

**PROGRAM APPLICATION**

\*Required Information

**BIOGRAPHICAL INFORMATION**

**DATE** \_\_\_\_\_

\*NAME \_\_\_\_\_  
LAST FIRST MIDDLE

STREET ADDRESS \_\_\_\_\_ \*SSN \_\_\_\_\_

CITY \_\_\_\_\_, NY ZIP \_\_\_\_\_ STUDENT PHONE \_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT THAN ABOVE) \_\_\_\_\_

E-MAIL \_\_\_\_\_

SCHOOL \_\_\_\_\_ CURRENT GRADE \_\_\_\_\_

\*DATE OF BIRTH \_\_\_\_\_ GENDER:  MALE-1  FEMALE-2

DO YOU PLAN TO OBTAIN AT LEAST A FOUR-YEAR COLLEGE DEGREE?  YES  NO

ARE YOU ELIGIBLE TO RECEIVE FREE LUNCH?  YES  NO ... OR REDUCED LUNCH?  YES  NO

\*ARE YOU A CITIZEN OF THE UNITED STATES?  YES  NO

IF NO, ARE YOU A PERMANENT RESIDENT OF THE UNITED STATES?  YES  NO RESIDENT CARD NUMBER: \_\_\_\_\_

Your response to the following racial/ethnic question is voluntary, but federal civil rights legislation and implementation regulations require UPWARD BOUND to submit counts of its student body by racial/ethnic categories. Your cooperation therefore, while voluntary, is essential to the accurate reporting of this information.

**Ethnicity** (please check all that apply):

- HISPANIC-10  ASIAN-12  WHITE-14  
 AMERICAN INDIAN/ALASKAN NATIVE-11  BLACK OR AFRICAN AMERICAN-13  NATIVE HAWAIIAN/ISLANDER-15

**HOUSEHOLD INFORMATION**

The student currently lives with (please check all that apply):

- BOTH PARENTS  MOTHER  FATHER  FOSTER PARENTS  
 LEGAL GUARDIAN(S)  STEP-MOTHER  STEP-FATHER  OTHER \_\_\_\_\_

Please list all members of the student's household below:

NAME	RELATIONSHIP	AGE	GRADE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

# TO BE COMPLETED BY CUSTODIAL PARENT(S) OR LEGAL GUARDIAN(S)

\*REQUIRED INFORMATION

\_\_\_\_\_  
PARENT/LEGAL GUARDIAN 1 LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
ADDRESS (IF DIFFERENT FROM STUDENT)

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
PARENT/LEGAL GUARDIAN 2 LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
ADDRESS (IF DIFFERENT FROM STUDENT)

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP

## EDUCATION

**\*DO YOU HAVE A 4-YEAR COLLEGE DEGREE?** PARENT 1  YES  NO

## PARENT 2

YES  NO

## INCOME

PLEASE REFER TO YOUR MOST CURRENT TAX RETURN TO COMPLETE THE FOLLOWING SECTION.

- TO QUALIFY AS LOW INCOME, YOUR **TAXABLE INCOME** MUST MEET FEDERAL REGULATIONS.
- TO FIND YOUR TAXABLE INCOME, SEE **LINE 11B ON 2019 1040 OR LINE 15 ON 2020 1040.**
- WRITE YOUR ACTUAL TAXABLE INCOME AMOUNT. PLEASE DO NOT WRITE AN ESTIMATED AMOUNT.
- IF YOU DO NOT FILE TAXES, PLEASE WRITE "DOES NOT FILE TAXES" ON THE TAXABLE INCOME LINE BELOW.

\_\_\_\_\_  
**\*HOUSEHOLD SIZE**

\$\_\_\_\_\_  
**\*TAXABLE INCOME**

I authorize TRiO Upward Bound to obtain copies of all my student's academic records from high school through post-secondary education.  YES  NO

I certify that all the above information is correct, current, and true and that ALL income is reported. I understand that this information is given for the receipt of federal funds; that Upward Bound and TRiO Program officials may verify the information on this application form and that deliberate misrepresentation of the information may subject me to prosecution under applicable state and federal laws.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### PRIVACY ACT STATEMENT

The personal information provided to UPWARD BOUND is sent to the United States Department of Education and is protected by the Privacy Act. No one may see the information unless they work with or for the UPWARD BOUND Program or are specifically authorized to see the information. This information is necessary to determine if you are eligible to participate in the program and helps the government to measure your success. The United States Department of Education has the authority to gather information to help make UPWARD BOUND a better program (20USC 1231a).

The UPWARD BOUND Program at Genesee Community College is primarily funded by the United States Department of Education and Genesee Community College. Participation is available to eligible students without regard to race, color, national origin, age, sex, or handicap. Any person who believes that he or she has been discriminated against in any related activity should write to the Secretary of Education, Washington, D.C. 20250.