

Student Information

Name: _____
 First MI Last

Social Security Number: _____ - _____ - _____

Address: _____
 Street Address or P.O. Box Number

 City State Zip Code

County: _____ IA or MO (circle one)

Phone: _____ Email: _____

Date of Birth: _____ Gender: Female Male

- Ethnicity: American Indian or Alaskan Native
 Asian
 Black or African American
 Hispanic/Latino
 Native Hawaiian or Other Pacific Islander
 White

- Marital Status: Single Married Widowed
 Separated Divorced

Do you have children who receive more than half of their support from you?
 Yes No If so how many? _____

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: _____

Family Size: _____ [# of people (including yourself) living in your household]

What was your family's income from the last calendar year?

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

- My family did not file a federal income tax return from the last calendar year.
 My family's total **adjusted gross** income from last year \$ _____
 My family had no taxable income during the last calendar year.

Please circle the highest grade level **you** completed:

9 10 11 HS Graduate GED/HiSED 13 14 15 16 Bachelor's Degree

Please circle the highest grade your **parents** completed:

Parent 1 8 9 10 11 HS or GED/HiSED
 13 14 15 16 Bachelor's Degree

Parent 2 8 9 10 11 HS or GED/HiSED
 13 14 15 16 Bachelor's Degree

Are you currently enrolled in another TRiO program?

- Yes No If yes, which one?
 Upward Bound Talent Search
 Student Support Services

Are you currently in or planning on enrolling in Job Corps?

Yes No If yes, when: _____

Are you a U.S. citizen? Yes No

If no, please list your **Eligible non-citizen registration number:**
A# _____

Are you enrolled or planning to enroll in English as a Second Language classes? Yes No

Military Connected? Are you a veteran?

Yes No

How did you hear about our Educational Opportunity Center?

If you are a dependent student, please provide the following:

Parent(s) Name: _____

Address: _____

- Single Married Widowed
 Separated Divorced

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. _____ ← (initial here)

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** _____
(if you are a dependent student)

