

GEAR UP Utah Application

Student Information

First and Last Name: _____ Grade: _____ Gender: _____
 Address: _____ Birthdate: _____ Graduation Year: _____
 _____ Are you in TRIO's Upward Bound and/or Educational
 City: _____ Zip Code: _____ Talent Search? Yes: _____ No: _____
 Student Cell Phone: _____ School Attending: _____
 Student personal email: _____

Parent/Guardian Information

Name of Parent/Guardian 1: _____ Relationship to student: _____
 Name of Parent/Guardian 2: _____ Relationship to student: _____
 Cell phone: _____ Home phone: _____
 Email: _____
 Preferred method of contact (*select one*): Cell phone #: _____ Home phone #: _____ Email: _____

Demographics

Student Ethnicity (*check one, required for federal reporting*)

Hispanic/Latino: _____ Non Hispanic/Non Latino: _____

Student Race (*check one, required for federal reporting*)

American Indian or Alaskan Native: _____ Black or African American: _____ Asian: _____

Native Hawaiian or Pacific Islander: _____ Two or more race: _____ White: _____

What language(s) is spoken in your home: English: _____ Spanish: _____ Other: _____

Do you have siblings in middle school, junior high, or high school? Yes: _____ No: _____

If yes, list their name(s) and school(s) they attend: _____

Does one or both of your parent(s) have a Bachelor's degree? Yes: _____ No: _____

Foster Care/Homeless

Are you currently, or have you been in foster/proctor care? Yes: _____ No: _____

Are you currently, or have you been homeless? Yes: _____ No: _____

Defining Homeless:

The McKinney-Vento Act defines homeless children as "individuals who lack a fixed, regular, and adequate nighttime residence." The act provides examples of children who would fall under this definition:

- Children and youth sharing housing due to loss of housing, economic hardship, or a similar reason.
- Children and youth living in motels, hotels, trailer parks, or campgrounds due to lack of alternative accommodations.
- Children and youth living in emergency or transitional shelters.
- Children and youth abandoned in hospitals.
- Children and youth awaiting foster care placement.
- Children and youth whose primary nighttime residence is not ordinarily used as a regular sleeping accommodations.
- Children and youth living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations park benches, etc.

By completing and returning this application form, you are submitting yourself for consideration to participate in GEAR UP Utah. This program is designed to help students graduate from high school and prepare themselves for successful enrollment in and completion of college.

Student Signature: _____ Date: _____

Financial Eligibility

In order for your student to qualify to be enrolled in GEAR UP Utah, they need to be eligible under the *Free and Reduced-Price School Meals Guidelines*. Military personnel do not need to include housing allowance when reporting income.

Is student in foster/proctor care or Homeless? Yes _____ No _____ If yes, then you do not need to complete this portion

The number of persons in my household? _____ The total **gross** income for my household is \$ _____ per (circle one) **year/month/twice per month/every two weeks/weekly**.

According to the chart below my family's income is (circle one) above/below the matching income level for my household size. Based on this information, my son/daughter/child (student name) _____ is: Eligible for Free or Reduced Lunch: _____ Not eligible for Free or Reduced Lunch: _____

Household Size	Yearly	Monthly	Twice Per Month	Every Two weeks	Weekly
1	23,828	1,986	993	917	459
2	32,227	2,686	1,343	1,240	620
3	40,626	3,386	1,693	1,563	782
4	49,025	4,086	2,043	1,886	943
5	57,424	4,786	2,393	2,209	1,105
6	65,823	5,486	2,743	2,532	1,266
7	74,222	6,186	3,093	2,855	1,428
8	82,621	6,886	3,443	3,178	1,589
Each additional person	8,399	700	350	324	162

This table is valid from July 1, 2021 to June 30, 2022 Source <https://www.govinfo.gov/content/pkg/FR-2021-03-04/pdf/2021-04452.pdf>

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____ Date: _____

**Please note that this form is not an Application for Free & Reduced-Price School Meals, but rather an eligibility verification form for the GEAR UP Program. If you would like to apply for Free & Reduced-Price School Meals Program, please contact your student's school.*

For office use only: Accepted _____ Denied: _____ Counselor Initials: _____ Date: _____

Media Release

I, _____, (Parent/Guardian Name) do hereby grant GEAR UP Utah, Utah Valley University, acting through its agents, employees, or representatives, to take photographs, video, and/or voice ("Media"). I grant the GEAR UP Program an unlimited right to reproduce, use, exhibit, display, perform, broadcast, create derivative works from, and distribute the media in any manner or media now existing or hereafter developed, in perpetuity, throughout the world. I agree that the media may be used by the GEAR UP program, including its assignees and transferees, for any purpose including but not limited to marketing, advertising, publicity, or other promotional purposes. I agree that the GEAR UP Program will have final editorial authority over the use of the media, and I waive any right to inspect or approve of any future use of the media. I acknowledge that neither I, nor my child, will receive compensation for participating in the media or for any future use of the media. I release and fully discharge the GEAR UP Program, and its trustees, employees, agents, and representatives, from any claim, damages, or liability arising from or related to my child's inclusion in the media, the GEAR UP program's future use of the media, and the GEAR UP Program release of the information detailed below. I understand that I may revoke this release at any time by informing this agency in writing.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

GEAR UP Utah Authorization for Release of Information

I, _____, (Parent/Guardian Name) do hereby grant the representative of GEAR UP Utah, including their external evaluators, authorization to contact parents/guardians and students, and to release and/or obtain information from school, district and state data sources regarding the following individual:

Student printed name: _____

Reason for release of information:

To track student's success in school and help facilitate their preparation for and success in continuing their education beyond middle school and high school. Specific types of information to be released (this information may be provided by the school, district, or State Office of Education):

Student State ID	Class Schedule	Cumulative Student Record	Transcripts, Grades, and Test Scores
IEP/LEP Information	Attendance	Free/Reduced Lunch Status/Eligibility	College & Career Readiness Information

I understand that I may revoke this release at any time by informing this agency in writing.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

GEAR UP Advisor: _____ Date: _____

This release is effective as of the date signed

Any additional individuals who may have access to protected student information disclosed by students during our session(s). (i.e. sibling, grandparents, or other parent representative)

Name(s) and Phone Numbers: _____

Please return this form to your GEAR UP Counselor/Advisor

For Office Use Only			
GEAR UP Counselor/Advisor Initial: _____ Enrollment date: _____ Accepted: Yes _____ No _____			
Student SSID: _____			
IEP: Yes _____ No _____	LEP: Yes _____ No _____	Homeless: Yes _____ No _____	Foster Care: Yes _____ No _____
Data entry/verification of enrollment packet:			
Release _____ FRLV _____		Entered into compass by _____ Date: _____	

