Delaware Technical Community College, Stanton and George Campuses

TRiO Upward Bound Classic (UBC)
Application
The TRiO UBC program provides participants with a six-week summer component with academic instruction. During the academic year, students will attend college tours, receive school visits, mentoring, tutoring, college/SAT fee waivers and more.

Instructions
A completed application must consist of the following items:

☐ Income verification
   Copy of parent’s/guardian’s signed Tax Form 1040 and W-2 or verification from governmental source

☐ 100 word essay answering the following questions: (Please attach a separate sheet if needed)
   • Why are you interested in Upward Bound Classic?
   • What are your future goals?
   • How can the Upward Bound Classic program help you reach those goals?

☐ Needs Assessment

☐ Parent Assessment

☐ A copy of your most recent report card, DCAS and official transcript
   • Cumulative GPA must be reported

☐ Two (2) completed recommendation forms
   • One completed by a guidance counselor and the second by a teacher

Please double check the application before mailing.
✓ Complete the entire application with your parent(s)
✓ Fill in all parts/spaces of the application
✓ Provide copies of income verification (1040 and W-2, etc)
✓ Complete the 100-word essay
✓ Have your counselor provide the most recent report card and official transcript
✓ Get recommendation letters from your counselors and teachers
✓ Obtain parent signature on the UBC application to permit the counselor to release information regarding your grades and test scores

Please note:
• It is strongly advised you return your application immediately
• Enroll early to take advantage of program services and activities
• Applications will not be reviewed unless they are filled in their entirety
• Applications must be completed in black or blue ink

Mail your completed application to:
Delaware Technical Community College
Upward Bound Classic Program, Room 408
Attn: Toni De Luz
300 North Orange Street
Wilmington, DE 19801
Phone 302.657.5120 | Fax 302.657.5119

For Office Use:
Date Received ________________________________
Project Entry Date ______________________________
Applicant Name ________________________________
Eligibility  ____ LI  ____ FG  ____ LIFG

Revised 03/06/18
Name _____________________________________________

☐ Male ☐ Female  DOB ________________  Age ______

SS# __________________ Email __________________

Address ________________________________________

____________________________________

Phone __________________ Mobile ____________

Have you ever been on probation or convicted of a juvenile crime? ☐ Yes ☐ No

If yes, please explain: ____________________________

____________________________________

How did you hear about UBC? __________________________

____________________________________

Race and Ethnicity Verification
This section must be completed by a parent or guardian as required by the Department of Education.

Please indicate ethnic background by checking all that apply:

Hispanic/Latino ☐ yes ☐ no

Select one or more races from the five racial groups listed below (if applicable):

☐ American Indian/Alaskan Native ☐ Asian

☐ Black or African American ☐ White

☐ Native Hawaiian or Other Pacific Islander

Eligibility - U.S. Status

☐ U.S. Citizen ☐ Permanent Resident* ☐ Visa

☐ Other* (please list) ______________

*Permanent Resident or other must provide official copies of support documentation.

School Information

Name of current middle or high school __________________

____________________________________

Address ________________________________________

____________________________________

Phone __________________ Mobile ____________

Your counselor’s name ____________________________

____________________________________

Present grade level (check one)  ☐ Rising 9th Grader

☐ 9 ☐ 10 ☐ 11

You must have completed the eighth grade to be eligible and be at least 13 years of age. Please list the name of the school being attended in the fall if different from school above.

____________________________________

Are you currently in a TRiO program? ☐ Yes ☐ No

If you answered no, continue to the next page.

If you answered yes, continue with the questions below:

☐ Upward Bound Math-Science

☐ Educational Talent Search

☐ Are you transferring from another UBC program?

Where did you attend? ____________________________

____________________________________

Name of Project Director __________________________

Address ________________________________________

____________________________________

Phone __________________

U.S. Department of Education Reporting Requirements

Are you a person with a disability as defined by the Americans with Disability Act (42 U.S.C. 12101 et seq.)? ☐ Yes ☐ No

Do you require accommodation based upon a physical/mental impairment (as defined by the ADA)? ☐ Yes ☐ No

If you require specialized accommodations based upon a disability, please bring this to the attention of the program manager who will work with appropriate personnel to address individual needs. Disability documentations must be submitted for consideration of reasonable accommodation(s).
Applicant Information

At the time of the initial UBC enrollment, were you homeless as defined by the McKinney-Vento Homeless Assistance Act? □ Yes □ No
Please specify: ____________________________

At the time of the initial UBC enrollment, were you living in a foster care setting? □ Yes □ No

At the time of the initial UBC enrollment, were you involved in the juvenile justice system for any of the following?

- Truancy □ No □ Yes Violating curfew laws □ No □ Yes
- Running away □ No □ Yes Violating underage liquor laws □ No □ Yes
- Ungovernability/Incorrigibility □ No □ Yes Other, specify: ____________________________

ADA Definitions of Qualified Disability

Under the ADA, an individual with a disability is a person who:
1. Has a physical or mental impairment that substantially limits one or more major life activities;
2. Has a record of such an impairment; or
3. Is regarded as having such impairment.

A physical impairment is defined by the ADA as: Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine.

A mental impairment is defined by the ADA as: Any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

NOTE: The ADA does not list all conditions or diseases that make up physical, mental, and emotional impairments, because it would be impossible to provide a comprehensive list given the variety of possible impairments.

McKinney-Vento Homeless Assistance Act

SEC. 725.DEFINITIONS.
For purposes of this subtitle:
(2) The term homeless children and youths’ means —
(A) Individuals who lack a fixed, regular, and adequate nighttime residence; and
(B) Includes —
   (i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement;
   (ii) children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 103(a)(2)(C));
   (iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and
   (iv) migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).

Involvement in the Juvenile Justice System

Juvenile delinquency cases. These cases involve minors who have committed crimes — meaning that if the crime had been committed by an adult, the matter would be tried in regular criminal court.

Juvenile dependency cases. Cases involving minors who are abused or neglected by their parents or guardians — called “juvenile dependency” cases — are also heard in juvenile court. In a juvenile dependency case, the judge will ultimately decide whether or not a minor should be removed from a problematic home environment.

Cases involving status offenses. A status offense is a violation that only applies to minors. Examples include truancy (skipping school), ungovernable/incorrigible, curfew violations, running away, and underage drinking.
Parent/Guardian Information

Who does the applicant live with? (check all that apply)

- Both natural parents
- Mother
- Father
- Stepmother
- Stepfather
- Grandparent
- Legal guardians (support documentation required)
- Foster parent
- Relative
- Other: Explain __________________________

Parent/Guardian I

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<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Address</td>
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<tr>
<td>Phone</td>
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<tr>
<td>Mobile</td>
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<td>Work Phone</td>
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<tr>
<td>Email</td>
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**CFR part 645.3 (b)(1)**

Did you graduate from college with a 4-year degree?  
☐ Yes  ☐ No

If no, what is the highest level of education you completed?

If yes, what is the name of the college?

Occupation ____________________________

Employer phone _________________________

Parent/Guardian II

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
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<tr>
<td>Phone</td>
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<td>Mobile</td>
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**CFR part 645.3 (b)(1)**

Did you graduate from college with a 4-year degree?  
☐ Yes  ☐ No

If no, what is the highest level of education you completed?

If yes, what is the name of the college?

Occupation ____________________________

Employer phone _________________________

Eligibility  **34 CFR part 645.3 (b)(2)**

Total number of people in family household supported by family income?  

Did you file income tax returns last year?  
☐ Yes  ☐ No  ☐ Unknown

If you answered yes, what was your filing status?  
☐ Single with dependents (Head of Household)  
☐ Single with no dependents  
☐ Married filing separately  
☐ Married filing jointly

What was the total family income *before taxes* last year?  

*This figure must match supporting documents such as those from your income tax returns or W2 forms. Income may include wages, AFDC and/or public assistance, unemployment or workman's compensation, social security benefits, V.A. benefits or pensions.

You must provide copies of your signed income tax returns and W2 forms or verification of income from a government source.

Parent/Guardian Signature ____________________________  Date ____________________________
TRiO Upward Bound Classic
Consent and Release Information Certification

By signing this application, I certify that I have read this application and the information given is accurate and factual. I/we give consent for my/our child to participate in the Upward Bound Classic initiative during the academic school year and “Summer Program,” if they are selected. It is further understood that selection is the responsibility of the Admissions Committee and the decisions of this Committee are final. Additionally, I/we give consent for my/our child to participate in all program activities and to use private/public transportation to participate in on and off-campus activities. I/we also consent for my/our student to receive routine and/or emergency medical services (if necessary). Moreover, I/we give permission for my/our child to be photographed and/or interviewed by the press for program promotion only.

I/we authorize the Upward Bound Classic program to secure a copy of my/our child’s Student Success Plan, report card, transcript, State Test Scores, PSAT, SAT, ACT, and the Home Access Center (HAC) which requires the user ID and password, as well as any other educational diagnostic assessment scores now and throughout the duration of their participation in the program. Communications with counselors and teachers regarding such matters as academic achievement, performance issues and/or behavioral issues will be submitted to Upward Bound Classic upon request. I/we also authorize a representative from Upward Bound Classic to visit my/our child at their high school bi-weekly to satisfy the requirements of the program. Falsifying this information will result in the participant being denied entrance into the program and/or expulsion from the program.

________________________________________  __________________________________________
Parent Name (print)                              Parent Name (print)

________________________________________  __________________________________________
Signature                                  Date                                      Signature                                    Date

By signing this application, I certify that I have read and understand this application and that the information given is accurate and factual. To the extent required by law, I consent to the Upward Bound Classic program receiving my schedule from any post-secondary institution in which I may be enrolled.

I hereby give permission to TRIO personnel, the access to and/or the release of information from the National Student Clearing House and/or any of the higher educational institutions in which I attend, or have attended. The exchange of this information may include - but is not limited to; Course Schedules, Transcripts, Counselor or Advisor Reports, degree obtained, financial aid reports and any other information necessary for the purpose of tracking my college enrollment, persistence, progression and degree completion.

________________________________________
Student Name (print)

________________________________________
Student Signature                                  Date
Student Needs Assessment Information

Answers to the following questions will help us determine your motivation and preparation to undertake college work. Please answer as honestly as possible.

List two (2) careers of interest

1. ____________________________________________ 2. ____________________________________________

Have you ever thought about dropping out of school?  □ Yes  □ No

How do you feel about school and your teachers? ____________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

What are your career and educational goals? ____________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

What college would you like to attend?

_____________________________________________________________________________________

Have you attempted to contact your college of choice for information?  □ Yes  □ No

Do you know the procedures to enroll in your college of choice?  □ Yes  □ No

Do you have information about financial aid programs available to assist you beyond high school?  □ Yes  □ No

Do you attend a tutorial program at your high school?  □ Yes  □ No

In which academic subject(s) do you need assistance? ____________________________________________

_____________________________________________________________________________________

Please inform us of any other areas in which we may assist you and/or if you qualify as disabled under the ADA definitions. __________

_____________________________________________________________________________________

Is there any additional information you would like Upward Bound Classic to consider in determining your admission to the program?

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

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Parent/Guardian Assessment Information

Your answers are kept confidential and are used to assess your child's need for help and potential. Upward Bound Classic is a program to help a student with current issues as they prepare for adult/college life.

1. Why do you want your son/daughter to be in the Upward Bound Classic (UBC) program?

2. Are you willing to support our goal of having your child pursue academic excellence with classes in high school and extra work with UBC classes? How will you assist in ensuring your child studies and completes all assigned school and UBC work?

3. How do you think your child could do better in school? What are some difficult subjects for them? What are the reasons why they are not always focused on academics?

4. What are some special qualities your student possesses?

5. What are some personal or motivational issues/problems for your child?

6. What chores and/or responsibilities does your child have around the house?

7. Being aware that UBC is a seven-year commitment, are you willing to make the necessary arrangements for your child and your family to participate in all aspects of the program (i.e. transportation, homework time, communication with staff, planning family events around UBC events, parent meetings) and assisting UBC with tracking your child until they earn a four-year degree?

Parent I/Guardian I Signature                                             Date

Parent II/Guardian II Signature                                           Date
Parent/Guardian Questions or Concerns

This page is available for you to voice any questions or concerns regarding the Upward Bound Classic program. Every effort will be made to address any questions or concerns upon receipt of this application.

Please print (use black or blue ink) or type.

1. ____________________________________________________________
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2. ____________________________________________________________
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3. ____________________________________________________________
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