University of Wyoming
Educational Opportunity Center
Participant Intake Form

EOC Educational Opportunity Center

TRiO Educational Opportunity Centers

Social Security #(optional):	Name: Last First MI	
Mailing Address:	City: State: Zip:	
Age: Date of Birth:	Phone: Email:	

Please complete the following voluntary information:

Gender: ☐Male ☐Female

Ethnicity: ☐White ☐African American ☐Hispanic/Latino ☐Asian ☐American Indian/Alaskan Native ☐Native Hawaiian/Pacific Islander ☐More than one race

The person applying for EOC services should answer the following questions:

Did either of your parents complete a 4-year college degree? ☐Yes ☐No

Are you a U.S. Citizen? ☐Yes ☐No

Limited English speaking proficiency? ☐Yes ☐No

Are you a Veteran? ☐Yes ☐No

Did you graduate from HS, GED, or equivalency program? ☐Yes ☐No

Year of graduation? _____

Circle which you received: HS Diploma GED

Are you currently enrolled in college? ☐Yes ☐No

If "Yes", name of college _____

Did you leave college before finishing? ☐Yes ☐No

Are you transferring from another college? ☐Yes ☐No

If "Yes", name of college _____

If Currently Enrolled in High School or GED Program:

Circle your current high school grade level, if applicable:

9 10 11 12

Anticipated graduation date _____

Are you currently enrolled in a GED program? ☐Yes ☐No

If "Yes", anticipated Graduation Date? _____

Needs Assessment:
What educational and personal services can EOC provide?

☐Admissions	☐Interest Inventories	☐Learning Styles
☐Financial Aid	☐Career Exploration & Counseling	☐Referrals to Agencies
☐Information on Colleges, Universities, Trade and/or Technical Schools	☐Study Skills	☐Adult Basic Education
☐Academic Advising	☐Time Management	☐Motivational Counseling
☐Re-entry into High School	☐Stress Management	☐Subject Tutoring
☐GED	☐Other	

Contact Me By Phone: ☐Yes ☐No

By signing below, I give U.W./EOC my permission to exchange information and records generated by this program with other educational institutions. I verify that the income level marked is to the best of my knowledge and understand the granting of this consent is voluntary.

Please check your estimated family income level for 2003 tax year:

_____Number in Household

☐$13,470 and Below

☐$13,471 - $18,180

☐$18,181 - $22,890

☐$22,891 - $27,600

☐$27,601 - $32,310

☐$32,311 - $37,020

☐$37,021 - $41,730

☐$41,731 - $46,440

☐Above $46,441

SIGNATURE OF PARTICIPANT	SIGNATURE OF PARENT, IF APPLICABLE	DATE

University of Wyoming TRIO programs are part of Student Educational Opportunity and funded by the U.S. Department of Education. TRIO programs promote educational opportunities for all citizens regardless of race, ethnic background, or economic status. All information remains confidential! April 04