



The Common Application for EOPS, CalWORKs, CARE, GSP, NextUp, TRIO and RISE

Office Phone Number: (916) 660-7366

Please submit this application along with all required documents **in person** to the Special Programs office (located in Winstead Bldg. L-141) or Rise Office (located in 4th floor of the library) We will not accept any submissions via fax, email or postal mail. **Applicants will be notified by our office ONLY if they've been selected for one of the programs.**

Section 1: Student Information

Name: _____
Last PLEASE PRINT First MI

Student ID #: _____ Cell: (____) _____ Can we text to this cell#? Yes No

Ethnic Background: Asian Black/African American Hawaiian/Pacific Islander Hispanic/Latino
 Native American/Alaskan Native White Other _____

Section 2: Eligibility Information

Application Status: Returning EOPS TRIO NextUp GSP CalWORKs | Transfer EOPS TRIO NextUp

Is your goal to earn an Associate's Degree at Sierra? Yes No

Do you plan on transferring to a 4-year college/university? Yes No

Has your birth or adoptive parent earned a 4-year degree? Yes No

Semester Applying for: Fall Semester Spring Semester Summer Semester

Units enrolled for semester indicated above: 12+ 9-11.5 0-8.5 (must attach DSPS waiver for EOPS/TRIO)

Citizenship Status: U.S. Citizen Permanent Resident AB 540 (Dream) Other, please specify: _____

I am currently a participant or have applied for the following service/program(s):

DSPS/LD Puente Umoja Veteran Services RISE

EDUCATIONAL HISTORY (Check only those that apply to you)

High School Graduation Status:

- I am a high school graduate – year of graduation: _____ High School GPA: _____
- I have a GED or Equivalency/California Proficiency – year completed: _____
- I have not graduated from high school

College Status:

Have you attended any other College or Universities?

- No, I have not attended any other colleges
- Yes, I have attended other colleges (please attach transcripts and complete the information below)

Name of College/University

1. _____ 2. _____

Section 3: Foster Youth and NextUp Eligibility

Are you a current or former foster youth? Yes No (If "No", skip this section)

If your response is "Yes" are you under 26 years of age? Yes No; Date of Birth: ____/____/____ Age: ____

Was your dependency status established or continued by the Court on or after your 16th birthday? Yes No

Are you receiving AB12 benefits? Yes No Are you receiving THP OR THP+? Yes No

Section 4: CalWORKs and CARE Eligibility

Are you currently receiving cash aid benefits (CalWORKs)? Yes No

Are you a single parent and head of household? Yes No

Do you have dependent child(ren) who receive cash aid benefits (CalWORKs)? Yes No

Please list your County Contact Person _____ Phone #: (_____) _____

Please list all members of your family who receive cash aid and their date of birth:

Name	Date of Birth	Name	Date of Birth
	/ /		/ /
	/ /		/ /
	/ /		/ /
	/ /		/ /

What is your marital status: Single Separated Divorced Widowed Married

Section 5: Documents Must Be Submitted with Application

- Class Schedule with proof of CCPG eligibility** (*copies can be obtained from your mySierra account*)
- If attended other college(s), submit copy of unofficial transcript(s) from other college(s)**
- If CalWORKs, submit CURRENT proof of receipt of CalWORKs from your county case worker**
- If a former or current Foster Youth, submit copy of foster care verification from any of the following foster care entities: Ombudsman Office, ILP, Social Worker or Placement Probation Officer.** Foster care verification document must be on an official county/agency letter head.

Section 6: Signature Required

STUDENT PUBLICITY RELEASE

I understand that if I am accepted into the EOPS, CalWORKs, CARE, GSP, NextUp or TRiO program, the staff may include my name and/or picture in publications and on the Sierra College website. The website highlights student accomplishments and participation in campus and in the program activities. I understand that I will receive no monetary payment now nor in the future for the reproduction of these photographs.

RELEASE OF INFORMATION

I certify that the information that I have provided on this application is, to the best of my knowledge, complete and accurate. Furthermore, I understand that by applying for the EOPS, CalWORKs, CARE, GSP, NextUp or TRiO program, I authorize the program staff to obtain records or data pertinent to my participation from other campus departments and programs and to release information to the U.S. Department of Education for the purpose of project performance reporting. The program staff also have my permission to communicate verbally or otherwise with staff, faculty or off-campus professionals on my behalf.

Students will be notified by our office **only** if they've been selected for the program.

Submission of an incomplete application and/or falsification will result in your application being denied or withdrawn.

Student Signature

Date

Staff use only

<p>EOPS Status:</p> <input type="checkbox"/> New <input type="checkbox"/> Returning <input type="checkbox"/> EOPS Transfer # of UNITS student is enrolled in: _____ <input type="checkbox"/> DSPS Waiver Received CCPG: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C (with 0 EFC) <input type="checkbox"/> D <input type="checkbox"/> Eligible for EOPS 1. Qualified for remedial 2. Not HS grad or no GED 3. HS GPA below 2.5 4. Took remedial courses 5. Other: _____ <input type="checkbox"/> Not Eligible for EOPS 1. Did not meet criteria: <input type="checkbox"/> CCPG <input type="checkbox"/> No educ disadv. 2. Over 30 units / AA-AS degree 3. Not enrolled in min. units 4. Low GPA 5. Incomplete application Other Eligibility: <input type="checkbox"/> CARE <input type="checkbox"/> FFY/NextUp <hr/> EOPS ACCEPTED YES NO	<p>TRiO Status:</p> <input type="checkbox"/> New <input type="checkbox"/> Returning <input type="checkbox"/> TRiO Transfer <input type="checkbox"/> DSPS Waiver CCPG: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C (with 0 EFC) <input type="checkbox"/> Taxable Income <input type="checkbox"/> First Gen <input type="checkbox"/> Low Income <input type="checkbox"/> Disabled <input type="checkbox"/> Eligible for TRiO 1. Meets min. eligibility criteria <input type="checkbox"/> Not Eligible for TRiO 1. Does not meet min eligibility 2. Low GPA 3. Not enrolled in min. units 4. No college, HS GPA under 3.0 5. Test scores too low 6. ESL placement less than 540 7. Goal not in line w/ program <hr/> TRiO ACCEPTED YES NO <div style="background-color: #cccccc; padding: 5px; margin-top: 5px;"> <input type="checkbox"/> EOPS <input type="checkbox"/> TRiO <input type="checkbox"/> CalWORKs <input type="checkbox"/> RISE <input type="checkbox"/> CARE <input type="checkbox"/> NextUp / GSP </div> <hr/> Director Signature Date	<p>CalWORKs Status:</p> <input type="checkbox"/> New <input type="checkbox"/> Returning <input type="checkbox"/> Eligible for CalWORKs 1. Meets min. eligibility criteria <input type="checkbox"/> Not Eligible for CalWORKs 1. Not receiving cash aid for self 2. No current county verification <hr/> CalWORKs ACCEPTED YES NO <p>NextUp/GSP Status:</p> <input type="checkbox"/> New <input type="checkbox"/> Returning <input type="checkbox"/> DOB _____ <input type="checkbox"/> DSPS Waiver <input type="checkbox"/> Eligible for GSP 1. In care prior to 16 years old 2. In care after 16 years old County _____ <input type="checkbox"/> Not Eligible for GSP 1. Never in Foster Care placement 2. Legal Guardian 3. Probation Youth Only <hr/> NextUp/GSP ACCEPTED YES NO	<p>RISE Status: STUDENT MUST HAVE < 30 DEGREE APPLICABLE UNITS AND QUALIFY FOR AT LEAST 2 OF THE FOLLOWING 3 AREAS</p> <p>1: INCOME CCPG: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C (<\$10,000 EFC) <input type="checkbox"/> Pell <input type="checkbox"/> EFC <\$10,000</p> <p>2: ACADEMIC NEED <input type="checkbox"/> Math w/support <input type="checkbox"/> Eng w/support <input type="checkbox"/> HS GPA < 2.50</p> <p>3: BACKGROUND <input type="checkbox"/> First Gen Under-represented group <input type="checkbox"/> _____ <input type="checkbox"/> Primary language spoken at home is/was not English <input type="checkbox"/> Not Eligible for RISE <hr/> RISE ACCEPTED YES NO </p>
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