



GO Project
PCC, GG-217
Phone: (562) 938-3233

TRiO GO Project Application

The Long Beach City College TRiO program, Growth and Opportunities Project (GO Project), is funded by a TRiO Student Support Services grant from the U.S. Department of Education. This program serves the academic needs of first-generation, low-income and students with disabilities.

TRiO programs do not provide financial aid or scholarships; the support programs are designed to increase retention, graduation and transfer success for program participants. The programs work primarily with students interested in transferring to a 4-year college or university after receiving their AA/AS Degree at Long Beach City College. TRiO programs provide opportunities for students to learn about careers and educational opportunities beyond Long Beach City College.

**The Department of Education allows program participants to receive services up to four years as they prepare to earn an Associate's degree and transfer to a 4-year college/university.

The GO Project assist participants through effective counseling, academic support including one-on-one tutoring, exposure to transfer institutions, career and self-development workshops, and assistance with the financial aid, scholarship and transfer processes.

To be considered for the GO Project, please complete the attached application and submit the required documentation to: **Long Beach City College, TRiO GO Project GG-217, 1305 E. Pacific Coast Hwy, Long Beach, CA 90806.** The information you provide will be kept confidential and used only to determine your eligibility for the program. For additional information please call (562) 938-3233.

Please make note of the following before submitting your application:

- You must be willing and eligible to take Math 110 or higher, English 105 or higher, and have a minimum 2.0 GPA.
- You must be enrolled in 6* or more units per semester at Long Beach City College, with the goal to transfer to a four-year institution upon graduating with an AA/AS degree or Certificate from Long Beach City College.
*A student taking less than 9 units may still be eligible for the program if verification supports the need for a reduced course load through the Disabled Students Programs & Services office.
- You must have completed a Free Application for Federal Student Aid (FAFSA) on file with Long Beach City College.
- Attach disability verification form (you can get this form from the TRiO office) signed by DSPS.
- Parent signature must be provided on application for dependent student income verification.
- Sign the application certifying the information you have provided is correct. If you have any questions or need assistance completing the application, please call or stop by the TRiO GO Project Office located on the Pacific Coast Campus, Room GG-217

We look forward to helping you reach your educational goals!

STUDENT INFORMATION

Name: _____
Last First Middle

LBCC Student ID# _____ Social Security # _____
(required and used for reporting purposes only)

Address: _____
Street City State Zip Code

Phone numbers: *(Home)* _____ *(Cell/Other)* _____

Email address: _____

Date of birth: _____ Gender: _____ Marital status: _____

Are you a Veteran? Yes No Are you a foster youth or ward of the court? Yes No

Do you have children? Yes No

Ethnicity: *(check one)*

- American Indian or Alaska Native Asian Black or African-American
 Hispanic or Latino White Native Hawaiian or other Pacific Islander
 More than one race *(please list):* _____

How can the TRIO program best support your educational goals? *(Check all that apply)*

- Transfer counseling Personal counseling Skill development workshops
 Academic counseling Financial and economic literacy Field trips to colleges and universities
 Career counseling Scholarship application assistance Educational and cultural activities
 Financial Aid counseling Tutoring

PROGRAM ELIGIBILITY

Federal regulations state that in order to be eligible for a TRiO Program an applicant must: (1) Be a U.S. citizen or permanent resident, (2) have a verified disability, and (3) have an academic need that the program is able to assist. The following questions will help the program determine your eligibility.

Citizenship Status

- United States Citizen
 Permanent Resident

Permanent Resident Card # _____
(Attach a copy of Permanent Resident card)

Verified Disability

Do you have a verified disability? Yes No

If yes, are you registered with the LBCC Disabled Student Program and Services (DSPS)? Yes No

Type of Disability

- Physical
 Vision
 Hearing
 Learning Disability
 Psychological
 Other: _____

Academic Need *(Please check all that apply)*

- I am currently taking a preparatory level Math and/or English course (example: ENGL 801AB, MATH 815)
- I have a high school or college GPA below a 2.50
- I have been, or currently am, on Academic Probation or Academic Disqualification
- I have multiple withdrawals ("W") in degree or transfer required courses
- I have difficulties passing transfer level courses
- English is not my native language
- I have been out of school for more than 5 years
- I am not aware of the transfer application process to a four-year institution
- I am not aware of the financial aid application process

Income Verification

INDEPENDENT STUDENT: Please provide most recent income or tax information. Tax information is found on the following forms: 1040 line 43, 1040-A line 27, or 1040-EZ line 6.	DEPENDENT STUDENT: Parent/Guardian must provide their most recent income or tax information. Tax information is found on the following forms: 1040 line 43, 1040-A line 27, or 1040-EZ line 6.
What is the total number of persons (including you) in your family? _____ <input type="checkbox"/> I FILED a federal income tax return last year in the state of: _____ AND MY TAXABLE INCOME* (not Total Income) was \$ _____ <input type="checkbox"/> I DID NOT FILE a federal income tax return for the last calendar year, but my TOTAL INCOME was \$ _____. Please circle your source of income: <i>Full-time job · Part-time job · Welfare · AFDC · SSI · SSDI · Child Support · Veterans · Benefits · Unemployment · Other Source</i> _____	What is the total number of persons (including you) in my PARENTS/GUARDIANS family? _____ <input type="checkbox"/> My PARENTS/GUARDIANS FILED a federal income tax return last year in the state of: _____ AND THEIR TAXABLE INCOME* (not Total Income) was \$ _____ <input type="checkbox"/> My PARENTS/GUARDIANS DID NOT FILE a federal income tax return for the last calendar year, but their TOTAL INCOME was \$ _____. Please circle source of income: <i>Full-time job · Part-time job · Welfare · AFDC · SSI · SSDI · Child Support · Veterans · Benefits · Unemployment · Other Source</i> _____ Parent/Guardian Signature: _____

First Generation College Student Status

Did either of your parents (natural or adoptive), receive a bachelor's degree from a college or university?
Mother: Yes No *Father:* Yes No

EDUCATIONAL HISTORY AND GOALS

Current major(s): _____

What is your educational goal at LBCC: *(only check one)*

- Transfer with an Associate Degree Transfer without an Associate Degree

What semester and year do you think you will graduate and/or transfer *(example: Fall 2020)*? _____

Where would you like to transfer? *(Please list in order of preference)*

1. _____
2. _____
3. _____

College(s) previously attended: _____

Are you a High School graduate? Yes No

If yes, please list **high school name** and **graduation date**: _____

High school cumulative GPA: _____ ACT/SAT score(s): _____

If you did not graduate from high school, did you finish a GED or high school completion program? Yes No

If yes, please list the month and year completed: _____

Have you participated in, or currently in, any of the following programs: *(Check all that apply)*

- | | | |
|--|--|---|
| <input type="checkbox"/> EOPS/CARE | <input type="checkbox"/> CALWORKS | <input type="checkbox"/> Veterans Affairs |
| <input type="checkbox"/> International Student | <input type="checkbox"/> Disabled Student Program & Services | <input type="checkbox"/> Upward Bound |
| <input type="checkbox"/> PUENTE | <input type="checkbox"/> Long Beach Promise Pathways | <input type="checkbox"/> Project LAUNCH |

APPLICATION QUESTIONS

Please answer the following short answer questions. Your responses to these questions are required and will help the program determine your motivation to participate in the TRIO SSS Program. Please write legibly and use complete sentences. Use the back of the form, or attach an additional paper if you need more space.

1. What are your educational goals and how do they support your ultimate career goal?

2. What are the potential circumstances that might get in the way of you reaching your academic or career goals?

3. Is there anything else that should be taken into consideration in evaluating your application to the TRIO Student Support Services Program?

CERTIFICATION

I certify that the information submitted on this application is true and correct, and that all documentation is accurate. I authorize the release of my information and academic records to the TRIO SSS program to determine my eligibility for the program and for statistical reporting purposes. I understand that the goal of TRIO SSS is to increase the retention, graduation, and transfer rates of program participants; therefore, if admitted into the program, I will actively participate in the TRIO program until I complete my educational goal at LBCC.

Student Signature

Date

Please submit your completed application to the **TRIO GO Project office in GG-217 (PCC)**.

STAFF USE ONLY

Date Application Received: _____

Notes:

Received By: _____

Code(s): D LI FG

Approved By Director: _____

Date: _____