

PERSONAL INFORMATION



REQUEST FOR SERVICES APPLICATION

Full Name:	Gender Pronouns:	OCC Student ID: B	
Email:	Phone:	Is this cell phone? Yes No	
	Can we te	xt you at this number? 🗆 Yes 🗆 No	
Preferred Campus: Des Plaines	🗆 Skokie 🛛 Neither		
DEMOGRAPHIC INFORMATION (*Th	is information is required by the U.S. Department of Edu	ucation. Please DO NOT leave it blank.)	
Date of Birth: / / /	Gender:	Female	
Ethnicity:	Race:	Resident Status:	
Are you Hispanic or Latino/a/x?	Please select all applicable options.	U.S. Citizen	
☐ Yes	American Indian/Alaskan Native	Permanent Resident	
□ No	Asian	Other:	
	□ Black or African American		
	□ White		
	Native Hawaiian or Other Pacific Islander		

ELIGIBILTY INFORMATION (*This information is required by the U.S. Department of Education. Please DO NOT leave it blank.)

Are you a First-Generation College	Are you eligible for	What is your Financial Aid (FAFSA)
Student?	accommodations?	status?
 Yes, neither of my parents/legal guardians have earned a bachelor's degree. No, at least one of my parent/guardian has earned a bachelor's degree. 	 Yes, I have disability. No, I do not have disability. NOTE: If you are not sure if you quality to receive accommodations, please can contact Oakton's <u>Access</u> <u>Disability Resource Center</u> to verify your eligibility. 	 I completed my FAFSA. I have been awarded Federal Pell Grant. I have not completed FAFSA and/or I have questions on next steps for financial assistance.

ADDITIONAL INFORMATION (Help us get to know you better, please fill out the sections below.)

I have interest in exploring/pursuing following field(s): (select all the options that are applicable to you)

- STEM: Science, Technology, Engineering, Mathematics
- □ Pre-professional: Law, Medicine, Pharmacy

- □ Humanities
- Social Sciences

- □ Education
- □ Other: _____

- Fine Arts
- □ Undecided/Exploring

PLEASE CONTINUE TO THE NEXT PAGE





My educational goal is to: (select all the options that are applicable to you)

- □ Earn an Associate's degree □ Earn a certificate
- □ Transfer to a college or university □ Earn a Bachelor's degree

I want TRIO SSS program to help me with: (select all the options that are applicable to you)

- □ Choosing classes
- □ Tutoring:
 - 🗌 Math
- □ Writing □ Other subject(s): _____
- □ Academic skills: e.g. time management, test-taking, reading comprehension strategies, etc.
- $\hfill\square$ Transfer assistance to earn a bachelor's degree and/or higher
- $\hfill\square$ Job search skills: e.g. resume writing; interviewing
- □ Deciding on a college major and degrees
- □ Financial aid (FAFSA) and scholarship information
- □ Personal finance: budgeting, credit, debt management

□ Science

- □ Involvement in college organizations and/or clubs
- □ Personal support or counseling
- Other: ____

What are your best times & days to meet for a follow-up appointment with TRIO Advising Staff?

Student Clearance and Approval: I certify that the information provided on this application is true and correct to the best of my knowledge. By signing this form, I understand that TRIO SSS at Oakton Community College will review information from my application and academic records; and may consult with college resources for educational purposes only. TRIO may share and/or obtain information from registration, advising services, financial aid office, instructors and other appropriate personnel at Oakton to assist me in reaching my educational goals and maintaining overall wellness. I authorize TRIO SSS to verify the information I have given to qualify for the program and to gather other data required to extend program services. I recognize that this program is funded by the U.S. Department of Education.

Student Signature: _____

Date:		

CONTACT INFORMATION

LOCATIONS Des Plaines: Enrollment Center 2901, 2nd floor Skokie: Learning Center, A135

> Visit our webpage at: https://www.oakton.edu/trio

<u>CONTACT</u> Phone: 847-635-1265 Email: trio@oakton.edu

TRIO Student Services at Oakton Community College – Updated May 14, 2020