



College Knowledge Application

College Knowledge helps students to prepare for entering the college or technical school of their choice. We provide information to students and parents about college entrance requirements, financial aid, study skills, and career exploration. Our services also include tutoring.

STUDENT INFORMATION

Student Name: _____
Last First MI

Address: _____
Number Street Apt (if any)

_____ City State Zip Code

Mailing Address (if different): _____
Street or P.O. Box City State Zip Code

Phone No. () _____ Date of birth: ____/____/____ Gender: ____ Female ____ Male

Social Security No.: _____ Citizenship: U.S. Citizen Legal Resident Decline to State

Grade Level: (circle one) 9 10 11 12 School Attending: _____

Language(s) spoken at home: _____ Student email: _____

Ethnic/Racial Background: (Check all that apply)
 Native American / Alaska Native Filipino
 Asian / Pacific Islander Caucasian / White
 African American / Black Other: _____
 Hispanic / Latino No Response

Are you participating in: Upward Bound Talent Search

STUDENT INTERESTS

College Choices:
1. _____
2. _____
3. _____

Career Choices:
1. _____
2. _____
3. _____

Unsure:

Unsure:

I am interested in receiving information about college, and am interested in meeting with a *College Knowledge* advisor. I agree to maintain at least a 2.0 GPA and attend school regularly.

Student signature: _____ Date _____

PARENT / GUARDIAN INFORMATION

To parent or guardian: Please complete the following information.

CONTACTS

Parent(s)/Guardian Name: (please print) _____

Address: (if different than student) _____

Home Phone: (if different than student) _____ Work phone: _____

Emergency contact: _____ Relationship to student: _____
(if we are unable to contact you)

Phone: () _____

PARENT / GUARDIAN EDUCATION LEVEL

Check highest grade level completed for each . . .

| | (step) Mother | (step) Father | | (step) Mother | (step) Father |
|------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| No high school | <input type="checkbox"/> | <input type="checkbox"/> | Some college | <input type="checkbox"/> | <input type="checkbox"/> |
| Some high school | <input type="checkbox"/> | <input type="checkbox"/> | Associate Degree (AA/AS) | <input type="checkbox"/> | <input type="checkbox"/> |
| High school diploma or GED | <input type="checkbox"/> | <input type="checkbox"/> | Bachelor Degree (BA/BS) | <input type="checkbox"/> | <input type="checkbox"/> |
| Vocational / certificated training | <input type="checkbox"/> | <input type="checkbox"/> | Other: _____ | | |

FAMILY INCOME

Number in household: _____

INCOME SOURCE (check one)

- Wages
- CalWORKs (AFDC/TANF/GAIN)
- Supplemental Security Income (SSI)
- Social Security
- Other: (specify) _____

INCOME RANGE (check one)

- \$0 - \$24,900
- \$24,901 - \$25,470
- \$25,471 - \$28,710
- \$28,711 - \$31,950
- \$31,951 - \$35,730
- \$35,731 - \$38,610
- Over \$38,611

PARENT / GUARDIAN PERMISSION

I give permission for my student to participate in the *College Knowledge* program. I understand that my student may be called out of non-academic classes to meet with *College Knowledge* advisors; the high school may share information regarding my student's grades and class schedule; *College Knowledge* may share my student's name and pertinent information with colleges for enrollment verification only.

Parent / Guardian Signature: _____ Date: _____

Parent email: _____

Return this application to :
College Knowledge
College of the Redwoods
7351 Tompkins Hill Rd.
Eureka, CA 95501
(707) 476-4275

College Knowledge is a program of the Northcoast CalSOAP* Consortium

*California Student Opportunity and Access Program funded by the California Student Aid Commission, EdFund and local high schools.

Helping to Put College in Your Future

* * * * * For office use only:

GPA: _____ for Fall Spring Year _____

Eligible: Inc Ed Both Region

Approved by: _____ Date: _____

12/15/03