



UPWARD BOUND APPLICATION

North Dakota State University TRIO UPWARD BOUND

UPWARD BOUND APPLICATION: INSTRUCTIONS

STEP ONE: COMPLETE THIS APPLICATION

STEP TWO: RETURN TO YOUR HIGH SCHOOL COUNSELOR OR MAIL TO

UPWARD BOUND
NORTH DAKOTA STATE UNIVERSITY
DEPT. 5270, PO BOX 6050
FARGO, ND 58108-6050

IMPORTANT: Your application will not be considered complete until all the items in the list below have been returned to the UPWARD BOUND office. An entrance interview will be scheduled when your application packet is complete.

- ☐ Upward Bound Application – pages 3 - 5
- ☐ Family Income Information and Verification – page 6
- ☐ Copy of Federal Income Tax Return (*if one was filed last year – see p.6*)
- ☐ Release of Records – page 7

WANT HELP?

IF YOU, OR YOUR FAMILY, HAVE QUESTIONS OR WOULD LIKE HELP FILLING OUT THIS APPLICATION PLEASE CONTACT THE NDSU UPWARD BOUND ACADEMIC COORDINATOR
MICHELLE PEARSON - 701-231-8090 OR MICHELLE.PEARSON@NDSU.EDU

ABOUT UPWARD BOUND

We are happy that you are interested in joining TRIO Upward Bound!

TRIO Upward Bound is a college access and preparation program funded by the United States Department of Education and sponsored by North Dakota State University. TRIO Upward Bound helps students succeed in high school and prepares them for continued success in college. Services include tutoring, academic skill development, academic advising, college entrance exam preparation, college visits, and assistance with college and financial aid applications.

Who is eligible to participate?

To be eligible, a student must, at the time of admission:

- Be a student enrolled at Davies, Fargo North, Fargo South or Moorhead high schools (or will be enrolled in one of these schools fall semester of the current year);
- Be at least 13 years old;
- Have completed the 8th grade but have not yet begun 12th grade;
- Be income-eligible OR from a family in which neither parent has graduated from a four-year college;
- Be a United States citizen, a permanent resident, or legally in the country with intent to become a resident;
- Have the potential and desire for academic success in high school AND post-secondary education;
 - Preference given to applicants whose cumulative GPAs are at least 2.8;
 - If applicant receives English Language Learner services, preference is given to applicants who score at least 3.5 on the ACCESS for ELLs (WIDA).

What is expected of TRIO Upward Bound students?

TRIO Upward Bound students must be motivated to consistently do their best academic work and be committed to attending college after graduating from high school. Expected behaviors include:

- Complete academic work to your best ability. The target GPA for Upward Bound students is 2.5 or higher.
- Participate in all Upward Bound activities in the academic year including monthly meetings with an Upward Bound adviser, monthly Saturday programming, and weekly tutoring.
- Participate in all Upward Bound activities in the six-week summer program (Monday-Friday, 8:00 a.m.-3:30 p.m.)
- Consistently show respect for others.

What is expected of the parents/guardians of TRIO Upward Bound students?

- Parents/Guardians also have an important role in students' academic success. They are expected to:
- Monitor student's school attendance, homework completion, and academic performance.
- Encourage good study habits at home.
- Be sure student has transportation to and from Upward Bound activities.
- Allow student to fully participate in Upward Bound activities, which may require scheduling around Upward Bound required events.

NDSU does not discriminate in its programs and activities on the basis of age, color, gender expression/identity, genetic information, marital status, national origin, participation in lawful off-campus activity, physical or mental disability, pregnancy, public assistance status, race, religion, sex, sexual orientation, spousal relationship to current employee, or veteran status, as applicable. Direct inquiries to Vice Provost for Title IX/ADA Coordinator, Old Main 201, NDSU Main Campus, 701-231-7708, ndsueoaa@ndsu.edu.

UPWARD BOUND APPLICATION

STUDENT INFORMATION

Student Name: _____
First Middle Last

Address: _____
Street/Apt. City State Zip

Phone 1: _____ text? ☐ yes ☐ no **Phone 2:** _____ text? ☐ yes ☐ no

Email (that you check frequently): _____

Date of Birth (MM/DD/YYYY): _____ / _____ / _____

Social Security Number: _____ / _____ / _____

Gender: ☐ female ☐ male _____

Race (check all that apply): ☐ African American / Black ☐ American Indian / Native ☐ Asian / Pacific Islander
☐ Hispanic / non-Black ☐ White ☐ other: _____

Citizen (check one): ☐ United States Citizen ☐ United States National ☐ Permanent Resident

Alien Registration Number (if applicable): _____

HEOA 645.3 – Students must be a US Citizen, National or Permanent Resident to qualify for Upward Bound.

STUDENT SCHOOL AND GOALS INFORMATION

High School (check one): ☐ Moorhead ☐ South ☐ North ☐ Davies

Present Grade in School: ☐ 8th ☐ 9th ☐ 10th ☐ 11th **Graduation Year:** _____

What grades do you usually earn (check all that apply): ☐ A's ☐ B's ☐ C's ☐ Below C's **GPA:** _____

After I graduate from high school I plan to:

☐ Attend college (2 or 4 year college or university) ☐ Enter military ☐ Attend technical/vocational college
☐ Work part-time and attend college ☐ Work full-time ☐ Other: _____

I need information or help on the following (check all that apply to you):

☐ Stress Management ☐ Communication with Teachers ☐ Self Esteem ☐ Study Skills
☐ Tutoring ☐ Course Planning ☐ Career Planning ☐ Colleges
☐ Financial Aid/Scholarships

UPWARD BOUND APPLICATION - CONTINUED

STUDENT SCHOOL AND GOALS INFORMATION - CONTINUED

Please list 3 words that best describe you.

1. _____
2. _____
3. _____

What are the top 3 goals would you like to accomplish in the Upward Bound program?

1. _____
2. _____
3. _____

TEACHER OR COUNSELOR RECOMMENDATION

Please provide the name and email for a teacher or counselor at your current school, we will contact them for their recommendation.

Teacher or Counselor Name: _____
First Last

Email Address: _____

HOUSEHOLD INFORMATION

How many people are in your household (including the student)? _____

Please list all people living in student's household (use back of sheet if needed)

Name: _____ Age: _____ Relationship to Student: _____

Name: _____ Age: _____ Relationship to Student: _____

Name: _____ Age: _____ Relationship to Student: _____

Name: _____ Age: _____ Relationship to Student: _____

Name: _____ Age: _____ Relationship to Student: _____

Name: _____ Age: _____ Relationship to Student: _____

Name: _____ Age: _____ Relationship to Student: _____

What language(s) are most often spoken in your home? _____

UPWARD BOUND APPLICATION - CONTINUED

PARENT / GUARDIAN INFORMATION

PARENT / GUARDIAN #1

☐ CHECK IF STUDENT IS LIVING WITH THIS PERSON

Name: _____

Address: _____
Street/Apt. City State Zip

Phone 1: _____ text? ☐ yes ☐ no Phone 2: _____ text? ☐ yes ☐ no

Email (that you check frequently): _____

Relationship to Student: _____ Legal Guardian? ☐ Yes ☐ No

Highest Education Level Completed: ☐ Unknown ☐ Elementary ☐ High School ☐ Some College ☐ Received 4 yr degree

PARENT / GUARDIAN #2

☐ CHECK IF STUDENT IS LIVING WITH THIS PERSON

Name: _____

Address: _____
Street/Apt. City State Zip

Phone 1: _____ text? ☐ yes ☐ no Phone 2: _____ text? ☐ yes ☐ no

Email (that you check frequently): _____

Relationship to Student: _____ Legal Guardian? ☐ Yes ☐ No

Highest Education Level Completed: ☐ Unknown ☐ Elementary ☐ High School ☐ Some College ☐ Received 4 yr degree

FAMILY INCOME INFORMATION AND VERIFICATION

Did you file a federal income tax return last year? ☐ Yes - go to SECTION A

☐ No - go to SECTION B

SECTION A. COMPLETE IF YOU DID FILL OUT A TAX RETURN LAST YEAR.

1. My total taxable income for last tax year was: \$ _____

Note: see line 43 on your 1040 federal tax return

2. Please **attach a copy of your Federal Income Tax Return** from the last tax year.

Note: Only the 1040 form is needed. We must have a copy to verify the student's family income.

Signature: Parent/Guardian signature verifying income tax information

date

SECTION B. 'DID NOT FILE' CERTIFICATION. COMPLETE IF YOU DID NOT FILL OUT A TAX RETURN LAST YEAR.

1. ☐ I did NOT file a Federal Income Tax Return last year.

2. My monthly income from all employment is: _____

3. I receive the following no-taxable income:

☐ TANF ☐ Financial Aid ☐ Unemployment Compensation ☐ General Assistance

☐ Medical Assistance ☐ V.A. Disability ☐ Workman's Compensation ☐ Other: _____

I, the parent/guardian of the Upward Bound student applicant, verify that the information I have provided for the 'Did Not File' Certification is true and accurate.

Signature: Parent/Guardian signature

date

CERTIFICATION OF RELEASE OF RECORDS

The personal information you give to the Upward Bound Director is sent to the Federal Government (Department of Education). The information is protected by the Privacy Act. No one may see the information unless they work with or for the Upward Bound Program or are specifically authorized to see the information. The information is necessary to determine if you are eligible to participate in the program and helps the government to measure your success. The Department of Education has authority to gather information to help make Upward Bound a better program. If you do not give this information to the Upward Bound program and the Department of Education, you cannot receive any benefits from the program.

I hereby authorize the release of the following information to the Upward Bound Program at North Dakota State University:

- A) Transcript of grades from his/her school records
- B) Standardized test scores
- C) School counselor or psychologist information
- D) School attendance records
- E) Financial Aid award letters
- F) AFDC and Social Security verification, JTPA family financial information
- G) Free/reduced lunch verification

This information is to be used as part of the evaluation and follow-up related to the Upward Bound Program. All information is to be treated as confidential, in keeping to the Family Educational Rights and Privacy Act. This release is to be considered valid for the period of time that my son/daughter remains in the Upward Bound Program.

I fully understand the above provision and hereby give consent to have all pertinent data forwarded to the North Dakota State University Upward Bound Program for the duration of my son's/daughter's participation in the program.

Student Name (Please Print)

Student Signature

Date

Parent / Guardian Signature

Date

School Name

Phone Number

School Address: Street Address City State Zip