



MOREHOUSE COLLEGE

Federal TRiO Programs

830 Westview Drive, S.W., Atlanta, GA 30314-3773
Telephone: (404) 215-2671 Fax: (404) 588-2215

Student Support Services Application & Update 09-10

Student Name: _____ Soc. Sec. #: _____
(Last) (First) (M.I.) M# _____

Sex: Male Date of Birth: _____ Cell # _____

Parent's Telephone #: _____ Email Address: _____

Local Address: _____
(Number & Street) (Apt. #) (City) (State) (Zip)

Permanent Address: _____
(Parent's address) (Number & Street) (Apt. #) (City) (State) (Zip)

Ethnic Background: African American Latino Asian American
Native American/Alaskan Native Caucasian

Marital Status: Single Married Divorced

CURRENT Academic Status (Incoming freshman-omit*)

College Status: Freshman (0-25) Sophomore (26-57) Junior (58-88) Senior 89+
Transfer _____
(Name of School) (# of Credits Transferred)

*Present GPA: _____ Academic Standing _____ Probation 1 or 2 Yes No

Date of Enrollment at Morehouse College: _____ Classification when you entered SSS _____
Predicted graduation date: _____ (Freshman, Sophomore, etc.)

For Office Use Only	Staff Initials:	Date Accepted:
Eligible	LI LI/FG LI/FG/SN	
Ineligible	FG LI/SN SN FG/SN	STUDENT COHORT YR _____
Continuing Participant _____	OR Prior Year _____	New _____

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PLEASE FILL OUT THE APPLICATION IN ITS ENTIRETY

Major: _____ Minor: _____ Hours Completed: _____

Emergency Contact Information: _____ Telephone #: _____

Do you work during the school week? Yes No # of hours _____

What services do you need from the Student Support Services?

Academic Counseling Tutoring Financial Aid Counseling Workshops Personal
Counseling Time Management Study Skills

Do you have a **documented** physical handicap or learning disability? Yes No

If yes, please specify: _____

Have you previously participated in a Federal TRiO Program? Is so, indicate below the program(s) in which you have participated.

Educational Talent Search Ronald E. McNair Achievement Program Upward Bound
Upward Bound Math/Science Veteran's Upward Bound Student Support Services

Are you a U.S. Citizen or Permanent Resident? Yes No

What are your plans after graduating college?

Graduate/Professional School Full-Time Employment Military Service
Public Service (Peace Corps, etc.) Other _____

****Incoming Freshman Only****

High School GPA: _____ SAT SCORE: _____ ACT SCORE: _____
Math Verbal

Are you receiving the Pell Grant? Yes _____ No _____

Family History

Mother's Education: Does your Mother have a 4 year degree? _____

Father's Education: Does your father have a 4 year degree? _____

Mother's Occupation: _____ Employer: _____
Employer's Address: _____ Telephone #: _____

Father's Occupation: _____ Employer: _____
Employer's Address: _____ Telephone #: _____

Financial Information

Please check all programs that you or members of your household receive assistance.

Social Security Veteran's Benefits

Public Assistance

TAN-F

Vocational Rehabilitation _____

(Describe Services)

The following information is utilized in determining your eligibility for this program, and will remain confidential. Failure to accurately answer this question may result in denial of your application.

Adjusted Gross Income: _____

Number of People in Household: _____

Do your parents/guardians claim you as an exemption on their Federal Income Tax Reports?

Yes No

Federal TRIO Programs

2009 Annual Low Income Levels to qualify for SSS - (Effective 1/23/2009 til further notice)

Size of Family Unit	48 Contiguous States, D.C., and Outlying Jurisdictions	Alaska	Hawaii
1	\$16,245	\$20,295	\$18,690
2	\$21,855	\$27,315	\$25,140
3	\$27,465	\$34,335	\$31,590
4	\$33,075	\$41,355	\$38,040
5	\$38,685	\$48,375	\$44,490
6	\$44,295	\$55,395	\$50,940
7	\$49,905	\$62,415	\$57,390
8	\$55,515	\$69,435	\$63,840

For family units with more than eight members, add the following amount for each additional family member: \$5,610 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; \$7,020 for Alaska; and \$6,450 for Hawaii.

**Yearly taxable income is the amount on your tax statements after deductions.*

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I agree that all the information provided is true to the best of my knowledge. I also understand that any false information I have provided may result in the denial of my application and/or my immediate dismissal from the program. **I understand that if I enroll in the Student Support Services Program, I must participate in activities designed to achieve my academic goals and promote my holistic development.**

Signature _____

Date _____

Release of Information

I. Release, I hereby give permission for the release of the following information to the Student Support Services Staff: High School Transcripts, College Grade Reports, SAT/ACT Scores, Financial Aid Award Notices, and, if applicable, documentation regarding status as a Learning Disabled (LD) or Physically Handicapped person, or any other information regarding my status as a Morehouse College Student. I give Student Support Services permission to use photographs of me on websites, brochures or program related publications.

II. Privacy Act, I understand that the information contained herein will be kept in confidence and will not be revealed to anyone except Student Support Services personnel, Morehouse College officials, or representatives of the United States Department of Education and in accordance with the Family Educational Rights and Privacy Act.

Student Signature _____

Date _____

Student Support Services _____

Date _____