

STUDENT SUPPORT SERVICES APPLICATION

Personal Data

Name: _____ Student ID: _____

Address: _____ Phone: Home: _____

City: _____ State: ___ Zip: _____ Cell Phone: _____

Is Texting available to you on your cell phone? Yes No

Date of Birth: _____ Sex: Male Female Email: _____

Do you have either one of these social networking websites: Facebook MySpace

May we add you as a friend? Yes No

Ethnic Background: Native American White Hispanic Multi-racial
 Asian American Black Pacific Isle

Marital Status: Single Divorced Married Widowed

Are you a veteran of the Armed Forces? Yes No Branch: _____

In case of emergency, contact: _____ Phone: _____

Educational Data

High School: _____ Date Graduated: _____ High School GPA: _____

Date GED Received: _____ Score: _____

Former colleges attended: _____

Degree Sought: Associate _____ Bachelor _____ Major _____

First term enrolled at IU East: _____ Academic Class Standing: Freshman Soph. Jr Sr

Do you participate in Red Wolf Athletics? Yes No Sport: _____

Are you receiving financial aid to attend college? Yes No

If yes, what type(s) are you receiving? _____

Have you previously participated in: Student Support Services? Upward Bound? Talent Search?

When? _____ Where? _____ Are you a 21st Century Scholar Yes__ No__

Family Data

Are you currently employed? Yes No Hours per week: _____

Place of employment: _____ Number of years: _____

Number of children: _____ Ages: _____ Living with you: _____

Current family size: _____ Family income: _____

Source of income: _____

DOCUMENTED EVIDENCE OF INCOME MUST BE SUPPLIED BEFORE ADMISSION INTO THE STUDENT SUPPORT SERVICES PROGRAM.

Family Background

Language spoken at home during childhood: _____

Size of household during childhood: _____

Bilingual: Yes No Languages: _____

Did either of your parents receive a bachelor's degree? Yes No

Family members who attended college: _____

(over)

Medical Data

Do you want to identify yourself as a student with a disability? () Yes () No

Physical: () Yes () No **Learning:** () Yes () No **Other:** () Yes () No

Explain: _____

Will your disability require special accommodation within the academic setting? () Yes () No

Explain: _____

Are you a client of: () Indiana Vocational Rehabilitation? () VA Vocational Rehabilitation?

If yes, name of counselor: _____ Location: _____

Do you have a medical condition/illness of which we should be aware? () Yes () No

Please explain: _____

Services

Which of the following services do you think you will be using:

- | | |
|------------------------------------------------------------|----------------------------------|
| _____ Learning laboratory
(English, math and reading) | _____ Tutoring in _____ |
| _____ Personal development and/or
counseling | _____ Career counseling/planning |
| _____ Class scheduling/registration | _____ Choosing a major/minor |
| _____ Financial aid counseling | _____ Study skills help |
| _____ Finding out about college
policies and procedures | _____ Adjusting to college |
| | _____ Building a college network |

How did you find out about Student Support Services? _____

I agree to participate in the Student Support Services Program, and certify that the information provided by me is correct to the best of my knowledge.

I authorize the Student Support Services staff to obtain academic records such as admissions information, financial aid, Skills Review results, class schedule and course grades from Indiana University/Purdue administration. I also authorize the Student Support Services staff to discuss my academic progress with the faculty, as appropriate. I understand that my instructors will be contacted during the semester to evaluate my class progress. These evaluations will be available to me, for viewing, upon my request.

I also authorize the Student Support Services staff to share information concerning college adjustment and academic progress with Indiana Vocational Rehabilitation or VA Vocational Rehabilitation, if applicable.

Signature of Student

Date of Signature

Please return this form to:

Student Support Services
Indiana University East
2325 Chester Blvd.
Richmond, Indiana 47374

Student Support Services
(765) 973-8310