

# TRIO Upward Bound of West Garfield County College Preparatory Program New Student Application







## **ELIGIBILITY REQUIREMENTS**

TRIO Upward Bound (UB) has a limited number of openings available for new students each year. Students who apply for TRIO UB must meet the following eligibility requirements:

- Enrolled at Coal Ridge High School, Grand Valley High School, or Rifle High School; AND
- U.S. citizen or permanent resident of the United States; AND
- One of the following:
  - Neither parent has earned a four-year Bachelor's degree (first-generation college student);
    AND/OR
  - Meet income guidelines

### **APPLICATION TIMELINE**

We want to provide you with services and support from the beginning of the academic year in order to maximize your success. Please apply early in order to secure your place in our fabulous program!

## **Early-Bird Application Period:**

- May 15 to August 31<sup>st</sup> for entry into the following academic year
- Interviews held in September to October
- Orientation held upon selection in individual or group format

## **Regular Application Period:**

- September 1st to October 31st
- Interviews held in November to December
- Orientation held upon selection in individual or group format

#### Late Application Period (if openings are still available):

November 1<sup>st</sup> and beyond. Interviews and orientation offered on an per need basis

## Dear Applicant:

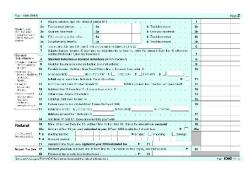
We are very excited that you are interested in participating in the TRIO Upward Bound West Garfield Program. All forms in this application are an essential part of the application process and must be completed accurately in order for you to be given fair consideration for admission into the program. Please be sure to answer ALL questions and sign where required. **Incomplete applications may not be considered.** The steps below outline the application process.

**STEP 1:** Complete the TRIO Upward Bound West Garfield Program Application in its entirety (five pages long).

**STEP 2:** Gather and attach the following documents:

Copy of student's Social Security Card
Copy of student's U.S. Birth Certificate, U.S. Passport, or Permanent Resident Card
Copy of most recent transcripts and state assessment scores (i.e. PSAT/SAT scores)
Copy of parent's most recent Tax Return ONLY pages one and two. Page one MUST be signed. An
example is shown in the pictures below:





**STEP 3:** Submit application with documents to an Upward Bound representative, or deliver to:

TRIO Upward Bound Colorado Mountain College Rifle Campus 3695 Airport Road Rifle, CO 81650

**STEP 4:** After application is screened for eligibility, an Upward Bound Staff Representative may contact both student and parent to review additional steps and potential interview.

**STEP 5:** All students are notified of acceptance, denial, or waitlisted status. The program accepts 15-20 students per year. Non-selected students are encouraged to re-apply the following year.

**STEP 6:** Students and parents must attend a program orientation (individual or group format).

Please do not hesitate to contact us for any questions or help with the application.

Main Office 970-625-6987 upwardbound@coloradomtn.edu

# **TRIO Upward Bound West Garfield Program Application**

All information is protected by the Privacy Act. No one may see the information unless they are employed by the program or are specifically authorized by the Department of Education to evaluate the project (20 USC 123 1a).

## STUDENT INFORMATION

PERSONAL INFORMATION			
Student Legal Full Name:(Last)	(First)	(Middle)	
Preferred Name/Nickname:	Gender:		
Birth Date:/	Social Security Number: _		
(Month) (Day) (Year)			
Physical Address:		(0: )	
(Street)	(City)	(State)	(Zip)
Mailing Address:(P.O. Box/Street)	(C:+-)	(Chaha)	(7:)
	(City)	(State)	
Student Email Address:	Student Co	ell Number: (	)
Ethnicity: Do you identify as Hispanic/Latino	?□Yes□No		
Are you a U.S. Citizen? ☐ Yes ☐ No  If No, are you a permanent resident o  If yes, please provide copy of F  What is your primary (native) language? ☐	Permanent Resident Card		
EDUCATION INFORMATION What Middle/High school do you currently	attend?		
What is your current grade: $\square$ 8 <sup>th</sup> $\square$ 9 <sup>th</sup> $\square$	10 <sup>th</sup> □ 11 <sup>th</sup> □ 12 <sup>th</sup> Current Cur	nulative G.P.A.: _	
Do you have limited English proficiency?	Yes □ No		
Have you been diagnosed with a learning d If Yes, please describe:			
GOALS AND INTERESTS  What are your education plans after high s  ☐ Vocational/Technical/Trade School ☐ Military ☐ Four Year College/University  ☐ U	Community College for Degree or OtherIndecided about my educational	plans after high so	
What are your career interests?			
Please mention names of any colleges/univ	versities you are considering: _		
Do you currently participate in another fed If yes, what is the name:			□ No

# STUDENT APPLICANT QUESTIONNAIRE

What type of assistance would you like to receive from the Up	war	d Bound program? (Check all that apply)
☐ Improving my grades (Tutoring)		Advice on what classes to take
☐ Career Information & Exploration		College campus tours
☐ Financial Aid/Scholarships/FAFSA		Community Service Activities
☐ College Applications		
☐ College Admission Test Preparation (SAT)		Other:
In what subjects do you feel tutoring could help you and why?		
What are your favorite school subject(s)?		
What are your least favorite subject(s)?		
List all school activities or clubs in which you participate:		
List all activities <u>outside of school</u> in which you participate:		
Do you have an after school job? ☐ Yes ☐ No If Yes, how man	y ho	ours do you work per week?
What do you do during your three-day weekend?		
Why do you want to become a participant of TRIO Upward Boo	und	? Why should we consider you to be
accepted to our program?		

# **STUDENT PERSONAL STORY**

Please submit a typed document with this application or share a Google Doc with <a href="mailto:trio.ub.westgarfield@gmail.com">trio.ub.westgarfield@gmail.com</a> answering the following prompt.

All students have a background or story that is central to their identity. Please share your story. (You may include information about your current and past achievements, activities, or challenges that you have overcome. You may also speak about your future goals and dreams). Statements that are proofread, with minimal grammatical errors, and typed are preferred.

# **FAMILY INFORMATION**

With whom does the	student live? ☐ Both	parents 🗖 Mother	r 🗖 Father 🗖 0	ther:	
What is the primary	language spoken at h	ome?□ English □	☐ Spanish ☐ Ot	her:	
s the student any of	the following? (Please	e mark all that app	ly)		
☐ In foster ca☐ Currently in	nt or ward of the court re or was previously ir n legal guardianship al circumstances that p	n foster care	☐ Both par☐ Homeles	acipated minor ents are deceased s or at risk of beir is time	
PARENT/GUARDI	AN 1 INFORMATI	<u>ON</u>			
Name: (First)	 (Middle)	(La	st)		
	ent: 🗆 Mother 🗅 Fatl	·			
_					
	r: ()				
mail:		Preferred c	ontact method	: □ Phone □ Ema	iil
hysical Address:					
	(Street)		(City)	(State)	(Zip)
Mailing Address:(P.	O. Box/Street)		(City)	(State)	(Zip)
Name:	IAN 2 INFORMATI  (Middle)	<b>ON</b> (La	st)		
Relationship to stude	ent: 🗖 Mother 🗖 Fatl	her 🛭 Other:			
Iome Phone Numbe	r: ()	Cell Phone	Number: (	_)	
Email:		Preferred c	ontact method	: □ Phone □ Ema	nil
Physical Address:					
Mailing Address:	(Street)		(City)	(State)	(Zip)
	O. Box/Street)		(City)	(State)	(Zip)

# **ELIGIBILITY INFORMATION**

This section is to be completed by parent/guardian(s) of the student applicant. The U.S. Department of Education requires TRIO Upward Bound West Garfield County Program to have educational and income information on file for a participant's parent/guardian(s) in order to determine first-generation and income eligibility. Parent/guardian's financial information must be completed in its entirety for consideration under federal income guidelines and for staff to establish eligibility. Financial information should be provided by the parent/guardian(s) with whom the student lives, or by the parent/guardian providing at least 50% of student's financial support. Please call the Upward Bound office if you have any questions or need assistance with this section.

<b>EDUCATIONAL INFORMATION</b>			
Did parent/Guardian 1 attend college	in the U.S.?		☐ Yes ☐ No
If Yes, did Parent/Guardian 1 ea	rn (graduate with) a bach	elor's degree from a college/univ	ersity in the U.S.?
Did parent/Guardian 2 attend college	in the U.S.?		☐ Yes ☐ No
If Yes, did Parent/Guardian 2 ea	rn(graduate with) a bach	elor's degree from a college/unive	ersity in the U.S.?  Yes  No
FINANCIAL INFORMATION Did you, the parent/legal guardian(s)  If No, please contact our Upward			□ Yes □ No
What is your total TAXABLE INCOME?	\$ (Line	e 10 for 1040)	
<ul> <li>Yourself (the parents/le</li> </ul>	e include: mission to Upward Bound egal guardians), and duals who receive more the ent's household receive	l, nan half of their support during th	e year from you.
☐ Food Stamps/SNAP☐ Free or reduced priced lunch		l Nutrition for Women, Infants, an ce for Needy Families (TANF)	d Children (WIC)
CERTIFICATION: Under penalty of perjury knowledge and all income is reported. I un misrepresentation or false statement will that all information shared with Upward I	nderstand that any inform render the applicant inelig	ation found to be incorrect and/or gible from the Upward Bound prog	any
Parent/Guardian 1 Printed Name	•	Parent/Guardian 2 Printed Na	ame
Parent/Guardian 1 Signature		Parent/Guardian 2 Signature	
Date		Date	<del></del>

## **AUTHORIZATION FOR RELEASE OF ACADEMIC INFORMATION**

In accordance with the Privacy Act of 1974 (Public Law No. 93-579, 5 U.S.C. 552A), you are hereby notified that the Department of Education is authorized to collect information to implement the Upward Bound program under Title IV of the Higher Education Act of 1965, as amended (Pub. Law 102-325, sec. 402C). In accordance with this authority, the Department receives and maintains personal information on participants in the Upward Bound programs. The principle purpose for collecting this information is to administer the program, including tracking and evaluating participant's academic progress. The information that is collected on student applications will be retained in the program files and may be released to other Department officials in the performance of official duties. The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §1232g, and the Colorado Open Records Act in Colorado are respectively federal and state laws providing for the review and disclosure of student educational records. The TRIO Upward Bound Program of West Garfield County will not permit access to or the release of personally identifiable information contained in student educational records to any party without the consent of the student and parent, except as authorized. This form will be used by TRIO Upward Bound West Garfield Program at Colorado Mountain College to access necessary academic records for current and/or prior participants of the program, during high school and six years after graduation, as directed by the U.S.

Department of Education.

Student Name:	_ Social Security Number:
Address, City, State, Zip:	

I/We, the legal parent/guardian(s) of above named student, hereby authorize and grant permission for TRIO Upward Bound West Garfield to access my/our student's permanent school records including, but not limited to:

- Transcripts
- Attendance records
- Schedule
- Individual Career Academic Plans (ICAP)
- If applicable, special education services eligibility and Individualized Educational Plans
- Results of ACT, SAT, PSAT, Accuplacer proficiency scores and standardized reading and mathematics tests
- Health data
- Extra-curricular activities
- Family background data
- Interview information from school administration, counselors, and teachers
- Student Information Systems Access (PowerSchool/ Infinite Campus, Naviance)
- Any relevant discipline records
- Any other relevant records and paperwork the program might request for the purpose of supporting my student in their college preparation success.

This permission is given with the understanding that such access will be done in order to enhance my/our student's educational opportunity and to assist TRIO Upward Bound West Garfield Program in evaluating student eligibility and student progress. Authorization remains in effect regardless of student's active involvement in Upward Bound at time of the records request. The U.S. Department of Education requires that TRIO Upward Bound West Garfield Program report on my student's academic progress through high school, graduation from college, and/or at least six years after student's expected high school graduation.

Student Signature	Date
Parent/Guardian Signature	Date