# **Admission Check List**

- Admission application form
- Three letters of recommendation
- A personal essay stating interest in the program
- High school report card or most recent transcript copy
- Relevant standardized test records (optional)
- Copy of the most recent 1040 form or proof of income benefits (i.e., social security, public assistance).

Please email the appropriate counselor after you submit the Admissions Application Form

Jonas BeaubrunJarrell SladeLuis Arduz(jbeaubru@umd.edu)(jslade@umd.edu)(larduz@umd.edu)NorthwesternHigh PointBladensburgCentralNorthwoodParkdale

For best consideration send application by June 4, 2021

Submit health examinations, nutritional information and other supporting documents by June 11, 2021

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Pre-C	College Programs in Undergrad	uate Studies		sted
	Upward Bound			
			Director's	
	Application for Program Adn	iission		
The information on this form will be used to deter. Based on the information received, you may be re into the program is based on eligibility, need, and	ferred to another program as deemed appro			
STUDENT INFORMATION (Plea	ase Print)			
Student's Last Name, First Name & M.I	I			
How did you find out about the program	ns? Sex	Date of Birt	.h	Age
Address	City	S	State & Zip	
Phone	Primary Language spoken at h	ome		
Student E-Mail (required)	Parent/Gua	dian E-Mail		
ALL STUDENTS ENROLLED IN PI	RE-COLLEGE PROGRAMS MU	ST HAVE A SOC	TAL SECURITY	NUMBER.
Student Citizenship Status Informati				
Student Chizenship Status Informati	ION. Please check ( $\checkmark$ )			
		(Permanent R	esident Number)	
U.S. CitizenPermanent Resid Other: Please note: At the time of program admiss Race/Ethnicity: Please check (✓) an	dent			igration status.
U.S. Citizen      Permanent Reside        Other:	dent		rify citizenship/imm	igration status.
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#### FAMILY INFORMATION (ALL APPLICANTS MUST RESPOND TO THE FOLLOWING)

The student lives with:	Both Parents	Single Parent (please identify below)
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Legal Guardian(s)

Parent 1/Guardian Name		Please Check ( <u>•</u> ) Male Female
Occupation/Job Title		Home/Cell Phone
Business Phone	Best time(s) to call	Email Address
Parent 2/Guardian Name		Please Check ( <u>•</u> ) Male Female
Occupation/Job Title		Home/Cell Phone
Business Phone	Best time(s) to call	Email Address

In order to be eligible for Pre-College Programs, students must satisfy low-income criteria established by the U.S. Department of Education and/or meet potential first generation college student status.

Parent 1/Guardian living with the applicant: Do you have a Bachelor's Degree or higher? \_\_\_YES \_\_\_NO

Parent 2/Guardian living with the applicant: Do you have a Bachelor's Degree or higher? \_\_\_YES \_\_\_NO If yes, from what country?

#### FAMILY INCOME

Please attach your most recent 1040 tax return or other proof of income benefits (e.g. social security, public assistance, etc.)

What is the number of **dependent children** in the household?

What is the total number of people in the household (including parents/legal guardians)?

What is the total amount of income from <u>all</u> Parent(s)/Guardian(s) living with the student? \$\_\_\_\_\_

#### PERSONAL ESSAY: (Please Type)

On a separate sheet of paper, please explain why you would like to participate in Pre-College Programs (i.e. tell us about yourself, your future career plans, and how Pre-College Programs can help you reach your goals).

#### **REQUIRED DOCUMENTATION (Please Read Carefully)**

In order to complete the application, please include the following. Note that applications WILL NOT be reviewed until ALL materials have been received.

- Three (3) recommendation forms one (1) recommendation from a core class (e.g English, math, science or foreign language), and two (2) from other teachers or school personnel (e.g counselor, principal) is required.
- ✓ A typewritten personal essay.
- Most recent grade report, and an unofficial transcript including relevant standardized test scores (optional) (e.g MSA, HSA)
- ✓ Family income documentation, i.e., 1040 tax return (signed) or other proof of income benefits (e.g. social security, public assistance, etc.).

### I have included a copy of my most recent signed 1040 tax form or other proof of income benefits (e.g. social security, public assistance, etc.).

If you have indicated that both parents/guardians are living with the applicant, then BOTH parents/guardians MUST sign below.

Parent 1/Guardian Signature:	Parent 2/Guardian Signature:
Parent 1/Guardian Printed Name:	Parent 2/Guardian Printed Name:
Date:	Date:

The University of Maryland's Pre-College Programs adheres to the policy of equal educational opportunity and will not discriminate against any applicant because of race, color, national origin, sex, handicap or age.



### **Pre-College Programs in Undergraduate Studies Upward Bound**

#### ACADEMIC NEED, VERIFICATION AND CONSENT FORM

, certify that I am in need of assistance to improve my grades and/or to progress in school.

(Student's printed name)

Student's Signature

I.

Date

#### Parent/Guardian Verification and Consent (Please Read Carefully)

In signing this application, I verify that the information given is correct to the best of my knowledge. I give consent for my son or daughter to participate in the Pre-College Programs if he or she is selected. I understand that full participation includes being involved in various research projects, group and individual counseling, and having that data reported to the Department of Education and the University of Maryland. I also understand full participation to mean taking various assessments that will be used to form an individualized academic plan. Finally, in the matter of full participation, I consent to having my son's or daughter's picture used in an appropriate manner deemed by Pre-College Programs Staff.

I give consent for my child, , to receive routine and/or emergency medical services (if necessary), while participating in Pre-College Programs.

I, the undersigned, in full recognition of the possible dangers and hazards inherent in any student activity normally conducted by Pre-College Programs, do hereby agree to assume all the risks and responsibilities surrounding my participation. Furthermore, I hereby defend, hold harmless, indemnify, release, and forever discharge the University, and all its officers, agents, and employees from and against any and all claims, demand and actions, or cause of action, on account of which may result from my participation and which result from causes beyond the control of, and without the fault or negligence of the University, its officers, agents, or employees, during the period of my participation as foretaken.

I authorize the office of Pre-College Programs to secure a copy of my child's transcript (quarterly grade reports, progress reports), schedule, standardized test scores and any material relative to my child's academic performance now and throughout the duration of his/her participation in the Pre-College Programs and completion of postsecondary education.

I understand that this release of information is in accordance with the goals of the program, which are to support the efforts of the educational institutions and supplement my child's education and efforts at entering and completing a 4-year post-secondary degree. I also authorize the Pre-College Programs' staff to meet with school officials regarding my sons or daughter's academic performance and interpersonal development and to observe my son or daughter in class.

I have included a copy of my most recent signed 1040 tax form or other proof of income benefits (e.g. social security, public assistance, etc.).

#### If you have indicated that both parents/guardians are living with the applicant, then BOTH parents/guardians MUST sign below.

Parent 1/Guardian Signature:

Parent 1/Guardian Printed Name:

Parent 2/Guardian Signature:

Parent 2/Guardian Printed Name:

Date:

Date: \_\_\_\_\_

**Return to:** Pre-College Programs in UGST, University of Maryland College Park 0105 Cole Student Activity Building, College Park, MD 20742-8515 www.precollege.umd.edu - 301-405-6776 / 301-314-9155 (fax)

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## **Recommendation Form**

Dear Recommender: The student listed below has expressed an interest in Pre-College Programs--Upward Bound. Pre-College Programs are federally-funded TRIO programs that provide education services to low-income and/or firstgeneration collegebound students in an effort to overcome economic, social, and cultural barriers that impede the pursuit of higher education.

Pre-College Programs provides high school students with academic instruction and tutoring, career and college guidance, and psychosocial services to help students achieve success in high school and prepare them for postsecondary education. Some of the services our program provides are as follows:

- Saturday Academy
- Summer residential session
- at University of Maryland

Group & individual advising/counseling

**Current Grade Level** 

- SAT Preparation
- College tours and cultural activities

Completion of recommendation forms are required for admission consideration, therefore we appreciate your submission of this form on the applicant's behalf. Please respond to the prompts listed below and **also identify the student's need to be in the program**. Recommendation forms can be submitted to our office via mail or fax (see contact information below).

Pre-CollegePrograms UniversityofMaryland 4111 John Toll Physics Bldg, CollegePark,MD20742 Fax: (301)314-9155

Formore information about Pre-College Programs, visit <u>www.precollege.umd.edu</u>. Thank you for your assistance!

Student's Name	
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StudentEducationalProgram:

General/On-Grade Level		Honors/Advanced	IEP	504Plan	ESOL
Other	(Please specify)				

Evaluate relationship between student's academic performance and demonstrated ability.

Describe applicant's class behavior and attendance.

Student'sName \_\_\_\_\_

Specify student's strongest area of need for development and improvement.

Describe applicant's interactions with peers.

Comment on applicant's response to directives from authority figures.

Please provide additional comments regarding applicant's potential to be a successful participant in Pre-College Programs.

Name of person completing this form:	
Relation of person completing this form:	
Name of School:	
Signature:	Date:
Telephone Number:	
E-mail Address:	



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Relation of person completing this form:		
Name of School:		
Signature:	Date:	
Telephone Number:		
E-mail Address:		