



Is Saddleback College EOPS for you?

EOPS is designed to provide additional support services to students who come from low-income and traditionally underserved backgrounds. Priority will be given to students who have completed **less than 45 degree applicable units**.

Name: _____ Student ID #: _____

E-mail _____@saddleback.edu Phone: _____

Please answer all questions below to find out if you qualify for the EOPS Program.

1. Are you an AB540 student or Deferred Action for Childhood Arrivals (DACA) recipient? YES__ NO__
2. Have you applied for the California College Promise Grant and/or FAFSA? YES__ NO__
3. Have you attended any other community college/university in the US or foreign country? YES__ NO__
If so name of the educational institution(s) _____
4. Have you earned any of the following degrees in the US or in a foreign country?
__Associate Degree__ Bachelor's Degree__ Master's Degree__ Doctor's Degree YES__ NO__
5. Was your high school GPA less than 2.50? YES__ NO__
6. Have you been previously enrolled in remedial education? YES__ NO__
7. Did either parent graduate from a college or university? YES__ NO__
8. Are either of your parent's non-native English language speakers? YES__ NO__
9. Are you or were you ever a foster youth? YES__ NO__
• If so, are you under the age of 24? YES__ NO__
10. Are you an underrepresented ethnic minority student? YES__ NO__
11. Are you a single parent head-of-household receiving cash aid for you and/or your child (ren)? YES__ NO__
How did you hear about us? __Freshman Advantage __Senior Day __High school outreach
Other: _____

I declare under penalty of perjury that all the information on this screening form is true and correct to the best of my knowledge. I give the EOPS Office permission to access financial and academic history information in order to determine EOPS eligibility. **I also understand that falsification or withholding information requested shall constitute grounds for withdrawal from the EOPS Program.** Family Educational Rights and Privacy Act (FERPA) allows schools to disclose records, without consent, to the following parties or under the following conditions; school officials with legitimate educational interests, specified officials for audit or evaluation purposes, appropriate parties in connection with financial aid to a student,(34 CFR 99.31).

By checking "I Accept", I acknowledge and understand the above terms of Agreement: I Accept

You MAY qualify for the following EOPS Services:

- Individualized counseling
 - Priority registration
 - Special activities
- Book vouchers (*pending availability of funds*)
 - Book Loan
 - CSU and UC application fee waivers

Thank you for starting the preliminary screening process for the EOPS program. One of our representatives will be contacting you to inform you of your eligibility status. If you have any questions please don't hesitate to call the EOPS office at (949) 582-4620 or stop by Student Services Center SSC-126.