



PHILANDER SMITH COLLEGE
TRiO-Upward Bound Classic Program
TRiO-Upward Bound Math/Science Center
TRiO-Student Support Services Program
U.S. Department of Education & Office of Federal Programs

FOUNDED 1877

Upward Bound Classic Program
UBC - Interest Application

Please answer the following questions and return it to either the address listed above address (mail or fax) or to your school's counseling office. A staff member will contact you within a few days and provide you with more information about the Upward Bound Classic Program. Please note that applications are accepted for review regardless of race, color, national origin, religion, gender or disability.

Social Security #:		School ID#:		Name:	
Middle/High School: GPA:		Grade Level:		High School You Will Attend:	
Home Mailing Address: Street and Apt. No.					
City			State		Zip
Home Phone/Cell Number:			Alternative Phone/Cell Number:		
Date of Birth:		Age:		Sex: _____ Male _____ Female	
Citizenship Status: <input type="checkbox"/> United States Citizen or <input type="checkbox"/> Permanent Resident Alien Card Number:					
What college or university do you plan to attend? <input type="checkbox"/> Undecided			What do you plan as your college major? <input type="checkbox"/> Undecided		
What are you favorite school subjects?			What grades do you usually get?		
What kind of career or job would you like to have?			How did you find out about UBMS?		
What extracurricular activities are you involved?					

I am interested in learning more about the UBC Program at Philander Smith College in Little Rock, Arkansas. Please call me or send me a UBC Application Packet.

Student Signature

Date

Application Checklist

Dear applicant, Before submitting your application, please check to ensure that you have completed and provided the following items and return them to The Upward Bound Office:

- Page 1:** Completed Student Application (all appropriate boxes checked/blanks filled in)
- Page 2:** Signed with a copy of most recent Income Tax Form (IRS Form 1040, or supporting income documentation, etc.)
- OR**
- Verification of non-taxable income
- OR**
- Non-tax Filer's Statement (provided by our office upon request)
- Page 3:** (Self explanatory)
(English, Math, and Science)
- Counselor Appraisal
- Vice Principal Appraisal
- Copies of Student's Transcript, Test Scores, and Report Card
- Copy of Student's Birth Certificate
- Copy of Student's Social Security Card
- Student essay (to be written during student interview)
Essay may respond to either of the following questions:

“Why do you want to participate in the Upward Bound Program?” or
“What do you expect from Upward Bound?”

Please return the above items to the Upward Bound office at Philander Smith College. After verification of all information, the Upward Bound staff will contact you to arrange an interview. If you have any questions and or comments, please contact the Upward Bound office at (501) 370-5380 or main office (501) 375-9845.

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STUDENT APPLICATION FOR PARTICIPATION

Please print or type

Date: _____

Name: _____
Last First MI

Address _____
Street Apt. Number County

_____ City State Zip

Phone Number _____ Social Security No. _____

Date of Birth _____ Age _____ Sex: Male Female

U.S. Citizen? Yes No Place of Birth: _____
City State

If No, Resident Alien Number: _____

Race/Ethnic Origin: (Please Check One)

- American Indian/Alaskan Native Asian Black or African American Hispanic or Latino
 Native Hawaiian or Pacific Islander White or Caucasian Other (more than one race)

School: _____ Grade: _____ Current GPA: _____

Counselor _____

Family Information:

With whom do you live?

- Mother and Father Mother Only Father Only
 Parent and Step-Parent Guardian/Other (Specify) _____

Mother's Name: _____ Occupation: _____

Is Mother a college graduate? Yes No Work Phone: _____

If Yes, degree received: _____ College Attended: _____

Father's Name: _____ Occupation: _____

Is Father a college graduate? Yes No Work Phone: _____

If Yes, degree received: _____ College Attended: _____

Number in Family _____ Annual Family/Household Income\$ _____

Emergency Contact: _____ Phone: _____

Office Use Only:

Date Received _____	<input type="checkbox"/> Accepted	Date: _____
Date Reviewed _____	<input type="checkbox"/> Denied	Date: _____
Date Processed _____	<input type="checkbox"/> Wait List	Date: _____

(continued on next page)

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To be completed by parent or guardian

For Philander Smith College to determine eligibility for Upward Bound Classic participation, federal regulations require documentation on the applicant's family size (# of exemptions) and taxable income for the preceding calendar year- Thus, you are asked to complete ONE of the appropriate sections below:

SECTION 1 -- FOR PARENT(S) WHO FILE AN IRS 1040 OR 1040A FORM

In this section, please check ONLY ONE box

During the 2009 year, my family was supported by father and/or mother's employment. A signed copy of the IRS 1040 or 1040A Form is attached to this application. **Or,**

During the 2009 year, my family was supported by father and/or mother's employment. A 1040 or 1040A Form is **not** attached to this application but the required information is provided below:
From Form 1040,

Filing Status, lines 1 2 3 4 or 5 (Please check the correct status)

line 6d indicates, "**Total number of exemptions claimed.**"

line 40 indicates, "**Taxable Income.**"\$ _____

Or

From Form 1040A,

Filing Status, lines 1 2 3 4 or 5 (Please check the correct status)

line 6d indicates, "**Total number of exemptions claimed.**"

line 27 indicates, "**Taxable Income.**"\$ _____

SECTION 2 -- FOR PARENT(S) WHOSE INCOME WAS NOT LARGE ENOUGH TO REQUIRE FILING AN IRS 1040 OR 1040A FORM

Family Size: _____ Combined earnings for the year 2009: \$ _____

Sources of Income:

If any of the sources of income listed below apply to you, please complete the appropriate section

Social Security and/or Federal Benefits (Type of Benefit(s)): _____
(Copy of Letter from Social Security Administration Office is attached)

Welfare Benefits: (Case # _____)
(Copy of benefits letter from DHS is attached)

AFDC Benefits: (Case # _____)
(Copy of benefits letter from DHS is attached)

SECTION 3 -- (Check if Applicable) APPLICANT IS A FOSTER CHILD

(Agency: _____) Documentation attached

I hereby certify that the information and attached documents provided to support this application are true and correct, and that deliberate misrepresentation of the information may subject me to prosecution under applicable State and Federal Laws.

 Parent or Legal Guardian's Signature

 Date

APPLICANT QUESTIONNAIRE

(to be completed by applicant)

1. What do you plan to do after Graduation from high school?

2. List your school activities (such as: music group, clubs, student government organizations, sports, etc.).

3. What do you like to do in your spare time?

4. Who has influenced you the most and why?

5. Do you currently have a job? Yes No (if yes, where do you work and how many hours)?

6. List your hobbies and talents:

7. Describe what method(s), if any, you use to organize your time with regard to homework, studying, and taking tests.

8. Which are your best subjects in school and why?

9. Which subjects in school give you the most difficulty and why?

10. What is your career choice?

Information Sheet and Permission Form

(To be completed by applicant and parent)

The Philander Smith College Upward Classic Bound Program is a *federal assistance program* designed to promote post-secondary educational opportunities for selected individuals in Orange and Seminole counties. Thus, the work scope of Upward Bound is educational in nature.

As an educational program, Upward Classic Bound is required to determine the eligibility of all participants and maintain students' records. Under rules established by the Family Educational Rights and Privacy Act, you are hereby notified that the program's student records and the information contained therein are kept confidential and that you (and your parents, if you are younger than age 18) have the right to inspect the contents of your record. However, directory information concerning your participation in the program will be released to the public as a matter of course. This information is limited to name, grade level, schools attended, home address, date of birth, parent's name and address, phone number, and participation dates. Unless notified in writing to withhold any or all of such directory information, the Philander Smith College Upward Bound Classic Program will release it.

I **do / do not** (*circle one*) give the Philander Smith College Upward Bound Classic Program permission to publish in print, electronic, or video format, the likeness or image of my child. I release all claims against the College with respect to copyright ownership and publication, including any claim for compensation related to use of the materials.

Concerning the availability of services through the Upward Bound Classic Program, should the applicant/participant feel that his/her application was inappropriately reviewed, or equal treatment in services was not provided, he/she is encouraged to file a complaint with the Rollins College Upward Bound Program director, who will review the complaint and render a resolution. However, if the determination is not to your satisfaction, you may contact the Dean of the Hamilton Holt School at Rollins College for an appeal. Also, in matters concerning failure to comply with requirements of law, you have the right to file your complaint with the U.S. Department of Education.

In addition, individuals served by the Upward Bound Classic Program must comply with laws pertaining to the receipt of Federal Assistance. As an example, a participant who is convicted of a drug-related activity must notify the program after such conviction. Male participants who reach the age of 18 while participating in the program must register with the Selective Service.

ACKNOWLEDGEMENT:

By signing this page of the application, the applicant agrees to. And his/her parent or guardian permits, the receipt of program services.

Also, the undersigned indicate(s) understanding of the information provided and that the details on this application are true and correct.

Applicant's Signature

Date

Parent or Legal Guardian's Signature

Date

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TEACHER APPRAISAL

Student: _____

School: _____ Grade: _____

Teacher: _____ Subject: _____

Current grade in this class: A B C D F

Circle the number that best describes the student in each of the following areas:
(1 – Lowest; 5 – Highest)

1 2 3 4 5 Attitude toward School

1 2 3 4 5 Attitude toward homework, class work

1 2 3 4 5 Effort to learn and experience new things

1 2 3 4 5 Acceptance of constructive criticism

1 2 3 4 5 Willingness to ask for help when needed

1 2 3 4 5 Ability to grasp concepts

1 2 3 4 5 Motivation to improve academic skills

What are the student's weaknesses? _____

What are the student's strengths? _____

Additional comments: _____

Signature

Date

If you have any questions and or comments, please contact the Upward Bound office at (501) 370-5380 or main office (501) 375-9845.

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TEACHER APPRAISAL

Student: _____

School: _____ Grade: _____

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1 2 3 4 5 Attitude toward homework, class work

1 2 3 4 5 Effort to learn and experience new things

1 2 3 4 5 Acceptance of constructive criticism

1 2 3 4 5 Willingness to ask for help when needed

1 2 3 4 5 Ability to grasp concepts

1 2 3 4 5 Motivation to improve academic skills

What are the student's weaknesses? _____

What are the student's strengths? _____

Additional comments: _____

Signature

Date

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1 2 3 4 5 Attitude toward homework, class work

1 2 3 4 5 Effort to learn and experience new things

1 2 3 4 5 Acceptance of constructive criticism

1 2 3 4 5 Willingness to ask for help when needed

1 2 3 4 5 Ability to grasp concepts

1 2 3 4 5 Motivation to improve academic skills

What are the student's weaknesses? _____

What are the student's strengths? _____

Additional comments: _____

Signature

Date

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VICE-PRINCIPAL APPRAISAL

Student: _____

School: _____ Grade: _____

Vice Principal _____

Number of absences during the present school year: _____

Number of absences allowed before credit is denied: _____

Yes No Has the student been involved in any incidents requiring disciplinary action? If so, please explain:

Please provide comments that would aid the Program in making a decision regarding the admission of this student.

Signature

Date

If you have any questions and or comments, please contact the Upward Bound office at (501) 370-5380 or main office (501) 375-9845.

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COUNSELOR APPRAISAL

Student: _____

School: _____ Grade: _____

Counselor: _____ GPA: _____

- Yes No 1. Student exhibits a high level of interest in attending college.
- Yes No 2. Student attends special activities that provide information about college.
- Yes No 3. Student has developed and exhibits appropriate social skills.
- Yes No 4. Student sets educational goals.
- Yes No 5. Student is motivated to achieve academically.
- Yes No 6. Student displays adequate conflict resolution skills.
- Yes No 7. Student accepts responsibility

Please indicate the Student's learning style: Auditory Kinesthetic Visual
(Please Circle One)

Please provide comments that would aid the Program in making a decision regarding the admission of this student.

_____ Signature

_____ Date

If you have any questions and or comments, please contact the Upward Bound office at (501) 370-5380 or main office (501) 375-9845.