



Eligibility for services: clients are U.S. Citizens/permanent residents; low-income and/or first generation; interested in obtaining postsecondary education and do not yet possess a bachelor's degree; live in Adams, Arapahoe, Broomfield, Boulder, Denver or Jefferson County.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (required) Date of Birth: \_\_\_\_\_ Current Age: \_\_\_\_\_

Address: \_\_\_\_\_ Apt# \_\_\_\_\_

City: \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary Phone : (\_\_\_\_) \_\_\_\_\_ Secondary Phone: (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

Services seeking today:  Educational Planning  Career Exploration  Financial Aid Assistance  
 General Information/Referral Other

**1)** If you are under 24, please answer the questions on the next form to determine your dependency status. If you are 24 or older you are considered INDEPENDENT for financial aid purposes. (Please check the box that applies)

I am independent  I am dependent \*(Parent's signature is required on this form)

**2)** Gender:  Female  Male **3)** Are you married?  Yes  No

**4)** Are you a U.S. citizen?  Yes  No If no, Permanent Res. # A \_\_\_\_\_

**5)** Are you a veteran?  Yes  No **6)** Are you the spouse or dependent of a veteran?  Yes  No

**7)** Total number of family members (yourself included) living at home? \_\_\_\_\_

**8)** How did you hear about EOC? \_\_\_\_\_

<b>9) Ethnicity:</b> <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black/ African American <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> Other: _____	<input type="checkbox"/> Asian <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> White
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**10)** Are you currently in High School?  Yes  No **11)** Do you have a High School diploma?  Yes  No

If **no** to 10 and 11: Do you have a GED?  Yes  No Are you studying for a GED?  Yes  No

If **studying for GED**, where? \_\_\_\_\_ Anticipated completion date : \_\_\_\_\_ (mo/yr)

**12)** Are you currently in enrolled in college/university/vocational training?  Yes  No

If **yes**: School attending: \_\_\_\_\_ Student ID# \_\_\_\_\_

**13)** Did you stop out of college/vocational school before completing a certificate or degree?  Yes  No

14) Do you have a certificate/degree from any college/vocational training program?  Yes  No

If yes:  Certificate \_\_\_\_\_  Degree \_\_\_\_\_

For the 11/12 school year, have you:

15) Applied for Federal financial aid?  Yes  No

16) Applied for COF?  Yes  No

17) Applied for admissions to a college/vocational school?  Yes  No School: \_\_\_\_\_

18) What was your family/household **taxable\*** income for last year?

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-16,755        | <input type="checkbox"/> \$16,756-\$22,695 | <input type="checkbox"/> \$22,696-\$28,635 |
| <input type="checkbox"/> \$28,636-\$34,575 | <input type="checkbox"/> \$34,576-\$40,515 | <input type="checkbox"/> \$40,516-46,455   |
| <input type="checkbox"/> \$46,456-\$52,395 | <input type="checkbox"/> \$52,396-\$58,335 | <input type="checkbox"/> Over \$ 58,336    |

\*Please look at the lines on your tax forms: line 43 on the 1040, line 27 on the 1040A and line 6 on the 1040EZ.

19) Do either of your parents have a 4-year college degree?  Yes  No

20) Are you a participant of the IDA program through Mile High United Way?  Yes  No

I understand that the above information will be used for statistical and follow-up purposes only. I hereby authorize any agency, school, college or university to release any academic/financial aid information from my files that are requested by the Denver Educational Opportunity Center. I certify that the annual taxable income for last year is as indicated above. My signature below indicates that the information I have provided in this document is accurate and verifiable.

\*Signature: \_\_\_\_\_ Entry Date: \_\_\_\_\_  
Client Signature Parent Signature (required if dependant)

**EOC OFFICE USE ONLY**

**PERM INFO**

Target Agency \_\_\_\_\_ Advisor \_\_\_\_\_  LEP  DEP  IND

Eligibility:  LI/FG  LI  FG  Other

**YEAR INFO**

**Current Grade Level:**

- High School Student grade: \_\_\_\_\_  High School Graduate  GED Graduate  Other, age \_\_\_\_\_
- Secondary School dropout NOT reentered or enrolled in alternative education program (18 & under)
- Secondary School dropout ENROLLED in an alternative education program Equiv. HS Senior (18 & under):  
School \_\_\_\_\_
- Adult w/o a high school diploma NOT Enrolled in a Continuing Ed. Program (19 & older)
- Adult w/o a high school diploma ENROLLED in a Continuing Ed. Program Equiv. HS Senior (19 & older):  
School \_\_\_\_\_
- Potential Postsecondary Transfer  Postsecondary Dropout
- Postsecondary Student: School: \_\_\_\_\_ S# \_\_\_\_\_

College Ready:  Yes  No  None

**CONTACTS**

Reason/Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Advising:  Academic Advising  Career Counseling  Financial Aid Counseling  GED Advising  Other

Referrals:  Financial Aid Office  GED/Adult Ed program  Registrar Office  SSS program  VUB program