



Norfolk State University
Teacher PREP – Student Support Services
School of Education

700 Park Avenue • Norfolk, VA 23504 (757) 823-2767 Fax (757) 823-8039

APPLICATION

The Teacher PREP Student Support Services Program provides opportunities to enhance educational opportunities by providing unique and personalized academic services to increase retention and graduation rates and facilitate entrance into the teaching profession with full licensure.

Social Security number Student ID Number Date of Birth

Name Last First Middle

Permanent Address City State Zip Code

NSU email address

Contact # - Cell Home

Gender: Male Female

U.S. Citizen: Yes No

Race/Ethnicity: (For statistical purposes only)

- American Indian/Alaskan Native
Asian
African American/Black
Hispanic/Latino
White
Native Hawaiian/Pacific Islander

OFFICE USE ONLY
RECEIVED BY:
DATE RECEIVED:
REVIEWED BY:
ELIGIBLE
FIRST GEN INCOME
WAIT LIST
FIRST GEN INCOME
DENIED

Emergency Contact Information

Name _____

Phone Number (____) _____ - _____ Cell number (____) _____ - _____

Address _____

Relationship _____

EDUCATIONAL STATUS

Major _____ Minor _____

Teaching Area _____

Classification (Please check): Freshman Sophomore Junior Senior

Cumulative GPA _____

PROGRAM ASSESSMENT

Are you currently enrolled in any of the following programs? (Please check)

Regular Student Support Services Disability Services

ELIGIBILITY INFORMATION

Name of Mother/Guardian _____

Mother's highest education: High School Some college Bachelor's Master's Doctorate

Name of Father/Guardian _____

Father's highest education: High school Some college Bachelor's Master's Doctorate

Address _____

City _____ State _____ Zip Code _____

Contact phone number (____) _____ - _____

STUDENT SUPPORT SERVICES

Preliminary Needs Assessment

Below is a list of services available through Student Support Services. Please check any services you would find beneficial to your academic success:

Academic Skills

- Time Management
- Study Skills
- Test Taking
- Test Anxiety
- Essay Writing
- Critical Thinking
- Proofreading
- Note Taking
- Basic Computer Skills
- Basic Math Skills (Developmental Math, College Algebra)
- Peer and Group Tutoring
- Praxis Prep
- Portfolio Development

Personal Development

- Mentoring
- Personal Counseling
- Financial Aid Literacy/Information

Career Exploration

- Career Information
- Co-Academic Advising
- Resume Design
- Interviewing
- Job Search

Payment Services

- Pay for the following:

Praxis I

VCLA

RVE

Praxis II

Organizational Membership:
SVEA

CEC

NAME

Teacher Licensure

CPR/First Aid/AED Class

Campus Address

Residence Hall Name: _____

Residence Rm. # _____ Residence Rm. Telephone # _____

Norfolk State University Teacher PREP Student Support Services

Release of Information

I, _____, authorize Norfolk State University Teacher PREP Student Support Services to gather information concerning my academic progress (standardized test scores, grade point average, completed credits, transcripts) and financial information prior to my participation and throughout my involvement in Teacher PREP Student Support Services Program. I understand that this information is used to assist in the determination of my eligibility for the SSS program and it will be held strictly confidential. I am aware that my eligibility, participation and financial aid status will be reported to the U.S. Department of Education in accordance with the grant funding regulations.

I certify that the information provided on this application is true and complete to the best of my knowledge. I also agree to provide documentation upon request to verify the information reported. I am aware that the personal information that is provided to the Student Support Services program will be protected under the Family Education Rights Privacy Act (FERPA) of 1974. No one will have access to the information unless they work with or for the SSS program, or they are specifically authorized by me to see the information.

****May request financial information for income verification****

Upon formal acceptance into the program, I grant permission for the program staff to have access to my official academic and financial records in order for SSS staff to assist me. Additionally, in the course of my involvement in the SSS program, SSS staff may consult with various Norfolk State University offices and programs to secure and share the necessary information pertinent to my participation in the program and overall collegiate success.

Finally, I give my permission to use photographs, quotes, statements and/or print my first and last name in any and/or all publications for Teacher PREP Student Support Services.

Signature

Date

Parents signature (for applicants under age 18)

Date