

California Dream Act Service Incentive Grant Program (DSIG) 2021-2022 Grant Application Supplemental

The California Student Aid Commission (CSAC) will award up to \$3,000 per academic year (up to \$1,500 per semester or up to \$1,000 per quarter) to 2,500 eligible students. The grant will be available to the student for up to 8 semesters or up to 12 quarters while they have an active Cal Grant B award. Student shall perform at least 150 hours per semester or 100 hours per quarter of community or volunteer service with a qualifying service organization.



<p>Qualifying Service Organization</p> <ul style="list-style-type: none"> A nonprofit as defined in Section 501(c)(3) of the IRS code. Any federal, state, or local government entity. Any school on the Cal Grant Eligible Schools list on the CSAC website. Organization shall have been established for a minimum of two (2) years prior to the date that the student begins to perform service. Community or volunteer service performed is not advocacy of a political, social, or religious nature. Service is related to the participating student's field of study or is in furtherance of community service or a community need. Organizations will be contacted if additional verification/clarification is needed. 	<p>Who is Eligible to Apply California Dream Act Application (CADAA) filers enrolled at a qualifying institution that have an active Cal Grant B award and have enough unmet need.</p> <p>How to Apply Submit completed form(s) to: Email: studentsupport@csac.ca.gov Or Mail: California Student Aid Commission Attn: CA Dream Act Service Incentive Grant Program P.O. Box 419027 Rancho Cordova, CA 95741-9026</p>	
Section 1: Student Demographic Information (Required)		
Last Name: _____ First: _____ Middle: _____ CSAC ID or Dream Act ID: _____		
Street Address: _____	City and Zip Code: _____	Field of Study: _____
Email: _____	Phone: _____	Date of Birth: _____
Section 3 Continued: Service Organization Information (Required)		
Organization Name & Date Established: _____		Employer Identification Number (EIN): _____
Street Address _____	City: _____	Zip: _____
Contact Name: _____	Contact Email: _____	Contact Phone: _____
List members of your organization who will verify completion of service hours performed by the student. Certifying official who signs service hours tracker must match one of the names and signatures. This information will be sent to CSAC in a timely manner.	Certifying Official Name 1: _____	Signature 1: _____
	Certifying Official Name 2: _____	Signature 2: _____
Section 3 Continued: Service Organization Information (Required)		
Organization Name & Date Established: _____		Employer Identification Number (EIN): _____
Street Address _____	City: _____	Zip: _____
Contact Name: _____	Contact Email: _____	Contact Phone: _____
List members of your organization who will verify completion of service hours performed by the student. Certifying official who signs service hours tracker must match one of the names and signatures. This information will be sent to CSAC in a timely manner.	Certifying Official Name 1: _____	Signature 1: _____
	Certifying Official Name 2: _____	Signature 2: _____
Section 4: Student Agreement (Required)		
By signing this form, I understand that I must meet the below to qualify and participate in the CA Dream Act Service Incentive Grant program:		
<input type="checkbox"/> Must be a CA Dream Act Applicant for the academic year I intend to participate in this program. <input type="checkbox"/> Must have been offered Cal Grant B Award for the academic year I intend to participate in this program. <input type="checkbox"/> Must have enough financial need as determined by CSAC or the college or university. <input type="checkbox"/> Must meet Satisfactory Academic Progress and complete any necessary verification for their Cal Grant B award.		
In addition, I understand my total award amount will depend on my enrollment status and unmet need. I agree to perform a minimum 150 semester or 100 quarter hours of service at a qualifying service organization(s) as outlined in the "Qualifying Service Organization" section of this form. Upon completion, a record of my completed hours will be submitted to CSAC signed by one of the certifying officials listed above.		
Student Signature: _____		Date: _____