

# The Student Support Services Program (SSSP) MEMBERSHIP APPLICATION PACKET

The TRIO Student Support Services Program is funded one hundred percent by the U.S. Department of Education.

## SUCCESS PLAN OF ACTION (S.P.A.)



<b>OFFICE USE ONLY</b>	
Date: _____	
Cohort Year: 20 _____	
<b>STUDENT'S NAME:</b>	
<b>REVIEWED BY TRIO SSSP Counselor &amp; Date:</b>	
<b>ELIGIBILITY CRITERIA:</b>	
<input type="checkbox"/> First-Generation & Low-Income	
<input type="checkbox"/> Disabled & Low-Income	
<input type="checkbox"/> Low-Income Only	
<input type="checkbox"/> First-Generation Only	
<input type="checkbox"/> Disabled Only	
=====	
<b>STATUS:</b>	
<input type="checkbox"/> Accepted	Date: _____
<input type="checkbox"/> Waitlist	Date: _____
<input type="checkbox"/> Denied/Not Eligible	Date: _____



**COME...Be Brave  
and Enter the Tiger's Den!**



You have brains in your head. You have feet in your shoes.  
You can steer yourself in any direction you choose.

You're got TRIO SSS on your side, and you know what you  
know. And you are the person who'll decide where to go.

And will you succeed? Yes! You will, indeed!  
(98 and  $\frac{3}{4}$  percent guaranteed).

*Dr. Seuss*

**YOU CAN DO IT. And We Can Help!**

Your goal of earning your college degree will take a lot of dedication and determination but you don't have to go it alone. Voorhees University's TRIO Student Support Services (SSS) Program is here to help you accomplish your dream!

We are funded by the U. S. Department of Education to help our first-generation, income qualified and/or members with disabilities who are U.S. citizens/permanent residents and have academic needs to successfully pursue a college education by providing academic and personal support.

By completing and signing this document, you allow us to certify your eligibility in at least one of the qualifying areas to meet Federal Regulations.

**Voorhees University**

**TRIO Student Support Services Program (TRIO SSSP)**

**Post Office Box 678 \* 430 Porter Road \* Jessie Dorsey Green Building  
Denmark, South Carolina 29042**

**TRIO SSSP STAFF**

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The TRIO Student Support Services Program is funded one hundred percent by the U.S. Department of Education.

Total five-year cycle of Federal Funding: \$1,464,495.00

Number of students funded to serve per year: 175



Voorhees' TRIO SSSP, an educational opportunity program funded one hundred percent by the U.S. Department of Education. The information provided on this form will be held in the strictest confidence. All questions are designed to assist in better planning and serving your needs.

Name: \_\_\_\_\_ VU ID# \_\_\_\_\_  
Last First Middle

Permanent Home Address: \_\_\_\_\_  
PO Box# Street Address City/Town State Zip Code

Personal Email Address: \_\_\_\_\_  
 Cell # \_\_\_\_\_ Home # \_\_\_\_\_

Address if you live off campus while attending Voorhees: Post Office Box# \_\_\_\_\_  
Street Address City/Town State Zip Code

Father's Name \_\_\_\_\_ Living  or Deceased  Phone # ( ) \_\_\_\_\_ - \_\_\_\_\_

Mother's Name \_\_\_\_\_ Living  or Deceased  Phone # ( ) \_\_\_\_\_ - \_\_\_\_\_

**MARITAL STATUS:** Single  Married   
 Divorced  Widowed   
**DATE OF BIRTH:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (mm/dd/yyyy)  
**GENDER:** (Check one): Female  Male   
**How many Brothers do you have?** \_\_\_\_\_ **Sisters?** \_\_\_\_\_  
**Are You a Veteran?** Yes  No   
**Do you have a Parent who is/was a Veteran?**  
 Yes  No   
**Are you right-handed**  **or left-handed**  ?

**ELIGIBILITY ----- CITIZENSHIP**  
 Are you a: U. S. citizen  or a permanent resident   
**ELIGIBILITY ----- ETHNIC IDENTITY:**  
 Asian  Black/African American  Caucasian   
 Hispanic  Native American/Alaskan Native   
 Other  (Specify) \_\_\_\_\_  
**Name the TRIO Program if you participated: (i.e., EOC, GEAR-Up, SSS, Talent Search, Upward Bound, or Other:**  
 \_\_\_\_\_  
**Do you receive vocational rehabilitation benefits?**  
 Yes  No

**ELIGIBILITY ----- Please check all that apply:**  
 I am a first-generation college student - Neither of my parents graduated from a four-year institution.  
 I have a documented learning or physical disability. Attach your IEP, 504C Plan, or Other Document from an Official Professional Health or Other Official  
 English is my second language.

**ELIGIBILITY ----- Please check all that apply:**  
 Are you a dependent  or independent student  ?  
 Are you an orphan  or ward of the court  ?  
 Are you a homeless youth? Yes  No   
 (i.e., if you lack a fixed, regular, consistent nighttime residence)  
 Are you in foster care? Yes  No

**FINANCIAL AID:** Are you receiving Yes  No   
 If No, check the reason(s): Not applied  Not eligible  Other: \_\_\_\_\_

**HOW DID YOU HEAR ABOUT SSSP?**  Advisor  Friend  TRIO Member  Instructor/Professor/Coach/Staff  
 Website  Referred by \_\_\_\_\_  Week of Welcome/Tiger Connect  
 Other-please specify \_\_\_\_\_

**INCOME VERIFICATION** Voorhees' TRIO SSSP will use the [USDE Annual Income Levels](#) along with one of the following documents to determine INCOME ELIGIBILITY

- A U.S. IRS Tax Return Transcript from the IRS website: <https://www.irs.gov/individuals/get-transcript>.
- FAFSA/SAR (Student Aid Report). Can be retrieved from website: <https://studentaid.ed.gov/sa/fafsa>
- Verification of family income from another governmental source. (Ask staff for this form)
- A signed statement regarding income from independent student or parents.



**SUCCESS PLAN OF ACTION (SPA)**

**NEED FOR ACADEMIC SUPPORT -- INDIVIDUAL NEEDS ASSESSMENT PROFILE**

Name \_\_\_\_\_ Major/Program of Study \_\_\_\_\_

1. How can TRIO SSSP help you? \_\_\_\_\_  
\_\_\_\_\_
2. We assume that you plan to graduate from Voorhees University; but if your answer is No, Why Not? \_\_\_\_\_
3. Describe activities you like to participate in. \_\_\_\_\_  
\_\_\_\_\_
4. What barriers might prevent you from being a successful college student or earning a degree? \_\_\_\_\_  
\_\_\_\_\_
5. This semester, I plan to \_\_\_\_\_
6. In the future, I plan to \_\_\_\_\_

**SELF ASSESSMENT**

WHAT CAN STUDENT SUPPORT SERVICES HELP YOU WITH? Check All That Apply			
Improve writing skills (spelling, grammar, vocabulary)	<input type="checkbox"/>	Career Planning/Graduate School Opportunities (Selecting A Career, Selecting a Major, Job Interviewing)	<input type="checkbox"/>
Improve mathematics skills and/or reduce math anxiety	<input type="checkbox"/>	Become more involved on campus	<input type="checkbox"/>
Increase reading comprehension, reading speed, memory)	<input type="checkbox"/>	Familiarity with campus resources	<input type="checkbox"/>
Improve study habits, study more productivity, note-taking	<input type="checkbox"/>	Need help completing FAFSA	<input type="checkbox"/>
Increase my academic average/gpa (grade point average)	<input type="checkbox"/>	Afraid of failing in college	<input type="checkbox"/>
Clarify my career goals	<input type="checkbox"/>	Health concerns	<input type="checkbox"/>
Increase my self-confidence	<input type="checkbox"/>	Difficulty meeting new people	<input type="checkbox"/>
Clarify my values	<input type="checkbox"/>	Financial concerns	<input type="checkbox"/>
Need help with disabled services	<input type="checkbox"/>	Improve test taking skills	<input type="checkbox"/>
May benefit from personal counseling	<input type="checkbox"/>	Limited computer and/or Internet skills	<input type="checkbox"/>
Cultural/Social Enrichment	<input type="checkbox"/>	Unsure of college procedures	<input type="checkbox"/>
Improve time management skills	<input type="checkbox"/>	Difficulty budgeting money	<input type="checkbox"/>
Difficulty participating in discussions	<input type="checkbox"/>	Problems at home	<input type="checkbox"/>
Limited or no support from family/friends	<input type="checkbox"/>	Other	<input type="checkbox"/>
DESCRIBE Your Academic/Personal Strengths, Abilities & Skills		LIST Any Weaknesses You Need Help with and Anything Else We Need to Know About You.	

**SUCCESS PLAN OF ACTION (S.P.A.)**



**STUDENT PARTICIPATION AGREEMENT**

As a TRIO Student Support Services Program (SSSP) Participant, we ask that you make a commitment to yourself and the TRIO program, so you may fully benefit from the services TRIO has to offer. Your participation in the TRIO SSS Program will support successful progress toward timely degree completion and the attainment of post-graduate goals.

Our staff will work closely with you to provide comprehensive services. As a participant – you will be responsible for adhering to the following recommendations for success. Your affixed signature at the bottom of this page signifies that you agree to all the recommendations below. Failure to adhere to the below policies and procedures will result in denial of academic, career, and educational services. The SSS Program will email you a copy of this agreement and email reminders to you also.

**EVERY SEMESTER:**

- ✦ Attend two or more **TRIO SSS** workshops/seminars.
- ✦ Work with a **TRIO SSS** Staff to develop/ implement my SUCCESS PLAN of ACTION (SPA) designed to help me complete my post-secondary education and career goals.
- ✦ Meet with my assigned **TRIO SSS** counselor twice a month.
- ✦ Participate in academic tutoring with ACE, if recommended.
- ✦ Attend at least ten (10) College Assembly/Cultural Activities.
- ✦ Attend a Career Fair and Graduate/Professional School Visitation with the Career Office.
- ✦ Complete assigned Higher Education Financial Wellness Alliance (HEFWA) and Conover Online Modules.
- ✦ Adhere to VU's "Dress Code of Character."

**ON-GOING:**

- ✦ Attend classes regularly and do reasonable progress in all coursework.
- ✦ Receive correspondence from **TRIO SSS** via email, phone, social media and in person.
- ✦ Attend all scheduled appointments or notify the **TRIO SSS** Office if rescheduling is needed.
- ✦ Inform **TRIO SSS** of any changes in an address, phone number, or email.

**ANNUALLY:**

- ✦ Complete a Free Application for Federal Student Aid (FAFSA) by the deadline.
- ✦ Complete Handshake and a Resume with the Career Office, and review and modify when needed.
- ✦ Complete a Scholarship Application.

**ONCE:**

- ✦ Participate in an exit interview before graduating, transferring, or leaving Voorhees.

**STATEMENT OF AGREEMENT AND CONSENT:**

- ✦ I authorize the TRIO Student Support Services Program (TRIO SSSP) at Voorhees University to review my admissions application, placement scores, academic record, demographic information, financial aid reports, transcripts, and grade point average to determine my eligibility, and provide me with services which will contribute to my success at Voorhees.
- ✦ I understand that data collected, plus the information I provide on this document will remain confidential and will be used for grant reporting to the United States Department of Education.
- ✦ I grant permission to the TRIO SSSP staff to contact me for consultation, guidance and/or discussion; to request and share any confidential pertinent reports/other documents relating to me with my parents, guardians, faculty, staff, or other appropriate individuals regarding my academic/social progress whenever deemed appropriate (if applicable) and/or to publish my achievements, awards, accomplishments in newsletters or other media. I further grant permission to the TRIO SSSP staff to release, for education purposes, photographs, and video recordings, with or without audio, of TRIO SSS activities and projects in which I am involved
- ✦ I authorize TRIO SSSP to obtain tracking information for required reporting to the United States Department of Education from the national Student clearinghouse Tracker Service. I authorize TRIO SSSP to send text messages to the cellular phone number maintained on record with the program.
- ✦ I authorize photographs taken related to the program, papers written during the program, and similar items may be used by TRIO SSSP in reports and public information materials.
- ✦ Permission is granted to TRIO SSSP to monitor my academic progress; to obtain and/or release copies of any reports and/or other pertinent documents regarding me as needed, to develop, update my academic and/or career plan(s), to track my progress toward degree completion and to document my participation in the program for reporting purposes to the U.S. Department of Education.
- ✦ I understand that the TRIO SSS Staff may contact me periodically, before and after I have exited the program to follow up on my progress towards my educational goals and for alumni opportunities.
- ✦ By affixing/typing my signature on this TRIO Student Support Services Program Application signifies that I agree under penalty of perjury, that the above information is true and correct, and that all supplemental materials submitted verifying my program eligibility are genuine. Upon verification of your information, you will receive a letter confirming your acceptance into the program.

Student's Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
First Middle Last

TRIO SSSP Counselor's Signature (Interviewer) \_\_\_\_\_ Date \_\_\_\_\_

TRIO SSS Program Director's Signature \_\_\_\_\_ Date \_\_\_\_\_

**TRIO SSS Program Participant should receive a copy of this agreement**