

## Eligibility Application Form

### Applicant Information

Full, Legal Name: \_\_\_\_\_ Student ID: \_\_\_\_\_ <sup>(3)</sup>Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_  
*Last First Middle*

Alternative Address: \_\_\_\_\_  
*Street Address (or PO Box) City State ZIP Code*

Contacts: \_\_\_\_\_  
*Home Phone Cell Phone Work Phone UA E-mail Address*

What is the best way to contact you?  
 Cell phone: ☐ Home Phone: ☐ Email: ☐  
 Facebook: ☐ Blackboard: ☐ Other: ☐  
 Text/SMS: ☐ → who is your wireless provider?

### Eligibility Information

**U.S. Citizenship Place of Birth:** Citizen ☐ Permanent Resident (Green Card) ☐

**Are you a "first generation" college student?** YES ☐ NO ☐

**Do you have a documented learning or other disability?** YES ☐ NO ☐

**Have you been to Disability Services?** YES ☐ NO ☐

**Are you working with Vocational Rehabilitation?** YES ☐ NO ☐

**Are you a low income student? (See table on the right→)** YES ☐ NO ☐

**Are you enrolled or planning to be enrolled in at least 6 credits?** YES ☐ NO ☐

**Are you admitted to a 4-year degree program?** YES ☐ NO ☐ → What program are you admitted to?

TRIO 2017 low income guidelines for AK per size of family 1 \$22,590 2 \$30,435 3 \$38,280 4 \$46,125 5 \$53,970 6 \$61,815 7 \$69,660 8 \$77,505 Add \$7,845 for each additional member
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### Demographic Information

<b>Ethnicity:</b> (select all that apply) American <input type="checkbox"/> Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/>	<b>Are you Hispanic or Mexican American:</b> YES <input type="checkbox"/> NO <input type="checkbox"/> <b>Family Status:</b> Married <input type="checkbox"/> Single Dependent <input type="checkbox"/> Single Independent Head of Household <input type="checkbox"/>	<b>Class Standing:</b> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/>	<b><sup>(7)</sup>Date of Birth:</b> <b>Gender:</b> <b>Where are you planning to live?</b> <input type="checkbox"/> Off Campus <input type="checkbox"/> On Campus
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### Certification and Signature

I certify that the above information is true and correct.

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

## Student Writing Assessment

**As part of the enrollment process, UAF's Student Support Services Project would like to assess your basic writing skills. Please answer the question:**

***What support do you hope to receive from Student Support Services?***

*You can include information about your background, educational goals, academic strengths and weaknesses, or any other matter that will help us understand how we can help you.*

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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## Student Self Assessment

**Please check everything that applies to you:**

- ☐ Attended high school with fewer than 100 in graduating class
- ☐ Limited legal rights or on probation or parole
- ☐ Out of academic pipeline for 5 or more years
- ☐ Working more than 20 hours a week
- ☐ Defaulted on federal student loan
- ☐ Single parent without a support system
- ☐ On public assistance
- ☐ Commute 20 miles or more a day
- ☐ Personal decisions interfere w/ education and/or career choices
- ☐ Homeless and/or unstable housing
- ☐ Aging out of foster care
- ☐ Other (specify): «Other»

***Please check any box that refers to a skill or item that you don't have or would like to improve.***

### Computer Skills

- ☐ Using basic software (Word, Excel)
- ☐ Using Blackboard classes
- ☐ Using Google Apps (email, calendar, etc.) or the internet
- ☐ Keyboarding
- ☐ Using graphing calculator
- ☐ Don't have reliable access to a computer or home internet

### Study Skills

- ☐ Time management and organization
- ☐ Test taking/preparation/anxiety
- ☐ Reading speed and comprehension impacting coursework
- ☐ Proofreading, and essay and research writing
- ☐ Using library resources
- ☐ Reading textbooks
- ☐ Note taking
- ☐ Math anxiety
- ☐ Writing anxiety
- ☐ Feel unprepared for math, science, and/or engineering courses

### Career Planning

- ☐ Choosing a career or major
- ☐ Resume & cover letter design
- ☐ Interviewing

- ☐ Applying for internships & job shadows
- ☐ Job Search
- ☐ Graduate or professional school selection & application process
- ☐ GRE Preparation

### Personal Assistance

- ☐ Personal Counseling
- ☐ Drug/alcohol counseling
- ☐ Coping with stress or anxiety
- ☐ Child care information
- ☐ Health Issues (Including Seasonal Affective Disorder, SAD)
- ☐ Disabilities accommodation

### Financial Aid Counseling

- ☐ FAFSA assistance (deadlines, technical support, PIN, etc.)
- ☐ Student Loan Default
- ☐ Consumer credit counseling
- ☐ Loan consolidation
- ☐ Loan repayment/forgiveness
- ☐ Financial aid verification
- ☐ Tax preparation
- ☐ Budgeting
- ☐ Scholarship essay writing & information

Name: \_\_\_\_\_

Date \_\_\_\_\_

# CLASS SCHEDULE WORKSHEET

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>8:00</b>	8:00 - 9:00 AM	8:00 - 9:30 AM	8:00 - 9:00 AM	8:00 - 9:30 AM	8:00 - 9:00 AM
:15					
:30					
:45					
<b>9:00</b>	9:15 - 10:15 AM	9:45 - 11:15 AM	9:15 - 10:15 AM	9:45 - 11:15 AM	9:15 - 10:15 AM
:15					
:30					
:45					
<b>10:00</b>	10:30 - 11:30 AM	11:30 - 1:00 PM	10:30 - 11:30 AM	11:30 - 1:00 PM	10:30 - 11:30 AM
:15					
:30					
:45					
<b>11:00</b>	11:45 - 12:45 PM	11:45 - 12:45 PM	11:45 - 12:45 PM	11:45 - 12:45 PM	11:45 - 12:45 PM
:15					
:30					
:45					
<b>12:00</b>	1:00 - 2:00 PM	2:00 - 3:30 PM	1:00 - 2:00 PM	2:00 - 3:30 PM	1:00 - 2:00 PM
:15					
:30					
:45					
<b>1:00</b>	2:15 - 3:15 PM	2:15 - 3:15 PM	2:15 - 3:15 PM	2:15 - 3:15 PM	2:15 - 3:15 PM
:15					
:30					
:45					
<b>2:00</b>	3:30 - 4:30 PM	3:40 - 5:10 PM	3:30 - 4:30 PM	3:40 - 5:10 PM	3:30 - 4:30 PM
:15					
:30					
:45					
<b>3:00</b>	4:40 - 5:40 PM	5:20 - 6:50	4:40 - 5:40 PM	5:20 - 6:50	4:40 - 5:40 PM
:15					
:30					
:45					
<b>4:00</b>	5:50 - 6:50 PM	5:50 - 6:50 PM	5:50 - 6:50 PM	5:50 - 6:50 PM	5:50 - 6:50 PM
:15					
:30					
:45					
<b>5:00</b>	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM
:10					
:20					
:40					
<b>6:00</b>	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM
:15					
:30					
:40					
<b>7:00</b>	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM	7:00 - 8:30 PM or 7:00 - 10:00 PM
:30					
<b>8:00</b>					
:30					

Semester:

Name: