

APPLICANT INFORMATION (This section is for the person requesting services)

Legal Name: _____ Date: _____
Last MI First

Social Security Number: _____ - _____ - _____ Birthdate: _____ Sex: _____

Address: _____
Street Apt./Unit # City State ZIP Code

Phone: _____ Email: _____

US Citizen Yes No | If NO, provide Permanent resident # _____

Ethnicity (Student/Applicant)

Do you identify as Hispanic/Latino? Yes No | If no, please check **all** that apply below:

- American Indian or Alaska Native Native Hawaiian or other Pacific Islander Two or more races
 Asian White
 Black or African American

Military Information (Participant)

Are you a Veteran..... Yes No Is your spouse on Active Duty..... Yes No
Are you currently on Active Duty..... Yes No Is your parent or guardian on Active Duty..... Yes No

Educational Background of participant (Please read all options and select the one that fits you today)

- Current** Middle School Student:
Grade: 6th 7th 8th Middle School Name _____
- Current** High School Student:
Grade: 9th 10th 11th 12th High School Name _____
- High School or GED graduate Attended college without high school diploma, but did not complete
 College student, School Name _____ 4-year college graduate or beyond
 ESL student (Class schedule in hand) Did not complete high school
 ESL student (No class schedule)
 Vo-tech or 2-year college graduate
 Attend college in the past, but did not complete

ELIGIBILITY

Are you currently participating in any federally funded programs listed below (Check all that apply):

- TRIO Upward Bound TRIO Educational Talent Search
 TRIO Upward Bound Math Science TRIO Student Support Services
 TRIO Veterans Upward Bound Other _____

Has either of your natural or adoptive parents received a four-year (bachelor's) college degree? Yes No

Dependency information (Please read each option to find which one is right for you)

Option #1: High School Students and all others younger than 18 years of age (Please check all that apply):

- I am married (or separated, but not divorced) I am a homeless person or an unaccompanied youth.
 I have legal dependents (other than a spouse or children who live with me and who receive more than half of their support from me.)
 I have children who receive more than half their support from me.
 I have been an orphan, in foster care, or a ward of the court after age 13.
 I am in legal guardianship as determined by a court of my legal residence at time of determination and/or an emancipated minor.

If you did not select one of the boxes in this section, you will need a parent/guardian to verify family taxable income range and sign below.

Option #2: If you are OVER the age of 18, **NOT** a high school student, and **NOT** a current or former college student, please indicate your taxable income range below and sign

Dependency information continued...

Option #3: College/vocational students (Please check all that apply):

- I am age 24 or older by December of this year.
I am married (or separated, but not divorced)
I have legal dependents (other than a spouse or children who live with me and who receive more than half of their support from me.
I have children who receive more than half their support from me.
I am a veteran of the Armed Forces of the U.S. Armed Forces or am currently serving on active duty for purposes other than training.
I have been an orphan, in foster care, or a ward of the court after age 13.
I am in legal guardianship as determined by a court of my legal residence at time of determination and/or an emancipated minor.
I am a homeless person or an unaccompanied youth.
I have been determined to be an independent student by the financial aid office at my college.

If you did not select one of the boxes in this section, you will need a parent/guardian to verify family taxable income range and sign below.

Income Verification

Option 1: Filed a Tax Return in 2017

2017 Taxable income: \$
Form 1040 EZ, line 6; Form 1040A, line 27; Form 1040, line 43
If unknown, check amount below.

What is the total number of persons (including you) in your family?

Please place a check mark in the box next to your taxable (Adjusted Gross Income) income range (not gross income) based on last year's taxes.

- (1) \$0 - \$18,210
(2) \$18,211 - \$24,690
(3) \$24,691 - \$31,170
(4) \$31,171 - \$37,650
(5) \$37,651 - \$44,130
(6) \$44,131 - \$50,610
(7) \$50,611 - \$57,090
(8) \$57,091 - \$63,570
above \$63,571

Option 2: Did not file a Tax Return in 2017

In accordance with the eligibility requirements set forth by the U.S. Department of Education, I hereby certify that NO Federal or State tax return documenting my income was filed with the Internal Revenue Service for the previous tax year.

I certify that Total Income from all sources in the year of 2017 was \$

What is the total number of persons (including you) in your family?

Signature of Parent/Legal Guardian (if NO boxes checked in DEPENDENCY SECTION) or
Signature of Applicant (if boxes were CHECKED or OPTION 2 CHOSEN)

Services Requested

- GED preparation (Assessments, practice test, etc.)
Academic assistance (Tutors, Mentors, etc.)
Financial literacy (Balancing check book, credit repair, etc.)
Admissions (Help filling out application, fee waivers)
Career exploration (Find a job, change jobs, etc.)
Financial Aid (FAFSA, FSA ID, Scholarships, etc.)

Read Below and Sign and Date

Certification and Signatures - To the best of my knowledge, the information that I provided is true, complete and accurate. I authorize the EOC program to release any information contained on this form to any other agency, school, or person that may require such information to assist me in completing my educational plans. I also authorize any public school, postsecondary institution that I have attended or may attend in the future to release to the University of Kansas EOC, upon their request, information pertaining to my academic, enrollment, and financial assistance record.

Applicant Signature Date

Parent/Guardian Signature (if required) Date

Media Authorization: I, the under signed, authorize the TRIO Educational Opportunity Centers Program at the University of Kansas to use photographs and/or videotape with my image in the Educational Opportunity Center publications, promotional media, social media, websites and/or news releases.

Applicant Signature Date

Advisor Signature Date

Directors Signature Date