


As a federally funded program, TRIO Student Support Services (SSS) is required to provide documentation of students' program eligibility. One important aspect of eligibility is verification of "Family Income." Verification requirements vary depending on whether students are independent or dependent. (A list of criteria for independent student status is available at www.fafsa.ed.gov.)

Read each option below, then check and complete ONE of the following based on your status:

- I am a dependent student (younger than 24: unmarried/not emancipated; parental income reported on the FAFSA):
- Parent/guardian must complete and sign or provide a copy of most recent tax return.
 - Number of people support by the family unit: _____
 - **Parent/guardian's Taxable Income (not adjusted gross) for the previous year:** \$ _____
- Did not file. Total income for previous year: \$ _____

 **Parent/Guardian Signature** _____

Date _____

(click Fill & Sign and click Sign at top  sign with mouse or stylus or insert signature image)

- I am an independent student (typically 24 or older or married/emancipated; parental income not reported on the FAFSA).
- Student must complete and sign or provide a copy of most recent tax return
 - Number of people support by the family unit: _____
 - **Student's Taxable Income (not adjusted gross) for the previous year:** \$ _____
- Did not file. Total income for previous year: \$ _____

- I DECLINE to provide my financial information, but would still like to be considered for the SSS program.

Statement of Verification

To the best of my knowledge, all information provided on this application is true and complete.

Statement of Agreement and Consent

I understand that the SSS program will use the data provided on this form to assist in determining eligibility and **all information will be kept confidential.**

I authorize Emporia State University Student Support Services to gather my high school and college transcripts, placement scores, FAFSA and scholarship information, disability documentation, ACT scores, and other necessary information in order to provide the services I have requested, and to make reports to the U.S. 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, as well as obtain college enrollment and degree information from National Student Clearinghouse. I understand that all information will be kept confidential and will be used for the following specified purposes:

- | | |
|--|----------------------------------|
| a. student demographic data and record keeping | d. federal reporting |
| b. program evaluation | e. other administrative purposes |
| c. needs assessment | |


I grant permission to use photographs, quotes, academic accomplishments, statements and/or print my first and last name in any and/or all publications for Student Support Services.

Applications will be held for one year from date of application. Please reapply at that time.

I have read and agree with the Statement of Verification and the Statement of Agreement and Consent.

 **Student Signature** _____

Date _____

(click Fill & Sign and click Sign at top  - sign with mouse or stylus or insert signature image)

Please return this form by mail to:

TRIO Student Support Services
Emporia State University
1 Kellogg Circle, Campus Box 4005
Emporia, KS 66801

or hand deliver to: 323 South Morse Hall

or email to: mfrye1@emporia.edu

or fax to: 620-341-5887