

**Pellissippi State Technical Community College
TRiO Student Support Services
Record Update**

Name _____ Date _____

Address _____

Phone _____ Cell Phone _____

Email address you check most often _____

Have you had an address, phone or email change within the past 6 months?

___ Yes ___ No

College Major _____

Do you need a tutor for this semester? ___ Yes ___ No

(Please complete the tutoring request forms if you mark Yes.)

Are you planning on transferring to a 4-year school? ___ Yes ___ No

If so, please list schools you are considering: _____

What are your goals for this semester? _____

*Remember: we offer assistance with choosing a career, choosing a college major and transfer visits!!