

Central California Educational Opportunity Center

** All information must be provided to determine eligibility from CCEOC**
 ALL INFORMATION ON THIS FORM WILL BE KEPT PERSONAL & CONFIDENTIAL

Participant Registration Form

STUDENT ID # _____ Today's Date _____

Name: _____ SS# _____
 (Please Print) First Middle Last

Address: _____ City _____ Zip Code _____ County _____

Telephone# (559) _____ Message # () _____ Date of Birth _____ Age _____

PLEASE COMPLETE WITH THE MOST CURRENT AND ACCURATE INFORMATION

Female Male

Ethnic Background:

- American Indian or Alaskan Native
- Asian
- Black or African American
- Hispanic or Latino
- White
- Native Hawaiian or Other Pacific Islander
- More than one race reported
- Other _____

Are you a U.S. citizen or legal resident?

Yes No

Are you a Veteran?

Yes No

Are you disabled?

Yes No

What is your household size?

- 1 2 3
- 4 5 6
- 7 8 9+

Please indicate your taxable income range for "last year"?

- Less than \$ 14,355
- \$ 14,356 - \$ 19,245
- \$ 19,246 - \$ 24,135
- \$ 24,136 - \$ 29,025
- \$ 29,026 - \$ 33,915
- \$ 33,916 - \$ 38,805
- \$ 38,806 - \$ 43,695
- \$ 43,696 - \$ 48,585
- \$ 48,586 - \$ 51,149
- \$ 51,150+

Last year, did you receive?

- Welfare (TANF)
- Food Stamps
- Social Security (SSI)
- Veteran Benefits
- Other _____

Did either of your parents receive a 4-year degree?

Yes No

If yes, what parent?

Mother Yes No

Father Yes No

If yes, did you live with that parent?

Yes No

Are you currently in a GED or High School diploma program?

Yes No

What is the highest level of education you completed before September 1, 2005?

- 8th grade and below
- 9th - 11th grade
- 12th grade (did not graduate)
- High school *or* (GED) graduate
- Continuation/Alternative Education
- Vocational Training
- Community College
- University
- Other _____

Did you complete high school and receive a diploma?

Yes No

Did you drop out of college or a vocational school before receiving a degree or certificate?

Yes No

Is English your primary language?

Yes No

What types of schools are you interested in attending in the near future?

- Vocational/Training School
- Adult School or GED Program
- Police/Fire Academy
- 2-year Community College
- 4-year College/University
- Military
- Other _____

Have you ever completed an application for our program before?

Yes No

If "yes" when: _____
 Month/Year

Do you have a desire to pursue a post-secondary education?

Yes No

Who referred you to our program ?

- School/Adult School
- Walk-in
- Friend or Family Member
- Agency _____

I hereby authorize any school, college or university to release any academic or financial aid information from my files that is requested by the **Educational Opportunity Center.** All information obtained by the program mentioned above is completely personal and confidential and is only used for verification of eligibility to this program.

Signature _____ Date _____

OFFICE USE ONLY

Counselor: GC SF VV JC

Initials: _____ **Date:** _____

Agency: _____

Eligib. Ver. by: _____ **Date:** _____

Date in DB: _____

Processor in DB: _____

Ed. Plan: Yes No

PSE Ready: Yes No

Enrollment: Yes No

Verified By: _____

New Client: Yes No

LI/FG (BOTH)

LI ONLY

FG ONLY