

To help you better understand your educational opportunities and options.

TRIO is a federally funded program that assists individuals who want to pursue post-secondary education. The program provides academic, career, and financial counseling to its participants.

TRIO ETS works with students in 6th – 12th grade as well as adults who want to explore their opportunities for college and career.

Our services include:

- Academic advice and planning
- Career counseling
- Assistance with Testing Fees
- ❖ ACT/SAT Preparation
- College Admission Assistance
- Scholarship Assistance
- Financial Aid guidance
- Helping you choose the right program for your career goals
 - o College, University, Trade, Technical

TRIO Eligibility Information

Only 2/3 of participants need to meet both the Income eligibility and the Potential first generation eligibility.

If you do not meet this criteria you can still participate if spots are available

Income eligibility Is based on Taxable income

Federal TRIO Programs						
Income Levels						
Size of Family	48 Contiguous					
Unit	States					
1	\$ 18,090					
2	\$ 24,360					
3	\$ 30,630					
4	\$ 36,900					
5	\$ 43,170					
6	\$ 49,440					
7	\$ 55,710					
8	\$ 61,980					

For families with more than 8 members add 6,270 for each additional member

Potential first generation Is defined as...

- (1) An individual <u>neither</u> of whose natural or adoptive parents received a baccalaureate degree;
- (2) An individual who, prior to the age of 18, regularly resided with and received support from only one parent and whose supporting parent did not receive a baccalaureate degree; or
- (3) An individual who, prior to the age of 18, did not regularly reside with or receive support from a natural or an adoptive parent.

The Future belongs to those who believe in the beauty of their dreams. Eleanor Roosevelt

We can help you with...

Testing Fees

Mapping out a plan

FAFSA/Scholarships

Admissions

All services are FRFF

Application Required

UNIVERSITY OF IDAHO TRIO ETS

Mailing Address:

1031 N Academic Way Coeur d'Alene, ID 83814

Office Located

North Idaho College Molstead Library Room 262 Office Hours 8:00 – 4-30 M-TH 8:00 – 2:30 Friday

Phone: 208-292-2539
Associate Director:
Gayle Otto
Email: gotto@uidaho.edu



PLEASE COMPLETE IN INK

Mail: Educational Talent Search

University of Idaho

1031 N Academic Way Suite 242

Coeur d'Alene, ID 83814

Drop off: North Idaho College

Molstead Library, Room 262

Phone: 208-292-2539

Legal Name:	First							
					Last			
Mailing Address	PO Box/Street		City			State	ZIP	
			,	□F	□М			
)							
Citizenship Type (Check One): ☐ U.S. Citizen ☐ Permanent Resident A #: Are you Hispanic/Latino? ☐ Yes ☐ No							ino? □Yes □No	
(Check all that appl	y) □Black/African America	n □ American Indian/Ala	ıska Native	e □Asian	□White	e/Caucasian [□Native Hawa	iian/Pacific Islander
Are you a veteran? ☐ Yes ☐ No Marital Status: ☐ Single ☐ Married ☐ Partner ☐ Widowed ☐ Separated ☐ Divorced							□ Divorced	
		This program is		•				
The following information is required in order to process your application. This information will remain confidential if you have any questions please call 292-2539.								
Tills II	normation win rem	lain comidential i	you na	ive any	quesi	ions pieas	se call 292	-2339.
Natural/Adoptive M	other has completed a 4		Natura	I/Adoptiv	ve Fathe	r has comple	eted a 4 year	
year Bachelor's Degree?		Bachelor'				's Degree?		□Yes □No
Number of people in Household		<u>Taxable*</u> income (after deductions)	\$					d not file taxes
Does Annlicant	*Found on federal tax form 1040 line 43 or 1040A line 27 Does Applicant qualify for public *Found on federal tax form 1040 line 43 or 1040A line 27 Income was less than							
assistance				was required to file.				
LI Yes LIN	lo □ Not Sure							
Are you interested in enrolling in a program of postsecondary education (education after high school/GED								ol/GED
completion)?	☐ Yes ☐ No ☐ M	aybe						
Information Release I understand that by signing below I am agreeing to give permission to release information where								
it is deemed necessary to discuss with and to relay academic and financial issues to other professionals (teachers,								
college officials, advisors, vocational rehabilitation counselors, tutors, etc.) as needed to ensure my continued success as a student.								
Applicant Initials								
I certify that the information on this form and any attachments are true, complete and accurate to the best of my								
knowledge. All Information will be kept confidential.								
Applicant Signature	e				_ Dat	e		
Signature of Parent	nt/Legal Guardian if under 18:Date:							

	Current Leve	el of Education	ı				
☐ Dropped out of High School Grade:		☐ High School Student Grade: School:					
☐ Completed GED/HSE or graduated high		☐ Some college no degree School: Credits:					
□ Other (Please Explain)							
Check Services you are Interested In							
☐ Academic Advising	☐ Admissions In	formation	☐ Career Guidance				
☐ College Opportunities	☐ Financial Aid	(FAFSA)	☐ Study Skills/Tutoring				
☐ Testing (GED/Placement Exams)	☐ Workshops		☐ Scholarships				
□ Other							
ln ca	ase of Emergency an	d I cannot be read	ched, please contact:				
Name:			Phone:				
Relationship to applicant:							
·							
Office Use Only							
Participant Eligibility Verification:	3oth ☐ First Generatio	n Only □Low Inco	ome Only				
Application Received by:		Date:	Application is □Complete □Incomplete				
Notes:							
By signing below. I have reviewed this appli-	cation, it is complete, and	d I declare this applic	cant to be eligible to receive ETS project services.				
TRIO Staff Signature: Date:							