

The Upward Bound Math & Science Program at Shawnee State University in Portsmouth, Ohio is a federally funded educational program which prepares high school students for post secondary education. If you are interested in preparing for college through our program, please complete this application.

Application must include:

- _____ Two Teacher Recommendations (forms enclosed)
- _____ Guidance Counselor Recommendation
- _____ A signed copy of all pages of your Federal Income Tax Forms, as well as documentation to verify your other sources of income such as TANF and SSI
- _____ Signatures on the Release Form and Required Signature Box
- _____ One-page essay explaining why you want to go to college and how will Shawnee State University's Upward Bound Math & Science program help you reach your goal?

For more information, please contact:

Upward Bound Math & Science
Shawnee State University
940 Second Street
Portsmouth, Ohio 45662-4344
Phone: 740-351-3133

Name _____
Last
First
Middle

Mailing Address _____
Street/P.O. Box
City
State
Zip Code

Social Security No. _____ Phone Number _____

Birth Date _____ Gender: M ___ F ___

Grade Point Average _____

U.S. Citizen: Yes No

Ethnic Background: American Indian / Alaskan Native Caucasian / White
 Native Hawaiian or other Pacific Islander Asian
 African American / Black Hispanic / Latino
 Other

High School _____ Present Grade _____

Office Use Only – Please do not write in this section

Transcript Income Info Selection Rating Scale _____ Eligibility Low Income and First Generation

Low Income Only

Target School Number _____ Standardized Test _____ First Generation Only

Date of Entry _____ Accepted Waiting List Not Accepted

Academic Need

Low high school GPA Low achievement test scores Low educational aspirations Low income community

Lack of opportunity, support and/or guidance to take challenging college prep courses Rural Isolation

Lack of confidence, self-esteem and/or social skills Lack of career goals Other

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ELIGIBILITY for UBMS is determined by income and whether or not the student will be a first generation college student. For the purpose of UBMS, first generation college student is defined as a student whose parents have not obtained a bachelor’s degree. Student must be eligible in at least one of these two areas. Eligibility does not guarantee acceptance into the program.

INCOME INFORMATION *to be completed by parent or guardian with whom the applicant lives. We are required by the United States Department of Education to obtain income information from all students receiving free services. Since you or your student has indicated an interest in receiving our assistance, please complete the following information.*

For income verification, please attach a copy of your most recent tax return, which shows your taxable income. This amount is used to determine income eligibility for the UBMS Program.

If you did not file an income tax return last year, please complete the following for the most recent year. *To verify this information and meet the Department of Education requirements, we need a statement from a case worker or a copy of the document confirming this information.*

\$ _____ <i>Social Security Disability Income</i>	\$ _____ <i>Retirement/Pension</i>
\$ _____ <i>TANF</i>	\$ _____ <i>Veteran’s Benefits/GI Bill</i>
\$ _____ <i>Food Stamps</i>	\$ _____ <i>Unemployment</i>
\$ _____ <i>Wages</i>	\$ _____ <i>Child Support</i>
\$ _____ <i>Supplemental Security Income</i>	\$ _____ <i>Social Security</i>
\$ _____ <i>Other (please specify)</i> _____	

Number of members in household: Adults _____ Children _____

Release Form and Required Signatures

I hereby give my permission for the guidance office to send a copy of my transcript, school records, Progress Report, and test scores to the UBMS program at Shawnee State University. That information contained in this application, is for the use of the UBMS program only and will be held in the strictest confidence. (**Note:** For our own records, it is necessary that you complete this form in its entirety.) We certify that the information contained on this form is correct and complete to the best of our knowledge by affixing our signatures below.

Student’s Signature _____

Parent’s/Guardian Signature _____

Date _____

FAMILY INFORMATION

Father's Name _____

Father's Occupation _____

Father's Employer _____

Employer's Phone Number _____

- Father's Educational Level:
- Less than high school
 - High school graduate
 - Some college hours
 - Two-year college degree
 - Four-year college degree
 - Completed vocational training

Mother's Name _____

Mother's Occupation _____

Mother's Employer _____

Employer's Phone Number _____

- Mother's Educational Level:
- Less than high school
 - High school graduate
 - Some college hours
 - Two-year college degree
 - Four-year college degree
 - Completed vocational training

Number of student's brothers or sisters who completed college or vocational school _____

- Parent's Marital Status:
- Married / living together
 - Married / living separately
 - Single
 - Divorced
 - Mother Deceased
 - Father Deceased

List the name of each person that is a member of your household and their relationship to you (the student):

NAME	RELATIONSHIP
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Student Application

Student Name _____

Guidance Counselor Recommendation

Curriculum Track: College Prep General Ed. Both

If you marked both, please explain.

Grade Point Average

Cumulative GPA: _____ Current GPA: _____

In what subjects does the student excel? _____

In what subjects does the student need improvement? _____

Test Proficiency

Each potential participant must demonstrate a need for academic support. Shawnee State University Upward Bound Program can determine this by the student's standardized test scores and proficiency level.

Ohio 8th grade achievement

(Passed? Y=Yes; N=No; E=Exempt)

Not Applicable _____ Math _____ Reading _____

OGT (Ohio Graduation Test)

(Passed? Y=Yes; N=No; E=Exempt)

Math _____ Writing _____ Reading _____ Social Studies _____ Science _____

ACT/PLAN

Not Applicable _____ Math _____ English _____ Reading _____ Science _____ Composite _____

SAT/PSAT

Not Applicable _____ Math _____ Verbal _____ Composite _____

Other (Please Indicate) _____

RECOMMENDATION

_____ **Yes, I recommend this student for the SSU UBMS Program.**

Please explain in the space provided below.

_____ **No, I do not recommend this student for the SSU UBMS Program.**

Please explain in the space provided below.

Guidance Counselor Signature

_____/_____/_____
Date