

Dear Applicant:

Thank you for your interest in the TRIO Upward Bound Program at the University of Southern California. The Upward Bound Program is an academic resource and college preparatory program focused on assisting high school students from families who meet federal income criteria and are potential first-generation college bound students (neither parents/guardians have a 4-year baccalaureate degree) to develop academic skills. The program is 100% federally funded by the U.S. Department of Education at \$297,601 annually. **All services are FREE to participants**

All information you provide in the application will be used to determine your eligibility for the USC Upward Bound Program and will be kept under strict privacy. If you are accepted in the program, you will receive services which include, but not limited to:

Academic Advising	Saturday Academy at USC campus	College Admission/Financial Aid
Weekly Tutoring	College Tours	Application Assistance
Online Tutoring	Educational/Cultural Activities	SAT/ACT Preparation
Academic & College Advising	Academic, Personal, and	Scholarship Search and Workshops
College/Career Planning	Professional Skills Building Workshops	Financial literacy

To be eligible for the TRIO Upward Bound Program, you must

- Be a United States citizen or Permanent Resident;
- Meet federal income criteria and/or be a potential first-generation college student (neither parent/guardian have graduated with a 4-year baccalaureate degree);
- Be an eligible student at a partner high school: Los Angeles, Santee, Fremont, West Adams, Jefferson, Manual Arts, Crenshaw, Dorsey, or Washington Prep.
- Have a strong desire and motivation to attend college after high school

This application must be completed to be considered for the program. Please take the time to complete the entire application before you submit it to TRIO Upward Bound Staff. Applicants who return completed application will be given first priority for personal interviews.

Application Checklist:

- Completed Application
- Personal Statement (200 word maximum)
- Income Verification Statement or **Signed Copy** of IRS Tax Return (**pages 1-2 of 1040 or 1040SR tax form**)
- Copy of signed social security card
- Parent/Guardian and Student Contract
- Authorization Release Form/Agreement to Participate and Waiver/Assumption of Risk
- Two Teacher/Counselor Recommendation Forms
- Attach a COPY of Unofficial Transcript that includes your California Assessment of Student Performance and Progress (CAASPP) test scores

For more information visit your college center or contact the Upward Bound Advisor assigned to your school:

[HTTPS://USCUPWARDBOUND.ORG/MEET-THE-ADVISOR/](https://uscupwardbound.org/meet-the-advisor/)

Emergency Contact Name: _____

Cell Phone #: (_____) _____ Home Phone #: (_____) _____

Relationship to Student: _____ Work Phone #: (_____) _____

UPWARD BOUND APPLICATION
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OTHER INFORMATION ABOUT STUDENT

Do you participate in other pre-college programs:	TRIO ETS	GEAR UP	EAOP	AVID	
Do you participate in your school's free or reduced lunch program?				Yes	No
Are you taking or have taken an English as Second Language (ESL/LES/ELL/ELD) class?				Yes	No
Are you an emancipated minor or do you have a court-appointed legal guardian?				Yes	No
Are you 18 years of age or an orphan with no legal guardian?				Yes	No
Has a school representative or other agency determined you to be an unaccompanied youth who is homeless?	Yes	No			
Are you involved with the juvenile justice system?	Yes	No			

STUDENT POST-SECONDARY PLANS

What are your plans after high school graduation? (Check ONLY one below)

4 Year University/College	Community College	Vocational/Trade School	Undecided
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What do you want to study as a college student (college major)?

What is your career goal?

STUDENT ASSESSMENT

This survey contains a number of statements about student needs. Please give your honest opinion about how the Upward Bound Program can meet your needs. **Please CHECK all that you need assistance with. Make sure to answer the last statement.**

- ☐ I want tutorial resources to improve my class grades.
- ☐ I would like advice on time management, test taking strategies, and study skills.
- ☐ I need guidance on courses (A–G) required for college admissions.
- ☐ I need help choosing college and career options that best fit me.
- ☐ I need help completing college admission (UC, CSU, Private, and CC) and financial aid (FAFSA) application forms.
- ☐ I need information about and help preparing for college entrance exams (SAT/ACT).
- ☐ I need advice on financial aid (e.g. scholarship, Grants, FAFSA) and other resources to pay for college.
- ☐ My parents and I need more information about financial aid.
- ☐ I would like to learn about financial literacy: how to use credit cards, how to open a checking account, how to manage college expenses, etc.
- ☐ I need help in choosing a college major.
- ☐ I want information about math and science college degrees.

✓ **I want USC Upward Bound to help me with:**

APPLICATION CERTIFICATION

I certify that all information provided in this application is true and accurate to the best of my knowledge and give my permission for the USC Upward Bound Program to access any school or agency records of my child to determine eligibility for the program and monitor their status/progress in secondary school. I understand that all records will be kept in strict confidence and in accord with the Privacy Act of 1974.

PRINT STUDENT NAME

STUDENT SIGNATURE

DATE

PRINT PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE

UPWARD BOUND APPLICATION 2023-2024

INCOME VERIFICATION INFORMATION

Please answer Question 1 (Q1) or Question 2 (Q2) **NOT BOTH**
This portion must be completed by the student's parent or legal guardian.

Q1: Did you file a Federal Income Tax Form (1040/1040SR) last year or this year?

Yes No (If yes, answer questions 1A and 1B. if NO, go to Question - Q2)

1A. TAXABLE INCOME* \$

*The TAXABLE INCOME is on page 2 of Tax Form (1040 or 1040SR-line 15)

1B. Total number of EXEMPTIONS CLAIMED *

*The EXEMPTIONS CLAIM is on page 1 of Tax Form

Q2: If you or your family did NOT file an income tax return, please check the following:

2A. I attest that my family did not file a Federal Income Tax return during the last calendar year.

2B. Number of people living in the household

2C. SOURCE OF INCOME—Please complete the income information for at least one line below.

Employment Earnings:	\$	weekly, \$	monthly, \$	yearly
Social Security:	\$	monthly		
CAL Works:	\$	monthly		
Unemployment benefits:	\$	weekly, \$	monthly, \$	yearly
Child support/Alimony:	\$	weekly, \$	monthly, \$	yearly
Retirement/Pension:	\$	weekly, \$	monthly, \$	yearly
Other Income, please specify:	\$	weekly, \$	monthly, \$	yearly

ATTACHMENTS

IF YOU FILED YOUR TAXES YOU MUST ATTACH A SIGNED COPY OF PAGE 1 & 2 OF YOUR INCOME TAX RETURN (1040 or 1040 SR) IN ORDER TO VERIFY ELIGIBILITY FOR TRIO UPWARD BOUND PROGRAM

INCOME CERTIFICATION

IN ACCORDANCE WITH THE TRIO UPWARD BOUND ELIGIBILITY REQUIREMENTS SET FORTH BY THE UNITED STATES DEPARTMENT OF EDUCATION, I HEREBY CERTIFY AND ATTEST UNDER PENALTY OF PERJURY THAT THE INFORMATION PROVIDED ON THIS INCOME VERIFICATION IS TRUE AND CORRECT

PRINT STUDENT NAME

STUDENT SIGNATURE

DATE

PRINT PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE

UPWARD BOUND APPLICATION 2023-2024

STUDENT AUTOBIOGRAPHY

We are interested in getting to know who you are. **Please submit a neatly hand-written or typed autobiography (200 words minimum).** Attach this with your application. Make sure to address the following

- Introduce yourself (your family, background, educational, and career goals).
- Reasons why you would like to join TRIO Upward Bound and what do you expect to gain by joining the program.
- How will being a part of TRIO Upward Bound help you reach your personal and academic goals?
- Anything else that may be helpful in giving us a more complete picture of you (participation in extracurricular activities, community service, working, etc.).

PARENT/GUARDIAN CONTRACT

Please read carefully

- If accepted to the University of Southern California TRIO Upward Bound Program, I, the parent/guardian, agree to:
- Encourage my son/daughter/ward to successfully graduate from high school and pursue higher education.
- Support the Upward Bound goals set for my son/daughter/ward.
- Require my son/daughter/ward to attend all Upward Bound activities, that are identified to assist the participant in reaching their academic goals which may include tutoring, workshops, Saturday Academies, and more.
- Require my son/daughter to attend the MANDATORY six-week summer academy program.
- Attend and participate in Upward Bound event(s) that require my presence.
- Understand that there is a zero-tolerance policy in regard to blatant or implied gang insignia, dress, hand signs, harassment or threatening behavior and/or use, furnishment, selling of weapons, alcohol, and drugs.
- Understand that if my son/daughter/ward does not meet the goals and expectations of the program or fully use the services provided, he or she may be dismissed from the programs.
- Understand that if my son/daughter/ward does not adhere to University of Southern California, USC Upward Bound, state and federal policies, laws and expectations, he or she may be dismissed from the program.

PRINT PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE

STUDENT CONTRACT

I understand the purpose of the University of Southern California TRIO Upward Bound (UB) program, is to prepare participants to successfully complete a program of post-secondary education. As part of my personal effort in this preparation, I am signing this contract and commit to the following:

- Successfully graduate high school and enroll in a college of my choice the semester/quarter after high school.
- Make every attempt to complete a post-secondary educational program.
- Enroll in courses that are required for college admissions as well as achieve and maintain at least a 3.0 GPA
- Apply for college and financial aid during my senior year.
- Participate in USC Upward Bound through the completion of my high school education and/or Summer Bridge Program.

- Actively participate in all USC Upward Bound activities, which includes tutoring, workshops, Saturday Academy, field trips, educational and cultural activities, etc.
- Actively participate in the 6-week Summer Program while I am a part of the Upward Bound program.
- Communicate with USC Upward Bound Staff about educational and/or personal goals and attend all appointments arranged by Upward Bound Staff.
- Grant USC Upward Bound access to my college enrollment, retention, and completion information.
- Grant Upward Bound access to my financial aid information from colleges and the federal government.
- I will comply with all the rules and regulations of USC Upward Bound, and I am aware that my failure to comply could result in dismissal from the program.
- Understand that there is a zero-tolerance policy in regard to blatant or implied gang insignia, dress, hand signs, harassing or threatening behavior, weapons, alcohol, and drugs.
- Understand that if I do not meet the goals and expectations of the program or fully use the services outlined for me, I may be dismissed from the program.
- Understand that if I do not adhere to University of Southern California, USC Upward Bound, state and federal policies, laws, and expectations, I may be dismissed from the program.

PRINT STUDENT NAME

STUDENT SIGNATURE

DATE

PHOTO AND MEDIA RELEASE

Yes, I, _____, the parent and/or legal guardian of _____, the Participant, hereby give Upward Bound and the University of Southern California, the right and permission to use, reproduce, edit, exhibit, project, display, copyright and/or publish my/my child's images, likeness, and recordings in which I/my child may be included in the whole or in part, developed during participation in the Program/Activity and thereafter, and to circulate the same in all forms and media for any lawful purpose whatsoever. My consent includes, but is not limited to, images, likenesses and recordings that may be deemed to be educational records under the Family Educational Rights and Privacy Act of 1974 ("FERPA"). I understand and agree that my/my child's image, likeness, or recording will become part of the University of Southern California's photograph and/or recording file and that it may be distributed to other organizations or individuals for use in any publications, media, or technology now known of or hereafter developed in the future for any lawful purpose whatsoever without further permission from me. I also understand that I will receive no compensation in connection with the use of my/my child's image. I hereby waive the right to inspect or approve my/my child's image, likeness or recording or any finished material that incorporates such. I further release, discharge, and agree to waive the University of Southern California, as well as their licensees, successors, legal representatives, and assignees, from any liability for violation of any personal or proprietary right that I may have in conjunction with said images, likenesses and images and with the use thereof. I further acknowledge and agree that Upward Bound and the University of Southern California and its members, their officers, agents, and employees shall not be responsible for any of such image, likeness or recording by any third party accessing it through the internet or any other means.

No, I do not grant permission for my/my child's image, likeness or recording to be used in any form, unless necessary for the administration of the program in which my child is participating.

PRINT STUDENT NAME

STUDENT SIGNATURE

DATE

PRINT PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE

UPWARD BOUND APPLICATION 2023-2024

PARENTAL CONSENT

The undersigned parent(s) or legal guardian(s) of _____ hereby, give(s) permission for their child to participate ("Participant") in Upward Bound (the "Program") at the University of Southern California ("USC"). The Participant's parent(s) or legal guardian(s) expressly understand(s) and agree(s) that the Program presents risks to Participant and/or her/his property. These risks can include, among others (by way of example and without limitation): disease risks; injury to the muscular, skeletal, or nervous systems; injury to internal organs; scratches, bruises, contusions; loss or damage to sight, teeth or hearing; paralysis; concussions; brain damage; other serious injury; and/or death. Participant's parent(s) or legal guardian(s) is/are responsible for researching and evaluating the risks he/she may face and is responsible for his/her actions. Any activities that Participant may take part in, whether as a component of the Program or separate from it, will be considered to have been undertaken with Participant's parent(s)' or legal guardian(s)' approval and understanding of any and all risks involved. To the fullest extent provided by law, the parent(s) or legal guardian(s) agree(s) to defend, indemnify and hold USC, the Program, its officers, trustees, employees, insurers, volunteers and agents harmless from any and all claims, damages, or liabilities of any kind arising from the Participant's or their conduct related to any and all Program-related activities. This indemnification also includes, but is not limited to, any injury, illness, death, or any loss or damage to personal property including reasonable attorneys' fees and/or any other associated costs, from any action, claim, or demand or other consequences arising or resulting directly or indirectly from participation in the Program, including but not limited to claims arising from or related to USC's negligence. The parent(s) or legal guardian(s) agrees that USC assumes no responsibility for any injury or damage arising out of, or in part caused by, participation in the Program, either while in transit to or from or at the activity locations including but not limited to claims arising from or related to USC's negligence. They further agree that they, their spouses, assignees, heirs, guardians, and legal representatives hereby voluntarily indemnify, release from liability, agree to defend and hold harmless USC for any accident, injury, illness, death, loss, theft, damage to person or property. By signing this Consent and Release Form, the parent(s) or legal guardian(s) waive their right to bring any legal action now or at any time in the future to recover compensation or obtain any other remedy for any injury or illness to person or property or for death, however caused, arising out of participation in the Program. They further agree that they, their spouses, assignees, heirs, guardians, and legal representatives will not make any claim against, sue or attach the property of USC for any loss or damage resulting from participation in the Program. The parent(s) or legal guardian(s) agree that they are aware of the potential dangers incidental to participation in the Program, that this is a release of liability, a waiver of their legal right to collect damages in the event of injury, death or property damage, and a contract between USC and them, and they sign it of their own free will. If any provisions of this Consent and Release Form are held invalid or unenforceable, the remainder of the Consent and Release Form shall be construed as if it did not contain the invalid or unenforceable part, and shall be constructed and enforced accordingly. This Consent and Release Form is governed according to the laws of California. The parent(s) or legal guardian(s) expressly agree that this release is intended to be as broad and inclusive as the State of California will allow and that if any portion is held invalid, they agree that the balance shall, notwithstanding, continue in full legal force and effect.

PRINT PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE

PARENT PHONE NUMBER

PARENT EMAIL

For Office Use Only

Program: <input type="checkbox"/> South LA <input type="checkbox"/> Southwest <input type="checkbox"/> Southeast <input type="checkbox"/> Central	Eligibility: <input type="checkbox"/> LI & FG <input type="checkbox"/> LI <input type="checkbox"/> FG	Date of Entry: _____ Class of: _____	_____ Advisor _____ Program Director
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RECORD AUTHORIZATION

ACADEMIC RECORDS RELEASE STATEMENT

The person(s) signing below give consent and authorize the **University of Southern California Upward Bound staff and representatives:**

- To have access to, and make and receive copies of my son's/daughter's/ward's academic records such as report cards, school transcripts, State standardized test scores, disciplinary records, class schedule, and SAT/ACT or GED scores.
- I/We understand that these records will be kept in strict confidence and will be used solely to: a) assess need/eligibility for program services; b) monitor my son's/daughter's/ward's academic progress; c) evaluate the effectiveness of program activities; and d) fulfill program reporting.
- I/We consent to the disclosure of any personally identifiable (e.g. Social Security, Birthdate, etc.) information as defined by FERPA or my education records to the USC Upward Bound staff for the purpose of confirmation of the student's post-secondary enrollment status as reported on the National Clearinghouse Student Tracker.
- This authorization will remain in effect for six years following high school graduation.
- I/We authorize the release and exchange of student financial aid information from colleges/universities and the federal government to the University of Southern California Upward Bound.
- I/We authorized the University of Southern California Upward Bound program to share and discuss information with school personnel in support of my son's/daughter's/ward's academic success.

PRINT STUDENT NAME

STUDENT SIGNATURE

DATE

PRINT PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE

UPWARD BOUND APPLICATION 2023-2024

ENGLISH TEACHER RECOMMENDATION FORM

USC Upward Bound is a federally funded program. The goal of USC Upward Bound is to academically prepare first-generation, low-income students to enroll and graduate from the 4-year college/university of their choice.

Student: Add your name, school, and class below. Then give this form to your English teacher to complete.

Teacher: USC's Upward Bound program is designed to generate knowledge, skills and motivation for success in post-secondary school (college or university). Participants must have a need for academic support. Participants should also have the ability to pursue and achieve a 4-year degree even though they may not be demonstrating all of the characteristics of successful students. Please provide us with your evaluation of this student's ability to benefit from the Upward Bound program.

Student Name:

School Name:

Course taken/in progress with the teacher completing recommendation:

Please rate this student by circling the appropriate response to the statements.

1-Strongly Disagree 2-Disagree 3-Neither Disagree/Agree 4-Agree 5-Strongly Agree

1. Would benefit from Upward Bound academic support/services	1	2	3	4	5
2. Expresses interest to graduate high school and complete a 4-year degree	1	2	3	4	5
3. Demonstrates responsible behavior	1	2	3	4	5
4. Has strong social/interpersonal skills	1	2	3	4	5
5. Is dependable and reliable	1	2	3	4	5
6. Has strong study skills	1	2	3	4	5
7. Would benefit from supplemental career guidance	1	2	3	4	5
8. Has a good attendance/punctuality record	1	2	3	4	5
9. Has the potential for post-secondary success	1	2	3	4	5

What services/assistance from the Upward Bound program does the student need to help him/her succeed in high school (e.g. tutoring, college prep, etc.)?

Are you aware of any current circumstance that may affect the student's performance or participation in this Upward Bound Program (e.g. family responsibility, extracurricular activities, financial circumstance, etc.)? Yes No
If so, please explain

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

Strongly Recommend

Recommend

Recommend with Reservation

Do not Recommend

TEACHER NAME

TEACHER SIGNATURE

DATE

UPWARD BOUND APPLICATION 2023-2024

MATH TEACHER RECOMMENDATION FORM

USC Upward Bound is a federally funded program. The goal of USC Upward Bound is to academically prepare first-generation, low-income students to enroll and graduate from the 4-year college/university of their choice.

Student: Add your name, school, and class below. Then give this form to your Math teacher to complete.

Teacher: USC's Upward Bound program is designed to generate knowledge, skills and motivation for success in post-secondary school (college or university). Participants must have a need for academic support. Participants should also have the ability to pursue and achieve a 4-year degree even though they may not be demonstrating all of the characteristics of successful students. Please provide us with your evaluation of this student's ability to benefit from the Upward Bound program.

Student Name:

School Name:

Course taken/in progress with the teacher completing recommendation:

Please rate this student by circling the appropriate response to the statements.

1-Strongly Disagree 2-Disagree 3-Neither Disagree/Agree 4-Agree 5-Strongly Agree

1. Would benefit from Upward Bound academic support/services	1	2	3	4	5
2. Expresses interest to graduate high school and complete a 4-year degree	1	2	3	4	5
3. Demonstrates responsible behavior	1	2	3	4	5
4. Has strong social/interpersonal skills	1	2	3	4	5
5. Is dependable and reliable	1	2	3	4	5
6. Has strong study skills	1	2	3	4	5
7. Would benefit from supplemental career guidance	1	2	3	4	5
8. Has a good attendance/punctuality record	1	2	3	4	5
9. Has the potential for post-secondary success	1	2	3	4	5

What services/assistance from the Upward Bound program does the student need to help him/her succeed in high school (e.g. tutoring, college prep, etc.)?

Are you aware of any current circumstance that may affect the student's performance or participation in this Upward Bound Program (e.g. family responsibility, extracurricular activities, financial circumstance, etc.)? Yes No
If so, please explain

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

Strongly Recommend

Recommend

Recommend with Reservation

Do not Recommend

TEACHER NAME

TEACHER SIGNATURE

DATE