

TRIO SSS STUDENT REFERRAL FORM

Please complete this referral form and return to the TRiO Student Support Services Program at James Sprunt Community College.

DATE: _____ COURSE #: _____

STUDENT: _____ STUDENT ID #: _____

INSTRUCTOR'S SIGNATURE: _____

CHECK ALL THAT APPLY:

- _____ The student attends class regularly.
- _____ The student is on time for class.
- _____ The student submits homework, reports and/or projects on time.
- _____ The student participates in class.
- _____ The student demonstrates a positive attitude toward the course.
- _____ The student is a Duplin County high school student.

THE STUDENT WOULD BENEFIT FROM THE FOLLOWING TYPES OF ASSISTANCE:

- _____ FAFSA Assistance
- _____ Financial/Economic Literacy
- _____ Academic Advisement
- _____ Transfer Counseling (including admission application assistance)
- _____ Other: _____
- _____ Tutoring
- _____ Math Skills Advisement

WHAT IS THE GRADE OF THE STUDENT AT THIS TIME? _____

PLEASE SHARE ANY ADDITIONAL INFORMATION OR COMMENTS THAT WOULD HELP THIS STUDENT IMPROVE IN THIS COURSE.

OFFICE USE ONLY – DO NOT COMPLETE BELOW THIS LINE:

_____ Student is not eligible for the TRiO Student Support Services Program.

This student has been referred to the following department and/or agency:

_____ JSCC Student Services – Counseling and Testing

_____ Other (example – Student Success Center) _____

SSS Staff Signature

Date