

The Student Support Services Program at Norwalk Community College requests access to the following information for the purposes of maintaining required statistical information and records for the Federal Program Report:

- Admissions Application and Related Materials
- High School Transcripts or G.E.D. Score Reports, and Previous College Transcripts
- Copies of Pell Grant Award or FAF Form
- College Transcript from Norwalk Community College including credit hours attempted, grade point average, credit hours earned toward graduation, courses dropped, remedial or non-credit courses taken
- Periodic Instructor Progress Reports
- Mid-Term and Final Grade Reports

It is not our policy to gather such information without written permission from the student, if 18 years or older, or the signature of a parent or guardian if the student is under 18 years of age.

If you are willing to allow Student Support Services program access to this information, please sign below, or have your parent or guardian sign the form if you are under the age of 18 years.

STUDENT'S CONSENT TO RELEASE INFORMATION

Pursuant to section 438(b) (1) (2) of the Family Educational Rights and Privacy Act of 1974 as amended, and Public Act #77-609, a 1977 Act amending the freedom of Information Statutes and Chapter 55. (Personal data) of Title 4 of the Connecticut General Statutes, I hereby give my consent to Norwalk Community-Technical College to release the specified records pertaining to me to the party indicated on the other side of this form.

I realize that I have the right to request and receive a copy of any material that is released pursuant to this consent; that I can limit the scope of this consent by specifying, in writing, unless a specific termination date is indicated below.

By signing below, you agree that we (Student Support Services) may call, text or email you.

I further realize that the signature of a parent or guardian is necessary to authorize this release of information if I am under 18; and certify, in the absence of the signature of a parent or guardian, that I am age 18 or older.

Signature of Student

Signature of Parent/Guardian

I give permission to use photographs of me for marketing purposes for the Trio program. Yes _____ No _____

Signature of Student

Norwalk Community College
TRiO Student Support Services
Confidential Application

Please PRINT your responses to the questions below. It is important that you complete all of the items.

Banner ID Number _____ **E-Mail** _____

Name _____

Middle Initial

Address _____

Street

Zip Code

Cell Phone _____ **Home Telephone** _____

Are you a United States Citizen? _____ **If No, Are you a Permanent Resident?** _____

Identify my gender as: She ☐ He ☐ Fill in Blank Prefer not to disclose ☐

Marital Status: Married _____ Single _____ Divorced _____

Are you a Veteran? _____

Are you involved in extracurricular activities?	How many hours per week?
Yes	
No	

Are you employed? _____ **If so, how many hours weekly?** _____

Number of people in your family household

Does your family receive any state assistance?

Do either of your parents or your legal guardian currently hold a Bachelor's Degree?

Please indicate your ethnic background (Please check all that apply):

Hispanic/Latino

Black or African American

American Indian/Alaskan Native

White

Asian

Native Hawaiian or other Pacific Islander

Fill in blank

Who referred you to the TRiO Student Support Services Program? _____

What is/was your family's attitude toward you attending college? (Check one)

_____ discouraged you _____ encouraged / expected you to go
_____ left the decision to you _____ insisted that you go

English your native language? Yes _____ No _____

If No, what is your native language? _____

Do your parents (guardians) speak a language other than English at home? _____

If Yes what other language(s) is spoken at home? _____

Financial Aid Information

Are you receiving financial aid from Norwalk Community College? Yes _____ No _____

Disability Information

Do you have a documented physical/learning disability? _____

If Yes, Please specify the disability: _____

What accommodations have you received for your disability? _____

NCC Academic Courses

Current Writing Class _____ Current Math Course _____

Academic History

High School you attended _____ Year _____

OR

Received a High School Equivalency Diploma (GED) what Year? _____

My signature below certifies that all the information on this application is accurate.

(Student Signature)