



WICHITA STATE  
UNIVERSITY  
TRIO PROGRAMS  
Student Support Services

Office Location: 309 Grace Wilkie Hall  
Phone Number: (316) 978-3715

# Student Support Services Application for Program Services

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

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ MyWSU ID: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number (home): (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Phone number (work): (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Phone number (cell): (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Best to reach me at: (Circle One) home work cell

Email address: \_\_\_\_\_

Birthdate: \_\_\_\_\_ (month/day/year)

### *Emergency Contact*

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

Address: \_\_\_\_\_

Phone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Relationship: \_\_\_\_\_

### **Important! Please Read.**

For your application to be complete you must bring the following:

- Your most recent transcript
- Your and/or your parent's most recent Federal Income Tax Form(s) (IRS form 1040)
- The self-assessment packet on learning style preferences

### *Mission Statement*

WSU's Student Support Services provides a multiplicity of academic support services to first-generation college students who have limited income, or a disability, assisting students to persist and graduate from WSU.

### **College Level** (check one)

- \_\_\_\_\_ Freshman (1 - 29 Hrs.)  
 \_\_\_\_\_ Sophomore (30 - 59 Hrs.)  
 \_\_\_\_\_ Junior (60 - 89 Hrs.)  
 \_\_\_\_\_ Senior (90 + Hrs.)

### **Citizenship** (check one)

- \_\_\_\_\_ U.S. Citizen  
 \_\_\_\_\_ Permanent Resident  
 Resident Alien Number:  
 (Please provide verification)  
 \_\_\_\_\_

### **Ethnicity** (check one)

- \_\_\_\_\_ Native American Indian or Alaska Native  
 \_\_\_\_\_ Asian  
 \_\_\_\_\_ Black or African-American  
 \_\_\_\_\_ Hispanic or Latino  
 \_\_\_\_\_ White or Caucasian  
 \_\_\_\_\_ Native Hawaiian or other Pacific Islander  
 \_\_\_\_\_ More than one race

### **Gender** (check one)

- \_\_\_\_\_ Male  
 \_\_\_\_\_ Female

### **College** (please state)

Major: \_\_\_\_\_

Minor: \_\_\_\_\_

## Records Release Form

I certify all information provided, including financial and family documentation, submitted with this application, is true and correct to the best of my knowledge.

I give permission to release my name to provide recognition in the Student Support Services newsletter and other publications. I authorize Student Support Services to have access to my school records for program purposes.

I understand that these records will be held in strict confidence.

\_\_\_\_\_  
Student Signature / Date

\_\_\_\_\_  
Signature of parent or guardian  
(if under 18)

## Photo Release Form

### Permission to use photographs

I grant to Student Support Services (SSS), its representatives and employees the right to take photographs of me and my property in connection with all SSS-TRiO related activities. I authorize SSS, its assignees and transferees to copyright, use and publish the same in print and/or electronically.

I agree that SSS may use such photographs of me with or without my name for any lawful purpose, including, for example, for the purposes of publicity, illustration, advertising and web content in connection with SSS.

I have read and understand the above.

\_\_\_\_\_  
Student Signature / Date

\_\_\_\_\_  
Signature of parent or guardian  
(if under 18)

# Eligibility Criteria

Please answer the following questions. Circle YES or NO:

Do either of your parents have a degree from a four year college? YES NO  
Father's highest level of education: \_\_\_\_\_  
Mother's highest level of education: \_\_\_\_\_

Are you receiving a Pell Grant? YES NO

Did you file income taxes last year? YES NO

Are you receiving services from Disability Services and/or Disability Support Services ? YES NO  
If yes, what services: \_\_\_\_\_

Are you an incoming Freshman with no college GPA? YES NO

Are you a transfer student from a two-year college? YES NO  
If yes, which college? \_\_\_\_\_

Do you plan to earn a bachelor's degree from WSU? YES NO  
If yes, what is your target graduation date? \_\_\_\_\_  
(Semester/Year)

Do you intend to complete your degree as a full-time student? YES NO  
(12 or more hours per semester)  
If not, how many hours per semester do you intend to take? \_\_\_\_\_

Are you on academic probation? YES NO

Have you previously participated in any of the following: Student Support Services, Talent Search, Veteran's Upward Bound, Disability Support Services, Disability Services, Upward Bound Math-Science, Upward Bound Wichita Prep, Communications Upward Bound, Educational Opportunity Center, or McNair Scholars Program? YES NO  
If yes, where?  
\_\_\_\_\_

What is your reason for enrolling in the Student Support Services Program?  
\_\_\_\_\_  
\_\_\_\_\_

Which of the following personalized services would you like to receive?

(Mark all that apply)

- \_\_\_\_\_ CAPP Degree Evaluation
- \_\_\_\_\_ Individualized Tutoring
- \_\_\_\_\_ Academic Success Skill Development
- \_\_\_\_\_ Academic Advice and Assistance in Course Selection
- \_\_\_\_\_ Scholarships Exclusively for SSS Students
- \_\_\_\_\_ Comprehensive and Personalized Degree Planning
- \_\_\_\_\_ Assistance from Math and Learning Skill Interns
- \_\_\_\_\_ Use of the SSS Technology Learning Lab
- \_\_\_\_\_ Graduate School Enrollment Advice
- \_\_\_\_\_ Assistance to Complete FAFSA Application
- \_\_\_\_\_ Textbook Library Loans
- \_\_\_\_\_ Financial Literacy Skills Development

Please fill out your Self-Assessment Packet before completing the next page. Thank you.

**Based on the results of your Self-Assessment Packet,  
which of the following academic learning skills activities are you interested in? Mark all  
that apply (lab interns usually assist students to access current information and knowl-  
edge via computer programs, DVD's, and small group workshops).**

**DVD's:**

- \_\_\_\_\_ A Time Management Approach to Learning
- \_\_\_\_\_ Academic Success Skills
- \_\_\_\_\_ Breakthrough Listening
- \_\_\_\_\_ Conserving Energy
- \_\_\_\_\_ Coping with Test Anxiety
- \_\_\_\_\_ Effective Note Taking
- \_\_\_\_\_ Essentials of Great Service
- \_\_\_\_\_ French
- \_\_\_\_\_ Getting Ahead by Getting Along
- \_\_\_\_\_ General Test Taking
- \_\_\_\_\_ Harassment and Diversity
- \_\_\_\_\_ How to Reduce Test Anxiety
- \_\_\_\_\_ How to Study Textbooks
- \_\_\_\_\_ Listening and Note Taking
- \_\_\_\_\_ Long Term Preparation for Exams
- \_\_\_\_\_ Math: A Four Letter Word
- \_\_\_\_\_ Memory
- \_\_\_\_\_ Memory Skills
- \_\_\_\_\_ Note Taking
- \_\_\_\_\_ Positive Approach to Discipline
- \_\_\_\_\_ Putting Ideas in Order
- \_\_\_\_\_ Reading Skills
- \_\_\_\_\_ Research Skills: How to Find Information
- \_\_\_\_\_ Sexual Harassment
- \_\_\_\_\_ Space Management
- \_\_\_\_\_ Standardized Tests
- \_\_\_\_\_ Stress Management/Relaxation Techniques
- \_\_\_\_\_ The 5 Steps to Study Skills
- \_\_\_\_\_ Successful Time Management Systems
- \_\_\_\_\_ Sylvan Study Power
- \_\_\_\_\_ Test Taking Techniques
- \_\_\_\_\_ Time Management
- \_\_\_\_\_ Tips for Math Success
- \_\_\_\_\_ Test-Taking Skills: Effective Study Techniques
- \_\_\_\_\_ Valuing Diversity at the Interpersonal Level

**Other SSS Resources:**

- \_\_\_\_\_ Computer Skills Development (Lab Interns)
- \_\_\_\_\_ Program for Academic Success (Audio)
- \_\_\_\_\_ Resume Writing (Software Kit)
- \_\_\_\_\_ How to Become a Master Student (Text)
- \_\_\_\_\_ The Confident Student (Text)

**Technology Software:**

- \_\_\_\_\_ Math Skills Development
- \_\_\_\_\_ Chem Tutor-Excalibur
- \_\_\_\_\_ Math 011-Beginning Algebra
- \_\_\_\_\_ Math 012-Intermediate Algebra
- \_\_\_\_\_ Hist 102-Western Heritage
- \_\_\_\_\_ Span 111/112-Que Tal

Which of the following **Campus Services** would you like to know more about?

- \_\_\_\_\_ Career Services
- \_\_\_\_\_ Counseling and Testing Center
- \_\_\_\_\_ Writing Center
- \_\_\_\_\_ Math Lab
- \_\_\_\_\_ Multi-Cultural Resource Center
- \_\_\_\_\_ Financial Aid Office
- \_\_\_\_\_ Housing and Residence Life
- \_\_\_\_\_ Ablah Library
- \_\_\_\_\_ Center for Student Leadership
- \_\_\_\_\_ Child Development Center
- \_\_\_\_\_ Cooperative Education Internship
- \_\_\_\_\_ Disability Services
- \_\_\_\_\_ Disability Support Services
- \_\_\_\_\_ Heskett Center
- \_\_\_\_\_ Student Health Services
- \_\_\_\_\_ McNair Scholars Program
- \_\_\_\_\_ Other\_\_\_\_\_

\_\_\_\_\_ I am enrolled in an  
Intro to the University Success Course  
Course Name:\_\_\_\_\_

\_\_\_\_\_ Other Workshops  
Title of Workshop:\_\_\_\_\_

***As a student participating in SSS,  
you must complete two learning skills activities per year.***

# SSS Student Participation Agreement

As a participant in the Student Support Services Program, you are eligible to receive services and participate in activities that will increase your chances of success in your college coursework and graduation from WSU. These services are offered at no additional cost beyond your regular tuition and fees as a WSU student. The SSS Program and staff will make this commitment to you. In return, we ask that you make the following commitment to us:

1. I accept responsibility for my own academic success and agree to attend classes regularly. I understand regular attendance is to have a minimum or no absences in each of my classes.
2. I agree to attend an initial advisement session with my SSS academic adviser at the beginning of each semester. In addition, I agree to attend an update advising session at midterm.
3. I agree to participate in tutoring as advised by my SSS academic adviser and I agree to abide by the Student-Tutor Contract.
4. I agree to complete two academic learning skills activities during the course of the academic year as listed on the self-assessment packet.
5. I agree to complete WSU's CAPP Degree Evaluation (Curriculum Advising and Program Planning), with the assistance of my SSS academic adviser, in an effort to map out my degree plan toward graduation.

If I fail to comply with the above obligations and responsibilities, I understand I may be dismissed from the SSS Program.

**SSS Student Signature** \_\_\_\_\_

**SSS Academic Adviser Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

For Office Use Only

Accepted

Denied

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_