

OASISS STUDENT APPLICATION

OUTREACH & ADVOCACY SERVICES FOR IMMIGRANT STUDENT SUCCESS

Fall _____ Spring _____
Year Year

Last Name: _____ First Name: _____ Student ID #: _____

Address: _____
City Zip

Email: _____ Phone #: _____

Male Female Non-binary Other Preferred Pronouns: _____

Date of Birth: _____ Nationality: _____ Language(s) other than English: _____

Educational Goal: (Check)

- ☐ Certificate
☐ Associate degree
☐ Associate degree & transfer
☐ Transfer

Academic History

High School

Attended _____ to _____
Year Year

EVC Major: _____

Expected Graduation: _____

Other School/College/University

Attended _____ to _____
Year Year

Program Questionnaire

YES NO

Has the Admissions and Records Office determined that you are exempt from paying nonresident tuition under Education Code Section 68130.5 (AB-540)?

Have you submitted your California Dream Act Application? (financial aid)

Does OASISS have permission to post your name on our in-office bulletin board for special events (i.e. graduation, scholarship awards, etc.)?

Does OASISS have permission to post your name on our social media for special events (i.e. graduation, scholarship awards, etc.)?

Instagram: evc_oasiss

Facebook: EVC OASISS

The OASISS social media pages mentioned above post many useful resources and events. We encourage you to follow OASISS on social media for the most up to date information.

Signature Required

Read before signing

- As a member of OASISS, I will check my emails and be in communication with the OASISS counselor and staff to ensure that I receive the quality services available to me from the program.

- As a member of OASISS, I acknowledge that I must submit a new OASISS application each semester to remain in the program.

- By signing below, I hereby certify that the information provided on this application is accurate and complete to the best of my knowledge and I agree to submit the OASISS application.

Student signature

Date

OFFICE USE ONLY:

AB-540 STUDENT: _____ YES _____ NO

CA DREAM ACT ON FILE: _____ YES _____ NO

_____ APPROVED _____ DENIED _____ PENDING

STAFF: _____ DATE: _____