



United Promise Application

21 Campus Circle, Murphy, NC 28906 (828) 837-6810

www.tricountycc.edu/UnitedPromise

Today's Date: _____ Student ID: _____ DOB: _____

First Name: _____ Middle: _____ Last: _____

Address: _____ City, State Zip: _____

Program of Study: _____ Certificate / Diploma / Associate (Circle One)

Email: _____ Phone: _____

Languages Spoken: _____ Ethnicity: _____

Semesters at TCCC?: _____ Cumulative GPA: _____

Emergency Contact: _____ Phone: _____

Marital Status: _____ Children: YES NO How Many?: _____

Hobbies / Interests / Skills: _____

Do you have any obligations outside of education that will keep you from attending meetings, events, or study sessions?: _____

Tell us what you would like to gain from being a member of TC-UP?

- | | |
|---|--|
| <input type="checkbox"/> Build Resume | <input type="checkbox"/> Help in the Community |
| <input type="checkbox"/> Develop Leadership Skills | <input type="checkbox"/> Improve Career Related Skills |
| <input type="checkbox"/> Develop Networking Skills | <input type="checkbox"/> Make Friends |
| <input type="checkbox"/> Develop Teamwork Skills | <input type="checkbox"/> Meet Faculty |
| <input type="checkbox"/> Feel Inclusion and Part of the College | <input type="checkbox"/> Professional Development |
| <input type="checkbox"/> Find Study Partners | <input type="checkbox"/> Study Skills |

At the present time, are you confident you will graduate with your current major?:

- I am not confident; I am planning to change my major.
- I might change my major.
- I am fairly confident I will keep my current major.
- I am very confident I will keep my current major.

At the present time, do you feel confident that you will graduate on time?:

- I am not confident that I will graduate on time.
- I am somewhat confident and need help to succeed.
- I am fairly confident I will graduate because I have set goals for myself.
- I am very confident I will graduate.

After I finish my degree, I plan to: (Check all that apply)

- Work in my field of study
- Start my own company
- Work in a state or government setting
- Enter the military
- Work for a community organization
- Not sure
- Attend a four year college

Other, please specify: _____

As a willing participant of TC-UP, I agree to abide by all program guidelines and agree to membership for at least one consecutive semester. I commit to attending all scheduled meetings and events of the organization. If unable to attend I will give prior notice directly to the TC-UP Coordinator. If I wish to discontinue my membership to this program, I will first notify the TC-UP Coordinator to discuss my reasons. I give permission for the TC-UP coordinator, advisors, faculty, and staff to obtain updates on my academic progression and to use photographs taken during all College events.

Applicant's Signature: _____

Date: _____

Coordinator's Signature: _____

Date: _____