

Educational Opportunity Center

Services Application

Student Information	Please circle the highest grade your <u>parents</u> completed:					
Name:	Parent 1 8 9 10 11 HS or GED/HiSED					
First MI Last	13 14 15 16 Bachelor's Degree					
Social Security Number:						
Address:	Parent 2 8 9 10 11 HS or GED/HiSED					
Street Address or P.O. Box Number	13 14 15 16 Bachelor's Degree					
	Are you currently enrolled in another TRiO program?					
City State Zip Code	□ Yes □ No If yes, which one?					
County: IA or MO (circle one)	□ Upward Bound □ Talent Search					
Phone: Email:	Student Support Services					
Date of Birth : Gender: \Box Female \Box Male	Are you currently in or planning on enrolling in Job Corps?					
Ethnicity: American Indian or Alaskan Native Asian Black or African American 	□ Yes □ No If yes, when:					
 Hispanic/Latino Native Hawaiian or Other Pacific Islander White 	Are you a U.S. citizen? □ Yes □ No					
Marital Status: □ Single □ Married □ Widowed □ Separated □ Divorced	If no, please list your <i>Eligible non-citizen registration number</i> : A#					
Do you have children who receive more than half of their support from you? □ Yes □ No If so how many?	Are you enrolled or planning to enroll in English as a					
Do you have dependents (other than your children or spouse) that live with you and receive more than half of their support from you? □Yes □ No If yes, how many and who:	Second Language classes? □ Yes □ No Military Connected? Are you a veteran?					
Family Size: [# of people (including yourself) living in your household]	□ Yes □ No					
What was your family's income from the last calendar year?	How did you hear about our Educational Opportunity Center?					
□ My family's taxable income from the last calendar year \$						
Note : Income can be found on the federal income tax return. On IRS Form 1040 see line 10 for taxable See line 7 for adjusted gross	If you are a dependent student, please provide the following:					
□ My family did not file a federal income tax return from the last calendar year.	Parent(s) Name:					
□ My family's total adjusted gross income from last year \$	Address:					
\square My family had no taxable income during the last calendar year.	□ Single □ Married □ Widowed					
Please circle the highest grade level <u>vou</u> completed:	□ Separated □ Divorced					
9 10 11 HS Graduate GED/HiSED 13 14 15 16 Bachelor's Degree						
Signature and Permission						

By initialing here, I agree that I have received the financial literacy packet, which includes basic personal income, budgeting, college cost information, financial planning skills, and financial aid information. _ <mark>← (initial here)</mark>

I give Indian Hills Community College Educational Opportunity Center permission to hold and maintain in my case file, college or GED admissions, financial aid, college placement, assessment scores, verification of income, enrollment, class schedules, transcripts or other pertinent information necessary to assure educational attainment and student success, as well as contact me via email and text message.

The information I have provided on this services application is complete and accurate to the best of my knowledge.

Student Signature _____ Date _____ Parent Signature _

Student's Educational Plan

۶	➤ Are you currently in college, high school, or working on GED/HiSED? □ Yes □ No						
	If yes, which and where:	College	□				
		High School	□				
		GED/HiSED	□				
\triangleright	Which college(s) are you considering attending?						
		Start Date					
۶	College(s) previously attended?						
۶	What are your educational and career goals?						
					_		
\triangleright	What assistance do you need to help you reach your goals? Please check <u>all</u> that apply						
	 □ Academic Counseling □ Admissions Information □ Financial Aid Counseling 						

- □ Assistance with Student Loans Career Planning
- $\square \ Money \ Management$ Other:

For office use onlydo	For office use onlydo not complete this section:								
<u>Activity/Service</u>									
	15	30	45	60	Other				
Academic Counseling	_			—					
Admissions Information	—	_	—	_					
Career Planning	_	—	_	—					
Financial Aid Counseling	_	—	_	—					
Financial Literacy	_	_		_					
GED/HiSED Referral	_		—	_					
Loan Repayment Counseling	_		—	_					
Workshop	_		—	_					
Other:		_	_	_					
Individual	□ Group/Workshop								
Grade Standing:		Eligibi	<i>lity:</i> □ LI □ FG	□ Both □	CP 🗆 Other				
EOC Staff Member responsible	le to assure the student's needs and	requests are me	 t.	Date					

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