Non-Traditional Membership

Student Organization Application

NOTSO

The Non-Traditional Student Organization is designed to promote interest and awareness of the non-traditional student's needs and goals which are significantly different from those of the traditional students. NoTSO plans to assist those non-traditional students by working toward an active and integrated membership responsive to the needs of older, non-traditional and returning students. NoTSO will facilitate networking with other campus organizations, give assistance when applying for scholarships, and help in gaining tutoring services and provide a sense of belonging within its organization to its members.

Regular Membership Criteria: Non-traditional students are described as meeting one or more of the following:

- is returning to college after a minimum 2 year break
- is over the age of 24 and attending college for the first time
- has a dependent/dependents
- is a veteran
- is single with a dependent, married, divorced or widowed

If you meet any of the above criteria we urge you to complete this application and return it to any NoTSO officer, so that we can begin assisting you with your education. Regular membership dues are $10.00 per semester and are payable no later than two days after the first disbursement date of each semester. The following information will be needed to verify your type of membership, eligibility for scholarships, study groups, tutoring services and other services.

Personal Information

Social Security Number _____ - _____ - _____ **Date of Birth** _____ / _____ / _____

Student: _____

Last Name **First Name**

Mailing address: _____

Address **City,** **State** **Zip**

Email address: _____

Phone Number ( ) _____ **Possible Major:** _____

Are you a veteran? ❑ **yes** ❑ **no**

Are you currently attending school? ❑ **yes** ❑ **no**

If yes, number of hours completed _____ **G.P.A.** _____

What year do you intend to graduate? _____

Which type of membership are you applying for?

☐ **Regular Membership** **Associate Membership** ☐

Are you currently receiving a scholarship? ❑ **yes** ❑ **no**

Do you qualify for financial assistance? ❑ **yes** ❑ **no**

Do you have a dependent(s)? ❑ **yes** ❑ **no**

If yes, please tell how many in each age group

☐ **3 & under** ☐ **4 to 7** ☐ **8 to 12** ☐ **13 to 18** ☐ **over 19**

Is finding and/or needing childcare a hindrance in your education? ❑ **yes** ❑ **no**
If you answered yes to the above question. Do you feel the quality of childcare your child receives is due in part to lack of quality childcare in your community? ❑ **yes** ❑ **no**

Do you want to be a part of a study group? ❑ **yes** ❑ **no**
Please tell us of any other areas that you are experiencing difficulty or that may be hindering you in obtaining or finishing your education?

_____

_____

_____

_____

APPLICANT'S CERTIFICATION AND PERMISSION TO RELEASE INFORMATION
I hereby certify that all information submitted on this application is true and accurate to the best of my knowledge. I hereby give the Officers of NoTSO and/or Faculty/Staff permission to verify information provided with that of the University. I understand that by submitting non-factual information on my application I may be disqualify for membership into the organization and forfeit any membership fees already paid.

Applicant's Signature: Date:

_____ _____

Officer's Signature:

_____ _____