

Revised 2/17



Student Support Services P.O. Box 5053 Greeneville, TN 37743 rbarnett@tusculum.edu

423-798-1635 800-729-0256 Ext. 5635

Fax: 423-787-8494

Student Support Services (SSS) is funded by the U.S. Department of Education for \$281,511annually. Certain personal information is required. However, the information provided will be held in strictest confidence.

GENERAL INFORMATION	Today's Date
Name	
(Last/First/Middle)	
Social Security Number	Date of Birth
Home Phone #	Email Address
Cell Phone #	Student ID
Address	
When did/will you first begin coursework at Tus	sculum? Month Year
What is your classification:Freshman	SophomoreJuniorSenior
The applicant will be:an on-campus	s residenta commuter
Citizenship: (Check one) U.S. Citizen Territory Resident Permanent Visa Other (specify) EDUCATIONAL BACKGROUND Previous participation in other Federal TRIO pro Talent Search (not Duke Talent Identificati Upward Bound Educational Opportunity Centers (EOC) Other (specify) Previous college(s) attended	on Program)
, , , , , , , , , , , , , , , , , , ,	(Name/City/State)
FINANCIAL AID INFORMATION Have you applied for financial aid?Yes If yes, will you receive aid for the upcoming sch	No
DISABILITY INFORMATION Do you have a disability of any kind?Yes	
If yes, have you filed your disability with the Academic Resource Center (ARC)?	_YesNo
Please list or describe your disability	





FLIGIBILITY INFORMATION

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Have you lived with your parents in the last year?YesNo With whom do you live?MotherFatherGuardianSpouseOther Does your mother/guardian have a 4-year college degree?YesNo
In order to be considered for admission into Student Support Services, applicants must submit a copy of their parent's/guardian's most recent tax return (form 1040 or equivalent). The federal government requires applicants to provide documentation of their family's taxable income and number of persons within the family household. This information is usually located within the first two pages of most tax forms. The taxable income amount appears on line 43 of FORM 1040, Line 27 of FORM 1040A, and line 6 of FORM 1040EZ. Income documentation should be mailed or faxed to the address listed at the top of the application.
Please check all areas in which you desire assistance, instruction, or information. Academic Advising
Special Opportunity for First-Time Freshman Only Based on the accompanying information regarding the Student Support Services Living-Learning Community, please indicate your interest below. This opportunity is only available until all spots are filled.
YES, I am interested in participating in the Student Support Services Living-Learning Community, please provide further information.
NO, I am ONLY interested in becoming part of Student Support Services. I understand that I must participate in program services and/or activities. Prolonged

I understand that I must participate in program services and/or activities. Prolonged inactivity (for longer than two semesters) may result in forfeiture of participation in the program.

In addition, this is to certify that I agree to waive my rights under the Family Privacy Act (Buckley Amendment), and agree to permit the Student Support Services Program staff to access my grades, academic history, and financial aid award information. I understand that this information will remain confidential and only utilized in determining eligibility and necessary services.

I also give my permission for Tusculum College SSS to use my image/likeness in or on SSS related publications and/or public relations materials. Such items may include: newsletter, website, video, handbook, brochures and social media.

Signature Date