



*Student Support Services  
Individual Development Plan  
Part I*  
(Step 1 of the SSS application process.)



For Office Use Only

- LI
- FG
- SWD
- Pell
- O'Bannon
- 21\*
- Work Study
- Athlete
- Honors
- Commuter

**Personal Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security#: \_\_\_\_\_ VU ID: A\_\_\_\_\_

Cell: \_\_\_\_\_ Personal Email: \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

**Campus Address:** \_\_\_\_\_

**Residency:** US Citizen  YES  NO **Sex:**  Male  Female

**Ethnicity:** Are you Hispanic or Latino?  YES  NO

Select the following that apply to you:

- African American / Black
- American Indian or Alaska Native
- Asian
- Caucasian / White
- Native Hawaiian or Pacific Islander

How did you learn about the Student Support Services Program? \_\_\_\_\_

Have you already earned a two or four-year degree?  YES  NO (If yes, you do not qualify for the program.)

**Financial Aid Status**

Do you live with your:  Mother  Father  Both  Other: \_\_\_\_\_

Do you have children?  YES  NO

**First Generation**

Highest educational or grade level completed by your parent(s) that you live. (Check one for each.):

	Mother	Father
Did not complete High School	<input type="checkbox"/>	<input type="checkbox"/>
High School or GED	<input type="checkbox"/>	<input type="checkbox"/>
Some College	<input type="checkbox"/>	<input type="checkbox"/>
Two-year College Degree	<input type="checkbox"/>	<input type="checkbox"/>
Four-year Degree or Higher	<input type="checkbox"/>	<input type="checkbox"/>
Unknown	<input type="checkbox"/>	<input type="checkbox"/>

## Disability Status

Did you have a 504 Plan or IEP in high school?  YES  NO    Do you have a disability?  YES  NO

If yes, have you provided documentation to Vincennes University Disability Services Office?  YES  NO

<b>Individual Needs Assessment (Check all that apply to you.)</b>		
<b>Academics</b>	<b>Major/Career</b>	<b>Personal</b>
<input type="checkbox"/> Unsure high school prepared me for college	<input type="checkbox"/> Do not know which majors would be a good fit for me	<input type="checkbox"/> Plan to work over 20 hours a week and go to school full time
<input type="checkbox"/> Achieved a GED	<input type="checkbox"/> Have many interests but cannot seem to pick one major	<input type="checkbox"/> Significant family responsibilities
<input type="checkbox"/> Concerned about my math skills	<input type="checkbox"/> Inexperienced in selecting a major or career	<input type="checkbox"/> Entering college as a non-traditional student
<input type="checkbox"/> Inexperienced with study strategies that work for me	<input type="checkbox"/> Decided about a major but not sure I have the preparation to succeed in it	<input type="checkbox"/> Undecided about whether college is for me
<input type="checkbox"/> It has been more than 5 years since I have been in school	<input type="checkbox"/> Not sure what type of job I can get with my degree	<input type="checkbox"/> Difficulty meeting new people
<input type="checkbox"/> Poor study habits		<input type="checkbox"/> Difficulty meeting deadlines
<input type="checkbox"/> Afraid of failing in college		<input type="checkbox"/> Lack of support from family and friends
<input type="checkbox"/> English is a secondary language for me		

**Please describe your greatest concern(s):**

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## Commitment to Participate

If accepted in COPE/Experience VU Student Support Services (SSS), I agree to the following:

- ✓ I will attend the SSS Program's New Student Orientation and University Experience course (SSKL 006).
- ✓ I will be honest and conscientious during my meetings with my SSS Program professional. Additional participation may be required via tutoring, workshops, cultural events, or academic enhancement.
- ✓ I will review my mid-term grades each semester and discuss with my Program professional.
- ✓ I will contact the COPE SSS main office each semester regarding advising for the next semester.
- ✓ I will attend all classes and complete all work in a timely manner. COPE SSS receives notices when our students do not attend classes, miss assignments, and perform well in classes.
- ✓ I will contact Program professionals when I am unable to attend scheduled appointments/events.
- ✓ I give my consent for Vincennes University SSS Program to use my photo/video and provide information on my participation with the SSS Program. This agreement remains in effect during my years as a student at Vincennes University.

*I understand that I may lose my status as a SSS participant if I do not follow the terms of this agreement.*

### Agreement

I certify that the information I have provided on this application is, to the best of my knowledge, complete, and correct.

Furthermore, I understand that by applying for the TRIO SSS Program, I authorize the Program professional to obtain records or data pertinent to my participation from other sources, and to release information, as required by law or the terms of the SSS grant, to the grant funding agency of the United States government. The SSS Program professionals have my permission to communicate with university staff and faculty, family members or others, community agencies and/or off campus professionals on my behalf. I release the Staff of SSS from all legal responsibility or liability that may arise from the actions I have authorized.

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Participant Signature

Are you interested in  
being contacted by a  
peer mentor from the  
COPE program?

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Date

Yes      No

COPE and Experience VU Student Support Services are 100% funded through a TRIO grant by the US Department of Education, with an annual budget of \$336,632 and \$218,623 respectively. Acceptance into the Program is contingent upon meeting eligibility criteria, space availability, and application process.