



Application Criteria

Dear Prospective Participant,

Please read this application carefully and complete all sections!

It is the sole responsibility of the applicant to ensure **all required paperwork and information** are received by the TRiO staff. The following documents must be turned in for an application to be considered complete:

- _____ TRiO SSS Application
- _____ Income Verification on Student & Parents
(Tax Return 1040, Tax Return Transcript or TRiO Income Verification Worksheet)
- _____ Completed Student Requirements
- _____ Completed Incentive Eligibility Acknowledgement

You may submit a paper application by hand delivery or mail to the locations below or you may submit an electronic application by scanning the QR code below or by visiting [WCJC TRiO Online Application](https://botform.compansol.com/202234699414053) (<https://botform.compansol.com/202234699414053>).

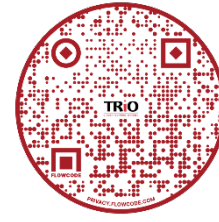
Hand Delivery

STEM Success Center in the
J.M. Hodges Library
Wharton Campus
Mon. – Fri. 8:00 am – 4:00pm

Mail

Wharton County Junior College
Attn: TRiO SSS Program
911 Boling Highway
Wharton, TX 77488

QR Code



Sincerely,

Jessica Falcon, M A

Jessica Falcon, TRiO SSS Program Director



Program Application

The information provided is kept confidential and is required by the U.S. Dept. of Education to determine eligibility.

Name _____

First

Middle Initial

Last

Date of Birth ____/____/____ Social Security # ____-____-____ Student ID # @_____

Local Address _____

Street

City, State

Zip Code

Cell Phone (____) ____-____ 2nd Phone (____) ____-____ E-Mail _____@student.wcjc.edu

Name of Parent/Guardian(s) _____

Permanent Address _____

Street

City, State

Zip Code

Cell Phone (____) ____-____ 2nd Phone (____) ____-____ E-Mail _____

Academic Information

WCJC Entry Date ____/____/____ Expected Date of Graduation ____/____/____

Current Grade Level ____ First year, never attended ____ First year, attended before ____ Second year or more

Enrollment Status ____ ≥12hrs ____ 9hrs ____ 6 hrs ____ < 6 hrs

Major(s) _____ Cumulative GPA ____ / 4.00 or ____ Not Available, 1st semester

Are you a transfer student? ____ Yes ____ No If yes, from where? _____

Transfer entry date ____/____/____ Have you earned a Bachelor's Degree or higher? ____ Yes ____ No

Did you pass all portions of the TSIA2 test? If not, which TSIA2 section(s) did you not pass?

- Yes No Exempt from TSI

- Math Reading Writing

Are/Were you required to enroll in remedial courses? Are you currently on academic probation?

- Yes No

- Yes No

Financial Aid/Income Information

Have you completed the FAFSA? ____ Yes ____ No

Do parents claim you as an exemption on their tax return? ____ Yes ____ No

Do you have children you provide care for ≥ 50% of the time? ____ Yes ____ No

Number of members in the household (including yourself): _____ (please provide a numerical value)

What type of financial aid are you receiving?

- Pell Grant Loan Work Study Other Scholarship None

Disability Verification

Answering this question is voluntary

Have/Will you provide documentation of a disability to the Office of Disability Services?

- Yes No Not Applicable

Demographic Information

Ethnic Identity

- American Indian / Alaskan Native
- Hispanic or Latino
- Asian
- Black / African American
- Native Hawaiian / Pacific Islander
- Caucasian
- I'd Prefer not to Respond / I Don't Know

Place of Birth _____

Are You a U.S. Citizen?

- Yes
 No

If you are an eligible non-citizen, provide the following: A _____

Marital Status

- Single
- Married
- Divorced
- Widowed

Gender

- Male
 Female

Parent'(s)/Guardian'(s) Highest Level of Education

Father's Education

- Less than high school
- GED
- High school Diploma
- Some college
- Associate's Degree/Certification
- 4-Year College Degree
- Graduate degree

Mother's Education

- Less than high school
- GED
- High school Diploma
- Some college
- Associate's Degree/Certification
- 4-Year College Degree
- Graduate degree

Academic and Career Education Plan

Please check which services you would like to receive from TRiO SSS

Advising

- Monitoring academic progress
- One-on-one advising with SSS staff
- Student Support Services Mentor
- Assistance with Financial Aid
- Cultural Educational Trips
- SSS Events

Tutoring

- Reading
 - Math
 - Writing
 - Assistance with other coursework
- Course name(s): _____

How else can we help?

Workshops

Please check the workshops in which you are interested in participating

- | | | |
|---------------------------------------------|-----------------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Taking Good Notes | <input type="checkbox"/> Budgeting for College Life | <input type="checkbox"/> Interview Skills |
| <input type="checkbox"/> Time Management | <input type="checkbox"/> Stress Management | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Study Skills | <input type="checkbox"/> Test Anxiety | |
| <input type="checkbox"/> Computer Skills | <input type="checkbox"/> Financial Aid | |
| <input type="checkbox"/> Financial Literacy | <input type="checkbox"/> Transfer | |

Academic Needs Assessment

Educational Motivation

Please check **true or false** for the following questions

Mark the box next to the statements that apply to you

I know how to take good notes in class. __T__F

I spend two hours studying for every hour of class. __T__F

I study in the library on a regular basis. __T__F

I study at home. __T__F

I must have quiet when I study. __T__F

I read my textbooks. __T__F

I prepare for class ahead of time. __T__F

I read over my notes after class. __T__F

I finish assignments on time. __T__F

I have set a goal to do well in college. __T__F

I accept responsibility for doing well in college. __T__F

It is up to my instructors whether or not I learn. __T__F

Good grades are a matter of luck and timing. __T__F

When a subject is difficult, I study the easy parts. __T__F

I frequently wonder if school is really worthwhile. __T__F

I have trouble reading college-level textbooks

I have trouble taking notes from lectures

I would like to improve my grammar

I am uncomfortable asking questions in class

I learn best by actually doing something

I learn best by listening to explanations

I learn best by watching something being done

I am able to research/organize a term paper

I have difficulty writing papers

I know when it is time to get help in a class

I am uncomfortable asking for tutoring

I usually get someone to help me with my classes

I understand what I read

I would like to increase my vocabulary

I have math anxiety

I have test anxiety

I use a calendar to keep track of coursework

I read my syllabus for each class

I have difficulty concentrating

AGREEMENT

I understand that I will be assigned either an advisor or a peer mentor and will have use of the STEM Center, and may receive advising, tutoring, study skills help, peer support, various support workshops and have access to educational support materials all at no charge once accepted into the TRiO SSS Program. I am aware that I am required to complete an updated form each semester to ensure my file remains current and to determine the nature of the services I need.

I understand that I will meet with a Student Support Services staff member a minimum of two times during each semester, and I will obtain tutoring should my grade(s) fall below a C Average. If I am on academic probation, I agree to have contact with Student Support Services at least two times a month in order to develop a plan to improve my academic standing.

I hereby give permission for Student Support Services staff to disclose and receive information concerning the nature of my Student Support Services eligibility and information concerning my academic progress on an as-needed basis with appropriate faculty and staff at Wharton County Junior College. I also give TRiO SSS staff permission to view and receive any and all financial aid information from the Financial Aid Office.

My signature verifies that I have read and understood this contract, and that the information I have provided on this application is true and accurate to the best of my knowledge.

Student Signature _____ Date ____/____/____

Parent Signature _____ Date ____/____/____



To gain the full benefits of the program, I will make a commitment to my academic goals and the assistance provided. I understand that being in the TRiO Student Support Services program is a privilege and that I am ultimately responsible for my academic progress.

Please initial in the space provided to indicate acceptance. As a TRiO student participant, I agree to and understand the following statements:

- _____ I am eligible for TRiO SSS services and incentives for the completion of **ONE** degree/certificate program.
- _____ Accept and fulfill all of the TRiO SSS Student Requirements.
- _____ Remain in good academic standing with WCJC each semester.
- _____ Meet with my TRiO SSS Advisor a minimum of 3 times per semester to discuss academic needs.
- _____ Participate in a minimum of 1 TRiO SSS sponsored activity each semester.
- _____ Complete my certificate, degree and/or transfer to a 4 year institution within 3 years from acceptance into TRiO SSS.
- _____ Create or update an academic plan (AP) with my TRiO SSS Advisor once a semester or provide my TRiO Advisor with a copy of my AP created or updated by another WCJC Advisor.
- _____ Consult my TRiO Advisor before I make any changes to my AP such as adding, dropping or changing a class.
- _____ Attend classes, workshops, take required tests, or other academic suggestions as recommended by my TRiO SSS Advisor.
- _____ Return all correspondence requested by the TRiO SSS staff in a timely manner.
- _____ Meet with a TRiO tutor on a regular basis (determined by the tutor) **if I am enrolled in Math 0312**. If I choose to be exempt, a waiver form must be on file with the signature of my TRiO SSS Advisor.
- _____ Notify the TRiO SSS Clerk of any phone, address, and email changes as soon as they occur.
- _____ Authorize the TRiO SSS staff to gather information concerning my academic progress and financial aid status **prior** to my participation in the program. I also grant permission to the ADA Office to release information to the TRiO SSS Program if I fall under the disability status. I understand that this information is used to help determine my eligibility for the program and is kept strictly confidential.
- _____ Give instructors my permission to release all academic progress information to TRiO SSS staff when and if requested. If I do not meet the requirements and fulfill my academic goals, I understand that it may result in serious consequences regarding my continuation as a participant in the TRiO SSS Program.
- _____ Strive to avoid conduct detrimental to the integrity of and public confidence in the TRiO SSS Program/WCJC.
- _____ Permission is hereby granted to use my photograph and statements for publicity by Wharton County Junior College in press release materials, publications, advertisements, and the college's website.

I understand and agree to the terms outlined above and I would like the opportunity to participate in WCJC's TRiO SSS Program.

Student Signature _____ Date ____/____/____

Advisor/Coordinator Signature _____ Date ____/____/____

Program Director Signature _____ Date ____/____/____



Incentive Eligibility Acknowledgement

Upon acceptance into the WCJC TRiO Student Support Services Program, I am aware that I will be eligible for incentives/resources that will help me to obtain my educational goals at WCJC as listed below.

Please **initial** in the space provided to indicate acknowledgement of the available FREE incentives/resources.

- _____ Up to 50 pages **per day** of black/white printing, no rollover pages
- _____ Up to 50 pages **per semester** of color OR black/white copies, no rollover pages
- _____ Use of the TRiO SSS Lending Library of textbooks, laptops, webcam, headphones and calculators (limited quantities & courses available)
- _____ Access to educational materials (scantrons, school supplies, etc.)
- _____ TRiO provided Graduation Regalia (cap/tassel, gown, & stole)
- _____ University Campus Tours (transportation & meal provided)
- _____ Cultural Events/Activities/Trips- e.g. museum, aquarium, zoo, cultural festivals, etc. (transportation & meal provided)

To gain the full benefits of the program, I understand that I must make a commitment to be an active program participant. I understand that being in the TRiO Student Support Services program is a privilege and that the incentives/resources are NOT required to be offered to me.

Please **initial** in the space provided to indicate that you understand the requirements for utilizing TRiO SSS incentives/resources.

- _____ Maintain a complete and updated TRiO SSS program file. ***It is the responsibility of the student to ensure their file is complete.**
- _____ Must attend two TRiO SSS-sponsored workshops, one of which must be a financial literacy workshop. (In-person and virtual options)
- _____ Must keep your TRiO SSS Advisor informed of your progress, via telephone, email, or personal contact, at least twice per semester to ensure eligibility for future incentive opportunities. (In-person and virtual options)

My signature below indicates that I understand the requirements for utilizing the FREE incentives/resources offered through the TRiO SSS Program.

Student Signature _____ Date ____ / ____ / ____

The TRiO SSS program reserves the right to alter, add and/or omit permissible services based on funding ability. These rights are reserved in order to maintain compliance with regulations mandated by the U.S. Department of Education.