FALL 2017: EDUC 3 /EDUC 4
FINANCIAL SUPPORT APPLICATION
TB & TRAVEL EXPENSES (UP TO $250)
DUE: MONDAY, OCTOBER 9, 2017 BY 12:00 P.M.
TO: SMI RESOURCE CENTER (1315 PIERCE HALL)

PLEASE PRINT LEGIBLY
Full Name _______________________________ UCR Student ID # ________________

Current Grade Level (select one): __ Freshman __ Sophomore __ Junior __ Senior

1. What is your primary reason for enrolling in EDUC 3 (select one)?
   a. Required by my major
   b. Required by my minor
   c. Elective to explore STEM teaching

2. From what type of settings did you learn about EDUC 3 (select all that apply)?
   a. Freshman Advising Seminar – NASC 93
   b. SMI Information Advising Workshop
   c. Major advisor
   d. A friend
   e. SMI website or personnel
   f. Other (please list your source)

3. Each EDUC 3/EDUC 4 student will be responsible for his/her transportation to-and-from the assigned placement site. Do you have transportation? Yes____ No____

4. Do you need financial assistance to cover TB testing cost that was completed at the UCR Campus Health Center? Yes____ No____

What method of transportation are you seeking for financial support (select one)?
   ___ Car – either my car or borrow a friend/family member’s car
   ___ Zip car through UCR
   ___ Rideshare transportation systems (Uber, Lyft)

5. What type of financial support are you currently receiving?
   a. Financial Aid loan(s)
   b. Scholarship(s), specify _______________________________________________________
   c. Grant(s)/Fellowship(s), specify ________________________________________________
   d. Part-time on-campus job, where _______________________________________________
   e. Part-time off-campus job, where _______________________________________________

6. Any additional information you’d like the Review Committee to consider as part of your application for need based travel support? ____________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Office use only

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<th>Date received</th>
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<tbody>
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<td>Personnel who accepted the application</td>
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<td>Application reviewed by</td>
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Rev. 8/1/17