WSU TRIO Upward Bound

Programs Application

CUB
UBMS
UBWP

This is the program application for admission to TRIO Upward Bound Programs at Wichita State University.

- Communication Upward Bound (CUB)
- Upward Bound Math-Science (UBMS)
- Upward Bound Wichita Prep (UBWP)

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WICHITA STATE UNIVERSITY

PROGRAMS OVERVIEW & CONTACT INFO

Communication Upward Bound (CUB)

- Main Office: (316) 978-6731
- www.wichita.edu/cub
- Location: Elliott Hall, Basement Level, Room 015

Wichita State University's TRIO Communication Upward Bound (CUB) is a college prep organization that serves high school students enrolled in the Wichita Public School district. The Communication field is one of the most exciting and diverse fields and connects to multiple career paths including: Business, Medicine, TV/Film, Education, Engineering, Social Media Marketing, Event Management, Public Relations/Publicity, Corporate Communications and Human Resources among others. Students gain hands on experience in public speaking, graphic design, TV/film production, ad copy writing, and much more. Program includes year-round tutoring and academic support as well as summer residential program and college campus tours.

Upward Bound Math-Science (UBMS)

- Main Office: (316) 978-3316
- ubms@wichita.edu
- www.wichita.edu/ubms
- Location: Brennan Hall I, First Floor, Room 114

TRIO Upward Bound Math-Science (UBMS) works to elevate students who have an interest in and talent for science, technology, engineering, and math through intensive instruction, hands-on experiences, and opportunities to learn from professional mathematicians, engineers, and scientists in a variety of fields. UBMS has both an academic and a 6-week summer component. Ideal applicants have an interest in the STEM career fields.

Upward Bound Wichita Prep (UBWP)

- Main Office: (316) 978-3019
- www.wichita.edu/ubwp
- Location: Brennan Hall I, Second Floor, Room 205

TRIO Upward Bound Wichita Prep is committed to help students navigate, plan, and reach your education and college graduation goals. Regardless of your career field or major, UBWP is here to help you explore your interests, introduce you to new possibilities, and empower you to achieve your dreams. Yes, our focus is education, in addition we support in all aspects of your high school career. We have a program structure that encompasses activities in the academic year and during the summer. Finally, we make it a priority to take time for you and your family to meet with us individually. TRIO Upward Bound Wichita Prep is here for your success!

WSU TRIO UPWARD BOUND PROGRAMS APPLICATION

Please note: Some of the personal information you give to the program is sent the the U.S. Department of Education and is protected by the Privacy Act. No one may see the information unless they work with or for the UB project or are specifically authorized to see the information. For questions about the use of this information, please contact us at the numbers listed on the Program Overview page.

Select the TRIO Upward Bound Program you are applying for:

- ☐ Communication Upward Bound
- ☐ Upward Bound Math-Science
- ☐ Upward Bound Wichita Prep

STUDENT INFORMATION *Student*

Student First Name:_____Last Name:_____ MI:_____
Email Address:_____
Gender: ____M ____F Other: _____
Social Security Number:_____ Date of Birth*: _____ (MM/DD/YYYY)
Phone Number 1:_____ Phone Number 2: _____
Primary Home Street Address:_____
City:_____State:_____Zip Code:_____

Secondary Home Street Address:_____ (if applicable)
City:_____State:_____Zip Code: _____
Citizenship: ____United States Citizen ____Permanent Resident Other (please explain) _____

STUDENT RACE/ETHINICITY *Student*

- ☐ Asian
- ☐ Black/African American
- ☐ Hispanic/Latino
- ☐ Native American/First Nation
- ☐ Native Hawaiian/Other Pacific Islander
- ☐ White/Caucasian
- ☐ Other: _____

HIGH SCHOOL ENROLLMENT INFORMATION *Student*

Student ID: _____

Current Grade: _____ Current School: _____

Current Class Schedule (if you are applying during an academic term):

1._____ 2. _____ 3. _____ 4. _____

5._____ 6. _____ 7. _____ 8. _____

*****Please provide a copy of the most recent student transcript.**

ACADEMIC INFORMATION *Student*

This survey contains a number of statements about student needs: Please give your honest opinion of how the Upward Bound program can meet your needs:

	No Need	Some Need	High Need
To learn how to complete and turn in my homework on time	☐ 1	☐ 2	☐ 3
To get better grades in school	☐ 1	☐ 2	☐ 3
To take tests better with less anxiety	☐ 1	☐ 2	☐ 3
To organize my time, activities, and responsibilities better	☐ 1	☐ 2	☐ 3
To learn about high school graduation requirements	☐ 1	☐ 2	☐ 3
To learn about college admission requirements	☐ 1	☐ 2	☐ 3
Listen better in class and ask more questions	☐ 1	☐ 2	☐ 3
To relate to and communicate better with my teachers	☐ 1	☐ 2	☐ 3
To identify, set and evaluate goals for the future	☐ 1	☐ 2	☐ 3
To explore a variety of career opportunities	☐ 1	☐ 2	☐ 3
To learn more about job applications, resumes, and interviews	☐ 1	☐ 2	☐ 3
To learn more about the postsecondary admissions process	☐ 1	☐ 2	☐ 3
To prepare for exams like the ACT and SAT	☐ 1	☐ 2	☐ 3
To visit more colleges	☐ 1	☐ 2	☐ 3
To learn about college costs and how to pay for college	☐ 1	☐ 2	☐ 3

PARENT/GUARDIAN INFORMATION *Parent/Guardian*

Parent/Guardian 1

First Name: _____ Last Name: _____ Relationship: _____

Phone 1: _____ Phone 2: _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Parent/Guardian 2

First Name: _____ Last Name: _____ Relationship: _____

Phone 1: _____ Phone 2: _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Parent/Guardian 3

First Name: _____ Last Name: _____ Relationship: _____

Phone 1: _____ Phone 2: _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Parent/Guardian 4

First Name: _____ Last Name: _____ Relationship: _____

Phone 1: _____ Phone 2: _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

With whom does the student live with full-time? Please indicate names and relationships below.

First Name: _____ Last Name: _____ Relationship: _____

First Name: _____ Last Name: _____ Relationship: _____

Any other language than English spoken at home: _____

Emergency Contact Person (other than parent/guardian listed above)

First Name: _____ Last Name: _____ Relationship: _____

Phone 1: _____ Phone 2: _____

FIRST-GENERATION ELIGIBILITY INFORMATION *Parent/Guardian*

Has either parent/guardian graduated from college with a 4-year degree? ☐ Yes ☐ No
If yes, which parent/guardian? _____
Degree(s) earned: _____

FINANCIAL ELIGIBILITY INFORMATION *Parent/Guardian*

Wichita State University TRIO Upward Bound Programs and the United States Department of Education require all applicants to submit with their application a signed copy of their parent/guardian's most recent income tax return.

1) Did you file an income tax return last year? ☐ Yes ☐ No
2) Gross family income (before taxes and other withholdings) for last year $_____
3) Adjusted gross income $ _____
4) Which of the following was the source of the above information? (check all that apply)
   - ☐ Parent/Guardian 1's employment Occupation: _____
   - ☐ Parent/Guardian 2's employment Occupation: _____
   - ☐ Social Security Amount per/month: _____
   - ☐ Other Income: _____
   - ☐ Are you eligible for veteran's benefits? ☐ Yes ☐ No If so, what kind? _____
5) How many dependents were claimed on your income tax form last year? _____
   Total number of persons living in household (including self): _____
6) If Student is a foster child, list the child's monthly personal use income: _____

*****If you did not file income taxes, please provide a written statement of income.**

CERTIFICATION

I certify that all of the information provided on this application and in the Financial Eligibility section of the application is true and complete to the best of my knowledge. I understand that the Wichita State University TRIO Upward Bound Programs may ask for proof of any information provided on this application, and I agree to provide the necessary documents. I understand that if I refuse to provide proof of any information given, the applicant may be denied acceptance into the Program.

Signature of Parent/Guardian: _____ Date: _____

AUTHORIZATION FOR RELEASE OF RECORDS *Parent/Guardian and Student*

The U.S. Department of Education requires that TRIO Upward Bound Programs at Wichita State University follow and monitor the academic progress of students participating in the programs by tracking secondary school graduation, college matriculation, persistence, and subsequent college graduation, etc.

In consideration of (Student Name) _____ being accepted for participation in the:

Select the TRIO Upward Bound Program you are applying for:

☐ Communication Upward Bound ☐ Upward Bound Math-Science ☐ Upward Bound Wichita Prep

Wichita State University, I/we hereby specifically authorize all secondary and post-secondary institutions attended by (Student Name) _____ to release the following information to representatives of the TRIO Upward Bound Programs at Wichita State University:

Secondary Schools:

- Achievement, aptitude proficiency, state assessments, and interest scores (ACT, SAT, PSAT, WPS Basic Skills tests and scores and all other tests taken since 8th grade)
- Official transcripts
- Official copies of report cards
- Activities chart or lists of extra or co-curricular activities
- Family background data
- Health related information during the summer residential program
- Individualized Education Plan and/or 504 Plans

Post-Secondary Schools:

- Enrollment verification information
- Transcripts or transcript information documenting academic progress
- Degree attainment information
- Interview information from school administrators

As a result of signing this form, the student applicant and their parent/guardian certify that they are providing this authorization with full understanding and voluntarily in consideration of the student applicant's participation in the TRIO Upward Bound Programs at Wichita State University and to permit the Program to fulfill requirements imposed by the U.S. Department of Education, the funding agency.

Student Signature	Student Name Printed	Date
Parent or Guardian Signature	Parent or Guardian Name Printed	Date

NOTE: Information obtained by this form shall not be transferred to any other person or agency than that listed above without the consent of the person whose signature appears here on.

SCHOOLS: Current school may retain copy of this form for student file.

PARENTAL CONSENT TO PARTICIPATE *Parent/Guardian*

I hereby grant permission for the student, _____, to participate in the Wichita State University TRIO Upward Bound Program.

Select the TRIO Upward Bound Program you are applying for:

- ☐ Communication Upward Bound
- ☐ Upward Bound Math-Science
- ☐ Upward Bound Wichita Prep

I understand the program may include field trips, overnight trips, tutorial sessions, living in the residential halls, and/or physical activities. I also understand and acknowledge that transportation for field trips for academic enrichment sessions, conferences, overnight trips, and other activities will be provided by bus, van, train, airplane, or private car. In consideration of the activities provided to my child, I hereby release the WSU TRIO Upward Bound Programs and their employees from any claims of damages, injury, or death arising out of my child's participation. I accept responsibility for my child's conduct while participating in the Program, and I hereby release the Program from damages, injury, or death resulting from my child not following and adhering to the rules and policies of the Program.

Parent/Guardian Signature:_____ **Date:** _____

ELECTRONIC MEDIA RELEASE *Parent/Guardian*

I understand that I may be photographed or recorded during my participation in Upward Bound (the "Event") and that the photos, videos, and/or audio recordings may be used for marketing and promotional purposes and/or other digital media. I consent to the use of the Student's name, likeness, and voice, and waive any right to inspect or approve any images or recordings which may be used in connection with my participation in the Event. I understand that I will not be compensated for any such use. I hereby grant **Wichita State University** and/or parties designated by Wichita State University (including clients, purchasers, agencies, and periodicals, or other printed matter and their editors), without limitation, the right to reproduce, use, exhibit, display, broadcast, distribute, and create derivative works from, **photographs, audio recordings, and/or video images** of the Student.

I am the parent or legal guardian of the student, _____

I hereby approve the foregoing consent to Wichita State University use subject to terms mentioned above. I affirm that I have the legal right to issue consent.

Parent/Guardian Signature	Parent/Guardian Name Printed	Date

INSURANCE PROVIDER *Parent/Guardian*

Name of insurance company: _____

Address of insurance company: _____

City: _____ State: _____ Zip Code: _____

Name of policy holder: _____

Relationship of student to policy holder: _____

Street address of policy holder: _____

City: _____ State: _____ Zip Code: _____

Policy holder individual ID number: _____ Policy holder group number: _____

- ☐ **I/We have attached a copy of the student's insurance card**
- ☐ **Not Applicable**

*****Please provide a copy of the insurance card for our records.**

PERSONAL STATEMENT *Student*

Student's Name _____

Please write a one-page essay "Why I Want to be in Upward Bound" or "Why is Education Important to Me".

Please print neatly to ensure that we can read your essay, or type and attach your essay to this sheet. If you attach your essay, please be sure to include your name and school at the top of the attached essay.

NOMINATION/RECOMMENDATION FORM *School Official*

****To be completed by a principal, teacher, or counselor****

Student's Name: _____

School: _____ Age: _____ Grade: _____

Counselor: _____ GPA: _____ Class Rank: _____ (ex: 8/32)

Nominator: _____ Position: _____ Phone: _____

Nominator Email: _____

1. Why is this student a good candidate to participate in the TRIO Upward Bound Program?

2. Does the student participate in any of the following services at school? If yes, please mark the appropriate box.
   - ☐ AVID
   - ☐ ESOL Program
   - ☐ Kansas Kids @ GEAR UP
   - ☐ Wichita GEAR UP
   - ☐ WSU TRIO Talent Search
   - ☐ Tutoring
   - ☐ Other_____

3. What type of education does the student plan to pursue after high school?
   - ☐ Armed Forces
   - ☐ Four-year college
   - ☐ Two-year college
   - ☐ Vocational-Technical
   - ☐ None

4. Does the student have a good attendance record? ☐ Yes ☐ No
5. Rate the student's attitude towards education:

   Poor - ___1 ___2 ___3 ___4 ___5 ___6 ___7 ___8 ___9 ___10 - *Excellent*

6. Rate the student's classroom behavior:

   Poor - ___1 ___2 ___3 ___4 ___5 ___6 ___7 ___8 ___9 ___10 – *Excellent*

7. Without regard to student's grades, does the student have a good class work ethic? ☐ Yes ☐ No

8. What are the student's career interests?

9. What does this student need the most in order to achieve their academic goals?

Additional Comments:

Signature of Nominator: _____ **Date:** _____