



TRIO Upward Bound at USM Application

The following questions will help TRIO Upward Bound at USM learn more about you and your interest in the program.

Student Information

Name: _____ Gender: _____
First M. Last

Address: _____
Street/PO Box City/Town State Zip

School: Biddeford High School Massabesic High School Poland Regional High School
 Sanford High School Westbrook High School Other _____

Current Grade: _____ School Counselor's Name: _____

Home Phone: (____) _____ Student Cell Phone: (____) _____ Student Email: _____

Student alternate email: _____ Date of Birth: __/__/____

Pronouns: He/Him/His She/Her/Hers They/Them/Theirs Other: _____

Would you like us to share your contact information with the University of Southern Maine? Yes No

Student's Citizenship/Residency

Status: U.S. Citizen or Naturalized Citizen Permanent Resident Other _____

Student's Ethnic & Racial Identification

Does the student identify as Hispanic/Latino/a/x? Yes No

With which race(s) does the student most closely identify?

- America Indian/Alaskan Native Asian Black or African American
 White Native Hawaiian or Other Pacific Islander

ESOL

Is the student currently enrolled in an English for Speakers of Other Languages program? Yes No

NOTE TO APPLICANTS

Upward Bound appreciates completed applications by the due date. We understand that gathering all the information requested may be difficult for some students. Therefore, Upward Bound will review all applications regardless of their level of completion. However, due to the small number of openings available each year, not all interested and eligible students will be selected to be interviewed or to participate.

If you have questions about how to complete this form or your unique situation, including language interpretation or translation of TRIO Upward Bound at USM information, please contact our office at 1-800-800-4876 ext. 5203.

Office Use Only

<input type="checkbox"/> Citizenship	<input type="checkbox"/> Parent Edu.	<input type="checkbox"/> Financial Doc.	Signatures:	<input type="checkbox"/> Parent/Guardian	<input type="checkbox"/> Student
<input type="checkbox"/> School Report Release	<input type="checkbox"/> Report Card	<input type="checkbox"/> Transcript	<input type="checkbox"/> PSAT/SAT	<input type="checkbox"/> Guard. Doc.	
<input type="checkbox"/> FG	<input type="checkbox"/> LI	<input type="checkbox"/> HR	<input type="checkbox"/> APR #22:	<input type="checkbox"/> App. in Database	

Notes:

Program Eligibility

Students who participate in Upward Bound at USM are required to meet **at least one** of the following federal eligibility criteria. These criteria are:

1. FIRST GENERATION = The biological/adoptive parent(s) with whom the student lives have not completed a bachelor's degree (4 yr. college) **AND/OR**
2. FINANCIAL = Last year's taxable income is under the limit set for the size of their family unit
3. ACADEMIC READINESS = Readiness as determined by previous courses, grades, and test scores.

Student Information

Are you a ward of the state? Yes No

Are you an emancipated minor? Yes No

Parent/Guardian Information (for parent/guardian(s) with whom the student lives)

Parent/Guardian #1 Name: _____ Phone: (____) _____

Email: _____ Occupation: _____

Relationship to student (check one):

- Biological/Adoptive parent Step-parent Legal Guardian
 Foster Parent Other: _____

Highest level completed in school (check one):

- Grade K-8 High school graduate Associate's degree (2 yr. college degree)
 Bachelor's degree (4 yr. college degree) Other: _____

Parent/Guardian #2 Name: _____ Phone: (____) _____

Email: _____ Occupation: _____

Relationship to student (check one):

- Biological/Adoptive parent Step-parent Legal Guardian
 Foster Parent Other: _____

Highest level completed in school (check one):

- Grade K-8 High school graduate Associate's degree (2 yr. college degree)
 Bachelor's degree (4 yr. college degree) Other: _____

Additional Information

Is either parent/guardian a veteran or currently serving the U.S. Military? Yes No

Does the student have a parent who resides outside of the home? Yes No

If yes, please tell us about your family situation:

Family Size & Taxable Income

Please provide the information below so we can determine if you meet the income eligibility guidelines set by the U.S. Department of Education. If you are a ward of the state or an independent student (emancipated minor) please contact our office.

Students are financially eligible if your family’s taxable income is not more than the amount listed in the chart.

To determine this, please tell us the size of your family unit.
 SIZE OF FAMILY UNIT is defined as the total number of persons in your family who are related to you by blood, marriage, or adoption and are dependent on the head of the household for support.
 A step-parent or step-child is considered related by marriage.

TRIO Programs Income Levels	
Size of family unit	Last year’s taxable income
1	\$22,590
2	\$30,660
3	\$38,730
4	\$46,800
5	\$54,870
6	\$62,940
7	\$71,010
8	\$79,080

What is your FAMILY UNIT SIZE? _____

What was your TAXABLE INCOME reported on last year’s federal tax return(s)?

IRS FORM 1040 LINE 15 \$ _____

I was NOT required to file a federal tax return last year and, therefore, have \$0 taxable income.

Additional information on income eligibility guidelines: www2.ed.gov/about/offices/list/ope/trio/incomelevels.html

STATEMENT OF CONSENT

I/We the undersigned, am/are the parent/legal guardian(s) of the student who is applying to participate in the Upward Bound at USM Program. I/We have read and understand the information provided concerning the program and have discussed the purpose of the program with my/our child. I/We are willing to let them apply for enrollment and agree to their participation in all activities (academic and recreational) deemed suitable by the staff.

I/We attest that all the information reported on Upward Bound at USM’s application, including **CITIZENSHIP/RESIDENCY**, **FIRST GENERATION**, and **FINANCIAL ELIGIBILITY**, is to the best of my/our knowledge and belief, true, correct and complete.

Release of School Information:

I/We the undersigned, the parent(s) or legal guardians of the student applicant, grant permission to Upward Bound at USM to access to all school records including academic transcripts, standardized test scores, special education records, health information, eligibility for free and reduced price school meals, and electronic databases such as Infinite Campus and Naviance. In addition, I/We grant permission for the school, appropriate community agencies, and Upward Bound to share information which will contribute to my/our child’s success.

Parent/Guardian(s)

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

I hereby attest to the fact that all of the information in this application is true and accurate.

Student Signature: _____ **Date:** _____

The following questions are optional. Please feel free to write as much or as little as you would like. Any answers you provide will help us get to know you and your family better.”

Student Questionnaire

1. What are your goals for continuing your education after high school? Please select all that apply.

- | | | |
|--|--|--|
| <input type="checkbox"/> Technical College | <input type="checkbox"/> Two Year College or University | <input type="checkbox"/> Military |
| <input type="checkbox"/> Certificate Program | <input type="checkbox"/> Four Year College or University | <input type="checkbox"/> Graduate School |
| <input type="checkbox"/> Undecided | <input type="checkbox"/> Other: _____ | |

2. Why should you be chosen to participate in the Upward Bound program at USM?

3. What areas of academic study and/or careers would you like to learn more about?

Parent/Guardian Questionnaire

1. Upward Bound helps students graduate from high school and prepare for success in college. What types of support, including academic, personal, and/or social, do you think your student would benefit from the most?

2. How do you feel about your student's participation in Upward Bound?

3. After sophomore year your student will be away from home during the five-week summer academy (typically students return home for weekends). How will your student and other family members handle this extended absence from home? Please explain:

4. If there are any special personal or family circumstances of which we should be aware, please explain:

The University of Southern Maine is an EEO/AA employer, and does not discriminate on the grounds of race, color, religion, sex, sexual orientation, transgender status, gender expression, national origin, citizenship status, age, disability, genetic information or veteran's status in employment, education, and all other programs and activities. The following person has been designated to handle inquiries regarding non-discrimination policies: Director of Equal Opportunity, 101 North Stevens Hall, University of Maine, Orono, ME 04469-5754, 207.581.1226, TTY 711 (Maine Relay System).



TRIO Upward Bound at USM Application

RELEASE OF SCHOOL INFORMATION

Upward Bound at USM works collaboratively with high school personnel as we assist students in graduating from high school and preparing for success in college. The school will be asked to provide academic information during the Upward Bound at USM selection process as well as after the student is accepted.

Permission to access school records

I/We the undersigned, the parent(s) or legal guardians of _____, grant permission to Upward Bound at USM to **access to all school records** including academic transcripts, standardized test scores, special education records, health information, eligibility for free and reduced price school meals, and electronic databases such as *Infinite Campus* and *Naviance*. In addition, I grant permission for the school, appropriate community agencies, and Upward Bound to share information which will contribute to my child's success.

Electronic gradebook

(Such as Infinite campus, Empower, Synergy, etc.)

Username: _____ Password: _____

Parent/Guardian(s)

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

I grant permission for the school to supply the information as noted above to Upward Bound at USM.

Student Signature: _____ Date: _____

The guidance department will retain a copy of this release.