



Saint Augustine's University
Upward Bound Projects



Student Application 2022-2023

Academic & STEM Activities Cultural Enrichment Community Service Career Planning

Serving Nash & Edgecombe Counties and Halifax County

STUDENT INFORMATION

** All information MUST be completed*

Student First Name: _____ MI: _____ Last Name: _____

Date of Birth: _____ Grade: _____ School: _____ GPA: _____

Street Address: _____ PO Box: _____

City: _____ State: _____ Zip: _____ County: _____

Student Phone: _____ Student Email Address: _____

Gender: ☐ Male ☐ Female

U.S. Citizen: Yes ☐ No ☐

Cultural Background: (Please check all that apply): ☐ Asian ☐ American Indian/Alaskan Native ☐ Black/African American

☐ Native Hawaiian/Pacific Islander ☐ Latino ☐ White ☐ Other _____

Do you have a Disability? ☐ Yes ☐ No (If 'Yes', please describe condition): _____

Please list any other federally funded programs you are currently participating (i.e., Talent Search, Gear-Up, etc.):

Do you plan to participate in any other high school relate activities? (band, sports, etc.) If so, please list them below:

PARENT/GUARDIAN INFORMATION – TO BE COMPLETED BY THE PARENT/GUARDIAN

Does your child have an Individual Educational Plan (IEP) or 504 plan? ☐ Yes ☐ No - If Yes, which plan? _____

Student lives with: ☐ Both Parents ☐ Mother ☐ Father ☐ Other: _____

Parent/Guardian's marital status: ☐ Married ☐ Single/Separated ☐ Divorced

TOTAL NUMBER OF MEMBERS IN HOUSEHOLD: _____

Did either parent/guardian living in the home, graduate from college with a four-year BACHELOR'S Degree?

Mother/Guardian #1 ☐ Yes ☐ No

Father/Guardian #2 ☐ Yes ☐ No

PARENT/GUARDIAN INFORMATION – *For those residing in the home

Mother/Guardian #1 Name: _____ Occupation: _____

Phone number: _____ Email Address: _____

Father/Guardian #2 Name: _____ Occupation: _____

Phone number: _____ Email Address: _____

FAMILY HOUSEHOLD INCOME INFORMATION*** All information MUST be completed**

Upward Bound is required by the U.S. Department of Education to obtain family income and other eligibility information from all participants served by the Upward Bound Programs. All information will be held in strict confidence!

Did one or both parent/guardian's file an Income Tax Return last year? ☐ Yes ☐ No

IF "YES", PLEASE CHECK-MARK THE TOTAL **TAXABLE INCOME** RANGE OF YOUR HOUSEHOLD:
("Taxable Income" – NOT GROSS INCOME, can be found on Line 15, page 1 on your 1040 federal tax form)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0	\$20,386	\$27,466	\$34,546	\$41,626	\$48,706	\$55,786	\$62,866	\$69,946
to	to	to	to	to	to	to	to	to
\$20,385	\$27,465	\$34,545	\$41,625	\$48,705	\$55,785	\$62,865	\$69,945	Above

***Please provide a copy of our most recent 1040 Income Tax Return - pages 1 & 2 including signature pageDoes anyone in the household receive any of the following benefits or assistance? (If so, list the **MONTHLY** amount):

☐ Social Security/Disability ☐ Work First ☐ Unemployment ☐ Food Stamps ☐ Child Support ☐ Other: _____
\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____

***Please provide a copy of documentation for any of the above income received, for verification.

PARENTAL CONFIRMATION/CONSENT

By signing this application, I certify the above information provided, including household income information is true to the best of my knowledge. I also give permission for my child to participate in the Upward Bound Project and to travel with the program during sponsored activities. I authorize the program to receive copies of transcripts, report cards, test scores, income documentation, admissions and financial aid information and other pertinent information from colleges, universities, local school districts and other entities relative to academic, enrollment and tracking of student progress. Upward Bound also has my permission to photograph and/or video my child during program activities.

STUDENT SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §1232g, is a federal law providing for the review and disclosure of student educational records. The University and TRIO Upward Bound will not permit access to or the release of personally identifiable information contained in student educational records to any party without the written consent of the student, except as authorized by FERPA.

TRIO programs are federally funded through the US Department of Education*DO NOT WRITE IN THE SPACE BELOW (for office use only)**Program Classification: ☐ **UB Classic** ☐ **Halifax County UBMS** ☐ **Southeast Halifax County UB**

<input type="checkbox"/> Low Income	<input type="checkbox"/> Low Income & at high risk of academic failure
<input type="checkbox"/> First Generation	<input type="checkbox"/> First Generation & at high risk of academic failure
<input type="checkbox"/> Low Income/First Generation	<input type="checkbox"/> Low Income/First Generation & at high risk of academic failure

ENROLLMENT STATUS: ☐ Enrolled ☐ Not Enrolled ☐ Incomplete Application/Pending Information

Comments: _____

TRIO Staff Signature: _____ Date: _____