



UPWARD BOUND APPLICATION

A copy of the student's school transcript and most recent proficiency test scores must be submitted with the application.

Student Information

Date of Application: _____

Name: _____ Age: _____ Gender: _____ Date of Birth: _____
First Middle Last

Student currently lives with: ___ Natural/Adoptive Parent(s) ___ Legal Guardian(s) ___ Foster Parent(s)
___ Other (Explain: _____)

Parent/Guardian Name(s) from above: _____

Mailing Address: _____ Street Address: _____

City: _____ State: _____ Zip: _____ Home/Emergency Phone: _____

Current School: _____ Grade: _____ Student Cell Phone: _____

United States Citizen: Yes ___ No ___ (If **no**, is the student a permanent United States resident? _____)

Social Security Number: _____

E-mail: _____ Facebook Account Name: _____

Check all ethnic affiliations that apply to you:

___ American Indian/Alaskan Native ___ Asian ___ Native Hawaiian/Pacific Islander

___ African American ___ Hispanic ___ Caucasian

Tribal Affiliation: _____ Enrolled: _____ Descendant: _____

EDUCATIONAL ATTAINMENT of NATURAL or ADOPTIVE PARENTS ONLY:

Mother's Name (natural or adoptive): _____ Phone: _____

Full Address: _____ E-mail: _____

Circle the highest educational level your natural or adoptive mother completed:

5 6 7 8 9 10 11 12 Certificate Associate Degree Bachelor's Degree Master's⁺

Father's Name (natural or adoptive): _____ Phone: _____

Full Address: _____ E-mail: _____

Circle the highest educational level your natural or adoptive father completed:

5 6 7 8 9 10 11 12 Certificate Associate Degree Bachelor's Degree Master's⁺

Office Use Only		
Date Application Received: _____	Admission Date: _____	W-9 Received: _____
<u>Application Checklist</u>	<u>Academic Proficiency</u>	<u>Eligibility</u>
___ Regulations and Contract	___ GPA ≥ 2.5	___ Low Income/First Generation
___ Signed Financial Verification	___ PMath PReading	___ Low Income Only
___ Medical Information	___ Pre- or Algebra 1 by 10th	___ First Generation Only
___ Teacher Recommendations		___ High Risk Only
___ Transcript and Test Scores		

SKC UPWARD BOUND STUDENT QUESTIONNAIRE

Please answer these questions as completely as possible. Both content and attention to grammar will be considered in reviewing your application. You may use the space provided or attach more paper as needed.

1. Are you currently a participant in the **TRIO Talent Search** program? ___Yes ___No
2. Choose a club, team, or other extra-curricular/community activity in which you have participated. Describe the skills and traits you have developed as a result of your participation in this activity.
3. What in the world are you most passionate about? Please describe.
4. Describe your greatest personal achievement and what it means to you.
5. Describe your greatest challenge. How do you plan to overcome it?
6. Do you plan to go to college? Why or why not?
7. What academic areas interest you and why?
8. Which math and science courses do you plan to enroll in throughout high school?

SKC Upward Bound Student Regulations and Conduct Code Contract

I am in Upward Bound because I care about myself. I feel I have the potential to succeed and will work to complete a post-secondary degree after my high school graduation. I intend to make full use of the opportunities UB provides. I realize certain rules are necessary to promote educational and personal growth. Therefore, I agree to:

ATTENDANCE

1. Attend school regularly and not cut classes.
2. Meet regularly with my UB instructor and attend a minimum of two UB enrichment activities each year.
3. Attend the six-week UB summer session at Salish Kootenai College, or complete alternative summer Upward Bound coursework.

ACADEMIC RESPONSIBILITIES

1. Pass every class each grading period and maintain at least a 2.5 GPA. Students who do not meet these criteria will receive the additional services necessary to improve academically such as increased instructional sessions, and may be restricted from weeknight and school-day UB activities until grades improve.
2. Enroll in a rigorous core curriculum based on successful completion of prerequisite coursework to include at least one year of a world language.
2. Fully engage in college admissions application and financial aid processes.

STIPENDS

1. Stipends are based on academic progress, attendance at Upward Bound sessions, and enrollment in rigorous core classes as defined by the U.S. Department of Education. These factors will affect the stipend amount. Students earning below a 2.5 GPA will lose the academic portion of their stipend for that quarter.
2. Each student will receive a quarterly stipend as earned during the school year and a summer stipend for full participation in the UB summer program.

UB STUDENT CONDUCT CODE

Students will respect all others and their property; commit themselves to a healthy lifestyle and refrain from drug, alcohol, and tobacco use or possession; resolve conflicts peacefully without the use of weapons or physical, verbal, or emotional violence; ride only in UB vehicles and stay within the boundaries of the UB site (unless other arrangements have been approved by UB staff); stay out of the opposite sex's rooms, tents, or teepees and keep opposite sex out of their own rooms, tents, teepees; and follow appropriate instructions given by UB staff.

***For inappropriate behaviors not discussed in the Student Conduct Code, disciplinary action will be taken using the following three-step system:**

- 1st offense - Staff will file a written report with the director and student. A corrective interview will follow.
2nd offense - Staff will file a written report with the director, student, and parent. A corrective interview including parent will follow.
3rd offense- Staff will file a written report with the director, student, and parent, which may result in dismissal from UB.

I realize that I must comply with the conduct code during all Upward Bound activities and that breaking this code may result in dismissal from Upward Bound or prohibition from UB trips and/or summer programs. By signing this contract, I verify that I have read the regulations and conduct code stated above and agree to abide by them.

Student Signature

Date

Parent/Guardian Signature

Date

FINANCIAL INFORMATION NEEDED for UPWARD BOUND ELIGIBILITY

TO DETERMINE STUDENT ELIGIBILITY FOR UPWARD BOUND, FINANCIAL INFORMATION OF THE STUDENT'S HOUSEHOLD MUST BE VERIFIED USING ONE OF THE FOLLOWING OPTIONS:

OPTION 1. Provide a copy of your parent/guardian's most recent federal income tax return indicating **taxable income.**

This copy of the federal 1040 form must be SIGNED by your parent(s)/guardian(s).

Total number of dependents claimed _____ Total Household Size _____
Number Parents _____
Number Children _____
Other _____

OPTION 2. If income isn't large enough to file tax returns, please indicate all income received by your family. Please provide copies of those forms, which show evidence of assistance received.

\$ _____ per month, or \$ _____ per year

Total number of dependents _____

Benefits received: (Please indicate monthly amount)

TANF	\$ _____	AFDC	\$ _____
Social Security	\$ _____	Veteran's benefits	\$ _____
Child support	\$ _____	Unemployment	\$ _____
Other _____	\$ _____	General Assistance	\$ _____

OPTION 3. Certification of monthly assistance (to be completed by agency administering assistance):

I certify that _____ receives monthly

(Recipient)

_____ assistance from this agency in the amount of

(Type)

\$ _____ per month.

Agency _____ Date _____

Agency Representative _____ Date _____

****I certify the accuracy of all information provided in this application including financial verification and parental educational attainment levels.**

Parent/Guardian Signature _____ Date _____



United States Department of Education TRIO Programs

**SKC Upward Bound
Salish Kootenai College
PO Box 70, Pablo, MT 59855
(406) 275-4990**

CONSENT FOR RELEASE OF ACADEMIC RECORDS for Student _____ :

I hereby give permission to the Salish Kootenai College Upward Bound TRIO Program to access and obtain copies of any and all of the academic records of my child named above, including online academic progress updates, school transcripts, report cards, teacher evaluations, and standardized test scores.

I understand that these records are confidential and will only be used internally by the SKC Upward Bound office for selection of program participants and evaluation of current Upward Bound participants. I also understand that compiled records on a group basis may include any or all of these records. Compiled information will be used to meet United States Department of Education regulations and program evaluation.

None of my child’s identified, individual records will be released to any person, corporation, organization, or present/future employer without further written consent.

Parent/Guardian Signature

Date

CONFIDENTIALITY STATEMENT

The personal information you give to the Upward Bound Director is sent to the federal government (U. S. Department of Education). The Privacy Act protects the information. No one may see the information unless s/he works with or for the Upward Bound program. The Department of Education has authority to gather information to help make Upward Bound a better program (20 USC 1231a).

When a project or contract terminates, all Upward Bound records shall be disposed of by the authority of and in accordance with procedures approved by the Director or other institutional authority.

In addition, any officer or employee of the United States or of any department of agency thereof who publishes, divulges, discloses, or makes known in any manner or to any extent not authorized by law any information coming to him/her in the course of his/her employment of official duties or by reason of any examination or investigation made by, concerning or relating to the Upward Bound program shall be subject to a fine of not more than \$1000 or imprisonment of not more than one year, or both, and shall be removed from office or employment under the provisions of Title 18, Section 1905, of the United States Code.

MEDIA CONSENT FORM

We, the undersigned, give Salish Kootenai College Upward Bound permission to use photographed images, videos, voice recordings, essays, stories, poetry, and written statements of the student named below in promotional materials such as brochures, yearbooks, slide shows, recruitment presentations, the SKC Upward Bound web site and Facebook page, news releases, and other publications.

Student Signature

Date

Parent/Guardian Signature

Date

STUDENT EMERGENCY INFORMATION for SKC Upward Bound

Student's Name: _____ Home Phone: _____
Parent/Guardian Name(s): _____
Work Phone: _____ Message Phone: _____
Full Address: _____

Person to be contacted if parents/guardians cannot be reached:

Name: _____ Relationship: _____
Address: _____ Phone: _____

Person(s) to whom student may be released: _____

Physician's Name: _____
Address: _____ Phone: _____
Office Phone: _____ Home Phone: _____

Please list any medical insurance coverage: _____
Medical Insurance Number: _____

MEDICAL INFORMATION

Allergic to any medication? Yes ___ No ___ Specify: _____
Currently on medication? Yes ___ No ___ Specify: _____
If yes, what for and how often? _____

PLEASE CHECK THOSE THAT APPLY TO YOUR CHILD:

- | | |
|-------------------------|-------------------------|
| ___ Heart Problems | ___ High Blood Pressure |
| ___ Epilepsy | ___ Diabetes |
| ___ Hearing Impairments | ___ Sight Impairments |
| ___ Physical Disability | |
| ___ Allergies _____ | |
| ___ Other _____ | |

I, _____, give permission for my child to receive all necessary medical attention should the need arise. I realize I am responsible for all medical charges incurred.

Parent/Guardian Signature

Date

TEACHER RECOMMENDATION for SKC UPWARD BOUND

Student's Name: _____ School: _____ Grade Level: _____

This student is applying to Salish Kootenai College Upward Bound, a federally funded college-preparatory TRIO program designed to prepare educationally disadvantaged students for post-secondary education. Your feedback in answering the following questions will assist us in our selection process as we evaluate each student's application. Please return this form to your school counselor's office, your school's Upward Bound instructor, or directly to Upward Bound at Salish Kootenai College, PO Box 70, Pablo, MT 59855. Thank you.

Teacher's Name: _____ Title: _____

How long have you known this student? _____

In what capacity have you known this student? _____

Do you feel adequately acquainted with this student's academic ability to recommend him/her for Upward Bound?
Yes _____ No _____

Please indicate the student's performance in each area listed by circling the appropriate response.

	Above Average		Average		Below Average
1. Willingness to learn	5	4	3	2	1
2. Academic aptitude	5	4	3	2	1
3. Attendance	5	4	3	2	1
4. Attentiveness/participation	5	4	3	2	1
5. Homework/preparation	5	4	3	2	1
6. Test scores	5	4	3	2	1

Please indicate by checkmark the areas in which you feel this student requires assistance.

_____ Motivation _____ Study Habits _____ Self-image
_____ Reading skills _____ Academic attitude _____ Writing skills
_____ Attendance _____ Math skills

Does this student have the potential to succeed in post-secondary education?
Yes _____ Maybe _____ No _____

Would this student make effective use of Upward Bound to improve academically?
Yes _____ Maybe _____ No _____

Please use the back of this page for any information regarding this student that might help us with our selection process. Your input is appreciated.

Teacher's Signature

Date

MATH TEACHER RECOMMENDATION for SKC UPWARD BOUND

Student's Name: _____ School: _____ Grade Level: _____

This student is applying to Salish Kootenai College Upward Bound, a federally funded college-preparatory TRIO program designed to prepare educationally disadvantaged students for post-secondary education. Your feedback in answering the following questions will assist us in our selection process as we evaluate each student's application. Please return this form to your school counselor's office, your school's Upward Bound instructor, or directly to Upward Bound at Salish Kootenai College, PO Box 70, Pablo, MT 59855. Thank you.

Teacher's Name: _____ Title: _____

Which of the following math courses is the student currently enrolled? Circle one or more.

Basic Math Pre-algebra Algebra I Geometry Statistics Algebra II Pre-calculus Calculus

Which math course(s) will the student be enrolled in next fall?

Basic Math Pre-algebra Algebra I Geometry Statistics Algebra II Pre-calculus Calculus

Please indicate the student's performance in each area listed by circling the appropriate response.

	Above Average	Average	Below Average		
1. Willingness to learn	5	4	3	2	1
2. Academic aptitude	5	4	3	2	1
3. Attendance	5	4	3	2	1
4. Attentiveness/participation	5	4	3	2	1
5. Homework/preparation	5	4	3	2	1
6. Test scores	5	4	3	2	1

Please indicate by checkmark the areas in which you feel this student requires assistance.

<input type="checkbox"/> Motivation	<input type="checkbox"/> Study Habits	<input type="checkbox"/> Self-image
<input type="checkbox"/> Reading skills	<input type="checkbox"/> Academic attitude	<input type="checkbox"/> Writing skills
<input type="checkbox"/> Attendance	<input type="checkbox"/> Math skills	

Does this student have the potential to succeed in post-secondary education?

Yes _____ Maybe _____ No _____

Would this student make effective use of Upward Bound to improve academically?

Yes _____ Maybe _____ No _____

Please use the back of this page for any information regarding this student that might help us with our selection process. Your input is appreciated.

Teacher's Signature

Date