



Umoja (a Kiswahili word meaning unity) is a community of educators and learners committed to the academic success, personal growth and self-actualization of Black/African-American students. The Umoja Learning Community seeks to educate the whole student—body, mind and spirit. Informed by an ethic of love and its vital power, the Umoja will deliberately engage students as full participants in the construction of knowledge and critical thought. The Umoja Learning Community seeks to help students experience themselves as valuable and worthy of an education.

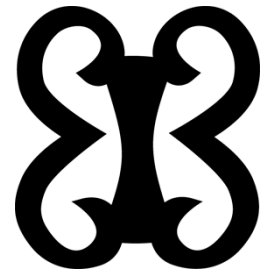
With emphasis on topics relevant to the African-American experience, the curriculum focuses on improving reading, writing, self-discipline and critical thinking skills. The Umoja Learning Community leaders also provide assistance with the personal issues that often hinder Black/African-American students in an educational setting. The Umoja program is a “family” that cares for each other in the new experience of learning to navigate college and becoming successful professionals.

**Umoja Learning Community, Sierra College**  
**Rocklin Campus**  
**5000 Rocklin Road, Rocklin, CA 95677**  
**Counseling Center, Winstead Building**  
**(916) 660-7415 / [umoja@sierracollege.edu](mailto:umoja@sierracollege.edu)**

The mission of the Umoja Learning Community is to retain students at the community college level, assist students in graduating with an Associate’s Degree or certificate, and increase transfer readiness to a four-year college or university.

**Benefits of participating in Umoja at Sierra College:**

- **Strong support system**
- **Personal attention from counselor and instructors**
- **Guaranteed classes**
- **Peer tutoring**
- **Supplemental instruction**
- **Motivational campus tours**
- **Cultural workshops**
- **Conferences**
- **Community Service**
- **Networking**
- **Friendship**



**NKONSONKONSON**

**“Chain link”:** symbol of unity and human relations.

A reminder to contribute to the community, that in unity lies strength.

Semester: Fall \_\_\_\_\_ Sp \_\_\_\_\_ Su \_\_\_\_\_

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	NOTES
7:00 – 8:00						
8:00 – 9:20						
9:30 – 10:50						
11:00 – 12:20						
12:30 – 1:50						
2:00 – 3:20						
3:30 – 4:50						
5:00 – 6:20						
6:30 – 9:35						



# APPLICATION

Application for: Fall 20\_\_\_\_ Spring 20\_\_\_\_ Summer 20\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Student I.D. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

- Ethnicity:**
- |   |   |
|---|---|
| <input type="checkbox"/> American Indian        | <input type="checkbox"/> Asian/Pacific Islander           |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Hispanic/Mexican American/Latino |
| <input type="checkbox"/> White/Caucasian        | <input type="checkbox"/> Other _____                      |



Sankofa: A symbol of the wisdom of learning from the past in building the future.

# STUDENT INFORMATION

What is your major? \_\_\_\_\_

What is your educational goal?  Transfer without an AA/AS  Transfer with an AA/AS Degree  
 Graduate with an AA/AS Degree  Certificate  Other

Are you eligible for financial aid?  Yes  No  Don't Know

Are you planning to work while attending college? If so, how many hours per week? \_\_\_\_\_

Please describe your career goal(s): \_\_\_\_\_

Will you be living in the dorms? \_\_\_\_\_

# HIGH SCHOOL INFORMATION

High School Graduate  Yes  No  Expected Graduation Year \_\_\_\_\_

Name of High School \_\_\_\_\_

High School GPA (approximate) \_\_\_\_\_

Were you enrolled in special education courses in high school?  Yes  No  Don't Know

# PARENT INFORMATION

Mother's highest level of education:

- Doctorate or Professional Degree
- Master's Degree
- Bachelor's Degree
- Associate's Degree
- Some College
- High School Graduate/GED
- Some High School

Father's highest level of education:

- Doctorate or Professional Degree
- Master's Degree
- Bachelor's Degree
- Associate's Degree
- Some College
- High School Graduate/GED
- Some High School

I certify that all of the information on this application is accurate and complete to the best of my knowledge.

I give Sierra College permission to collect and utilize this data to improve student success. I give Sierra College permission to speak with my family and other people involved in my educational pursuit.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>PROGRAM USE ONLY:</b>	<b>ATH</b>	<b>FA</b>
Contact:	<b>DORMS</b>	<b>FFY</b>
Appointment:	<b>DSPS</b>	<b>TRIO</b>
Registered:	<b>EOPS</b>	