

# Upward Bound Program Application

## SECTION I

### Background Information

(Please print or type)

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

1. Name \_\_\_\_\_  
LAST FIRST MIDDLE
2. Social Security No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_
3. Address \_\_\_\_\_  
STREET CITY STATE ZIP
4. Telephone No. ( ) \_\_\_\_\_
5. Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_
6. Sex:  Male  Female
7. Ethnic Background:  African-American  American-Indian  Asian-American/Hmong  
 Caucasian  Hispanic  Other \_\_\_\_\_
8. Are you a U.S. Citizen?  Yes  No (If "Yes", Skip #9, #10, and go to #11).
9. If "No", Are you a Permanent Resident of the United States?  Yes  No (If "Yes", give Alien or Visa Registration Number. \_\_\_\_\_. (If "Yes", Skip #10 and go to #11).
10. If "No", Are you in the United States for other than a temporary purpose and can provide evidence from the Immigration and Naturalization Service of your intent to become a permanent resident?  Yes  No If yes, please list INS case #: \_\_\_\_\_ and attach a copy of INS letter to the application.
11. With whom do you live? \_\_\_\_\_
12. What language do you speak best? \_\_\_\_\_
13. What language is usually spoken at home? \_\_\_\_\_
14. Name of Parent(s)/Guardian(s) (Please specify) \_\_\_\_\_

### Educational/Personal Information

15. High school attending \_\_\_\_\_
16. Grade Point Average \_\_\_\_\_
17. Grade:  Freshman  Sophomore  Junior  Senior
18. Email Address: \_\_\_\_\_
19. High school counselor's name \_\_\_\_\_
20. Student ID# \_\_\_\_\_
21. Migrant ID \_\_\_\_\_
22. List activities, clubs and organizations in which you have participated in High School:  
\_\_\_\_\_  
\_\_\_\_\_
23. Are you presently employed?  Yes  No - If yes, location & hours/week \_\_\_\_\_
24. Are you able to participate in monthly Saturday College Conferences?  Yes  No
25. Are you able to participate in after-school tutorial sessions?  Yes  No
26. Are you able to participate in our five-week Summer Residential Program?  Yes  No
27. How did you find out about the Upward Bound Program?
- Through my parents  Through Radio, Television or Newspaper  Through a friend  
 Through my high school counselor  Through an Upward Bound representative  Other \_\_\_\_\_

### Emergency Information

28. Give the name, address, and phone number of someone reliable (a relative or friend) who does not live with you but can be contacted in the event of an emergency. A telephone number is mandatory!

Name \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_  
FIRST LAST

Address \_\_\_\_\_ Telephone No. ( ) \_\_\_\_\_  
STREET APT. # CITY STATE ZIP



# Upward Bound Program Application

## Education Verification

13. Father : I certify that I  do  do not have a four-year college degree.

 \_\_\_\_\_  
**Father's or Legal Guardian's Signature** \_\_\_\_\_  
**Date**

14. Mother: I certify that I  do  do not have a four-year college degree.

 \_\_\_\_\_  
**Mother's or Legal Guardian's Signature** \_\_\_\_\_  
**Date**

## Income Verification (Must be completed by parent or legal guardian)

15. Do you receive: Social Security  Yes  No - If yes, state amount received last year \_\_\_\_\_  
Welfare  Yes  No - If yes, state amount received last year \_\_\_\_\_  
AFDC  Yes  No - If yes, state amount received last year \_\_\_\_\_


NOTE: If you checked yes for any of the options in #15, please provide verification to Upward Bound.


16. Last year's taxable income \_\_\_\_\_

17. My child (**print student's name**) \_\_\_\_\_ has applied to the Upward Bound Program. I am submitting this letter, which will verify my income.

18. This letter is to certify my income for the year \_\_\_\_\_. During that time, the approximate **total** family income was \$ \_\_\_\_\_. This figure includes AFDC, unemployment, and any other benefits received during that year.


19. The number of dependants living in my household during that same year was \_\_\_\_\_.  
I certify that the above is true and correct


\_\_\_\_\_  \_\_\_\_\_  
**Print Name** **Signature of Mother/Legal Guardian** \_\_\_\_\_  
**Date**

\_\_\_\_\_  \_\_\_\_\_  
**Print Name** **Signature of Father/Legal Guardian** \_\_\_\_\_  
**Date**

## Permission of Participation


I hereby grant permission for my son/daughter (**print student's name**) \_\_\_\_\_ to participate in the Upward Bound Program at California State University, Fresno, including its residential summer component. I also give my consent to \_\_\_\_\_ High School to make available to the Director of Upward Bound Program (or to any member of his/her staff that may be so designated) any and all information pertaining to my child's academic progress in school.


 \_\_\_\_\_  
**Signature of Mother/Legal Guardian** \_\_\_\_\_  
**Date**

 \_\_\_\_\_  
**Signature of Father/Legal Guardian** \_\_\_\_\_  
**Date**

## Affidavit

I, the undersigned, declare under penalty of perjury that all the information reported on this application is true, complete and accurate to the best of my knowledge.

 \_\_\_\_\_  
**Signature of Mother/Legal Guardian** \_\_\_\_\_  
**Date**

 \_\_\_\_\_  
**Signature of Father/Legal Guardian** \_\_\_\_\_  
**Date**



**Upward Bound Program Application  
(TO BE COMPLETED BY COUNSELOR)**

**SECTION III**

**Counselor Assessment of Student Needs**

Name of High School Counselor \_\_\_\_\_

Date \_\_\_\_\_

Name of Student \_\_\_\_\_

Grade Level \_\_\_\_\_

Student High School ID# \_\_\_\_\_

Current GPA \_\_\_\_\_

**Assessment**

**Instructions**

The above named student is applying to Fresno State's Upward Bound Program. Please assist us in evaluating the needs of the students by filling out this form. We are looking for talented and motivated students who are striving to go to college and overcome social, personal, and academic barriers.

	Outstanding	Satisfactory	Needs Improvement	No Basis for Evaluation
Motivation to do well in school				
Desire to attend college				
Leadership capabilities				
Academic potential for postsecondary education				
Involvement in school activities				
Involvement in community activities				
Relationships with others				
Enthusiasm for learning				

What academic subject(s) does the student need assistance in? \_\_\_\_\_

How will he/she benefit from the Upward Bound Program? \_\_\_\_\_

How long have you known applicant? \_\_\_\_\_

Has the student passed the CAHSEE? Language \_\_\_\_\_ Math \_\_\_\_\_

**PLEASE ATTACH COPY OF TEST SCORES**

Additional Comments \_\_\_\_\_

**Recommendation**

I recommend \_\_\_\_\_ for admission to the Upward Bound Program at California State University, Fresno. I believe that this student has the potential to succeed in college, although his/her present grades may not reflect it. To the best of my knowledge, this student meets the requirements for participating in Upward Bound.

\_\_\_\_\_  
*Counselor's Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Telephone Number*

## Upward Bound Program Application

### SECTION IV

### ADDITIONAL VERIFICATION

#### Recommendation Form

**ONE RECOMMENDATION FORM** should be included with the application and should be given to one of the following:

1. An academic teacher
2. Member of the community

**THIS RECOMMENDATION FORM SHOULD BE INCLUDED IN YOUR APPLICATION**

#### Verification Checklist

To verify your eligibility to attend the California State University, Fresno Upward Bound Program, the following items **MUST** be turned in. Failure to turn in **ALL** documents listed below will automatically disqualify you for eligibility.

- \_\_\_\_\_ Completed Application
- \_\_\_\_\_ A **SIGNED** copy of your parents' last year's Tax Return and/or other income verification
- \_\_\_\_\_ A copy of your high school transcripts
- \_\_\_\_\_ Most recent Progress Report
- \_\_\_\_\_ One Recommendation Form
- \_\_\_\_\_ Student Success agreement and contract
- \_\_\_\_\_ Request for Transcript Form
- \_\_\_\_\_ Medical Consent Authorization Form
- \_\_\_\_\_ Release and Hold-Harmless Statement
- \_\_\_\_\_ Student Application Questionnaire

#### FOR OFFICE USE ONLY

DATE RECEIVED \_\_\_\_\_

APPLICANT INTERVIEW:

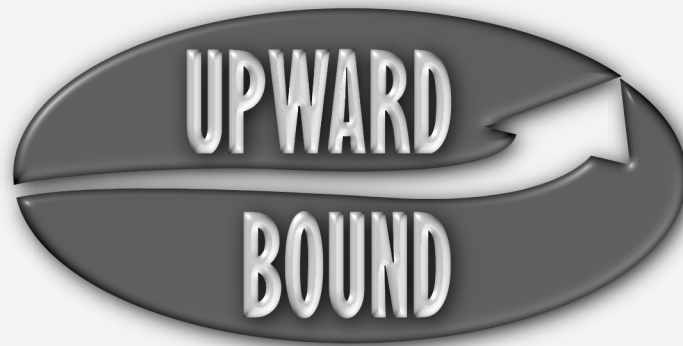
DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ Place: \_\_\_\_\_

FINAL REVIEW:

ADMIT     PLACE ON WAITING LIST     INELIGIBLE     DENIED

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*Upward Bound Program Application*



California State University, Fresno

**Upward Bound Program**

**CSU, Fresno**

**5240 N. Jackson Ave., M/S UC 35**

**University Center #127**

**Fresno, CA 93740-8023**

**Office 559-278-2693**

**Fax 559-278-4306**

## Upward Bound Program Application



# Upward Bound Program

California State University, Fresno



## Program Description

*The Upward Bound Program at California State University, Fresno is designed for low-income, first generation college bound students who have the potential to succeed in college, but whose high school grades and test scores do not reflect that potential. Funded by the United States Department of Education, Upward Bound provides assistance in acquiring the academic skills and motivation to succeed in high school and prepare for college. Seventy-nine (79) freshmen and sophomores are selected to take part in Upward Bound.*

## Target High Schools

- ✿ - Edison High School
- ✿ - Fresno High School
- ✿ - Roosevelt High School
- ✿ - Madera High School
- ✿ - Parlier High School
- ✿ - Sanger High School

## Services Offered

- ◆ Academic Assessment & Advising
- ◆ Career Counseling
- ◆ Assistance with Class Selection
- ◆ After-school Tutorials
- ◆ Monthly Saturday College Conferences
- ◆ College Preparatory Workshops
- ◆ Assistance with College Application
- ◆ Five week Residential Summer Program
- ◆ Earn up to 10 Elective High School Credits
- ◆ Parent Workshops
- ◆ Financial Aid Advising
- ◆ Cultural Activities
- ◆ College Campus Visits
- ◆ Field Trips
- ◆ Recreational Activities
- ◆ Résumé and Portfolio Development
- ◆ Job Seeking Skills
- ◆ Career Development Skills

## Staff

Martina Granados, Director  
José Díaz, Career Specialist  
Bernardo Reynoso, Instructional Specialist  
Sergio Alba, Program Assistant