

# **Upward Bound 2006 Application**



**Upward Bound is a 100% Federally funded grant with a 2005-2006 budget of \$262,084.**



*TRIO programs, funded under Title IV of the Higher Education Act of 1965, help students overcome class, social, academic, and cultural barriers to higher education.*

## Instructions and Information

The Student Information Form must be completed by the applicant, and the Parent/Guardian Information Form must be completed by the applicant's parent/guardian(s).

To complete your application file, please submit the following and turn the packet in to your school counselor or send to:

Upward Bound Program, Box 53  
Rochester Community and Technical College  
851 30<sup>th</sup> Avenue SE, Rochester, MN 55904-4999

If you have questions, please talk to your counselor or call the Upward Bound office at **280-5002**. The application deadline is **March 6, 2006**.

### APPLICATION CHECKLIST

- ❑ **Application :**
  - ❑ Student Information Form
  - ❑ Completed Essay
  - ❑ Parent/Guardian Information Form
  - ❑ Information Release Form
  - ❑ Three Letters of Recommendation (**Two letters must come from your school teachers and/or counselors; the third letter may be from a teacher, counselor, employer and/or community member. No recommendations may be from family members**)
  
- ❑ **Transcript**  
Most recent school transcript
  
- ❑ **Income Status Document**  
Parent/Guardian(s)' most recent federal tax form (1040, 1040A, 1040EZ, or W-2 form), and/or verification of public assistance from a governmental source (food stamps, Social Security benefits, unemployment, etc.)

### **Reminder to applicants:**

**Your application will not be evaluated until you submit all of the above information to your counselor or the Upward Bound office. It is your responsibility to be sure all information on the above checklist is turned in by the deadline. The application deadline is March 6, 2006.**

# Student Information

(Please Print)

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

Address: \_\_\_\_\_  
Street City Zip Code

Phone # \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security # \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Gender: Male  Female

Ethnic Origin : Asian  African-American  African  Caucasian   
Chicano/Hispanic  Native American  Other (specify)  \_\_\_\_\_

Country your parents are from \_\_\_\_\_ Country you were born in \_\_\_\_\_

Are you a United States citizen? Yes  No

Are you a Resident Alien? Yes  No

If you are a Resident Alien, please write your Alien number here \_\_\_\_\_

What languages are spoken at your home? English  English and other  \_\_\_\_\_

Other (specify)  \_\_\_\_\_

Current middle school \_\_\_\_\_ Current grade \_\_\_\_\_

State Achievement Test scores:  
6<sup>th</sup> Grade Stanford \_\_\_\_\_

MCA \_\_\_\_\_ 7<sup>th</sup> Grade \_\_\_\_\_ 8<sup>th</sup> Grade

BST \_\_\_\_\_ 8<sup>th</sup> Grade

Mid-year Grade Point Average \_\_\_\_\_

High school you will be attending for 2005-06 \_\_\_\_\_

How did you hear about this program? Counselor  Teacher  Parent  Friend

Upward Bound Student  Social Service Agency  Mailing  Upward Bound Presentation

Other  \_\_\_\_\_

Please indicate who will submit the recommendation forms for you and his/her relationship to you. Three recommendations are required, the fourth is optional.

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Name \_\_\_\_\_ Counselor \_\_\_\_\_

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Name \_\_\_\_\_ Teacher \_\_\_\_\_

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Name \_\_\_\_\_ Teacher or Community Member \_\_\_\_\_

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Name \_\_\_\_\_ Optional \_\_\_\_\_

What do you plan to do after you graduate from high school? (check all that apply; you may check more than one option if you are not sure)

- |  |   |
|--|---|
| <input type="checkbox"/> Attend a four-year college            | <input type="checkbox"/> Attend a community college, for a one or two year degree |
| <input type="checkbox"/> Enroll in a technical college program | <input type="checkbox"/> Enlist in the military                                   |
| <input type="checkbox"/> Become employed                       | <input type="checkbox"/> Attend a trade school                                    |
| <input type="checkbox"/> Other (specify) _____                 |   |

In which areas do you need help from Upward Bound? (check all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Manage my time                  | <input type="checkbox"/> Learn about college options |
| <input type="checkbox"/> Improve my grades               | <input type="checkbox"/> Visit new places            |
| <input type="checkbox"/> Prepare for tests               | <input type="checkbox"/> Meet new people             |
| <input type="checkbox"/> Choose a career                 | <input type="checkbox"/> Develop new interests       |
| <input type="checkbox"/> Build self-esteem               | <input type="checkbox"/> Learn about other cultures  |
| <input type="checkbox"/> Explore ways to pay for college | <input type="checkbox"/> Other (specify) _____       |

What obstacles or difficulties do you face that may affect your educational and career plans?

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Thoughts About Yourself. (Think about your answers and fill out each section completely in your own words and your own handwriting.)

Things I am good at:

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Things I would like to be good at:

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Things I have done that I am proud of:

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Things I hope to do:

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Things I have enjoyed learning about:

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Things I want to learn more about:

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Words I use to describe myself:

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Words others use to describe me:

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Goals I have accomplished in my life:

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Goals I hope to accomplish:

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Skills I have learned that will help me reach my goals:

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Skills I need to learn that will help me reach my goals:

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## Essay

The Upward Bound Program is designed to help students prepare themselves academically, socially and personally for a college education. Please think about your personal goals, hopes and dreams, and write on the following topic: **(Your essay must be *at least 100 words*)**

### WHY I WANT TO BE PART OF THE UPWARD BOUND PROGRAM

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Parent/Guardian Information

This section of the Upward Bound application must be completed by the student's parent/guardian(s). If you have questions, please call the Upward Bound office at 280-5002.

Financial information and other personal information that you provide on this application is necessary to determine your son/daughter's eligibility to participate in Upward Bound. Two-thirds of Upward Bound students must come from a family that meets both of the following requirements:

- neither of the student's natural or adoptive parents has completed a four-year college degree
- annual income for family size does not exceed federal guidelines as detailed in the table below:  
(One-third of Upward Bound students may meet either one of the requirements)

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### Federal TRIO Programs Annual Family Income Levels

<u>Size of Family</u>	<u>Maximum Income for Eligibility</u>
1	\$14,355
2	\$19,245
3	\$24,135
4	\$29,025
5	\$33,915
6	\$38,805
7	\$43,695
8	\$48,585

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### **Confidentiality of Information**

No one will see the information you provide unless he/she works for the Upward Bound program or is specifically authorized to see the information. All the information is protected by the Privacy Act and is not specifically reported to the federal government or the US Department of Education. However, the US Department of Education does have the authority to gather general statistical information about program participants in order to improve and measure the success of the Upward Bound program.



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**Parents' Information:** (Please complete entire section even if the mother or father is not present in the home)

Father's Name (natural or adoptive parent) \_\_\_\_\_  
Last First Middle

Highest education level or grade level completed: (check one)

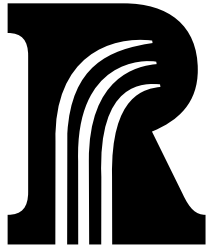
- Elementary school (K - 8)
- High school (9 - 12)
- College or beyond

Do you have a four-year degree from a college in the United States? Yes  No

Father's Signature \_\_\_\_\_

Mother's Name (natural or adoptive parent) \_\_\_\_\_





**Rochester**  
COMMUNITY AND TECHNICAL  
**College**

**UPWARD BOUND PROGRAM**

Permission to Release Information

for \_\_\_\_\_  
Student's Name (Please Print)

I authorize \_\_\_\_\_ and \_\_\_\_\_  
(Name of Middle School) (Name of High School)

to release copies of my child's academic records (including, but not necessarily limited to: grades, test scores, attendance records, and disciplinary actions) to the Rochester Community and Technical College Upward Bound Program. I understand that this information will remain confidential and will be used only by the staff of Upward Bound for the purpose of determining and monitoring academic progress.

\_\_\_\_\_  
Parent/Guardian Signature Date \_\_\_\_\_

\_\_\_\_\_  
Student Signature - (if student is 18 or over) Date \_\_\_\_\_