APPLICATION FORM

Talent Search (TS) at Iowa State University (ISU) is a free educational program designed to assist 7th through 12th grade participants and high school graduates in their preparation for enrollment or re-enrollment into any college of their choice.

Programming is offered year-round at the middle and high schools in Fort Dodge, Hampton-Dumont, Marshalltown, Perry, and South Tama. Participants receive services until enrolled in postsecondary education. Educational workshops and advising sessions focus on topics such as: academic advising/tutoring, ACT/SAT, career exploration, financial aid, life skills and study skills. Additionally, students receive assistance with relevant applications. Participants also visit a variety of college campuses throughout their involvement.

Please complete all pages of this application, sign it and mail to the TS office at the above address. All information on this application is confidential.

Thank you for your interest in the TRIO Talent Search Program.

Talent Search at Iowa State University is a federally-funded TRIO program.
STUDENT INFORMATION & NEEDS ASSESSMENT
To be completed by the student

Student ___________________________ Last __________ First __________ M ______

Address ______________________________

City ___________________________ Zip __________

Family Home Phone: ________________________________

Student Cell Phone: ________________________________

Student E-mail: ________________________________

Student Birth date: ________ / ________ / ________

Month / Day / Year

Female _________ Male _________

Ethnic Origin: (check all that apply)

_____ American Indian or Alaskan Native

_____ Asian

_____ Black or African American

_____ Hispanic or Latino

_____ Native Hawaiian or Other Pacific Islander

_____ White

Student is: _____ A ward of the court

_____ In foster care

_____ Living with parent/guardian

_____ Homeless

Please list any family members in grades 7-12:

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<tr>
<th>Name</th>
<th>Grade Level</th>
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School: ________________________________

Current Grade Level: ________ GPA: ________

Expected Graduation Year: ________

After high school do you plan to go to a:

_____ 4 year college/university

_____ Community college

_____ Career training program

_____ Military program

_____ Undecided

_____ Other (please specify) __________________

Needs Assessment (check all services you need):

_____ Academic Advising

_____ Career Exploration

_____ College Campus Visits

_____ Cultural Enrichment

_____ Financial Aid Advisement

_____ Financial and Economic Literacy

_____ Life Skills

_____ Pre-College Advisement

_____ Student Leadership

_____ Study Skills

_____ Tutoring

_____ Other (please specify) __________________

Student Sign Here _____________________________________________________________
FAMILY INFORMATION & INCOME
To be completed by the parent(s)/or guardian

Student Social Security Number or A-number:
________________________ - _______________ - ______________

Student is:
_____ Citizen of U.S.
_____ In process of becoming a permanent resident
_____ Permanent resident of U.S.
_____ None of the above

Parent 1: __________________________________________

Check one:
______ Parent (biological/adoptive)   ______Guardian

Job: __________________________________________

Did you graduate from a 4-year college?  Yes  No
If so, name of 4-year college: ______________________

Does the student live with you? Yes _____  No _____

Cell Phone for Parent 1: ______________________
Email for Parent 1: ______________________

Parent 2: __________________________________________

Check one:
______ Parent (biological/adoptive)   ______Guardian

Job: __________________________________________

Did you graduate from a 4-year college?  Yes  No
If so, name of 4-year college: ______________________

Does the student live with you? Yes _____  No _____

Cell Phone for Parent 2: ______________________
Email for Parent 2: ______________________

Note: To determine eligibility for college application fee deferments, ACT/SAT registration fee waivers, and other services based on income, we need the following information from the most recent tax return of the person(s) with whom this student regularly resides.

Income Tax Filing Status (check one):
_____ Single
_____ Head of Household
_____ Married filing jointly
_____ Married filing separately
_____ Widow(er) with dependent child(ren)

Tax Form Used (please circle one)
1040-EZ   1040-A   1040

Declaration of Family Income
a) Adjusted gross income $_______________________

b) If you itemized deductions, enter the itemized amount here: $_______________________

c) Number of dependents including parents:___________

d) If you did not file income taxes last year, please list your monthly income: $_______________________

Please check if your family receives any of the following benefits or services:
_____ Foster Care
_____ Free Lunches
_____ Reduced Lunches
_____ Low-Income Housing
_____ Public Welfare (ADC)

Any unusual financial or family circumstances:
__________________________________________

For office use only:    IE  FG  B
By signing this application:

1. You hereby give your permission to the Iowa State University’s Talent Search Program to request and receive confidential information pertaining to any and all financial assistance awarded to you or your child (if under 18).

2. You also hereby release and discharge:
   a. Any agency and/or person(s) from any liability for divulging such information to Iowa State University’s Talent Search Program (ISU TS).
   b. Iowa State University’s Talent Search program and staff from any liability for divulging such information to any admission and financial aid offices at degree-granting institutions (i.e., colleges, universities, community colleges, and vocational/technical schools) and other agencies which aid Talent Search participants.

3. You give permission to your child’s school district to release his/her school schedules, records and grades periodically to:

   Iowa State University
   TRIO Talent Search Program
   2249 Friley Hall
   212 Beyer Court
   Ames, Iowa 50012-1058

4. You agree to cooperate with the ISU TS staff in follow-up activities, including the release of school records. These follow-up activities will continue throughout middle school, high school and college.

5. You hereby consent to the use of photo, video, or other media recordings taken of your child by ISU or those acting on its behalf for the benefit of ISU, including any lawful purpose whatsoever, including but not limited to use in any ISU publication or on ISU websites, without payment or any other consideration. You hereby waive any right that you may have to inspect and/or approve the finished product or the copy that may be used, or the use to which it may be applied. You do this with full knowledge and consent and waive all claims for damages.
   ___ Yes, I give consent.
   ___ No, I do not give consent.

I STATE THAT THIS APPLICATION HAS BEEN FILLED OUT COMPLETELY AND CORRECTLY TO THE BEST OF MY KNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE CONDITIONS SET FORTH IN THE CONFIDENTIAL RELEASE FORM AND THE RELEASE AND CONSENT FORM, THAT I AGREE TO ALL CONDITIONS SET FORTH HEREIN, AND THAT I SIGN THIS VOLUNTARILY.

Parent/Guardian’s Full name PRINTED: __________________________________________

Parent/Guardian’s Signature: ___________________________________________________ Date: __________________

I will follow all rules and guidelines established for the ISU TS program. I realize that if I fail to follow the above-mentioned rules and any others, it may result in my not attending Talent Search activities.

Student’s Signature: ___________________________________________________ Date: __________________