



UNIVERSITY OF TEXAS ARLINGTON
UPWARD BOUND MATH SCIENCE
New Student Application

LOCAL PROGRAM



**UNIVERSITY OF TEXAS ARLINGTON
UPWARD BOUND MATH SCIENCE
STUDENT APPLICATION**

Please submit the following items along with your completed application:

- A Copy of your Social Security Card or Resident Alien Card
- A Copy of your Parent's Most Recent 1040 Tax Forms with the Student Listed
- Completed Recommendation from your Counselor, Math & Science Instructors
- A Copy of your Current Grades & Transcript with your most recent Standardized Test Scores
- Completed School Record Release Form

I. PERSONAL INFORMATION: (PLEASE FILL EVERY FIELD) * PHONE NUMBER FOR STUDENT INTERVIEW

Social Security Number	Date	High School	
First Name	Middle	Last Name	
Number and Street / P.O. Box Number	City	State	Zip Code
Date of Birth	*Phone Number	Email Address	

Classification 9th 10th Gender Male Female

My Overall Grade Point Average (GPA)

4.00 or above 3.99 - 3.50 3.49 - 3.00 2.99 - 2.00 1.99 or lower Not Available

Indicate your GPA scale 4 point weighted 4 point un-weighted Other, _____

Current Class Ranking _____ out of _____ [Not Applicable for Freshman Applicants]

II. CITIZENSHIP STATUS

- U.S. Citizen Please submit a copy of your Social Security Card
- Not an U.S. Citizen Please submit a front and back copy of your Resident Alien Card
 - Permanent Resident Card # _____ Expiration Date _____
 - Applied for Citizenship (must provide copy of the request)

The UT Arlington Upward Bound Math Science program is a federally funded college preparatory program. In order to participate in the UBMS program, a student must show proof of citizenship or residency. All information received will be confidential, used only for eligibility verification. You may contact a UTA UBMS staff for any questions/concerns regarding the confidentiality of your personal records. For more information about the TRiO programs, you can visit the Department of Education website: <http://www2.ed.gov/about/offices/list/ope/trio>

III. ETHNICITY & RACE

Are you Hispanic/ Latino? Yes No Please select one or more of the five racial group below:

Asian American Indian/ Alaskan Black Native Hawaiian/ Other Pacific Islander White

IV. EXTRACURRICULAR ACTIVITIES

Indicate the activities that you are currently involved in at your high school or within your community.

<input type="checkbox"/> UIL Competition	_____	_____
<input type="checkbox"/> Athletics/ Band	_____	_____
<input type="checkbox"/> Clubs	_____	_____
<input type="checkbox"/> Work	_____	_____
<input type="checkbox"/> Others	_____	_____
	Activity Name	Days of the Week/ Hours committed

V. CAREER GOALS & HOBBIES

Please answer the following questions in your own word. Your response to these questions will help us to better access you as a potential participant.

Indicate your desired Career Goal: _____

List any Special Interest or Hobbies that you have: _____

VI. INTEREST QUESTIONNAIRE

1. What are your reasons for wanting to join the Upward Bound Math Science Program?

2. Tell us about THREE of your positive characteristics. This is an opportunity for us to get to know you better. Feel free to use more space than the one provided below (attached to back of application).

3. Do you feel you will have sufficient time to dedicate to the UBMS program? Yes No

The UBMS Program requires all students to attend after school tutorials once a week every other week and meets every other Saturday .

4. Indicate the services that you need from the UBMS program (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Academic Advising | <input type="checkbox"/> Scientific Research Experiences |
| <input type="checkbox"/> Career Counseling & Exploration | <input type="checkbox"/> Cultural Enrichment |
| <input type="checkbox"/> College Entrance Exam Preparation | <input type="checkbox"/> Academic Instruction & Tutorials |
| <input type="checkbox"/> College Admission & Financial Aid | <input type="checkbox"/> Scholarship Information |

5. It takes commitment to be a part of the UBMS program. Tell us about something you're committed to and what you have done to stay committed to that task/ goal/ etc.

6. If there is only one spot left in the UBMS program and you are competing with another student with the same credentials, tell us one good reason why it should be you who gets accepted.

X. PARENT'S INFORMATION - TO BE COMPLETE BY THE PARENT OR GUARDIAN

Student lives with (check all that apply)

- Father Mother Stepparent Grandparent Other, specify _____

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Name of Father/ Male Guardian

Name of Mother/ Female Guardian

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Employer

Employer

--	--

Work Number

Work Number

XI. PARENT'S EDUCATION - TO BE COMPLETE BY THE PARENT OR GUARDIAN

	Father/ Male Guardian		Mother/ Female Guardian	
	Attended	Completed	Attended	Completed
High School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 year College/ University	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 year College/ University	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

XIII. INCOME VERIFICATION - To BE COMPLETE BY THE PARENT OR GUARDIAN

Eligibility for UBMS is partially dependent upon family income, therefore we must request this information. A student's application can not be considered without verification of income. All applicant information are confidential, used only for the purpose of determining student's eligibility to participate in the UBMS program.

Who claims the student as a dependent on their tax return?

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First Name	Last Name	Relationship
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Please provide a Copy of your Most Recent Tax Form with the student listed.

If you did not or will not file a tax return, you must complete a W-2 Substitute form to verify family income.

Do you need a W-2 Substitute Form? Yes No

Does the student qualify/ participate in free or reduced school lunch? Yes No

Is the family receiving TANF or Food Stamps? Yes No

From your most recent Federal Income Tax Form (showing student as a dependent), what was your Taxable Income (as indicated on 1040-line 43, 1040A-line27, 1040EZ-line 6)?

Taxable Income \$ _____

Number of Dependents (exemptions) claimed: _____

All tax information are confidential, used only for the purpose of financial need verification. If you have any concerns submitting your tax information, please contact the UBMS office.

**** I certify that the information provided on this application is accurate and complete to the best of my knowledge. I also agree to provide any documentation necessary to verify information reported on this form. ****

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Student Name	(Please Print)	Student Signature	Date
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Signature of Father/ Male Guardian	Date	Signature of Mother/ Female Guardian	Date
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THANK YOU FOR APPLYING TO THE UBMS PROGRAM!
UT Arlington Upward Bound Math & Science Center - P.O. Box 19356, Arlington, TX 76019
Tel: (817) 272-2636 Fax: (817) 272-2616 Website: <http://www.uta.edu/ubmathsci>

NOTICE: You may be entitled to know what information The University of Texas at Arlington (UT Arlington) collects concerning you. You may review and have UT Arlington correct this information according to procedures set forth in UTS 139. The law is found in section 552.021, and 559.004 of the Texas Government Code.



SCHOOL RECORD RELEASE FORM

NOTE TO THE STUDENT / PARENTS

The University of Texas at Arlington Upward Bound Math & Science Center is required to follow the performance and progress of our participant through their college career. This form will be mailed to high school and college registrars allowing our program staff to receive copies of your school records for tracking and reporting purposes. This form as dated below will serve as the only records release form valid from the date signed until completion of your post secondary program of study.

NOTE TO HIGH SCHOOL AND COLLEGE REGISTRARS

The University of Texas at Arlington Upward Bound Math & Science Center is mandated by the U.S. Department of Education to follow the progress of program participants through their high school and college careers. This form as dated below is the only release form to be used by our program. Due to the transient nature of students it will become nearly impossible to seek annual updates of this form. The signatures below indicate that they realize this form (as dated below) will be used for many years in the future once they complete our college preparatory program. Thank you for honoring our request for information.

STUDENT / FAMILY AGREEMENT

I understand that as part of the University of Texas at Arlington Upward Bound Math & Science Center Selection process, my child's school records (including transcripts, report cards, financial aid status, standardized test scores and academic progress reports) may need to be examined by Upward Bound Math & Science staff. I also understand that the Upward Bound Math & Science Center will continue to require this information throughout the duration of my high school and college career.

I hereby give permission to the University of Texas at Arlington Upward Bound Math & Science Center to request the following information from my child's high school or institution of postsecondary education at this time or anytime in the future as needed and extend its validity from the date signed until completion of their post secondary program of study.

- | | |
|------------------------------|--|
| 1) School Records | 4) Student's Status and Performance with the Institution |
| 2) Standardized Test Scores | 5) Student's Financial-Aid Status |
| 3) Report Cards/ Transcripts | 6) Student's Current Phone and Mailing Address |

_____	(Please Print)	_____	_____
Father/Legal Guardian Name		Father/Legal Guardian Signature	Date

_____	(Please Print)	_____	_____
Mother/Legal Guardian Name		Mother/Legal Guardian Signature	Date

_____	(Please Print)	_____	_____
Student Name		Student Signature	Date

_____	_____	_____	_____	_____
Student's Current High School	Number and Street	City	State	Zip Code

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Applicant,

In order to complete your application these individuals must provide information regarding you.

Recommendations must be received from your:

- 1) *High School Counselor,*
- 2) *Current Math Teacher,*
- 3) *Current Science Teacher, and*
- 4) *TRiO Counselor (only if you are enrolled in Educational Talent Search, Upward Bound program, or Gear-Up)*

Your recommenders must submit information online and you do not have to anything further.

Detach the information below, print your name on each box, and give to your teachers/counselors.

Please remember, recommendations must be received by the deadline in order to be considered.

..... Detach here

High School Counselor Recommendation

_____ is submitting an application to the *UT Arlington Upward Bound Math & Science Program (UBMS)* – a college preparatory program. We would appreciate your promptness in providing information to assist us in considering their application.

To provide student recommendation & ratings **go to:**

<http://bit.ly/AppCounselor>

If you have difficulty with the online recommendation, please contact us so that we can assist you with a paper submission.
Tel. 817.272.2636, Fax 817.272.2616, Email: ubms@uta.edu

TRiO Counselor/Advisor Recommendation

(Only If needed)

_____ is submitting an application to the *UT Arlington Upward Bound Math & Science Program (UBMS)* – a college preparatory program. We would appreciate your promptness in providing information to assist us in considering their application.

To provide student recommendation & ratings **go to:**

<http://bit.ly/AppTRIO>

If you have difficulty with the online recommendation, please contact us so that we can assist you with a paper submission.
Tel. 817.272.2636, Fax 817.272.2616, Email: ubms@uta.edu

Math Teacher Recommendation

_____ is submitting an application to the *UT Arlington Upward Bound Math & Science Program (UBMS)* – a college preparatory program. We would appreciate your promptness in providing information to assist us in considering their application.

To provide student recommendation & ratings **go to:**

<http://bit.ly/AppTeacher>

If you have difficulty with the online recommendation, please contact us so that we can assist you with a paper submission.
Tel. 817.272.2636, Fax 817.272.2616, Email: ubms@uta.edu

Science Teacher Recommendation

_____ is submitting an application to the *UT Arlington Upward Bound Math & Science Program (UBMS)* – a college preparatory program. We would appreciate your promptness in providing information to assist us in considering their application.

To provide student recommendation & ratings **go to:**

<http://bit.ly/AppTeacher>

If you have difficulty with the online recommendation, please contact us so that we can assist you with a paper submission.
Tel. 817.272.2636, Fax 817.272.2616, Email: ubms@uta.edu