

Saint Regis Mohawk Tribe Education Division
College & Career Services Semester Profile Form
***** RETURNING STUDENTS *****

First Name, Last Name, MI: _____ Date: _____

Last 4 digits of SSN: _____ Primary Phone: _____

Full Mailing Address: _____

E-mail: _____ School E-mail: _____

Semester/Term (select one):

☐ Fall ☐ Winter ☐ Spring ☐ Summer ☐ Online

Degree (select one): ☐ Associates (2yr) **Semester Status (select one):** ☐ Full-time

☐ Bachelors (4yr) ☐ Part-time

☐ Masters **Semester Start Date:** _____

☐ Doctoral **Academic Year:** _____

Current College: _____

Major: _____ **Est. Grad Date:** _____

If you are a transfer student, what college are you transferring from?

Next semester credits: _____ **Term GPA:** _____ **Overall GPA:** _____

DEADLINES DO NOT CHANGE:

JULY 31 – Fall Semester

JANUARY 31 – Spring Semester

Send **COMPLETED** applications to education@srmt-nsn.gov as **Adobe Acrobat (.pdf)** or **JPEG (.jpg)**.

Documents Needed for Returning Students:

- ☐ College & Career Semester Profile
- ☐ Last Semester's Grades (must **clearly** state your name, school, term and overall GPA)
- ☐ Next semester's schedule (must **clearly** state your name, courses & credit hours)
- ☐ Updating your *Individual Success Plan* with your Case Manager annually.

Note: Must maintain a GPA of 2.0 or above to receive funding.

****** Any questions e-mail your Case Manager or call 518-358-9721 ******