

Wisconsin Department of Public Instruction WISCONSIN EDUCATIONAL OPPORTUNITY PROGRAM (WEOP) TIP GRANT APPLICATION PI-1577 (Rev. 08-2022) FOR Date Received:

DPI

USE

Date Completed:

ONLY

I. INSTRUCTIONS

- 1. Complete all sections of the application form. Incomplete applications will not be processed.
- 2. To ensure safe-keeping of the applicant's personal identifying information, we require that only the last four digits of the social security number be placed on this form. Upon receipt, a DPI-WEOP staff person will contact the applicant or parent/guardian by phone to obtain the student's remaining social security digits which are required for processing.
- 3. Obtain all necessary signatures. Unsigned applications cannot be approved.
- 4. If you filed the FAFSA as a dependent student, you are also considered a dependent student for the TIP Grant.
- 5. Submit the completed application with a copy of your Student Aid Report (SAR) from the FAFSA.gov website AND proof of acceptance (acceptance letter, class schedule or financial aid award letter) at a Wisconsin university, technical college, private independent college or university, or a tribal college. Applications cannot be processed until all attachments are received.
- 6. Submit the completed application and required attachments to the DPI-WEOP office nearest to you.

		II. STUDENT			INFORMATION							
Student's First Name		Middle Initial		Last Name								
Home Phone Area/No.	Cell Phone Are	Cell Phone <i>Area/No.</i>			Date of Birth <i>Mo./Day/Yr.</i>			Gender			emale	Other
Personal E-Mail Address					Last 4 Digits of Social Security Number IMPORTANT See bullet #2 in Instructions above.							
Mailing Address Street				City					State		ZIP	
High School Currently or Previously Attended City			City and St	ate School is Located						Year of Graduation or Date of GED		
Independent Student for FAFSA Purposes If yes, skip Section III		U.S. Citizen			No			Not a U.S. Citizen, Are You a Permanent Resident				
Were You in Foster Care After Age 13 <i>Response may be used to assess eligibility for other financial aid opportunities.</i>				assess V	Which Semester Will You Start College							
Name of College Planning to Attend				Cit			City	/				State
					NFORMATION							
First Parent's <i>First Name</i>	Last Name	Last Name			Second Parent's First I			ame Last Name				
Phone Area/No. Cell Phone Are			rea/No.			one <i>Area/No.</i>		Cell Phone Area/No.				
E-Mail Address				E	E-Mail Address							

In order to receive a TIP grant, a student must:

- 1. be accepted to a Wisconsin university, technical college, private independent college or university, or a tribal college;
- 2. be a Wisconsin resident;
- 3. be a first-time college student—a first-time college student is a student who has been enrolled in a postsecondary institution for less than two semesters at half-time or more;
- 4. complete the Free Application for Federal Student Aid (FAFSA); AND
- 5. meet at least one of the criterion under Group A and one criterion under Group B below.

GROUP A: Financial Need Criteria Check all that apply.

1a. A dependent student's expected parent contribution is \$200 or less.

- 1b. An independent student's expected contribution is \$200 or less.
- 2a. A dependent student's family is receiving Temporary Assistance for Needy Families (TANF) benefits. List the TANF benefit that you or your family receives _____.
- 2b. An independent student who is receiving TANF benefits. List the TANF benefit that you or your family receives
- 3a. A dependent student's parent(s) are ineligible for unemployment compensation and has/have no current income from employment.
- 3b. An independent student and spouse, if married, who is/are ineligible for unemployment compensation and has/have no current income from employment.

GROUP B: Nontraditional/Disadvantaged Criteria Check all that apply.

- A student is or will be enrolled in a special academic support program due to insufficient academic preparation.
- ____ The student is a first-generation postsecondary student (neither parent graduated from a four-year college or university).
- _ The student is disabled according to the Department of Health and Social Services, Division of Vocational Rehabilitation records.
- The student is currently or was formerly incarcerated in a correctional institution.
- ____ The student's environmental and academic background is such that it deters the pursuit of educational plans.

V. CERTIFICATION / SIGNATURES

I/WE AUTHORIZE THE RELEASE of information of my own/my son's/my daughter's file to the Department of Public Instruction Wisconsin Educational Opportunity Program (DPI WEOP), the student's parent(s)/guardian(s), the student's secondary school, and/or the student's post-secondary institution for purposes of educational guidance and to assist the student to achieve his/her educational goals.

All students that are considered dependent for financial aid purposes must include a parent's signature. Unsigned applications will not be processed.

Date Signed Mo./Day/Yr.		
Date Signed Mo./Day/Yr.		

WEOP OFFICE LOCATIONS							
City	Address	Phone / FAX					
Ashland	801 Lake Shore Drive W Ashland, WI 54806	P: (715) 682-7975 F: (715) 682-7960					
Eau Claire	402 Graham Avenue, 2 nd Floor Eau Claire, WI 54701	P: (715) 836-3171 F: (715) 836-5588					
Green Bay	2140 Holmgren Way Green Bay, WI 54304	P: (920) 492-7185 F: (888) 333-2371					
Milwaukee	1555 N. Rivercenter Drive, Suite 210 Milwaukee, WI 53212	P: (414) 220-6817 F: (414) 227-4462					
Wausau	2600 Stewart Avenue, Suite 274 Wausau, WI 54401	P: (715) 842-0871 F: (715) 845-8271					