NEW STUDENT APPLICATION

APPLICATION DEADLINE for 9th GRADE APPLICANTS: December 15, 2015
APPLICATION DEADLINE for 10th and 11th GRADE APPLICANTS: Rolling

TRIO Upward Bound Program | Pre-College Academic Support Services
Academic Foundations Center | Rutgers University-Newark
Phone: (973) 353-3544 | Fax: (973) 353-2534 | E-mail: ubnewark@andromeda.rutgers.edu |
TRiO UPWARD BOUND APPLICATION CHECKLIST
2015-2016 Academic Year

Thank you for your interest in the Rutgers-Newark TRiO Upward Bound Program. Upward Bound is a rigorous, FREE year-round program designed to serve students who are interested in attending college. Please take the time to complete the entire New Student Application before it is returned.

Please Do Not forget to include the following information with your application:

____ Signed Student Application INCLUDING personal statement
____ Completed Teacher/Counselor Form
____ Copy of parents’ 2014 1040 IRS form or other income verification (required by the US Department of Education)
____ Copy of resident alien card (if applicable)
____ Copy of your citizenship status or permanent residency status (i.e. copy of social security card or alien registration card)

Please return complete application to:

Mailing Address:
TRiO Upward Bound Program, Room 117
Rutgers University-Newark
Academic Foundations Center
110 Warren Street
Newark, New Jersey 07102
Telephone: (973) 353-3544

Fax:
(973) 353-2534

Drop Off Application at:
Bradley Hall, Room 117 or
Bradley Hall, Room 119
110 Warren Street, Newark, NJ 07102

Applications will be accepted through December 15, 2015. We encourage scholars to apply early. Family interviews will occur on a rolling basis, with final decisions made by January 2016.
PART 1: RECRUITMENT

How did you learn about the Upward Bound Program? (Check all that apply)

☐ School Presentation
☐ Referred by a participant
☐ Guidance Counselor
☐ Friend/Family

☐ Teacher
☐ Facebook/Website
☐ Other, please specify: ____________________________

PART 2: STUDENT INFORMATION

Name __________________________________________ Gender ☐ Female ☐ Male

LAST ____________________________ FIRST ____________________________ M.I. ______

Address __________________________________________

STREET/APT. # ____________________________ CITY ____________________________ STATE ____________________________ ZIP

Student E-mail Address ____________________________ Cell Phone Number (______) ____________________________

Social Security Number ____________________________

REQUIRED BY THE U.S. DEPARTMENT OF EDUCATION - DO NOT LEAVE BLANK. Copy of social security card required.

Date of Birth _____ / _____ / ______

☐ Yes ☐ No

Place of Birth __________________________________

☐ If not a U.S. citizen, are you a permanent resident of the U.S.? ☐ Yes ☐ No

☐ If you are a US Permanent Resident, what is your Resident Alien Registration Number ____________________________

PLEASE ATTACH A COPY OF YOUR SOCIAL SECURITY CARD AND ALIEN REGISTRATION CARD.

☐ If you are a non-resident alien, please indicate your visa type: ____________________________

Racial/Ethnic Background: (Check ONE)

☐ American Indian or Alaska Native ☐ Native Hawaiian or other Pacific Islander

☐ Asian ☐ Hispanic/Latino

☐ Black or African American ☐ Two or More Races

☐ Caucasian

First language, other than English ____________________________ Language spoken in the home ____________________________

Are you participating in the free or reduced lunch program at school? ☐ Yes ☐ No

☐ Free ☐ Reduced ☐ Denied ☐ Does not Apply

Have you ever been in another TRiO Upward Bound or Talent Search Program before? ☐ Yes ☐ No

If yes, at what institution and when? __________________________________

Are you currently part of another college access/preparatory program? ☐ Yes ☐ No

If yes, what program: __________________________________

Deadline: 12/15/2015
### PART 3: ACADEMIC INFORMATION

<table>
<thead>
<tr>
<th>Middle School:</th>
<th>City, State:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Grade Level:</td>
<td>Current GPA (average):</td>
</tr>
</tbody>
</table>

#### High School:
- [ ] East Orange STEM Academy
- [ ] East Orange Campus High
- [ ] Cicely L. Tyson Community School of the Performing & Fine Arts High School

Major: ________________

Are you receiving native language instructional support services (e.g. ESL, ELL classes)?  
- [ ] Yes  
- [ ] No

Did you receive extra support from your school during the academic year?  
- [ ] Yes  
- [ ] No

If so, please explain:

________________________________________________________

Are you currently taking honors/advanced classes?  
- [ ] Yes  
- [ ] No

Have you had disciplinary action from school (suspensions/expulsions)?  
- [ ] Yes  
- [ ] No

If yes, please detail disciplinary action and outcome:

Date of incident: _____/_____/_____

________________________________________________________

Extra-Curricular Activities and Hobbies:

List any awards or honors you received in the past three years:

<table>
<thead>
<tr>
<th>Award Name:</th>
<th>Year Received:</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Academic</td>
<td>[ ] Athletic</td>
</tr>
</tbody>
</table>

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<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>[ ] Academic</td>
<td>[ ] Athletic</td>
</tr>
</tbody>
</table>

Program Eligibility and Needs Assessment:

In what areas do you need help from the Rutgers-Newark Upward Bound Program: (Please select all that apply)

- [ ] College Entry Information
- [ ] Tutoring Services/Resources
- [ ] Financial Aid Information
- [ ] Improving Grades Overall
- [ ] Financial Literacy Information
- [ ] Assistance with Educational/Career Goals
- [ ] Test Taking Skills (standardized tests)
- [ ] Other: __________________________
PART 4: FAMILY BACKGROUND

TO BE COMPLETED BY THE PARENT OR GUARDIAN

Adult #1 Name
_______________________________________________
Relationship: ____________________
Address: _______________________________________
_______________________________________________
Home #: (______) _____________________________
Cell phone #: (______) _________________________
E-mail: _______________________________________
Work #: (______) ______________________________
Employer: _____________________________________
E-mail _____________________________

Highest level of education completed by Adult #1
(please check only one)
☐ Less than high school
☐ High school ☐ GED
☐ Community College (2-Year College Degree)
☐ Bachelor’s Degree (4-Year College Degree)
☐ Masters

Is there legal documentation preventing the parent from accessing the student’s record? ☐ Yes ☐ No

With whom does the student live?
☐ Both Parents ☐ Mother ☐ Father
☐ Stepparent (specify) ______________
☐ Foster Parent(s) ☐ Group Home
☐ Guardian (specify) ______________

Adult #2 Name
_______________________________________________
Relationship: ____________________
Address: _______________________________________
_______________________________________________
Home #: (______) _____________________________
Cell phone #: (______) _________________________
E-mail: _______________________________________
Work #: (______) ______________________________
Employer: _____________________________________
E-mail _____________________________

Highest level of education completed by Adult #2
(please check only one)
☐ Less than high school
☐ High school ☐ GED
☐ Community College (2-Year College Degree)
☐ Bachelor’s Degree (4-Year College Degree)
☐ Masters

Is there legal documentation preventing the parent from accessing the student’s record? ☐ Yes ☐ No
PART 5: PARENT/GUARDIAN FINANCIAL INFORMATION

TO BE COMPLETED BY THE PARENT OR GUARDIAN

☐ Check box if applicant is a Foster Child/Ward of the Court. Skip income information below.

The U.S. Department of Education provides funding for the Upward Bound Program and requires that the Program gather this data in order to determine student admission eligibility. This information will only need to be provided at time of admission. We cannot accept applications without proof of income. The information you give us will be kept confidential.

1. Did you file a Federal Income Tax Return LAST year? ☐ Yes ☐ No
   If “yes” please enclose a copy of the first THREE Pages of last year’s Federal 1040, 1040-A or 1040EZ tax form. If “no” please complete the information in question #2.

   TOTAL TAXABLE INCOME (from federal tax return): $__________

   FAMILY SIZE (on taxes) in 2015: ____________

2. If you did not file an income tax form last year or you are a recipient of public assistance, please indicate the source and the TOTAL amount of any and all income you received last tax year for each of the sources listed below
   Please remember to enclose a copy of any documentation that proves the income(s) source(s) that you list below

<table>
<thead>
<tr>
<th>Source</th>
<th>Total Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-employment</td>
<td>$_________________</td>
</tr>
<tr>
<td>Unemployment</td>
<td>$_________________</td>
</tr>
<tr>
<td>Social Security</td>
<td>$_________________</td>
</tr>
<tr>
<td>Disability Payments</td>
<td>$_________________</td>
</tr>
<tr>
<td>TANF</td>
<td>$_________________</td>
</tr>
<tr>
<td>SNAP/Food Stamp</td>
<td>$_________________</td>
</tr>
</tbody>
</table>

PLEASE SUBMIT A COPY OF YOUR MOST RECENT INCOME TAX RETURN ALONG WITH THIS APPLICATION or PROOF OF ANY OTHER INCOME RECEIVED. YOUR APPLICATION WILL NOT BE CONSIDERED COMPLETE WITHOUT PROOF OF INCOME.
PART 7: PERSONAL STATEMENT

On a separate piece of paper, type a 300 word personal statement/autobiography. An autobiography is an account or story of your life. Include any information you feel may assist the Upward Bound Program Admissions Committee in learning about why you should be admitted to the program.

In your autobiography, make sure to answer questions such as –
- Why are you interested in becoming part of Upward Bound?
- If admitted, what would you do with this opportunity?
- What role does your family play in your life?
- What accomplishments are you most proud of in your life thus far?
- What realistic goals have you set for yourself and where are you in reaching those goals?
- What are your college/career aspirations?
PART 8: CERTIFICATION

*** IMPORTANT SIGNATURE **

By signing below, we/I certify that all of the information given in this application is true and correct to the best of my knowledge. I understand that any false or misleading information may result in disqualification of the applicant.

Applicant: I declare that all essays and responses submitted are my own work. I further certify that I will, if admitted, remain active in the Rutgers-Newark Upward Bound Program until graduation.

_______________________________  ________________
Student’s Signature             Date

_______________________________  ________________
Parent/Guardian’s Signature     Date

_______________________________  ________________
Parent/Guardian’s Signature     Date

Privacy Statement

The Department of Education is authorized to collect information to implement the Upward Bound program under Title IV of the Higher Education Act of 1965. In accordance with this authority, the Department receives and maintains personal information on participants in the Upward Bound program. The principle purpose for collecting this information is to administer the program, including tracking and evaluating participants’ academic progress. The information that is collected on this form will be retained in the program files and may be released to other Department officials in the performance of official duties.

Thank you for completing this application for the Upward Bound Program at Rutgers University- Newark

Please Note: Once all forms are received, including a copy of the income documentation, the Upward Bound Office will contact the applicant to schedule an interview and placement test. It is the applicant’s responsibility to ensure that the application package is completed and signed.
Authorization for Release of Academic Record/Transcript

To Parent/Guardian: Please complete and sign this form if you authorize disclosure of your student’s educational records to the Upward Bound Program at Rutgers University-Newark.

Student Name: ____________________________________________ Grade Level __________

Date of Birth: ____ / ____ / _______ School ID: __________
MONTH DAY YEAR

High School Name:
☐ East Orange Campus High
☐ East Orange STEM Academy
☐ Cicely L. Tyson Community School of the Performing & Fine Arts High School

I hereby voluntarily authorize the school to release information to Rutgers University-Newark Upward Bound Program. Specifically, I authorize disclosure of the following information or category of information – class schedules, standardized test scores (NJ ASK, HSPA, and NJ Biology Competency Exam), quarterly report cards, end-of-year transcripts, disciplinary actions, evaluations, attendance history and medical records for the purposes of evaluating eligibility for admission and participation. This authorization will remain in effect from the date it is executed until revoked by me, ____________________, in writing, and delivered to the Upward Bound Program at Rutgers University-Newark.

Name ____________________________________________ Gender? ☐ Female ☐ Male
LAST FIRST M.I.

Address ____________________________________________ ____________________________________________ ____________________________________________
STREET/APT. # CITY STATE ZIP

Student’s Signature: ____________________________ Date: ____________________________

Parent’s Signature: ____________________________ Date: ____________________________

To the School: The student above is applying, or is a participant of, the Rutgers University-Newark Upward Bound Program. Please forward copies of the student’s educational records (including academic records and current/past services) to:

Upward Bound Program
Yanett Salazar Bagce
Director, TRiO Upward Bound Program
Rutgers University-Newark
Academic Foundations Center
110 Warren Street, Bradley Hall 1st Floor
Newark, New Jersey 07102
Telephone: (973) 353-3544
Fax: (973) 353-2534
yanett.bagce@rutgers.edu
Teacher/Counselor Recommendation Form

To the teacher/counselor: The Upward Bound program is a free, federally-funded college access program designed to prepare and motivate students with academic potential for success in postsecondary education. Your evaluation of the nominee is extremely helpful to us during the admission process. Thank you for your feedback!

Teacher/Counselor Name: _______________________________ Class/Subject: _______________________________

Student Name: _______________________________ School: _______________________________ Grade: __________

Is this student currently enrolled in your class? ☐ Yes ☐ No

Do you have any concerns with tardiness and/or attendance? ☐ If yes, please explain:
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Are you aware of any disciplinary violations or behavioral problems the student is dealing with? ☐ If yes, please explain:
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Are you aware of any family circumstances that presently affect or have affected the applicant’s life at school?
_________________________________________________________________________________________________

Please list any other agencies involved with the child/family:
_________________________________________________________________________________________________
_________________________________________________________________________________________________

For ESL students:

Compared to native English speakers in the same grade level, this student’s English WRITING skills are:
☐ Better ☐ Same ☐ Not as good

Compared to native English speakers in the same grade level, this student’s English READING skills are:
☐ Better ☐ Same ☐ Not as good

Please add any additional information, comments or special circumstances that may be helpful in evaluating the qualifications of this applicant.
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Teacher/Counselor Signature: _______________________________ Date: _______________________________

Teacher/Counselor Phone: _______________________________ E-mail: _______________________________