



# **TRiO Student Support Services Program**

## STUDENT RE-ENTRY APPLICATION FOR PARTICIPATION

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Please print and please answer <u>all</u> sections on this application. Your responses are necessary so that we have the n date contact and advising information for your re-entry into the TRiO Student Support Services Program. Becau personal nature of some of these questions, your responses will be held in the strictest confidence.	
NAME:	
LAST FIRST M.I.	
ADDRESS: Student ID#:	
STREET STREET	_
CITY STATE ZIP	
PHONE: HomeCell         GENDER: MF	
EMAIL: BIRTHDATE:	
Please choose <b>any</b> of the following that best represents your ethnicity and/or race: African-American/Black ( ) Asian ( ) Native Hawaiian/Pacific Islander ( ) Hispanic/Latino (	)
American Indian/Alaskan Native () White/Caucasian () Other (Please specify)	
Is English your first language? YesNo If no, what is your native language?	_
How many years were you totally educated in English?	
Have you applied for financial aid at CU Denver? Yes No         For what term(s)?       Summer ( )       Fall ( )       Spring ( )       Year?	
Have you received your award? Yes No Pending If no, what is the status?	_
What form(s) of financial aid are you receiving and/or have applied for?	
Pell Grant       Work Study       Scholarship       Loan       Other	_
Do you have a documented disability? Yes No If yes, please specify	
Are you currently serving on active duty in the U.S. Armed Forces for purposes other than trainin	g?
Yes No Are you a Veteran of the US Armed Forces? Yes No	
At any time since you turned age 13, were both your parents deceased, were you in foster	
care or were you a dependent or ward of the court? Yes No	
If you were in foster care, when did you leave the foster care program?	
Do you have a fixed, regular and adequate nighttime residence? Yes No	
(For example, you live with parents, your own home or rental property or with family)	
	4/18 TD

If you answered no, you may fit the definition of homeless (read definition), so tell us which scenario best fists your situation so we can research ways to get you into a more secure living arrangement.

"Homeless" means lacking fixed, regular and adequate housing, which includes living in shelters, motels or cars, are abandoned in hospitals, temporarily living with other people because you had nowhere else to go, residing at night in a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, such as parks, abandoned buildings, bus or train station, or are awaiting foster care placement.

#### ACADEMIC ADVISING QUESTIONNAIRE

Intended Major (s)	]	Intended Minor (	(s)
Class Standing: Entering Fresh	ıman Trans	sfer Student	Freshman (0 - 29 hrs.)
Sophomore (30 - 59 hrs.)	Junior (60 - 89 hrs.)	_ Senior (90+ hrs.	)
Will you be living on campu	s? Yes No		
Do you plan to work while a	ttending school? Yes	No If yes, l	how many hours per week?
What services are you intere-	ested in receiving at CU	Denver TRiO S	SS? (Check all that apply)
Peer Mentoring	Academic Advising	C	ultural Events/Activities
Career Advising	Study Skills Semina	rsF	inancial Aid/Scholarship Planning
Tutoring	Personal counseling	Co	ollege Survival Seminars
Are there other areas of sup	port that you may be int	terested in while	e at CU Denver? (Please list)
Please answer the following q Why did you choose to leave		<i>25</i> .	
Why are you coming back to	o CU Denver and what i	s different abou	It your situation now?
Why are you interested in co	oming back into the CU	Denver TRiO-S	SSS Program?

Is there anything else you can share with us that may help us help you in meeting your educational goals?

#### **ACKNOWLEDGEMENTS**

Please read each statement below and <u>check mark</u> that you understand and agree.

	academically as a TRiO S	tion for the CU Denver The control of the purpose SSS participant and a CU all guidelines outlined unc	of verifying my eligib Denver student. I und	ility and supporting n erstand that the TRiO	ne SSS
	midterm and semester gra	tion for the CU Denver TI ades electronically for the er. I understand that I will	purpose of supporting	me and my academic	
	YES, I WANT TO RE-E PROGRAM.	NTER THE CU Denver 7	RIO STUDENT SUP	PORT SERVICES	
□ I certify	y that all the information	provided on this form is a	true and complete.		
STUDEN	NT SIGNATURE		DATE		
*Your ap	oplication must be filled	out completely and signe	ed and dated before it	will be processed.	
				-	
□Student is	s <i>enrolled</i> at institution: Yes	FOR STAFF USE		-	
	s enrolled at institution: Yes	FOR STAFF USE	ONLY	Senior	
		FOR STAFF USENoSophomore	ONLY Junior		
□Classificat	tion:Freshman	FOR STAFF USENoSophomore	ONLY Junior # of credits	# of Credits	
□Classificat Term Re-E	tion:Freshman # of credits	FOR STAFF USENoSophomore# of credits Cohort Year:	ONLY Junior # of credits Grant Year:	# of Credits	
□Classificat <b>Term</b> <i>Re-E</i> The signing	tion:Freshman # of credits Entered Program:	FOR STAFF USENoSophomore# of credits Cohort Year: udent is a stop-out participant o	ONLYJunior # of credits Grant Year: f the TRiO SSS program ar	# of Credits	
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