



## Ozarka College Career Pathways Service Choice Form

Student Name: \_\_\_\_\_ Semester: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Campus: \_\_\_\_\_

**In an effort to more accurately serve a larger population of Career Pathways students at Ozarka College with expenses related to reaching your educational goals, we ask that you rank the following services in the order that you would most prefer to receive them. This information is requested to help us determine the services that you are eligible for and would benefit you most. (Completing this form does not mean that you will receive the service.)**

**NOTE:** Students must be enrolled in **three-fourths (75%)** of their credit hours on campus in order to be eligible for a gas card.

Please rank the following from 1 (Greatest need) – 3 (Least need)

\_\_\_\_\_ Transportation

\_\_\_\_\_ Childcare

\_\_\_\_\_ Tuition

Would you be interested in participating in a book loan program to help defray the costs of your books? \_\_\_\_\_ Yes \_\_\_\_\_ No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_