

The Extended Opportunities Programs & Services (EOPS) Department at Mt. San Jacinto College (MSJC) offers a variety of supportive services and programs – that provide guidance and support to and returning students.

Supportive services include:

- Book vouchers, school supplies, grants and scholarships; when available
- Academic and personal counseling
- · Workshops, webinars, and a variety of student-centered college events

#### \*Before continuing please read carefully \*

All communication from EOPS will be sent through your student email – <u>EXAMPLE:</u>

<u>000000@my.msjc.edu</u> – Please check your email regularly for updates and student program requirements.

The following questions (\*) are required

1. What semester are you applying for? \*

2. MSJC Student ID# \*

4. First Name \*

3. Last Name \*

5. Preferred Name



6. Preferred Pronouns
□ He/Him/His
□ She/Her/Hers
□ They/Them/Their
□ Other -
7. Contact Phone number *
3. Highest Level of Education
□ High School Diploma
□ GED
□ Non-High School Graduate
9. Have you attended another college?
□ Yes
□ No
0. If yes, have you submitted your official transcripts to officialtranscripts@msjc.edu?
□ Yes
□ No
1. Was your high school grade point average (GPA) below 2.5?
□ Yes
□ No



12. Were you previously enrolled in a remedial high school or college math or
English course or an ESL course?
□ Yes
□ No
13. Did you have an individualized education plan (IEP) or 504 plan in high school?
□ Yes
□ No
THESE NEXT QUESTIONS ARE TO DETERMINE YOUR <b>EXTENDED OPPORTUNITIES PROGRAMS &amp;</b>
SERVICES (EOPS) ELIGIBILITY.
14. Are you a California resident or do you meet the AS540 California Dream Act
requirements?
□ Yes
□ No
15. Have you completed the free application for Federal Student Aid (FAFSA) or CA Dream Act
Application (CADAA)?
□ Yes
□ No
16. Are you a first-generation college student (neither parent graduated college in the U.S.)?
□ Yes
□ No



17. Have you completed 70 or more units?
□ Yes
□ No
□ I'm not sure
18. Have you previously completed a college degree? (i.e., AA/AS, BA/BS)?
□ Yes
□ No
19. Is English the primary language spoken at home?
□ Yes
□ No
20. Please select the racial/ethnic group(s) you identify with:
□ African
□ African American/Black
□ Asian
□ Filipino
□ Latinx/Chicanx
□ Native American
□ Pacific Islander
□ White
□ Other –



These next questions are to determine your **Cooperative Agencies Resources for Education (CARE)** eligibility.

21. Are you currently receiving TANF/CalWORKs (Cash Aid) for yourself and/or your
children?
□ Yes
□ No
These next questions are to determine your <b>UndocuDREAMers Program</b>
eligibility.
22. Were you born in the U.S.?
, □ Yes
□ No
23. Do you identify with any of the following statuses?
□ AB540
□ TPS
□ DACAmented
□ DREAMer
□ M1/F1 Visa
□ Other –



24. Do you identify with the experience of a mixed status family?

Mixed Status - One or m	ore members are undocumented, and all other members are	
either US citizens or have	e lawful immigration status.	
□Yes		
□ No		
These next questions are to	o determine <b>NextUp</b> eligibility	
25. Between the ages of 13 <sup>.</sup>	-25 years of age were you in foster care or were you a dependent or	
a ward of the court or in Ki	nship care	
□ Yes		
□ No		
26. If yes, how old were you	ı when you exited care?	
□ Younger than 13		
□ Between the ages of 1	3 and 16	
□ Between the ages of 1	7 and 21	
□ I am still in care		
□ I'm not sure		
27. Have you applied for th	e Chafee Grant?	
□ Yes		
□No		



#### **Acknowledgement Statement**

28. I acknowledge that the information that I have provided (i.e., Name, phone, number,
etc.) is accurate and will be used to determine program eligibility.
□Yes
□No
29. I certify that the information provided is true and correct to the best of my knowledge
and I agree to submit any required supporting documentation to
□Yes
□No
BY SIGNING THIS APPLICATION YOU ACKNOWLEDGE THAT ALL INFORMATION
PROVIDED WILL BE USED TO DETERMINE PROGRAM ELIGIBILITY.
Full Name:
Date:



Counselor Notes:				