



Ensuring Career and College Access for All

<b>Advisor Use Only</b> <input type="checkbox"/> Nap <input type="checkbox"/> Not Nap <input type="checkbox"/> Don't Know			<b>Know more about financial aid?</b> <input type="checkbox"/> yes <input type="checkbox"/> no <b>Will file FAFSA, or knows next steps?</b> <input type="checkbox"/> yes <input type="checkbox"/> no <b>Helpful?</b> <input type="checkbox"/> yes <input type="checkbox"/> no	
<b>Text</b> <input type="checkbox"/>	<b>Email</b> <input type="checkbox"/>	<b>Phone</b> <input type="checkbox"/>	<b>Video Call</b> <input type="checkbox"/>	<b>In-Person</b> <input type="checkbox"/>

**Basic Student Information**

FIRST NAME \_\_\_\_\_ M.I. \_\_\_\_\_ LAST NAME \_\_\_\_\_ PREFERRED \_\_\_\_\_  
 GRADUATION YEAR \_\_\_\_\_ HIGH SCHOOL \_\_\_\_\_  
 EMAIL \_\_\_\_\_  
 CELL PHONE \_\_\_\_\_ CAN GRASP TEXT YOU?  YES  NO

**Additional Demographic Information**

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 PRONOUNS:  He/Him/His    She/Her/Hers    They/Them/Theirs    Other: \_\_\_\_\_  
 RACE:  American Indian or Alaska Native    Asian    Black or African American (not of Hispanic origin)  
 Hispanic or Latino (of any race)    Native Hawaiian or other Pacific Islander    White (not of Hispanic origin)  
 Two or more races (not of Hispanic origin)    Unknown/Prefer not to specify  
 BIRTH DATE \_\_\_\_\_ DO YOU PARTICIPATE IN SOAR VIRGINIA®?  Yes  No  
MM/DD/YY  
 IS ANYONE IN YOUR FAMILY ELIGIBLE FOR FREE AND REDUCED LUNCH?  Yes  No  
 DO YOU HAVE AN I.E.P., FOR SPECIAL EDUCATION, OR A §504 PLAN, FOR ACCOMMODATIONS?  Yes  No  
 DO YOU LIVE WITH A PARENT  Yes  No  
 ARE YOU HOMELESS OR AT RISK OF BEING HOMELESS?  Yes  No  
 AT ANY TIME SINCE AGE 13, HAVE YOU BEEN IN FOSTER CARE?  Yes  No  
 DID EITHER OF YOUR PARENTS GRADUATE FROM COLLEGE?  Yes  No

PARENT FIRST NAME \_\_\_\_\_ PARENT LAST NAME \_\_\_\_\_  
 PARENT EMAIL \_\_\_\_\_ PARENT CELL \_\_\_\_\_

HOW DID YOU HEAR ABOUT GRASP?  
 Counselor    Classroom Presentation    School Assembly    Announcement/Website    Friend    Other

**Plans After High School**

PLANS AFTER HIGH SCHOOL?  Apprenticeship    Career Program    Military    Community College Associate  
 Community College to 4-Year School Transfer    4-Year College Directly    Employment Directly  
 CAREER INTERESTS  Medical/Health    STEM    Liberal Arts    Education    Fine Arts    Other  
 STUDENT'S SAT OR ACT SCORES \_\_\_\_\_ APPROXIMATE GPA \_\_\_\_\_  
 FSA ID COMPLETE    PARENT FSA ID COMPLETE    FAFSA SUBMITTED   EFC: \_\_\_\_\_

**WHAT IS YOUR FAMILY SIZE?** \_\_\_\_\_ INCLUDE THE NUMBER OF PEOPLE WHO ARE UNDER 21 CURRENTLY LIVING IN YOUR HOME, THE PARENT(S) IN YOUR HOME AND ANY DEPENDENT ADULT(S) SUCH AS A GRANDPARENT OR AUNT/UNCLE WHO ARE SUPPORTED BY YOUR PARENT(S).

**IF YOU KNOW IT, CHECK YOUR FAMILY'S ANNUAL INCOME BELOW.**

(Include only income of parent(s)/stepparent(s) with whom you live.)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> below \$38,280       | <input type="checkbox"/> \$38,281 to \$51,720   | <input type="checkbox"/> \$51,721 to \$65,160  |
| <input type="checkbox"/> \$65,161 to \$78,600 | <input type="checkbox"/> \$78,601 to \$92,040   | <input type="checkbox"/> \$92,041 to \$105,480 |
| <input type="checkbox"/> \$105,481 to 118,920 | <input type="checkbox"/> \$118,921 to \$132,360 | <input type="checkbox"/> above \$132,361       |