



Application Form

Fulton-Montgomery Community College
2805 State Hwy 67 Johnstown, NY 12095
(518) 762-4651 ext 3604

Upward Bound is a **federally funded TRiO program** sponsored by FMCC and the U.S. Department of Education. Its mission is to generate in participants the skills and motivation necessary to complete high school and be admitted and succeed in a program of postsecondary education. Students participate in an academic year component and a summer component on the FMCC campus in Johnstown. Through a variety of experiences and services, Upward Bound students develop self-awareness and skills that will improve their chance of achieving a college education, a meaningful career, and economic independence. Upward Bound is open to all Amsterdam High School students regardless of race, ethnic background. Eligible students are accepted on a first come first serve basis. **All services offered to qualified students are free of charge.** The information on this application form is used for no other purpose than to determine eligibility and is **strictly confidential**.

Student Information:

Student Name: _____
First MI Last

Social Security #: _____ Date of Birth: _____ Grade: 8 9 10 11 12

Home Address: _____
Street City State Zip

Home Phone: (____) _____ Cell Phone: (____) _____ Work Phone: (____) _____

Email: _____ Gender: ☐ Female ☐ Male

What is the best way to contact you? ☐ Home Phone ☐ Work Phone ☐ Cell Phone ☐ Texting ☐ Email ☐ US mail

A) Ethnic Origin: (Please check all that apply)

☐ Native American ☐ Asian ☐ African American ☐ Hispanic or Latino ☐ White, Non-Hispanic
☐ Native Hawaiian/other Pacific Islander ☐ Multi Racial

B) Citizen Status: ☐ US Citizen ☐ Resident Alien (**enclose copy of card*) ☐ Other (please specify) _____

Mother/Guardian Information

Name: _____

Address: _____

Home Phone: _____

Work
Phone: _____

Cell
Phone: _____

Email
Address: _____

Father/Guardian Information

Name: _____

Address: _____

Home Phone: _____

Work
Phone: _____

Cell
Phone: _____

Email
Address: _____

Parents/Guardian Level of Education Completed:

Father/Guardian: High School 9 10 11 12 GED College 1 2 3 4

Mother/Guardian: High School 9 10 11 12 GED College 1 2 3 4

Parents/Guardians Occupations and place of employment:
(If not employed at this time please state the same.)

Mother/Guardian: _____

Father/Guardian: _____

STUDENT STATEMENT

How did you hear about Upward Bound? _____

Why do you want to be in Upward Bound? _____

What are your interests, i.e., hobbies, athletics, extra curricular activities? _____

Student: Read the agreement below and make sure you understand what Upward Bound is all about before making this commitment.

Student Participation Agreement: If selected to be a part of the FMCC Upward Bound Program I agree to participate in both the school year and summer component of the program. I will maintain contact with my Upward Bound counselor and participate in at least two program events during the course of the year. I also agree to take part in tutoring either during or afterschool and acknowledge that I am solely responsible for my academic achievement. I understand that failing grades and/or disruptive behavior which results in suspension from school may also result in my suspension or expulsion from the Upward Bound Program. I acknowledge and agree to the above:

Student Signature: _____ Date: _____

FAMILY FINANCIAL STATEMENT

Upward Bound is an educational program sponsored by the U.S. Department of Education for high school students from modest income families and/or who will be first generation college-going students (neither parent holds a four year college degree). In order to be eligible one or both of these requirements must be met. **These questions MUST be completed. If income area is left blank student cannot be admitted into Upward Bound. All information will be kept strictly confidential.**

What is the size of the household where the child resides? (How many people are in the household, including parent/guardian and children?) _____

Are the parents/guardians of the child employed? ____ Yes ____ No Did the parents/guardians of the child file last year's income tax? ____ Yes ____ No

A. If Yes, what was your **taxable income** (Line 43 on 1040) or (Line 6 on 1040 EZ) on the federal tax form last year?

(20 __ __) \$ _____

B. If No, please list other sources of **income and amount**: _____ SSD _____ SSI

_____ Unemployment _____ Assistance From Department of Social Services

_____ Other (Please Explain)

I certify that all the above information is correct, current, and true and that ALL income is reported. I understand that this information is given for the receipt of federal funds; that Upward Bound and Trio Program officials may verify the information on this application form and that deliberate misrepresentation of the information may subject me to prosecution.

I also authorize the TRiO Upward Bound Program staff to verify necessary academic information to determine my child's eligibility for services and to monitor my son/daughter's continued academic progress while he/she is a TRiO participant.

☐ **I allow** ☐ **I deny (please check one)** TRiO Upward Bound use of my child's name and/or photo in TRiO Upward Bound publications and/or news releases. (The criteria used to qualify your child for Upward Bound will not be publicly disclosed. Under no circumstances will personal or contact information be released.)

Parent or Guardian Signature: _____ Date: _____

<u>Office Use Only</u>		
Date Received _____		Staff Name _____
Accepted _____	Not Accepted _____	Waiting List _____