

Upward Bound Math/Science Center - Philander Smith College



WHAT IS UPWARD BOUND MATH-SCIENCE?

The Upward Bound Math-Science Center at Philander Smith College has a six week summer residential program for high school students. It is designed to strengthen capabilities and enhance basic academic skills through mentored group research, challenging classes, field trips, and recreation. This program is designed to help students obtain the motivation and confidence necessary for successful entry into college-level math or science curricula. Special emphasis is given to improving math and science skills.

WHY IS THIS PROGRAM SPECIAL?

Summer Mentored Research: Small groups of 6-8 students conduct research as a team, formulating the approach to a problem, carrying out experiments and calculations, reaching a conclusion, and writing a group technical report under the guidance of a teacher/mentor.

Academic Year Component: An individualized follow-on component is created for each student to complete during the school year following the six week summer session. Some of the items in this component are courses to be taken, academic and non-academic organizations to join and a continuance, in some form, of the summer research. Incentives to the student and his/her sponsoring teacher are provided.

WHO IS ELIGIBLE?

To be eligible for participation, an applicant must be an entering freshman in the fall of 2009, with a C+ or higher grade point average. He/she must also qualify as a member of a low-income family OR as a prospective first-generation college student (neither parent has a four year college degree). Must reside in Pulaski, Phillips, Lee, or Monroe Counties in Arkansas.



The **mission** of the Upward Bound Math/Science Center is to strengthen the math and science skills of participating students in a challenging, student-centered environment. The pursuit of excellence through quality educational support is guaranteed to all UBMS participants, regardless of race, religion, sex, national origin, or ethnic background.

WHAT IS PROVIDED?

- Room & Board
- Classroom Instruction
- Classroom Supplies
- Writing Materials
- Field Trip Expenses
- Weekly Stipend

The Upward Bound Math Science Center at Philander Smith College is 100% federally funded by the U. S. Department of Education.

CONTACT INFORMATION

Philander Smith College
Upward Bound Math/Science Center
900 West Daisy Bates Drive
Little Rock, AR 72202
Phone: 501.370-5380; Fax: 501.370.5396

Upward Bound Math & Science Center UBMS - 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 Math/Science Center. 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:	Grade Level:	GPA:	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 UBMS Center at Philander Smith College in Little Rock, Arkansas. Please call me or send me a UBMS Application Packet.

Signature

Date



APPLICATION FORM

2010-2011 Academic Session Dates are September 2010 to May 2011

Part A: STUDENT INFORMATION

(Please print or type)

Date: _____

1. Name: _____ (Last) _____ (First) _____ (Middle)

2. Mailing Address: Street or P.O. Box: _____ (Street or P.O. Box) _____ (Apt. Number)

City _____ State _____ Zip _____ County _____

3. Home Phone (_____) _____ E-mail address(please write very clearly) _____

4. Please Circle: Male Female 5. Date of Birth (mth/day/yr) _____ 6. Age _____

7. Social Security Number: _____ 8. Please indicate your ethnic background: (Hispanic, White, Asian, African-American, Native American, etc.) _____

9. Citizenship Status (check one): _____ U.S. Citizen _____ Permanent Resident _____ Other, explain: _____

(if you are not a US citizen, please attach a copy of your Resident Alien Card)

10. Are you currently enrolled in a UB or Talent Search Program? _____ YES _____ NO

11. If Yes, what is the name of the program and the college or university with which it is affiliated? _____

12. Name of your High School: _____

School Address: Street _____ City _____ State _____ Zip _____

13. Current Grade (circle) 9th 10th Grade Point Average(GPA) _____

14. Career(s) in which you are interested: _____

15. How interested are you in taking more math and science courses? Check One:
_____ Very Interested _____ Somewhat Interested _____ Not Interested

16. What are your education goals after you graduate from High School? (Check One)
_____ Four Years of college for a Degree _____ VoTech or trade School _____ Military
_____ More than four years of college _____ No further schooling
(Master's or PhD)

17. Indicate the classes you have taken in the following subject areas:

Office Use Only:

Date Received _____ Date: _____
Date Reviewed _____ Date: _____
Date Processed _____ Date: _____
[] Accepted
[] Denied
[] Wait List



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(continued on next page)

MATHEMATICS: ___ Algebra I ___ Geometry ___ Calculus
 ___ Algebra II ___ Pre-Calculus ___ Other _____

LIFE SCIENCES: ___ Biology ___ Anatomy & Physiology
 ___ Environmental Science ___ Other _____

PHYSICAL SCIENCES: ___ Physical Science ___ Chemistry ___ Adv/AP Chemistry
 ___ Physics ___ Adv/AP Physics ___ Other _____

LABORATORY COURSES: ___ Biology Lab ___ Chemistry Lab ___ Physics Lab

COMPUTERS: ___ Keyboarding ___ Programming ___ Computer Applications

18. What are your favorite three subjects in school? _____

19. How interested are you in a CAREER in a Math or Science field (i.e. engineer, chemist, math teacher, etc.)?
 ___ Very Interested ___ Somewhat Interested ___ Not Interested

20. Have you participated in a school Science Fair? ___ If Yes, what was your project? _____

21. If you plan to go to college, indicate your first THREE CHOICES for a college major, with '1' being your first choice, '2' your second choice, and '3' your third choice:

___ Agriculture ___ Astronomy ___ Biology ___ Chemistry ___ Computers
 ___ Engineering ___ Mathematics ___ Physics ___ Education ___ Other

22. Should you be selected to participate in our program, please indicate the math/science research groups you prefer with '1' being your first choice, '2' your second, and '3' your third. (*Note; You will meet in your research group 2½ hours each day, four days per week*). The following are probable offerings, but they may change, according to student interest and instructor availability:

___ Biology (water related) ___ Aerospace Engineering ___ Chemistry (laboratory)
 ___ Mathematics (science topics included) ___ Computers (programming and use)
 ___ Physics ___ Environmental Science ___ Medical Science

23. EXTRACURRICULAR ACTIVITIES: Please list any school clubs and organizations you have participated in, including accomplishments and offices/positions held: _____

24. Community service or Church clubs and activities: _____

25. Hobbies or other interests you would like us to know about: _____

Part B: STUDENT STATEMENTS

1. Please indicate why you wish to attend the Philander Smith College Math and Science Upward Bound Program:

2. Describe how you will work to get the most out of this program, if selected. Include relevant actions, attitudes and behaviors:

3. What are your goals for the years following your graduation from high school?

Part C: SPONSOR & TEACHER EVALUATION INFORMATION

1. You must have evaluations from three teachers. Two of them must be math or science teachers. (Evaluation forms-yellow and green-are attached to this application.) Please list below the three teachers who will be writing your evaluations:

Teacher name _____ Subject taught _____ Teacher name _____ Subject taught _____

Teacher name _____ Subject taught _____

2. You must have evaluations from both your vice-principal and your school counselor. (Evaluation forms – blue – are attached to this application.) Please list below the vice-principal and school counselor who will be writing your evaluations:

Vice Principal's Name _____

School Counselor's Name _____

NOTE: Please complete the remainder of the application, then read and sign the Student Commitment on page 6. Be sure to review the checklist to make sure that all necessary information is enclosed.

Part D: PARENT / GUARDIAN INFORMATION

(To be completed by parent or guardian)

1. With whom does student currently live? _____
Relationship to student _____

Father (or Male Guardian): (Check One)

_____ Father / Adopted Father _____ Guardian (specify) _____
_____ Stepfather _____ Other (specify) _____

Name _____ Age _____

Home Address _____
(Street or P.O. Box) (City) (State) (Zip)

Educational Attainment: (Please circle highest level attained):

Elementary: 1 2 3 4 5 6

Secondary: 7 8 9 10 11 12

Vocational Training 1yr 2yr (specify type) _____

College: 1 2 3 4 5

BS/BA completed? YES NO Master's Degree: YES NO PhD: YES NO

Home Phone: (____) _____ Work Phone: (____) _____

Place of Employment: _____ Occupation: _____

Number of years with present employer: _____

Mother (or Female Guardian): (Check One)

_____ Mother / Adopted Mother _____ Guardian (specify) _____
_____ Stepmother _____ Other (specify) _____

Name _____ Age _____

Home Address _____
(Street or P.O. Box) (City) (State) (Zip)

Educational Attainment: (Please circle highest level attained):

Elementary: 1 2 3 4 5 6

Secondary: 7 8 9 10 11 12

Vocational Training 1yr 2yr (specify type) _____

College: 1 2 3 4 5

BS/BA completed? YES NO Master's Degree: YES NO PhD: YES NO

Home Phone: (____) _____ Work Phone: (____) _____

Place of Employment: _____ Occupation: _____

Number of years with present employer: _____

Part E: FAMILY INFORMATION

List below all those who live with you and your parents(s), their age, and their relationship to you(i.e., sister, brother, aunt, grandparent, etc.). If additional space is needed, please attach an extra page)

Name:	Age:	Relationship:	Claimed as Dependent on 2009 Household Tax Return?	
			Circle YES or NO	
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No

Part F: INCOME INFORMATION

- Please indicate if your family receives any of the following:
 Social Security (SSI): YES NO ADC / Welfare: YES NO
 Food Stamps: YES NO Disability: YES NO
- Did you file a 2009 Income Tax Return? YES NO If YES, what was your total TAXABLE INCOME for 2009? _____ (PLEASE INCLUDE A COPY OF YOUR TAX RETURN ALONG WITH YOUR CHILD'S APPLICATION)
- If you have not yet filed your 2009 tax return, please indicate your 2008 TAXABLE INCOME _____. Please ESTIMATE your 2009 TAXABLE INCOME: _____.
- PARENT / GUARDIAN STATEMENT OF INCOME: I certify, to the best of my ability, that the income information given above is accurate.

Parent / Guardian Signature _____

Date _____

Part G: PARENT PERMISSION AND STATEMENT OF COMMITMENT

I, _____, give my permission for, _____ to participate in the Philander Smith College Upward Bound Math / Science Center during the Academic Year Session 2010-2011. I understand that he/she will receive academic support twice weekly during this time. I further understand that additional assignments, cultural activities, and other activities will take place, and my son/daughter will be expected to participate. I understand that the information contained in this application is for use by program staff only and will be kept confidential.

It is my desire that my son/daughter complete High School and attends College, and I understand that this program will aid him/her in achieving that goal. I will fully support the goals of the program and will help and encourage my son/daughter to attain that goal.

Signature of Applicant _____

Date _____

Signature of Parent / Guardian _____

Date _____

STUDENT COMMITMENT

NOTE TO STUDENT: Please read the following paragraph carefully before signing your name.

This is a supervised, academically rigorous, and intensive academic year program. You will be interacting with students from varying backgrounds but with similar ages, talents, and interests. The Academic Year Component will require you to accomplish some minimal work during the 2010-2011 school year (this will include sending college information, researching careers, taking recommended classes at your school and an assignment related to your upcoming research for the Summer 2011 Residential Component). Your signature below indicates that you are willing to complete the Academic Year 2010-2011 Component, register for, attend, actively participate for the full six weeks of the 2011 Summer Residential Component, and abide by the rules established to achieve the most from the time spent during the Academic Year.

Applicant's Signature: _____

Date: _____

APPLICATION CHECKLIST

HAVE YOU INCLUDED?

_____ **Completed Application**

_____ **Copy of Parent's 2009 Tax Return (If 2008 taxes have not been done, send 2008 Return now and 2009 Return as soon as possible).**

_____ **Copy of Student's Birth Certificate**

_____ **Copy of Student's Social Security Card**

_____ **THREE Teacher Evaluations (Can be mailed or faxed separately if teacher prefers)**

_____ **Vice Principal Recommendation Form**

_____ **Counselor Recommendation Form**

_____ **HIGH SCHOOL TRANSCRIPT: Have parents complete and sign attached TRANSCRIPT RELEASE, then take it to your School Counselor and ask him/her to send us:**

_____ **Entire academic transcript, AND**

_____ **Standardized Test Scores (SAT9, PLAN, PSAT, ACT, etc.)**

We will be conducting an on-going review of applications and will notify applicants of their status within 30 days of application submission. Best of luck on your application!

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?



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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

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 370-5380 or main office 375-9845.

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 370-5380 or main office 375-9845.

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 370-5380 or main office 375-9845.

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.

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.