



**2021 – 2022  
Cal-SOAP Success Coach Application**

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Date: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Full Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Preferred Method of Communication? \_\_\_\_\_

Are you available to work for the entire public school year through mid-June?

Yes  No If not, what date can you work until? \_\_\_\_\_

How many hrs per week do you prefer to work? \_\_\_\_\_

Do you want to be considered for summer employment?  Yes  No

Are you also applying to have Cal-SOAP hours fulfill an internship requirement?  Yes  No

College you will be enrolled in 2021-2022:  CR  HSU  Other \_\_\_\_\_

College Major: \_\_\_\_\_ Career Goal: \_\_\_\_\_

How many units will you be taking? \_\_\_\_\_ Current GPA: \_\_\_\_\_

Expected Grad. date (semester/year): \_\_\_\_\_

Will you be transferring? (semester/year/school): \_\_\_\_\_

Do you have the tools to be able to connect with students online (laptop, stable internet, webcam, phone)?

Yes  No Comments: \_\_\_\_\_

Are you willing to work with students:  In-person  Online  Both

***If in-person: School Site Location for Advising:*** (Check preferred work locations.)

Crescent City  McKinleyville  Arcata  Eureka  Fortuna

Ferndale  Miranda  Hoopa

**Availability: Please specify the days and hours you are available to work.**

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>

What is your main form of transportation?  Personal Vehicle  Bike  Bus

Why are you interested in working for Cal-SOAP? \_\_\_\_\_

**Education Summary:**

School or Institution	Name & Location	Years Completed & Date	Did you graduate?	Course of Study	Degree or Certificate
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	NA	
Junior College (if applicable)			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other College or University			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Business/Trade School, Military			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Subject	Grade Received (High school or College)	Tutoring Ability and/or Comments (Please check whether you are comfortable or not comfortable tutoring each subject)
Pre-Algebra		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Algebra I		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Geometry		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Algebra II		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Trigonometry		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Calculus		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
English:		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:
Sciences		<input type="checkbox"/> Comfortable <input type="checkbox"/> Not Comfortable Comments:

**List the highest course you have completed for the following subjects:**

Math: \_\_\_\_\_ English: \_\_\_\_\_

**List all languages you can speak or write fluently other than English:** \_\_\_\_\_

**List other volunteer and/or extra-curricular activities/clubs/sports you are currently involved in:**

\_\_\_\_\_

Have you completed and submitted the FAFSA/CADAA on your own?  Yes  No

Would you be willing to help students fill out their FAFSA/CADAA if provided training?  Yes  No

Have you used WebGrants 4 Students before?  Yes  No

How comfortable are you with public speaking?  Not at all comfortable  Somewhat comfortable  
 Comfortable  Very comfortable

Would you be comfortable making phone calls to students' guardians to update them on their students' progress?  Yes  No

Do you have past experience as a financial aid advisor?  Yes  No

If yes, please describe: \_\_\_\_\_

**Previous Employment:** List your four most recent jobs, beginning with your most recent job(s) or submit a resume with this application. **Resume attached**

Employer Name and City/State:	Job Title:	Start Date	Reason for Leaving:
Supervisor's Name/ Phone number: May we contact this employer?	Job Duties:	End Date	
		# of weekly hours	

Employer Name and City/State:	Job Title:	Start Date	Reason for Leaving:
Supervisor's Name/ Phone number: May we contact this employer?	Job Duties:	End Date	
		# of weekly hours	

Employer Name and City/State:	Job Title:	Start Date	Reason for Leaving:
Supervisor's Name/ Phone number: May we contact this employer?	Job Duties:	End Date	
		# of weekly hours	

Employer Name and City/State:	Job Title:	Start Date	Reason for Leaving:
Supervisor's Name/ Phone number: May we contact this employer?	Job Duties:	End Date	
		# of weekly hours	

**Professional References:** Please list two professional references who can comment on your dependability and work performance. Do not include friends/relatives. If using faculty, we must have home telephone numbers.

<u>Name</u>	<u>Business/Title</u>	<u>City/State</u>	<u>Phone</u>
-------------	-----------------------	-------------------	--------------

---



---

**How did you hear about Cal-SOAP? (Please check one or more below):**

- HCOE Web Listing  
 Craigslist  
 Handshake  
 Indeed  
 HSU Job Fair  
 Flyer  
 Friend  
 CR Job Board  
 Professor  
 Email  
 Other: \_\_\_\_\_

Please note that all employees are required to be tested for tuberculosis, present evidence of freedom from the disease, and be fingerprinted. Employees must have fingerprint clearance before working in the schools.

I certify that I meet all the minimum requirements as specified in the position announcement and/or job description and that all information contained in this application and in the supplementary material filed with it is true and accurate. I authorize the contact of any present or former employer to verify any information pertaining to this application and I release from liability any persons or other organizations furnishing such information. I understand that any false statements or omissions of material facts on the application will subject me to disqualification from the application process or dismissal if employed.

\_\_\_\_\_

Applicant Signature

\_\_\_\_\_

Date

**Submit Application, Unofficial Transcript, Current School Schedule, Copy of your most current Student Aid Report (SAR), Resume (optional) to [calsoap@hcoe.org](mailto:calsoap@hcoe.org)**

**Or return completed application packet to:  
Cal-SOAP ♦ Humboldt County Office of Education ♦ 901 Myrtle Avenue ♦ Eureka, CA 95501**

**For questions contact Rebecca Asbury at 707-441-2006 or [rasbury@hcoe.org](mailto:rasbury@hcoe.org)**

*Note: Applications are available at Humboldt State University Career Center/Handshake, College of the Redwoods Career Center, or <https://hcoe.org/cal-soap/success-coaches/>*