

MURRAY STATE COLLEGE STUDENT SUPPORT SERVICES

PROGRAM APPLICATION 2020-2021

Date _____ Social Security Number _____ -- _____ -- _____ Student ID _____

Full Name _____ Home Phone _____

Address _____ Cellular Phone _____

City _____ Zip Code _____ May we text you on your cell phone? Yes No

E-mail Address _____ Birth date ____/____/____

<input type="checkbox"/> Male	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> American Indian/Alaskan
<input type="checkbox"/> Female	<input type="checkbox"/> Permanent Resident	<input type="checkbox"/> Asian
		<input type="checkbox"/> Black/African American
		<input type="checkbox"/> Hispanic/Latino
When did you first enroll at Murray State College? _____		<input type="checkbox"/> Caucasian/White
		<input type="checkbox"/> Hawaiian/Pacific Islander
<input type="checkbox"/> Full-time student (12+ hours)	<input type="checkbox"/> Day Student	<input type="checkbox"/> Other
<input type="checkbox"/> Part-time student	<input type="checkbox"/> Evening Student	<input type="checkbox"/> More than one race
Declared Major _____		

If you/your family filed income taxes last year, what was your TAXABLE income? Complete the following table by checking whether your family income is under or over the amount beside the number of dependents in your family.

Family Size	Under	Over	Income	Family Size	Under	Over	Income
1			19,140	5			46,020
2			25,860	6			52,740
3			32,580	7			59,460
4			39,300	8			66,180

Did you apply for financial aid for the current school year? Yes No

What type of financial assistance are you receiving?

Scholarship Grant Loan Tribal Assistance
 Veteran's Other No assistance

Do either of your parents have a bachelor's Degree? Yes No

Do you have a documented disability? Yes No

What services have you received to accommodate this disability? _____

NOTE: Documentation of your disability is required. Disability documentation for any Murray State College student is retained in confidential files with the ADA office at the Tishomingo or Ardmore campus.

Have you ever participated in any other TRIO programs?

____ Talent Search ____ Upward Bound ____ Educational Opportunity Ctr. ____ Student Support Services

High School Attended _____ City _____ State _____

Did you graduate? yes

Highest grade completed _____

Do you have a GED? Yes

no

High School GPA _____

No

What schools other than Murray State College have you attended BEYOND high school?

School Name/Location

Dates Attended

Check all of these services that may interest and/or benefit you:

Counseling

- ____ Academic Advising/Degree Planning
- ____ Financial Aid Application Assistance
- ____ Career Counseling
- ____ Career/Interest Testing
- ____ Personal Counseling

Workshops

- ____ Overcoming Test Anxiety
- ____ Test Taking Skills
- ____ Note-taking Tips
- ____ Getting Organized
- ____ Stress Management
- ____ Using the Graphing Calculator
- ____ Time Management
- ____ Money Management
- ____ Resume/Cover letter/Interview Skills
- ____ Procrastination
- ____ Goal Setting

Academic Support/Instruction

- ____ Tutoring in:
 - ____ Science
 - ____ Math
- ____ Other needed academic support needed

Transfer Planning

- ____ College/University Information
- ____ College/University Application Assistance
- ____ College/University Visits

By signing below, I certify that the above information is true and correct to the best of my knowledge. I give Student Support Services my permission to receive copies of my financial, educational records and/or any other materials necessary for participation in the Student Support Services Program. Also, I give SSS permission to use my image in promotional items (i.e. brochures, web pages etc.)

Signature _____

Date _____