

Student Support Services Application



TRIO Student Support Services (SSS) is a federal program funded by a grant from the U.S. Department of Education. The SSS grant provides opportunities for academic development, assists students with basic college requirements, and serves to motivate students toward the successful completion of their post-secondary education. The goal of the SSS grant is to increase the college retention and graduation rates of its participants.

The SDES TRIO Center offers two SSS programs:

- PRIME STEM for students in Science, Technology, Engineering, Math (STEM), and Health Science majors (124 qualified students)
- Project BEST for students in all majors at UCF (144 qualified students)

Students are accepted to an SSS program based on eligibility criteria, academic need, and space availability. Completion of this application does not guarantee acceptance into either program.

Applicant Checklist

Official application
Appreciative Advising Inventory
Signed Student Agreement
For applicants with high financial need, proof of income is required. Refer to "Income Verification
Instructions" for details

SDES TRIO Center

University of Central Florida P.O. Box 161920 Orlando, FL 32816-1920 407-823-4165





Date:	
Student Name:	PID:
Social Security Number:	Date of Birth:/
Cell Phone: (Home Phone	e: ()
UCF Email:	@knights.ucf.edu
Preferred method of contact: ☐ Email ☐ Text	□ Call
Local Address:	
Permanent Address:	
Do you consider yourself Hispanic/Latino? ☐ Yes ☐ N	0
Select the race or races with which you identify: American Indian/Alaskan Native Asian Black or African American Native American/Other Pacific Islander White	Gender: ☐ Male ☐ Female ☐ Other/No Response
Citizenship: ☐ US Citizen ☐ US Permanent Resident	[Resident ID#]
TRIO SSS Programs serve college students who are first-general Federal TRIO Programs Current-Year Low-Income Levels, and/o must be both first-generation and low-income. Has your mother completed a bachelor's degree?	tion, demonstrate a high financial need as defined by the
	□No
, , , , , , , , , , , , , , , , , , ,	□ NO
Have you completed a FAFSA? ☐ Yes ☐ No	
Does your financial aid package include a Pell Grant? If you indicated Yes or Unknown, you will need to prove	Yes □ No □ Unknown vide proof of income (see "Income Verification Instructions").
Please select all programs of assistance you or members of you have a public Assistance TAN-F ☐ Social Security ☐ Vocational Rehabilitation (Describe services:	☐ Veteran's Benefits
Do you have a disability? ☐ Yes ☐ No If yes, are you registered with UCF Student Accessibil	lity Services?
Have you previously participated in a Federal TRiO Program? If yes, select the program(s): □ Educational Tale □ Upward Bound □ Upward Bound Math/Science □ Ronald E. McNair Achievement Program	••



ACADEMIC INFORMATION

Academic Standing:	☐ 0-29 hours	30-59 hours	□ 60-8	9 hours \Box	l 90+ hours
When was/is your fire	st semester at UC	CF? □ Summer	☐ Fall	☐ Spring	Year:
Are you a transfer stu	ıdent? 🗆 Ye	es 🗆 No			
Major:			Minor: _		
What is your projecte	ed graduation dat	ee? 🗆 Summer	☐ Fall	☐ Spring	Year:
Educational Goal:	☐ Bachelor's	☐ Master's ☐	l Doctoral	☐ Profession	nal (medical, dental, vet, etc.)
program services. Eac assignments, <u>and</u> eng If accepted, what serv	h semester all SS: age in at least two	S scholars are require co services. SSS offers	ed to meet w the following	ith their SSS ac	demonstrate an academic need for divisor, complete two Canvas
☐ Academic co☐ Financial aid☐ Graduate/pro☐ Career couns	aching to improve and financial liter ofessional school seling ment & academic	e study skills acy counseling/work			
Take the Barsch Learn your results below:	ning Style Invento	ory at http://faculty.	valenciacolle	ege.edu/kover	hiser/Learningstyles.htm and provide
your results below:Visual (sight)	Au	ditory (sound)	Tactile	e/Kinesthetic (small/large motor movements)
your results below:Visual (sight)	Au	ditory (sound) yourself. This inforn	Tactile	e/Kinesthetic (
your results below:Visual (sight) Answer the following	Au	ditory (sound) yourself. This inforn	Tactile	e/Kinesthetic (small/large motor movements)
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your results below:Visual (sight) Answer the following	Au	ditory (sound) yourself. This inforn	Tactile	e/Kinesthetic (small/large motor movements)
your results below:Visual (sight) Answer the following	Au questions about	ditory (sound) yourself. This infornal goals.	Tactilon will he	e/Kinesthetic (small/large motor movements) understand and assess your needs.
your results below:Visual (sight) Answer the following Describe your career of	Au questions about	ditory (sound) yourself. This infornal goals.	Tactilon will he	e/Kinesthetic (small/large motor movements) understand and assess your needs.
your results below:Visual (sight) Answer the following Describe your career of	Au questions about	ditory (sound) yourself. This infornal goals.	Tactilon will he	e/Kinesthetic (small/large motor movements) understand and assess your needs.



Confidentiality and Release of Information Release of Information

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. Additionally, The Privacy Act of 1974, Title 5 U.S.C. § 552a, establishes a code of fair information practice that governs the collection, maintenance, use, and dissemination of personally identifiable information about individuals that is maintained in systems of records by federal agencies.

- Documentation, I hereby give permission for the Student Support Services Program to retrieve, store, and report the following information: College Grade Reports and Transcripts (official and unofficial), SAT/ACT Scores, Financial Aid Award Notices, and, if applicable, documentation regarding status as a Learning Disabled (LD) or Physically Impaired person, or any other information regarding my status as a University of Central Florida student.
- **II. Tracking**, I hereby give permission for the Student Support Services Program to retrieve, store, and report education verification information and student outcomes research about me that is gained from the National Student Clearinghouse and other sources.
- **III. Images**, I give Student Support Services permission to photograph, video tape and/or record me. Further, I give permission for the Student Support Services Program to use and store these images on Web sites, brochures and/or program and media related publications.

I understand that the information contained herein will be kept in confidence and will not be revealed to anyone except Student Support Services personnel, University of Central Florida officials such as the Registrar's Office, Student Disability Services, Office of Financial Assistance or representatives of the United States Department of Education and in accordance with the Family Educational Rights and Privacy Act.

Student Last Name (please print)		First Name
Student Signature		Date
SDES TRiO Center Signature		
		For Office Use Only: Accept Date:
		WaitlistNot Accepted
		Not Interested Other
	2	



PRIME STEM Student Agreement Student Support Services

Student Support Services
Student Development and Enrollment Services

Student Name:		UCFID:	
 Academic Tuto Advice and assi Education/cour Information in Assistance in co 	ring istance in post-secondary course nseling to improve financial and e applying for Federal Student Aid ompleting and applying for Feder		
· · · · · ·	n, I also understand that I have re active in the program. (Please in	esponsibilities as a scholar. I agree to folitial each item)	lowing
l agree to atte	end the PRIME STEM 2018 – 2019	9 Orientation.	
l agree to mee	et with the PRIME STEM Coordina	ator at least once each semester (fall ar	nd spring).
l agree to com	nplete an Individualized Academi	c Plan (IAP) each academic year.	
l agree to mee	et with my Academic Coach at lea	ast once each semester (fall and spring)	
l agree to mee	et with my Peer Mentor/Tutor at	least once each semester (fall and sprin	ng).
(Academic Ad		kshops offered by the TRiO Center or parvices, Pre-Health Pre-Law, Office of Stud	
l agree to com	nplete at least two (2) online canv	as modules each semester (fall and spri	ng).
	end at least one (1) TRiO event ea cial Events with Mentors, etc.)	ch year (TRiO Day, Exam Jam, TRiO End	of the Year Event,
If my GPA falls	below a 3.0 or if I am not doing	atisfactory progress in all UCF coursewowell in a class, I understand that I must racademic support including tutoring an	meet with a
another TRiO Program. either the SDES TRiO Ce	Students cannot be enrolled in tenter Executive Director or I may v	n the program if I am disqualified from two TRiO programs simultaneously. Furtwoid this contract without any obligation or grams to track me for six years from my	ther, I understand s. I am aware that
 Student Signature	 Date	PRIME STEM Staff Signature	 Date

Appreciative Advising Inventory

		Strongly Disagree	Disagree	Neither Disagree Nor Agree	Agree	Strongly Agree
1.	I am committed to being a life-long learner.					
2.	I am committed to earning a degree.					
3.	I attend all my classes.					
4.	College is preparing me for a better job.					
5.	I have a commitment to self-development and personal growth.					
6.	I have a strong desire to get good grades.					
7.	At the present time, I am actively pursuing my academic goals.					
8.	It is important to help others and I do so on a regular basis.					
9.	When challenged, I stand up for my beliefs and convictions.					
10.	I take personal responsibility for my actions and decisions.					
11.	I have a strong desire to make something of my life.					
12.	I'm good at planning ahead and making decisions.					
13.	I know and feel comfortable around people of different cultural, racial, and/or ethnic backgrounds.					
14.	I believe in myself and my abilities.					
15.	I have built positive relationships with my friends.					
16.	I feel that I have control over many things that happen to me.					
17.	I feel good about being a college student.					
18.	I feel positive about my future.					
19.	Right now I see myself as being pretty successful.					
20.	At this time, I am meeting the goals I have set for myself.					
21.	If I should find myself in a difficult situation, I could think of many ways to get out of it.					
22.	I can think of many ways to reach my current goals.					

		Strongly Disagree	Disagree	Neither Disagree Nor Agree	Agree	Strongly Agree
23.	I feel that my family supports my educational pursuits.					
24.	I feel loved by my family.					
25.	I value my parents' advice.					
26.	I know at least 3 people who work at my university that I can go to for advice and support.					
27.	It is important that I not let my professors or teachers down.					
28.	I participate in community activities.					
29.	Someone outside my family supports my educational pursuits.					
30.	My parents support my educational pursuits.					
31.	My close friends support my educational pursuits.					
32.	My university is a caring, encouraging place.					
33.	I feel valued and appreciated by my fellow students.					
34.	I have at least 2 adults in my life that model positive, responsible behavior.					
35.	My best friends model responsible behavior. They are a good influence on me.					
36.	I participate in activities on campus.					
37.	It is important for me to consider social expectations while making decisions.					
38.	I seek the opinions of my family when faced with major decisions.					
39.	I seek the opinions of my friends when faced with major decisions.					
40.	The values of my institution are consistent with my own.					
41.	I am working hard to be successful.					
42.	I have good time management skills.					
43.	I turn in all my assignments on time.					
44.	I successfully balance my academic pursuits with my personal life.					



Individualized Academic Plan

To be completed by <u>all</u> scholars in the first semester of SSS program.

Student Name:				
Major:	Anticipated Graduation Date:			
Are you a transfer student? ☐ Yes ☐ No	Do you have your Associate in Arts?			
The purpose of this growing document is to develop a plan for yograduation and beyond, improve your financial knowledge, and a	our success by identifying factors that will strengthen your academics, prepare you for allow you to make the most of your time as a student at UCF.			
What do you aim to accomplish by earning				
your degree? What is your career goal?				
What do you anticipate to be your biggest				
obstacle(s) in reaching your full academic and				
career potential?				
What SSS services do you think will be most				
beneficial in helping you to reach your goals?				
What other skills do you want to learn during				
your time at UCF that will help you after				
graduating (public speaking/communication,				
leadership, etc.)?				
PRIME STEM/SSS Advisor Notes:				
Student Signature Date				
Reviewed by on / /				



Income Verification Instructions

Why do we ask for financial documentation?

According to federal guidelines, TRiO Student Support Services must provide documentation of a student's eligibility for the program to the U.S. Department of Education. Regulations state that two-thirds of participants must meet the federal first-generation *and* low-income guidelines.

What are the Federal TRIO Programs Current-Year Low-Income Levels?

Effective January 11, 2019 until further notice

Size of Family Unit	48 Contiguous States, D.C., and Outlying Jurisdictions	Alaska	Hawaii
1	\$18,735	\$23,400	\$21,570
2	2 \$25,365		\$29,190
3	\$31,995	\$39,990	\$36,810
4	\$38,625	\$48,285	\$44,430
5	\$45,255	\$56,580	\$52,050
6	\$51,885	\$64,875	\$59,670
7	\$58,515	\$73,170	\$67,290
8	\$65,145	\$81,465	\$74,910

For family units with more than eight members, add the following amount for each additional family member: \$6,630 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; \$8,295 for Alaska; and \$7,620 for Hawaii.

The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount.

The figures shown under family income represent amounts equal to 150 percent of the family income levels established by the Census Bureau for determining poverty status. The 2019 poverty guidelines are in effect as of January 11, 2019. Federal Register notice forthcoming. Publication is delayed due to temporary closure of federal offices.



Income Verification Instructions

What kinds of forms are accepted for verification?

There are two options for completing income verification.

<u>Option A</u> is to provide a copy of your 2017 tax return forms (1040, 1040A, or 140EZ) if you are an *INDEPENDENT* student <u>OR</u> to provide a copy of your parent's/legal guardian's 2017 tax return forms if you are a *DEPENDENT* student. Your parent/legal guardian's signature must be on the form.

<u>Option B</u> is to complete the applicable Income Verification Form (either *INDEPENDENT or DEPENDENT*) <u>AND</u> provide a printout of your 2018-2019 FAFSA Student Aid Report (SAR). <u>Your parent/legal guardian's signature must be on the SAR if you are *DEPENDENT* student.</u>

How do I know if I am an independent or dependent student?

If you answer YES to any of the following questions, you are considered an *INDEPENDENT* student. If you answer NO to all of the following questions, you are a *DEPENDENT* student.

Yes	No	Were you born before January 1, 1992?
Yes	No	Are you less than 18 years of age and have no parent or guardian?
Yes	No	Prior to reaching 18 years of age, were you an emancipated minor or did you have a court-appointed legal guardian?
Yes	No	At any time since reaching 13 years of age, were you an orphan, in foster care, or a ward of the court?
Yes	No	Are you married?
Yes	No	Do you have children or other dependents (other than a spouse who received more than half of their support from you)?
Yes	No	Are you serving active duty (for other than training purposes) in the U.S. Armed Forces?
Yes	No	Are you a U.S. Armed Forces veteran who was on active duty and was released under a condition other than dishonorable?
Yes	No	Are you homeless (i.e. you lack a fixed, regular, and adequate nighttime residence) or are at risk of becoming homeless?



2018-2019 Income Verification Form (Dependent Students)

(COMPLETE ONLY IF YOU MEET <u>DEPENDENT</u> STUDENT STATUS)

The following information is utilized in determining your eligibility for this program, and will <u>remain confidential</u>. Failure to accurately answer a question(s) may result in denial of your application.

If you are a **DEPENDENT** student for financial aid purposes, please complete Sections A and B.

Section A: $\underline{\text{Your parent/legal guardian}}$ must answer the following questions $\underline{\text{about themselves}}$.	
1. If your family filed a 2017 tax return, answer the following questions:	
a. What is the total number of people (including you) in your household?	people

b. What was your $\underline{\text{taxable}}$ (not total) income in 2017? $\underline{\$}$ Your taxable income can be found on the federal income tax return:

> On IRS Form 1040 (2017), see line 43 On IRS Form 1040A (2017), see line 27 On IRS Form 1040EZ (2017), see line 6

2.	It your	family $\frac{\text{did not}}{\text{did not}}$ file a 201/ tax return, check all that apply:		
	a.	My family did not file a federal income tax return in 2017.	Yes	No
	b.	My family had no taxable income in 2017.	Yes	No

Section B: Please read the following statement and then sign and date. Your parent or legal guardian must also read the following statement and then sign and date.

By signing this 2018-2019 Income Verification Form, I am verifying that the information that I have provided to TRiO Student Support Services and PRIME STEM is true and correct.

PRINT Student's Name	Student's Social Security Number
Student's Signature	Date
PRINT Parent or Legal Guardian's Name	
Parent or Legal Guardian's Signature	



2018-2019 Income Verification Form (Independent Students)

(COMPLETE ONLY IF YOU MEET INDEPENDENT STUDENT STATUS)

The following information is utilized in determining your eligibility for this program, and will <u>remain</u> <u>confidential</u>. Failure to accurately answer a question(s) may result in denial of your application.

If you are an *INDEPENDENT* student for financial aid purposes, please complete Sections A and B.

Section A: You must answer the following questions about yourself.		
a. What is the total r	rn, answer the following questions: umber of people (including you) in your household? people able (not total) income in 2017? \$ ne can be found on the federal income tax return:	
	On IRS Form 1040 (2017), see line 43 On IRS Form 1040A (2017), see line 27 On IRS Form 1040EZ (2017), see line 6	
a. I did not file a fed b. I had no taxable ir		
Section B: Please read the following statement and then sign and date.		
By signing this 2018-2019 Income Verification Form, I am verifying that the information that I have provided to the TRiO Student Support PRIME STEM is true and correct.		
PRINT Student's Name	Student's Social Security Number	

Student's Signature

Date