VALLEY-BOUND COMMITMENT





701 South Mount Vernon Avenue San Bernardino, CA 92410 909.384.5452

www.valleycollege.edu/vbc

Program sponsored by generous donations from:



Valley Bound Commitment Application Timeline/ Steps

1. Complete the San Bernardino **Valley College Application**

The SBVC application opened October 1st and will be available online on SBVC homepage.

You can also access it via this link: https://www.valleycollege.edu/apply/

3. Complete the SBVC **Orientation & Assessment**

Upon finishing the SBVC Application, you'll get login details for Self-Service to complete ONLINE Orientation and the

Guided Self-Placement which is required before you speak with a counselor and complete an Ed Plan.

process. Please make sure you apply for both terms

Failing to apply for both terms will create issues in your registration

2. Apply for the Summer 2026

and Fall 2026 terms

4. Complete the Financial Aid / **Calfornia Dream Act Application**

Complete the FASFA or CADAA no later than March 2, 2026. This is a required step for all applicants.

5. Complete the VBC **Application**

Printed Copies will be made available. Students can also download the application. The application deadline is January 16th, 2026 (NO EXCEPTIONS)

Student MUST have a 2.5 or higher cumulative GPA

6. Develop Ed plan with counselor

We will coordinate with the high school campus visits with a SBVC counselor to conduct Ed plans (Spring 2026)

7. Attend MANDATORY Parent Orientation in Spring 2026 (Dates will be announced at a later date)

- 8. Register and Attend Summer Bridge Session (MANDATORY)
 - Register for SDEV-001 in the Summer 2026 (Summer Bridge)
 - Semester Register for Fall 2026
 - Priority registration dates are currently TBD

VALLEY-BOUND COMMITMENT APPLICATION (2026-2027)

Application is due by January 16, 2026

	Student Name	: Last Name	First Name	M.I	_ E-mail: _		
		Lastiname	Flistinallie	IVI.I			
	Home Address	Street Addre	ss	City			Zip Code
	Home Phone#	()		Cell Pho	ne# ()	
	Date of Birth:_			Gender:	o Male	o Female	
re	you a U.S. Citize	en? o Yes o N	lo	Permanen	t resident of	f the U.S.? o	es o No
RE	AMer/Undocum	nented/DACA/AB540	? o Yes o No	Have you prev	iously enrol	led in courses	at SBVC? o Yes o
lav	e vou experienc	ed the foster vouth	system? o Yes o	No Are vou	an ELA or E	SL student?	o Yes o No
	- ,		.,	7 . 7 7 7 7	··· · · · -		
	Current High S	School:		Year of H.S. G	raduation: _		
	What is your e	•	Transfer without an Graduate with an AA	•	o Transfe	er with AA/AS de	gree Certificate
	What is your in	ntended major?	Ī	First Choice		Second Ch	noice
	•	-	de a response of 4-5 s attach your completed		•	•	at you answer
1.	Academic and Career Goals: Describe your academic and career goals. Explain how the Valley Bound Program would support your journey toward achieving these goals.						
2.	Financial Impact: Discuss the current financial challenges you face and how the Valley Bound Program would help alleviate these issues and support your education.						
3.	Leadership and Initiative: Provide examples of how you have demonstrated leadership or taken initiative in your academic or extracurricular activities.						
4.	Future Vision: community or fi	•	erm goals and how yo	u envision usinç	g your educa	tion to make a p	ositive impact in your
	I certify that all	the information on	this application is ac	curate and con	nplete to the	best of my kno	owledge.
		Student Sigr	ature		Date		



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San Bernardino Valley College

Confidential Youth Emergency Card

SU	
FA	
SP 20	

Parent or guar	<u>dian, please print in ink the r</u>	equested information	on below:				
Last Name:	First Name:						
Date of Birth:	Student I.D. #:	Home P	Home Phone:				
Street Address:	City:		Zip:				
		-					
Father's/Guardian Name	Phone #	Work #	Cell Phone #				
Mother's/Guardian Name	Phone #	Work #	Cell Phone #				
A local contact person in c	case of illness or injury	if parent/guardia	n cannot be reached:				
Name:	Relationship:	Phor	ne #:				
Physician's Name:	Phone #	St	udents seeking				
Medical Insurance:	Subscriber #	_ emerger	emergency care, birth control,				
Please list any medical conditions we sh	ould know about in an emergency	' STD/ HĨ	nancy testing, or V screening and care				
Are there medications the student takes i	regularly? No Yes Please Lis	st: mature mino	nsidered by law to be rs with the right to consent orific medical services.				
Does the student have any allergies to m Please List:							
I, the undersigned parent/guardian of							
This authorization is given in advar pursuant to the provisions of Secting It shall remain in effect throughout	on 25.9 of the California Civil C	Code.	are being required and				
X	Date:		,				

Program Mandatory Requirements



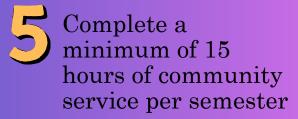
Registration requirements

- Summer 2026: Register for SDEV 001
- Fall 2026: Register for 12 units, including SDEV 102
- Attend Summer
 Bridge (Mandatory)

July 6th-17th (Dates subject to change)



Complete 2
Workshops
per Semester



- Enroll In Student Development Courses (MANDATORY)
 - SDEV 001
 - SDEV 102

- Meet with your counselor 3 times per semester
 - Appointments should be booked 30 days apart.



Maintain a 2.5 GPA or higher