

Motherlode Educational Opportunity Center (MEOC)

Participant Application



Student Information									
First Name		MI	Last	t		Maiden			SSN
DOB (mm/dd/year)	Age		Email						
Address									
Are you a U.S. Citizen? If no, Alien Reg. #					Male/Fema	ale Marital Status as			of TODAY
Ethnicity (mark all that apply)									
American Indian/Alaska Native Asian Black/African American Hispanic/Latino									
Native Hawaiian/Pacific Is	lanuei		White						
Special Circumstances: (mark	all tha	at apply)							
Homeless Disabled Learning Disability Offender/Ex-Offender Foster Youth									
Are you a veteran? Are you	ı milita	ry conne	ected?	If yes:					
				Active I	Duty	Spouse of A	Active Duty		Child of Active Duty
Financial Information Employment Status						Household	-l Ci		Income Source
Employment Status						Household	u Size		income Source
	-Time		Unemp	oloyed Sea	asonal				
Last year, what was your "taxable" income? (Line 43 – Form 1040, Line 27 – Form 1040A, or Line 6 – Form 1040EZ)									
A contamination									
Academic Information Highest grade completed as of	f the d	ate of thi	is applica	ation: (select only	one)				
In H.S. – Current Grade H.S. Graduate H.S. Dropout (highest grade completed)									
GED/Equivalency Adult w/o H.S. Credentials Adult w/o H.S. Credentials Currently Enrolled in GED Program									
Currently in College (select year completed) Freshman Sophomore Junior Senior									
College Transfer College Dropout Associate's Degree Bachelor's Degree									
Do you want to attend college or vocational training?									
School/College Currently Atte	nding		Enrolle	d Date S	chool/College	e Currently A	Attending		Enrolled Date
Did either of your parents con	plete	a bachel	or's degr	ee? If yes, did y	ou live with	them?		L	
Participant Needs Asses	ssme	nt							
Mark all that apply:									
Academic Guidance	Adr	nission A	pplication	Aged-	Out Foster Inf	ormation	Budge	et Plannir	ng Career Exploration
Academic Guidance Choosing a school/college			pplication Ited stude		Out Foster Inf		Budge oled Studen		
			Ited stude		iploma/GED		_	t Services	

Additional Information		
How did you hear about MEOC?	Where did y	you receive this application?
	<u> </u>	
Are you receiving services from other community	agencies?	If yes, where?
Are you receiving services from any of these prog	rrame? (chec	ck all that anniv)
	-	
Upward Bound (UB) Talent Search	(TS)	Student Support Services (SSS)
Specialized Service Requests/Notes:		
Authorization		
	- !fowmo	Consequence to the book of many knowledge. Discount
		ation on this form is true to the best of my knowledge. Pursuant cation, MEOC is authorized to access information deemed
		nal goals or in meeting the reporting requirements of the U.S.
,		s regarding my eligibility in the program, services rendered, and
		nation is protected by the Privacy Act, kept confidential and not
to be seen unless specifically authorized	d. A copy of	of this statement shall serve as such authorization.
Signature		 Date
Signature		Date
Parent signature (for dependents under 2	24)	Date
raient signature (101 dependents under 2	· 4)	Date
For Office Use Only		
FG/LI LI Only FG Only	Neither	er Cohort Year Military Connected:
A ri		
Status: Active Inactive Term	nination Date:	e: Counselor:
College Ready: Financial Aid Comp	pletion:	College Application Completed:
Admitted School:	P	Postsecondary Status (enrolled/not enrolled):

There are several ways to submit your MEOC application. If none of these options work for you, please contact us at 588-5066 and we will work with you to find a way for you to submit it.

- Scan and email to: ColumbiaTrio@yosemite.edu Fax to: 209-588-5058 1.
- 2.
- Mail to:

Columbia College
MEOC Office - Manzanita 212
11600 Columbia College Drive Sonora, CA 95370