TRiO UPWARD BOUND APPLICATION

For More Information Please Contact:
RCC TRiO Upward Bound
1300 S. Country Club Road
El Reno, OK 73036
Phone: 405-422-1250
Fax: 405-422-1276
Participant Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>__________________________________________________</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Last Name</td>
</tr>
<tr>
<td>Address:</td>
<td>__________________________________________________</td>
</tr>
<tr>
<td></td>
<td>Street/Box</td>
</tr>
<tr>
<td>Phone:</td>
<td>(______) ____________________________</td>
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</tbody>
</table>

Student E-Mail Address: ______________________________________________________

Social Security Number: ____________________________ (Please include a photocopy of your Social Security card)

U.S. Citizen?  □ Yes  □ No  If No, Resident Alien Number: ____________________________

Sex:  □ Male  □ Female  Date of Birth: ___/___/______  Age: ______

Racial/Ethnic Origin:
□ African American  □ Hispanic  □ American Indian (tribe: _______________)
□ Caucasian  □ Asian/Pacific Islander  □ Other: ____________________________

Current Grade:  □ 8th  □ 9th  □ 10th

Expected High School Graduation Year: _______

High School:  □ Calumet  □ Hinton
□ El Reno  □ Minco
□ Geary  □ Union City

I have submitted an application for the Oklahoma Higher Learning Access Program (OHLAP)  □ Yes  □ No

This is to certify that all information given by me is true and correct to the best of my knowledge.  Furthermore:

- I give the RCC TRiO Upward Bound program permission to obtain copies of my educational records and other materials required for participation in the program and permission to release my educational records to other educational institutions.
- Further permission is granted to request academic and financial aid information and records from any and all postsecondary institutions to track my college progress. I understand that all of my records will be kept in confidence and in accord with the Privacy Act of 1974.

______________________________________________  _______________________
Student Signature  Date

NOTE: Please Include a Copy of Your Most Recent Transcript with This Portion of the Application
Parent Information: (completed by parent or guardian with whom applicant lives)
ALL INFORMATION WILL BE HELD IN STRICT CONFIDENCE

Parent/Guardian Name: __________________________  Relationship: _______________________

Parent/Guardian Name: __________________________  Relationship: _______________________

Phone (Home): __________________________  Phone (Work): __________________________

Has either parent graduated from a four-year college/university with a Bachelor’s Degree?  □ Yes  □ No

If yes, please list the name of the Parent/Guardian with the degree & the name of the college/university.
________________________________________________________________________

Number of family members living at home:  Adults: ________ Children: _________ Total: ________

For us to determine eligibility for participation in TRiO Upward Bound, federal regulations require us to obtain documentation of taxable income for the preceding CALENDAR YEAR:

PLEASE INCLUDE A COPY OF YOUR 2013 INCOME TAX RETURN

Taxable Income (Form 1040, line 43; Form 1040A, line 27; Form 1040EZ, line 6)

☐ $0 - $17,235  ☐ $17,236 - $23,265
☐ $23,266 - $29,295  ☐ $29,296 - $35,325
☐ $35,326 - $41,355  ☐ $41,356 - $47,385
☐ $47,386 - $53,415  ☐ $53,416 - $59,445
☐ $59,446 and above

If you did not file a tax return, please complete the following:

SSA/SSI: $____________  Unemployment: $____________
VA/GI Bill: $____________  Food Stamps: $____________
TANF: $____________  Pension/Retirement $____________
Child Support: $____________  Other (specify): $__________

This certifies that all of the information I have provided in this document is true and accurate to the best of my knowledge and I understand that all records will be kept in strict confidence and in accords with the Privacy Act of 1974.

______________________________________________
Par ent/Guardian Signature  Date

Please submit the completed application packet to: Your High School Counselor or mail to: TRiO Upward Bound, Redlands Community College, 1300 S. Country Club Rd., El Reno, Ok 73036.

The RCC TRiO Upward Bound Program will treat all eligible applicants equally, regardless of race, color, national origin, gender, sexual orientation, religion, or physical disability. Redlands Community College, in compliance with Titles VI and VII of the Civil Rights Act of 1964, Executive Order of 1246 as amended, Title IX of the Education Amendments of 1972 (Higher Education Act), Americans with Disabilities Act of 1990 and other federal laws and regulations, does not discriminate on the basis of race, color, national origin, sex, age, religion, handicap, or status as a veteran, in any of its policies, practices or procedures. This provision includes, but is not limited to, admissions, employment, financial aid and educational services.
TRiO Upward Bound – Records Release Form
(To Be Completed By Student and Parent)

Student Name: ________________________________________________________________

School Attended: ________________________________________________________________

As indicated below:

I hereby authorize the release of any school records from my son’s/daughter’s file to the Redlands Community College TRiO Upward Bound program. Furthermore, I grant permission for the RCC TRiO Upward Bound program to release academic and testing records to other educational institutions. Permission is granted to request academic and financial aid information and records from any and all post-secondary institutions to track college progress.

I understand that the U.S. Department of Education funds the RCC TRiO Upward Bound program and that the program will use these records to provide academic advisement for my son/daughter. I also understand that these records will be handled in a confidential manner and that they will be made available only to program staff, personnel from other educational institutions, and representatives from Federal and State Departments of Education.

This authorization is limited to the following records:

1) School records
2) Transcripts
3) Standardized test scores
4) Information on the student’s status and performance and
5) Student’s contact information

____________________________________  ______________________________________
Student’s Signature                  Date

_________________________  ___________________________
Father’s/Guardian’s Name (Please Print)  Mother’s/Guardian’s Name (Please Print)

_________________________
Father’s/Guardian’s Signature

_________________________
Mother’s/Guardian’s Signature

_________________________
Date Signed

_________________________
Date Signed

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This survey contains a number of statements about student needs. Please give your honest opinion of how TRiO Upward Bound can meet your needs. Your answers will be kept confidential.

### Academic Needs

<table>
<thead>
<tr>
<th>Number</th>
<th>Statement</th>
<th>Strong Need</th>
<th>Some Need</th>
<th>No Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>To learn how to complete and turn in my homework on time.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>To get better grades in school.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>To take tests better and with less anxiety.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>To organize my time, activities and responsibilities better.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5</td>
<td>To learn more about high school requirements for college.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6</td>
<td>To listen better in class and ask more questions.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>7</td>
<td>To relate to and communicate better with my teachers.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>8</td>
<td>To identify, set and evaluate goals for the future.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

My academic goal is ________________________________________________

### Personal Needs

<table>
<thead>
<tr>
<th>Number</th>
<th>Statement</th>
<th>Strong Need</th>
<th>Some Need</th>
<th>No Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>To better understand my parents and other adults.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>To learn to deal with conflict in a positive manner.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>To be more accepting of my physical appearance.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>To learn how my self-esteem affects my behavior.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5</td>
<td>To learn how to get along better with members of the opposite sex.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6</td>
<td>To learn to accept people who are different from me.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>7</td>
<td>To learn more about the use/abuse of drugs and alcohol.</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>8</td>
<td>To accept greater responsibility for my actions.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

My personal goal is ________________________________________________
TRiO Upward Bound – Student Needs Assessment – Part Two

To Be Completed By Student

<table>
<thead>
<tr>
<th>Career and Postsecondary Needs</th>
<th>Strong Need</th>
<th>Some Need</th>
<th>No Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To explore a variety of career opportunities.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2. To learn more about job applications, resumes and interviews.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3. To learn more about postsecondary admissions process.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4. To prepare for exams like the PSAT, ACT or SAT.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5. To visit more colleges.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6. To learn about college costs and how to pay for college.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

Do you plan to attend college after high school? Yes __________ No __________

In college, I plan to major in ____________________________________________

Three Oklahoma colleges/universities I would like to visit are:
1. _______________________________________________________________________
2. _______________________________________________________________________
3. _______________________________________________________________________

My career choice is ______________________________________________________

Three careers I am interested in learning about are:
1. _______________________________________________________________________
2. _______________________________________________________________________
3. _______________________________________________________________________

This is to certify that all information provided through the student needs assessment portion of this application is true and correct to the best of my knowledge.

Student Signature ______________________________ Date ______________

Parent/Guardian Signature __________________________ Date ______________

Please submit the completed application packet to: Your High School Counselor or mail to Upward Bound, Redlands Community College, 1300 S. Country Club Rd., El Reno, OK 73036.
Student Name: ________________________________________________________________

Please write an essay describing why you want to participate in TRiO Upward Bound and how you think you will benefit from the experience:

________________________________________________________________________
________________________________________________________________________
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________________________________________________________________________
To the Teacher: This student is applying to the Redlands Community College TRiO Upward Bound program. This program is designed to assist participating students in preparing for and enrolling in a college-level educational program. Students who show potential, but need motivational and/or academic, or other personal assistance in order to succeed in a college-level program may apply. Please be as specific as possible in your remarks. Your comments and evaluation will be kept confidential.

Teacher’s Name: ________________________________

Subjects(s) taught to above-referenced student: ________________________________________________

School: ________________________________

Phone: (___) _________________

<table>
<thead>
<tr>
<th>Based on your knowledge of the applicant, please rate his/her academic skills:</th>
<th>Outstanding</th>
<th>Above Average</th>
<th>Average</th>
<th>Needs Improvement</th>
<th>No Basis for Judgment</th>
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<tbody>
<tr>
<td>Academic achievement</td>
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<tr>
<td>Math skills</td>
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<tr>
<td>Reading skills</td>
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<td>Study skills</td>
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<td>Writing skills</td>
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<td>Comprehension skills</td>
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<tr>
<td>Use of time</td>
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<tr>
<td>Organization</td>
<td></td>
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</tbody>
</table>
Please rate the applicant’s characteristics and motivation:

<table>
<thead>
<tr>
<th></th>
<th>Outstanding</th>
<th>Above Average</th>
<th>Average</th>
<th>Needs Improvement</th>
<th>No Basis for Judgment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability to cope calmly with frustrating experiences</td>
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<tr>
<td>Demonstrates leadership capability</td>
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<td>Interpersonal skills</td>
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<tr>
<td>Self-image</td>
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<tr>
<td>Potential for growth</td>
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<tr>
<td>Potential to succeed</td>
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<tr>
<td>Motivation and willingness to learn</td>
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<tr>
<td>Tolerance of minor disappointments</td>
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<tr>
<td>Intellectual curiosity</td>
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<tr>
<td>Ability to work with others on group projects</td>
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<td>Quality of work submitted</td>
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<td>Emotional maturity</td>
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<td>Attentiveness in class</td>
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<td>Ability to meet deadlines</td>
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<tr>
<td>Potential to appreciate and maximize learning opportunities</td>
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</tbody>
</table>

Additional Comments: ____________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Please indicate your recommendation of the student for participation in this program:

- [ ] Strongly Recommend
- [ ] Recommend
- [ ] Recommend with Reservation
- [ ] Do not recommend

Teacher’s Signature: ____________________________________________ Date: ____________
TRiO Upward Bound - Counselor Recommendation Form
(To Be Completed By Current School Counselor)

Student: _______________________________ Current Grade: □ 8th □ 9th □ 10th

This student is applying to the Redlands Community College TRiO Upward Bound Program. We appreciate your assistance in providing the following information and recommendation. Please return this form to our office.

Which of the following best describes this student’s high school curriculum?

□ Academic/College Prep  □ General  □ Honors Program
□ Remedial  □ Vocational  □ Other_______________________

What is this student’s approximate class rank?  □ Top 10%  □ Top 25%  □ Top 50%  □ Below 50%

What is this student’s reading level? ________________________________

(Above, At, or Below Grade Level)

How would you describe this student’s attendance?  □ Excellent  □ Good  □ Fair  □ Poor

Has this student ever been subject to school disciplinary action or suspension?  □ Yes  □ No

If yes, please explain: ______________________________________________________________

Additional Comments: ______________________________________________________________

Please indicate your recommendation of the student for participation in this program:

□ Strongly Recommend  □ Recommend
□ Recommend with Reservation  □ Do not recommend

Counselor’s Signature: _______________________________ Date: ______________

School: __________________________________________________

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