Student Name: ___________________________ Date: _________________

1. What is your age, as of today? _______ years

2. What is your year in school, as of today? _____8th _____9th _____10th _____11th _____12th grade

3. What is your current cumulative (overall) grade point average (GPA)?
   ___ 3.5 or above  ___ 3.0 to 3.49  ___ 2.0 to 2.99  ___ 1.99 or below

4. How much education would you like to achieve?
   ___ only high school graduation
   ___ attend a business or technical school (no graduation)
   ___ some college
   ___ Associate degree (two-year or junior college)
   ___ Bachelor degree (four years of college)
   ___ Master or Doctorate degree (more than four years)
   ___ Law or Medical degree
   ___ Military involvement/education

5. At this moment in time, how much education do you think you will actually complete?
   ___ only high school graduation
   ___ attend a business or technical school (no graduation)
   ___ some college
   ___ Associate degree (two-year or junior college)
   ___ Bachelor degree (four years of college)
   ___ Master or Doctorate degree (more than four years)
   ___ Law or Medical degree
   ___ Military involvement/education

6. If your answer to question #5 is less than what you answered for question #4, please explain why you think you will not achieve your goal as stated in question #4.
   __________________________________________________________________________
   __________________________________________________________________________

7. Which colleges or technical schools are you thinking about applying?
   __________________________________________________________________________

8. Do your parent(s)/guardian(s) approve of your future plans? ___Yes ___No
   If NO, why? __________________________________________________________________________
   __________________________________________________________________________

9. How many times have you thought of dropping out of school?
   ___ 5 or more times  ___ 3 or 4 times  ___ 2 times  ___ 1 time  ___ never (continue to #12)
10. What have been your reasons for thinking about dropping out of school?

______________________________________________________________

11. Have you ever dropped out of high school? ___Yes ___No

If YES: a) when, b) which school, and c) reason(s) for dropping out _________________

______________________________________________________________

12. Do you presently hold a part-time job? ___Yes ___No

If YES, where do you work? ______________________________________

________________________________________________________________

13. What kind of work or occupation do you think you would like to be doing in ten (10) years?

________________________________________________________________

14. What kind of work do you think you will actually be doing in ten (10) years?

________________________________________________________________

15. What steps or actions do you think you need to do in order to reach the goal stated in #13?

________________________________________________________________

16. What do you think your STRENGTHS are as a person?

________________________________________________________________

________________________________________________________________

17. What do you think your WEAKNESSES are as a person?

________________________________________________________________

________________________________________________________________

18. Where did you FIRST hear about the Upward Bound program (check one)?

___ My teacher (name)___________________________________________

___ My counselor (name)__________________________________________

___ My principle (name)___________________________________________

___ My religious advisor (name)____________________________________

___ Parent/relative (name)_________________________________________

___ A friend in school (name)_______________________________________

___ Radio/Television _____________________ ___ A sign or notice

___ Other ______________________________________________________
UPWARD BOUND
Weber State University
CONDITIONS FOR ACTIVE PARTICIPATION
completed by the student & parent/guardian

I, ____________________________________, agree to abide by the rules and commitments of the Weber State University Upward Bound program during the years of which I am a participant.

I agree to:
- Maintain at least a 2.5 GPA throughout the course of my high school career
- Maintain good attendance (as described by my school)
- Maintain good citizenship (as described by my school)
- Attend and participate in the yearly Upward Bound Academic Residential Summer Program, including a one-week Academic Field Trip (no cost to student)
- Attend at least 75% of all Upward Bound Academic Year Saturday College Prep Sessions
- Attend at least 80% of Upward Bound Tutoring Sessions (when available)
- Attend at least 65% of all Upward Bound Cultural Activities (no cost to student)
- Participate in at least 50% of all Upward Bound Community Service Activities
- Attend all Upward Bound orientations as well as group and individual meetings
- Always present a POSITIVE IMAGE of myself at school and at activities sponsored by Upward Bound.

In addition, I will be responsible to notify Upward Bound if I am unable to attend any commitments before the said event occurs.

In return, Upward Bound promises to (but not limited to):
- Provide me with academic year tutoring when requested or necessary
- Monitor my academic progress helping me follow and maintain a college track
- Provide college/university-level skills training
- Provide me with access to cultural activities and community service
- Provide me with career exploration
- Help me with college admissions, registrations and navigation
- Help me find and apply for financial aid/scholarships

__________________________________________
Student Signature

__________________________________________
Upward Bound Advisor

To the Parent/Guardian:
Please recognize that your student’s future is important and that your support is necessary and vital to his/her success. The US government makes Upward Bound available to students at NO COST to parents. In return, student commitments are requested to ensure a successful future for each participant.

I have read the above conditions and support the participation of my student in the Upward Bound program. Furthermore, I will do my best to assist my student in this commitment.

X
Parent/Guardian Signature
I do hereby give my permission for my student’s school, educational institution or program, to release grades, transcripts, test scores, and any other relevant information to the Upward Bound program of Weber State University.

I understand that this information will be kept in a locked, confidential location and will be used by authorized Upward Bound staff members only.

x
Parent/Guardian Signature

Student’s Father Name ____________________________

[ ] Non high school graduate
[ ] High school graduate
[ ] Bachelor’s degree
[ ] Master’s degree
[ ] Doctorate degree

Student’s Mother Name ____________________________

[ ] Non high school graduate
[ ] High school graduate
[ ] Bachelor’s degree
[ ] Master’s degree
[ ] Doctorate degree

I hereby verify that the information provided above is accurate and true to the best of my knowledge.

x
Parent/Guardian Signature
Income Tax Information for Tax Year 20________

Did you file an income tax return last year?

___ Yes

1. How many exemptions (line 6d) did you claim? ________

2. Please enter the amount of your **taxable income**: $ __________
   
   **Form 1040**: line 43  
   **Form 1040A**: line 27

*Continue to CERTIFICATION and signature

___ No; Please complete the following if you did not file an income tax return:

   Total non-reported salaries, wages earned $ __________

   Total interests, dividends, etc., earned $ __________

   Total public assistance received $ __________

   Total unemployment received $ __________

   Total veterans benefits received $ __________

   Other income received $ __________

*Continue to CERTIFICATION and signature

CERTIFICATION:

I certify that the information reported above is accurate and complete to the best of my knowledge. I **agree to provide documentation** to verify the information reported, including a **copy of my last Federal Income Tax Return** or proof of Public Assistance, etc.

x

Parent/Guardian Signature

DOCUMENTATION: Please attach a copy of applicable federal 1040 tax documents.
CONSENT and RELEASE for ____________________________________________  
student name  

I, ____________________________________________, am the parent/guardian of the above named student.  

parent/guardian name  

1. I hereby give my consent and permission for the above named student to participate in the activities planned in conjunction with the Upward Bound program at Weber State University.  

2. I give my permission to the Upward Bound program to transport the above named student to and from any planned activities.  

3. I am aware of the special needs and risks for these activities, which may include physical fitness of the student, as well as the special clothing and equipment necessary.  

4. I hereby recognize that there may be personal injury risks involved with respect to the activities planned in this program, including risks inherent in the supervision of a group of young people.  

5. I hereby assume such risks and release Weber State University, its agents, employees, and students from any liability arising out of any injury or accident, which may be sustained by the above named student.  

6. Furthermore, I understand that in the event of a medical emergency, attempts will be made to contact me, and if said attempts are not immediately successful, that the supervisors of the Upward Bound program may refer the above named student to a licensed medical practitioner and/or clinic, and I hereby give my consent that such physician, hospital, or clinic may treat the said student in response to the medical emergency.  

X  
parent/guardian signature  

Home phone # ___________________________    Work phone # ___________________________  

Cell phone # ___________________________    Other # ___________________________  

Please keep the Upward Bound staff updated regarding the health of your student. We only know the current medical information you tell us and we want to be sure not to put your student’s health or life at risk.
<table>
<thead>
<tr>
<th>Health Insurance Information</th>
<th>Medical Card Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[ ] student is covered by medical card</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Insurance Co</th>
<th>Card is in the name of</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy Holder</td>
<td>Client ID # ___<em><strong><strong><strong>/</strong><em>/</em></strong></strong></em></td>
</tr>
<tr>
<td>Policy #</td>
<td>Insurance Codes _______________________</td>
</tr>
<tr>
<td>Other Info</td>
<td>County ________________________________</td>
</tr>
</tbody>
</table>

Please provide us with the following medical information on your student. This is for the safety of your student and that of the Upward Bound Program. This information will be kept confidential.

1. Please list any medical/physical conditions that your student has which would interfere with schoolwork, sports and/or other activities. If none, please write **NO**.

2. Please list any medications that your student is currently taking. If none, please write **NO**.

3. Please list any **ALLERGIES** to food and/or medications your student has. If none, please write **NO**.

4. Are there any activities that your student cannot participate in? If so, please explain. If none, please write **NO**.

5. Are there any special medical instructions that should be followed? If so, please explain. If none, please write **NO**.

6. In case of an emergency and we cannot reach you, who should be contacted?

   a. Name ___________________ Relation ________ Phone # ________

   b. Name ___________________ Relation ________ Phone # ________

   c. Name ___________________ Relation ________ Phone # ________
In order for Upward Bound to have a better understanding of your student, please answer the following questions. Also, please feel free to provide any additional information that may be of assistance.

1. What would you say are your student’s **STRENGTHS** (not necessarily just academic)?

2. What would you say are your student’s **WEAKNESSES** (not necessarily just academic)?

3. What would you say are your student’s basic problems in school?

4. How well does your student get along with friends and peers?

5. What would you like to see your student do with his/her life?

6. General comments about your student: