



**FORT PECK COMMUNITY COLLEGE—
STUDENT SUPPORT SERVICES**

TRIO PARTICIPATION FORM—APPLY TODAY!! (FILL OUT FORM)

**Application to receive services—tutoring, campus visits, course selection,
4-year college campus visits, financial assistance and much more!**

NAME: _____
Last First Middle Initial

Mailing Address _____

City

State

Zip Code

Primary phone number () _____ Other number () _____

Email _____

Please check one of the following:

1. U.S. Citizen() Permanent Resident() Other() _____

2. Birthdate Month ____/ Day ____/ Year _____

3. Gender ____ male ____ female ____ Other or (Choose to not identify (no response, unknown)
Pronoun _____

4. Please Identify your ethnicity & race. Are you Hispanic/Latino? ____Yes ____No
(check one below)

____American Indian/Alaskan Native ____Asian ____Black or African American ____White/Caucasian
____Native Hawaiian or Other Pacific Islander

5. Are you a member of a Native American Tribe? ____ Yes ____No

** If yes, what tribe? _____

6. Does either one of your parents have a Bachelor's (4 year college degree) ____ Yes ____ No
If yes, was this parent your primary caregiver until the age of 18? ____ Yes ____ No

7. Have you applied for Financial Aid (Pell Grant) ____ Yes ____ No

(FORM Revised 1/24) AS

8. If you've attended FPCC before? What year did you enroll? _____

What is your **Career GPA?** _____ **Attempted Credits** _____

Earned Credits _____

(Credit limit can affect your eligibility for a Pell Grant—Financial Aid)

PLEASE SELECT YOUR INCOME AND HOUSEHOLD SIZE FROM THE GUIDELINE BELOW:

9. Please check your family size

Check household Income Level

____ 1	____ \$22.590 or below per year
____ 2	____ \$30.660
____ 3	____ \$38.730
____ 4	____ \$46.800
____ 5	____ \$54.870
____ 6	____ \$62.940
____ 7	____ \$71.010
____ 8	____ \$79.080

(Income guidelines effective January 13. 2021 until further notice)

10. Do you have a Disability? ____Yes ____No If yes. ** Would like assistance with accommodations? ____Yes ____No

11. Are you in foster care or are aging out of the foster care system? ____Yes ____No

12. Have you taken the College Placement Test (Accuplacer)? ____Yes ____No

** (place of copy of the Accuplacer test in their file & give a copy to student)

13. Did you graduate from High School? ____Yes ____No If so, what year? _____

14. ____GED (year _____) ____ HISET (year _____)

15. What services are you interested in receiving at FPCC? *(Check all that apply)*

____Personal budgeting ____Cultural Events/Activities ____Campus Visits ____ Housing
 ____Career Exploration ____Study Skills ____Student Loans ____ Food
 ____Tutoring ____How to Build Your Credit ____Emergency Assistance
 ____4 year College Transfer Assistance /Application Process ____Scholarship Applications
 ____Basic Computer Skills; Microsoft, JICS Account, Student Email, Internet Search Engines
 ____Other (Specify)_____

16. Check which degree/or plan of study your are pursuing.

____ Associates Degree _____

____ Certificate _____

17. Why did you choose to attend FPCC—Fort Peck Community College?

18. Do you plan to transfer to a four-year college? If so, what college are you interested in attending_____

ACKNOWLEDGEMENTS

Please ***read*** each statement below and ***initial*** that you understand and agree.

_____ I give permission to the FPCC TRiO– Student Support Services staff to access my student records for the purposes; verify eligibility to become a TRIO PARTICIPANT, assist with course selection, determine attempted credits, earned credits, career gpa, and term gpa, student grant aid eligibility, financial aid application assistance, scholarship application assistance, and other records to assist with the student’s educational path at FPCC.

*** The TRiO-SSS staff adheres to all guidelines outlined under the FERPA (Federal Education Rights and Privacy Act), and follows all policies and procedures outlined in the Student Handbook, and Employee Policy Handbook.

I understand that all of the information provided on this form is true and complete to the best of MY knowledge.

STUDENT SIGNATURE

DATE: ____/____/____

****Your application must be filled out completely and signed and dated before it will be processed.***

FOR STAFF USE ONLY

Eligibility (15) Check student's eligibility. (Student is ___ NE=not eligible)

___1=Low-Income & First-Generation ___2=Low-Income only ___3=First-Generation only

___4=Disabled ___5=Disabled & Low-Income ___0=No Response

Participant's (16) Academic Need is Based on: (check one)

___1=Low high school grades ___2=Low admission test scores ___5=*Predictive Indicator*

___6=Academic proficient test ___7=Low college grades ___8=High School Equivalency (GED/Hiset)

___9=Failing grades ___10=out of the academic pipeline for 5 or more years ___11=other

___12=Limited English proficiency ___13=Lack of educational and/or career goals

___14=Lack of academic preparedness for college level course work

___15=Need for academic support to raise grade (s)

In required course (s)/academic major ___0= No Response

**** Predictive Indicator (5)** is a composite variable for estimating the potential success of a student in college using a variety of factors that may include indicators such as high school GPA, SAT, or ACT test scores, high school preparedness, etc.

**** Academic proficient tests (6)** include tests used for clinical purposes such as to determine learning disabilities as well as placement tests and study skills inventories.

First Enrollment Date **(17)** ___/___/___ (at FPCC)

Date of First Project Service **(18)** ___/___/___ (entry into SSS/Trio)

College Grade Level (entry into project) **(19)**

___1= 1st yr., never attended ___2=1st yr., attended before

___3=2nd yr./sophomore **(0-30 freshman, 30-60 sophomore, 60 or more=sophomore)**

Enrollment Status **(20)** Is the academic year first served as an approved participant.

___1=Full-time (at least 24 total credit hours in an academic year)

___2=3/4 time (at least 18 credit hours in an academic year)

___3=1/2 time (at least 12 credit hour in an academic year)

___4=less than 1/2 time (fewer than 12 credit hours)

COHORT YEAR **(21)** _____ 2017-2018 (19)

_____ **2018-2019 (20)**

(22) Participant Status (during the Academic Year) **(26)** Grade level at beginning of AY

(23) Enrollment Status (at the **end** of the Academic Year **(27)** Grade level at the end of AY

(24) Academic Standing (2.0 Career GPA or better) **(28)** Date of last project service, graduated/
or transferred