



TRIO ACHIEVERS PROGRAM APPLICATION

2024-2025

Name _____ Soc. Sec. # _____
Last First MI

Permanent Mailing Address _____
Address City Zip

Telephone # (home) _____ (cell) _____ DOB: _____

Winthrop ID# _____ Winthrop Email _____

PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS

1. What is the highest level of education completed by your parents?

Mother	Father	With whom do you live with when not at Winthrop?
<input type="radio"/> Didn't Graduate HS	<input type="radio"/> Didn't Graduate HS	<input type="radio"/> Mother & Father
<input type="radio"/> HS Diploma/GED	<input type="radio"/> HS Diploma\GED	<input type="radio"/> Mother/Guardian Only
<input type="radio"/> Associate's degree	<input type="radio"/> Associate's degree	<input type="radio"/> Father/Guardian Only
<input type="radio"/> Bachelor's degree	<input type="radio"/> Bachelor's degree	<input type="radio"/> Self
<input type="radio"/> Graduate Degree (Master's, Ph.D., M.D., J.D.)	<input type="radio"/> Graduate degree (Master's, Ph.D., M.D., J.D.)	<input type="radio"/> Other _____

2A. For dependent students who are claimed on parent tax return: (Information from your 2023 tax return)

Did parent(s) file a federal income tax return?	<input type="radio"/> Yes <input type="radio"/> No	If you filed or plan to file, what was your adjusted gross income? (IRS Form 1040, line 11)	\$.00
How many people are in your family (including yourself)?		If you filed or plan to file, what was your taxable income? (IRS Form 1040, line 15)	\$.00
Parent/Guardian Signature: _____		Date: _____	

2B. For independent students who are NOT claimed on parent tax return: (From your 2023 tax return)

Did you file a federal income tax return?	<input type="radio"/> Yes <input type="radio"/> No	If you filed or plan to file, what was your adjusted gross income? (IRS Form 1040, line 11)	\$.00
How many people are in your family (including yourself)?		If you filed or plan to file, what was your taxable income? (IRS Form 1040, line 15)	\$.00

3. Please answer **BOTH** parts A and B:

A. Are you Hispanic/Latino? ☐ Yes ☐ No

B. Race/Ethnicity (check all that apply)

- ☐ American Indian or Alaska Native
- ☐ Asian – Asian American
- ☐ African American or Black

- ☐ White
- ☐ Native Hawaiian or Pacific Islander
- ☐ Other _____

4. Gender ☐ Male ☐ Female ☐ Non-Binary/Other Gender

OVER →

5. Do you have a documented learning and/or physical disability?

☐ Yes ☐ No If Yes, please submit documentation to Office of Accessibility (OA) [803-323-3290]

■ If Yes, what accommodations might you need for our 3-day TRiO CONNECT Orientation program?

6. Have you participated in other TRiO programs? ☐ Yes ☐ No

If yes, please indicate which program(s) and at which school _____

☐ Educational Talent Search ☐ Upward Bound ☐ Student Support Services

7. Will you be receiving a PELL grant this year? ☐ Yes ☐ No ☐ I Don't Know

8. Are you: ■ A citizen or permanent resident of the United States? ☐ Yes ☐ No

 ■ A transfer student? ☐ Yes ☐ No

 Previous College Name _____

9. What year did you graduate from high school? _____

10. What is your major? (write "undecided" if appropriate) _____

11. Preferred Name: _____

12. Preferred Pronouns: ☐ She/Her/Hers ☐ He/Him/His ☐ They/Them/Their

PARTICIPANT REQUIREMENTS

Students admitted into the TRiO program must actively pursue an undergraduate degree at Winthrop and must adhere to all policies and requirements set forth by the TRiO program. If admitted to TRiO, I understand that I must:

1. BE SERIOUS ABOUT MY SUCCESS!

2. Remain enrolled as a *full-time student* and strive to graduate from Winthrop University within 6 years.
3. Be a participant of the TRiO program during *my entire enrollment* at Winthrop.
4. Attend tutoring sessions, appointments with my Academic Counselor, and other services as required.
5. I further understand that I can lose my place in TRiO and all privileges associated with participation if I fail to do any of the above after being admitted.

I hereby authorize program staff to access additional information relating to my academics, financial need, and disability so that a determination can be made about my eligibility for this program and to monitor my academic progress (for example, Offices of Financial Aid, Accessibility, Records and Registration, etc). *I also authorize the release of FAFSA income information to the TRiO program for the purpose of determining my eligibility for the program.* If selected for participation, I further authorize the staff to make changes to my schedule to accommodate a TRiO ACAD section, and to release my name, photo, and academic performance on newsletters, brochures, webpage, press releases and letters, and with Winthrop faculty/staff. All of the information contained above is true to the best of my knowledge.

****Please Note: If admitted, TRiO staff will make changes to your schedule to enroll you in a TRiO-specific ACAD101 course. All effort will be made to minimize changes to class times.**

Student Signature

Date

**For full consideration, please complete and return by Friday, July 5th to:
TRiO Achievers Program, 102 Dinkins Hall, Winthrop University, Rock Hill, SC 29733**

Student Support Services is a federal TRiO program funded by the U.S. Department of Education. Acceptance into the program is contingent upon meeting eligibility criteria and space availability.