



CALIFORNIA STATE UNIVERSITY, LONG BEACH UPWARD BOUND



STUDENT PARTICIPATION APPLICATION

5500 Atherton Street, Suite #326 / Long Beach, CA 90815

P. (562) 985-5520 / F. (562) 985-7648 / www.csulb.edu/programs/upward-bound/

Upward Bound is a non-profit organization that is federally funded by the U.S. Department of Education

IMPORTANT: *When submitting this application, be sure that a copy of all the following documents is attached. Only complete applications will be considered. Please print in ink or type.*

- 1040 Income Tax Form or Proof of Income High School Transcripts Student Essay

Application Deadline: _____ UB Counselor: _____ Phone Number: _____

A. STUDENT'S PERSONAL INFORMATION

Name: _____
Last First Middle

Address: _____
Street & Apt # City Zip

Home Telephone: (____) _____ Student's Cellphone: (____) _____

E-mail Address: _____
Student's E-mail Parent/Guardian's E-mail

Emergency Contact: _____ Phone Number: _____
Name & Relationship

High School: _____ Grade Level: _____

Are you a United States Citizen? Yes No Gender: Male Female

Birth Place: _____ Birth Date: ____ / ____ / ____ Social Security: ____ - ____ - ____
City & State or Country M D Y

Ethnicity:

- American Indian / Alaskan Native
 Latino / Hispanic
 Caucasian / White
 African American / Black
 Asian
 Pacific Islander
 Other (Specify) _____

Do you have any physical condition or disability, which requires special treatment or other considerations?

Yes No *If yes, please explain:* _____

Are you a student with a migrant worker agricultural family background? Yes No

If yes, please answer Section B, if no skip to Section C.

B. STUDENT MIGRANT INFORMATION

Migrant farm workers: A seasonal farm worker whose employment required travel, which kept the farm worker from returning to a permanent home within the same day.

Seasonal farm worker: A person who was employed on a farm on a temporary or seasonal, not year-round basis.

Eligibility – Student may be eligible to participate in Upward Bound in one of the following three ways as a migrant or seasonal farm worker:

1. Have you or your parents spent a minimum of 75 days during the past 24 months in migrant or seasonal farm work?

Yes No

Work may include: Any activity directly related to the production of crops, dairy products, poultry, livestock, the cultivation, or harvesting of trees, or any activity directly related to fish farms, packaging, canning, or agricultural production. This includes worked performed for wages or personal subsistence.

2. Have you participated in or are you eligible for a high school Migrant Education Program?

Yes No

3. Have you participated in any program under the Workforce Investment Act for migrant and seasonal farm workers? Please provide information on the program and the duration in that program.

Yes No Program Name: _____ Duration (dates): _____

C. GRADUATION INFORMATION

Indicate the type of training / education that you are interested in after you have completed high school:

Vocational (Trade) Community College 4-Year College / University
 Technical School Armed Forces Undecided

What are your career interests? _____

D. GENERAL INFORMATION

How did you find out about the Upward Bound Program? _____

Why do you want to join Upward Bound? _____

Do you need tutoring assistance? Yes No *If yes, in what subject(s):* _____

List any community or extra-curricular activities that you have been or are currently involved in: _____

Your signature below indicates that you are interested in participating in the CSULB Upward Bound Program to include all Mandatory Saturday Tutorials and Workshops. The information provided above is true to the best of your knowledge.

Student's Signature

Date

E. STUDENT ESSAY

Write or type a three-paragraph essay about a challenging, or exciting experience describing how you felt and what you learned from that experience. **Essay must be stapled to the back of this application and must include the students' full name, grade level, and school on the top right hand corner of your paper.**

F. PARENT / GUARDIAN INFORMATION – To be completed by a parent or guardian

Applicant's parent(s) or guardian(s): Please provide the following information in order for us to better evaluate your son or daughter's eligibility for Upward Bound.

Father's Name: _____ Occupation: _____

(If guardian) Relationship to Student: _____

Address: _____
Street & Apt # City Zip

Home Telephone: (____) _____ Cellphone: (____) _____

Are you a college graduate? Yes No

If yes, indicate College Attended: _____ Degree earned: _____

If no, indicate highest-grade level completed: 1 2 3 4 5 6 7 8 9 10 11 12 / Diploma: Yes No

Mother's Name: _____ Occupation: _____

(If guardian) Relationship to Student: _____

Address: _____
Street & Apt # City Zip

Home Telephone: (____) _____ Cellphone: (____) _____

Are you a college graduate? Yes No

If yes, indicate College Attended: _____ Degree earned: _____

If no, indicate highest-grade level completed: 1 2 3 4 5 6 7 8 9 10 11 12 / Diploma: Yes No

If you did not file an income tax return for the most recent year, please indicate your source(s) of income:

- Social Security AFDC Benefits Veteran's Benefits Unemployment Disability
- Other, specify: _____

I fully support my child's application for admission into the Upward Bound Program and I will attend an interview with my child. I further agree that if my child is admitted into the program I will participate in Parent Support Group meetings, orientation sessions, and workshops organized by the program, as required, for the purpose of improving my child's chances of personal and educational success. I certify that the above information is true and complete to the best of my knowledge. I hereby, grant permission to the personnel of my child's school to provide copies of transcripts, test scores, and academic progress reports to the Upward Bound staff.

Father / Guardian's Signature

Date

Mother / Guardian's Signature

Date