2013-2014 Applicant Information Form

Educational Opportunity Program • The California State University

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
   Last
   First
   Initial

2. Social Security No.

3. Mailing Address
   Number Street
   Apt. No.
   City
   State
   Zip Code

4. Primary Phone Number
   Area Code
   Phone Number
   E-mail Address

5. Name and phone number where we may leave a message if you cannot be reached at home:
   Name
   Phone No.

6. Birthdate
7. Sex: M ☐ F ☐ 8. Major/career interest

9. Campus to which you are applying

10. Term/Year

11. 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 units in progress and planned)
   0 - Units completed later than the summer following high school graduation
   1 - fewer than 30 units
   2 - 30-59.5 semester units
   3 - 60-89.5 semester units
   4 - 90 or more semester units
   5 - Have bachelor's degree or equivalent (Semester units = Quarter units x 2/3)

12. School last attended (school name, city, state)

13. If not a high school graduate, have you completed the GED (General education Development) test?
   Yes ☐ No ☐

14. Have your participated in any of the following educational programs? Please check below:
   Date
   Campus/Location
   □ AVID
   □ Upward Bound
   □ Talent Search or _________EOC
   □ Community College EOP&S
   □ CSU EOP
   □ Puente Project
   □ Independent Living Programs (ILP)
   □ Other

15. Where do you plan to live while attending college? (Check one)
   ☐ On-campus housing
   ☐ With parents
   ☐ Off-campus apartment or house
   ☐ Guardian or relative
   ☐ Other

Biographical and Educational Information

16. What are your parents’ highest level of formal education? Enter code in box:
   □ Mother
   □ Father
   1 - No high school
   2 - Some high school
   3 - High school graduate
   4 - Some college
   5 - 2-year college graduate
   6 - 4-year college graduate
   7 - Postgraduate

17. How many brothers and sisters are currently attending schools?
   □ K-12
   □ Attended or attending college
   □ Received bachelor’s degree

18. What languages are spoken in your home?
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 19a, a response to Question 19b is required. Please do not select more than one response in Question 19b as only ONE response is allowed. If you have selected “No” or “Decline to State,” do not answer Question 19b.

Ethnicity

19a. In regard to your ethnicity, do you consider yourself Hispanic or Latino? Yes ☐ No ☐ Decline to State ☐
(If “No” or “Decline to State,” please go to Question 20.)

19b. If you indicated Yes on Question 19a (above), please select the ONE category below that best describes your background.
(Do not select more than one.)

☐ Argentinean
☐ Bolivian
☐ Chilean
☐ Colombian
☐ Costa Rican
☐ Cuban
☐ Dominican (Republic)
☐ Ecuadorian
☐ Guatemalan
☐ Honduran
☐ Mexican
☐ Nicaraguan
☐ Panamanian
☐ Paraguayan
☐ Peruvian
☐ Puerto Rican
☐ Salvadorian
☐ Spaniard
☐ Uruguayan
☐ Venezuelan
☐ Other Central American
☐ Other South American
☐ Other Hispanic or Latino _________________________________
(Please specify)

20. Race

(All undergraduate applicants must respond to Question 20.)

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 ☐
(Please select the ONE sub-category that best describes your background.)

BLACK or AFRICAN AMERICAN ☐
(Please select the ONE sub-category that best describes your background.)

☐ European
☐ Middle Easterner
☐ North African
☐ Other White

☐ African American
☐ Black
☐ Haitian
☐ Other African/Black

(Please specify)
(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)
☐ Gabriellino/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)
Please select the ONE sub-category that best describes your background.

Asian □

Asian Indian □
Bangladeshi □
Bhutanese □
Burmese □
Cambodian □
Chinese (except Taiwanese) □
Filipino □
Hmong □
Other Asian □

Indo Chinese □
Indonesian □
Iwo Jiman □
Japanese □
Korean □
Laotian □
Malaysian □
Maldivian □

Nepalese □
Okinawan □
Pakistani □
Singaporean □
Sri Lankan □
Taiwanese □
Thai □
Vietnamese □

Native Hawaiian or Other Pacific Islander □

Carolinian □
Chuukese □
Fijian □
Guamanian or Chomorro □
I-Kiribati □
Kosraean □
Mariana Islander □
Marshallese □
Native Hawaiian □
Ni-Vanuatu □
Palauan □
Papua New Guinean □
Pohnpeian □
Saipanese □
Samoan □
Solomon Islander □
Tahitian □
Tokelauan □
Tongan □
Yapese □
Other Melanesian □
Other Micronesia □
Other Polynesian □
Other Pacific Islander □

Other Asian □

(All undergraduate applicants must respond to Question 21. Please check only ONE box.)

American Indian or Alaska Native □
Asian □
Black or African American □
Hispanic or Latino □

Native Hawaiian or Other Pacific Islander □
White □
Two or more races/ethnicities □
Decline to State □
### Economic Background

The following information is used to determine history of low income:

22A. What is the current occupation/job (list job, not place of employment) for both parents?

<table>
<thead>
<tr>
<th>Father’s Name</th>
<th>Occupation</th>
<th>Mother’s Name</th>
<th>Occupation</th>
</tr>
</thead>
</table>

22B. What was your parent’s occupation/job 10 years ago?

<table>
<thead>
<tr>
<th>Father</th>
<th>Occupation</th>
<th>Mother</th>
<th>Occupation</th>
</tr>
</thead>
</table>

23A. Did your family receive any income during 2011-2012 from public assistance programs such as welfare, TANF, Social Security, disability, etc.?  

- Yes
- No

If yes, list program:

23B. During the past 10 years, have you or your family received any income from a public assistance program such as welfare, AFDC, TANF, Social Security, disability, etc.?

- Yes
- No

If yes, how many years?  

Type(s) of aid:

24. 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

If yes, list program(s):

25. Do you or any other children in your family work primarily to contribute to household expenses?  

- Yes
- No

If yes, explain:

### Financial Status

The following information is used to determine history of low-income eligibility for EOP:

[All applicants must complete this section and must submit the Free Application for Federal Student Aid (FAFSA). EOP may request other forms of documentation to verify self-reported income. Parental income information is required for all students, including those who are considered independent for financial purposes. Incomplete applications may not be considered.]

26. Please indicate income of parent(s)/guardian(s) from all sources even if you don’t live with them:

<table>
<thead>
<tr>
<th>2012 Estimated/Actual</th>
<th>2013 Estimated</th>
<th>2012 Estimated/Actual</th>
<th>2013 Estimated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father</td>
<td></td>
<td>Mother</td>
<td></td>
</tr>
</tbody>
</table>

27. Total size of parent(s)/guardian(s) household [including applicant, parent(s), dependent children and other dependent(s)]:

28. If you are independent of parental support,

A. How many years have you lived apart from parent(s)?  

- Years

B. What is your (and your spouse's) total family income?  

<table>
<thead>
<tr>
<th>2012 Actual</th>
<th>2013 Estimated</th>
</tr>
</thead>
</table>

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 deceased?  

- Yes
- No

F. Are you or were you (until age 18) a foster youth?  

- Yes
- No

Or a ward/dependent of the court?  

- Yes
- No

29. Have you completed the 2013-2014 Free Application for Federal Student Aid (FAFSA) or California Dream Act application and mailed it to the central processing service?  

- Yes  
  Date submitted:  

- No  
  Date you plan to submit FAFSA:
30. List any volunteer, extracurricular activities, or work experience in which you are or have been involved in the past two years.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

31. 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.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

32. 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?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

33. Briefly describe your family’s economic background. Include information about your financial challenges.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

34. 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: ________________
Applicant’s
Name
Last First Initial Area Code Phone Number Social Security Number
Address
Number Street Apt. No. City State Zip Code
Campus Applying To

To the Student:
Complete the above information and give this form to a counselor, teacher, community member, employer, or any individual who can comment about your potential to succeed in college. This form should not be completed by a family member or by the EOP Applicant. The EOP program requires two (2) recommendations.

To the Individual Completing this Form:
The person whose name appears above has applied for admission to the Educational Opportunity Program (EOP) at a CSU campus. The EOP selection committee would appreciate you answering the questions below in a specific and candid manner, noting in particular incidents that illustrate the student’s maturity, initiative, and academic potential to succeed in college. If your relationship with the applicant does not allow you to make an evaluation of any item, please indicate “N/A” or not applicable. Please understand that your recommendation may be made available for inspection at the student’s request pursuant to the Family Educational Rights and Privacy Act of 1974 and related laws and regulations.

Your Name
Position
School/Organization
Phone Number
Area Code Phone Number
Address
Number Street City State Zip Code

1. How long have you known the applicant? ________ years ________ months. Under what circumstances?
________________________________________________________________________________________________________
________________________________________________________________________________________________________

2. Based on your knowledge of the applicant, check how you rate his/her academic skills.

<table>
<thead>
<tr>
<th>Academic achievement</th>
<th>Outstanding</th>
<th>Above Average</th>
<th>Average</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Writing skills</td>
<td></td>
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<tr>
<td>2. Reading skills</td>
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<tr>
<td>3. Math skills</td>
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<tr>
<td>4. Academic potential</td>
<td></td>
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</tbody>
</table>

3. Check how you rate the applicant’s characteristics and motivation.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Agree Somewhat</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has positive self-image</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2. Demonstrates leadership capability</td>
<td></td>
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<td></td>
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<tr>
<td>3. Self-starter, has intellectual curiosity</td>
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<td></td>
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<tr>
<td>4. Is highly motivated</td>
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<tr>
<td>5. Survives frustrating experiences, is tolerant of minor disappointments</td>
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<tr>
<td>6. Has potential for growth</td>
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</table>
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 ☐

Why?
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________

6. Why do you believe this student qualifies for EOP, and what services or assistance would you recommend to help him/her to succeed in college?
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
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7. Please discuss any barriers to achievement the applicant has faced. Do you believe they will affect his/her performance in college?
________________________________________________________________________________________________________
________________________________________________________________________________________________________
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8. What is your assessment of the student’s potential, motivation, or capability for undertaking college work and potential to succeed in college?
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
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Signature ___________________________________________ Date ________________________________

Return this form to the EOP Office at the campus where the applicant is applying.
To the Student:
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Signature ___________________________________________ Date __________________________

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