

*Set Your Goals with*  
***The Golden West***  
***EOP/S***  
***Program***

*“Where Every Student Succeeds  
In The Oceans of Opportunities”*



***EXTENDED OPPORTUNITY  
PROGRAMS AND SERVICES***

*Orientation • EOP/S Grant • Advisement to Counseling  
Recruitment to Outreach • Campus Referrals  
Tutoring • Priority Registration • Single Parent Services  
College Success Workshops • Transfer Assistance • Peer Advisement*

**APPLICATION**  
**(714) 895-8768**

**GOLDEN WEST COLLEGE  
EXTENDED OPPORTUNITY PROGRAMS AND SERVICES**

**APPLICATION**

To be considered for admission to the Extended Opportunity Programs and Services (EOP/S) you will need to complete this application.

Admission to the program is based upon meeting certain financial aid criteria, English and/or Mathematics placement test results, and be enrolled in at least **12 units** of course load at Golden West College when admitted into the program.

SOCIAL SECURITY NUMBER \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Number Street Apt City Zip

TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

**ETHNIC BACKGROUND:**

- |  |   |  |   |  |
|--|---|--|---|--|
| <input type="checkbox"/> Amer. Indian/Native Alaskan (N) | <input type="checkbox"/> Filipino (F)         | <input type="checkbox"/> Mexican, Mex-Amer, Chicano (HM) | <input type="checkbox"/> Chinese (AC)   | <input type="checkbox"/> Vietnamese (AV)   |
| <input type="checkbox"/> White, Non-Hispanic (W)         | <input type="checkbox"/> Pacific Islander (P) | <input type="checkbox"/> Central American (HR)           | <input type="checkbox"/> Japanese (AJ)  | <input type="checkbox"/> Asian Indian (AJ) |
| <input type="checkbox"/> Black, Non-Hispanic (B)         | <input type="checkbox"/> Guamanian (PG)       | <input type="checkbox"/> South American (HS)             | <input type="checkbox"/> Korean (AK)    | <input type="checkbox"/> Asian (A)         |
| <input type="checkbox"/> Other Non-White (O)             | <input type="checkbox"/> Hawaiian (PH)        | <input type="checkbox"/> Hispanic (H)                    | <input type="checkbox"/> Laotian (AL)   | <input type="checkbox"/> Other Asian (AX)  |
| <input type="checkbox"/> Decline to state (XD)           | <input type="checkbox"/> Samoan (PS)          | <input type="checkbox"/> Other Hispanic (HX)             | <input type="checkbox"/> Cambodian (AM) | <input type="checkbox"/> Unknown (X)       |

Please answer all the questions below as they are used to determine your eligibility for EOP/S.

1. For which semester are you applying to the EOP/S program?

- Fall '07       Spring '08

2. Did you graduate from high school?      Yes \_\_\_\_\_ No \_\_\_\_\_

3. Have you lived in California for at least one year prior to the beginning of the semester for which you are applying for EOP/S?      Yes \_\_\_\_\_ No \_\_\_\_\_

4. Have you been tested for English and Mathematics by the Golden West College Assessment Center? Yes \_\_\_\_\_ No \_\_\_\_\_
5. Have you filed for financial aid or submitted a BOGG application at Golden West College? Yes \_\_\_\_\_ No \_\_\_\_\_
6. List all Colleges or Universities you have attended, including Golden West College:

Name	State	Date Attended		Units Completed	Degree Earned
		From	To		

7. Are you a Single Parent? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, Are you or your child on TANF/CalWORKs? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, Do you have a child under the age of 13? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, Have you applied for the CARE Program? Yes \_\_\_\_\_ No \_\_\_\_\_
8. Will you be enrolled in at least 12 units a semester? Yes \_\_\_\_\_ No \_\_\_\_\_
9. Where did you hear about the EOP/S Program? Who referred you?  
 \_\_\_On campus \_\_\_Off campus \_\_\_Financial Aid \_\_\_Class \_\_\_Friends  
 \_\_\_EOP/S/Outreach \_\_\_Counselors \_\_\_Instructor \_\_\_Schedule/Catalog \_\_\_Other
10. Have you been in the EOP/S Program previously? Yes \_\_\_\_\_ No \_\_\_\_\_

I certify that the above information is correct to the best of my knowledge, and agree to provide the EOP/S office a copy of my high school and/or college transcripts if requested.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Intake Staff: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE DO NOT WRITE BELOW OFFICE USE ONLY

**DOCUMENTS:**

**REQUIRED**

**ON FILE**

**Yes**

**No**

High school transcripts

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

College transcripts

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

G.E.D.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ELIGIBILITY**

**Yes**

**No**

California resident

\_\_\_\_\_

\_\_\_\_\_

Less than 70 units completed

\_\_\_\_\_

\_\_\_\_\_

**EDUCATIONALLY DISADVANTAGED**

**EOP/S ED. CODE:** \_\_\_\_\_

01. Does not qualify for the minimum level English or Math course work required for the A.A. degree at GWC.

\_\_\_\_\_

\_\_\_\_\_

02. Did not graduate from high school or obtain the General Education Diploma.

\_\_\_\_\_

\_\_\_\_\_

03. Graduated from high school with a grade point average of 2.50 or below.

\_\_\_\_\_

\_\_\_\_\_

04. Previously enrolled in remedial education.

\_\_\_\_\_

\_\_\_\_\_

05. Other eligibility criteria:

First generation College Student.

\_\_\_\_\_

\_\_\_\_\_

Underrepresented group residing in the immediate service area, which has been targeted by EOP/S for outreach and recruitment.

\_\_\_\_\_

\_\_\_\_\_

The student's parents are not native English speakers.

\_\_\_\_\_

\_\_\_\_\_

**ELIGIBLE FOR EOP/S**

**YES** \_\_\_\_\_ **NO** \_\_\_\_\_

Comments \_\_\_\_\_  
\_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_