



CAEO CAMPUS-BASED PROGRAMS PARTICIPANT APPLICATION, PT. 1



Please Type or Print in Blue or Black Ink.

STEP 1: Please answer the following questions about yourself.

a. What is your name?

Last Name

[Grid for Last Name]

First Name

[Grid for First Name]

Middle Initial

[Grid for Middle Initial]

b. What is your mailing address?

Street Address

Apt. #

City

State

Zip

c. What is your home phone number?

([Grid]) [Grid] - [Grid]

d. What is your cell phone number?

([Grid]) [Grid] - [Grid]

e. What is your work phone number?

([Grid]) [Grid] - [Grid]

f. What is your e-mail address?

@

STEP 2: Please answer the following questions about yourself.

a. What is your NSHE ID number?

[Grid]

b. What is your social security number?

[Grid] - [Grid] - [Grid]

c. What is your birthdate?

[Grid] / [Grid] / [Grid]

d. Are you Hispanic or Latino?

YES

NO

e. What is your race?

(Please check all boxes that describe you.)

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

f. What is your gender?

Female

Male

h. What is your major(s)?

g. What is your minor(s)?

i. Are you pursuing a certificate in STEM or Health Sciences?

YES

NO

j. Are you interested in majoring in STEM or Health Sciences?

(Answer only if your current major is NOT in STEM or Health Sciences.)

YES

NO

k. How interested are you in pursuing a Ph.D. after you finish your bachelor's degree?

Very interested

Interested

Don't know

Not interested

STEP 3: Please answer the following question about yourself.

a. Are you a U.S. citizen?

YES

NO, but I am a Permanent Resident.

My Permanent Resident Alien Number is:

A [Grid]

NO; I am not a U.S. citizen, and I am not a permanent resident.

STEP 4: Please answer the following questions about your parents and about yourself.

a. Has your mother received/earned a 4-year college degree?

YES

NO

b. Has your father received/earned a 4-year college degree?

YES

NO

c. Which parent did you regularly reside with and receive support from during your childhood (i.e., until you were 18 years old)?

(Please check only one box.)

Both Mother and Father

Mother only

Neither Mother nor Father

Father only

STEP 5: Please answer the following questions about yourself.

a. Are you married?

YES NO

b. Do you have children or other dependents (other than a spouse) who receive more than half of their support from you?

YES NO

c. At any time since reaching 13 years of age, were you an orphan, in foster care, or a ward of the court?

YES NO

- d. Prior to reaching 18 years of age, were you an emancipated minor or did you have a court-appointed legal guardian? YES NO
- e. Are you serving on active duty (for other than training purposes) in the U.S. Armed Forces? YES NO
- f. Are you a U.S. Armed Forces veteran who was on active duty & was released under a condition other than dishonorable? YES NO
- g. Are you in college and working on a master's (e.g., M.A., M.S.), professional (e.g., M.D., J.D.), or doctoral degree? YES NO
- h. Are you less than 18 years of age and have no parent or guardian? YES NO
- i. Are you homeless (i.e., you lack a fixed, regular, & adequate nighttime residence) or are at risk of becoming homeless? YES NO

STEP 6: You must answer the following questions about yourself if you are at least 24 years old or you answered YES to any question in STEP 5. Your parent(s) must answer the following questions about themselves if you are less than 24 years old and you answered NO to all questions in STEP 5.

a. What is the total number of persons (including you) in your family?

b. What was your family's taxable (not total) income from the last calendar year? (Please check only one box. Then, provide the requested income information.)

My family's taxable (not total) income from the last calendar year was: \$, .00

Note: Taxable income can be found on the federal income tax return.
On IRS Form 1040, see line 43.
On IRS Form 1040A, see line 27.
On IRS Form 1040EZ, see line 6.

My family did not file a federal income tax return for the last calendar year. My family's total income from the last calendar year was: \$, .00

My family had no taxable income during the last calendar year.

STEP 7: Please read the following statement and then sign and date below it. If you (the student) are less than 24 years old and answered NO to all the questions in STEP 5, your parent or legal guardian must also read the following statement and then sign and date below it.

By signing this application, I attest that all the information on this application is true. Moreover, I authorize the release of the student's official academic records to the Center for Academic Enrichment and Outreach (CAEO) at the University of Nevada, Las Vegas, understanding that the information in these records will be used only to assess the student's need for TRiO, AANAPISI, or LSAMP program services; discern the student's educational progress; evaluate the effectiveness of program activities; and fulfill program-reporting requirements. Finally, I authorize CAEO to use the student's name, statements and likeness, without charge, for promotional purposes in CAEO publications, advertising, video, and other formats.

_____ / ____ / ____
Student's Signature **Date**

_____ / ____ / ____
Signature of Student's Parent or Legal Guardian **Date**

FOR OFFICE USE ONLY	The 20__ federal programs annual low-income level for a family unit with _____ members is:	\$, .00	
Eligibility Factors 01 <input type="checkbox"/> FR 07 <input type="checkbox"/> SOPH 01 <input type="checkbox"/> JR 07 <input type="checkbox"/> SR 02 <input type="checkbox"/> URM 03 <input type="checkbox"/> AANAPI 04 <input type="checkbox"/> LI 05 <input type="checkbox"/> FG 06 <input type="checkbox"/> DI 07 <input type="checkbox"/> U.S. citizen or permanent resident 08 <input type="checkbox"/> STEM major 09 <input type="checkbox"/> HSci. minor 10 <input type="checkbox"/> Math or Sci. Ed. major 11 <input type="checkbox"/> STEM or HSci. minor 12 <input type="checkbox"/> Math or Sci. Ed. minor 13 <input type="checkbox"/> STEM or HSci. certif. 14 <input type="checkbox"/> STEM or HSci. interest 15 <input type="checkbox"/> Interest in earning Ph.D. 16 <input type="checkbox"/> ACT math score _____ 17 <input type="checkbox"/> SAT math score _____ 18 <input type="checkbox"/> ACT science score _____ 19 <input type="checkbox"/> UNLV cum. GPA _____	Eligibility Categories <input type="checkbox"/> LSAMP—Blue (Freshman) <input type="checkbox"/> LSAMP—Purple (Junior) <input type="checkbox"/> TRiO SSS—LI & FG <input type="checkbox"/> TRiO SSS—LI & DI <input type="checkbox"/> TRiO SSS—LI only <input type="checkbox"/> TRiO SSS—FG only <input type="checkbox"/> TRiO SSS—DI only <input type="checkbox"/> AANAPISI—LI AANAPI <input type="checkbox"/> AANAPISI—FG AANAPI <input type="checkbox"/> AANAPISI—LI only <input type="checkbox"/> AANAPISI—FG only <input type="checkbox"/> TRiO MCN—LI & FG <input type="checkbox"/> TRiO MCN—UDM	Project <input type="checkbox"/> LSAMP <input type="checkbox"/> TRiO SSS-REG <input type="checkbox"/> TRiO SSS-STEM <input type="checkbox"/> AANAPISI-REG <input type="checkbox"/> AANAPISI-STEM <input type="checkbox"/> TRiO MCN Date of Application Entry into Database ____ / ____ / ____ Initials of Data Entry Staff _____	<input type="checkbox"/> Recommended Approval <input type="checkbox"/> Not Recommended Reason: _____ Advisor (Print name) _____ Advisor (Sign & Date) _____ <input type="checkbox"/> Recommended Approval <input type="checkbox"/> Not Recommended Reason: _____ Director (Print name) _____ Director (Sign & Date) _____ <input type="checkbox"/> Approved <input type="checkbox"/> Denied Reason: _____ P.I. or P.I. Designee (Print Name) _____ P.I. or P.I. Designee (Sign & Date) _____
<p><small>Notes: A determination of independence based on YES responses to question 5h or 5i must be supported by an attached TRiO Participant Application Addendum, which is completed and signed by a LEA liaison, RHYA director/designee, or ESG director/designee. If the applicant is a college student for whom a financial aid administrator has made a documented determination of independence, a CAEO Participant Application Addendum must be completed and signed by a financial aid administrator and attached. If the applicant is a dependent college student and no parent signature appears on this document, parent-income information from another source must be attached for any determination of LI status to be valid (HEA, SEC. 402A(e)(1)(B-D)).</small></p>			



CAEO CAMPUS-BASED PROGRAMS
PARTICIPANT APPLICATION, PT. 2
 SUPPLEMENTAL INFORMATION



Please Type or Print in Blue or Black Ink.

STEP 1: Please answer the following questions.

a. What is your name?

Last Name

First Name

Middle Initial

b. What is your NSHE ID number?

STEP 2: Please answer the following questions about yourself.

Were you a participant in:

- a. ...UNLV's TRiO Upward Bound program while you attended high school? YES NO Don't know
- b. ...UNLV's TRiO Talent Search program while you attended middle or high school? YES NO Don't know
- c. ...UNLV's TRiO Educational Opportunity Center (a.k.a., Adult Educational Services) program? YES NO Don't know
- d. ...UNLV's GEAR UP program while you attended middle or high school? YES NO Don't know
- e. ...a TRiO Student Support Services program while attending another college? YES NO Don't know

If you responded YES to question e, what college were you attending while you were a participant in a TRiO Student Support Services program?

STEP 3: Please answer the following questions about your interest in select services that CAEO's campus-based programs provide.

How interested are you in:

- a. ...receiving **one-on-one tutoring**? Very interested Interested Don't know Not interested
- b. ...**being mentored** by a more advanced student? Very interested Interested Don't know Not interested
- c. ...**becoming a trained mentor** to a less advanced student? Very interested Interested Don't know Not interested
- d. ...**conducting research** under the guidance of a UNLV professor? Very interested Interested Don't know Not interested
- e. ...**completing an internship** with a UNLV industry partner? Very interested Interested Don't know Not interested
- f. ...**accessing opportunities for need-based grants and scholarships**? Very interested Interested Don't know Not interested
- g. ...receiving **career counseling**? Very interested Interested Don't know Not interested
- h. ...receiving **assistance with selecting courses**? Very interested Interested Don't know Not interested
- i. ...receiving **financial-aid counseling**? Very interested Interested Don't know Not interested
- j. ...receiving **financial-literacy information**? Very interested Interested Don't know Not interested

STEP 4: Please answer the following question about your interest in joining CAEO's campus-based programs.

In which CAEO campus-based programs would you like to participate? (Check all that apply.)

- LSAMP
- TRiO Student Support Services
- AANAPISI
- TRiO McNair
- Don't know or uncertain

STEP 5: Please read the following statement and then sign and date below it.

By signing this supplemental information form, I attest that all the information on this form is true.

 Student's Signature

_____/_____/_____
 Date