

**University Of Northern Colorado**  
**Center For Human Enrichment/Student Support Services**  
**2012-2013 Application For Participation**

To determine eligibility, please respond to ALL sections of this application.  
Federal regulations govern the funding granted to UNC for operating the CHE Student Support Services Program. Your accurate response to all the questions ensures that we are operating in accordance with federal regulations.  
Due to the personal nature of these questions, your responses will be held in the strictest confidence.

Print Name (First, Middle, Last): \_\_\_\_\_  
Gender: \_\_\_\_\_ Bear Number: \_\_\_\_\_ SSN: \_\_\_\_\_  
Permanent Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Permanent Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_  
Preferred Phone Number (If Not Listed Above): (\_\_\_\_\_) \_\_\_\_\_  
Email Address (i.e., yahoo, gmail, hotmail): \_\_\_\_\_

---

**CITIZENSHIP**

Are you a legal citizen of the United States? \_\_\_\_Yes \_\_\_\_No  
**If no**, are you a permanent resident of the United States? \_\_\_\_Yes\* \_\_\_\_No  
\*Please provide your Permanent Residency Card Number or attach a photocopy of your Permanent Residency Card  
Your Permanent Residency Card # \_\_\_\_\_

**ETHNICITY and/or Race** [Check (√) the Ethnicity and/or Race that Best Represents How You Identify]  
\_\_\_\_ American Indian or Alaska Native      \_\_\_\_ White/Caucasian  
\_\_\_\_ Asian American      \_\_\_\_ Native Hawaiian /Pacific Islander  
\_\_\_\_ Black or African-American      \_\_\_\_\_ (Please specify)  
\_\_\_\_ Hispanic or Latino

**PARENT EDUCATIONAL LEVEL**

Did either of your natural or adoptive parents earn a bachelor's degree? \_\_\_\_Yes \_\_\_\_No  
\_\_\_\_ I am Independent Student (did not regularly reside with or receive support from a natural or adoptive parent) and parent educational level does not need to be disclosed.

**FINANCIAL AID**

Have you applied for Financial Aid? \_\_\_\_Yes \_\_\_\_No  
What type of financial aid have you accepted or applied for?  
\_\_\_\_ Pell Grant      \_\_\_\_ Work Study      \_\_\_\_ Scholarship      \_\_\_\_ Loan      Other: \_\_\_\_\_  
Do you plan to work while attending UNC? \_\_\_\_Yes \_\_\_\_No **If yes**, how many hours per week? \_\_\_\_\_

---

Will you be living on campus? \_\_\_\_Yes \_\_\_\_No, I will be living in the city of: \_\_\_\_\_

Is English your first language? \_\_\_\_Yes \_\_\_\_No, My native language is: \_\_\_\_\_

Did you participate in any of the following programs? (√ **all that apply**)  
\_\_\_\_ Upward Bound      \_\_\_\_ Talent Search      \_\_\_\_ Student Support Services      \_\_\_\_ Gear Up  
\_\_\_\_ EOC      \_\_\_\_ AVID      \_\_\_\_\_ Other (please list)

Have you applied **or** been accepted into any of the following programs? (√ **all that apply**)  
\_\_\_\_ Daniels Fund      \_\_\_\_ Denver Scholarship Foundation      \_\_\_\_ President's Leadership Program      \_\_\_\_ Cumbres  
\_\_\_\_ McNair Scholars Program      \_\_\_\_ Stryker Institute for Leadership Development      \_\_\_\_ Hispanic Scholarship Fund

How did you hear about CHE? \_\_\_\_\_

Please complete the Independent Student **OR** Dependent Student sections below.

**INDEPENDENT STUDENTS**

**Independent Student status is determined through the following classifications (please check all that apply)**

- I was born before January 1, 1988
- I am serving on active duty in the U.S. Armed Forces
- Both of my parents were deceased since turning age 13
- I was a dependent or ward of the court since turning age 13
- I am married
- I am a veteran of the U.S. Armed Forces
- I was in foster care since turning age 13
- I am currently or I was an emancipated minor
- I will be working on a master's or doctorate program (e.g., MA, MBA, MD, JD, PhD, Ed.D. graduate certificate)
- I have children and I provide more than half of their support
- I have dependents (other than children or my spouse) who live with me and I provide more than half of their support
- I am homeless or I am at risk of being homeless
- I am currently or I was in legal guardianship

What is the size of your household, including yourself, spouse and/or other dependents? \_\_\_\_\_

Will/Did you file a Federal Income Tax Return for 2011? \_\_\_\_Yes \_\_\_\_No

**\*\*If yes**, what was your **2011** Taxable Income? \_\_\_\_\_

**DEPENDENT STUDENTS**

What is the size of your parent's household, including yourself? \_\_\_\_\_

Will/Did your parents file a Federal Income Tax Return for **2011**? \_\_\_\_Yes \_\_\_\_No

**\*\*If yes**, what was their **2011** Taxable Income? \_\_\_\_\_

**\*\*Note: Taxable Income information is available on**

**Line 43 for IRS Form 1040    Line 27 for IRS Form 1040A    Line 6 for IRS Form 1040EZ.**

**ACADEMIC ADVISING QUESTIONNAIRE**

If admitted to the CHE/SSS program, please  **ALL** services you might be interested in receiving.

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Academic Advising | <input type="checkbox"/> English as a second language support | <input type="checkbox"/> Major/Career Counseling                 |
| <input type="checkbox"/> English Tutoring  | <input type="checkbox"/> Financial Aid Counseling             | <input type="checkbox"/> Cultural Events/Activities              |
| <input type="checkbox"/> Math Tutoring     | <input type="checkbox"/> Personal Counseling                  | <input type="checkbox"/> Disability Support Services/IEP Support |
| <input type="checkbox"/> Science Tutoring  |   | <input type="checkbox"/> Academic Skills Workshops               |

Please list any other areas of support that you may need while at UNC: \_\_\_\_\_

Do you have an intended **Major**? \_\_\_\_ Yes \_\_\_\_ No

**If yes**, intended major is: \_\_\_\_\_

Are you **transferring** to UNC from another post-secondary institution? \_\_\_\_ Yes \_\_\_\_ No

**If yes**, # of credits being transferred to UNC \_\_\_\_\_

Please list any college **course credit** from high school (i.e., **IB, AP, or high school concurrent**): \_\_\_\_\_

Please list courses that you enjoyed most in high school: \_\_\_\_\_

**PERSONAL QUESTIONNAIRE**

*Please answer the following questions in a few sentences.*

*You may attach an additional document to answer these questions.  
ALL of your responses will remain **confidential**.*

1. Why did you choose to go to college, and why did you select UNC in particular?

---

---

---

---

---

---

---

2. Why do you want to participate in the CHE Student Support Services Program?

---

---

---

---

---

---

---

3. Specifically, what types of short-term and long-term support would you like CHE to provide you with?

---

---

---

---

---

---

---

4. Are there any unique circumstances (family, IEP, etc.) that you would like to share with us so that we are able to identify additional areas in which we can better support you? **Please know that your response to this question will remain confidential and does not impact your acceptance into the CHE program.**

---

---

---

---

---

---

---

**To be considered for the CHE program, you must read and initial that you understand and agree to each of the statements below.**

Yes, I want to participate in the student support services program and understand that I am giving my permission for the UNC CHE Student Support Services staff to access my academic records for the purpose of verifying my eligibility and supporting me academically as a CHE/SSS participant and a UNC student. I understand that the CHE/SSS staff agrees to adhere to all guidelines outlined under the federal education rights and privacy act.  
 [PLEASE REFER TO [HTTP://WWW.UNCO.EDU/REGREC/FERPA.HTM](http://www.unco.edu/regrec/ferpa.htm) FOR MORE INFORMATION.]

I understand that as a CHE participant I will commit to meeting with my advisor on a regular basis throughout my UNC Academic career. I am willing to participate in the academic curriculum, programming, and supportive services offered and/or recommended by CHE/SSS.

I certify that the information submitted on this form is complete and correct.

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

\_\_\_\_\_  
 Parent/Guardian Signature (Signature is required for Dependent Students) Date

**Please Return Completed Application To:**  
Mail Form To: Center for Human Enrichment  
 University of Northern Colorado  
 501 20<sup>th</sup> Street  
 Campus Box 85  
 Greeley, CO 80639  
**OR**  
Fax It To: 970-351-2697  
**OR**  
Email to: Julie Trujillo at [julie.trujillo@unco.edu](mailto:julie.trujillo@unco.edu)  
 \*If you have any questions about completing or submitting this application or about the CHE/SSS program in general, please feel free to call us at 970-351-1905\*  
 Thank you for your interest!



**FOR OFFICE USE ONLY**

Acceptance: FG: _____ LI: _____ Academic Need: _____ Orientation Date: _____	Financial: Pell: _____ EFC: _____ Unmet Need: _____ Workstudy: _____	Entrance: CCHE: _____ ACT Comp: _____ English ____ Science ____ Math ____ Science Reas. ____
Student is ineligible on the basis of: _____ Income _____ First Generation _____ Academic Need Other: _____		
Date Received: _____ Staff Initial: _____	Date Accepted: _____ Staff Initial: _____	Term Entered Program: _____