

CLASSIC UPWARD BOUND PROGRAM APPLICATION



Return completed forms with other application materials to:

University of Northern Iowa
Classic Upward Bound Program
Center for Urban Education
800 Sycamore Street
Waterloo, IA 50703

Statement of Confidentiality

The personal information you give to the UNI Classic Upward Bound Program is sent to the U.S. Department of Education. The information is necessary to determine if you are eligible to participate in the program and helps the government to measure our success. Your information is protected by the Privacy Act. No one may see the information unless he/she works with or for the UNI Classic Upward Bound Program.

Section One: Family and Student Information

Student Information

Social Security Number _____ - _____ - _____

Name (last) _____ (first) _____ (middle) _____

Birth Date (month) _____ (day) _____ (year) _____ Gender (female) _____ (male) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____ - _____

Ethnic Background:

_____ Caucasian _____ Native American _____ African American _____ Asian/Pacific Islander
_____ Latino/Latina _____ Other _____

School Presently Attending: _____

Current Academic Level: _____ 8th _____ 9th _____ 10th _____ 11th

If you are currently in 8th grade, what high school will you be attending in 9th grade? _____

Are you currently participating in an Upward Bound or Educational Talent Search Program? _____ Yes _____ No

Please indicate how you heard about UNI's Classic Upward Bound Program: _____

Family and Student Information

Is the applicant a U.S. citizen? _____ yes _____ no

If no, please explain: _____

Does the applicant have any physical disabilities? _____ yes _____ no

If yes, please specify: _____

Does the applicant have any learning disabilities? _____ yes _____ no

If yes, please specify and provide appropriate documentation: _____

Parent's Signature _____ Date _____

CLASSIC UPWARD BOUND PROGRAM APPLICATION



Parent Information

Does either parent or guardian have a four year college degree? _____ yes _____ no

If yes, who? _____ mother _____ father _____ guardian

With whom does the applicant live? _____ Mother _____ Father _____ Both Parents _____ Guardian(s)

Print names of parent(s) and/or guardian(s):

Total number of people living in household _____

Section Two: Income Eligibility

To be Completed by Parent(s)/Guardian(s) **ONLY**

If you filed a federal income tax return last year, complete Section A.

If you did not file a federal income tax return last year, complete Section B.

A. Taxable Income Information

Number of dependents claimed on income tax _____

Annual family taxable income on 1040, 1040A, or 1040EZ tax form last year:

Joint Return \$ _____

Mother's Return \$ _____ Father's Return \$ _____

If you completed this section, attach a copy of your last 1040, 1040A, or 1040EZ tax form.

B. Non-Taxable Income Information

I did not and will not file a federal income tax return, IRS form 1040, 1040A, or 1040EZ in (year) _____.

I did not file a tax return for the following reason:

_____ Taxable income was less than the amount required for filing a tax return

_____ Received no taxable income

_____ Other, explain: _____

I received non-taxable income from the following sources:

____ Social Security benefits ____ Disability benefits ____ ADC/AFDC ____ Food Stamps ____ Other

If you completed the non-taxable income section, please complete the confidential release form for verification of non-taxable income.

I hereby swear and affirm that information reported in Section Two (Income Eligibility) and any attachments hereto are true, complete, and accurate to the best of my knowledge.

Parent/Guardian Signature _____

Date _____

