

JCYC College Access Programs:
**2017-2018 JCYC Educational Talent Search (ETS) and
 San Francisco College Access Center (SFCAC) Application**

1596 Post Street, San Francisco, CA 94109. Tel: 415-921-5537

OUR MISSION: JCYC ETS is a community-based Educational Talent Search program funded by the U.S.D.E. since 1979. Our purpose is to identify, select, and assist low-income youth ages 11 and older who have the potential to be the first generation in their family to continue in and graduate from high school and enroll in a 4-year college.

Please **complete** this form in **black/blue pen** in order to participate in our **FREE** programs. All information is **CONFIDENTIAL**.

| | | | | | | |
|------------------------|----|----|-------|---|---|----|
| Office Use Only | | | | | | |
| LI/FG | LI | FG | Other | R | N | DB |
| Approved by: _____ | | | | | | |
| Date: _____ | | | | | | |
| HO#: _____ | | | | | | |

Student Last Name _____ Student First Name _____ M.I. _____
 Address _____ City _____ Zip _____
 Home Phone (____) _____ - _____ Cell Phone (____) _____ - _____ Email _____
 Gender: Male Female Date of Birth ____/____/____ HS Graduation Yr _____ Grade Level _____
Month / Date / Year

STUDENT INFORMATION

1. Residency Status (will be kept confidential):

- US Citizen
- Permanent Resident: _____
Green Card # (Required)

2. Social Security #: _____

3. Ethnic Background (check all that apply):

- African American
- American Indian/Alaska Native
- Asian → Please Specify: _____
- Filipino
- Hispanic/Latino
- Pacific Islander
- White
- Other _____

4. School you attend: _____

Homeroom: _____

Are you enrolled in ELD classes? Yes No

5. Do you live with:

- Both Parents Guardian
- One Parent Foster Parent(s)
- Other → Please Specify: _____

6. Language(s) spoken in your home:

- English only
- English and/or other language(s)
 → Please Specify: _____
- Language other than English only
 → Please Specify: _____

7. Number of people living in your home:

(Including yourself) _____

Statement of Intent to Participate: I wish to enroll in and participate in the activities sponsored by JCYC College Access Programs. Prior to receiving services, I will provide the staff with all requested information and documentation to verify my eligibility for services as required by the CA Student Aid Commission (CSAC) and U.S. Department of Education (USDE).

 Student Signature Date

PARENT/GUARDIAN INFORMATION

EDUCATION INFORMATION

8. What is the level of education completed in the U.S.?

| | Elementary or Middle School | High School | 2-year College | 4-year College | School Outside of the U.S. | Unknown /Other (Please specify) |
|-------------------|-----------------------------|--------------------------|--------------------------|--------------------------|----------------------------|---------------------------------|
| Mother / Parent 1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Father / Parent 2 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Guardian | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

FINANCIAL INFORMATION

9. Do you or your child receive (check all that apply):

- School Lunch Program – Free **OR** Reduced
- Cal-WORKS (AFDC, TANF) Social Security
- Food Stamps Subsidized Housing
- General Assistance Medi-Cal

10. Parent's/Legal Guardian's Total TAXABLE Income:

- ** Note: Taxable income is **NOT** adjusted gross income
 → (Check line 43 on Form 1040 or line 27 on Form 1040A)
- \$18,090 or less \$36,901 - \$43,170
 - \$18,091 - \$24,360 \$43,171 - \$49,440
 - \$24,361 - \$30,630 \$49,441 - \$55,710
 - \$30,631 - \$36,900 \$55,711 - \$61,980
 - \$61,981 or more

**This income supported _____ number of people.
 (Include all people who were supported by this income)**

To verify the income above, please submit **one** of the two documents with this application:

- 1) **Signed copy** of last year's tax return (1040 or 1040A, **first 2 pages**); **or**
- 2) Copy of Social Services Income Documentation (see #9 above).

Acknowledgement of Intent to Participate: I understand that JCYC College Access Programs are required by CA Student Aid Commission and/or U.S. Department of Education to request above information to provide services to participants. By signing this form, I give my consent to disclose all school information concerning the academic progress, eligibility and needs of the student to JCYC. I also give my consent for the National Student Clearinghouse and my college of attendance to disclose my college enrollment status and degree attainment data to JCYC College Access Programs staff for the purpose of tracking my college enrollment and completion. The information on this form is accurate.

Photo Release: Unless stated in writing to JCYC, I give my consent to release images, photos, and video of the student for use on program and agency information through promotion including but not limited to websites, brochures, and other promotional materials. JCYC regrets that it cannot offer financial compensation for use of these promotional materials.

 Parent/Legal Guardian Name (print)

 Parent/Legal Guardian Signature Date



JCYC College Access Programs
 Educational Talent Search (ETS) &
 San Francisco College Access Center (SFCAC)



2017-2018 Student Needs Assessment – High School

Printed Name (Last, First) _____ **School** _____ **Grade** _____

Social Security Number _____ **Date of Birth:** ____ / ____ / ____
 Month / Date / Year

Email Address _____

I attest to the accuracy of the information in this sheet. I realize that I need to meet at least twice per school year with my High School Educational Advisor in order to benefit from the program services.

_____ _____

Student Signature Date

EDUCATIONAL GOAL

Which goal best describes your present plan after graduating from high school? (please check one):

- | | |
|--|---|
| <input type="checkbox"/> To attend a community college & earn an AA/AS Degree | <input type="checkbox"/> To complete a technical/vocational program |
| <input type="checkbox"/> To attend community college & transfer to a 4-year university | <input type="checkbox"/> To work full-time |
| <input type="checkbox"/> To attend a 4-year college & earn a BA/BS Degree | <input type="checkbox"/> To enter the military service <input type="checkbox"/> Undecided |

STUDENT NEEDS ASSESSMENT

Please check the services you feel that you need (check all that apply):

- | | | |
|---|--|--|
| <input type="checkbox"/> College Admissions Advising | <input type="checkbox"/> Financial Aid Advising | <input type="checkbox"/> College Campus Visit |
| <input type="checkbox"/> Career Exploration | <input type="checkbox"/> Entrance Exam Information (SAT/ACT) | <input type="checkbox"/> Scholarship Information |
| <input type="checkbox"/> Leadership Development Workshops | <input type="checkbox"/> SAT/ACT Preparation Workshop | <input type="checkbox"/> Essay Writing Skills |

COLLEGE SURVEY

1) Name 2 majors/careers you would be interested in: a) _____ b) _____

2) **What colleges would you be interested in applying to?** (Check all that apply):

UC: Berkeley Davis Irvine LA Merced Riverside Santa Barbara Santa Cruz San Diego

CSU: SFSU SJSU East Bay Sacramento Cal Poly SLO San Diego Sonoma

CC: City College of SF College of San Mateo Skyline College College of Marin Laney College

Private: USF University of the Pacific Santa Clara University Dominican University

St. Mary's College Notre Dame de Namur University

Other: a) _____ b) _____ c) _____

3) How did you learn about ETS/SFCAC? Presentation Teacher Counselor Friend

School Announcement Other, specify _____