JSCC STUDENT SUPPORT SERVICES
INFORMATION SHEET

TRIO Student Support Services (SSS) provides eligible participants with academic advising, tutorial assistance, financial literacy, career preparation, financial aid assistance, and personal support to graduate from JSCC and assist them in transferring to a four year college.

This program seeks to support students who have the potential to complete a college degree. Our focus is to ensure that students have a realistic chance to persist in college, and within three years, graduate with an associate degree and transfer to a four-year institution to pursue a bachelor’s degree.

The following services are available to participants:

~ Transfer Guidance
~ Tutorial Services
~ Financial Literacy
~ Course Selection Assistance
~ Financial Aid Application Assistance
~ Services for Participants with Special Needs
~ Academic, Financial, and Personal Counseling
~ Exposure to Cultural Events and Academic Programs
~ Information on Career/Education Opportunities

All participants must be currently enrolled at James Sprunt Community College and have an established need for academic assistance. Participant eligibility is determined by your academic need, income, first generation, or disability status and commitment to participate in the program.

Director ................................................................. (910) 296-2445
Administrative Assistant ........................................ (910) 296-2446
Program Counselor ............................................... (910) 296-1058
Academic Skills Advisor ........................................ (910) 296-2427
Math Skills Advisor .................................................. (910) 296-1256
Special Needs Advisor ............................................ (910) 296-2447
Technology Assistant ............................................. (910) 296-1714

Revised 08/2013
2013-2014 JSCC STUDENT SUPPORT SERVICES PROGRAM APPLICATION
(please PRINT neatly using black or blue ink)

NAME: ____________________________________________ SID #: ____________________________
   Last                        First                      MI                      SSN: ____________________________

GENDER: ___ MALE   ___ FEMALE   ARE YOU A US CITIZEN? ___ YES   ___ NO   DOB: __/__/____

JSCC EMAIL: ________________________________@mail.jamessprunt.edu

COMPLETE MAILING ADDRESS: _______________________________________________________________

RESIDENTIAL ADDRESS (if different from above) __________________________________________________

PHONE NUMBERS: HOME ____________________ CELL ____________________ OTHER ____________________

EMERGENCY CONTACT: ______________________________________________________________________
   NAME: ____________________________________ PHONE NUMBER: ______________________________

ETHNICITY/RACE: ___ Black/Afr. Am.   ___ White   ___ Hispanic/Latino   ___ Am. Indian /Alaskan Native
   ___ Asian   ___ Native Hawaiian/Other Pacific Islander

Are you classified as (circle all that apply): DISABLED   VETERAN   FOSTER CHILD   HOMELESS   not applicable
   (documentation is required for verification)

Do you have a college degree: ___ YES   ___ NO   Has either parent received a 4 year college degree? ___ YES   ___ NO

Have you been a TRiO participant? ___ YES (___ SSS   ___ ETS   ___ UB   other ________)   ___ NO
   (please indicate all that apply)

What is your major? ______________________________   Do you plan to transfer to a four-year college? ________

INCOME VERIFICATION
~~ MUST PROVIDE MOST RECENT 1040, 1040A, 1040EZ FEDERAL INCOME TAX FORM ~~
   **Dependent student must provide parent/guardian tax information**

   _____ Number of people in your household (for tax purposes)   $___________ Family Taxable Income

   **.............................................................................**
   Parent/Guardian Signature of Dependent Student

COMMENTS: ______________________________________________________________________________

_________________________________________________________________________________________

I HEREBY CONSENT TO THE RELEASE OF MY ACADEMIC, FINANCIAL AID, TRANSFER, DISABILITY AND SOCIAL SERVICES
RECORDS/INFORMATION TO THE STUDENT SUPPORT SERVICES PROGRAM (SSSP). IN ADDITION, JSCC AND SSSP HAVE
PERMISSION TO USE MY PHOTO FOR PROMOTIONAL PURPOSES. TO THE BEST OF MY KNOWLEDGE, THE ABOVE
INFORMATION IS CORRECT.

STUDENT SIGNATURE ____________________________ DATE ____________________________

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Student Support Services Program Contract

-We will offer you:
Transfer Guidance
Tutorial Services
Financial Literacy
Course Selection Assistance
Financial Aid Application Assistance
Services for Participants with Special Needs
Academic, Financial, and Personal Counseling
Exposure to Cultural Events and Academic Programs
Information on Career/Education Opportunities
Workshops Pertaining to Study Skills, Finances, Career Opportunities
Math Assistance
Updates Regarding SSSP Activities, Services, and Events via JSCC Email
Supplemental Grant Aid Consideration
Opportunities to become Eligible to Attend the Annual Cultural Trip
Our Support in Obtaining Your Associate Degree and Transferring to a 4-year university

-You will participate in required services by:
Attending Your Mid-Semester Conference
Completing CashCourse modules
Attending Your Scheduled Tutoring Sessions
Completing the LASSI
Completing Your FAFSA
Discussing Transfer Options with Advisor
Checking Your JSCC Emails Daily
Meeting Your SSSP Advisor Regularly Throughout the Semester
Attending Our Workshops
Attending the Annual Fall Orientation
Meeting with Your SSSP Advisor PRIOR to Altering Your Class Schedule
Reviewing Our Web Page for Guidelines Regarding Use of Labs, the JSCC Acceptable Use Policy, and Travel Policy
Evaluate the Program as Needed

If accepted in to the Student Support Services Program, I agree to abide by the rules and be an active participant in the services provided. If I choose not to abide by the rules and not participate, I am acknowledging that the services are available to me but I am refusing the services. Student Support Services has the right to dismiss me from the program.

__________________________________________________________
Student Signature

__________________________________________________________
Date

__________________________________________________________
Staff Signature

__________________________________________________________
Date

__________________________________________________________
Director Signature

__________________________________________________________
Date

Revised 08/2013
PERMISSION TO RELEASE INFORMATION

Name: ____________________________________________

Social Security Number: ____________ - ___ - ____________

Date of Birth: _________/__________/___________
    Month    Day    Year

Current Telephone #: (________)________-___________

Email Address: ____________________________________

I hereby give my permission to release information regarding my admission, transfer credits, registration, course load, grades, financial aid or other pertinent data to Deboria Hill or current Program Counselor with the Student Support Services Program at James Sprunt Community College. Permission is granted to release information as it is requested now or in the future.

This notice is valid until I revoke it in writing.

Thank you,

__________________________  _________________
(Signature of Student)       (date)
One goal of the Student Support Services program is to provide financial support to SSS participants as allowed by the Department of Education federal regulations. The support will be used to assist students in their first two years of college, who receive PELL grant and are in danger of dropping out of college for financial reasons.

Name _____________________________________________________________

Address ______________________________________________________________________

Phone # ______________________________________________________________________

JSCC Email ___________________________@mail.jamessprunt.edu

Student ID # ___________________________________________________________________

School Classification:
_________ Freshman (less than 32 credit hours)
_________ Sophomore (32 or more credit hours)