



Upward Bound Application for Admission



Dear Applicant:

The Upward Bound and Upward Bound Math & Science programs at Central Carolina Community College are federally-funded educational program that provides **FREE** services to high school students in preparation for college. The Upward Bound programs at CCCC serve 120 Harnett County high school students and 60 Lee County high school students. **Students may apply to the program in 8th, 9th, or 10th, but must be in 9th grade or higher to enroll in the program.**

If you are interested in participating in the Upward Bound Programs, please follow the instructions below in order to complete the application process. Please note that your application cannot be processed without completing all of the requested information.

1. **Complete the entire application by supplying all required information as outlined.**
2. **Complete the Family Income section and submit a copy of 1040, 1040A, or 1040EZ Income Tax Return for parent(s)/legal guardian(s) for the previous year.**
3. **Include a typed, one-page personal statement about your interests, ambitions, and goals after high school.**
4. **Sign the Release of Information Authorization.**
5. **Sign the Parent/Guardian Certification indicating that your application is complete and accurate.**
6. **Submit one (1) Counselor Recommendation Form from a guidance counselor including a recent report card, transcript, and copy of test scores.**
7. **Submit one (1) Teacher Recommendation Form (*If you are interested in Science, Technology, Engineering, or Math, please have a Math or Science teacher complete this form*).**
8. **Return the completed application to: Upward Bound, College Access Programs/TRiO, Central Carolina Community College, 1105 Kelly Drive, Sanford, NC 27330.**

Once your application has been received, you will be notified by mail of your application status. If you have any questions, please contact our office at (919) 718-7576. Thank you for your interest in Upward Bound!

Sincerely,

A handwritten signature in black ink that reads 'Rebeccah Lystash'.

Rebeccah Lystash
Director of TRiO Upward Bound Programs

PRIVACY ACT STATEMENT:

The personal information that you give to the Upward Bound Program is sent to the federal government (Department of Education). The information is protected by the Privacy Act. No one may see the information unless they work with or for the Upward Bound Program or are specifically authorized to see the information. The information is necessary to determine if you are eligible to participate in the program and helps the government to measure your success. The Department of Education has the authority to gather information to help make Upward Bound a better program (20 USC 1231a).

**Upward Bound
Application for Admission**

I. Student Information

Name _____
Last First Middle

Address 1 _____ Gender: Male Female
Number & Street or P.O. Box

Address 2: _____ Date of Birth: _____
City, State, Zip Code

Parent(s) or Guardian Cell Phone Number(s) Student Cell Phone Number

Parent(s) or Guardian Email Address(es) Student Email Address *(please, no school email addresses)*

Race/Ethnicity (check all that apply): American Indian/Alaskan Native; Asian;
 Black or African American; Hispanic; Native Hawaiian or Pacific Islander; White

Native language other than English? Yes No

If yes, what language:

Are you currently enrolled in ESL or ELL courses? Yes No

Disconnected Youth (check all that apply): In Foster care; Homeless; Involved in Juvenile Justice System;
 Neither enrolled in school nor employed

II. Academic Profile

Current Year in School: 8 9 10

High School: _____ Guidance Counselor: _____

List any extra-curricular activities in which you participated in 8th, 9th, or 10th grade (sports, clubs, church, employment, etc.):

List any honors or awards you received in 8th, 9th, or 10th grade:

Are you interested in a career in Science, Technology, Engineering, or Math? YES NO

III. Parent/Legal Guardian Information

I live with: Both Mother and Father Mother Only Father Only
 Mother and Stepfather Father and Stepmother
 Foster Parents Other Guardian _____

****Please provide information below only for parent(s) or guardian(s) currently in your household.****

1. Father's Name _____ (or
step) Last First Middle
Highest Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12 College Completed 1 2 3 4 5+
Name of College, if applicable _____
Degree(s) Earned (circle all that apply): Associate's Bachelor's Master's Doctoral
Occupation _____ Work Phone _____
Employer _____
Name Complete Address

2. Mother's Name _____ (or
(or step) Last First Middle
Highest Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12 College Completed 1 2 3 4 5+
Name of College, if applicable _____
Degree(s) Earned (circle all that apply): Associate's Bachelor's Master's Doctoral
Occupation _____ Work Phone _____
Employer _____
Name Complete Address

IV. Household Information

How many people, including you, are currently living in your household? _____

Please list below the names of ALL persons living in your household, ages, and their relationship to you.

Name	Age	Relationship

V. Eligibility

The Upward Bound program is supported by a federal grant which asks individual programs to verify the eligibility of all applicants. Therefore, students applying to the program are required to answer the following questions regarding U.S. status and family income.

U.S. Status

- Are you a citizen of the United States? YES NO
 Are you a permanent resident of the United States? YES NO
 Are you in the United States for other than a temporary purpose? YES NO

Please provide evidence from the Immigration and Naturalization Service of your intent to become a permanent resident.

Student's Social Security # _____ - _____ - _____ Birthplace _____
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<i>If applicable:</i> Permanent Resident # _____ Date Issued _____ Immigrant Visa # _____ Date Issued _____

Family Income

- Check only one box below. Tax returns include the IRS Form 1040, 1040A, 1040EZ, a tax return from Puerto Rico or a foreign income tax return for the most recent calendar year. If parent(s)/legal guardian(s) did not keep a copy of their tax return(s), please request a copy from the tax preparer or order a FREE transcript from the Internal Revenue Service by calling 1-800-908-9946 or visiting <http://www.irs.gov/individuals/> and selecting "Tools".
 - Check here if you are attaching a signed copy of your parent(s)/legal guardian(s)' 2017 tax return.
 - Check here if a signed tax return will be submitted to Upward Bound Programs by _____ (date).
 - Check here if your parent(s)/legal guardian(s) did not file and are not required to file an income tax return for the most recent calendar year. *Please complete #2 below.*
- If your parent(s)/legal guardian(s) did not file and are not required to file an income tax return for the most recent calendar year, list below your parent(s)/legal guardian(s) untaxed income as well as employer(s) and any income they received in last year.

Source of Untaxed Income	Amount
a. Child Support	
b. Worker's Compensation	
c. Untaxed Pension	
d. Supplemental Security Income (SSI)	
e. Other: _____	

Source/Employer	Income



Upward Bound
College Access Programs/TRiO
Central Carolina Community College
1105 Kelly Drive
Sanford, NC 27330
Phone: (919) 718-7576
Fax: (919) 777-7796



Release of Information Authorization

Student's Name _____

Birth date _____

High School _____

I hereby authorize the release of my child's high school academic records, including test data, report cards, transcripts, and access to PowerSchool or Parent Portal, to the Upward Bound Programs at Central Carolina Community College. This access will be granted through his/her high school graduation, including if he/she changes high schools, with the understanding that this information will be used solely for the purpose of assessment, academic planning, and/or reporting.

Name of Parent/Guardian (please print)

Signature of Parent/Guardian

Date

PARENT/GUARDIAN CERTIFICATION

I declare that the information provided in this application is complete and accurate to the best of my knowledge.

I understand that, if selected, my child will be expected to regularly attend all Upward Bound program activities including Saturday sessions and summer activities and participate fully throughout high school until he/she graduates and enrolls in a college or university.

Name of Parent/Legal Guardian (please print)

Signature of Parent/Legal Guardian

Date

All information on this application will be held in strict confidence. This information is necessary to ensure that the applicant meets the criteria for admission to Upward Bound as established by the U.S. Department of Education.

UPWARD BOUND PROGRAM COUNSELOR RECOMMENDATION FORM

Please complete this form and return to applicant in a sealed envelope marked “Counselor Recommendation” with **standardized test scores, a recent report card, and a high school transcript**. Thank you for your assistance in evaluating this applicant for the Upward Bound Program!

STUDENT’S NAME _____ **SCHOOL** _____

Academic Skills/Performance

Very Low 1	Low 2	Medium 3	High 4	Very High 5

Academic Potential for College Success

Very Low 1	Low 2	Medium 3	High 4	Very High 5

Motivation to Complete High School and Attend College

Very Low 1	Low 2	Medium 3	High 4	Very High 5

Need for Academic Support and Career Development

Very Low 1	Low 2	Medium 3	High 4	Very High 5

Interest Level in Math and Science

Very Low 1	Low 2	Medium 3	High 4	Very High 5

Comments or additional information about students’ need for Upward Bound:

Signature _____

Date _____

UPWARD BOUND PROGRAM TEACHER RECOMMENDATION FORM

STUDENT: If you are interested in Science, Technology, Engineering, or Math, please have a Math or Science teacher complete this form

TEACHER: Please complete this form and return to applicant in a sealed envelope marked "Teacher Recommendation." Thank you for your assistance in evaluating this applicant for the Upward Bound Program!

STUDENT'S NAME _____ **COURSE** _____

Please rate the applicant on the following factors, from 1 (low) to 5 (high):

- | | | | | | |
|---------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| 1. Academic Skills | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |
| 2. Motivation to learn | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |
| 3. Self-discipline | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |
| 4. Timely assignment completion | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |
| 5. Preparation for tests | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |
| 6. Performance on tests | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |
| 7. Punctuality | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |
| 8. Overall attendance | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |

Please provide specific comments regarding the applicant's academic strengths:

Please provide specific comments regarding the areas in which the applicant needs to improve:

In specific detail, please comment on the student's demonstrated need for the academic support provided by the Upward Bound program in preparation for college:

Signature _____

Date _____