

STEP 7: Your Financial Information

What is the total number of persons (including you) in your family?

What is your family's **taxable** (not total) **income** from the last calendar year? (Adjusted Gross Income)

- | | |
|--|--|
| <input type="checkbox"/> Had no income | <input type="checkbox"/> \$37,651 - \$44,130 |
| <input type="checkbox"/> \$18,210 or less | <input type="checkbox"/> \$44,131- \$50,610 |
| <input type="checkbox"/> \$18,211 - \$24,690 | <input type="checkbox"/> \$50,611 - \$57,090 |
| <input type="checkbox"/> \$24,691 - \$31,170 | <input type="checkbox"/> \$58,091 - \$63,570 |
| <input type="checkbox"/> \$31,171 - \$37,650 | <input type="checkbox"/> \$63,571 - or more |

What is your current labor status?

- Employed Full-Time
 Employed Part-Time
 Unemployed
 Receiving Public Assistance
 Self-Employed

STEP 8: Your Educational Background and Goals

High School (Check ONE)	College (Check ONE)	DESIRED MAJOR or CAREER GOAL
<input type="checkbox"/> Graduated from High School. <input type="checkbox"/> Earned my GED Diploma. <input type="checkbox"/> Did NOT complete High School –Highest grade completed _____ <input type="checkbox"/> Currently in a GED/High School Diploma Completion Program.	<input type="checkbox"/> Never attended college. <input type="checkbox"/> Attended college – did NOT complete. Where? _____ <input type="checkbox"/> Currently enrolled in college. Where? _____	Major or Goal _____ Desire a STEM Career? (Check one): <input type="checkbox"/> Science <input type="checkbox"/> Technology <input type="checkbox"/> Engineering <input type="checkbox"/> Math <input type="checkbox"/> Undecided

STEP 9: Read Below Sign and Date

YES, I want to participate in the TRIO/Educational Opportunity Centers Program.

By signing this application, I attest that all the information on this application is true. Moreover, I authorize the release of the student official academic records to the TRIO /Educational Opportunity Centers Program at Wichita State University, Wichita, Kansas, understanding that the information in these records will be used only to assess the student's need for TRIO program services, discern the student's educational progress, evaluate the effectiveness of TRIO program activities, and fulfill TRIO program reporting requirements.

Applicant's Signature/Electronic Signature

_____/_____/20____
Date

MEDIA AUTHORIZATION: I, the under signed, authorize the TRIO/Educational Opportunity Centers Program at Wichita State University to use photographs and/or videotape with my image in Educational Opportunity Center publications, promotional media, social media, websites and/or news releases.

Applicant's Signature/Electronic Signature

Accept

Decline

_____/_____/20____
Date

FOR OFFICE USE ONLY

DETERMINATION OF PROGRAM ELIGIBILITY

- Approved: Federal Eligibility Criteria met.
 Not Approved: Ineligible for services:
 Indicate reason: _____

EOC Staff _____
(Print Name)

EOC Staff _____ / ____/20____
(Signature)

ADMINISTRATIVE REVIEW OF PROGRAM ELIGIBILITY

Based on a review of this application and supporting documents, the status of this applicant stands as was determined by EOC program staff.

Executive Director _____ / ____/20____
(Signature)

Date of Application Entry Into Database ____/____/20____ Initials of Data Entry Staff _____

Eligibility: LI&FG LI Only FG Only Other

HSD GED COLLEGE

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