



# Southern San Joaquin Valley Cal-SOAP

## Senior Exit Interview

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Student ID: \_\_\_\_\_ Student Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name: \_\_\_\_\_  
*First Middle Initial Last*

High School Name: \_\_\_\_\_

Who influenced you the most for your plans after high school?

- Parent  Counselor  Cal-SOAP
- Teacher  Peer  Relative
- Other: \_\_\_\_\_

Yes /  No Have you met the A-G requirements?

Yes /  No Have you completed Algebra II or its equivalent?

\_\_\_\_\_ How many Honors, AP, or IB courses have you taken?

\_\_\_\_\_ How many community college concurrent enrollment courses have you taken?

FAFSA /  Dream Act /  None Which financial aid application did you complete?

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ If FAFSA or Dream Act, roughly when did you submit it?

Yes /  No Did you create a WebGrants4Students account?

Yes /  No Has your GPA been verified on your WebGrants4Students account?

Yes /  No Did you complete a Community College Board of Governors Fee Waiver (BOGW)?

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ If yes, roughly when did you submit it?

Yes /  No Have you received your Student Aid Report (SAR)?

Yes /  No Have you received your California Aid Report (CAR)?

\_\_\_\_\_ What was your Expected Family Contribution (EFC)?

Colleges you have applied to:	Application Submission Date	Please check if:
1) _____	_____	<input type="checkbox"/> Accepted <input type="checkbox"/> Denied <input type="checkbox"/> Unknown
2) _____	_____	<input type="checkbox"/> Accepted <input type="checkbox"/> Denied <input type="checkbox"/> Unknown
3) _____	_____	<input type="checkbox"/> Accepted <input type="checkbox"/> Denied <input type="checkbox"/> Unknown
4) _____	_____	<input type="checkbox"/> Accepted <input type="checkbox"/> Denied <input type="checkbox"/> Unknown
5) _____	_____	<input type="checkbox"/> Accepted <input type="checkbox"/> Denied <input type="checkbox"/> Unknown

Yes (Fill out Section A Only) /  No (Fill out Section B Only) Are you planning on attending college in the Fall?

### Section A

If you plan on attending college and know which college, please fill out the following:

Full Name of College: \_\_\_\_\_

Address of College: \_\_\_\_\_

Major or CTE Program of Choice: \_\_\_\_\_

Which of the following were you awarded from your desired college?

- Cal-Grant A  Cal-Grant B  Cal-Grant C  Don't Know
- Federal Pell Grant  Middle Class Scholarship  Other: \_\_\_\_\_

**OR**

### Section B

If you **DO NOT** plan on attending college in the fall, please fill out the following:

Please select a reason:

- Lack of Money  Poor Grades  Work
- Travel  Military  Other

Military Branch (If Applicable): \_\_\_\_\_