

EOPS Summer Institute 2018

June 18th, 2018 – July 26th, 2018

What do I need to do to get into the Summer Institute Program?

In order to participate in the Summer Institute, interested students are advised to complete each of the steps outlined below by their corresponding due dates, for timely processing. Priority will be given to students who turned in their completed interest packet AND completed their enrollment steps, earliest. The Summer Institute coordinator will contact you regarding any steps or forms left to be completed and/or to remind you of important deadlines and events. Please note that there is a mandatory Summer Institute orientation for all students.

Steps to Complete	Due Date	Completed
Contra Costa Community Colleges Admissions Application <ul style="list-style-type: none"> Online application form can be found at: http://www.dvc.edu/future/steps/index.html 	Wednesday, May 23rd by 4:00pm	<input type="checkbox"/>
EOPS Summer Institute Interest Packet <ul style="list-style-type: none"> Must be delivered to the EOPS office by due date. Includes: 1) Interest Form 2) Short Response Questions 3) 2 Recommendation Forms 4)* Special Admission form for HS 12th grade students only 	Tuesday, May 29th by 4:00pm	<input type="checkbox"/>
California Promise Grant (formerly the BOG Fee Waiver) <ul style="list-style-type: none"> For students who have, or will have, graduated HS by June 18th, 2018 Recommended for students from low-income earning households Apply for the 2018-19 California Promise Grant at www.cccapply.org 	Tuesday, May 29th by 4:00pm	<input type="checkbox"/> N/A <input type="checkbox"/>
English Assessment <ul style="list-style-type: none"> Students who have completed the above steps, and have received their DVC student ID number (received after completing admissions application online), will need to take their English Assessment at DVC. Assessment occurs in the DVC Assessment Center on May 30th from 4pm-6pm. Can be taken later, <u>by appointment if necessary</u> 	Wednesday, May 30th 4pm-6pm	<input type="checkbox"/>
Mandatory Summer Institute Orientation <ul style="list-style-type: none"> Parents/legal guardians of students are encouraged to attend. 	Tuesday, June 5th 4pm-5pm	<input type="checkbox"/>
Course Registration – Career 130, English 90 or English 116, Counseling 100 <ul style="list-style-type: none"> Once all of the above steps have been completed, the Summer Institute Coordinator will contact students to let them know whether or not they have been granted a spot in Summer Institute. Only once you have been granted a spot by the Summer Institute Coordinator, will you be able to register for Summer Institute courses. The Summer Institute Coordinator will instruct you on how to do this Instructions for utilizing the DVC WebAdvisor system to complete the registration process will be provided at the mandatory Summer Institute Orientation. It is then the student's responsibility to submit the completed Special Admission Recommendation Form in person to the Admissions and Records Office in order to complete the course registration process. 		

If you have any questions about the Summer Institute Program or need assistance with the enrollment process, please contact the SI Coordinator by phone at (925) 969-2129 or by e-mail at nhutson@dvc.edu.
EOPS Office ♦ Student Services Center, Room 127 ♦ 321 Golf Club Road ♦ Pleasant Hill, CA 94523 ♦ 925-969-2117

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INTEREST FORM

Directions: Complete all sections of this interest form in **blue or black ink**. Only completed interest will be accepted. After your interest form has been accepted, you will be contacted by the Summer Institute Coordinator for next steps.

Please direct any questions you have to the EOPS Office by phone at (925) 969-2129 or by e-mail at dvceopscare@gmail.com.

Interest forms must be delivered or faxed to the EOPS Office by Tuesday, May 29, 2018 at 3:00pm.
Fax: 925-691-1817 Attn: Summer Institute

I. STUDENT INFORMATION

Full Legal Name: _____ Date of Birth: ____/____/____
(Last, First, Middle Initial) Month Day Year

Address: _____
Street Apt City Zip Code

Home Phone: () _____ Cell Phone: () _____

Email: _____ Best way to contact you: Home Cell Email

Gender: Male Female I identify as: _____

Ethnicity (check all that apply): Black/African American Asian Pacific Islander Filipino
 Hispanic/Latino Native American White Other _____

How did you hear about the Summer Institute? (check all that apply)

Teacher/counselor Family or Friend Classmate Website DVC Outreach Brochure Other: _____

II. EDUCATION

What will your student status be at the start of the Summer Institute? (check the one that best applies)

HS Senior New HS graduate HS Diploma (received more than 1 year) GED Other: _____

Name of current HS or last HS attended: _____

Graduation, expected graduation, or completion of GED/Proficiency date: _____

III. ADDITIONAL INFORMATION

The information provided in this section is only used for the purposes of best supporting our students. It is not used in consideration of Summer Institute eligibility and is only optional to complete.

Are you or will you be a first generation college student (did either of your parents attend college)? Yes No

Are you currently working? Yes No If so, are you working more than 20 hours a week? Yes No

Are you a parent or expecting parent? Yes No

Are you a current or former Foster Youth? Yes No

Are you currently a student in Educational Talent Search (ETS) or Upward Bound? Yes No

Is public transportation (bus, Uber/Lyft, BART, etc.) your primary means of travel to and from school? Yes No

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)

THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA) IS A FEDERAL LAW THAT PROTECTS THE PRIVACY OF STUDENT EDUCATIONAL RECORD, BOTH FINANCIAL AND ACADEMIC. FOR THE STUDENT'S PROTECTION, FERPA GENERALLY LIMITS, WITH CERTAIN EXCEPTIONS, RELEASE OF STUDENT INFORMATION WITHOUT THE STUDENT'S EXPLICIT WRITTEN CONSENT. THIS INCLUDES PARENTS/GUARDIANS OF STUDENTS IN THE SUMMER INSTITUTE/BRIDGE PROGRAM(S) AT DVC-REGARDLESS OF STUDENT'S AGE.

IN ORDER TO RELEASE ANY INFORMATION CONCERNING YOUR SUMMER INSTITUTE STATUS, PARTICIPATION, AND/OR ANY INFORMATION RELATING TO YOU AS A DVC STUDENT ENROLLED IN SUMMER INSTITUTE, YOUR AUTHORIZATION WILL BE NEEDED.

IV. EMERGENCY CONTACT

Emergency Contact (Full Name) #1: _____ Relationship: _____

Home Phone: () _____ Cell Phone: () _____

Emergency Contact (Full Name) #2: _____ Relationship: _____

Home Phone: () _____ Cell Phone: () _____

VI. SIGNATURE OF UNDERSTANDING AND AGREEMENT

As the interested student participant named above, my signature below indicates my understanding of the information provided on this form, and reflects that all information provided by me is accurate and true to the best of my knowledge.

Your Printed first and last name

Your Signature

Date

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SHORT RESPONSE QUESTIONS

Student: _____ School: _____ Current Grade: _____

Directions: Complete all sections of this interest form in **dark blue or black ink.**

Please direct any questions you have to the Summer Institute Coordinator NaTisha "Tish" Hutson by phone at (925) 969-2129 or by e-mail at nhutson@dvc.edu.

Interest Packet must be delivered to the EOPS Office by Tuesday, May 29th, 2018 at 4:00pm.

1. Why are you interested in attending Summer Institute at DVC?

2. Which Summer Institute class are you most interested in (please circle):

- a. English 90- Bridge to College Writing b. English 116- College reading and development
c. Career 130- Career and Major Exploration d. Counseling 100- New Student Success Strategies

3. Why are you most interested in that class?

4. What is something most teachers don't know about you, but should know?

5. What or who inspires you to keep going, when things get tough?

6. What are your strongest areas as a student? (examples: reading, writing, public speaking, drawing, memorizing information, etc.)

7. What are some areas that you can improve on as a student?

8. What are some fun things you would like to experience in Summer Institute (feel free to be creative!)?

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STUDENT RECOMMENDATION FORM

Directions for interested Summer Institute participant:

Applying students are responsible for collecting and submitting completed Student Recommendation Forms with the Summer Institute Interest Packet. All interested students should submit **TWO** (2) Student Recommendation Forms (completed by a teacher, principal, counselor or school based program personnel) to the EOPS Office by **Tuesday, May 29th, 2018 at 4:00pm**. Please direct any questions to the Summer Institute Coordinator NaTisha "Tish" Hutson by phone at (925) 969-2129 or by email at nhutson@dvc.edu.

Name of Participant: _____ **School:** _____ **Current Grade:** _____

Directions for Recommender:

The student named above has expressed interest in participating in the EOPS Summer Institute, an intensive six-week college bridge program, designed to foster and strengthen college readiness skills of rising seniors and recent high school graduates.

EOPS would appreciate your assessment of the student's readiness for study in: 1) the program 2) a community college environment. If your relationship to the applicant does not allow you to comment on an aspect of the student's background, please write "N/A" in the space provided. If preferred, please feel free to attach an additional sheet.

Please complete, sign, and place this form in a sealed envelope. It is the student's responsibility to collect the form and submit it to EOPS by **Tuesday, May 29th, 2018 at 4:00pm**.

2. How long have you known the student? Years _____ Months _____

1. What is your job title? _____

3. In what context do you know this student? _____

4. Check the column that most accurately reflects your sense of this student's characteristics and motivation.

	Strongly Agree	Agree	Agree Somewhat	Disagree	Additional Comments, if any
a. Demonstrates leadership capabilities					
b. Demonstrates self-motivation					
c. Expresses interest in attending college after HS					
d. Ability to work well with different personalities					
e. Ability to concentrate in long class periods (1.5+ hours)					

5. What is your overall assessment of the applicant's potential, motivation, or capability for undertaking basic, college-level work and potential to succeed in a community college environment? (check one):

Outstanding
 Above Average
 Average
 Needs Improvement

Additional comments for our consideration:

_____ Recommender's Name (Print)
 _____ Recommender's Name (Signature)
 _____ Date
 _____ Recommender's E-mail Address
 () - _____ Phone Number

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Outstanding Above Average Average Needs Improvement

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Recommender's Name (Print) Recommender's Name (Signature) Date

Recommender's E-mail Address () - Phone Number