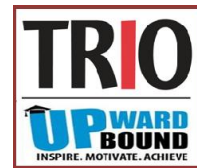


Upward Bound Program East River High School Application Packet



Student Name: _____

The University of Central Florida Upward Bound Program is a federally funded program (US Department of Education) for qualifying students at East River High School. Our goal is to assure that our participants graduate from high school, apply and enter the college of their choice, secure financial aid/scholarships to pay for their college education, and graduate with a postsecondary educational degree. The program is based at the University of Central Florida, but a representative from the program will be at your child's school on a regular basis throughout the year to talk with students about their educational goals and to help them identify and achieve their full potential for excellence.

The program is 100% grant funded and all services are FREE to participants.

Our program provides the following services to high school:



- ❖ Academic Advisement
- ❖ Career Exploration for College
- ❖ College Admissions Assistance
- ❖ College Tours and Cultural Events
- ❖ Family Outreach Workshops

- ❖ Academic Tutoring
- ❖ Student Success Workshops
- ❖ FSA/EOC/SAT/ACT Test Prep
- ❖ Financial Literacy
- ❖ Financial Aid/Scholarship Workshops

Please return the following additional materials:

- Completed application signed by student and parent/guardian
- A copy of the student high school transcript. See the Guidance Office for a copy of your transcript.
- A copy of the student's social security card (for verification purposes* we will shred the copied document)
- Parent/Guardian's need to complete, sign and date the **Income Verification Section** of the application and/or submit copies of signed financial documents may include a copy of the first two pages of the Parent/Guardian's most recent 1040/1040a/1040EZ Federal Income Tax Return or other appropriate documentation of income (for verification purposes*)



**Each verification document is entirely confidential and used specifically for verification purposes of the Department of Education, as we are federally funded via grant. These forms are verification for student eligibility (first-generation and/or low-income). These forms do not leave the confidentiality of our office, and are not used beyond program application.*

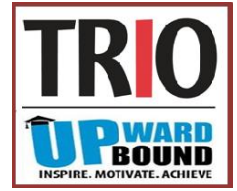
Please have the student return all aforementioned materials, to the Guidance Office, College and Career Office. Please feel free to contact our office, if you have any additional questions or concerns at 407-823-4286. Thank you!



UNIVERSITY OF
CENTRAL FLORIDA

Upward Bound Program Project R.I.S.E.

Reaching Individual & Scholastic Excellence
East River High School



Dear Parent/Guardian:

Your child has indicated an interest in the University of Central Florida Upward Bound Program (UB). Upward Bound is a **FREE** college preparatory program for high school students funded by the U.S. Department of Education and sponsored locally by the University of Central Florida. Upward Bound is specifically designed to strengthen the academic skills of eligible high school students to excel academically and pursue postsecondary degrees after high school graduation.

SERVICES PROVIDED BY UB INCLUDE:

- Academic Tutoring services during school year to strengthen academic skills and prepare student for success at the college level
- A six-week summer residential program designed to simulate a college-going experience that includes daily course work in Math and Reading, activities such as college tour field trips and special cultural events
- Academic advising from UB staff and individual assistance with the college admissions and financial aid application process
- Career awareness and advising assistance with activities led by UB staff and UCF Career Services

IN ORDER TO COMPLY WITH FEDERAL REGULATIONS, ALL UB PARTICIPANTS MUST MEET THE FOLLOWING CRITERIA:

- Family must meet income guidelines set by the U.S. Department of Education (See Table on page 4)
- Must be in 9th – 12th grade at East River High School
- Potential 1st Generation college student (neither parent your living with have a four-year degree)
- Possess and demonstrates an academic need for the program
- An interest in learning how to achieve a college education with a positive and winning attitude
- Willing , through hard work, commitment, participation and dedication to accomplish the goals of the UB program

APPLICATION CHECKLIST:

Please be sure this application is completed & signed by the student/applicant and parent/guardian.

- ☐ School Transcript - including current grades, grade-point average (GPA), and FSA scores (*math, reading, and writing for 8th grade or 10th grade EOC in biology and algebra 1*). You can obtain this from your guidance office.
- ☐ Copy of student's social security card and/or copy of permanent resident card. (*if applicable*)
- ☐ Family Income Verification - parents/guardians will need to complete the section that applies to them, complete with taxable income and make sure to sign/date the section. If applicable provide a copy proof of most recent income tax form or other appropriate documentation. Please note all documentations will need to be signed for verification purposes.

ALL UCF UPWARD BOUND ACTIVITIES ARE FREE TO EACH PARTICIPANT!

PARTICIPANT APPLICATION:

In order to participate, you must submit an application and complete the financial income section to be deemed financially eligible by the guidelines set forth by the U. S. Department of Education. You will be notified upon receipt of your application. **If you have any questions, please call our office at 407-823-4216.** Thank you for taking the time to complete all items on the application. Information on this form is confidential. **Please use black or blue ink. DO NOT USE PENCIL.**

PART I: BIOGRAPHICAL/SCHOOL INFORMATION (APPLICANT)

For Office Use Only--Citizenship Verification

☐ Certificate of Citizenship

☐ US Passport

☐ Social Security Card

☐ Certificate of Naturalization

☐ Birth Certificate

☐ Form FS-240

Date of Birth ___/___/___

Age:

GPA

CUM:

Grade

Level:

First Name:

MI:

Last Name:

Street/Mailing Address

City:

State:

Zip:

Home Phone:

Cell Phone:

May we contact you via cell
phone/text? Yes No

Email:

Gender: Male

Other

Female

No No

Yes

Are you a ward of the court, in foster care or
adopted? (If you are please provide documentation)

Race: (check ALL that apply) American Indian/Alaskan Native:

Asian:

Black or African-American:

Hawaiian or Pacific Islander:

Hispanic:

White/Caucasian:

Other (please specify):

Have you previously participated in a federal TRiO Program?

Yes No, if yes, which one of the following below:

Talent Search

Veteran Upward Bound

Upward Bound

Upward Bound Math and Science

Other:

Optional Information: Do you have a disability you
want us to be aware? Yes No

If yes, Please

Explain: _____

As required by the US Department of Education, please complete the following questions in order to be considered for the UCF Upward Bound Program.

Are you a US Citizen? Yes

No

If you are not, are you a permanent Resident Alien? Yes

No

A #: _____

NOTE: You must be a US citizen or legal resident of the United States in order to participate in and receive services from UCF Upward Bound Program. If you are not a US citizen, enter your Permanent Alien Registration Number. If your number is only eight digits, enter a zero after the "A".

STUDENT NEEDS/INTERESTS ASSESSMENT

Do you plan to attend college? Yes No

Other (e.g. military): _____

Are you taking any Advance/Honors/Dual Enrollment Classes?

Yes No

If yes, please indicate the classes below you are taking:

Which do you plan to enroll in after completing high school? (Please check one below)

College/University (4 year)

Community College (2 year) Program

Career Training

Military Program

Undecided

Applicant/Student PRINT Name: _____

Applicant/Student Signature: _____ Date: _____

PART II: PARENT INFORMATION

To parent or legal guardian: The personal information, including financial status and educational levels, given to the UCF Upward Bound program is used for reporting purposes with the United States Department of Education. No one may access, view or utilize the information unless they work with or for UCF Upward Bound program or unless they are given specific or legal authorization to said information. This information is required to determine if your child meets federal eligibility guidelines established by regulation of the United States Department of Education. All information is protected under the Family Educational Rights and Privacy Act (FERPA, 20 USC 1231a).

With whom does the applicant/student live? Check all that apply below.

Both Parents Mother: Father: Grandparents: Legal Guardian: Other (please specify):

**Parent 1/Mother
Guardian Name:**

**Parent 2/Father
Guardian Name:**

Home Number:

Home Number:

Cell Number:

Cell Number:

May we send occasional TEXT MESSAGES with
program information? Yes No

May we send occasional TEXT MESSAGES with
program information? Yes No

Email Address:

Email Address:

Employer:

Employer:

Occupation:

Occupation:

Highest Education level completed:

Did not complete High School
High School Diploma / GED
Trade Certificate
Associate Degree (2 years of college)
Bachelors Degree (4 years) or higher

Highest Education level completed:

Did not complete High School
High School Diploma/GED
Trade Certificate
Associate Degree (2 years of college)
Bachelors Degree(4years) or higher

UCF Upward Bound Program works in partnership with parents to encourage and prepare students for education after high school. You are invited to participate in all UCF Upward Bound activities.

PARENT CONTRACT:

For my child to remain eligible to participate in UCF Upward Bound program, I will:

- Encourage my child to do homework and get help with homework as needed
- Encourage my child to participate in UCF Upward Bound program tutoring, workshops, activities, and campus visits
- Attend at least one parental workshop provided by UCF Upward Bound Program
- Notify the UCF Upward Bound office with any address and/or phone changes
- Immediately notify an UCF Upward Bound program staff if my child receives disciplinary action at school
- My GOAL is to assist my child in succeeding in his/her education

I certify that the information provided is true and accurate to the best of my knowledge. I understand that my child is required to attend all UCF Upward Bound program activities and events until his/her graduation from high school. I understand that my involvement and support is critical in my child success with school and the UCF Upward Bound program. I will fully support my child's participation in the UCF Upward Bound program.

Parent Name: _____ **Parent Signature:** _____ **Date:** _____

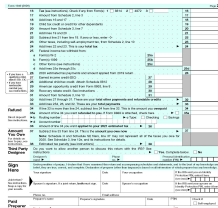
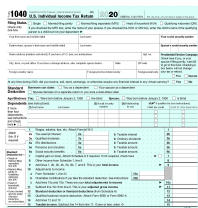
PART III: FAMILY INCOME INFORMATION

THE UCF Upward Bound program is a Federally Funded Program. For the applicant to qualify, verification of income is necessary. ALL INFORMATION IS CONFIDENTIAL AND FOR PROGRAM USE ONLY.

Check any of the services your family receives: **Free School Lunch** **Reduced School Lunch**

IF YOU DID FILE A TAX RETURN: (If this applies to you, please indicate below)

What was your family's total **TAXABLE** income for **last tax** year? \$ _____ (**Do NOT leave blank. If you have no taxable income, enter "0".**) **How many family members (adults and children) are living in your household?** _____



PLEASE NOTE: IRS tax form 1040 (2020) which documents the **TAXABLE INCOME**, indicate the amount above

- See line 15 for the correct amount

Make sure the copied document is signed.

By signing this Income Verification Form, I am verifying that the information that I have provided to the UCF Upward Bound program is true and correct to the best of my knowledge.

Print Name: _____

Date: _____

Signature: _____

IF YOU DID NOT FILE A TAX RETURN: (If this applies to you, please indicate below)

My family had no taxable income. Family household income was \$ _____ (**Do NOT leave blank**)

Our only support was from one of the following below. (**check all that apply below and insert amount**):

Public Assistance (AFDC/TANF)	Disability	Retirement	Unemployment
Social Security/SSI	Veterans Benefits	Food Stamps/ WIC/SNAP	Vocational Rehabilitation
Child Support	Other: _____		

How many family members (adults and children) are living in your household? _____

By signing this Income Verification Form, I am verifying that the information that I have provided to the UCF Upward Bound program is true and correct to the best of my knowledge.

Print Name: _____

Date: _____

Signature: _____

Federal TRIO Programs Current-Year Low-Income Levels

(Effective January 17, 2020 until further notice)

Size of Family Unit	Income	Size of Family Unit	Income
1	\$19,140	5	\$46,020
2	\$25,860	6	\$52,740
3	\$32,580	7	\$59,460
4	\$39,300	8	\$66,180

For family units with more than eight members, add the following amount for each additional family member: \$6,720 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; \$8,400 for Alaska; and \$7,725 for Hawaii. The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount. The figures shown under family income represent amounts equal to 150 percent of the family income levels established by the Census Bureau for determining poverty status. The 2020 poverty guidelines are in effect as of January 15, 2020 until further notice.

PART IV: PARENT AND STUDENT RELEASE CONSENT

TRACKING:

I hereby give permission for the UCF Upward Bound program to retrieve, store and report education verification information and student outcomes research about me that is gained from the National Clearinghouse and other services.

RESEARCH:

I hereby give permission for UCF Upward Bound program to collect and report pertinent information related to ongoing research questions in the TRiO Center. No identifiable data will be made public, but aggregate data may be published or presented including: academic measures (GPA & Test Scores), involvement at University of Central Florida and in TRiO, and other educational or personal data that is relevant to the research.

MEDICAL RELEASE:

If medical services are needed by my son/daughter while participating in the UCF Upward Bound program activities or on field trips, I give my permission for my son/daughter to receive any medical services deemed necessary.

RECORDS RELEASE:

I authorize the UCF Upward Bound program to access and/or request copies of academic transcripts, grade reports, report cards, standardized test scores, contact information, and any other academic information from the high schools and colleges I attend through my college graduation. I understand that the U.S. Department of Education funds the UCF Upward Bound program and will use these records to provide academic advisement and other services. I also understand that these records will be handled in a confidential manner and that they will be made available only to program staff and representatives from Federal and State Departments of Education. I/We also give permission to UCF Upward Bound program to request the information identified above from each high school and college that our son or daughter attends. Note: A photocopy of this record release form should be accepted as an original and the date of the application has bearing when the UCF Upward Bound program requests the information.

ACTIVITY AND FIELD TRIP AUTHORIZATION/RELEASE:

As the parent/guardian of the applicant I do willingly execute this release in consideration of the educational benefit to be derived by my child in participating in UCF Upward Bound program, a University sponsored activity. I hereby release from liability and hold the University harmless from any and all claims and causes of action which might be brought by my child for loss of property, personal injury or death sustained by my child arising out of travel or activity conducted by or under the control of the University. I understand that the term "University" as used here in shall include the employees, administrators, agents, and Board of Trustees of the University.

PHOTO RELEASE:

I, being the parent or guardian hereby consent that the photograph/video my son/daughter and/or to use their likeness in photograph(s)/video(s) in any and all of its publications, and in any and all other media, whether now known or hereafter existing controlled by the UCF Upward Bound program, in perpetuity, and for other uses by the University or Program. I will make NO monetary or other claim against the UCF Upward Bound program for the use of the photograph(s)/video(s).

By my signature below, I hereby agree to and fully understand all the above issues/conditions and do accept full responsibility as outline above.

Student/Applicant Print Name: _____

Student/Applicant Signature: _____ Date: _____

Parent/Guardian Print Name: _____

Parent/Guardian Signature: _____ Date: _____

STUDENT NEEDS ASSESSMENT

Directions: Please complete the following questions below. This assessment contains statements about your academic, personal and career/college needs. Be sure to give your honest opinion of how UCF Upward Bound Program can meet your needs.

Student Name: _____ **Grade:** _____ **Date:** _____

ACADEMIC NEEDS	Strong Need	Some Need	No Need
• To get better grades in school			
• To organize my time, activities, and responsibilities better			
• To learn more about high school requirements for college			
• To learn more about rigorous courses and dual enrollment			
• To prepare for state assessment exams like FSA and EOC			
• To listen better in class and ask more questions			
• To relate to and communicate better with my teachers			
• To identify, set, and evaluate goals for the future			
• To obtain tutoring in English, Math and Science			
SOCIAL/PERSONAL NEEDS	Strong Need	Some Need	No Need
• To better understand my parents and other adults			
• To learn to deal with conflict in a positive manner			
• To learn how my self-esteem affects my behavior			
• To learn to accept people who are different from me			
• To accept great responsibility for my actions			
• To learn to make good decision making choices			
• To develop stronger leadership skills			
• To develop better test taking skills			
• To develop stronger study and note taking skills			
CAREER & COLLEGE READINESS	Strong Need	Some Need	No Need
• To learn more about the college admissions process			
• To learn about post-secondary course selection			
• To learn more about different colleges/programs of study			
• To prepare for college placement exams like SAT and ACT			
• To learn more about colleges costs and how to pay for college			
• To learn how to apply for financial aid/scholarships/loans			
• To explore a variety of career opportunities			
• To learn more about job applications, resume and interviews			
• To visit more colleges/universities			
• To learn more about my career interests			

Upward Bound Program Project RISE



UNIVERSITY OF
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Student Interview Form

Name: _____ Grade: _____ Date: _____

Directions: Please answer the following program interviewing questions below.

- ❖ Why do you think Upward Bound would be beneficial for you?

- ❖ How would friends, family and teachers describe you?

- ❖ What do you do when you don't understand something in class or homework?

- ❖ Describe a person who is a role model for you & why do they inspire you?

- ❖ Are there additional ways the Upward Bound Program could support you?