

TRiO/Student Support Services (SSS) Application



The TRiO Student Support Services Program at Seward County Community College is an academic assistance program funded by the U.S. Department of Education. All students selected for the program must be U.S. Citizens or permanent residents that demonstrate an academic need AND are one of the following: first-generation, low-income, and/or students with a disability. These students will be offered academic development opportunities, assistance with meeting basic college requirements, and support to motivate them towards the successful completion of their postsecondary education. It is expected that program participants meet with their TRiO/SSS advisor and engage in a program activity at least 2 times a semester. Fields with an * are required fields. Incomplete applications will not be accepted. All information will be kept confidential in accordance with the Federal Educational Rights and Privacy Act (FERPA).

*Name (First, Middle Initial, Last):			*	800#:	
Mailing Address:			*Date of	f Birth:	
City			 G	ender:	
State, Zip			Home I	Phone:	
*SCCC Email:			*Cell I	Phone:	
Personal Email:			*Can we tex	t you? Yes	☐ No
*Which is the best way to reach you:	Phone Call Text	Message	Mail	SCCC Email	Personal Email
*Ethnicity:	Hispanic – Cuban, Mexican,	Puerto-Rican, o	r from South or Centr	al America	
*Race	American Indian or Alaska N	ative	Asian	☐ Black or	African American
(Please check all that apply):	☐ Hawaiian Native/Pacific Islar	nder	White		
*Are you a U.S. Citizen?	Yes No Permanent Re	esident Please p	rovide your A#:		
*High School Graduate Yes No GED Graduation Year or Last Grade Completed:					
Name of High School or GE	D Center:	City:		State, Zip:	
Have you attended a colleg	ge other than SCCC/ATS?	Yes No	If yes, where?		
*What is your career/degre	ee goal at SCCC/ATS?				Undecided
*Do you plan to transfer to	a four-year institution?	☐ Yes ☐ No	If yes, where?		
Are you homeless?		☐ Yes ☐ No	Are you in foster car	e?	☐ Yes ☐ No
Are you a U.S. Veteran?		☐ Yes ☐ No	Currently enlisted?		☐ Yes ☐ No
*Do you live with your pare	ent(s)?	☐ Yes ☐ No			
Do you live in a single pare	nt household?	Yes No	If yes, which parent?		
*Do you live with a guardia	an?	Yes No	Did you live with a g	uardian before the	age of 18? Yes No
*Does your mother have a	4-year college degree?	Yes No	*Does your father ha	ave a 4-year college	e degree? Yes No
Are you married?		Yes No	Do you have children	ո?	Yes No
*Do you have a documented disability?		Yes No	What disability?		
*If receiving assistance or accommodation, is it documented with SCCC/ATS Disability Services Coordinator?					
*What TRiO/SSS services a	re you interested in? (Please check all	that apply)			
Academic Advising	Career Advising		Cultural Events	Fina	ancial Aid Assistance
Financial Managemen	ent Job Seeking/Resume/ Interview		Laptop/Calculator L	oan My	CampusPortal Assistance
Personal Counseling	Study Skills		Transfer Assistance	Test	Taking
Time Management	Writing Skills		Other	Tut	oring
Please list subjects you n	eed help with:				

^{**}This form contains confidential information. Access to this form by anyone other than the intended is unauthorized. If you are not the intended recipient (or responsible for delivery of the form to such person) you may not use, copy, distribute or deliver to anyone this form or any parts of its content. If you have received this form in error, please notify TRiO immediately and delete this application from any device. Our program cannot accept responsibility for any loss or damage arising from the misuse of this e-mail or attachment.



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Income Verification Form

INDEPENDENT STUDENT	DEPENDENT STUDENT			
You are considered an INDEPENDENT STUDENT if: • You are married and/or • You have children and/or • You are 24 years or order and/or • You have served in the Military	Even if you don't live with your parents and/or you file your own taxes, you are considered a DEPENDANT STUDENT, if you don't meet the criteria to be an independent student.			
Independent Students use your own 2020 Tax Information and sign this form.	If you are a Dependent Student, you will need to reference your PARENT(S) 2020 Tax Information and have your PARENT(S) sign this form.			

*Name on Taxes (Student's name if Independent OR Parent's name for Dependent Students): *First Name: *Last Name: *Number of people living in the household: *If you don't live with your parents, but you are a Dependent Student and are using your parent's tax information yourself as a member of the household. *2021 TAXABLE INCOME: (NOT Adjusted Gross Income AGI.) TAXABLE INCOME can be found on the copies of 2021 tax return, FORM 1040 – Line 10. An example copy of a tax return is provided below. orm 1040 (2018) orm 1040 (2018) 1 Wages, salaries, tips, etc. Attach Form(s) W-2 2a Tax-exempt interest 2a b Taxable interest 2b Attach Form(s) W-2-3 and 1099-Rif tax was withheld. 4a b Taxable amount 4b 1, 7 5a Social security benefits 5a b Taxable amount 4b 1, 7 Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22 6 6 4, 9 Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22 6 6 64, 9 Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22 6 6 64, 9 Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 26 64, 9 Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22 6 6 64, 9 Total income. Subtract Schedule 1, line 36, from line 6 7 64, 9 Standard Deduction for 8 Standard deduction or itemized deductions (from Schedule A) 8 24, 0	If you are a Dependent Student, you will need to reference your PARENT(S) 2020 Tax Information and have your PARENT(S) sign this form.		
*Number of people living in the household: *If you don't live with your parents, but you are a Dependent Student and are using your parent's tax information yourself as a member of the household. *2021 TAXABLE INCOME:			
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W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld. 4a IRAs, pensions, and annuities. 5a Social security benefits	_		
withheld. 5a Social security benefits 5a b Taxable amount 5b 6 Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22			
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7 Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; Standard otherwise, subtract Schedule 1, line 36, from line 6 Deduction for- Single or married Quainted pusiness income deduction (see instructions)			
Standard otherwise, subtract Schedule 1, line 36, from line 6 7 64, 9 Deduction for- Single or married qualified pusiness income deduction (see instructions)	50		
Deduction for— 8 Standard deduction or itemized deductions (from Schedule A) Single or married Qualified pusiness income deduction (see instructions)	- 0		
Single or married			
Qualified business income deduction (see instructions)	10		
filing separately, 10 Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0	50		
• Married filing 1 a lax (see instr.) 4,536(check if any from: 1 Form(s) 8814 2 Form 4972 3	~		
jointly or Qualifyin (see instr.)	26		
My signature below verifies that all the information provided on this application is true and accurate to	ha hast		

My signature below verifies that all the information provided on this application is true and accurate to the best of my knowledge. I also give authorization for TRiO/SSS to obtain and review any academic and financial documents needed to complete the application process.

*Student or Parent(s) Signature:	Date:

Please complete, print and mail to or drop off at TRiO Office.

You may also Fax with a Confidential Cover Page to 620-417-1079. Attention: TRiO Dept. If you have any questions, contact: Libby Garcia at 620-417-1606 or libby.garcia@sccc.edu