

Student Support Services

PO Box 6035 Flagstaff, AZ 86011 student.support.services@nau.edu 928-523-6980 nau.edu/sss

Program Application for 2021-22 Student Support Services

As a federally funded TRIO program, Student Support Services is required to provide documentation of a student's eligibility for the program to the U.S. Department of Education and implement the TRIO regulations that state two-thirds of the students served must meet federal low-income guidelines. The U.S. Department of Education provides more information about TRIO and eligibility requirements online at www.ed.gov/ope/trio.

Stud	dent	Information			
Last N	ame		First Name	NAU Student ID Number	
@nau.edu NAU email address			Preferred Phone Nu	mber	
Prog	gram	Eligibility			
□ Yes	□ No	Are you a U.S. citizen, U.S. national, or U.S. permanent resident?			
□ Yes	□ No	Has either of your parents (natural or adoptive)/legal guardians received a bachelor's degree (4-year college degree)?			
□ Yes	□ No	Do you have a disability (physical or mental impairment that substantially limits one or more major life activities)?			
□ Yes	Yes \square No Were you in foster care at any time since you turned age 13?				
Income Verification All applicants must complete this section, whether or not you believe you qualify as low-income.					
Verification requirements for TRiO vary depending on whether students are independent or dependent . A list of federal criteria for independent student status is available at www.fafsa.ed.gov .					
Information for the most recent tax year, 2020. ☐ I was an independent student (typically age 24 or older, married or emancipated; parental income is not reported on the FAFSA): complete and sign Part A.				☐ I was a dependent student (younger than 24, unmarried or not emancipated; parental income is reported on the FAFSA): parent/guardians must complete and sign Part B .	
Part A - Student Independent Student Total Number of Exemptions*: or number of people in household				Part B - Parent/Guardian Dependent Students Only Total Number of Exemptions*: or number of people in household	
Taxable or total Income ^: \$				Taxable or total Income ^: \$	
Student Name (Print Please)				Parent/Guardian Name (Print Please)	
Student Signature				Parent/Guardian Signature	
Date				Date	

^{*}Exemptions: Forms 1040 or 1040A, line 6D. If taxes were not filed, report number of people in household. ^Taxable Income: Form 1040 line 43, or Form 1040 A line 27, or Form 1040 EZ line 6. If taxes were not filed, please report total income from all sources.

Program Needs for the 2021-22 Academic Year **Academic Assistance** (check all that apply): **Tutoring:** Supplemental Instruction (SI) Test Anxiety Conducting Research Learning Styles Other: Final Exam Preparation Time/Self-Management Textbook Reading Strategies Procrastination Note-taking Strategies ☐ Test Taking Strategies Writing Papers **Advising: Personal Concerns: Securing Basic Needs:** □ Course Selection ☐ Transition to NAU Winter break housing Relationships/Friends ☐ Major/Minor Food Resources □ BA/BS Decision Stress Management Textbooks ☐ Degree Progress □ Counseling Services Other: **Graduate/Professional School:** Financial: Career Planning Budgeting Planning Goals/Decision Making ☐ FAFSA **Applications** Other: Grants & Scholarships Funding □ Loans & Debt How did you hear about us? Release and Affidavit I authorize the Student Support Services program to include my name and/or picture in publications, including print and electronic publications, and waive any right to inspect or approve the finished versions. Initial here if you do NOT want your name and/or picture to be used in publications: I verify that all of the information on this form is accurate and complete to the best of my knowledge. This information will be kept confidential and used only by Student Support Services to verify my eligibility. I also grant my permission to Student Support Services personnel to review, release, obtain, and/or make copies of all necessary NAU documents to determine eligibility or enhance the effectiveness of the program and/or my success. If I identify a disability, I grant NAU personnel permission to release necessary information to Student Support Services personnel for the purpose of validating my eligibility for the Student Support Services program. Applicant Signature Parent/ Guardian Signature Date Date **Priority Deadline: August 2nd**

Mail

Student Support Services Northern Arizona University PO BOX 6035 Flagstaff, AZ 86011-6035 Return completed applications via:

Applications are accepted until the program is full.

All notices of acceptance will be sent to the student's NAU email account.

Email

student.support.services@nau.edu