

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 15 – Fall Semester

DECEMBER 31 – Spring Semester

Send **COMPLETED** applications to [education@srmt-nsn.gov](mailto: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\*\*\*\***