UNIVERSITY OF GUAM
UNIBETSEDÅT GUÅHAN

TRiO
STUDENT SUPPORT SERVICES

PROGRAM YEAR
2026-2027

APPLICATION INSTRUCTIONS

TRiO Student Support Services is federally funded through the U.S. Department of Education. To determine your qualifications for this program, please complete this application in its entirety using **BLUE** *or* **BLACK** ink. The information you provide is strictly confidential. Only completed applications will be accepted, though they will not guarantee admission to the program. Applications should be submitted to the **TRiO SSS** office at the University of Guam Calvo Field House, 2nd floor. For more information, you may contact us at 671-735-2248/58.

Official Use Only:
ID, FG, FGLI, LI

Before submitting your application to the program, make sure you have the following:

- ☐ Completed TRiO SSS Application
- ☐ Current class schedule
- ☐ Verification of Disability (if applicable)
- ☐ Signed copy of most recent Federal Income Tax Return/Form
- ☐ Valid passport or birth certificate
- ☐ Complete *Needs Assessment Survey* (Last page of application)

DEMOGRAPHIC INFORMATION

Full Name:		
Last	*First*	*M.I.*
Date of Birth:	SSN:	UOG Student ID No.:
Address:		
Street or P.O. Box	*City*	*State* *Zip Code*
Home Phone:	Cell Phone:	
Personal E-mail Address:	UOG Gotritons E-mail Address:	

RACE/ETHNICITY:	**MARITAL STATUS:**	**GENDER:**	**CITIZENSHIP:**
☐ American Indian/Alaskan Native ☐ Asian ☐ Black/African American ☐ Hispanic ☐ White ☐ Native Hawaiian or Pacific Islander (specify): _____	☐ Single (never married) ☐ Married ☐ Divorced ☐ Separated ☐ Widowed	☐ Male ☐ Female	☐ U.S. Citizenship ☐ Permanent Resident** ☐ Other: _____ **Residence card required**

Do you speak English as a second language? ☐ Yes ☐ No

The TRiO Student Support Services program is 100% federally funded through a grant from the U.S. Department of Education in the amount of $348,515.00 annually, serving low-income, first-generation college students and students with disabilities.

ACADEMIC INFORMATION

COLLEGE GRADE LEVEL:	HIGHEST LEVEL OF EDUCATION:
☐ Freshmen (1st semester, never attended college) ☐ Freshmen (attended before, # of credits: _____) ☐ Sophomore (30-59 credit hours earned) ☐ Junior (60 – 90 credit hours earned) ☐ Senior (90+ credit hours earned)	☐ High School Diploma: Year:_____ School: _____ ☐ GED: Year:_____ Institution: _____ ☐ Associate's degree Year:_____ Institution: _____ ☐ Transfer Student (last attended) Year:_____ Institution: _____

SERVICES I AM INTERESTED IN:

☐ Academic Tutoring ☐ Advice & Assistance in Course Selection ☐ Assistance in Completing Financial Aid Application (FAFSA) ☐ Career Exploration ☐ Cultural Activities	☐ Financial Aid Programs & Benefits ☐ Financial & Economic Literacy/Financial Planning ☐ Graduate & Professional Program ☐ Study Skills Workshops/Information

EDUCATIONAL GOALS:

☐ Bachelor's Degree ☐ Undecided Major: _____ Minor: _____ ☐ Master's Degree ☐ Transfer to another institution (specify when): _____	Cumulative GPA: _____ ☐ N/A (new student) Anticipated attendance: ☐ Full-time ☐ Part-time	Expected UOG graduation date: _____ Have you previously participated in any **TRiO** Programs? ☐ Yes (Program Name): _____ ☐ No

PROGRAM ELIGIBILITY

FIRST GENERATION: Has either of your parents or legal guardians received a Baccalaureate Degree?	☐ Yes ☐ No	☐ Mother - Name of Institution: _____ ☐ Father - Name of Institution: _____

DEPENDENT/INDEPENDENT STATUS: The federal government uses the following criteria to determine ***INDEPENDENT*** student status. Please *check **all** that apply* to you:

☐ Have you completed a bachelor's degree? *(If so, you are not eligible for SSS)* ☐ 24 years of age or older ☐ Have dependent child/ren ☐ Emancipated minor or in legal guardianship ☐ Serving Active Duty in U.S. Armed Forces	☐ Married ☐ Currently homeless ☐ Foster youth ☐ Veteran of US Armed Forces

If you **DID NOT CHECK** any of the above, you are considered a **DEPENDENT** student and **MUST** submit your parent's or legal guardian's latest signed Federal Income Tax Return/Form.

Otherwise, you are considered **INDEPENDENT** and **MUST** submit your latest signed Federal Income Tax Return/Form.

FINANCIAL INFORMATION:

TAXABLE INCOME: It is very important that you indicate ***TAXABLE INCOME,*** not the total income or adjusted gross income. Taxable income is reported on: ***Form 1040*** U.S. Individual Income Tax Return, ***line 15.***

If you are unable to provide a signed Federal Income Tax Return/Form, provide one of the following:

1.) A signed copy of your ***2026-2027*** FAFSA Submission Summary, 2.) Verification of monthly benefits from appropriate agency, or 3.) Signed statement from parent or legal guardian stating yearly income, source of income and current number in household.

FAMILY SIZE: This is the number of exemptions claimed on the Federal Income Tax Return/Form, including your parents, yourself, siblings and any other person reported on the form. If you are independent, include yourself, spouse, children and any other person supported by you.

Who claimed you for income tax return purposes? ☐ Parent ☐ Self ☐ Did not file/No taxable income

Your family's most recent taxable income: $_____ | Family size reported *(number of exemptions claimed)*: _____

Federal TRIO Programs
Current-Year Low-Income Levels
(Effective **January 13, 2026** until further notice)

Size of Family Unit	48 Contiguous States, D.C., and Outlying Jurisdictions	Alaska	Hawaii
1	$23,940	$29,925	$27,540
2	$32,460	$40,575	$37,335
3	$40,980	$51,225	$47,130
4	$49,500	$61,875	$56,925
5	$58,020	$72,525	$66,720
6	$66,540	$83,175	$76,515
7	$75,060	$93,825	$86,310
8	$83,580	$104,475	$96,105
Each Additional Family Member	$8,520	$10,650	$9,795

The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount.

The figures shown under family income represent amounts equal to 150 percent of the family income levels established by the Census Bureau for determining poverty status. The 2026 poverty guidelines were published by the U.S. Department of Health and Human Services in the Federal Register on January 15, 2026, and are effective as of January 13, 2026.

FINANCIAL AID STATUS *(check all that apply):*

☐ Applied for Federal Student Aid (FAFSA)
☐ On Financial Aid probation/suspension
☐ Approved for Financial Aid (Received SAR)
☐ Not approved for Financial Aid
☐ Did not apply/Not eligible
☐ Other Financial Aid Assistance: _____

FINANCIAL AID ASSISTANCE *(check all you are currently receiving)***:**

☐ Pell Grant
☐ Federal Work Study
☐ Student Loan
☐ SEOG
☐ VA Benefits
☐ Others: _____

Are you receiving non-federal financial aid assistance or scholarships? ☐ Yes - Specify: _____ ☐ No

HOW DID YOU LEARN ABOUT TRiO STUDENT SUPPORT SERVICES PROGRAM?

☐ TRiO SSS Staff
☐ UOG Staff/Faculty
☐ Family
☐ TRiO SSS participant
☐ Friend
☐ Other: _____

RELEASE OF INFORMATION/MEDIA

PRIVACY ACT INFORMATION:

In accordance with the Privacy Act of 1974 (Public Law No. 93-579, 5 U.S.C. 552a), you are hereby notified that the Department of Education is authorized to collect information to implement the Student Support Services Program under Title IV of the Higher Education Act of 1965, as amended (Pub. Law 102-325, Sec. 402D). In accordance with this authority, the Department receives and maintains personal information on participants in the Student Support Services program. The principal purpose for collecting this information is to administer the program, including tracking and evaluating participant progress. The information that is collected on this form will be retained in the program files and may be released to U.S. Department of Education officials in the performance of their official duties as defined by federal law.

RELEASE OF INFORMATION/MEDIA:

By signing this document, I grant permission to University of Guam TRiO Student Support Services (SSS) to track all my academic progress at UOG. I hereby authorize the release of my student academic and financial aid records for the SSS professional staff to use to discuss with me and, if appropriate, my instructor to better assess my academic progress. Such records include placement test scores, academic records/progress reports, course grades, transcript, GPA, demographic information, and financial aid status/award. I understand that my instructors may be contacted during the semester to evaluate my class progress. These evaluations will be available to me upon request. I understand that this information is used to assist in the determination of my academic need, eligibility for the program, academic progress while attending UOG and tracking after leaving the program. I understand the information obtained will be kept strictly confidential. I grant permission for UOG TRiO SSS to obtain information for follow-up whenever appropriate.

In addition, I hereby give my permission for release of my data, photograph, work and/or statements to be used by UOG TRiO SSS for award recognition, reporting, promotional, or publicity purposes.

I am aware that my information will be reported to the U.S. Department of Education in accordance with the grant funding regulations.

If found eligible for UOG TRiO SSS, I agree to actively participate in the program, and I certify that the information I provided in this application is correct to the best of my knowledge.

I understand that completing this application does not guarantee my admission to the UOG TRiO SSS Program.

Student Signature:_____ Date: _____

NEEDS ASSESSMENT SURVEY

As a student, I want to develop and/or improve the following areas *(check all that apply):*

- ☐ A plan for college courses
- ☐ Public speaking skills
- ☐ Test taking skills
- ☐ Computer skills
- ☐ Reading skills
- ☐ Transfer assistance
- ☐ Math skills
- ☐ Writing skills
- ☐ Time management skills
- ☐ Note taking skills
- ☐ Study habits/skills

How would you describe yourself as a student?

- ☐ Difficulty meeting new people
- ☐ Difficulty meeting deadlines
- ☐ Difficulty with public speaking
- ☐ Difficulty prioritizing
- ☐ Difficulty understanding course content
- ☐ Difficulty participating in discussions
- ☐ Change major more than once
- ☐ Afraid of failing in college
- ☐ Registered for too many classes
- ☐ Not prepared for college course level
- ☐ Limited computer/internet experience
- ☐ Conflict with a professor
- ☐ Anxiety during tests
- ☐ Out of school too long
- ☐ Difficulty managing my money
- ☐ Difficulty managing school and work

What obstacles would most likely prevent you from completing your educational goals?

- ☐ Afraid to speak up in class
- ☐ Alcohol and/or drug problems
- ☐ Always feeling tired
- ☐ Always worrying
- ☐ Bad grades
- ☐ Easily distracted
- ☐ Family medical problems
- ☐ Feeling depressed
- ☐ Lack of money
- ☐ No support from family/friends
- ☐ Poor study habits
- ☐ Problem(s) at home
- ☐ Recurring health concerns
- ☐ Taking the wrong classes
- ☐ Test anxiety
- ☐ Too shy
- ☐ Transportation problem

The following areas is what I would NEED assistance in:

Academic:

- ☐ Academic graduation plan
- ☐ Course selection
- ☐ Selecting a major
- ☐ Tutoring in:

Financial:

- ☐ FAFSA application & benefits
- ☐ Grants/scholarships
- ☐ Loans
- ☐ Personal budget planning

Personal:

- ☐ Anxiety
- ☐ Depression
- ☐ Embracing diversity
- ☐ Motivation
- ☐ Organization/Prioritization
- ☐ Relationships
- ☐ Stress management
- ☐ Substance abuse
- ☐ Time management

Career:

- ☐ Job search
- ☐ Interview
- ☐ Resume
- ☐ Internship

How do you rate your skills in the following areas:

Skills:	Excellent:	Above Average:	Average:	Fair:	Poor:
Math……..	☐	☐	☐	☐	☐
Reading…….	☐	☐	☐	☐	☐
Writing……..	☐	☐	☐	☐	☐
Study Skills……...	☐	☐	☐	☐	☐

Describe a personal weakness which you hope to improve on:

Describe a personal strength which you feel will help you become a successful student:

Describe your plans after graduating from the University of Guam: