



Upward Bound Program Application Academic Year 2016-2017

Please use this sheet to check the information you must submit and return the checklist with your application package. Make sure all forms are completed. All necessary signatures must be present, or your application cannot be processed. If you have any questions contact the Upward Bound office at (928) 777-3977, 3923, 3924.

Stuc	dent Name:	
High	h School:	
Grade Level:	GPA:	(Please provide copy of high school transcript)
		Student Application
		Proof of Residency - if not a U.S. Citizen
		Essays
		Confidential Parent/Guardian Information
		Parent/Guardian Consent Form
		Parent/Guardian 2015/2016 - 1040 Tax Form
		Tracking Consent Form
		Permanent contact information
		Application for Admission to Embry-Riddle Aeronautical University
		Recommendation Checks

Directions for return of Upward Bound Application

Please complete and return the application as soon as possible. Review of applications will begin immediately. You may:

- Scan your completed application and send it as an email attachment to nuttalll@erau.edu
- Return your completed application to the classroom of the teacher that hosted our Upward Bound Program presentation
- Return your completed application to our Academic Coordinator at the next on-campus lunch meeting
- Mail your completed application to:
 - Upward Bound Program
 Embry-Riddle Aeronautical University
 3700 Willow Creek Rd.
 Prescott, AZ 86301

If you have questions, contact us at 928 777-3924, 928 308-5422, or 928 777-3923,

DIRECTIONS:

Fill out each form completely by typing or printing neatly. Where specified, attach required documents. Remember to return all required documentation and signatures if required. Your student's social security number is a requirement of the federal government as all funding for the program comes from the federal Department of Education.

STEP 1: STUDENT FORMS

Forms are to be completed by the student applying for the Upward Bound program.

Page 3: Personal Information

If you are not a U.S. citizen, include proof of residency. Please include a photo for our records.

Page 4: Student Information

Sign and date the Student Statement of Commitment.

Page 5: Essays and Extra-Curricular Activities

Complete the three separate essays to the best of your ability – be creative and candid. Your essays will help us get to know you better. While you should show consideration for grammar and spelling, content is most important.

STEP 2: PARENT FORMS

Forms are to be completed by the student's parent or guardian.

Page 4-7: Parent Guardian Information, Parental Statement of Commitment, Parent Income Verification, and Parent/Guardian Participation and Medical Consent Form. This section consists of two pages that your parents/guardians must complete and sign. Please review to ensure that all the appropriate blanks are signed and dated and a copy of the 2015, 2016 - 1040 tax form (or equivalent as stated on page 5) is included. Complete the Parent/Guardian Consent Form on page seven.

Page 10: Student Release Authorization

This section must be signed by both the parent/guardian AND the student.

STEP 3: RECOMMENDATION CHECKS

Pages 13-16: Please ask your teachers (guidance counselor) to complete recommendation check and return the signed form to you in a sealed envelope. You may return the recommendation checks with your rest of your application.

Upward Bound Application Academic Year 2016-2017

[STUDENT FORM]

Name:			Student
Last	First	MI	Photo
Nickname/Name you prefer:			Here
Mailing Address:	Cr. r DO D		
	Street or PO Box	X	
City	State	Zip	
Home Telephone: ()	Date of Birth:	_//	
Student Cell Phone ()	Parent Cell Pl	<u>hone</u> ()	
Charles Carried Carried Name	Alian Daniston H		
Student Social Security Number or			 tance into program)
Sex: Age:			
Place of Birth:		Citizen: yes	no
(If no, please attach proof of perma	nent residency; the application	cation cannot be p	rocessed without it)
If you have access to the Internet, p	lease provide us with an E	E-mail address:	
•	•		
School Information		GPA	
High School:	Current Gi	rade (circle one): 8	9 10 11
School Mailing Address:			
<u> </u>		Street or PO Box	
City	S	State	Zip
School Phone: ()	School Coun	selor Name:	
School FAX: ()			
Ethnic Background			
Native American	Hispanic/Latino Car	ucasian	
African American Asi	an/Pacific Islander	Other	
Native Americans Only:	Canan	o Niversham	
Tribe or Nation:	Censu	s mumber.	
Language Background		•	
Language first spoken:			
Language spoken by you	at home:		

[STUDENT FORM]				
Favorite Subjects/Classes:				
Are you interested in attend	ing college and, if so	o, what career field interests you?		
Other Program Partic	ipation			
Are you currently or have y	ou ever been a partic	cipant of (check all that apply):		
Upward Bound	Γalent Search	Math and Science Center		
Student Statement of C	Commitment			
•	1 0	lents from the time they are admitted participate in the program for that p	1 0	
2 Unword Dound is a	voon noved and choose	and you willing to commit to noutic		110
Upward Bound is a :Bi-Monthly meeting		are you willing to commit to partice during lunchtime?	yes	no
• 1 or 2 weekend day	or evening field trips	s/ activities each semester?	yes	no
• 6-week summer resi	dential session at En	mbry-Riddle?	yes	no
	gn a code of conduct	and academic integrity as part of ye	•	
Upward Bound program?			yes	no
Student Signature:		Date:		

[STUDENT FORM]

Essay Questions – Students complete the essay questions in your own words.

Type your answers to the <u>ALL of the following</u> essay questions on a separate sheet of paper, put your name in the upper right corner and attach your completed essays to your application. Essays must be at least one paragraph and you should answer the question as thoroughly as possible.

Essay #1: We expect our students to take an active role in their own success. Based on what you know about the Upward Bound program, how do you think the program will benefit you and how do you plan to use the program to achieve your goals?

Essay #2: What do you believe to be the four most important values/morals for a high school student to have? Why are they important?

Extracurricular Activities, Honors and Accomplishments

Note: If you require additional space or wish to list your activities, clubs, sports, and leadership positions on a separate sheet of paper and attach, please do so.

Activities, Clubs, and Sports (list years and leadership positions held, if any):

Example: Key Club (9-11, Secretary – 10 th grade)	
Community Activities and Volunteer Work, Musical	Instruments, Hobbies:
Honors, Awards, and Achievements:	

[PARENT FORM]

Confidential Parent/Guardian Information

To be completed only by the parent(s) or guardian(s) with whom the student lives full or part-time. This information will be kept strictly confidential and will only be viewed by ERAU Upward Bound staff to determine the student's eligibility.

Last		First		1
Home Addr	ess:			
	Street			<u></u>
	City		State	Zip
Work Phon	e ()	Home Ph	one () _	
Cell Phone	()			
	Education (circ	cle highest year comp	leted)	
E	lementary	High School	College	
0 1 2 3	4 5 6 7 8	9 10 11 12	13 14 15	16 17+
Have you co	mpleted a four-year B	achelor's Degree?	Yes	No
	s: 			
Name of Fatho	er / Stepfather / Guard	lian (circle):		
Name of Fathe		lian (circle):		MI
Last	er / Stepfather / Guard			
Last	er / Stepfather / Guard	First	State	
Last Home Address	er / Stepfather / Guard	First	State	Zip
Last Home Address Work Phone (er / Stepfather / Guard	First Sirst	State	Zip
Last Home Address Work Phone (er / Stepfather / Guard S: Street City	First Sirst	State hone () _	Zip
Last Home Address Work Phone (er / Stepfather / Guard S: Street City Logical Discourse Control of the control o	First Home Pl	State hone () _	Zip
Last Home Address Work Phone (_	er / Stepfather / Guard S: Street City Logical Discourse Control of the control o	First Home Pl Cle highest year comp	State hone () _ leted)	Zip

[PARENT FORM]

Parental Statement of Commitment

Are you willing to allow your student to attend;		
Bi-monthly meetings at his/her high school during lunchtime?	yes _	no
1-2 weekend day or evening field trips/activities per semester?	yes _	no
 A 6-week residential summer session at Embry-Riddle where 		
Students will be living in residence halls, attending classes,		
Evening study sessions and activities?	yes	no
Do you plan on your student attending college right after high school?	yes	no
• Are there plans for your student to change high schools?	yes _	no
 Do you foresee any barriers to your student's participation in the program? 	yes _	no
If yes, please comment on these barriers:		
How many <u>dependent</u> children do you have? Please give their names and ages below. <u>Please begin with the applicant</u> :		
Please give their names and ages below. <u>Please begin with the applicant</u> :		
1		
2		
3		
4		
5		
6		
If more than six, please list on a separate page.		
Do you have any other relatives living in your home?No		
If yes, how many? Relationship to you?		

Parent/Legal Guardian Information

Student Name:		
With whom does the student live? Check	k one and provide information below:	· · · · · · · · · · · · · · · · · · ·
☐ Both Parents ☐ Parent and Step-pare	ent 🗆 Legal Guardian 🗖 Grandparent 🗖 One Pa	rent Foster Parent Other
		*
Parent/ Guardian 1	Relation to	student
	City	
Cell phone Highest Grade Finished:	email	
\square High school diploma \square some college	☐ Associate's degree ☐ Bachelor's degree ☐ N	Master's degree ☐ Doctorate
Parent / Guardian 2 Name:		
Parent / Guardian Address:		
(If different from applicant) City/Town_	State	ZIP
Cell phone	email	
Highest Grade Finished:	4	
	☐ Associate's degree ☐ Bachelor's degree ☐	☐ Master's degree☐ Doctorate
	e following income affidavit using your 20 3 I be less than your net income). All inforn t 1040 during the interview process.	
Taxable Income \$	This amount is after all allowable deductions a	nd must match exactly as the amount on tax form)
Taxable income is found on: Line 43 – Fo	orm 1040; Line 27 – Form 1040A; Line 6 – Form 104	40EZ.
☐ Documentation provided (date of	f interview)Program Manager Signatur	e
Is the applicant a Free or Reduced Lu	ınch Recipient? Yes □ No □	
Number of people currently residing	in the student's home, including the student:	- 10
*		
Certification: I hereby certify that best of my knowledge, and that a	t all of the information provided on this ap Il income is reported.	pplication is true and correct to the
Parent /Legal Guardian Printed N	lame:	Market Commence
Parent/Legal Guardian Signature	:	Date

[PARENT FORM]

Important Please Note: You must attach a signed copy of your 2015 or 2016 income very provide a social services statement, handwritten and signed state. We must have your income verification to process your student's of your return that specifies "Taxable Income" usually found on	ment or other proof of 2015 or 2016 income). s application. Please include the first two pages
Your signature certifies, to the best of your knowledge, that the i verification is correct.	nformation provided on your income
Signature of Parent/Guardian	Date



Upward Bound Programs <u>STUDENT RELEASE AUTHORIZATION</u> 2016 - 2026

By signing this form:

Please print or type

- I agree to participate in the college tracking/retention program of the Upward Bound Program, a department of Embry-Riddle Aeronautical University.
- I understand that college tracking/retention of Upward Bound Program participants is required by the U.S. Department of Education to determine the effectiveness of Upward Bound Program.
- I authorize the Upward Bound Program at Embry-Riddle Aeronautical University to have access to and receive copies of my academic records through my secondary and postsecondary education. In addition, I grant permission for my grades to be released to the high school of my attendance so that the high school may award credits earned in the Upward Bound academic year and summer sessions.

Trease print or type		
Student Last Name (Print)	First	M.I.
Social Security Number	_	Date of Birth
	_	
Student Signature		Date
Parent/Guardian Name (Print)	_	Date
Parent/Guardian Signature (If student under 18 years)	_	Date
(11 Student under 10 years)		

Our grant requires that we track each student's progress in high school and through college

Upward Bound Program Permanent Contact Form

Our office needs to be able to follow your academic and career progress throughout high school and college. Over the next few years, we expect that you may move several times. Please provide us with information on 3 people who will always know exactly where you live so he/she may serve as a liaison for us. You can choose to tell us about people that live out-of-state, but will know your whereabouts as you continue through college.

Contact #1 Name:			
Relationship to student:			
Street Address:			
City:	State:	Zip Code:	
Home Phone:	Worl	R Phone:	
Email:			
======================================			
Relationship to student:			
Street Address:			
City:	State:	Zip Code:	
Home Phone:	Worl	Representation of the Phone:	
Email:			
======================================			
Relationship to student:			
Street Address:			
City:	State:	Zip Code:	
Home Phone:	Worl	Representation of the Phone:	
Email:			

UPWARD BOUND PROGRAM

 $Application\ for\ Admission\ -\ {\it EMBRY-RIDDLE}\ {\it AERONAUTICAL\ UNIVERSITY}$

Student Information

Name			
Last	First Middl	e	Social Security Number
Phone number, including area code	()		Sex Male Female
Mailing address			
Mailing address Street			
Street			
City	State	Zip	
Permanent address			
Street			
City	State	Zip	
City	State	2.16	
Date of Birth	<u></u>		
Month/Day/Year			
Admission Information:			
A and it and Charles No. 12 and			
Applicant Status: Non-degree Entering year: Entering se	emester: "Summe	r ('''	
Entering yearEntering so	Summe	<u> </u>	
Degree Program: College Escrow	Degree code:	NDCE	
Education:			
High school			
Name			Graduation, month and year
City	State		School code (if known)
Family Information:			
ranning information.			
Name of parent or guardian			
-	Last		First
Relationship to you			
Di 1 ' 1 1'			W 1 ()
Phone number, including area code	– Home ()		Work ()
I certify that all of the above information	ation is correct to the b	est of my know	rledge.
Student Signature		Doto	
Student Signature		Date_	
Parent Signature		Date_	

Recommendation

Dear Recommender

Please fill out the recommendation form below. The more you can tell us about a student, the better we will be able to evaluate their application. Your recommendation may address the student's attitude, maturity level, motivation, behavior in class and school, family situation, goals, and their need for our program. Please be candid. Thank you for your assessment!

Academic Qualities	
Academic ability	Consideration of others
☐ Outstanding	☐ Unusually thoughtful
\square Good	☐ Usually considerate
☐ Average	☐ Rarely considerate
☐ Below average	□ Selfish
Academic achievement	Social adjustments with
☐ Outstanding	peers
\square Good	☐ Healthy relationships
☐ Average	☐ Occasional problems
☐ Below average	☐ Frequent problems
Effort and drive	☐ Relates poorly
☐ Outstanding	Integrity
\square Good	☐ Very trustworthy
□ Sporadic	☐ Usually trustworthy
□ Occasional	□ Occasionally
Personality Traits	trustworthy
Seeks help when needed	☐ Untrustworthy
\square Always	Conduct
□ Sometimes	☐ Well-behaved
□ Never	☐ Usually obeys rules
Maturity	□ Occasionally
☐ Very mature	☐ Misbehaves
☐ Appropriate	☐ Frequently misbehave
☐ Somewhat immature	
□ Very immature	

Is there anything else the school should know as this	s student is considered for admission?	
Do you have any additional information that may be	e helpful in our evaluation of this student?	
Comments:		
Sigunature	Date	

Recommendation

Dear Recommender

Please fill out the recommendation form below. The more you can tell us about a student, the better we will be able to evaluate their application. Your recommendation may address the student's attitude, maturity level, motivation, behavior in class and school, family situation, goals, and their need for our program. Please be candid. Thank you for your assessment!

Academic Qualities		
Academic ability	Consideration of others	
☐ Outstanding	\square Unusually thoughtful	
\square Good	☐ Usually considerate	
□ Average	☐ Rarely considerate	
☐ Below average	\square Selfish	
Academic achievement	Social adjustments with	
☐ Outstanding	peers	
\square Good	☐ Healthy relationships	
□ Average	☐ Occasional problems	
☐ Below average	☐ Frequent problems	
Effort and drive	☐ Relates poorly	
☐ Outstanding	Integrity	
\square Good	☐ Very trustworthy	
☐ Sporadic	\square Usually trustworthy	
☐ Occasional	☐ Occasionally trustworthy	
Personality Traits	☐ Untrustworthy	
Seeks help when needed	Conduct	
\square Always	☐ Well-behaved	
□ Sometimes	\square Usually obeys rules	
□ Never	□ Occasionally	
Maturity	☐ Misbehaves	
☐ Very mature	\square Frequently misbehave	
☐ Appropriate		
☐ Somewhat immature		
☐ Very immature		

Is there anything else the school should know as this student is con	sidered for admission?
Do you have any additional information that may be helpful in our	evaluation of this student?
Comments:	
Sigunature	_Date