

# Upward Bound Math & Science

## ABOUT US

The Upward Bound Math & Science (UBMS) Program is a **FREE** TRIO program funded by the U.S. Department of Education. UBMS provides academic enrichment, retention services, post-secondary preparation, and a summer residential program to eligible participants. The goal of the program is to help students develop their potential to excel in post-secondary education and STEM fields.



## SERVICES

- Tutoring
- Individualized Academic Advising
- STEM Support & Exploration
- Career Exploration & Planning
- College Admissions Assistance
- Financial Aid & Scholarship Assistance
- Course Selection
- Study Skills Development
- ACT/SAT Prep & Assistance
- Financial Literacy
- College Visits
- Academic Skills Workshops
- Cultural Enrichment
- Parent Workshops
- Leadership Development
- 6-Week Summer Residential Program


## ELIGIBILITY


- Interest in exploring STEM professions
- Potential for achieving a college degree
- Low-Income and/or potential first-generation 4-year college student
- Waterloo student enrolled at East, West, or Expo High School
  - or Waterloo 8th grade student enrolling in a target high school for the upcoming year

## APPLICATION PROCESS


1. Complete Application including essay and school reference
2. Return to school office or UNI-CUE
3. Eligible students will be contacted by UBMS staff
4. Interview with UBMS
5. Student/Parent Notification

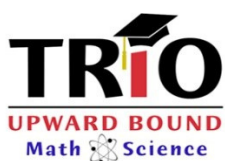
## CONTACT

 (319)-273-4772

 [ubms@uni.edu](mailto:ubms@uni.edu)

 [eop.uni.edu](http://eop.uni.edu)

 800 Sycamore Street  
Waterloo, IA 50703





## Student Application Upward Bound Math and Science

### Student Information (Please Print):

First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Last Name: \_\_\_\_\_

Birth Date (mm/dd/yyyy): \_\_\_\_\_ Gender:  Male  Female  Non-Binary

Street/Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Student's Email Address: \_\_\_\_\_ Student's Cell Phone #: \_\_\_\_\_

**Race/Ethnicity:**  Asian  Native American  
 Black or African American  Native Hawaiian or Pacific Islander  
 Hispanic or Latinx  White

**Citizenship of Student:**  U.S. Citizen  Permanent Resident  Applying for U.S. Citizenship

**Current Academic Level:**  8<sup>th</sup>  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup>

**School Currently Attending:**  Bunger Middle School  Expo Alt Learning Center  
 Central Middle School  East High School  
 Hoover Middle School  West High School  
 G.W. Carver Academy

**If the student is currently in 8<sup>th</sup> grade, what high school will the student be attending?**

Expo Alt Learning Center  East High School  West High School

**Is the student currently enrolled in Upward Bound?**  Yes  No

**Is the student currently enrolled in Educational Talent Search?**  Yes  No

**Does the student have any physical or learning disabilities that UBMS should be aware of?**  Yes  No

If yes, please specify: \_\_\_\_\_

**Is the student a ward of the court?**  Yes  No

**Is the student homeless?**  Yes  No

**Is the student living in a foster home?**  Yes  No

## Parent/Guardian Information (Please Print):

Parent/Guardian 1 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Parent/Guardian Phone #: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

Parent/Guardian 2 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Parent/Guardian Phone #: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

**Has either parent of the student (biological or adoptive, *NOT* step parent) graduated from a four-year college and received a Bachelor's degree?**  Yes  No

If yes, please specify: \_\_\_\_\_

**With whom does the student live? (Check all that apply)**

Mother  Father  Guardian  Step-Mother  Step-Father

**What language is primarily spoken in your home?** \_\_\_\_\_

## Income Eligibility

Total number of people living in household: \_\_\_\_\_

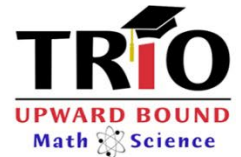
**Total Household Income Range:**

If you filed a 2021 income tax return please check the income range that is closest to your taxable income from Form 1040.

- |                                              |                                              |                                              |
|----------------------------------------------|----------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> \$0 - \$21,870      | <input type="checkbox"/> \$37,291 - \$45,000 | <input type="checkbox"/> \$60,421 - \$68,130 |
| <input type="checkbox"/> \$21,871 - \$29,580 | <input type="checkbox"/> \$45,001 - \$52,710 | <input type="checkbox"/> \$68,131 - \$75,841 |
| <input type="checkbox"/> \$29,581 - \$37,290 | <input type="checkbox"/> \$52,711 - \$60,420 | <input type="checkbox"/> \$75,842 or more    |

I, as the parent/guardian(s) of the student listed, realize that by signing this form, I am declaring that my/our income is either above or below the Federal TRIO Programs Current-Year Low-Income Level as indicated and checked above. I realize that this statement may be audited and that I may be required to produce further documentation as proof of my income at a later date.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Upward Bound Math and Science Permission to Access Records

To the officials of: Waterloo Community Schools,

I hereby grant permission for the University of Northern Iowa Upward Bound Math and Science TRIO Program (UBMS) to have access to the records of \_\_\_\_\_

**Student's Name (Please Print)**

including the cumulative record folder, quarterly and semester grades, test scores, class schedules, and any transcripts during the student's 8<sup>th</sup>-12<sup>th</sup> grade enrollment.

I understand my child's records will be kept in a confidential file and this information will be used for the following purposes:

- To assist UBMS personnel as they support my student's preparation for success in accessing and completing postsecondary education
- To provide data to the U.S. Department of Education and to the University of Northern Iowa for the sole purpose of assessing the effectiveness of UBMS in providing services to its participants.

Student's Grade (as of date signed below) \_\_\_\_\_

Student's School \_\_\_\_\_

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**University of Northern Iowa**  
**Upward Bound Math and Science Program**  
 800 Sycamore Street  
 Waterloo, Iowa 50703-4730  
 (319) 273-4772 • (319) 433-0160

## Upward Bound Math and Science Student Social Media Photo Release Form

**\*This Photo Release Form will be utilized to highlight and promote activities and achievements of the UNI Upward Bound Math and Science Program. \***

I authorize the University of Northern Iowa (UNI) to videotape, photograph, record, edit, copy, display, perform publicly, distribute, use and re-use my (or my child's) image, voice, and likeness in all current and future UNI productions, projects, media and promotional materials, in any manner, including print, tape, broadcast, digital media, and/or yet to be developed technology. I understand that my (or my child's) image, voice, and likeness may be distributed, used, etc. in the United States and elsewhere for an unlimited time.

I understand that I will not receive any compensation as a result of any such videotaping, photography, recording, editing, copying, display, public performance, distribution, use or re-use of my (or my child's) appearance, including my (or my child's) image, voice or likeness. I understand and agree that UNI owns the copyright and all other media distribution rights relating to the appearance. I release any and all claims or causes of actions of any nature that I may have, now or in the future, against the University of Northern Iowa, the Board of Regents-State of Iowa, the State of Iowa, and their employees and agents in connection with the appearance.

The laws of the State of Iowa will govern this release, without regards to conflict of law provisions.

I represent that I am the parent or legal guardian of \_\_\_\_\_, that I have read and fully understand the contents of this release, and that I consent to this release on behalf of \_\_\_\_\_.

**Student Name**

**Student Name**

Current Street/Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parents/Guardians Phone #: \_\_\_\_\_

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_







## Upward Bound Math and Science Student Reference Form

Students, please have a teacher, counselor, or administrator complete this form.

Teacher/Counselor/Administrator Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Student's Name (please print): \_\_\_\_\_

I have known the above student \_\_\_\_\_ years / months.

**Please check all that apply:**

- I know the above student through personal interaction outside of the classroom or office.
- I know the above student through classroom and/or office interaction.
- I have a general acquaintance of the student, but do not know him/her well.

Do you consider the above student to be in academic risk?    Yes    No    Maybe

Does the above student have the potential to achieve a postsecondary education?    Yes    No    Maybe

*Please compare the students to other students in your classroom/office.*

	<i>Superior</i>	<i>Good</i>	<i>Average</i>	<i>Below Average</i>
Personality				
Alertness				
Leadership				
Verbal Ability				
Responsibility				
Enthusiasm				
Academic Achievements				
Non-Academic Achievements				
Acceptance of Criticism				
Motivation				
Self-esteem				

Comments: \_\_\_\_\_

Teacher/Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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