



Academic Institute of Central Carolina's (AICC) Educational Opportunity Centers Application 2017-2018

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The Educational Opportunity Centers is 100% funded by the U.S. Department of Education and is designed to encourage participants to complete high school and attend college.

TELL US ABOUT YOURSELF (1)

Student's Name _____ Residing County _____

Student's Address _____ City _____ Zip Code _____

Student's Cell Phone # _____ Student's Home Phone # _____

Student's Email _____ Date of Birth ____/____/____ Age _____

Social Security # ____/____/____ Sex Male Female

U.S. Citizen Yes No If no, are you a Permanent Resident? Yes No Permanent Resident # _____

Ethnicity: African-American Asian Caucasian Hispanic/Latino Native American Native Hawaiian/Pacific Islander Other

The U.S. Department of Education actively assists the following person. Please check if any apply to you.
 Disable Active Duty Veteran Reservist Spouse or dependent of military personnel

EDUCATIONAL & EMPLOYMENT STATUS (2)

Current Employment Status: Employed Unemployed Receive Public Assistance

High School Student-What school and grade? _____ Not Enrolled in High School/GED Program

Enrolled in Adult High School/GED Program High School Graduate Graduated from Adult High School/GED Program

High School/GED Graduate, not enrolled in college Enrolled in College ESL Classes Stopped attending college

Is English your second language? Yes No Are you enrolled in any other TRiO programs? (Upward Bound or Talent Search) Yes No

FAMILY INFORMATION (3)

Do you have children who receive more than half of their support from you? Yes No

Do you have dependents other than your children or spouse who receive more than half of their support from you? Yes No

Did either parent graduate from a 4-year college/university? Father Yes No Mother Yes No _____
 Name of College/University

Please complete if you **DID OR WILL** file a 2016 Federal Income Tax Return. Check the box that reflects your family's annual TAXABLE income.

TAXABLE income is found on IRS 1040-Line 43 or 1040A-Line 27 or 1040EZ-Line 6

\$0-\$18,090 <input type="checkbox"/>	\$18,091-\$24,360 <input type="checkbox"/>	\$24,361-\$30,630 <input type="checkbox"/>	\$30,631-\$36,900 <input type="checkbox"/>	\$36,901-\$43,170 <input type="checkbox"/>
\$43,171-\$49,440 <input type="checkbox"/>	\$49,441-\$55,710 <input type="checkbox"/>	\$55,711-\$61,980 <input type="checkbox"/>	\$61,981 or higher <input type="checkbox"/>	

Please complete if you **WILL NOT** file a 2016 Federal Income Tax Return. Check all sources earned or received from January 2016-December 2016.

Wages/Salary \$ _____ Public Assistance/TANF/SSI \$ _____ Unemployment \$ _____

Spouse/Partner/Parent/Other \$ _____ Total Earned/Received from all sources \$ _____

Number in household (please include yourself) 1 2 3 4 5 6 7 8 9 10

RELEASE OF INFORMATION (4)

I authorize Educational Opportunity Centers to obtain documents relative to my education. (College admission, Financial Aid, and college enrollment)
 I give permission for my name, photo, work or statements to be used for promotional, publicity, reporting, instructional and verifying purposes.
 I agree to graduate from high school/ adult high school/GED and enroll into college.
 I authorize contact from this agency to communicate with me via: cell phone, cell phone text message, home phone, and email as needed.
 I certify all information on this application is true and accurate to the best of my knowledge. I understand this information is strictly confidential.

Student's Signature _____ Parent's/Guardian's Signature _____ Date _____

For AICC EOC Office Use Only

Entry Status LI/FG LI FG Other Partnership's Agency _____

Counselor's Signature _____ Date _____ Director's Signature _____ Date _____



OUR PROMISE

The AICC's Educational Opportunity Centers (EOC) is 100% federally funded and all services are provided to the program participants free of charge. All individuals who meet the eligibility requirements of this program are provided information regarding financial aid and academic assistance necessary to enter and/or return back to college.

ACTIVITIES

Check all the activities you would like to participate in:

ACADEMIC

- Critical Thinking
- Time management
- Listening/Note Taking
- Problem Solving
- Academic Advising
- Test preparation
- Setting goals
- Decision Making
- Graduation requirements

COLLEGE/VO-TECH PREP

- Financial Aid Assistance
- ACT/SAT assessment prep
- College planning
- Scholarship search
- Complete the FAFSA
- GED Preparation
- Surviving first year of college
- College campus visit
- Admission Information/Enrollment

CAREER & PERSONAL

- Career exploration
- Interviews & Resumes
- Get employed
- Loan out of default
- Stress Management
- Create an Email
- Money Management
- Financial Literacy

Student's Signature _____ Date _____

Counselor's Signature _____ Date _____

Notes:

Recommendations:

Student's Signature _____ Date _____

Counselor's Signature _____ Date _____

Notes:

Recommendations: