PO Box 9020 Tyler, TX 75711-9020 P: 903-510-2612 F: 903-595-6581



PY 2024-25

TRIO Program

	Confide	ential Application for Pro	gram Services	
Name:		TJC A#	Date of Birth:	
Address:		City, Sta	te, Zip:	_
County:	Telephone:	E-mail:		
Gender: [ ] Mal Are you curre	e [] Female Which one of your ntly a participant in another TF	parents completed a 4-yr degree? [ ]	ried, separated, divorced, or widowed Neither [ ] Father [ ] Mother [ ] Both	
Are you the Spo	ouse or Child of active duty militar	Yes [] No     Active Duty? [] Yes [       Yy? [] Spouse [] Child       You an eligible non-citizen? [] Yes [	-	
Alien Registrati	on Number A			
Ethnic Category	r: [ ] Hispanic or Latino [ ] Not Hisp	panic		

**Race/Ethnicity:** (check all that apply) [] American Indian or Alaska Native [] Hispanic/Latino of any race [] Asian [] Black or African American [] White / Caucasian [] Native Hawaiian or Other Pacific Islander [] Other \_\_\_\_\_\_

Is English your first language? [ ] Yes [ ] No

FINANCIAL STATUS	HIGHEST LEVEL OF EDUCATION	SERVICES NEEDED		
<ul> <li>[] Independent Student [] Dependent Student</li> <li>[] Senior in High School</li> <li>What is the size of your family household?</li> <li>[]1[]2[]3[]4[]5[]6[]7[]8+</li> <li>Family's Total Taxable Income*</li> </ul>	<ul> <li>[ ] Senior in High School Where?</li> <li>[ ] High School Graduate Where?</li> <li>[ ] Enrolled in GED Program Last Grade Attended and School</li> </ul>	<ul> <li>[] GED Classes / Test</li> <li>[] Career Information</li> <li>[] Financial Literacy Information</li> <li>[] Admissions / Application Assistance</li> <li>[] Financial Aid Assistance</li> <li>[] FAFSA Verification Assistance</li> <li>[] Adult Petition</li> </ul>		
<ul> <li>[] 17,235 or less</li> <li>[] 41,356 - 47,385</li> <li>[] 17,236 - 29,265</li> <li>[] 47,386 - 53,415</li> <li>[] 23,266 - 29,295</li> <li>[] 53,416 - 59,445</li> <li>[] 29,296 - 35,325</li> <li>[] 59,446 - or more</li> <li>[] 35,326 - 41,355</li> <li>[] Did not have to file</li> </ul> Household Funding Sources <ul> <li>[] Food Stamps</li> <li>[] Unemployment Benefits</li> <li>[] TANF</li> <li>[] Social Security Benefits</li> <li>[] Medicaid</li> <li>[] Public Housing</li> <li>[] Veteran's Benefits</li> <li>[] Monthly Amt?</li> </ul>	<ul> <li>[] GED Graduate Year?</li></ul>	<ul> <li>[] Forollment / Course Selection</li> <li>[] Academic Coaching / Counseling</li> <li>[] ACT Prep</li> <li>[] High School Transcript</li> <li>[] GED Transcript</li> <li>[] Postsecondary Transcript</li> <li>[] Financial Aid Suspension Appeal</li> <li>[] Academic Suspension Appeal</li> <li>[] Defaulted Student Loan</li> <li>[] Other</li> <li>[] Other</li> </ul>		

Certification and Signature					
I certify that all of the above information is true	I certify that the information provided concerning	I certify that the information provided concerning			
and completed to the best of my knowledge	citizenship is accurate	taxable income is accurate			
I authorize the release of my college records to	I understand that the completion of this application	I authorize the use of my photograph in TRIO EOC			
EOC TRIO Program	does not guarantee acceptance in the EOC program	publication and media releases			
I understand that in order to receive TJC EOC Services, I must provide proof of income. The Tyler Junior College Educational Opportunity Center is authorized to					
access or release family income, admissions, academic and/or financial aid information deemed necessary to assist me in achieving my educational goals or in					
meeting the program reporting requirements of the US Department of Education. A copy of this signed statement shall serve as authorization for the					
release/sharing of information.					

Signature \_\_\_\_

\_Date\_\_

#### Attachment S Statement:

Tyler Junior College TRIO Educational Opportunity Center is 100% federally funded by the U.S. Department of Education. The TJC EOC annual budget is \$283,920.00 to serve 1000 participants, who are from Anderson, Cherokee, Henderson, Smith, Van Zandt, and Wood Counties that are non-traditional, low-income, first-generation college students, and students that have disabling conditions.

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# STATEMENT OF FAMILY INCOME

CLIENT NAME \_\_\_\_\_

□ Independent □ Dependent

Date\_\_\_\_\_

PARENT NAME (If Minor or Dependent)

NUMBER IN HOUSEHOLD

I (or my dependent) applied for services from the TJC Educational Opportunity Center (TJC EOC) and in order to satisfy Department of Education requirements to document family income, I certify that the following is true and correct to the best of my knowledge:

### **I** I, the Parent, am not required to file a Tax Return

## **My** household is not required to file a Tax Return

# The source(s) of income for 2023 were (check all that apply)

- Wages from employment in the amount of \$\_\_\_\_
- SSI/Other Social Security Benefits in the amount of \$\_\_\_\_\_
- Child Support in the amount of \$\_\_\_\_\_

TOTAL INCOME FOR 2023 was: \$\_\_\_\_\_

**I** My household did or will file a 2023 tax Return, but no copy is available.

FILING STATUS	ADJUSTED GROSS INCOME	_	STANDARD DEDUCTION	=	TAXABLE INCOME
[] Single	\$	-	\$ 13,850	=	\$
[] Head of household	\$	_	\$ 20,800	=	\$
[] Married Joint Return or Widowed with Dependent	\$	_	\$ 27,700	=	\$
[] Married Filing Separate	\$	_	\$ 13,850	=	\$

COMMENTS:

The TJC EOC representative has assured me that the information provided herein is considered **confidential** and is used only to determine eligibility for EOC services or other income-based opportunities that I, or my dependent, may seek.

Signature\_

Client Parent of Minor/Dependent Client