Bay College TRIO-SSS Participant Application

Contact Information Bay ID: First Name: Last Name: **Preferred Pronouns** ☐ She/Her ☐ He/Him ☐ They/Them □ Other_____ Preferred Cell Phone Number: May we text you at your preferred phone number? □ Yes □ No **Academic Interests:** Current Major: Career Interests: Do you plan on transferring from Bay? Yes □ No ☐ Unsure If yes, what school/s are you interested in transferring to? Have either of your parents/guardians received a Bachelor's degree? □ Yes □ No

Main Reason for Applying for TRIO-SSS:

Support Services of Interest

Tutoring					
		Math			
		English/Gen Ed			
		Science/Business/Occupational Courses			
Study Skil	Study Skills Coaching				
-		Test-Taking			
		Time Management			
		Note-taking			
		Stress Management			
		Goal-Setting			
		Concentration			
		Memory Strategies			
		Reading Strategies			
Academic Planning and Assistance					
		Choosing the right courses			
		Unsure of goals/major			
		Developing both short-term and long-term academic plans			
		Connecting with instructors/support staff			
Financial and Economic Opportunities					
		Grant Aid (monetary grant for specifically TRIO students; does not need to be repaid)			
		Personal Budgeting			
		Understanding Credit			
		Assistance in Applying for and Understanding Financial Aid			
		Scholarship Information and Assistance (searching and applying)			
		On-campus Employment			
Transfer					
		Choosing the right courses			
		Free visits to 4-year schools			
		Choosing and applying to a 4-year major/school			
		Connecting with a 4-year advisor/support staff			
		Applying for transfer scholarships, etc.			
Cultural Activities/Trips					
	П	Free trips to Metropolitan areas (Chicago, Milwaukee, etc.)			
	П	Local and regional Cultural Opportunities (e.g. museums, theater, etc.)			
		College visits			

Career Explor	ration
	Personal Career Assessments and Exploration Activities (to help you find a career you're confident about)
	Job Shadowing
	Internships
	Networking (with community change-makers and people in your chosen academic field)
Workforce As	ssistance
	Job Search Assistance
	Resume and Application Assistance
	Job Interview Skills/Practice
	Portfolio Creation
Leadership/Ir	nvolvement
	Peer Mentoring
	Peer Tutoring
	TRIO Club
	Volunteer experience
	Social Activities
Social/Emotion	onal
	Having a trusted mentor
	Becoming comfortable with change
	Confidence when connecting with peers
	Confidence when connecting with authority figures
Personal Sup	port
	Housing
	Food Insecurity
	Family/Medical Issues
	Personal Counseling
	Transportation
	Childcare

Other

Please list any other ways you feel TRIO could assist and/or support you in reaching your goals:

Participant Agreement, Release of Information, & Affidavit of Truth Statement

I understand that applying to Bay College TRIO Student Support Services (SSS) does not guarantee acceptance into the program. I may be fully accepted, provisionally accepted, or denied based on the need for services, academic record, academic preparedness and progress, credit hours, financial aid status, and level of engagement.

Students on Financial Aid Warning, Approved Appeal, or on Academic Probation may be provisionally accepted until they are meeting Satisfactory Academic Progress.

I understand that if I do not meet the expectations and academic goals, I may be ineligible for the Bay College TRIO-SSS program.

I am committed to my education, academic goals, and completion of my certificate and/or degree. I need to be fully engaged and strive for classroom attendance and participation. I will meet the program expectations within my four years of eligibility, including meeting with a staff member at least $\underline{1}$ time per semester.

	I hereby authorize the Bay College TRIO SSS program staff to gather information about my academic progress (instructor and staff communications, placement test scores, GPA, earned credits, transcripts, tutoring sessions, etc.) and financial aid status prior to acceptance and during the program including, but not limited to, transfer to a four-year institution.
	To the best of my knowledge, the information provided in this form, and any other supporting documentation, is true. I understand that this authorization is valid for the duration of my enrollment as well as five (5) years after I cease to be enrolled as a student.
Na	me:
Da	te:
Sig	nature:

^{*}Upon completion of this form, the Bay College TRIO-SS Program will contact you within 1 business day to set up an appointment with a staff member.