



JOIN UB

Application Form

Expires 12/31/17

The Upward Bound Programs

(Classic & Math-Science)

at Morehead State University

150 University Blvd., #783

Morehead, KY 40351

(606) 783-2611 or (800) 5UPWARD

upwardbound@moreheadstate.edu

www.moreheadub.org

Please ensure that all parts of the application are completed and signed.

This form must be completed using blue or black ink.

Information about the Student

Name: _____ Do you intend to go to college? Yes No Unsure

High School: _____ Current Grade: _____ Expected Year of Graduation: _____

Mailing Address: _____

Home Phone Number: _____ Student Cell Phone Number: _____

Student Email Address: _____ Gender: Male Female

Birth date: _____ Social Security Number: _____ - _____ - _____ US Citizen: Yes No

Ethnicity: _____ Are you Hispanic or Latino? Yes No

Race (please check all that apply): American Indian/Alaskan Native Asian White Other: _____
 Black/African American Native Hawaiian or Other Pacific Islander

With whom does the student live? Please check only one: Both parents Mother Father Legal Guardian Foster Care
 Other (please specify) _____

Parents/Guardians marital status: Married, living together Married, living separately Single Divorced

Mother/Legal Guardian Information

Name: _____

Work Phone Number: _____

Cell Phone Number: _____

Best Time to Contact: _____

Living Deceased

Has Mother/Legal Guardian Earned a 4 Year College Degree?
 Yes No

Father/Legal Guardian Information

Name: _____

Work Phone Number: _____

Cell Phone Number: _____

Best Time to Contact: _____

Living Deceased

Has Father/Legal Guardian Earned a 4 Year College Degree?
 Yes No

How do you as a parent/guardian feel about your student participating in this program?

Financial Information

Staff Initials: _____

Did the parent(s) file an Income Tax Return for Tax Year 2016? No Yes (if yes, please include a copy of **all pages** of the FEDERAL return)

What was your **Taxable Income** for Tax Year 2016: \$ _____

For **Form 1040** this is **line 43**; for **Form 1040A** this is **line 27**; for **Form 1040EZ** this is **line 6**. If you were not required to file a Federal Return, your Taxable income is \$0. *If applying after December 31, 2017, you must provide information referencing Tax Year 2017.*

Total number of members in household: _____

TRIO Income Guidelines:	Family Size 1	2	3	4	5	6	7	8	9
(Taxable Income as of January 31, 2017)	\$18,090	\$24,360	\$30,630	\$36,900	\$43,170	\$49,440	\$55,710	\$61,980	\$74,250

The information contained in this application is for the use of the Upward Bound Programs at Morehead State University only, and will be held in the strictest confidence. All records are kept in secure locked storage.

By signing below you certify that all information contained in this application is correct, complete and accurate (this includes the educational attainment level of both parents, financial information, size of household, etc.) to the best of your knowledge by signing below.

Parent/Guardian Signature _____ Name (please print) _____ Date _____

Student Signature _____ Name (please print) _____ Date _____

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Application Form (continued)



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AUTHORIZATION FOR RELEASE OF EDUCATIONAL RECORDS & ADDITIONAL RELEASES

Please read the following information before signing. All information will be kept confidential.

I hereby grant authorization for my educational records (grades, transcripts and test scores) to be released to the Upward Bound Programs at Morehead State University (MSUUB). I understand that the Upward Bound Programs will request grades at the conclusion of each grading period and transcripts/test scores at least annually. I furthermore agree that the Upward Bound Programs may share academic information regarding participation in the Upward Bound Programs (grades, test scores, etc.) with my parents and/or high school.

I also authorize the Upward Bound Programs at Morehead State University to use photographs and/or videotape with my image in Upward Bound publications and/or news releases.

Permission is granted for the student to participate in all activities sponsored or attended by MSUUB. Permission is granted for Upward Bound staff members to transport the above named student to and from these activities.

Permission is granted to provide counseling services to the above named student as necessary by the appropriate University and/or community resources (i.e. University Counseling Service or Pathways).

Permission is granted for Upward Bound staff (Director, Associate Director, Academic Coordinator, Bridge Coordinator, Program Specialist, Residence Hall Supervisor) to provide over-the-counter medications (acetaminophen, aspirin, Pepto-Bismol, ibuprofen, Dramamine, Sudafed, decongestants, antihistamines, etc.) for minor physical complaints.

We understand that the Upward Bound Programs are for students who are able to handle the responsibility of being away from home for the residential summer academy.

We recognize that Upward Bound Programs are a major investment by the United States Department of Education and we understand that if the student is accepted and wishes to attend, he or she will be expected to fully participate in the program (both during the academic year and summer academy).

We understand that although travel costs, stipends, room, board, insurance (secondary pay for injuries only) and fees are provided free of charge, the student's family or guardian must assume responsibility for illnesses (including prescription coverage) or pre-existing conditions, medical release forms and any information needed to complete them.

We understand that if MSUUB accepts the applicant, he or she will have to adhere to the program's rules and regulations concerning student responsibility and behavior in the academic and residential life programs. We understand that the Upward Bound Director will have the right to dismiss any student whose behavior is incompatible with the goals and standards of MSUUB.

We agree that the student, if accepted into MSUUB, may participate in answering questionnaires and other appropriate and approved research projects done as a part of the program's evaluation.

Morehead State University, the Upward Bound Programs, nor any staff member will be held responsible for any injuries or obligations resulting from these activities.

Activities for which permission is NOT granted:

Over the counter medication NOT to be administered:

Please list the names of two high school teachers (only list teacher of these subjects: English, math, social studies, or science) who will be asked to provide a reference for this student:

Teacher 1: _____ Subject: _____

Teacher 2: _____ Subject: _____

By signing below, you are agreeing to all statements on this page, as well as providing permission for the Upward Bound Programs at Morehead State University to acquire recommendation forms from the two teachers named above.

Parent/Guardian Signature _____ Name (please print) _____ Date _____

Student Signature _____ Name (please print) _____ Date _____



RECOMMEND FOR UB

Counselor Recommendation Form

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Please ensure that all parts of the recommendation are completed and signed.

This form must be completed using blue or black ink.

The student listed below is applying to join the Upward Bound Programs at Morehead State University (MSUUB). We seek recommendations from a guidance counselor at the school the student attends to ensure that we are admitting the best students to our program. The questions on this recommendation will help us assess the students willingness and ability to attend all services offered as well as to learn more about their academic ability. We appreciate your honest and candid answers to all questions, and all information on this form will be held in confidence.

Please add this recommendation to the student's application, and get to the Upward Bound office as directed by the UB staff member who serves your school. If you have any questions, please contact our office using the contact information listed in the header of this form.

General Information

Student Name: _____ School: _____

Academic Information

Please check if the student completed the following courses by the end of 8th grade: Pre-Algebra Algebra Geometry

Please check the score for the student's 8th grade K-PREP test:

Novice Apprentice Proficient Distinguished

Math				
Reading				

Student achieved a GPA of 2.5 or higher for the most recent school year? Yes No

Does the student have an IEP? Yes No

If yes, please attach a copy.

Recommendation

Would you recommend admitting this student to Upward Bound? Yes No

Explanation of your recommendation: _____

Please rate the student on each of the following:

	Excellent	Good	Fair	Poor
Academic performance				
Motivation				
Maturity				
Dependability and reliability				
Problem solving skills				
Attendance				
Ability to live away from home				

Is this student interested in attaining a 4 year college/university degree? Yes No Unsure

Do you feel this student has the ability/potential to do college level work? Yes No Unsure

Do you feel this student would attend?: Yes No Unsure

School Visits Yes No Unsure

Saturday Return Trips Yes No Unsure

Summer Academy Yes No Unsure

What are some challenges this students faces in preparing for, getting admitted to and succeeding in education after high school?

Additional comments: _____

Counselor Signature _____ Date _____



RECOMMEND FOR UB

Teacher Recommendation Form

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The student listed below is applying to join the Upward Bound Programs at Morehead State University (MSUUB). We seek recommendations from two teachers and a guidance counselor at the school the student attends to ensure that we are admitting the best students to our program.

MSUUB is operated under grants from the US Department of Education, and our ultimate goal is to prepare students to enter and complete post-secondary education. Everything we do is at no cost to the student's family. We offer many services, including: school visits at target high schools, monthly visits to Morehead State University (MSU), cultural trips, and a six-week Summer Academy at MSU during the months of June and July. The questions on this recommendation will help us assess the students willingness and ability to attend all services offered as well as to learn more about their academic ability. We appreciate your honest and candid answers to all questions, and all information on this form will be held in confidence.

Please return this recommendation to the counseling office, and the guidance counselor will add it to the student's application. You can also return this recommendation in the attached reply envelope, if applicable. If you have any questions, please contact our office using any of the contact information listed on this form.

General Information

Student Name: _____ School: _____

Teacher Name: _____ Subject in which you've taught student: _____

Recommendation

Would you recommend admitting this student to Upward Bound? Yes No

Explanation of your recommendation: _____

Please rate the student on each of the following:

	Excellent	Good	Fair	Poor
Academic performance				
Motivation				
Maturity				
Dependability and reliability				
Problem solving skills				
Attendance				
Ability to live away from home				

Is this student interested in attaining a 4 year college/university degree? Yes No Unsure

Do you feel this student has the ability/potential to do college level work? Yes No Unsure

Do you feel this student would attend?: School Visits Yes No Unsure

Saturday Return Trips Yes No Unsure

Summer Academy Yes No Unsure

What are some challenges this students faces in preparing for, getting admitted to and succeeding in education after high school?

Additional comments: _____

Teacher Signature _____

Date _____



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Please return this recommendation to the counseling office, and the guidance counselor will add it to the student's application. You can also return this recommendation in the attached reply envelope, if applicable. If you have any questions, please contact our office using any of the contact information listed on this form.

General Information

Student Name: _____ School: _____
Teacher Name: _____ Subject in which you've taught student: _____

Recommendation

Would you recommend admitting this student to Upward Bound? Yes No

Explanation of your recommendation: _____

Please rate the student on each of the following:

	Excellent	Good	Fair	Poor
Academic performance				
Motivation				
Maturity				
Dependability and reliability				
Problem solving skills				
Attendance				
Ability to live away from home				

Is this student interested in attaining a 4 year college/university degree? Yes No Unsure

Do you feel this student has the ability/potential to do college level work? Yes No Unsure

Do you feel this student would attend?: Yes No Unsure

School Visits Yes No Unsure

Saturday Return Trips Yes No Unsure

Summer Academy Yes No Unsure

What are some challenges this students faces in preparing for, getting admitted to and succeeding in education after high school?

Additional comments: _____

Teacher Signature _____

Date _____



INTERVIEW FOR UB

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Applicant Interview Form

Please ensure that all questions are asked; answer as the student responds.
This form must be completed using blue or black ink.

General Information

Student Name: _____ School: _____
Interviewer: _____ Date: _____

Interview Questions

- 1a. Why are you interested in going to college? _____

- 1b. If you are not interested in going to college, what are your plans for after high school? _____

2. What do you hope to gain by participating in Upward Bound; how do you feel UB will help you reach your college goal? _____

3. Why should you be chosen to participate in Upward Bound? _____
What sets you apart from other candidates? _____
4. What would you like to study in college? _____ What about this field interests you? _____
What career do you hope to attain after studying this in college? _____
5. What college would you like to attend and why? _____

6. What subjects do you enjoy in school now that you want to study in college? _____
7. What makes you nervous about going to college? financial aid family responsibilities lack of motivation
 social being away from home money/need to work
 other: _____
8. What other responsibilities do you have other than school? _____
9. Do you currently participate in any college access programs? No Yes if so, which ones: _____
10. How do your parents/guardians feel about: your desire to go to college? supportive unsupportive
you participating in UB? supportive unsupportive
11. How committed are you to participating in all UB activities (RTs, SVs, Summer, etc) if you are admitted to UB?
 Very committed Partially committed Unsure Not committed
12. Do you have any specific concerns about your ability to participate in the program? family support employment
 extracurriculars health issues other: _____
13. How much time do you devote to your studies on a daily basis? _____ hours _____ minutes
14. Do you have any questions, before we conclude the interview? _____

Scoring Rubric

These scores are staff impressions based on the overall interview.

Desire to improve own future through academics: _____
Score 1-5 points

Responsibility: _____
Score 1-3 points

Commitment to attending UB activities: _____
Score 1-4 points

Motivation: _____
Score 1-3 points

Interview Score:

Maximum of 15 Points



STUDENT SELECTION

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Please ensure that all questions are completed.
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General Information

Student Name: _____ Date: _____
School: _____ Grant: _____

Student Selection Criteria Ratings

SCORE

1. ELIGIBILITY: <input type="checkbox"/> Low Income (5 points) <input type="checkbox"/> First Generation (5 points) <input type="checkbox"/> High Risk for Academic Failure (5 points) <small>Check all that apply:</small>	Maximum 15 Points
2. ACADEMIC POTENTIAL: <input type="checkbox"/> 3.6 or higher (5 points) <input type="checkbox"/> 3.1-3.5 (4 points) <input type="checkbox"/> 2.6-3.0 (3 points) <input type="checkbox"/> 2.1-2.5 (2 points) <input type="checkbox"/> 2.0 or below (1 point) <small>Check only one:</small>	Maximum 5 Points
3. PERSONAL INTERVIEW: Please rank the personal interview score:	Maximum 15 Points
4. INTERVIEW QUESTIONS: Question #2 - <input type="checkbox"/> fair (1 point) <input type="checkbox"/> good (2 points) <input type="checkbox"/> excellent (3 points) Question #3 - <input type="checkbox"/> fair (1 point) <input type="checkbox"/> good (2 points) <input type="checkbox"/> excellent (3 points) Question #4 - <input type="checkbox"/> answered positively (1 point) Question #5 - <input type="checkbox"/> answered positively (1 point) Question #7 - <input type="checkbox"/> fair (1 point) <input type="checkbox"/> good (2 points) <input type="checkbox"/> excellent (3 points)	Maximum 11 Points
5. POST-SECONDARY COMMITMENT: Committed to complete post-secondary education? <input type="checkbox"/> Yes (5 points) <input type="checkbox"/> No (disqualify applicant) <small>Check only one:</small> <input type="checkbox"/> 4 yr. degree (4 points) <input type="checkbox"/> 2 yr. degree (2 point)	Maximum 9 Points
6. RECOMMENDATIONS: Guidance Counselor - <input type="checkbox"/> fair (1 point) <input type="checkbox"/> good (2 points) <input type="checkbox"/> excellent (3 points) Teacher 1 - <input type="checkbox"/> fair (1 point) <input type="checkbox"/> good (2 points) <input type="checkbox"/> excellent (3 points) Teacher 2 - <input type="checkbox"/> fair (1 point) <input type="checkbox"/> good (2 points) <input type="checkbox"/> excellent (3 points) <small>If any recommender indicates they don't know student well enough to provide a recommendation, do not factor that score into final percentage/score. This reduces the total 70 points by that items maximum score.</small>	Maximum 9 Points
7. PARENTAL SUPPORT: From Application - <input type="checkbox"/> fair (1 point) <input type="checkbox"/> good (2 points) <input type="checkbox"/> excellent (3 points) From Interview - <input type="checkbox"/> fair (1 point) <input type="checkbox"/> good (2 points) <input type="checkbox"/> excellent (3 points)	Maximum 6 Points
Subtotal: _____ of _____ points	

TOTAL SCORE (70 points possible - report as percentage):

Please tally all scores from the Criteria Rating Form above, and put the total in the subtotal box. Report final score as a percentage to the right.

%



ADMIT TO UB

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Admission Form (for staff use when admitting new students)

Please ensure that all parts of the form are completed.

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Student Admission Information

Name: _____ Grade: _____

High School: _____

Eligibility: Low Income First Generation At Risk

A student must be low income or first generation to be admitted, 2/3 of all students per grant must be low income & first generation.

Limited English Proficiency: Yes No

Student is not "fluent" in English

At Risk Testing: Reading Math Neither

Check the appropriate box if a student scored lower than novice or apprentice in each subject

Disconnected Youth: Yes No

Age 14-24 in homeless/foster/justice system or unemployed & not enrolled in school

At Risk GPA: Yes No

Check yes if the student's GPA is less than 2.5

In Foster Care: Yes No

Date

Staff Initials

Date Accepted & Letter Mailed: _____

Date Entered into Database: _____

At Risk Math Courses: Pre-Algebra Algebra Neither

Check if a student has not taken these courses by the 8th grade

Date Folder Created: _____

Application Checklist

- Student Application, Release, & Permission Form
- Signatures on Application, Release & Permission Form
- Income Verification (Tax Form, income declaration, etc.)
- Copy of applicant's most recent transcript (grades if freshmen)
- Counselor Recommendation
- Teacher Recommendation 1
- Teacher Recommendation 2
- Intake Interview

Need for Academic Support

Check all needs that apply; star primary need.

- _____ GPA of 2.5 or less
- _____ Not achieved proficient level in 8th grade math or reading
- _____ Not completed pre-algebra/algebra by 10th grade
- _____ Not taking pre-algebra or algebra in 9th grade
- _____ Low educational aspirations
- _____ Lack of opportunity to take college prep/rigorous courses
- _____ Diagnosed learning disability
- _____ Predominately low income community
- _____ Rural isolation
- _____ Interest in careers in math and science
- _____ Foster Care

Notes

Paperwork Completed by

UB Staff Name: _____ Grant Student Admitted to: _____

I certify that all information contained in this application was provided to me by the student, student's family, and/or school staff. I have followed all internal policies, as well as complied with all TRIO legislation and regulations to the best of my knowledge, and this student qualifies for TRIO services in Upward Bound Classic and/or Upward Bound Math-Science program at the date of acceptance.

Signature: _____ Date: _____