



Sul Ross State University Talent Search - Update Form



School: _____ Year: _____

1. STUDENT INFORMATION

Name: _____
First Middle Initial Last

Mailing Address: _____
P.O. Box, Street Address, Apt # City, State, Zip Code

Cell Phone: _____ Email: _____

2. PARENT/GUARDIAN CONTACT INFORMATION

Name: _____ Relationship: _____
First Last

Main Phone: _____ Work Phone: _____ Email: _____

3. RELEASE OF SCHOOL RECORDS

I authorize the Educational Talent Search Program of Sul Ross State University to access and/or receive copies of my academic transcripts, grade reports, report cards, EOC/STARR/TSIA/SAT/ACT scores, college enrollment, completion records and any other academic information and test results necessary to complete the program's application process and show progress through the program as required by the U.S. Department of Education Grant guidelines.

Student's Signature Grade Level

4. YEARLY NEEDS ASSESSMENT

1. What classes do you think you will need tutoring for this school year? _____

2. What are your plans for the future? _____

3. Choosing a college:

___ I have decided on college - Name of college to attend: _____

___ I am considering several possibilities but have not yet decided on a college

___ I am completely undecided about a particular college

4. Selecting a major/minor/career for college:

___ I have decided upon a college major/minor and possible career - List: _____

___ I am considering several possibilities but have not yet decided on a major/minor or career

___ I am completely undecided about a major/minor or career