

CAL POLY HUMBOLDT



A Federally Funded Program
U.S. Department of Education

NEW STUDENT APPLICATION

Thank you for your interest in participating in the TRIO UPWARD BOUND PROGRAM at Cal Poly Humboldt. Please complete this application with blue or black ink.

Please return to your high school counselor or mail completed application to:

Cal Poly TRiO Upward Bound
1 Harpst Street GH 104 , Arcata CA 95521
(707) 826-3558 (p) (707) 826-3571 (f) trioub@humboldt.edu (e)

Student Name: _____ Date of Birth: _____

High School: _____ Grade Level 2022-2023: FR SO JR SR

Mailing Address: _____
(Where you receive mail) (P.O. Box Number or Street) (City) (Zip Code)

Student Cell Phone: _____ Student Email: _____

Legal Sex (at birth) Female Male Preferred Pronouns _____
(she/her/he/his/they/them)

Are you a U.S. Citizen? YES NO If no, are you a legal resident? YES NO

Do you have a social security number? YES NO What is your current GPA? _____

NOTE: You must be a US Citizen or legal resident of the United States in order to participate in and receive services from TRiO Upward Bound

Ethnicity (please check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> White |
| | <input type="checkbox"/> Other _____ |

Other Language(s) spoken at home: _____

At your high school are you enrolled in: TRIO TALENT SEARCH GEAR UP AVID
(Please Check all that apply)

STUDENT NEEDS ASSESSMENT

How can HSU TRIO Upward Bound be of assistance to you? Please check all that apply.

| | |
|---|--|
| <input type="checkbox"/> College Preparation/Exploration <input type="checkbox"/> Paying for College/Scholarship Information <input type="checkbox"/> Career Exploration <input type="checkbox"/> Setting Goals <input type="checkbox"/> Academic Discipline <input type="checkbox"/> Understanding A - G Rigorous Courses | <input type="checkbox"/> Study Skills/Strategies <input type="checkbox"/> Test Taking Skills <input type="checkbox"/> Learning Styles <input type="checkbox"/> Getting a Tutor/Mentor <input type="checkbox"/> Getting Involved in School/Community Activities <input type="checkbox"/> OTHER _____ |
|---|--|

What plans do you see for yourself after graduating from high school? (Check all that apply)

4-Year college/university
 2-year college
 Trade/Vocational school
 Other: _____

What are interested in studying: _____

Workforce: Which Occupation(s): _____

Military: Which Branch: _____

What career paths are you interested in exploring? Please Check all that apply

| | |
|---|---|
| <input type="checkbox"/> Agriculture, Food & Natural Resources <input type="checkbox"/> Automotive, Mechanics, Welding, Construction <input type="checkbox"/> Arts, Technology & Communications <input type="checkbox"/> Business Management, Finance/Accounting <input type="checkbox"/> Education and Training/Teaching <input type="checkbox"/> Government and Public Administration <input type="checkbox"/> Health Science/Sport Medicine/Physical Therapy | <input type="checkbox"/> Hospitality and Tourism <input type="checkbox"/> Human Services/Counseling/Social Work <input type="checkbox"/> Law, Public Safety, Corrections and Security <input type="checkbox"/> Marketing, Manufacturing, <input type="checkbox"/> Science, Technology, Engineering and Math <input type="checkbox"/> Transportation, Distribution, Truck Driving <input type="checkbox"/> OTHER _____ |
|---|---|

What part of TRIO Upward Bound are you interested in participating in?

Academic Year Program (September - May)
 Academic Year **and** Summer Academy (September- July) **(2023 Summer Academy June 23 - July 28)**

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name(s): _____

Relationship to Student:

Mother
 Father
 Adoptive Mother
 Adoptive Father
 Grandmother
 Grandfather

Auntie
 Uncle
 Foster Parents/Ward
 OTHER _____

Parent/Guardian Cell Phone: _____ Email: _____



HOUSEHOLD INFORMATION

List all persons currently living in your household:

| NAME | AGE | RELATIONSHIP | SCHOOL or EMPLOYER |
|------|-----|--------------|--------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

PARENT EDUCATION INFORMATION

Highest level of education completed by Natural/Adoptive Mother:

- Less than 8th Grade
- 8th Grade
- High School
- Associate's
- Bachelor's
- Unknown

Highest level of education completed by Natural/Adoptive Father:

- Less than 8th Grade
- 8th Grade
- High School
- Associate's
- Bachelor's
- Unknown

PARENT INCOME INFORMATION

Do you file Federal Income Taxes? YES NO

If yes, what is your 2021 **ADJUSTED GROSS** Income? (Line 11: US Tax Return Form 1040) \$_____

If yes, what is your 2021 **TAXABLE INCOME** range (LINE 15: US Tax Return Form 1040)

- \$20,385 or below
- 20,386 - \$27,465
- \$27,466 - \$34,545
- \$34,546 - \$41,625
- \$41,626 - \$48,705
- \$48,706 - \$55,785
- \$55,786 - \$62,865
- \$62,866 - \$69,945
- \$69,945 or greater

Do you receive any of the following: (Check all that apply)

- Free Lunch
- Reduced Lunch
- TANF
- Cal FRESH
- Medi-Cal
- Social Security
- Subsidized Housing
- General Relief
- OTHER _____

Certifying Parent/Guardian Signature and Print



TRIO Upward Bound Programs require families to meet income and education guidelines to determine and document eligibility. No one may access, view, or utilize this information unless they work for or with HSU TRIO UB. The personal information you provide will be kept confidential **and secure pursuant to policies and procedures outlined in Federal TRIO program regulations.**

INCOME VERIFICATION

I am submitting the following INCOME VERIFICATION for this application:

- 2021 IRS Income Tax Return (Required if you file taxes)
- Monthly statement/documentation of income received (Food Stamps/SSI/General Relief)
- Written statement attesting to my annual income for 2021. Please use the space below.

| |
|---|
| <p>I certify that my annual income for 2021 was _____.</p> <p style="text-align: center;">_____ Signature of Parent/Guardian and Print</p> |
|---|

RELEASE OF INFORMATION

I authorize the Cal Poly Humboldt TRIO Upward Bound Program to obtain documents relative to and consistent with my child’s education. Such documents may include: a copy of their high school transcript, test scores, ACT/SAT or GED scores, and school lunch program eligibility. I give permission for my child to participate in Upward Bound activities. In addition, I give my permission for my child’s name, photograph and/or statements to be used by TRIO Upward Bound only for promotional, publicity or instructional purposes.

Signature of Parent/Guardian DATE

Signature of Student DATE