

Book Money Eligibility and Application Checklist

ELIGIBILITY

To be considered for Alameda County Book Money Textbook Assistance Program, applicants must meet the following criteria:

1. Be a former dependent of Alameda County and was in a foster home, group home, or residential treatment program at age 16 or 17.
2. Be between the ages of 18 – 22.
3. Be enrolled in a college or vocational program accredited by the Western Association of Schools and Colleges (WASC), whether or not you have received your high school diploma or GED.

APPLICATION CHECKLIST

If you filled out Section C on the application, and will receive a check written directly to your college bookstore, you must submit:

- A completed application
- Authorization to Release Form
- Your current class schedule
- List of textbooks for these classes showing prices (print from your college bookstore web site).

If you are eligible for a check written directly to you, you must submit:

- A completed application
- Authorization to Release Form
- Your current class schedule
- Last Semester/Quarter Grades and something showing your overall GPA (Returning Students only)



ALAMEDA COUNTY BOOK MONEY APPLICATION
SPRING 2012: December 1, 2011 – March 2, 2012

SECTION A

Name: _____ Date of Birth: ____/____/____ Age: _____

Mailing Address: _____
Address City State Zip

Email Address: _____ College: _____

Phone Number: () _____ Social Security Number: _____

Have you received a book money grant or stipend in a previous term? [] Yes [] No

Do you have a high school diploma? [] Yes [] No Do you have a GED? [] Yes [] No

Are you enrolled in DSPS? [] Yes [] No Do you expect to graduate with an AA or BA this semester? [] Yes [] No

SECTION B

Check all that apply. If you check any boxes, you will have a stipend check written directly to your college bookstore.
Please fill out SECTION C and submit a list of the textbooks required for your classes using the college bookstore web site.

- [] You do not have a high school diploma or GED.
- [] Your overall GPA is below 2.0.
- [] You passed fewer than 6 units the last semester you were enrolled in school.
- [] You are currently enrolled in fewer than 6 units.

If you checked any boxes, please fill out SECTION C:

I am attending classes at _____ this semester and would like to request a check to
Name of College

the college bookstore at this address _____
Address

_____ to cover or partially cover
City State Zipcode

the cost of my textbooks. I understand that this check will be no more than \$400.

YOU MUST SUBMIT ALL OF THE FOLLOWING WITH YOUR APPLICATION:

- [] Fall 2011 class schedule
- [] Transcript or other printout showing your grades from last semester and your OVERALL GPA
- [] IF YOU CHECKED ANY BOXES IN SECTION B - List of textbooks needed for your classes, indicating the new price of each book. Print this from your college bookstore web site.

All application materials must be stapled or paper clipped together. Applications may be dropped off or mailed to: 675 Hegenberger Rd, Suite 100, Oakland, CA 94621, or faxed to 510-667-7639, ATTN: Sara Goldware or Courtney Ralph.

Please Allow 2-4 Weeks for Processing. You will be notified when your check is here. All applications are subject to eligibility.

Applicant Name _____

For office use only:

ILSP Eligible: yes ____ no ____ by ____	<div style="border: 1px dashed blue; width: 150px; height: 80px; margin: 5px;"></div> <div style="border: 1px dashed blue; width: 150px; height: 80px; margin: 5px;"></div>
HS Diploma/GED _____ Age _____	
DATE APP PROCESSED _____	
Completed Application:	Textbook Grant Calculation:
<input type="checkbox"/> application form Date:	Term -
<input type="checkbox"/> release form Date:	GPA -
<input type="checkbox"/> current class schedule Date:	Units - TOTAL\$
<input type="checkbox"/> grades/overall gpa Date:	
<input type="checkbox"/> textbook list Date:	

ALAMEDA COUNTY INDEPENDENT LIVING SKILLS PROGRAM

**675 Hegenberger Road, Suite 100
Oakland, CA 94621
(510) 667-7696 Fax: (510) 667-7639**



STAFF

Kenneth Shaw, MA, MFT – ILSP Supervisor
Courtney Ralph, BA – Education Specialist
Sara Goldware, MA – Education Specialist

Authorization to Release Records

To Whom It May Concern:

RE: Release of Records

I authorize the registrar's and the financial aid office at

Name of institution

to release to the Alameda County Independent Living Skills Program all information regarding my Grade Point Average (GPA) and Academic Standing. I also agree to allow my name and contact information to be shared with other foster youth service providers on the college campuses.

Respectfully submitted,

Date

Signature

Printed Name

Social Security Number