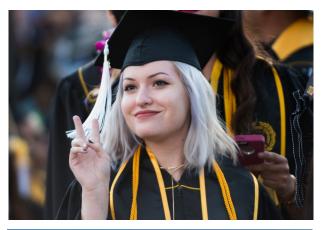


EDUCATIONAL OPPORTUNITY PROGRAM (EOP)

INFORMATION AND APPLICATION FORMS









2017 - 2018

THE PROGRAM

What Is EOP?

The Educational Opportunity Program (EOP) is designed to improve access and retention of historically low-income and educationally disadvantaged students. EOP students have the potential and demonstrated motivation to perform satisfactorily at a CSU, but they have not been able to realize their fullest potential because of their economic or educational background. The program provides admission and academic assistance to EOP-eligible undergraduate students. In many cases, the program offers financial assistance to eligible students. Campuses tailor their programs to accommodate the needs of their student population.

What Can EOP Do for You?

EOP provides information to help you select a campus and assists you in completing the admission process. Once admitted as an EOP student, you may be eligible to enroll in an EOP summer program to strengthen your math, reading, or other skills. Orientation sessions are provided to help you learn about campus services and programs. During your enrollment in college, you can receive counseling, tutoring, and advising services. If you are eligible, an EOP grant may be awarded.

Who May Apply?

Only historically low-income and educationally disadvantaged undergraduate students who need admission assistance or support services to succeed in college are admitted to EOP. They must demonstrate academic potential and motivation, be California residents, or qualify for an AB 540/2000 nonresident tuition exemption and meet the income criteria stated below. Applicants may access EOP information and download the EOP application forms from the Internet at: www.csumentor.edu/planning/eop.

EOP Income Criteria

EOP applicants must meet the preliminary family income guidelines listed on page 2 and demonstrate their family is unable to provide an annual contribution of more than \$1,500 toward their college expenses. Applicants whose total family income exceeds the guidelines may be considered only if their Expected Family Contribution (EFC) for financial aid purposes does not exceed \$1,500. These guidelines are not intended to exclude economically disadvantaged students, but to identify and give priority to the most financially needy applicants.

2017-2018 EOP Family Income Guidelines*

Dependent Students

| Family Size | Maximum Income |
|----------------|-------------------|
| 2 | \$36,200 |
| 3 | \$40,700 |
| 4 | \$47,100 |
| | \$53,200 |
| | \$60,200 |
| 7 | \$65,500 |
| 8 | \$70.700 |

Independent Students

| macpenaent | <u>Otauciits</u> |
|---|-------------------------------|
| | Family Maximum Size Income |
| Single, No Dependents | 1\$15,650 |
| Married, No Dependents Other Than Spouse | 2\$27,400 |
| With Dependents Other Than a Spouse | 2\$46,700 |
| | 3\$53,500 |
| | 4\$63,200 |
| | 5\$72,300 |
| | 6\$82,400 |
| | 7\$90,200 |
| | 8\$98.000 |

These guidelines reflect an income level that will generate an Expected Family Contribution (EFC) of approximately \$1,500. For purposes of these guidelines, the approximate contribution for dependent applicants is based solely on the parental income and does not take into account any parental assets nor does it assume any contribution from the applicant's income or assets. For independent applicants, the guidelines are based strictly on income with no consideration of available savings or other assets.

Financial Assistance

If you are applying for financial aid, you must file a *Free Application for Federal Student Aid* (FAFSA). This form is used to determine the EFC and allows the campus financial aid office to determine financial aid eligibility and consider the student for an EOP grant for up to \$2,000 per year. However, due to limited campus program funding, the average award per student is \$825. You must file the FAFSA as soon as possible after October 1, 2016, and **before** the California financial aid priority filing date of March 2, 2017. EOP grants will be awarded only as long as funds are available. You will have a better chance of receiving an EOP grant and other financial aid for which you are eligible if you apply as soon as possible.

For students without legal immigration status, who qualify for an AB540/2000 nonresident tuition exemption, you may file for state-and-institutional-funded financial aid by filing a California Dream Act Application at www.CalDreamAct.org. Like the FAFSA, you must file the Dream Application as soon as possible after October 1, 2016, and by the California financial aid priority deadline of March 2, 2017.

Application for financial aid is a separate process from the EOP admission process. See page 4 for more information about materials required for your financial aid application. For additional information about financial aid, please review the 2017-2018 CSU Undergraduate Application for Admission Booklet.

^{*}Guidelines are based on the formulas used to determine the Expected Family Contribution (EFC) for federal student financial aid.

EOP ADMISSION

CSU Admission Requirements

Freshman Requirements—You will be eligible for admission as a first-time freshman if your grades and test scores reflect that you are in the upper third of California high school graduates and you have completed the subject requirements detailed in the 2017-2018 CSU Undergraduate Application for Admission at www.csumentor.edu.

Transfer Requirements—If you were eligible as a freshman, you may be eligible as a lower-division transfer student (fewer than 60 transferable semester or 90 quarter units) with a grade point average of 2.0 (C) or better. If not eligible as a freshman, you must complete at least 60 transferable semester units with a grade point average of 2.0 (C) or better, including specified college courses. The 2017-2018 CSU Undergraduate Application for Admission describes the transfer admission requirements at www.csumentor.edu.

You may still be considered for admission to the CSU if you do not meet these requirements. However, you need to consult with your school counselor or an EOP campus contact listed on page 6 for additional information.

EOP Selection Procedure

Once your EOP forms are received, they will be reviewed carefully by a campus selection committee. The committee will consider such factors as historically disadvantaged background, financial need, academic performance, motivation, and potential for success in college. The committee may also look for any contributions that you have made or intend to make to your community, work experience, or the career you wish to pursue. Be sure to complete EOP forms accurately to assist the committee in understanding your academic preparation and motivation.

EOP applicants may be notified separately from both the Admission and EOP offices. Typically, EOP admission notices will be sent to fall applicants in May or June if they complete their files by campus priority deadlines. (Please check with the campus of your choice for specific campus deadlines.) Cal State Northridge and Cal Poly San Luis Obispo accepts applications for fall quarter only. Applicants from high schools that have year-round schedules should plan on completing their EOP application materials earlier than usual to accommodate the school calendar.

Interviews and Skills Assessment

Some campuses use interviews and/or skills assessment testing to help in determining the types of services you are eligible to receive if admitted. The EOP Office at the CSU campus to which you apply will notify you if an assessment is required during the selection process.

HOW TO APPLY

All EOP applicants must submit the application materials requested by the campus Admission and EOP Offices.

Applicants must submit the materials requested by the Financial Aid Office if they wish to be considered for an EOP grant or other financial assistance.

Admission Materials

Apply for admission electronically at www.csumentor.edu or obtain a hard copy of the 2017-2018 CSU Undergraduate Application for Admission Booklet and submit the following to the Admission Office:

- 1. Completed Undergraduate Application for Admission (complete EOP section, Item 11 of electronic application or on hard copy);
- 2. \$55 CSU application fee or **Request to Waive Admission Application Fee Form** (EOPS transfers from community college campuses should obtain an application fee waiver form from the community college EOP&S Office);
- 3. High school and/or college transcripts, or GED score when notified by the campus; and
- 4. SAT or ACT test score (if required) when notified by the campus.

EOP Materials

In addition to the above materials, EOP applicants must submit these forms:

- 1. Applicant Information Form (Form 1)—You can complete this form online at <u>www.csumentor.edu</u> when you complete the undergraduate application.
- 2. Recommendation Forms (Forms 2a and 2b)—You can complete this form online at www.csumentor.edu when you complete the EOP application. Two (2) recommendations are required to complete the EOP application file.
- 3. Other—If you do not apply for financial aid by filing the FAFSA (see below), you may be required to submit other documentation to determine EOP income eligibility.

EOP application deadlines vary from campus to campus. Check with the EOP and/or Admission Office at the campus you wish to attend for the EOP application deadline. The paper *Applicant Information Form Statement* should be sent to EOP, and the *Recommendation Forms* should be sent to EOP by the persons completing them. The online Applicant Information Form and recommendation forms will be sent electronically to the EOP office.

Financial Aid Materials

If you are applying for financial aid, you must complete the *Free Application for Federal Student Aid* (FAFSA) and file it with the federal processor by March 2, 2017. The FAFSA is available at www.csumentor.edu/finaid or at www.fafsa.ed.gov and is also available from high school counselors and college financial aid offices. If you are going to apply online, you (and your parents) should apply for a PIN at www.pin.ed.gov. After your FAFSA is processed, you will be provided with a Student Aid Report (SAR). You should review the SAR carefully in the event it is necessary to correct any information.

Students, without lawful immigration status, who qualify for an AB 540/2000 nonresident tuition exemption, may file for state- and institutional-funded financial aid by filing a California Dream Act Application at www.CalDreamAct.org. Like the FAFSA, you must file the California Dream Act Application as soon as possible after October 1, 2016, and by the California financial aid priority filing deadline of March 2, 2017.

Apply Early

To receive priority consideration for financial aid, you must file the FAFSA according to the instructions prior to March 2, 2017. March 2 is also the deadline for applying for a Cal Grant (money for college that does not need to be paid back). Filing a FAFSA and submitting a verified grade point average (GPA) to the California Student Aid Commission by March 2 will enable you to be considered for a Cal Grant. See your counselor to find out how to submit your GPA. The campus Financial Aid Office may request other documents from you or your parents, and you should submit those documents as soon as possible.

2017-2018 Checklist of CSU Admission, EOP, and Financial Aid Applications and Forms

The following checklist can be used to keep a record of the materials submitted to complete your file. You will be notified by the appropriate office if additional documentation is necessary. As you complete and submit these materials, record the date sent or requested.

| Adm | ission to the Campus | Date Requested | Date Sent |
|------|--|-------------------|--------------|
| 1. | The CSU Undergraduate Application for Admission | | |
| 2. | \$55 CSU Application Fee (or Request to Waive Admission Application Fee Form) | | |
| 3. | Official high school and/or college transcripts (when notified by the campus) | | |
| 4. | SAT or ACT test score (if required) when notified by the campus | | |
| Educ | ational Opportunity Program | | |
| 1. | Applicant Information Form | | |
| 2. | Recommendation Forms (Two Required) | | |
| | Persons completing form: | | |
| | | | |
| 3. | Other | | |
| Fina | ncial Aid | | |
| 1. | Free Application for Federal Student Aid (FAFSA) or if applicable, the California Dream Act Application through CSAC | | |
| 2. | Other documents requested by the Financial Aid Office: | | |
| | | _ | |
| | | _ | |
| | | _ | |

California State University EOP Campus Contacts

CSU Bakersfield

Mr. Richard "Rocky" Maraccini 9001 Stockdale Highway Bakersfield, CA 93311-1099 Phone: (661) 654-3219 rmaraccini@csub.edu

CSU Channel Islands

Ms. Kari Moss One University Drive Camarillo, CA 93012 Phone: (805) 437-8515 kari.moss@csuci.edu

CSU Chico

Ms. Victoria Bass First and Normal Streets Chico, CA 95929-0710 Phone: (530) 898-4028 eopadm@csuchico.edu

CSU Dominguez Hills

Ms. Paz Öliverez 1000 E. Victoria Street, WH D-350 Carson, CA 90747 Phone: (310) 243-3632 eop@csudh.edu

CSU East Bay

Ms. Hope Cranford EOP Admissions, SF 224 25800 Carlos Bee Blvd. Hayward, CA 94542 Phone: (510) 885-4683 eopadmissions@csueastbay.edu

Fresno State University

Ms. Irene Perez 5150 North Maple Avenue, M/S JA62 Fresno, CA 93740-8026 Phone: (559) 278-6025 irene_perez@csufresno.edu

CSU Fullerton

Ms. Willie Bugaoan 800 North State College Blvd. EOP Admissions, UH-231 Fullerton, CA 92834 Phone: (657) 278-2784 wbugaoan@fullerton.edu

Humboldt State University

Ms. Tania Marin One Harpst Street Arcata, CA 95521 Phone: (707) 826-3778 eop@humboldt.edu

CSU Long Beach

Ms. Alexandria Gordon EOP Admissions, LA1-103 1250 Bellflower Blvd. Long Beach, CA 90840 Phone: (562) 985-4288 eopadmissions@csulb.edu

CSU Los Angeles

Ms. Maria Laines 5151 State University Drive Los Angeles, CA 90032 Phone: (323) 343-3214 mlaines@calstatela.edu

CSU Maritime Academy

Ms. Elaine Kociolek 200 Maritime Academy Dr. Vallejo, CA 94590 Phone: (707) 654-1288 eop@csum.edu

CSU Monterey Bay

Ms. Martine Armstrong 100 Campus Center Seaside, CA 93955-8001 Phone: (831) 582-4153 eop@csumb.edu

CSU Northridge

Ms. Doris Clark Bayramian Hall 210 18111 Nordhoff Street Northridge, CA 91330-8205 Phone: (818) 677-2351 eopadmissions@csun.edu

Cal Poly Pomona

Ms. Maria Rivera-Duncan EOP Admissions and Enrollment Building 1-221 3801 West Temple Avenue Pomona, CA 91768 Phone: (909) 869-3362 eopadmin@cpp.edu

CSU Sacramento

Mr. David Ortega 6000 J St, Lassen Hall, Rm. 2205 Sacramento, CA 95819 Phone: (916) 278-6183 ortegad@csus.edu

CSU San Bernardino

Mr. Mario E. Baeza 5500 University Parkway San Bernardino, CA 92407 Phone: (909) 537-5042 eopadmissions@csusb.edu

San Diego State University

Ms. LaShea Conner-Gaten EOP/Ethnic Affairs Student Services Bldg. East #2209 5500 Campanile Drive San Diego, CA 92182-8222 Phone: (619) 594-6298 Igaten@mails.sdsu.edu

San Francisco State University

Ms. Renée Stephens 1600 Holloway Avenue, SSB 201 San Francisco, CA 94132 Phone: (415) 338-2897 applyeop@sfsu.edu

San José State University

Ms. Anna Wisholek One Washington Square San Jose, CA 95192-0196 Phone: (408) 924-2637 anna.wisholek@sjsu.edu

Cal Poly San Luis Obispo

Ms. Kathleen A. Castillo Student Academic Services, Bldg. 81 San Luis Obispo, CA 93407 Phone: (805) 756-2301 eop@calpoly.edu

CSU San Marcos

Ms. Brenda Corral 333 S. Twin Oaks Valley Rd. San Marcos, CA 92096 Phone: (760) 750-6051 eop@csusm.edu

Sonoma State University

Mr. Luis B. Vega 1801 East Cotati Ave, Salazar 1060 Rohnert Park, CA 94928 Phone: (707) 664-3437 luis.vega@sonoma.edu

CSU Stanislaus

Ms. Gabriela Morder One University Circle, MSR 210 Turlock, CA 95382 Phone: (209) 667-3108 gmorder@csustan.edu



2017-2018 Applicant Information Form Educational Opportunity Program • The California State University

Apply Early • Contact the CSU EOP Office for Filing Deadline Dates

You may complete this form online ONLY if you apply online for admission at www.csumentor.edu. To be considered for EOP, you must submit this form and the CSU undergraduate application for admission. Print in ink or type. Answer all questions on this form.

| 1. | Name | | | l Security No. (SSN) | |
|-----|--|--------------------------------------|---|---|--------------------------|
| | Last | First Initia | Please refer more inform | to the end of this PDF application to the end of this PDF application to the end of the | or SSN. |
| 3. | Mailing Address | | 0.1 | | 7: 0 |
| | NumberStreet | Apt. No. | City | | State Zip Code |
| 4. | Primary Phone Number Area Code | Phone Number | il Address | | |
| 5. | Name and phone number where we | | annot be reached at | home: | |
| | Name | | Phone No |). | |
| 6. | Birthdate | 7. Majo | or/career interest | | |
| 8. | Campus to which you are applying | | | 9. Term/Year | |
| 10. | Enter code for total college transfer | semester units you will have | completed at time of | entry/re-entry in CSU. | |
| | Enter code in box: (Include u | nits in progress and planned | | | |
| | 0 - Units completed later than the sum | | | n 30 units 2 - 30-59.5 s | emester units |
| | 3 - 60-89.5 semester units 4 - 90 or m | ore semester units 5 - Have b | achelor's degree or eq | uivalent (Semester unit | s = Quarter units x 2/3) |
| 11. | School last attended (school name, o | city, state) | | | |
| 12. | If not a high school graduate, have y | ou completed the GED (Gene | ral Education Develo | pment) test? Yes | No |
| 13. | Have your participated in any of the | following educational progra | ms? Please check be | elow: | |
| | | Date | | Campus/Location | |
| | Avid | | | | |
| | Upward Bound | | | | |
| | Talent Search orEO | IC | | | |
| | Community College EOP&S | | | | |
| | CSU EOP | | | | |
| | Puente Project | | | | |
| | Independent Living Skills Progr | rams | | | |
| | Other | | | | |
| 14 | Where do you plan to live while atter | nding college? (Check one) | On-campus housing | With pare | ante 🗆 |
| 17. | | | | | |
| | Off-campus apartment or house | Guardian or relative | Othe | er [] | |
| | ographical and Educational Info | | | | |
| 15. | What are your parents'/guardians' hig | | | | Parent/Guardian #2 |
| | 1 - No high school3 - High2 - Some high school4 - Some | ŭ | -year college graduate 4-year college gradua | · · | |
| 16. | How many brothers and sisters are | currently attending schools? | K-12 Atter | nded or attending colle | ge |
| | Received bachelor's degree | | | | |
| 17. | What languages are spoken in your | home? | | | |

Demographic Information

Middle Easterner

(Please specify)

North African

Other White

To conform with the new guidelines of the U.S. Federal Office of Management and Budget (http://www.whitehouse.gov/omb), the California State University must collect from applicants detailed information about their ethnic and racial backgrounds. If you select "Yes" in Question 18a, a response to Question 18b is required. Please do not select more than one response in Question 18b as only ONE response is allowed. If you have selected "No" or "Decline to State," do not answer Question 18b. Ethnicity Decline to State 18a. In regard to your ethnicity, do you consider yourself Hispanic or Latino? Yes (If "No" or "Decline to State," please go to Question 19.) 18b. If you indicated Yes on Question 18a (above), please select the ONE category below that best describes your background. (Do not select more than one.) Argentinean Panamanian **Bolivian** Paraguayan Chilean Peruvian Colombian Puerto Rican Costa Rican Salvadorian Cuban **Spaniard** Dominican (Republic) Uruguayan Ecuadorian Venezuelan Other Central American Guatemalan Honduran Other South American Mexican Other Hispanic or Latino (Please specify) Nicaraguan 19. Race (All undergraduate applicants must respond to Question 19.) The U.S. Census identifies the following races: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Pacific Islander. These racial categories, as well as many sub-categories, are listed below. Mark one or as many races below as appropriate for you. You may mark as many race categories as are appropriate to you. Please mark only one sub-category for each race category that you select. If you select "Decline to State," then you cannot choose any other boxes. WHITE **BLACK or AFRICAN AMERICAN** (Please select the ONE sub-category that best describes (Please select the ONE sub-category that best describes your background.) your background.) African American European

Black

Haitian

Other African/Black

(Please specify)

| AMERICAN INDIAN or ALASKA NATIVE |
|--|
| (Please select the ONE sub-category that best describes your background.) |
| Achomawi/Achumawi |
| Cahto (e.g., Cahto Indian Tribe of the Laytonville) |
| Cahuilla (e.g., Agua Caliente Band of Cahuilla Indians) |
| Chemehuevi (e.g., Chemehuevi Indian Tribe of the Chemehuevi Reservation, California) |
| Chumash (e.g., Santa Ynez Band of Chumash Mission) |
| Costanoan/Ohlone |
| Cupeno (e.g., Los Coyotes Band of Cahuilla & Cupeno) |
| Gabrielino/Tongva |
| Hupa/Hoopa (e.g., Hoopa Valley Tribe, California) |
| Karuk (e.g., Karuk Tribe of California) |
| Kumeyaay (e.g., Ewiiaapaayp Band of Kumeyaay) |
| Luiseno (e.g., La Jolla Band of Luiseno Mission) |
| Maidu (e.g., Enterprise Rancheria of Maidu Indians) |
| Miwok (e.g., Ione Band of Miwok Indians) |
| Mojave (e.g., Fort Mojave Indian Tribe of Arizona) |
| Ohlone |
| Paiute (e.g., Fort Independence Indian Community of Paiute Indians of the Fort) |
| Pomo (e.g., Coyote Valley Band of Pomo Indians) |
| Quechan (e.g., Quechan Tribe of the Fort Yuma Indians) |
| Serrano (e.g., San Manuel Band of Serrano Mission) |
| Shoshone (e.g., Paiute-Shoshone Indians of the Bishop Community of the Bishop Colony) |
| Tolowa |
| Wappo |
| Washoe |
| Western Mono (e.g., Big Sandy Rancheria of Mono Indians) |
| Wintun (e.g., Cachil DeHe Band of Wintun Indians of the Colusa Indian Community) |
| Wiyot (e.g., Wiyot Tribe, California/formerly the Table Bluff Reservation - Wiyot Tribe) |
| Yokuts |
| Yuki |
| Yurok (e.g., Yurok Tribe of the Yurok Reservation) |
| Latin American Indian |
| Other American Indian Tribes |
| (Please specify) |
| Other Alaska Native Tribes |
| (Please specify) |

| | ASIAN | | | | |
|-----|---|---|---|--------------------------------------|---------------------------|
| | (Please select the ONE su | ub-category that best des | scribes your background.) | | |
| | Asian Indian Camb | oodian Indo (| Chinese Korean | Nepalese | Sri Lankin |
| | Bangladeshi Chine | | Loction | Okinawan | Taiwanese |
| | Bhutanese Chine | pt Taiwanese) | Molavoian | Pakistani | Thai |
| | | | — Maldivian | Singaporean | Vietnamese |
| | Burmese Hmon | | | | |
| | Other Asian | '9 | | | |
| | | | | | |
| | NATIVE HAWAIIAN or OTH (Please select the ONE sub-ca | HER PACIFIC ISLANDER stegory that best describes yo | ur background.) | | |
| | Carolinian | Kosraean | Papua New Guine | an Tokelauan | |
| | Chuukese | Marina Islander | Pohnpeian | Tongan | |
| | Fijian | Marshallese | Saipanese | Yapese | |
| | Guamanian or | Native Hawaiian | Samoan | Other Melanesia | n |
| | Chomorro | Ni-Vanuatu | Soloman Islander | Other Micronesia | an |
| | I-Kiribati | Palauan | Tahitian | Other Polynesian | l |
| | Other Pacific Islander | (please specify) | | Decline to state | None of the above |
| 20. | If the California State Uni | iversity is asked to repo | rt only ONE summary race/ | ethnicity description for yo | ou, please choose the ONE |
| | category below that you | want us to report. | | | |
| | (All undergraduate applicar | nts must respond to Questi | on 23. Please check only ONE | box.) | |
| | American Indian or Ala | ska Native | Native Hawaiian or Othe | er Pacific Islander | |
| | Asian | | White | | |
| | Black or African Ameri | can | Two or more races/ethn | icities | |
| | Hispanic or Latino | | Decline to State | | |
| 21 | Logal Cay (ontar Mar E) | Please refer to the e | end of this PDF application for more in | oformation regarding laws pertaining | g to our |
| ۷۱. | Legal Sex (enter M or F) | questions about leg | al sex, sexual orientation, gender ider | ntity and gender expression. | |
| | | | | | |
| 22. | Do you consider yourself t | to be? (Optional) | | | |
| | Lesbian | Gay | Bisexual | Queer | Heterosexual |
| | Pansexual | Asexual | Not Sure | Decline to state | or straight |
| | | | | | |
| 23a | . How do you describe you | urself? (Please select or | ne answer) | | |
| | Woman | Man | Trans Woman | Trans Man | Genderqueer/gender |
| | Not Sure | Decline to state | Not Sure | | non-conforming |
| | Anothe | er orientation (please spec | ify) | | |
| | | | | | |
| 23b | . How do you describe the (Please select one answ | | gender identity in terms of l | behavior, appearance, spe | ech and movement? |
| | Gender conforming | Gender non-conforming | Both | Not Sure | Decline to state |
| | Not list | ed above (please specify) | | | |

| | The following information is used to determine history of low income: | |
|-------------------------------------|---|--|
| 24 a. | /hat is the current occupation/job (list job, not place of employment) for both parents/guardians? | |
| | Parent/Guardian #1 Parent/Guardian #2 | |
| | Occupation Occupation | |
| 24b. | Vhat was your parent's/guardian's occupation/job 10 years ago? | |
| | Parent/Guardian #1 Parent/Guardian #2 | |
| 25a. | lid your family receive any income during 2015-2016 from public assistance programs such as welfare, TANF, Social Security, lisability, etc.? Yes O No | |
| | f yes, list program | |
| 25 b. | Ouring the past 10 years, have you or your family received any income from a public assistance program such as welfare, AFDC, FANF, Social Security, disability, etc.? • Yes • No | |
| | f yes, how many years? Type(s) of aid | |
| 26. | Have you or your family ever participated in any publicly funded programs such as subsidized housing, employment/training programs (i.e., CETA), school lunch programs, etc.? • Yes • No | |
| | f yes, list program(s) | |
| 27. | Do you or any other children in your family work primarily to contribute to household expenses? O Yes O No | |
| | f yes, explain | |
| Fina | cial Status The following information is used to determine history of low-income eligibility for EOP: | |
| [All a | licente must complete this species and must submit the Free Application for Federal Student Aid (FASSA) or if applicable the Colifernia Dream | |
| Act A | licants must complete this section and must submit the Free Application for Federal Student Aid (FAFSA) or if applicable the California Dream clication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. | |
| Act A | olication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross | |
| Act A inclu Incor | olication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. | |
| Act A inclu Incor | olication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: | |
| Act A inclu Incor | olication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated 2016 Estimated/Actual 2017 Estimated | |
| Act A inclu Incor | olication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated Parent/Guardian #2 | |
| Act A inclu Incor 28. | Discation. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated Parent/Guardian #2 Total size of parent(s)/guardian(s) household [including applicant, parent(s), dependent children and other dependent(s)]: | |
| Act A inclu Incor 28. | Dication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated Parent/Guardian #2 Total size of parent(s)/guardian(s) household [including applicant, parent(s), dependent children and other dependent(s)]: f you are independent of parental support, | |
| Act A inclu Incor 28. | Dication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated 2017 Estimated Parent/Guardian #2 Fotal size of parent(s)/guardian(s) household [including applicant, parent(s), dependent children and other dependent(s)]: f you are independent of parental support, A. How many years have you lived apart from parent(s)? Years | |
| Act A inclu Incor 28. | Dication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, and those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated Parent/Guardian #2 Fotal size of parent(s)/guardian(s) household [including applicant, parent(s), dependent children and other dependent(s)]: If you are independent of parental support, A. How many years have you lived apart from parent(s)? Years 3. What is your (and your spouse's) total family income? 2015 Actual 2016 Estimated | |
| Act A inclu Incor 28. | Dication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, not those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated Quardian #1 Parent/Guardian #2 Fotal size of parent(s)/guardian(s) household [including applicant, parent(s), dependent children and other dependent(s)]: f you are independent of parental support, A. How many years have you lived apart from parent(s)? Years 3. What is your (and your spouse's) total family income? 2015 Actual 2016 Estimated C. Total size of your household (including applicant, spouse, dependent children and other dependents): | |
| Act A inclu Incor 28. | Dication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, no those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated Parent/Guardian #2 Fotal size of parent(s)/guardian(s) household [including applicant, parent(s), dependent children and other dependent(s)]: If you are independent of parental support, A. How many years have you lived apart from parent(s)? Years 3. What is your (and your spouse's) total family income? 2015 Actual 2016 Estimated C. Total size of your household (including applicant, spouse, dependent children and other dependents): D. Number of dependent children in household: | |
| Act A inclu Incor 28. Pare 29. 30. | Dication. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, no those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated Guardian #1 Parent/Guardian #2 Fotal size of parent(s)/guardian(s) household [including applicant, parent(s), dependent children and other dependent(s)]: f you are independent of parental support, A. How many years have you lived apart from parent(s)? Years 3. What is your (and your spouse's) total family income? 2015 Actual 2016 Estimated C. Total size of your household (including applicant, spouse, dependent children and other dependents): D. Number of dependent children in household: E. Are both parents/guardians deceased? Yes No | |
| Act A inclu Incor 28. Pare 29. 30. | Discation. EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, not those who are considered independent for financial purposes. Incomplete applications may not be considered. Total Income = Adjusted Gross + Untaxed Income.] If your estimated/actual income or estimated income is less than zero, please enter 0. Please indicate income of parent(s)/guardian(s) from all sources even if you don't live with them: 2016 Estimated/Actual 2017 Estimated 2016 Estimated/Actual 2017 Estimated /Guardian #1 Parent/Guardian #2 | |

| Applicant's Name | |
|---------------------|--|
| Social Security No. | |

Autobiographical Statement

| | wers to the following questions will help us determine your motivation and preparation to undertake college work. Please answer precisely and honestly as possible. Use complete sentences and avoid responses such as "yes" or "no." |
|-----|--|
| | List any volunteer, extracurricular activities, or work experience in which you are or have been involved in the past two years. |
| | |
| | |
| | |
| 33. | Why would you like to attend college? Discuss your career and personal goals. Are there any particular circumstances, school experiences, or persons that influenced your preparation or motivation to attend college (e.g., cultural/financial background, family, teachers, schools you attended)? Please explain. |
| | |
| | |
| | |
| 34. | Briefly discuss your academic background. Did you utilize any additional support at your high school, such as tutoring? Do your grades in high school and/or college reflect your academic ability or potential? |
| | |
| | |
| | |
| 35. | Briefly describe your family's economic background. Include information about your financial challenges. |
| | |
| | |
| | |
| 36. | Please tell us more about yourself. Is there any additional information you would like EOP to consider in determining your admission to the program? |
| | |
| | |
| | |
| | I certify the information submitted in connection with my application to EOP is complete and accurate. |
| | Applicant's Signature: Date: |

2017-2018 Recommendation Form

Educational Opportunity Program • The California State University
Apply Early • Contact the CSU EOP Office for Filing Deadline Dates

| App | olicant's Informati | on | | | | | |
|------------------------------------|---|--|---|--|--|--|---|
| Nan | | | | | | | |
| Add | ress | First | Initial | Area Code | Phone Number | Socia | al Security Number |
| | Number | Street | Apt | . No. City | 1 | State | Zip Code |
| Cam | npus Applying To | | | | | | Term/Year |
| То | the Student: | | | | | | |
| com | ment about your po | ormation and give this form to tential to succeed in college. res two (2) recommendations. | This form should not | | | | |
| The EOP incid app reco | person whose name selection committed dents that illustrate licant does not allow the selection may be selected. | Completing this Form e appears above has applied for would appreciate you answ the student's maturity, initiative you to make an evaluation of e made available for inspectionals and regulations. | or admission to the E ering the questions be e, and academic poto f any item, please ind | elow in a spe ential to succ icate "N/A" | ecific and candid r ceed in college. If y or not applicable. I | manner, notir your relation: Please unde | ng in particular ship with the rstand that your |
| You | r Name | | | Po | osition | | |
| Sch | ool/Organization | | | | Phone Numb | er | |
| | | | | | | Area Code | Phone Number |
| Add | ress Number | Street | | | City | State | Zip Code |
| 2. | Academic achie Writing skills Reading skills Math skills Academic poter | e the applicant's characteristic | Above Above | Average | Average | Needs I | mprovement |
| | | | | | | | |
| | Demonstrates le Self-starter has | intellectual curiosity | | | | | |
| | Sell-Starter, flas Is highly motivate | • | | | | | |
| | | | or diagona intrat- | | | | |
| | | ing experiences, is tolerant of min | or disappointments | | | | |
| | 6. Has potential fo | r growth | | | | | |

| 20 | 17-2018 Application Information Form | Applicant's Name | |
|----|---|--------------------------------|---------------------------------|
| Re | ecommendation Form (page 2) | Social Security No. | |
| 4. | What qualities best describe this applicant? | | |
| | | | |
| 5. | To your knowledge, does this applicant have a historically disadvantageneration college student, inner-city or migrant family)? | ged background (i.e., low inc | ome for several years, first- |
| | Yes O No O | | |
| | Why? | | |
| | | | |
| | | | |
| 6. | Why do you believe this student qualifies for EOP, and what services o succeed in college? | r assistance would you reco | ommend to help him/her to |
| | | | |
| | | | |
| 7. | Please discuss any barriers to achievement the applicant has faced. Ecollege? | Oo you believe they will affec | ct his/her performance in |
| | | | |
| | | | |
| | | | |
| | | | |
| 8. | What is your assessment of the student's potential, motivation, or capain college? | ability for undertaking colleg | e work and potential to succeed |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | Signature | Date | |

2017-2018 Recommendation Form

Educational Opportunity Program • The California State University
Apply Early • Contact the CSU EOP Office for Filing Deadline Dates

| App | licant's Informati | on | | | | |
|--------------------------------|---|--|---|---|--|---|
| Nam | Last | First | Initial | Area Code | Phone Number | Social Security Number |
| Addı | | 11130 | maa | 71100 0000 | Thene ivallises | Coolar Coolarity Hambon |
| Com | Number | Street | Apt. f | lo. City | / | State Zip Code |
| Calli | pus Applying To | | | | | Term/Year |
| Com | ment about your po | ormation and give this form to a stential to succeed in college. T res two (2) recommendations. | | | | |
| The EOP incid application reco | person whose nam selection committe lents that illustrate icant does not allow mmendation may b | Completing this Form: the appears above has applied for the would appreciate you answer the student's maturity, initiative by you to make an evaluation of the made available for inspection laws and regulations. | ring the questions be , and academic pote any item, please indi | elow in a sp ntial to succ cate "N/A" | ecific and candid r ceed in college. If y or not applicable. | manner, noting in particular your relationship with the Please understand that your |
| Your | Name | | | Po | osition | |
| | ool/Organization | | | | Phone Numb | Area Code Phone Number |
| Addı | ress Number | Street | | | City | State Zip Code |
| 2. | Based on your kno 1. Academic achie 2. Writing skills 3. Reading skills 4. Math skills 5. Academic poter Check how you rat 1. Has positive sel 2. Demonstrates le 3. Self-starter, has 4. Is highly motiva | e the applicant's characteristic f-image eadership capability intellectual curiosity | s and motivation. If u | academic : | Average Ave the area blank. | leave the area blank. Needs Improvement |
| | | ting experiences, is tolerant of mino | r disappointments | | | |
| | 6. Has potential fo | r growth | | | | |

| 2017-2018 Application Information Form Applicant's Name | | | |
|--|---|--------------------------------|---------------------------------|
| Re | ecommendation Form (page 2) | Social Security No. | |
| 4. | What qualities best describe this applicant? | | |
| | | | |
| 5. | To your knowledge, does this applicant have a historically disadvantaged background (i.e., low income for several years, first-generation college student, inner-city or migrant family)? | | |
| | Yes No No | | |
| | Why? | | |
| | | | |
| | | | |
| 6. | Why do you believe this student qualifies for EOP, and what services of succeed in college? | or assistance would you reco | ommend to help him/her to |
| | | | |
| | | | |
| 7. | Please discuss any barriers to achievement the applicant has faced. Do you believe they will affect his/her performance in college? | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 8. | What is your assessment of the student's potential, motivation, or cap in college? | ability for undertaking colleg | e work and potential to succeed |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | Signature | Date | |

Return this form to the EOP Office at the campus where the applicant is applying for admission.

2017-2018 Application for Educational Opportunity Program

Information Section

Social Security Number (SSN)

You are required to include your Social Security number on admission application forms to all CSU campuses pursuant to Section 41201, Title 5, Code of California Regulations and Section 6109 of the Internal Revenue Code. CSU campuses may use the Social Security number to identify your student records maintained in your association with the campus and, if needed, to help collect debts owed the university. Also, the Internal Revenue Service requires the university to file information returns that include the student's Social Security number and other information, such as the amount paid for qualified tuition, related expenses, and interest on educational loans. That information is used to help determine whether you, or a person claiming you as a dependent, may take a credit or deduction to reduce federal income taxes. In addition, this information is utilized to match your application to academic records, financial aid applications, and other documents. In addition, this information is utilized to match your application to academic records, financial aid applications, and other documents.

Deferred Action for Childhood Arrivals (DACA)

If you have qualified for Deferred Action for Childhood Arrivals (DACA) from the United States Citizenship and Immigration Services and subsequently been issued a Social Security Number, please enter the number above. If you have qualified for Deferred Action for Childhood Arrivals (DACA) from the United States Citizenship and Immigration Services and subsequently been issued a Social Security Number, please enter the number above. If you do not have a Social Security Number at the time you file the application, you may leave the item blank and the campus will assign a temporary number. However, you should obtain a Social Security number, unless you are prohibited by law from doing so, and submit it to the university by the time you begin enrollment. Failure to furnish your correct Social Security number may result in the imposition of a penalty by the Internal Revenue Service.

Demographic Information - Questions 21, 22, & 23

For informational purposes only; no information you provide will be used in a discriminatory manner. This information will not affect any student's application for admission. California bill AB 620 (2011) requests, California State University (CSU) "to collect aggregate demographic information regarding sexual orientation and gender identity of staff and students within other aggregate demographic data collected, and would require annual transmittal of any report to the Legislature, as specified, and posting of the information on the Internet Web site of each respective institution". The data is being collected to "develop recommendations to improve the quality of life for lesbian, gay, bisexual, and transgender faculty, staff and students".

CSU collects voluntary demographic information regarding the sexual orientation, gender identity or gender expression of students. This information is only used for summary demographic reporting;

- Your responses are kept private and secure
- Providing this information is optional
- The aggregate data will not be used for a discriminatory purpose

The information will be used for state and federal reporting purposes. It is optional and voluntary and will not be used for a discriminatory purpose. "Gender", in this context, as protected in The Equity in Higher Education Act, is understood to include "gender identity" and "gender expression".

