

UPWARD BOUND PROGRAM APPLICATION

San Diego State University Pre-College Institute

Upward Bound Program, San Diego State University, College Of Education, San Diego, CA 92182-1103

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SAN DIEGO STATE
UNIVERSITY



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APPLICATION FOR
STUDENT ADMISSION
Application Deadline: April 3, 2009
Program Dates: June 16 - July 24, 2009

This application plays an important part consideration for participation in the Upward Bound Program. Please take the time to complete the entire application before it is returned. Applicants returning completed applications by the deadline will be given first priority for personal interviews. Please provide: Tax info - 2007 & 2008, copy Social Security card, student transcripts and current schedule.

PART 1: STUDENT INFORMATION

Name _____ Gender: Female Male
LAST FIRST M.I.

Address _____
STREET/APT. # CITY STATE ZIP

Home telephone no. (____) _____ Social Security No. _____ - _____ - _____

Date of birth ____ / ____ / ____ Place of birth _____
MONTH DAY YEAR CITY STATE

Are you currently a citizen or legal resident of the United States? Yes No Applied

In "No" or "Applied," what is your Resident Alien Registration or INS Case Number _____
Please attach a copy of your Social Security Card, Alien Registration Card or INS paperwork.

E-mail address _____ Cell phone no.: (____) _____

Please choose your ethnic background

- Black or African-American Asian Latino(a)/Mexican
 Native American or Alaskan Native Native Hawaiian or Other Pacific Islander White/Caucasian

PART 2: ACADEMIC INFORMATION

Name of high school _____ Grade level 9th 10th 11th

Current High School Overall Cumulative weighted grade point average (GPA) _____

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

Please check off all of the Upward Bound Program activities that you could participate in during the year

- After school study session (1/wk) Academic advising (1/wk) Saturday Sessions (1/mo) Summer Residential Program (June 16-July 24)

PART 3: AUTHORIZATION FOR RELEASE OF RECORDS AND LIABILITY

When I sign this form I authorize the SDSU Upward Bound Program to have access to my child's permanent school records during the application process and throughout the period of active participation in the program.

I also release SDSU, the SDSU Research Foundation and the SDSU PCI Upward Bound Program from any liability relating to my son or daughter's participation in Program activities & fieldtrips throughout the period of his/her participation in Program.

PART 4: PARENT INFORMATION

All parents/guardians must complete the following information

FATHER/MALE GUARDIAN

Name _____ Work telephone no. (_____) _____

Highest level of education completed
(please check only one of the following)

- Less than high school
- High school
- Junior College
- Technical/Vocational
- Bachelor's Degree

Name of work: _____

Country where Bachelor's Degree was attained _____

Your cell phone number: (____) _____

MOTHER/FEMALE GUARDIAN

Name _____ Work telephone no. (_____) _____

Highest level of education completed
(please check only one of the following)

- Less than high school
- High school
- Junior College
- Technical/Vocational
- Bachelor's Degree

Name of work: _____

Country where Bachelor's Degree was attained _____

Your cell phone number: (____) _____

Primary or main language that is spoken in your home _____

TOTAL NUMBER of persons residing in your home (include parents, children and any others) _____

Who does the student currently live with? Mother Father Both Guardian (who) _____

PART 5: FINANCIAL INFORMATION

TO BE COMPLETED BY THE PARENT ON GUARDIAN

Please submit a copy of your last income tax return along with this application

The U.S. Department of Education requires that Upward Bound gather this data in order to determine student eligibility to participate in our program. We cannot accept applications without proof of income.

The information you give us will be kept confidential and is protected by the Federal Privacy Act.

1. Did you file a Federal Income Tax Return **LAST YEAR** ? Yes No

If "yes" please enclose a copy of the first two pages only of last year's Federal 1040, 1040-A or 1040EZ tax form.

If "no" please complete the information in question #2.

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 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

Your application WILL NOT BE CONSIDERED without proof of income.

Self employment \$ _____ Unemployment \$ _____

Social Security \$ _____ Disability Payments \$ _____

AFDC/Welfare \$ _____ Other Income \$ _____

PRINT: Parent/Guardian Name

SIGN: Parent/Guardian Signature

Date

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PRINT: Student Name

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