			
INCOME CRITERIA: Please write in the following information using your parents' SIGNED 2023 tax return (all information refers to family income) and include a copy of your parents' Tax Form 1040:			
Amount of <u>Taxable Income</u> :	_(line 15 on 1040 tax form)		
Number in household:	_		
Did you file as (check one):	☐ Married, fil	ing separate return?	☐ Single or head of household?
FIRST GENERATION CRITERIA: a. Does your mother have a bachelor's degree? b. Does your father have a bachelor's degree?	☐ Yes ☐ Yes	□ No □ No	
My signature below indicates that all information above is true and accurate. I give permission for the TRIO Student Support Services Program to receive copies of my grades and financial aid information for advising purposes; to verify my program eligibility; and to fulfill program reporting requirements. Parent Signature: My signature below indicates that all information concerning my Tax Form 1040 as listed above is true and accurate. Student's Full Name (PLEASE PRINT)			
Student's Address			
Student's Signature		Today's Date	
Parent's/Legal Guardian's Signature (required):			