

**Community College of Philadelphia
Division of Access and Community Engagement**



New Student Application

Please return to:

**TRIO Upward Bound
Community College of Philadelphia
1700 Spring Garden Street
Winnet Student Life Building, S3-14
Philadelphia, PA 19130-3991**

Phone: (215) 751-8780

Fax: (215) 972-6385

Affirmative Action Policy: Community College of Philadelphia does not discriminate on the grounds of race, color, national origin, gender, age, disability, sexual preference, or status as a disabled veteran or veteran of the Vietnam era in the administration of any of its educational programs, activities or employment in accordance with applicable Federal statutes and regulation.

STUDENT INFORMATION

Full Name: _____ Date: _____
Social Security #: _____ - _____ - _____ Date of Birth: ____/____/____ Gender: Male Female
High School: Benjamin Franklin HS South Philadelphia HS Current Grade: _____
Student ID#: _____ StudentNet Password: _____
Address: _____ City and Zip Code: _____, _____
Phone Numbers: Home (_____) _____ - _____ Student Cell (_____) _____ - _____
Email Address: _____

Please indicate your **citizenship status**:

- U.S. Citizen B1 (Visitor Visa) F1 (Student Visa)
- I1-30 (Family Sponsorship Visa) Permanent Resident Special Refugee
- Other

*** This information is not used to determine your eligibility for the program ***

Please indicate your **race/ethnicity** (check ALL that apply):

- Hispanic/Latino American Indian/Alaska Native Asian
- Black/African American Native Hawaiian/Other Pacific Islander White
- Other, please specify: _____

PARENT/GUARDIAN 1 INFORMATION

Full Name: _____ Relationship to student: _____
Address: _____ City and Zip Code: _____, _____
Phone Numbers: Home (_____) _____ - _____ Parent/Guardian Cell (_____) _____ - _____

PARENT/GUARDIAN 2 INFORMATION

Full Name: _____ Relationship to student: _____
Address: _____ City and Zip Code: _____, _____
Phone Numbers: Home (_____) _____ - _____ Parent/Guardian Cell (_____) _____ - _____

**ELIGIBILITY FORM AND INCOME VERIFICATION
FOR PARENTS AND/OR GUARDIANS**

Student's Name: _____

According to the United States Department of Education, in order to be eligible for TRIO Upward Bound participation a student must be from a low-income household **OR** a family where neither parent has a 4-year Bachelor's degree **OR** be at academic risk for failure.

The information that is requested in this application will be treated in a confidential manner. Parents/guardians must complete SECTIONS 1, 2, and 3 as well as sign and date the bottom of the form for the student to be considered for entrance into the program.

HOUSEHOLD INCOME INFORMATION

- 1) Including yourself, please **GIVE THE TOTAL NUMBER** of people in your household: _____
- 2) Using a pen, **PLEASE PLACE A CHECK** () next to your household **annual adjusted gross income** level (found on line 37 of your IRS 1040 tax form, line 21 of your IRS 1040A tax form, and line 4 of your IRS 1040-EZ tax form).
- | | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$18,210 | <input type="checkbox"/> \$18,211 - \$24,690 | <input type="checkbox"/> \$24,691 - \$31,170 |
| <input type="checkbox"/> \$31,171 - \$37,650 | <input type="checkbox"/> 37,651 - \$44,130 | <input type="checkbox"/> \$44,131 - \$50,610 |
| <input type="checkbox"/> \$50,611 - \$57,090 | <input type="checkbox"/> \$57,091 - \$63,570 | <input type="checkbox"/> \$63,571 or above |
- a. For income verification, please include a copy of either if available
- Parent/guardian's most recent 1040 tax form,
 - Proof of public assistance (access card),
 - Proof of social security, or
 - Other benefits

PARENT'S EDUCATIONAL ATTAINMENT INFORMATION

- 3) Using a pen, **PLEASE PLACE A CHECK** () next to what best describes your educational background.

Mother

- No College
- Some College
- Certificate Program
- 2-year Associates Degree
- 4-year Bachelor's Degree or Higher

Father

- No College
- Some College
- Certificate Program
- 2-year Associates Degree
- 4-year Bachelor's Degree or Higher

I declare that the information provided on this application reflects my true family size, income level and parent/guardian's educational background.

Parent/Guardian Signature: _____

Date: _____

ACADEMIC INFORMATION

Please mark if you are enrolled in any of the following types of courses (mark all that apply)

Honors Advanced Placement Special Education

English as a Second Language (circle one): 1 2 3 4 5

Do you have an Individualized Education Program (IEP)?

Yes No

If you are in 10th grade or above, did you pass Algebra 1?

Yes No Not Applicable, I'm in the 9th grade

If you are in 10th grade or above, what is your grade point average (GPA)? **

4.00 – 3.50 3.49 – 3.00 2.99 – 2.50 2.49 and Below

Are there any suspensions or expulsions on your school records? Yes No

If yes, please explain

What are your educational goals?

Do you feel like your high school courses are challenging and are preparing you for college?

What career/job do you hope to have? What should you study in college to prepare for it?

Did a current Upward Bound student refer you to our program? Yes No

If yes, write their name here: _____

****STUDENTS WITH AT LEAST ONE REPORT CARD MUST PROVIDE A COPY WITH THIS APP****

TEACHER RECOMMENDATION

Student's Name: _____ Grade: _____

Teacher's Name: _____ Subject/Course: _____

School: _____ Is this student currently enrolled in your class? Yes No

Please rate the student on each of the criteria listed below by circling a number from 1 to 10. Please note that 1 is strongly disagree, 5 is neither agree or disagree and 10 is strongly agree.

This student displays:

- | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|----|
| 1. Motivation in completing class work | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 2. Effort in approaching difficult tasks | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 3. Cooperation when working with others | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 4. Productivity | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 5. Positive Attitude toward learning | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

This student:

- | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|----|
| 6. Completes assignments on time | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 7. Has excellent class participation | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 8. Has excellent attendance | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 9. Is rarely late for class | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 10. Is inquisitive about the subject matter | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11. Is respectful and well behaved in class | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 12. Treats instructors and classmates courteously | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

Additional comments may be helpful in evaluating the student's potential in succeeding in the TRIO Upward Bound program:

Teacher's Signature: _____

TEACHER RECOMMENDATION

Student's Name: _____ Grade: _____

Teacher's Name: _____ Subject/Course: _____

School: _____ Is this student currently enrolled in your class? Yes No

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Teacher's Signature: _____