Student Name: ____________________________

School: __________________________________

Counselor Use Only

After application is turned in...

Please include the following in each student’s packet:

- Current Grades
- Attendance for the year

Notes:

Staff Use:

Items Missing in Application:
Dear Applicant:

The Upward Bound project at Mineral Area College is a federally funded educational program designed to generate in program participants the skills and motivation necessary to complete a program of secondary education and to enter and succeed in a program of post secondary education.

If you are planning to obtain a four-year college degree but need additional information and/or academic support to prepare for college, complete this application. There is no cost to the student or their family for his/her participation. All paperwork must be turned in with complete information before you can be considered for the project. Please print or type all information except the signatures. **Do not use pencil.**

---

Once all forms are completed, return them to the Counseling Center at your school or mail them to Upward Bound. Be sure the teacher recommendation forms are given to your **math, science and English** teachers for them to complete. If you have questions, please call the Upward Bound office at 573-518-2156.

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Please use the following checklist to make sure your application is complete:

**Forms to be completed by parent/guardian and/or student:**
- Application for Admission
- Eligibility Verification (parent/guardian signature required)
- Teacher Recommendation (three needed – **math, science, and English** teachers)
- Educational and Career Information
- Records Release (parent/guardian signature required)

**Forms to be completed or furnished by the school:**
- Teacher Recommendation (three needed – **math, science, and English** teachers)
- Current Transcript, Test Scores, EOC results, Middle School Achievement Test Scores and GPA
- Attendance Information
- Discipline Report

The personal information you give to Upward Bound will be sent to the Department of Education. The information is protected by the Privacy Act. No one may see the information unless he or she works with or for the Upward Bound Program, or is specifically authorized to see the information. The information is necessary to determine if the applicant is eligible to participate in the program and helps the federal government to measure program success. The Department of Education has the authority to gather information to help make Upward Bound a better program (20 USC 1231a). If you do not give this information to the Upward Bound Program and the Department of Education, you cannot receive any benefits from this program.
APPLICATION FOR ADMISSION
Upward Bound at Mineral Area College
P.O. Box 1000, Park Hills, MO 63601-1000 (573) 518-2156
www.MineralArea.edu/UpwardBound

PERSONAL DATA

Legal Name (last, first, middle): _______________________________________________________________________
Date: _____/_____/______               Sex:   Male   Female   Birth Date: _____/_____/______
What school do you attend? _______________________________________               Current Grade ________
Are you a participant in Educational Talent Search?  □ Yes  □ No  Student Cell Phone: ______________________
With whom do you live? Please check all that apply and give full names:

☐ Natural Mother  Name: _________________________________________________________________
☐ Natural Father  Name: _________________________________________________________________
☐ Stepmother  Name: _________________________________________________________________
☐ Stepfather  Name: _________________________________________________________________
☐ Female Guardian  Name: _________________________________________________________________ Relationship to you: ________
☐ Male Guardian  Name: _________________________________________________________________ Relationship to you: ________
☐ Other  Name: __________________________ _______ Relationship to you: _______________

Current Address:
Street/Apt#: _______________________________ City: __________________ State: ________ Zip: ________________

Parent/Guardian Contact: Name: ____________________________________ Email: __________________________
Home phone: (_____) ____________   Cell Phone: (_____) _______________ Work Phone: (____) _______________

Second Contact: Name: _________________________________________ Relationship: __________________________
Street/Apt#: _______________________________ City: __________________ State: ________ Zip: ________________
Home Phone: (_____) ____________   Cell Phone: (_____) ________________ Work Phone: (____) ______________

Are you employed?   □ Yes   □ No   If yes, how many hours do you work per week? __________________________

TO BE COMPLETED BY PARENT OR GUARDIAN. The information on the remainder of this page is optional. It is used for federal reports or to assist in accommodating students.

Is your ethnic group Hispanic/Latino?    Yes     No
What is your race?   □ American Indian/Alaskan Native   □ Asian   □ Black or African American
 □ White   □ Native Hawaiian or Other Pacific Islander   □ Race unknown
Is English the primary language you speak at home?        Yes        No   If no, list the primary language______________
1. Do you have a physical handicap?       Yes   No  2. Are you homeless?      Yes    No
3. Do you have an Individualized Educational Plan (IEP) or receive special services at your school?        Yes         No
4. Have you been involved with the juvenile justice system?   □ Yes  Date: __________   □ No
5. Do you have a diagnosed learning disability?         Yes         No  6. Are you in foster care?        Yes        No
If you answered yes to any of questions 1 - 6, please explain:

________________________________________________________________________

Office Use Only:
JICS #: _______________________
MOSIS #: _______________________

Application For Admission 1 - Revised 1/13/20

Last Name: _________________________
ELIGIBILITY VERIFICATION

To be completed by parent/guardian. **Unless this form is completed in its entirety, the student CANNOT be considered for the Upward Bound program.**

Student Name: __________________________________________________ Date: __________________________

If accepted in Upward Bound, you will be required to provide student’s social security number.

Are you a U.S. citizen?  □ Yes  □ No   If no, list status ____________________________

Does the student’s natural or adoptive parent have a Bachelor’s (4-year college) degree?    □ Yes    □ No

(Do not include certifications or 2-year degrees)

If yes, list person with degree, type of degree, and name of college that issued the degree.

________________________________________________________________________________________________

Please list all people living in the household of the applicant. (Include applicant in first line.)

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<th>NAME</th>
<th>RELATION TO APPLICANT</th>
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<td>Applicant</td>
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FAMILY INCOME INFORMATION: **Required for consideration in Upward Bound**

Did you file an income tax return in 2019?    □ Yes  □ No

**Annual family TAXABLE income for the 2019 tax year:** $__________________ *(Line 11b on Form 1040)*

Are you an orphan?  □ Yes  □ No

Are you a ward of the court?  □ Yes  □ No   If yes, what circuit or county? ____________________________

Student needs support due to (check all that applies):

□ Low educational aspirations

□ Lack of opportunity, support, and/or guidance to take challenging college preparation courses

□ Lack of career goals and/or need for accurate information on careers

□ Lack of confidence, self-esteem, and/or social skills

□ Predominately low-income community

□ Rural isolation

□ Interest in careers in math and science

□ Diagnosed learning disability

□ Other __________________________________________________________
I certify that the income, education and household information are true and correct and understand that deliberate misrepresentation of the information may result in prosecution under applicable state and federal laws.

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<th>Parent/Guardian Signature</th>
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**For Office Use Only:**

This student qualifies for participation in Upward Bound. He/She is:

- [ ] Low Income
- [ ] First Generation
- [ ] High Risk (check at least one)
  - [ ] Student did not achieve at the proficient level on state assessments in reading/language arts and/or math
  - [ ] GPA for the most recent school year was 2.5 or less
  - [ ] At the beginning of 10th grade, student had not completed pre-algebra or algebra course

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<th>Director Signature</th>
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TEACHER RECOMMENDATION

Upward Bound at Mineral Area College is a federally funded program designed to *prepare high school students for postsecondary education*. Students recommended must possess *academic potential* to complete rigorous curriculum as well as meet income and first-generation eligibility. Recommendations from *current math, science and English teachers* are a requirement for the student’s application.

TO BE COMPLETED BY STUDENT

Student Name: ___________________________ Grade: __________

School: _______________________________________________________

List the names of the teachers to whom you have given a teacher recommendation form.

Math Teacher’s Name: ___________________________________________

English Teacher’s Name: _________________________________________

Science Teacher’s Name: _________________________________________
MATH TEACHER RECOMMENDATION

Upward Bound at Mineral Area College is a federally funded program designed to prepare high school students for postsecondary education. Students recommended must possess academic potential to complete rigorous curriculum as well as meet income and first-generation eligibility requirements. Recommendations from current math, science and English teachers are a requirement for the student’s application.

Please complete the online teacher recommendation for the following student:

Visit the following website to complete the recommendation:


You will receive a confirmation email once you have completed the online recommendation.

TO BE COMPLETED BY STUDENT

Student Name: ________________________________ Grade: ____________________
ENGLISH TEACHER RECOMMENDATION

Upward Bound at Mineral Area College is a federally funded program designed to prepare high school students for postsecondary education. Students recommended must possess academic potential to complete rigorous curriculum as well as meet income and first-generation eligibility requirements. Recommendations from current math, science and English teachers are a requirement for the student’s application.

Please complete the online teacher recommendation for the following student:

Visit the following website to complete the recommendation:


You will receive a confirmation email once you have completed the online recommendation.

TO BE COMPLETED BY STUDENT

Student Name: _____________________________________________________________ Grade: __________________
SCIENCE TEACHER RECOMMENDATION

Upward Bound at Mineral Area College is a federally funded program designed to prepare high school students for postsecondary education. Students recommended must possess academic potential to complete rigorous curriculum as well as meet income and first-generation eligibility requirements. Recommendations from current math, science and English teachers are a requirement for the student’s application.

Please complete the online teacher recommendation for the following student:

Visit the following website to complete the recommendation:


You will receive a confirmation email once you have completed the online recommendation.

TO BE COMPLETED BY STUDENT

Student Name: _____________________________________________________________ Grade: __________________
EDUCATIONAL AND CAREER INFORMATION

Student Name: __________________________________________________________ Date: ____________________________

Do you plan to continue your education beyond high school?

☐ Yes  ☐ No  ☐ Undecided  If yes, where? __________________________________________

Where do you plan to continue your education after high school?

☐ University/College  ☐ Community College  ☐ Military  ☐ Technical/Vocational School

☐ Undecided  Other, list type of school __________________________________________

Are you a participant in any school clubs or activities?  ☐ Yes  ☐ No

If yes, please list: __________________________________________________________________________

Number of absences this school year ________  If more than five, explain why___________________________

What is your current GPA? __________

Have you failed any subjects?  ☐ Yes  ☐ No  If yes, list the subjects: ____________________________

What are your present grades in the following subjects:  English __________   Math __________   Science __________

Please list your current class schedule:

1. ___________________________________________  6. ___________________________________________

2. ___________________________________________  7. ___________________________________________

3. ___________________________________________  8. ___________________________________________

4. ___________________________________________  9. ___________________________________________

5. ___________________________________________  10. _________________________________________

What careers interest you the most? List in order of interest.

1. ____________________________________________  2. __________________________________________

3. ____________________________________________  4. __________________________________________

Have you ever visited a college campus?  ☐ Yes  ☐ No

If yes, list the school(s) you have visited. __________________________________________________________

Describe where you will be in 10 years (i.e.: education, career, personal, and residential). In student’s handwriting.

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________  ______________________________

Educational and Career Information 6 - Revised 1/13/20  Last Name: ____________________________
RECORDS RELEASE

Student Name: ____________________________________________ (Print)

High School Name: ________________________________________  Graduation Date: ________________

A. High School Records Release

The above-named student is applying for acceptance into the Upward Bound program. I hereby authorize release of transcripts, test scores, attendance, discipline records, IEP, 504 and other pertinent reports since grade 7 pertaining to my child’s academic progress in school to the Upward Bound project at Mineral Area College.

B. Future Follow-Up Activities Release

If the student named above is selected for participation in Upward Bound, I hereby authorize the school to release the same information annually to the Upward Bound project through the time of the student’s high school graduation. I further authorize the release of each semester’s class schedule, a final transcript verifying graduation, and other pertinent information. The school can continue to provide the requested information until I rescind this permission in writing or until one year after the student graduates.

C. College Records Release

When a student has completed the Upward Bound project at Mineral Area College, the federal government requires Upward Bound to track participants through the completion of their post-secondary education. I give my permission to any college I attend or have attended to provide proof of attendance, transcripts, FAFSA information, and any degrees completed to the Upward Bound project at Mineral Area College.

____________________________________ / ____________________________________     _____________
Student Name – Print Name  Student Signature                       Date

____________________________________ / ____________________________________     _____________
Parent/Guardian - Print Name  Parent/Guardian Signature                      Date

These records may be sent directly to:
Upward Bound
Mineral Area College
P.O. Box 1000
Park Hills, MO 63601-1000
573-518-2156 Fax: 573-518-2168