

STUDENT SELF-ASSESSMENT QUESTIONNAIRE

Please take a few minutes to answer the questions clearly as possible.

Name: _____ Student ID Number: B _____ Date: _____

1. Why did you decide to attend Oakton Community College?

2. How did you become interested in joining TRIO program?

3. Please describe your educational and professional goals.

4. What are your strengths? What are your areas of improvement?

5. Did you apply for financial assistance such as FAFSA? Do you need further help with financial assistance?

6. Are you considering transferring to a college/university after completing courses at Oakton? Which school(s)?

PLEASE CONTINUE TO THE NEXT PAGE

7. What could potentially stand in your way of achieving your current goals?

8. What tools do you believe you may need to be successful at Oakton?

9. Please share any concerns you have regarding the current or future semesters during your time at Oakton.

10. Is there anything else you would like for TRIO to know about you?

FOR TRIO STAFF ONLY

Intake appointment date: _____

Tax information received? Yes No

Additional notes:

CONTACT INFORMATION

LOCATIONS

Des Plaines: Enrollment Center 2901, 2nd floor
Skokie: Learning Center, A135

CONTACT

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Email: trio@oakton.edu

Visit our webpage at:
<https://www.oakton.edu/trio>