



**Application**  
**TRiO-Student Support Services**  
 Haskell Indian Nations University  
 155 Indian Ave-Lawrence, KS 66046  
 Phone: (785)749-8463 Email: kgillis@haskell.edu



*All information provided will remain confidential and will be used only for a.) eligibility determination, b.) student demographic record keeping, c.) needs assessment, d.) federal reporting, e.) other administrative purposes*

Date: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Student Status: \_\_\_ New Freshmen \_\_\_ Re-Ad \_\_\_ Transfer \_\_\_ Continuing

**Personal Information:**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_  
(maiden)

Gender: \_\_\_ SS# \_\_\_\_\_ Tribal Affiliation: \_\_\_\_\_ U.S. Citizen: **Yes** or **No**

Permanent Address: \_\_\_\_\_ Haskell Box # \_\_\_\_\_

Phone Number: \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip) \_\_\_\_\_  
 Email Address: \_\_\_\_\_

On-Campus (Dorm & Rm #) \_\_\_\_\_ Off-Campus \_\_\_\_\_ Please Circle: **Single** or **Married**

Have you participated in other TRiO programs? (Talent Search, Upward Bound, McNair Scholars): **Y** or **N**

If so, which one and when? \_\_\_\_\_

**Education:**

**Degrees & Diplomas Held:**

GED  HS Diploma-Yr. \_\_\_\_\_  Associate's Degree  BA, BFA, BS, BGS  
 Master's or Doctorate  Other: \_\_\_\_\_

**Haskell Classification:**

Freshman  Sophomore  Junior  Senior GPA: \_\_\_\_\_

Major: \_\_\_\_\_ Have you applied for acceptance into this program? **Y** or **N**

**Eligibility:**

**Income Status:**

1.) Are you currently receiving financial aid through the Haskell Financial Aid Office (ie, PELL, etc) **Y** or **N**

\*\*If no, why? \_\_\_ Financial Reasons \_\_\_ Academic Reasons \_\_\_ did not apply for FAFSA

Family Income \$ \_\_\_\_\_ Family Size \_\_\_\_\_

**First Generation College Status:**

2.) Has your mother completed a bachelor's degree or beyond? **Y** or **N** or **Unknown**

3.) Has your father completed a bachelor's degree or beyond? **Y** or **N** or **Unknown**

4.) Has your guardian completed a bachelor's degree or beyond? **Y** or **N** or **Unknown**

5.) Were you living with your mother prior to your 18<sup>th</sup> birthday? **Y** or **N**

6.) Were you living with your father prior to your 18<sup>th</sup> birthday? **Y** or **N**

7.) Were you living with your guardian prior to your 18<sup>th</sup> birthday? **Y** or **N**

**Verification of Accuracy:** To the best of my knowledge, the above is true.

Initials: \_\_\_\_\_

**Statement of Agreement & Consent:** I authorize Haskell Student Support Services to gather my ACT scores, financial aid reports, transcripts, and other necessary information in order to provide me with the services that I have requested. I understand that the collected data, plus the information I provide on this form will be used to make reports to the US Department of Education for the re-funding of this program. I also authorize SSS to obtain periodic reports from my instructors regarding my academic progress for courses in which I am enrolled. I understand that all information will be kept confidential and will be used for the purposes specified.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SSS Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only: (please check)** \_\_\_ LI \_\_\_ FG \_\_\_ LI/FG \_\_\_ Eligibility Not Met \_\_\_ SSS Initials