



## **Referral of Student to Student Support Services**

Student Information		
Student's		
Name:	MU ID:	
Student's Phone:	Student's Email:	
	tions Regarding Student	
For what reasons are you making the	ie referral?	
Academic Difficulties	Absence of Family Support	
Adjustment Problems	Absence of Social Connections	
Unclear College Goals	Other:	
Does the student know you have ret	ferred them to Student Support Services?	
Please include any additional inform	nation to assist us in helping this student:	

## **Reference Information**

Person Making Referral:

Office/Department:

Reference Signature:

Federal TRIO programs such as Student Support Services were created to help disadvantaged students enter college, graduate, and establish themselves into a career. These programs are funded under Title IV of the Higher Education Act of 1965 and are known as TRIO. Student Support Services provides information, counseling, academic instruction, assistance in applying for financial aid, encouragement and support to all 200 of our students at Marshall University. It is designed for first-generation college students whose parents did not attend or complete a four-year college degree and/or whose family income may hinder them from remaining in college without the financial assistance to receive the full range of services and educational opportunities. All information collected and distributed regarding the student will remain confidential under The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99).

If completing a physical copy, please return it to the Prichard Hall West Lobby