



North Carolina A & T State University
TRiO Student Support Services
1601 E. Market Street
212 Murphy Hall
Greensboro, NC 27411
Phone: (336) 334-7982
Fax: (336) 256-0209

TRiO Student Support Services Interest Application-Summer Bridge

Please complete the following interest application and return to the above address (mail or fax); your or a SSS staff member. You will be contacted in order to receive more information about the SSS Project within a few days.

Name:		Student ID:	
Birth Date:		Gender: M or F	
Mailing Address:			
City		State	Zip:
Cell Phone Number:		Home Phone Number:	
Age:		NCATSU Email Address:	
Citizenship: <input type="checkbox"/> United States Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Other _____			
Did your MOTHER graduate from college with a 4-year degree? <input type="checkbox"/> NO <input type="checkbox"/> YES			
Did your FATHER graduate from college with a 4-year degree? <input type="checkbox"/> NO <input type="checkbox"/> YES			
Are you receiving financial aid? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, are you considered an <input type="checkbox"/> Independent Student OR <input type="checkbox"/> Dependent Student			
If No, check the reason(s): <input type="checkbox"/> Have not applied <input type="checkbox"/> Was not eligible <input type="checkbox"/> Other: _____			
Classification: <input type="checkbox"/> Incoming Freshman <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Transfer			
Living Learning Community: I understand that if I am accepted into the TRiO SSS program I will be assigned to the TRiO SSS Living Learning Community Residence Hall for the Fall & Spring of my freshman year: Signature _____ Date: _____			
What degree are you seeking? <input type="checkbox"/> Bachelor <input type="checkbox"/> Grad Student <input type="checkbox"/> College Entry <input type="checkbox"/> 1 st yr never attended <input type="checkbox"/> 1 st yr attended before <input type="checkbox"/> other Were you in a Previous TRiO Program? UB SSS TS EOC			

I am interested in learning more about the TRiO SSS Project of NCATSU. Please call me or send me a TRiO SSS Application Packet to the address above if I am eligible. I understand that completed this form does not guarantee me placement into the program.

Signature _____

_____ Date