

Upward Bound TRiO Programs

ABOUT US

Upward Bound (UB) is a TRiO program funded by a grant from the Department of Education. Our program works with students from three target high schools in the cities of Dickinson, La Marque and Hitchcock. COM-UB provides students with the support and resources that are necessary to attain their post-secondary educational goals.

All Upward Bound activities are free of charge to participants—there are absolutely no costs involved.

SCHOOL YEAR PROGRAM

During the school year, COM-UB provides academic tutoring at each high school once a week after school. Students receive assistance with schoolwork, study skills, career exploration, college admissions and financial aid/scholarships. One or two Saturdays per month we meet at College of the Mainland for academic and cultural enrichment activities, ranging from campus visits, guest speakers and field trips.

**NOTE: College credit is not earned through the classes taken with Upward Bound. These courses are to strengthen knowledge on the core classes and prepare the student for the upcoming school-year.*

SUMMER PROGRAM

COM-UB's summer program is held from the beginning of June to July (six weeks). Students take classes Monday through Friday at COM's main campus, which include core classes of foreign language, science, English, math and electives such as physical education. Our final week is an all-expenses-paid trip to a major city with fun-filled events.

WHO CAN APPLY?

Student must meet the following eligibility criteria:

1. Currently attending:
 - Dickinson, La Marque or Hitchcock school districts
2. Completed the 8th grade but has not entered the 12th grade
3. Be a U.S. Citizen or U.S. legal resident
4. Demonstrate academic potential
5. Meet income guidelines (*Based on family size*)
and/or
Must be a first-generation college student
(Neither Parent has a Bachelor's degree)

HOW TO APPLY

Students interested in joining Upward Bound should complete the application and return it to 1) Your High school counselor or 2) Drop-off/Mail/Fax forms to UB Office.

- _____ 1. Complete the attached application by supplying the proper data requested.
- _____ 2. Submit a copy of parents' 1040 or 1040A Income Tax Return for the previous year *AND/OR* sign the attached affidavit. Tax returns must have the signature of parent(s)/guardian(s).
- _____ 3. Submit a copy of your high school transcript and standardized test scores.
- _____ 4. Submit three (3) Teacher Recommendation Forms. (*Forms are attached to this application*)

For questions please contact:

Upward Bound Office

Main #: 409-933-8525
Fax #: 409-933-8029
1200 Amburnd Road
Student Center- Suite 212
Texas City, TX 77591
trioub@com.edu

TRiO Director

Office #: 409-933-8273
Fax #: 409-933-8029
1200 Amburnd Road
Student Center- Suite 212
Texas City, TX 77591

TRiO Coordinator

Office #: 409-933-8298
Fax #: 409-933-8029
1200 Amburnd Road
Student Center- Suite 212
Texas City, TX 77591

Upward Bound Advisor

Office #: 409-933-8136
Fax #: 409-933-8029
1200 Amburnd Road
Student Center- Suite 212
Texas City, TX 77591

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**Upward Bound
TRiO Programs
Student Application**

All information is confidential.

PART I: STUDENT INFORMATION

Please Complete Form in Ink

Name: _____
Last First Middle

Social Security #: _____ T-shirt size: _____ Gender: ___Female ___Male

Parent Phone #: _____ Student Phone# _____

Mailing Address: _____
Street County

City State Zip Code

Email: _____ Age: _____ Date of Birth: _____

Are you a U.S. citizen? ___ Yes ___ No If not, list your alien registration number and attach a two-sided copy of your I94 or green card. _____

Do you have any physical condition(s) or handicap that requires special medication, medical treatment, diet, allergies or other considerations? ___ Yes ___ No If yes, please explain: _____

Ethnic group: ___ Asian ___ Black ___ Hispanic ___ Native American ___ White ___ Other

Do you have a documented disability? ___ Yes ___ No If yes, you must provide documentation from your physician.

Are you in foster care? ___ Yes ___ No If yes, you must provide documentation from the caseworker.

PART II: STUDENT EDUCATIONAL INFORMATION

Name of School: _____ Grade Level: _____ Current GPA: _____

School curriculum: ___ Academic ___ Business ___ Careers ___ Vo Tech ___ General

Name of school Counselor: _____

List the classes you are currently taking: _____
1st period 2nd period

_____ 3rd period 4th period 5th period

_____ 6th period 7th period

List your extra-curricular activities: (band, sports, honor society, church group, scouts and hobbies)

Are you currently working? ___ Yes ___ No

If yes, where do you work? _____ Hours per week: _____

Following high school, which of the following have you considered? ___ College ___ Military ___ Work

FAMILY INFORMATION
(To be filled out by the Parent/Guardian)

PART III: PARENT/GUARDIAN INFORMATION:

Parent/ Guardian #1

Name: _____

Address: _____

Phone: _____

Occupation: _____

Employer: _____

Highest grade completed in school: _____

Did you receive a Bachelor's Degree? ___ Yes ___ No

What is your relationship to the student? _____

Does student live primarily with you? ___ Yes ___ No

Parent/ Guardian #2

Name: _____

Address: _____

Phone: _____

Occupation: _____

Employer: _____

Highest grade completed in school: _____

Did you receive a Bachelor's Degree? ___ Yes ___ No

What is your relationship to the student? _____

Does student live primarily with you? ___ Yes ___ No

What is the total number of persons (including the student applying) living in your household? _____

List all persons in your household, excluding yourself by providing name, age and relation to student:

<u>Name</u>	<u>Age</u>	<u>Relationship to student</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has any family members participated in an Upward Bound Program? _____ Yes _____ No

If yes, please provide:

<u>Name</u>	<u>relationship to student</u>	<u>Upward Bound Program attended</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

By signing below, I verify that all of the above information is true and correct to the best of my knowledge, and that nothing is concealed or omitted.

Signature: _____

Date: _____

FINANCIAL INFORMATION-AFFIDAVIT

The College of the Mainland Upward Bound Program is sponsored by a grant from the U.S. Department of Education. Federal regulations require that a portion of the Upward Bound participants meet certain family income guidelines. The income information asked below will be held in strictest confidence and will be released to no one except the Department of Education representatives for audit purposes. All requested income documentation is required to complete the application.

Student's Name: _____

1) IF YOU WERE REQUIRED to file a tax return last year, complete this section:

PARENT/GUARDIAN INCOME FOR LAST CALENDAR YEAR FOR THOSE REQUIRED TO FILE WITH THE IRS

Total number of exemptions/dependents claimed: _____ (see Line 6d on tax return 1040 and 1040A; 1040EZ- N/A)

\$_____, _____ .00 Taxable Income (see Line 23 on tax return 1040, Line 27 on 1040A, or Line 6 on 1040EZ;)

\$_____, _____ .00 Total amount of itemized deductions (see Line Line 40 on 1040, Line 24 on tax return 1040A ; 1040EZ- N/A, write in "0" if deductions were not itemized)

-The above income figures are (check one): _____ from a completed IRS Form _____ estimated, will file -

Check Filing Status:

- Single, Married / filed separately, Married / filed jointly, Head of household

2) IF YOU WERE NOT REQUIRED to file a return last year, complete this section:

TO BE COMPLETED BY PARENT/GUARDIANS NOT REQUIRED TO FILE A TAX RETURN AND/OR WHO RECEIVED ANY TYPE OF PUBLIC ASSISTANCE FOR THE LAST CALENDAR YEAR

-A tax return was not filed because (check off those items that applied to your situation)

- Amount of total income earned..... Indicate Annual Income \$
We received public assistance.....Indicate Monthly Assistance Income \$

-Check each type of assistance you received:

- Social Security Benefits
Temporary Aid to Needy Families (TANF)
Child Support
Rent Subsidies
Food Stamps

-Check Marital Status:

- Single, Married, Separated, Divorced, Widow, Head of Household

- Indicate number of dependent children _____

-Total Number in Household _____

AFFIDAVIT: I certify that the above information is true and correct and all income is reported. The sponsor, auditor or other official may verify it and that deliberate misrepresentation may subject me to prosecution under applicable State/Federal laws. If I do not give further proof when asked, the applicant will not be accepted.

Mother's / Guardian's Signature Social Security Number Date

Father's / Guardian's Signature Social Security Number Date

This affidavit will serve as proof of income; however, we encourage you to also submit a signed copy of your family's most recent federal income tax return (Form 1040, 1040A, or 1040 EZ) or other income documentation. Please call the Upward Bound Office prior to submitting the application if you have any questions.

 College of the Mainland
UpwardBound-TRiO Programs
Teacher Recommendation Form

Student: Fill out the top portion of this form then give it to a teacher, counselor or school staff to fill out. Do not give form to a relative. **Each student must submit three (3) recommendation forms.**

Student Name: _____

School: _____ Grade: _____

Teacher/ Staff:

UPWARD BOUND is an educational program designed to assist students who have academic potential. The goal is to have participants graduate from high school and enter some type of post-secondary education or training.

The information will be kept confidential, but must be on file before an applicant can be considered for selection. Your cooperation in completing and returning this form is appreciated.

1. What qualities does the student possess that will help him/her achieve success? _____

2. What weaknesses, both academic and social should Upward Bound be aware of with this student?


3. Do you feel the student is committed to improving himself/herself? Why? _____

4. Does the student have any problems with attendance or tardiness? _____

5. Does the applicant have any post-secondary plans that you are aware of? Yes _____ No _____

If Yes, please elaborate: _____

6. Other comments or observations that might help us to serve this student better: _____

 College of the Mainland
Upward Bound- TRiO Programs
Teacher Recommendation Form
-Continued-

Please Check All That Apply

	Excellent	Good	Average	Below Average	Does Not Apply
Attendance					
Basic academic skills					
Reading skills					
Reading Comprehension skills					
Math Comprehension skills					
Classroom participation					
Self-confidence					
Self-responsibility					
Self-discipline					
Motivation					
Maturity					
Positive attitude					
Dependability					
Creativity					
Leadership ability					
Rapport with peers					
Rapport with teachers					
Rapport with adults					
Assertiveness					

Faculty/Staff Name- (Print)

Title/ Subject

Date

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