



## WHAT IS NEXTUP?

NextUp is a program that assists students who are current or former **foster youth** attending Napa Valley College. The NextUp program is a supplemental component of our EOPS Program and will provide additional services to those already provided by the EOPS program.

## OUR SERVICES:

- ★ Academic, Career and Personal Counseling
- ★ Priority Registration
- ★ Book Voucher / Educational Supply Voucher
- ★ Meal Voucher
- ★ Tutoring
- ★ Cash Grants
- ★ Informational Workshops
- ★ University Fieldtrips
- ★ Transfer assistance
- ★ Childcare Referrals
- ★ Other assistance needed for retention and academic success
- ★ Coordination with community and outside agencies

## BEFORE SUBMITTING A NEXTUP APPLICATION, YOU MUST:

1. Be enrolled for the current semester at Napa Valley College.  
Complete the NVC New Student Orientation [www.napavalley.edu/counseling](http://www.napavalley.edu/counseling) (if applicable).
2. Apply for financial aid (2024 - 2025 FAFSA or CA Dream Act application) and work toward submitting all additional documents required by the Napa Valley College Financial Aid Office.
3. Submit verification of Foster Youth Status (official letter from the county, Chafee Grant eligibility, or proof of enrollment in the NextUp Program at another community college, etc).

## SUBMIT YOUR COMPLETED APPLICATION TO THE EOPS OFFICE OR:

Mail: Financial Aid/EOPS Office  
Building 1100, Room 1132  
2277 Napa-Vallejo Hwy  
Napa, CA 94558

Email: [EOPS@napavalley.edu](mailto:EOPS@napavalley.edu)

## OTHER INFORMATION:

- Admission into the NextUp/EOPS program is NOT automatic. You must be declared eligible by the NextUp/EOPS program to be admitted into the program(s).
- Once determined eligible, you **must** attend a NextUp/EOPS New Student Orientation. To schedule an orientation, contact the NextUp/EOPS Office at (707) 256-7388.
- The eligibility screening process takes at least four weeks to complete. Please allow more time during the beginning of the semester due to the high volume of submitted applications.
- The NextUp/EOPS Office will notify you via your NVC student email regarding your eligibility for the program(s).
- For more information, visit our website at <https://bit.ly/NVCNextUp>.
- NextUp/EOPS applications are available online.

NextUp/EOPS Program  
2277 Napa-Vallejo Highway, Napa, CA 94558  
(707)256-7388 | [NextUp@napavalley.edu](mailto:NextUp@napavalley.edu) | <https://bit.ly/NVCNextUp>



**STUDENT INFORMATION:**

Name \_\_\_\_\_ NVC Student ID # \_\_\_\_\_

Preferred Name \_\_\_\_\_ Your Pronouns \_\_\_\_\_

Address \_\_\_\_\_

Street

City

State

Zip

Personal Email \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Cell phone # (\_\_\_\_)\_\_\_\_ Home phone #  
(\_\_\_\_)\_\_\_\_\_

Preferred Contact Method:  Phone  Text  Email

**PERSONAL INFORMATION:**

Gender Identity:  Female  Male  \_\_\_\_\_ (fill in the blank)  Prefer not to disclose

Ethnic Background: (Please select ONE PRIMARY ethnicity)

African American  Asian  Caucasian/White  Hispanic/Latino  Filipino

Middle Eastern  Native American  Prefer not to disclose  Other \_\_\_\_\_

What is your preferred language? \_\_\_\_\_

**ELIGIBILITY QUESTIONS:**

Are you a current or former foster youth?  Yes  No

If Yes, Are you under 25 years of age?  Yes  No Age \_\_\_\_\_

Was your dependency status established by the Court on or after your 13<sup>th</sup> Birthday?  Yes  No  Not sure

Are you receiving AB12 (extended foster care) benefits?  Yes  No  Not sure

Did you participate in NextUp/EOPS at another college?  Yes  No

If Yes, please list college(s): \_\_\_\_\_

Are you currently in the EOPS program at Napa Valley College?  Yes  No

Please indicate which semester(s) you plan to enroll at NVC:  Summer 2024  Fall 2024  Spring 2025

**STUDENT AUTHORIZATION AND CERTIFICATION:**

**(Please read and initial the items below):**

\_\_\_\_\_ I authorize NextUp/EOPS staff to exchange information from other colleges, departments, and/or public agencies as it relates to my eligibility or academic progress.

\_\_\_\_\_ I certify that the information provided on this application is true and correct to the best of my knowledge.

\_\_\_\_\_ I understand that I must be enrolled at NVC to qualify for the NextUp/EOPS program.

\_\_\_\_\_ I understand that I must submit verification of foster youth status to the NextUp/EOPS office to be considered for the program.

\_\_\_\_\_ I understand I will be notified to my NVC student email regarding my eligibility for the NextUp program. If any of my contact information changes, I will inform the NextUp/EOPS office of any changes.

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Applicant Signature

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Date Signed

***Return completed application to:***

Financial Aid/EOPS Office | Napa Valley College | 2277 Napa-Vallejo Hwy. Napa, CA 94558

If you have questions regarding NextUp/EOPS and/or this application, please contact our office at

Phone: (707) 256-7388 | Email: [NextUp@napavalley.edu](mailto:NextUp@napavalley.edu) | Website: <https://bit.ly/NVCNextUp>

