SPARTAN FAMILY PLAN APPLICATION FORM

Application Requirements

1) Applicants must sign, date, and complete the application in its entirety. One application is required per family for consideration. Application submission is required each semester.
2) A minimum of two immediate family members must be currently enrolled, or plan to enroll, for the semester in which a tuition reduction is requested. The Office of Enrollment Management may request additional information if necessary.
3) Currently enrolled students must meet Satisfactory Academic Progress (SAP).
4) Attach a current Registration Statement to this form. Should an eligible family member drop all classes or withdraw from Norfolk State University during the term, the remaining student will become ineligible and an account adjustment may be necessary.*
5) All Spartan Family Plan requests must be submitted prior to the first official class cancellation date (www.nsu.edu/studentaccounts/classcancellation.html). Late applications will not be accepted. All correspondence regarding eligibility will be sent via NSU e-mail.

Return to:

Mrs. Michelle Marable
Enrollment Management
Norfolk State University
Harrison B. Wilson Hall
700 Park Avenue, Suite 120
Norfolk, VA 23504
757-823-8673 or mdmarable@nsu.edu

GENERAL INFORMATION
(Please Print or Type)
Today's Date: _____ Semester Requesting Discount: _____

Student 1

1. Name: _____ _____ _____
Last First MI

2. NSU Student ID: _____ Telephone Number: _____

3. Address: _____

City: _____ State: _____ Zip Code: _____

4. Email Address: _____ Date of Entry to NSU: _____ Major: _____

Student 2

1. Name: _____ _____ _____
Last First MI

2. NSU Student ID: _____ Telephone Number: _____

3. Address: _____

City: _____ State: _____ Zip Code: _____

4. Email Address: _____ Date of Entry to NSU: _____ Major: _____

Student 3

1. Name: _____ _____ _____
Last First MI

2. NSU Student ID: _____ Telephone Number: _____

3. Address: _____

City: _____ State: _____ Zip Code: _____

4. Email Address: _____ Date of Entry to NSU: _____ Major: _____

Student 4

1. Name: _____ _____ _____
Last First MI

2. NSU Student ID: _____ Telephone Number: _____

3. Address: _____

City: _____ State: _____ Zip Code: _____

4. Email Address: _____ Date of Entry to NSU: _____ Major: _____

I certify that the above statements are true and correct to the best of my knowledge and should I be eligible, I agree to abide by and support the rules and regulations as set forth by the University.

Applicant's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____

***Dependent upon the number of family members enrolled**