**UPWARD BOUND PROGRAM AT MONROE COUNTY COMMUNITY COLLEGE**

Congratulations!

By accepting this application, you have already taken the first and most important step towards making a commitment to your own education. Below are a few points to get you started in the Upward Bound Program.

1. **Your application must be completed entirely** in order to be processed*.* Applications with missing information may be delayed and affect your chances for acceptance into the Upward Bound program.
2. **Eligibility Requirements**

• Be in the 9th or 10th grade at Airport High School, Jefferson High School or

 Monroe High School.

• Have a minimum GPA of 2.0.

• Be a first-generation college-bound student and meet the income requirement for the

 program. *Income requirements are based on the percentage of high income & low income*

 *students currently in the program.*

• Have a need for program services and have the academic potential to succeed in high school

 and college.

• Be a U.S. citizen or permanent resident.

1. **Please make sure the following is included in your application:**
2. **A valid and verifiable Social Security number.**
3. **Income verification** – A copy of your parents’ current tax return, Social Security Statement or printouts from Job and Family Services.
4. Your signed teacher recommendation form (see section E below).
5. A copy of your most recent grade card.
6. **Email the Teacher Recommendation Form** (Link to form is on our website at MCCC) to a teacher whose class you have been enrolled within the past year.
7. **Mail** completed applications to: Monroe County Community College –

 Upward Bound Program, 1555 S. Raisinville Rd., Monroe Michigan 48161.

 **Deliver** the completed application (place in a sealed envelope) to the Upward Bound office at

 your high school.

 Airport High School - Rm 65, Mr. Friedline

 Jefferson High School – JHS Main Office, Ms. Stranyak

 Monroe High School – Main Office

**Email** the online application to your high school coordinator.

 Airport High School – cfriedline@airportschools.com

 Jefferson High School – cstranyak@jeffersonschools.org

 Monroe High School – aquinn@monroeccc.edu or cprenkert@monroeccc.edu

 *If you have any questions, please call the Upward Bound office at MCCC (734) 384-4279 OR*

 *734-384-4106 or contact the Upward Bound Academic Skills Coordinator at your high school.*

**UPWARD BOUND OFFICE USE ONLY**

**Current Cumulative GPA**: Click or tap here to enter text.

**Standardized Test Scores:** Test: Click or tap here to enter text. Grade when taken: Click or tap here to enter text.

Reading/Writing [ ]  P [ ]  PP [ ]  NP MATH [ ] P [ ]  PP [ ]  NP TOTAL SCORE Click or tap here to enter text.

 (P=Proficient, PP=Partially Proficient, NP=Not Proficient)

**Online Upward Bound Program Application 2020 -2021**

Date: **Click or tap here to enter text.**

**STUDENT INFORMATION:**

Student’s Name (Last, First, Middle): **Click or tap here to enter text.**

Gender: **Click or tap here to enter text.**

Birth Date and Place of Birth (city and state): **Click or tap here to enter text.**

Student School ID #: **Click or tap here to enter text.**

**\*Social Security Number is required**: **Click or tap here to enter text.**

Ethnicity: [ ]  African American [ ] Alaskan/Native American [ ]  Asian

 [ ]  Latino/Hispanic [ ]  Native Hawaiian/ Pacific Islander

 [ ]  White/Caucasian [ ]  Other, please enter ethnicity: **Click or tap here to enter text.**

UB Program you are applying for: [ ]  Airport High School [ ]  Jefferson High School [ ]  Monroe High School

Current Grade: **Click or tap here to enter text.** Expected Graduation Yr.: **Click or tap here to enter text.**

Student’s Counselor Name: **Click or tap here to enter text.**

Are you currently enrolled in college prep classes [ ]  Yes [ ]  No

What class(es): **Click or tap here to enter text.**

Please list sibling(s) currently in the UB Program and/or have graduated from the UB Program.

 **Click or tap here to enter text.**

Student Address: **Click or tap here to enter text.**

 House #, Street Name, Apt #

City: **Click or tap here to enter text.** State: **Click or tap here to enter text.** Zip: **Click or tap here to enter text.**

Student Home Phone: **Click or tap here to enter text.**

Student Cell Phone: **Click or tap here to enter text.**

Student Email (other than school email): **Click or tap here to enter text.**

Student School Email: **Click or tap here to enter text.**

**STUDENT AUTOGRAPHY -Send your autobiography in a separate attachment along with this application.**

An autobiography is an account or story of your life. Include any information you feel will assist us in learning as much about you, your interests, and your needs for the Upward Bound Program. Include such things as your birthplace, where you grew up, why you want to participate in Upward Bound, how Upward Bound can assist you, which services you can benefit from, and your goals in life.

* List extracurricular activities you are involved in: **Click or tap here to enter text.**
* How did you learn about the Upward Bound Program? **Click or tap here to enter text.**
* Are you interested in attending college after high school graduation? [ ]  Yes [ ]  No

**Applicant’s Signature: Click or tap here to enter text. Date: Click or tap here to enter text.**

 Typing your name in this box becomes your electronic signature acknowledging the information submitted is accurate.

PARENT/GUARDIAN INFORMATION

Dear Parent/Guardian,

To help the government measure your success, the Upward Bound Director will report the information you provide in this application to the U.S. Department of Education. The Privacy Act protects all information. No one may see the information unless they work with or for the Upward Bound Project or are specifically authorized to determine if you are eligible to participate in the program. The Department of Education has authority to gather information to help make Upward Bound a better program (20 U.S.C. 1231a).

**Preferred Language:** [ ]  English [ ]  Spanish [ ]  Other **Click or tap here to enter text.**

**Student lives with**: [ ]  Both Parents [ ]  Mother [ ]  Father [ ]  Grandparent

 [ ]  Guardian [ ]  Foster Parent

 [ ]  Other, please enter name & relation **Click or tap here to enter text.**

**Mother/Guardian:** Name: **Click or tap here to enter text.**

Cell Phone: **Click or tap here to enter text.** Work Phone: **Click or tap here to enter text.**

Employers Address: **Click or tap here to enter text.** Occupation: **Click or tap here to enter text.**

Email: **Click or tap here to enter text.**

**Mother’s Educational Attainment**:

[ ]  Elementary (K-8) [ ]  High School Diploma [ ] Bachelor’s Degree

[ ]  High School (9-12) [ ]  Some College [ ]  Graduate Degree

[ ]  GED [ ]  Associate Degree [ ]  Unknown

**Father/Guardian:** Name: **Click or tap here to enter text.**

Cell Phone: **Click or tap here to enter text.** Work Phone: **Click or tap here to enter text.**

Employers Address: **Click or tap here to enter text.** Occupation: **Click or tap here to enter text.**

Email: **Click or tap here to enter text.**

**Father’s Educational Attainment**:

 [ ]  Elementary (K-8) [ ]  High School Diploma [ ] Bachelor’s Degree

[ ]  High School (9-12) [ ]  Some College [ ]  Graduate Degree

[ ]  GED [ ]  Associate Degree [ ]  Unknown

**CONFIDENTIALITY OF INFORMATION**

Great care is taken to make sure that the personal information collected from Upward Bound students is kept confidential. Information or records relating to individual Upward Bound students or groups of students who are participating or have participated in Upward Bound projects shall not be disclosed to any person, group, agency or organization without the express permission of the Director, Project Upward Bound, and U.S. Department of Education. When a project or contract terminates, all Upward Bound records in possession of the project or contractor shall be disposed of only by the authority of and in accordance with procedures approved by the Director, Project Upward Bound.

In addition, any officer or employee of the United States or any department or agency thereof who publishes, divulges, discloses or makes known in any manner or to any extent not authorized by law any information coming to him in the course of his employment or official duties or by reason of any examination or investigation made by or return, report or record made to or field with such department or agency or officer or employee thereof, which concerns or relates to the Upward Bound Program shall be subject to fine of not more than $1,000 or imprisoned not more than one year, or both, and shall be removed from office or employment under the provisions of Title 18, Section 1905 or the U.S. code.

**Parent Signature X Click or tap here to enter text. Date Click or tap here to enter text.**

Typing your name in this box becomes your electronic signature acknowledging you understand the information above.

**Student Signature X** **Click or tap here to enter text. Date Click or tap here to enter text.**

Typing your name in this box becomes your electronic signature acknowledging you understand the information above.

 **FAMILY FINANCIAL STATEMENT**

 **If information is not complete, the application cannot be processed**

One of the criteria for admission into the Monroe County Community College Upward Bound program is meeting the income guidelines established by the U.S. Department of Education. Before we can determine your student’s eligibility, we need the following information. Please read carefully and answer all questions.

1. Did you file an income tax return last year? [ ]  Yes [ ]  No

 Gross family income: **Click or tap here to enter text.**

 Taxable family income: **Click or tap here to enter text.**

1. How many dependents were claimed on your income tax form last year? **Click or tap here to enter text.**
2. Total number of persons living in the household (including self)? **Click or tap here to enter text.**
3. Do either you or your student receive any of the following:

Does your family qualify for Public Assistance? [ ]  Yes [ ]  No Case # **Click or tap here to enter text.**

Does your family receive Social Security or SSI? [ ]  Yes [ ]  No

Does your family qualify for Free Lunch? [ ]  Yes [ ]  No

Does your family receive other Income? [ ]  Yes [ ]  No

If yes, specify amount $ **Click or tap here to enter text.** [ ]  weekly [ ]  monthly [ ]  yearly

**If selected for an interview for participation in the Upward Bound Program, bring a copy of your family’s most current Income Tax Return or verification that you are receiving public assistance.**

Federal TRIO Programs - Current-Year Low-Income Levels
(Effective **January 15, 2020** until further notice)

|  |  |  |  |
| --- | --- | --- | --- |
| **Size of Family Unit** | **48 Contiguous States, D.C., and Outlying Jurisdictions** | **Alaska** | **Hawaii** |
| **1** | $19,140 | $23,925 | $22,020 |
| **2** | $25,860 | $32,325 | $29,745 |
| **3** | $32,580 | $40,725 | $37,470 |
| **4** | $39,300 | $49,125 | $45,195 |
| **5** | $46,020 | $57,525 | $52,920 |
| **6** | $52,740 | $65,925 | $60,645 |
| **7** | $59,460 | $74,325 | $68,370 |
| **8** | $66,180 | $82,725 | $76,095 |

For family units with more than eight members, add the following amount for each additional family member: $6,720 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; $8,400 for Alaska; and $7,725 for Hawaii.

The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount.

The figures shown under family income represent amounts equal to 150 percent of the family income levels established by the Census Bureau for determining poverty status. The 2020 poverty guidelines are in effect as of January 15, 2020. Federal Register notice was published January 17, 2020.

**I hereby certify, under penalty of perjury, that my family income**

 [ ]  **Does** exceed the income levels listed above,

[ ]  **Does Not** exceed the income levels listed above,

**based on the size of my family unit**. I understand that my family unit includes myself, my spouse (if applicable) and my dependents. If I am a ward of the court, my family unit includes only myself.

**I also certify that neither parent/guardian of the applicant has a four-year (Baccalaureate) degree.**

 [ ]  **No**, neither parent has a **degree.**

 [ ]  **Yes**, At least one parent has **a** **BA/BS Degree** (4 year)

I also understand that this is a federally funded program, and that this information is subject to review by Federal authorities if the Upward Bound project to which I have applied is audited, and I will be held responsible for the certification made by my signature. I affirm that this information is true and accurate to the best of my knowledge.

**Parent/Guardian Signature: ­­­­** **Click or tap here to enter text.**

Typing your name above becomes your electronic signature acknowledging the information submitted is accurate.

**Date: Click or tap here to enter text.**