

STUDENT SUPPORT SERVICES APPLICATION

Send completed application to:



Student Support Services
10501 FGCU Blvd South
McTarnaghan Hall, Room 202
Fort Myers, FL 33965
239 590-7809



Have you completed the FAFSA (http://www.fafsa.ed.gov) for the academic year in which you are applying for Student Support Services membership? yes If you have not, then we will be unable to process your application at this time.

Name (first middle last): _____

Date of Birth (month/day/year): ___/___/___ University Identification Number: 814_____

Mailing Address _____

City _____ State _____ Zip Code _____ E-mail _____

Home Phone: _____ Cell Phone: _____

Gender: ___ Female ___ Male Citizenship: ___ U.S. Citizen ___ Permanent Resident

Race/Ethnicity: ___ American Indian ___ Asian ___ Black or African American ___ Hispanic or Latino
___ White ___ Native Hawaiian or other Pacific Islander ___ More than one

Prior to the age of 18, did you reside primarily with only one parent/guardian?

___ yes -Does this parent/guardian have a bachelor's (4 year degree) or higher? ___ yes ___ no

___ no -Do either of your parents/guardians have a bachelor's (4 year degree) or higher? ___ yes ___no

Are you currently eligible for the Federal Pell Grant? ___ yes ___ no ___ not sure

Do you have a documented disability registered with FGCU's Adaptive Services? ___ yes ___ no

Are you transferring from a community college? ___ no ___ yes -Name of college: _____

Were you involved with CROP, Scholars Club, or Immokalee Foundation? ___ yes ___ no

Major: _____ Minor: _____ Academic Advisor: _____

What can Student Support Services offer to help you complete your degree at FGCU? Check all that apply:

- ___ Time Management ___ Study Skills ___ Test Taking Skills ___ Reading Speed ___ Reading Comprehension
___ Essay Writing ___ Research Skills ___ Critical Thinking Skills ___ Organization Skills ___ Proofreading
___ Peer Advocacy ___ Interest/Career Testing ___ Financial Aid Workshops ___ Career Information ___ Job Search
___ Resume Writing ___ Choosing a Major ___ Academic Workshops ___ Social Opportunities ___ Free printing
___ Technology Lab ___ Resource Lending Library ___ Volunteer Opportunities ___ Cultural Activities

I certify that this information has been voluntarily provided, and is accurate and complete to the best of my knowledge. I hereby grant permission to Student Support Services to obtain any information necessary for eligibility verification for my participation in the SSS program at Florida Gulf Coast University. I am aware that this information is confidential and will only be viewed by SSS staff.
Student Signature Date

To be completed by office staff

<p> <input type="checkbox"/> Eligible <input type="checkbox"/> Not Eligible <input type="checkbox"/> Pending <input type="checkbox"/> No FAFSA <input type="checkbox"/> EBNS <input type="checkbox"/> Low high school grades <input type="checkbox"/> Low admission test scores <input type="checkbox"/> Predictive indicator* <input type="checkbox"/> Diagnostic tests <input type="checkbox"/> Low college grades <input type="checkbox"/> High school equivalency <input type="checkbox"/> Failing grades <input type="checkbox"/> Out of academic pipeline for 5 or more years <input type="checkbox"/> Limited English proficiency <input type="checkbox"/> Lack of educational and/or career goals <input type="checkbox"/> Lack of academic prepared- ness for college level course work <input type="checkbox"/> Need for academic support to raise grades in required courses/academic major <small>*Predictive indicator is a composite variable for estimating the potential success of a student in college using a variety of factors that may include indicators such as high school GPA, SAT, or ACT scores, high school preparedness, etc.</small> </p>	<p> <input type="checkbox"/> First Generation/Low Income <input type="checkbox"/> Low Income Only <input type="checkbox"/> First Generation Only <input type="checkbox"/> Disabled (attach documentation from adaptive services) <input type="checkbox"/> Disabled/Low Income </p>
<p>Enrollment Year: <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> 5 year +</p> <p>Enrollment Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time</p> <p>What are your personal goals and interests?</p> <hr/> <hr/> <hr/> <hr/> <p>What are some of your academic strengths? ...Challenges?</p> <hr/> <hr/> <hr/> <hr/> <p>What personal obstacles might you encounter while working toward the completion of your degree?</p> <hr/> <hr/> <hr/> <hr/> <p>Additional information:</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <p>Suggestions for non-eligible applicants: _____</p>	

Staff Member's Signature

Date

Last Update: _____