

IMPORTANT INFORMATION – READ CAREFULLY

DEADLINES

- ❖ For students to be accepted for the **SPRING 2018 SEMESTER**, the UB office must receive all application requirements by **NOVEMBER 1, 2018**.
- ❖ For students to be accepted for the **FALL 2018 SEMESTER**, the UB office must receive all application requirements by **APRIL 1, 2019**.

THE UB APPLICATION PROCESS

Here's a step-by-step description of how the UB application process works:

1. The UB office receives your COMPLETE application (use the checklist seen below to make sure you have everything).
2. You meet with a UB staff member to conduct a student interview; we can usually do this when we visit your school during lunchtime.
3. All application materials are reviewed to determine your eligibility.
4. The UB staff has a meeting with you and at least one parent/guardian at the UB office.
5. You will receive an admission decision in the mail or during a UB school visit.

APPLICATION REQUIREMENTS

In order to be considered for admission, we must receive ALL of the following:

- Completed and signed application
- Income verification (*if required, see section IV*)
- Applicant Essay form
- Student Needs Assessment
- Authorization to Obtain Education Records form
- Most recent transcript & SOL scores (*you must request these from the guidance office*)
- Teacher Recommendation (*your teacher will submit it to the UB office*)
- Guidance Counselor Recommendation (*your counselor will submit it to the UB office*)

HAVE QUESTIONS? CONTACT US!

UVA-Wise Upward Bound
Zehmer Hall 147
1 College Ave
Wise, VA 24293

Phone: (276) 328-0175

Fax: (276) 376-1098

Email: upwardbound@uvawise.edu

Website: <http://upwardbound.uvawise.edu/>

Facebook: [facebook.com/UVAWiseUpwardBound](https://www.facebook.com/UVAWiseUpwardBound)

The personal information you provide on this application is required by the Federal Government and is protected under the Privacy Act. This information is necessary to determine eligibility and helps the government to measure student success. The Department of Education has authority to gather information to help make Upward Bound a better program (20 USC 1231a). If this information is not provided to the Upward Bound Program and the Department of Education, your child cannot receive any benefits of this program.

PLEASE COMPLETE FORM IN INK

SECTION I : STUDENT INFORMATION

- 1. Name Last First Middle Preferred name:
2. Social Security # Date of Birth
4. Female Male
5. Mailing Address: Address City State Zip
6. Home Phone # Student Mobile Phone #
8. Is the applicant a U.S. citizen? Yes No 9. Student Email
10. With which of the following racial/ethnic identities does the applicant identify? (check all that apply)
11. Has the applicant ever been suspended or expelled from any school? Yes No
12. Has the applicant ever been convicted of a criminal offense? Yes No

SECTION II: STUDENT ACADEMIC INFORMATION

- 1. High school attending: Central Eastside Ridgeview
2. Present grade level: 8th 9th 10th 11th
3. Has the applicant ever attended an Alternative Education school? Yes No
4. List any extra-curricular activities in which the applicant is involved (clubs, sports, hobbies, etc.):
5. What are the applicant's interests following high school graduation? (Check all that apply)
4-year college 2-year college Vocational/Technical Military Other

FOR OFFICE USE ONLY

APPLICATION INCOME ESSAY NEEDS FERPA TEACHER RECOMM. GUIDANCE RECOMM. TRANSCRIPT SOLS INTERVIEW

DATE RECEIVED: DATE COMPLETED: UPDATED: 08/08/2018

SECTION III: HOUSEHOLD INFORMATION

1. Is the applicant in foster care? Yes No
2. With whom does the applicant live: Mother & Father Mother only Father only
Mother & Stepfather Father & Stepmother
Maternal Grandparent(s) Paternal Grandparent(s)
Other (specify) _____

Mother/Legal Female Guardian Information (fields 3 – 6)

3. Name _____ Check here if deceased
4. Mobile Phone # (____)____ - _____ Parent/Guardian Email _____
5. Highest education level attained: Did not finish high school GED High school graduate
Certificate/Technical degree Associate’s Bachelor’s or higher
6. Preferred method of contact : Voice Email Text

Father/Legal Male Guardian Information (fields 7 – 10)

7. Name _____ Check here if deceased
8. Mobile Phone # (____)____ - _____ Parent/Guardian Email _____
9. Highest education level attained: Did not finish high school GED High school graduate
Certificate/Technical degree Associate’s Bachelor’s or higher
10. Preferred method of contact : Voice Email Text

11. Please list any family members that have participated in any Upward Bound program:

NAME	RELATION TO APPLICANT	UB PROGRAM ATTENDED

SECTION IV: FAMILY FINANCIAL INFORMATION

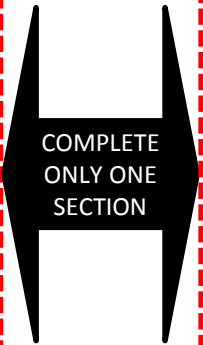
1. How many persons are in the household, including all dependents? _____
2. Does your household receive any of the following benefits? No Yes **If yes, please list case number:**
TANF # _____ SNAP # _____ FDPIR # _____
3. Did your household file a **FEDERAL INCOME TAX** return for the most recent year? (Select YES or NO below)

YES (see below)

What was the total household **TAXABLE INCOME?**

\$ _____

IMPORTANT: You must submit a copy of your most recent tax return showing **“DEPENDENTS”** and **“TAXABLE INCOME”** with your student’s application.



NO (see below)

Please indicate all current sources of household income below:

<u>INCOME TYPE</u>	<u>YEARLY AMOUNT</u>
<input type="checkbox"/> Unemployment benefits	\$ _____
<input type="checkbox"/> Social Security benefits	\$ _____
<input type="checkbox"/> Disability	\$ _____
<input type="checkbox"/> Child Support/Alimony	\$ _____
<input type="checkbox"/> Other _____	\$ _____
<input type="checkbox"/> Other _____	\$ _____
<input type="checkbox"/> Other _____	\$ _____

SECTION V: PERMISSION & ACKNOWLEDGEMENTS

-Parent/Legal Guardian Section-

Please read each statement below and provide your signature where indicated.

- I give permission for my child, named below, to participate in the Upward Bound program at The University of Virginia's College at Wise.
- All personal and financial information provided on this application is accurate and true to best of my knowledge.
- I authorize the release of my child's grades, transcripts, test scores, and post-secondary/dual enrollment records to the UVA-Wise Upward Bound program for as long as is necessary to satisfy performance and reporting requirements.
- Upward Bound at UVA-Wise has my permission to display, distribute, publish, transmit, or otherwise use photographs, images, and/or video of my child in program-related materials that include, but may not be limited to, printed materials, videos, and digital images displayed on the program's websites.
- I will ensure the timely transportation of my child to and from all Upward Bound tutorials, meetings, and other events.
- I acknowledge that UVA, UVA-Wise, and Upward Bound are not responsible for any actions committed by my child that may violate any Upward Bound regulation as described here and in the Student Handbook.
- I acknowledge that my child's eligibility to receive services from Upward Bound is contingent upon his/her active and ongoing participation in the program, and that I will support my child's pursuit of a post-secondary degree to the best of my abilities throughout his/her involvement in Upward Bound.
- My signature below signifies that I have read and understand the preceding statements as they pertain to my child, named below:

Student Printed Name: _____



Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Today's Date: _____

-Student Section-

Please read each statement below and provide your signature where indicated.

- All information I provided on this application is accurate and true to the best of my knowledge.
- I agree to be an active participant in the Upward Bound program.
- I acknowledge that my continued eligibility to receive Upward Bound services is contingent upon adhering to program policies and maintaining a satisfactory participation level as determined by the UB Director.
- I authorize the release of my grades, transcripts, test scores, and post-secondary/dual enrollment records to the UVA-Wise Upward Bound program for as long as is necessary to satisfy performance and reporting requirements.



Student Signature: _____

Today's Date: _____

Upward Bound at the University of Virginia's College at Wise is a federally funded TRiO program. All grantees under the TRiO programs and other programs funded by the Department are required to comply with Federal laws that prohibit discrimination on the basis of race, color, national origin, sex, handicap, or age (34 CFR 75.500, Sec. 643.6(a)(2)).

SECTION VI: Title IX and Federal Funding information

Title IX

TITLE IX: UVa-Wise (the “College”) is committed to maintaining a respectful, professional and nondiscriminatory academic, living and working environment for students, faculty, staff, and visitors. This includes maintaining an environment free from harassment and discrimination for everyone and does not discriminate on the basis of a person’s race, gender, ethnicity, national origin, religion, age, pregnancy or parenting status, disability, or other protected status. This includes having an environment free from sexual and gender-based harassment, sexual assault, intimate partner violence, stalking, sexual exploitation, complicity and retaliation. For more information contact Tabitha Smith, Title IX Coordinator, Office of Compliance Conduct, & Inclusion. tabitha.smith@uvawise.edu The College’s full Sexual Misconduct Policy and grievance procedures are available at www.uvawise.edu/compliance/files/compliance/UVaWise_SexualMisconductPolicy.pdf

CAMPUS SECURITY-CLERY ACT: UVa-Wise is committed to helping the campus community provide for their own safety and security. The Annual Security Report and Fire Safety Report containing information on campus security and personal safety, including alerts, fire safety, crime prevention tips, and crime statistics is available at www.uvawise.edu/ASR. A copy is available upon request by calling [276-328-0190](tel:276-328-0190) or [276-376-3451](tel:276-376-3451).

Federal Funding

The Upward Bound program at UVA-Wise is funded in total (100%) by federal dollars from the U.S. Department of Education, with an annual budget of \$378,818. For questions and other information, please contact Shelby Roberts, Director of Upward Bound at 276-328-0175

Printed Name: _____

Email: _____

For each item listed in the following sections, please indicate the level of need you feel best describes you. Your responses to the statements in this survey will help us learn more about you and how you can get the most out of Upward Bound. There are no wrong answers, so please give your most honest response. Your answers will be kept confidential.

Academic Needs	Strong Need	Some Need	No Need
1. To learn to complete and turn in my homework on time.	1	2	3
2. To get better grades in school.	1	2	3
3. To take test better and with less anxiety.	1	2	3
4. To organize my time, activities and responsibilities better.	1	2	3
5. To learn more about high school requirements for college.	1	2	3
6. To listen better in class and ask more questions.	1	2	3
7. To relate to and communicate better with my teachers.	1	2	3
8. To identify, set and evaluate goals for the future.	1	2	3

Personal Needs	Strong Need	Some Need	No Need
1. To better understand my parents and other adults.	1	2	3
2. To learn to deal with conflict in a positive manner.	1	2	3
3. To be more accepting of my physical appearance.	1	2	3
4. To learn how my self-esteem affects my behavior.	1	2	3
5. To learn how to get along better with members of the opposite sex.	1	2	3
6. To learn to accept people who are different from me.	1	2	3
7. To learn more about the use/abuse of drugs and alcohol.	1	2	3
8. To accept greater responsibility for my actions.	1	2	3

For each item listed in the following section, please indicate the level of need you feel best describes you. Your responses to the statements in this survey will help us learn more about you and how you can get the most out of Upward Bound. There are no wrong answers, so please give your most honest response. Your answers will be kept confidential.

Career and Postsecondary Needs	Strong Need	Some Need	No Need
1. To explore a variety of career opportunities .	1	2	3
2. To learn more about job applications, resumes and interviews.	1	2	3
3. To learn more about postsecondary admissions process.	1	2	3
4. To prepare for exams like the PSAT, ACT, or SAT.	1	2	3
5. To visit more colleges.	1	2	3
6. To learn about college cost and how to pay for college.	1	2	3

My current career choice is _____

In college, I plan to major in _____

Three careers I am interested in learning about are:

1. _____
2. _____
3. _____

Student Signature: _____ **Date:** _____

UPWARD BOUND



The University of Virginia's College at Wise AUTHORIZATION TO OBTAIN EDUCATION RECORDS



The **Family Educational Rights and Privacy Act (FERPA)** specifies the rights of students to privacy and confidentiality with respect to their education records. Information regarding each Upward Bound participant is to be collected for annual reporting to the U.S. Department of Education, as well for the purposes of: ascertaining academic progress and assessing academic needs; monitoring high school retention and graduation; and verifying enrollment and retention in college towards their completion of a post-secondary degree program. An education record is any record, in any form or medium, that is directly related to a student by way of personally identifiable information and may include records such as those listed below:

TRANSCRIPTS	MID-SEMESTER GRADE REPORTS
ATTENDANCE AND TRUANCY RECORDS	PARTICIPATION IN OTHER TRIO PROGRAMS
SCHOOL ENROLLMENT STATUS	FINANCIAL AID INFORMATION
DUAL ENROLLMENT RECORDS	COLLEGE ADMISSIONS AND ENROLLMENT INFORMATION
ACT/PSAT/SAT AND PLACEMENT TESTING SCORES	DISCIPLINARY RECORDS
VIRGINIA STANDARDS OF LEARNING (SOL) SCORES	OTHER INFORMATION RELATED TO ACADEMIC PROGRESS

NOTE: Upward Bound will never release identifying information to third parties without the participant's written consent.

To whom it may concern,

I, the undersigned participant, hereby authorize the release of my education records as defined above to the Upward Bound Program at the University of Virginia's College at Wise. I have read the above information and I understand that records may be requested from my primary/middle/high school, alternative school, school board office, post-secondary institution, or other organization with the authority to maintain my educational records. I understand that any office receiving a request for records will be provided a copy of this authorization upon request. I understand the information may be received orally or in the form of paper/electronic records, and that I have a right to inspect any written records released pursuant to this authorization. I understand I may revoke this authorization upon providing written notice to the UVA-Wise Upward Bound office. I further understand that until this revocation is made, this authorization shall remain in effect and my educational records will continue to be provided to the Upward Bound program for the specific purposes described above.

PARTICIPANT SSN (LAST 4 DIGITS): XXX-XX-_____

PARTICIPANT DATE OF BIRTH: ____ / ____ / _____

PARTICIPANT PRINTED NAME

PARTICIPANT SIGNATURE

DATE

PARENT/GUARDIAN PRINTED NAME

PARENT/GUARDIAN SIGNATURE

DATE

UPWARD BOUND



The University of Virginia's College at Wise



TEACHER RECOMMENDATION FORM

TO THE STUDENT: Detach this sheet from the rest of the application and give it to a teacher to complete. Rising 9th grade and current 9th grade students may have an 8th grade teacher complete the recommendation.

TO THE TEACHER: Thank you for taking the time to assist with this student's application to the UVA-Wise Upward Bound program. UB is a federally funded program that strives to help eligible students develop the skills and competencies needed to successfully complete a post-secondary degree program following high school graduation. Please provide the information requested below to help us determine the student's potential for success as an Upward Bound participant. Upon completion, please submit the form to our office via one of the options below - **DO NOT return the form to the student.** We encourage you to contact us with questions or to discuss the student's recommendation in greater detail.

STUDENT NAME: _____

SCHOOL: Central Eastside Ridgeview **CURRENT GRADE:** 9th 10th 11th

1. How long have you known the applicant? _____
2. In which course(s) was/is the applicant a student of yours? _____
3. Please describe the applicant's class behavior and attendance:

4. How would you describe the applicant's general attitude towards school and education?

5. Does the applicant show respect for peers, teaching staff, and school personnel?

6. In your opinion, what are the applicant's biggest opportunities for growth?

7. Based on your knowledge of the applicant, please rate his/her academic skills:

	Outstanding	Above Average	Average	Needs Improvement	No Basis for Judgement
Academic Achievement					
Math Skills					
Reading Skills					
Study Skills					
Writing Skills					
Comprehension Skills					
Use of time					
Organization					



8. Please rate the applicant's characteristics and motivation:

	Outstanding	Above Average	Average	Needs Improvement	No Basis for Judgement
Ability to cope calmly with frustrating experiences					
Demonstrates leadership capability					
Interpersonal skills					
Self-image					
Potential for growth					
Potential to succeed					
Motivation and willingness to learn					
Tolerance of minor disappointments					
Intellectual curiosity					
Ability to work with others on group projects					
Quality of work submitted					
Emotional maturity					
Attentiveness in class					
Ability to meet deadlines					
Potential to appreciate and maximize learning opportunities					

Additional Comments:

How would you recommend the applicant for the UVA-Wise Upward Bound Program? (Check one):

- I *strongly recommend* this student for participation.
 I *recommend* this student for participation.
 I recommend this student *with reservations*.
 I *do not recommend* this student.

Signature: _____ **Date:** _____

Print name: _____ **Email:** _____

Please return the completed form to our office via one of the following:

- ✓ Scan and email to upwardbound@uvawise.edu
- ✓ Fax to 276-376-1098
- ✓ Give to an Upward Bound Staff member at their next school visit.

UPWARD BOUND



The University of Virginia's College at Wise GUIDANCE COUNSELOR RECOMMENDATION FORM



TO THE STUDENT: Detach this sheet from the rest of the application and give it to your guidance counselor to complete.

TO THE GUIDANCE COUNSELOR: Thank you for taking the time to assist with this student's application to the UVA-Wise Upward Bound program. UB is a federally funded program that strives to help eligible students develop the skills and competencies needed to successfully complete a post-secondary degree program following high school graduation. Please provide the information requested below to help us determine the student's potential for success as an Upward Bound participant. Upon completion, please submit the form to our office via one of the options below - **DO NOT return the form to the student.** We encourage you to contact us with questions or to discuss the student's recommendation in greater detail.

STUDENT NAME: _____

SCHOOL: Central Eastside Ridgeview **CURRENT GRADE:** 9th 10th 11th

- Which of the following best describes this student's high school curriculum?
 Academic/College Prep General Honors Program
 Remedial Vocational Other _____
- What is this student's approximate class rank? Top 10% Top 25% Top 50% Below 50%
- What is this student's reading level? _____ (Above, At, or Below Grade Level)
- How would you describe this student's attendance? Excellent Good Fair Poor
- Does the applicant currently follow an *Individualized Education Program (IEP)* or *504 plan*? Yes No
- Has this student ever been subject to school disciplinary action or suspension? Yes No
If yes, please provide as much detail as possible: _____

Additional Comments:

How would you recommend the applicant for the UVA-Wise Upward Bound Program? (Check one):
 I *strongly recommend* this student for participation. I *recommend* this student for participation.
 I recommend this student *with reservations*. I *do not recommend* this student.

Signature: _____ **Date:** _____

Print name: _____ **Email:** _____

Please return the completed form to our office via one of the following:
✓ Scan and email to upwardbound@uvawise.edu
✓ Fax to 276-376-1098
✓ Give to an Upward Bound Staff member at their next school visit.

