

**PROMISE SCHOLARS APPLICATION**

(All information is confidential and on1y accessible to program staff)

**Personal Information**

First and Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:

NUMBER AND STREET NAME CITY STATE ZIP CODE

Date of Birth: / /

Stan Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Phone Number:

Preferred Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Foster Care Experience

Length of time you spent in foster care, kingap, or homeless shelter:

Which of the following categories applies to you?

Ward of the Court Foster Youth Orphan

Emancipation Homeless Youth Unaccompanied Youth

County of Placement:

What age did you enter Foster Care? What age did you exit Foster Care?

# Educational Information

What is your grade level?

Incoming Freshman Incoming Transfer

Have you applied for FAFSA? Yes No Need assistance applying

Have you applied for CHAFFEE? Yes No Need assistance applying

Are receiving any scholarships this academic year?

If yes, please list the scholarship and the award amount:

Are you receiving AB 12 funding? Yes No

# ­Housing Information

Where are you currently living?

Foster home

Group home

Other:

Relative

County Facility

Apartment

What are your housing plans for the academic year?

On-campus housing Off campus

Living with family Other:

**STAFF USE ONLY**

Living with roommate(s)

Not yet determined

Need assistance with housing