

Iowa State University  
**Upward Bound Program**

---

Return completed applications to the counseling office at your school.

**STATEMENT OF APPLICATION**

I hereby apply for admission to the Iowa State University Upward Bound program. I understand Upward Bound is an educational program designed to help students develop the knowledge, skills, and attitudes necessary for the successful pursuit of education beyond high school. I understand that, if admitted, I will be expected to participate fully in the academic year program and the residential summer program. Academic year and summer programs activities may include: field trips, cultural events, classes in a variety of areas, tutoring, conferences, social events, and physical activities. Failure to adhere to program expectations and to participate at acceptable levels may result in suspension or dismissal from the program.

I am aware that additional benefits to my participation in the Upward Bound include:

- Room, board, transportation, end of summer session cultural trip and a \$15 per week stipend during the summer residential program
- \$10-15 per session stipend, transportation, field trips, college visits, cultural events, tutoring as required during the academic year

I understand and agree to abide by the following policy regarding the use of tobacco, alcohol, and/or illegal drugs: it is a violation of Upward Bound policy for any participant to use tobacco, alcohol, and/or illegal drugs regardless of the age of the participant. Students violating this policy will be subject to suspension or dismissal from the program.

**RELEASE OF RECORDS & CONFIDENTIAL INFORMATION**

In compliance with the Family Educational Rights and Privacy Act (FERPA) and the Confidential Records Section of the Iowa Open Records Act, Iowa Code Section 22.7, the Iowa State University Upward Bound Program seeks written permission of the student whose education records are involved. Student educational records will be accessed by the Iowa State University Upward Bound Program for the purpose of tracking and reporting students' high school progress and college records of enrollment status, to university administrators and the US Department of Education. The only people who are allowed access to this information are employees of Upward Bound, employees of the DOE or your student's school officials.

Upward Bound participation requires your permission to request, receive and release any information from your child's school district and institution (s) of higher education, deemed necessary for use in the Upward Bound program. This request includes, but is not limited to: grades/transcripts, IEP's, class schedules, test scores, financial aid documentation.

By agreeing to this you are releasing and discharging

- A) Any agency and/or person (s) from any liability for divulging such information to Iowa State University's Upward Bound program.
- B) Iowa State University's Upward Bound Program and staff from any liability for divulging such information to the DOE, to any institution of higher learning and other agencies which provide assistance to Upward Bound's participants.

### **FIELD TRIP PERMISSION**

During the course of the Upward Bound Academic Year and Summer Residential Program participants will have an opportunity to attend field trips locally and out-of-state. In order for students to participate we must have parental permission to participate in ALL fieldtrips and release of liability indicating Iowa State University, its employees or agents will not be liable for any accidents, injuries, damages or losses resulting in the student's participation in any/all field trips.

### **PHOTO/VIDEO IMAGE RELEASE**

For purposes of recruitment, advertising, newsletters or any other program related productions, Upward Bound requests release of student's photo (s) of them or taken by them, video (s), written statement (s). If a student does not wish to have his/her likeness reproduced in any manner, the program will refrain from doing so upon notification from the student.

### **SIGNATURES OF STUDENT & PARENT/GUARDIAN**

The signatures of student and parent/guardian below indicate that you have read, understood and agree to all of the stated provisions for participation in the Iowa State University Upward Bound. The terms of agreement apply from the time the student applies for the program through the time the student terminates participation. Signatures also indicate that the student has full permission to partake in Iowa State University Upward Bound program activities and you agree not to hold Iowa State University liable for any injury or property loss incurred by the student while participating in any/all aspects of the program.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE



How many adults reside in your home? \_\_\_\_\_ How many children reside in your home? \_\_\_\_\_

Are you willing to take college preparatory classes to prepare for higher education  
\_\_\_\_\_ Yes \_\_\_\_\_ No

Do you intend to pursue higher education after high school?  
\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Undecided

Are you willing to participate (if selected) to participate in the Summer Residential Program?  
\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Unsure

### **PARENTAL & FINANCIAL INFORMATION**

If possible, please provide information for both parents (Biological or adoptive) regardless of whether you reside with both parents.

FATHER

MOTHER

Name \_\_\_\_\_

\_\_\_\_\_

Address & phone, if different from yours  
\_\_\_\_\_

\_\_\_\_\_

Place or work/Occupation \_\_\_\_\_

Work Phone # \_\_\_\_\_

If you reside with a Step-Parent please provide: Name \_\_\_\_\_

Work location and phone number \_\_\_\_\_

Highest education level of Biological

Father

Mother

Less than 12<sup>th</sup> Grade \_\_\_\_\_

12<sup>th</sup> Grade \_\_\_\_\_

Some College \_\_\_\_\_

AA/Technical degree \_\_\_\_\_

4 Year College Grad. \_\_\_\_\_

Post-graduate \_\_\_\_\_

**Family Yearly Income before Taxes (Gross Income) – You may be asked to provide tax verification and you are verifying with your signature that your response is true and accurate:**

Please indicate your family yearly income:

Below \$30,000 \_\_\_\_\_ \$30,000 – \$40,000 \_\_\_\_\_ \$40,000 – 50,000 \_\_\_\_\_  
\$50,000 - \$60,000 \_\_\_\_\_ \$60,000 – \$70,00 \_\_\_\_\_ \$70,00 and above \_\_\_\_\_

Tax Filing Status (Check one)

\_\_\_\_\_ Single    \_\_\_\_\_ Head of Household    \_\_\_\_\_ Married/Jointly

\_\_\_\_\_ Married/Single    \_\_\_\_\_ Widow(er) w/ dependent child(ren)

If you receive income from any other source please indicate the amount earned  
\_\_\_\_\_ per wk/month and the source \_\_\_\_\_

Please indicate if you receive any of these services:

\_\_\_\_\_ Free Lunch    \_\_\_\_\_ Reduced Lunch

Please explain if there are any other factors we should consider in assessing your financial situation: \_\_\_\_\_

If any sibling has participated in the UB program, please provide their name  
\_\_\_\_\_

**STUDENT:** Briefly state why you are interested in participating in Upward Bound and how you think it will help you:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Student Self-Assessment:** Check any/all statements to indicate what assistance you would like to get from TRIO Upward Bound:

\_\_\_\_\_ Help with homework    \_\_\_\_\_ Help selecting classes for college track

\_\_\_\_\_ Help selecting college/college major    \_\_\_\_\_ Career/Interest exploration

\_\_\_\_\_ Help w/college application/scholarships/fin aid    \_\_\_\_\_ Cultural/social experiences

**Check any/all statements that pertain to you:**

\_\_\_\_\_ Low GPA    \_\_\_\_\_ Low educational aspirations    \_\_\_\_\_ Low achievement test scores

\_\_\_\_\_ Lack of information on college admission process    \_\_\_\_\_ Lack of career goals

\_\_\_\_\_ Lack of confidence, self-esteem, social skills    \_\_\_\_\_ Limited proficiency in English

PARENT: Briefly state the ways in which you can support your student's participation in Upward Bound:

---

---

---

**CERTIFICATION OF TRUTH AND ACCURACY**

**We certify that all of the information in this application is true and correct. We understand that any misrepresentation may make this applicant ineligible for participation in the Iowa State University TRIO Upward Bound Program.**

**Parent/Guardian:**

_____	_____	_____
<b>Print Name</b>	<b>Signature</b>	<b>Date</b>

**Student:**

_____	_____	_____
<b>Print Name</b>	<b>Signature</b>	<b>Date</b>

**EMERGENCY CONTACT NUMBER –**

Please provide information for someone other than your parent(s) who can be contacted in case of an emergency should we not be able to locate a parent:

Name \_\_\_\_\_ Relation to you \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_