

# PERSONAL INFORMATION

Last Name:  F    Address:  F    State:  Zip Code:  Ho    Student Cell #:  Age:  Bi    Are you a citizen of the United State? Yes  No  St    If, "No": Permanent Resident I.D. Number:  St    Current/Expected High School:  Coachella Valley    Circle Present Grade:  8  9  10  11    School ID #:	City: me Phone #: rthdate: Female: Male: cudent's Email:			
ETHNIC BACKGROUD: (Yo				
African-American  Asian/Pacific Islander  White (Other than Hispanic/Latino)    Hispanic/Latino  Native-American/Alaskan Native  Other:				
FAMILY INFORMATION				
Guardian 1    Name:    Relationship:    Relationship:    Occupation:    Occupation:    Cell Number:    Email:    Highest Education Level Attained (please check one):    Elementary (K-8)  High School (9-12)    Associate Degree  Bachelor's Degree or Beyond    Have you completed a four year Bachelor's Degree in    the U.S.? Yes No    Language Spoken at home?	Guardian 2    Name:			
Name of Sibling(s):	Age:  Do they live with you?  Are they in Upward Bound?			



# **INCOME DOCUMENTATION INFORMATION:** (To be completed by guardians)

The personal information you give on the Upward Bound application is protected by the Federal Privacy Act. The information is required by the U.S. Department of Education to determine eligibility. Additionally, the Department of Education has authority (20USC 1231a) to gather information on all Upward Bound participants to monitor their progress. No one may see any information unless they work with or for the program or are specifically authorized to see the information. Individuals who violate the privacy act shall be subject to a fine of not more than \$1,000 or imprisonment not more than one year, or both, and shall be removed from employment (Title 28, Section 1905 USC).

Total number of dependents (please include parents and students):

*Please check the <u>annual taxable</u> income range appropriate for your family.* (Note: this information is required by the federal government to ensure we are providing services within our guidelines. Line 43-Form 1040, Line 27- From 1040 A). You are required to provide a current copy of your annual tax form.

copy of your unnuar tax form:				
<\$18,735 or less	<b>Non-taxable Income:</b> If you (parent/guardian) received non-taxable income from the previous year, please check the source(s) below:			
\$18,735-\$25,365	previous year, please check the source(s) below.			
\$25,365-\$31,995	Unemployment BenefitsAFDCVA BenefitsVA Benefits			
\$31,995-\$38,625	Retirement Benefits Food Stamps Disability Benefits   Social Security Benefits Other Sources (specify):			
\$38,625-\$45,255				
\$45,255-\$51,885	Is the applicant a ward of the court? Yes No If yes, provide Caseworker's Name:			
\$51,885-\$58,515	Caseworker's Phone:			
\$58,515-\$65,145	<b>Do you participate in your school's free or reduced lunch program?</b> <u>Yes</u> <u>No</u>			
>\$65,145	Please Check:  Free Lunch:  Reduced Lunch:  Full Price Lunch:			
(U.S. Office of Postsecondary Education, 01/11/2019)				

# **RECORD AUTHORIZATION**

#### I DO HEREBY AUTHORIZE THE FOLLOWING:

- THE SCHOOL DISTRICT TO RELEASE THE TRANSCRIPTS OF MY CHILD TO THE COLLEGE OF THE DESERT UPWARD BOUND PROGRAM.
- GRANT PERMISSION FOR MY CHILD TO BE PHOTOGRAPHED AND/OR RECORDED BY THE COLLEGE OF THE DESERT UPWARD BOUND PROGRAM AND THAT COD/UB SHALL OWN ALL RIGHTS OF EVERY KIND IN SAID PHOTOGRAPHY AND/OR RECORDING.
- GRANT PERMISSION FOR COLLEGE OF THE DESERT UPWARD BOUND TO OBTAIN AND TRACK MY CHILD'S POST-SECONDARY ENROLLMENT INFORMATION.

STUDENT'S SIGNATURE:	DATE:	
PARENT'S/GUARDIAN'S SIGNATURE:	DATE:	

**Certification**: We certify that all information reported on this application is true, complete and accurate to the best of our knowledge. College of the Desert does not discriminate on the basis of race, creed, national origin, or handicap in administration policies, scholarship and loan programs, or in any of its other programs.



## SELF RECOMMENDATION

Spend some time thinking about this section. We are interested in discovering how you feel about yourself as well as looking at your ability to write. Please answer the following questions.

• What are your educational and career goals?

• Describe any honors, awards, or recognition that you have received (school, community, church, athletics).

• List your hobbies, talents, special interests, and the sports activities you are involved in.

• Why are you interested in becoming a participant in Upward Bound?



• Are there other programs/activities you are currently participating or plan to participate in? Ex. AVID, ROTC, Marching Band.

• How will you coordinate your extracurricular activities with your Upward Bound participation? (Remember UB is a Saturday school during the academic year and attendance is mandatory).

On a **SEPARATE** sheet of paper <u>hand write</u> an essay of **AT LEAST ONE FULL PAGE OR MORE** on the following subject. Attach completed essay to the application.

(Less than one <u>full</u> page will not be accepted).

Tell us about a challenging or difficult situation, what your reaction was, how you overcame it and how it has changed you.



## **CLASS SCHEDULE**

Write your present class schedule below. Include all sports, clubs and/or extracurricular activities that you participate in during the school year.

Period Number	Class	Teacher

# WORK OR VOLUNTEER EXPERIENCE

Please list any job or volunteer work (including summer employment) you have held during the past two years.

Position or Type of Work	Employer	When did you work	How many hrs/week