

SSS TRiO Academic Program



Student Application

Northwest Mississippi Community College Student Support Services program is federally funded by the U.S. Department of Education. The mission of SSS is to provide academic and personal support to help participants successfully graduate and/or transfer to a 4-year university. SSS has a proven track record because we are **Serious about Success!**

Eligibility is based on federally defined criteria: 1. Income 2. Family background 3. Disability

Note: Preference is given to majors that will transfer

Personal Information

Student Name: _____

Last Name

First Name

Middle Initial

Social Security Number: _____ NWCC Student ID: _____

Home Address: _____

Street

City

State

Zip

Dorm Address: _____

Dorm Name

Dorm Room Number

Cell Number: _____ Home Phone Number: _____

DOB: ____/____/____ Major: _____ Race: _____

Gender: Male Female U.S. Citizen: Yes No Veteran: Yes No ESL: Yes No
(English second language)

FIRST GENERATION VERIFICATION

Does your mother/legal guardian have a four year degree? Yes No

Does your father/legal guardian have a four year degree? Yes No

Who did you live with until your 18th birthday? Mother Father Both

If you have a different situation (Foster care, ward of the state, etc.) please explain:

Verification of Disability

Do you have a documented disability? Yes No

If so, is the information filed with NWCC Disability Services? Yes No

(Documentation must be provided by an appropriate Professional or State Office) Verified _____

*Have you participated in Student Support Services before? Yes or No If so, what year? _____

I hereby affirm that all of the information provided on this application to be true and complete to my knowledge; I understand that any false information given may result in the loss of SSS participation opportunity. My signature below allows Student Support Services to have access to the following: ACT scores, transcripts, Financial Aid records, documentation of disability (if applicable), records of admission to all colleges, and progress reports from instructors.

Signature _____ **Date:** _____

INCOME VERIFICATION

You may complete this section yourself or we can assist you. If you would like assistance, please sign below:

- I verify that the financial information on this form is current and accurate.

Sign here _____

If you did NOT sign above, please answer the questions below :

For Financial Aid Purposes, are you considered? **Independent Or Dependent**

Student's Adjusted Gross Income: _____

Number in household claimed on student's income tax? _____

Parent's Adjusted Gross Income? _____

FOR OFFICE USE ONLY

You can also provide: (if you did not sign or complete the section above)

- A signed U.S. tax return
- Verification of family income from another governmental source
- A signed statement regarding income of independent student or parent

List Financial Aid Awarded

FOR OFFICE USE ONLY: Enrollment Date _____ Qualification _____

Hours Passed: _____ Freshman or Sophomore Academic or Vo-Tech (transferable)