



Information for Parents

Upward Bound (UB) is an academic program that prepares high school students for higher education. We focus on academic success, university selection, opportunities for career exploration, individual assistance with college applications and financial aid. We expose scholars to different experiences and opportunities available at universities. All with the purpose that the participants register and graduate from college. All services are free of charge for all participants!

Upward Bound offers a variety of services throughout the school year including:

✧ **AFTER SCHOOL TUTORING (MANDATORY)**

Participants are expected to attend after school tutoring once a week, where tutors help students who have difficulty with their homework or with any other subject.

✧ **SATURDAY ACADEMY (MANDATORY)**

Participants will take part in Saturday Academy sessions throughout the year, where the students are exposed to a variety of activities to help them in their educational development.

✧ **ACADEMIC ADVISEMENT**

The academic counselor helps participants with appropriate measures to ensure that students in Upward Bound take appropriate courses for college admission universities and educational options.

✧ **EDUCATIONAL AND COLLEGE TOURS**

Upward Bound participants are exposed to the various educational systems in the state of California: California State University, University of California, and private universities. The tours allow participants to visit various universities.

✧ **SUMMER PROGRAM**

Program participants can participate in the 6 week summer program, students live at CSUF dorms for one week of the program. The purpose of the summer program is to prepare participants for college.

WHICH STUDENT IS ELIGIBLE?

- ✧ Citizen or permanent resident of the US
- ✧ Meet federal low-income guidelines; first-generation college student; and/or facing other barrier to educational access
- ✧ 13 years of age or older, or have finished the 8th grade
- ✧ Minimum GPA of 2.5
- ✧ Attend one of the following High Schools: Century, Magnolia, Saddleback, Santa Ana, Savanna, Valley
- ✧ Students who are committed in participating actively in the activities of the program
- ✧ Students who are motivated to attend a university
- ✧ Students who are not part of another federally funded program such as Talent Search

Contact Information

California State University, Fullerton: 800 N. State College Blvd., Titan Hall 1216, Fullerton, CA 92834

Office: (657) 278-3254

Diana Vasquez, Director

divasquez@fullerton.edu

Web Page: <http://www.fullerton.edu/upwardbound/>



Información para Padres

Upward Bound (UB) es un programa académico que prepara a estudiantes de la preparatoria para una educación universitaria. Nos enfocamos en el éxito académico, selección apropiada universitaria, oportunidades de exploración de carreras, ayuda individual con aplicaciones de universidades y ayuda financiera. Exponemos a estudiantes a diferentes experiencias y oportunidades disponibles en las universidades. Todo con el propósito que los participantes se inscriban y gradúen de una universidad. ¡Y todos los servicios son completamente gratis para los participantes!

Upward Bound ofrece una variedad de servicios durante el año escolar que incluye:

- ✧ **TUTORIA DESPUES DE ESCUELA (MANDATORIO)**
Una vez por semana los participantes del programa asisten a sesiones de tutoría después de escuela, donde tutores asisten a estudiantes que tengan dificultades con materias o tareas.
- ✧ **ACADEMIA DE SABADOS (MANDATORIO)**
Los participantes participan en sesiones de Academia de Sábados durante el año donde los participantes son expuestos a una variedad de actividades que les ayudara en su desarrollo educativo.
- ✧ **CONSEJERA ACADÉMICA**
La consejera académica ayuda a los participantes con las opciones universitarias y educativas apropiadas para asegurar que los estudiantes de Upward Bound tomen los cursos apropiados para admisión a universidades.
- ✧ **EXCURSIONES EDUCATIVAS Y UNIVERSIDADES**
Los participantes de Upward Bound están expuestos a los diversos sistemas educativos en el estado de California: el sistema de Universidades Estatales del Estado de California, Universidades de California, y las universidades privadas. Las excursiones permiten que los participantes conozcan universidades diversas.
- ✧ **PROGRAMA DE VERANO**
Los participantes del programa pueden participar en el programa de verano que es de seis semanas donde viven en los dormitorios de la universidad por una semana. El propósito del programa de verano es de preparar a los participantes para la educación universitaria.

¿QUE ESTUDIANTE ES ELEGIBLE?

- ✧ Ciudadano o residentes permanentes de los EE.UU.
- ✧ Elegibilidad económica federal, o los padres/tutores no se han graduado de una Universidad de cuatro años, o Enfrentando otras barreras para éxito de educación
- ✧ 13 años o más de edad o ver terminado el octavo grado
- ✧ Tener un promedio mínimo de 2.5
- ✧ Asistir a una de las preparatorias: Century, Magnolia, Saddleback, Santa Ana, Savanna, Valley
- ✧ Comprometerse en participar activamente en las actividades del programa
- ✧ Tener motivación de asistir una universidad
- ✧ No ser un participante de otro programa federal como Talent Search

Información de Contacto

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Pagina Web: <http://www.fullerton.edu/upwardbound>



APPLICATION CHECKLIST

Please ensure all of the following materials are completed and turned into your higher education counselor altogether once done:

Application Form

Please fill out either English **OR** Spanish Form

Autobiographical Essay

On a separate sheet of paper, write a detailed autobiography that is a minimum of five paragraphs using the following as a guide:

- Paragraph 1: Introduce yourself
- Paragraph 2: Discuss all extracurricular activities you are involved with, in and outside of school (i.e. sports, student government, clubs, community or church groups, hobbies, other organizations, etc.)
- Paragraph 3: Explain your reasons for wanting to go to college; and describe your educational plans (i.e. what degree you plan to obtain) and your career plans for the future
- Paragraph 4: Discuss whether or not you feel your grades in school thus far accurately reflect your potential. If they do not, explain what you think it will take for you to do better in school and how Upward Bound can assist you.
- Paragraph 5: Explain what role the Upward Bound Program will have in your life and why you want to be in this program

Recommendation Form

The Recommendation Form needs to be filled out by a teacher or counselor. Please submit the Recommendation Form along with everything else in this checklist.

Email Address

- Please provide in the application, a current email address that you check a minimum of twice of week. If you do not have an email address, please create one.
- The Upward Bound Program will communicate with you through the email address you provide in the application to set up an interview and for any other program purposes, so checking it often is important.



PARTICIPANT APPLICATION

Revised July 2022

Student Information | Please print in BLACK or BLUE ink.

Last Name:		First Name:		Middle Name:	
Street Address:				Apartment/Unit #:	
City:		State:		ZIP:	
E-Mail Address:		High School:		Grade:	Student ID #:
Social Security #:		Date of Birth:		Age:	Today's Date:
Parent's Cell #: ()		Student's Cell #: ()		Home Phone #: ()	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female			Language(s) Spoken At Home:		
Select which choice applies to you:					
<input type="checkbox"/> U.S Citizen <input type="checkbox"/> U.S Permanent Resident – A #: _____ <input type="checkbox"/> Other (SPECIFY): _____					
Do you have any type of physical or learning disability? <input type="checkbox"/> YES <input type="checkbox"/> NO					
IF ANSWERED YES, PLEASE EXPLAIN: _____					
I am currently a participant of a special program such as:					
<input type="checkbox"/> Talent Search <input type="checkbox"/> Upward Bound <input type="checkbox"/> GEAR UP <input type="checkbox"/> Other (specify): _____					
Please select all that apply to you:					
<input type="checkbox"/> American Indian/Native Alaskan <input type="checkbox"/> Black/African American <input type="checkbox"/> Mexican/Mexican American <input type="checkbox"/> Other Latino					
<input type="checkbox"/> Asian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Caucasian/White <input type="checkbox"/> Filipino <input type="checkbox"/> Multiracial <input type="checkbox"/> Other: _____					
Who does student live with? (you may check more than one):					
<input type="checkbox"/> Parent A Name: _____ <input type="checkbox"/> Parent B Name: _____ <input type="checkbox"/> Step-Parent A Name: _____					
<input type="checkbox"/> Step-Parent B Name: _____ <input type="checkbox"/> Guardian Name: _____ <input type="checkbox"/> Foster Parent Name: _____					

I give my consent to the Upward Bound Program to secure and review information that may be needed to verify my income, and to complete applications to postsecondary institutions and financial aid programs. I hereby grant permission to the personnel of my child's school to provide copies of transcripts, test scores, and academic progress reports to the UB Staff. I certify that the above information is correct to the best of my knowledge. I understand that all the information will be held in the strictest of confidence and used for statistical purposes only.

Doy mi consentimiento al Programa Upward Bound para conseguir y revisar la información que sea necesaria para comprobar mis ingresos, para completar las solicitudes a las instituciones de educación superior y programas de ayuda financiera. Autorizo al personal de la escuela de mi hija/o para proporcionar copias de las transcripciones, resultados de pruebas e informes académicos de proceso para el personal del programa. Yo certifico que la información anterior es correcta a lo mejor de mi conocimiento. Entiendo que toda la información se llevará a cabo en la más estricta confidencialidad y se utiliza para fines estadísticos.

Student Signature (Firma del estudiante): _____ **Date (Fecha):** _____

Printed Parent or Guardian Name (Nombre impreso del padre o guardián): _____

Relationship (Relación al estudiante): _____

Parent or Guardian Signature (Firma del padre o guardián): _____ **Date (Fecha):** _____



Upward Bound Program

www.fullerton.edu/upwardbound

800 N. State College Blvd. | Titan Hall 1216 | Fullerton, CA. 92831

Parent/Step-Parent or Guardian Information | Please print in BLACK or BLUE ink.

Parent/Step-Parent or Guardian A

Last Name		First Name		Middle Name		Relationship to Student					
Occupation			Employer			Job Title					
Home Address (if different than student's)					Work Address						
City		State		Zip Code		City		State		Zip Code	
Home Phone Number			Cellphone Number				Work Phone Number				
Email Address					Primary Language						
Please mark the last level of education that you completed.											
<input type="checkbox"/> Did not attend school			<input type="checkbox"/> Jr. High/Middle School			<input type="checkbox"/> Associate Degree			<input type="checkbox"/> Graduate Degree		
<input type="checkbox"/> Elementary School Grade: _____			<input type="checkbox"/> High School			<input type="checkbox"/> Bachelor Degree					
If you have earned a college degree, please provide all THREE of the requested information.		1	State and Country of College/University								
		2	Title of the Degree								
		3	Field(s) of Study								

Parent/Step-Parent or Guardian B

Last Name		First Name		Middle Name		Relationship to Student					
Occupation			Employer			Job Title					
Home Address (if different than student's)					Work Address						
City		State		Zip Code		City		State		Zip Code	
Home Phone Number			Cellphone Number				Work Phone Number				
Email Address					Primary Language						
Please mark the last level of education that you completed.											
<input type="checkbox"/> Did not attend school			<input type="checkbox"/> Jr. High/Middle School			<input type="checkbox"/> Associate Degree			<input type="checkbox"/> Graduate Degree		
<input type="checkbox"/> Elementary School Grade: _____			<input type="checkbox"/> High School			<input type="checkbox"/> Bachelor Degree					
If you have earned a college degree, please provide all THREE of the requested information.		1	State and Country of College/University								
		2	Title of the Degree								
		3	Field(s) of Study								

Información del Padre/Padrastro o Tutor Legal Por favor escriba en tinta NEGRA o AZUL.

Madre/Padre, Madrastra/Padrastro, o Tutor Legal A

Apellido	Primer Nombre	Segundo Nombre	Relación al Estudiante
Ocupación	Empleado	Título de Trabajo	
Dirección (si es diferente del estudiante)		Dirección del Trabajo	
Ciudad Postal	Estado	Código	Ciudad Postal Estado
Teléfono de su casa	Teléfono celular	Teléfono del Trabajo	
Correo Electrónico		Idioma Principal	
Por favor, indique el ultimo nivel de educación que usted completo:			
<input type="checkbox"/> No asistió a la escuela		<input type="checkbox"/> Secundaria	
<input type="checkbox"/> Primaria; Grado: _____		<input type="checkbox"/> Título Asociada	
		<input type="checkbox"/> Título de Posgrado	
		<input type="checkbox"/> Título de Licenciatura	
Si usted ha recibido un título universitario, por favor proporcione los TRES de la información solicitada.	1	Estado y País del Colegio/Universidad	
	2	Nombre del Título	
	3	Campo(s) de Estudio	

Madre/Padre, Madrastra/Padrastro, o Tutor Legal B

Apellido	Primer Nombre	Segundo Nombre	Relación al Estudiante
Ocupación	Empleado	Título de Trabajo	
Dirección (si es diferente del estudiante)		Dirección del Trabajo	
Ciudad Postal	Estado	Código	Ciudad Postal Estado
Teléfono de su casa	Teléfono celular	Teléfono del Trabajo	
Correo Electrónico		Idioma Primerizo	
Por favor, indique el ultimo nivel de educación que usted completo:			
<input type="checkbox"/> No asistió a la escuela		<input type="checkbox"/> Secundaria	
<input type="checkbox"/> Primaria; Grado: _____		<input type="checkbox"/> Título Asociado	
		<input type="checkbox"/> Título de Posgrado	
		<input type="checkbox"/> Título de Licenciatura	
Si usted ha recibido un título universitario, por favor proporcione los TRES de la información solicitada.	1	Estado y País del Colegio/Universidad	
	2	Nombre del Título	
	3	Campo(s) de Estudio	



PARTICIPANT APPLICATION

Revised July 2022

Income Eligibility Information | Please complete in BLACK or BLUE ink.

<p>Note: Taxable income can be found on the federal income tax return.</p> <ul style="list-style-type: none"> • On IRS Form 1040 see line 43 • On IRS Form 1040A see line 27 • On IRS Form 1040 EZ see line 6 	<p>What was your family's <i>taxable</i> (not total) income from the last calendar year? (please select one)</p> <p><input type="checkbox"/> My family filed a federal income tax return for the last calendar year, and my family's taxable income from the last calendar year was: _____</p> <p><input type="checkbox"/> My family did not file a federal income tax for the last calendar year, but my family's total income from the last calendar year was: _____</p> <p><input type="checkbox"/> My family had no taxable income during the last calendar year.</p>
<p>How many people live in your household?</p>	<p>Does your child qualify for either federal program?</p> <p><input type="checkbox"/> Reduced Lunch <input type="checkbox"/> Free Lunch</p>

Certification, Permission, and Consent

I hereby give the Upward Bound staff permission to have access to report cards, high school transcripts, college/university transcripts and enrollment data, standardized test results, and other pertinent information. I understand that this permission will be in effect throughout my child's participation in the Upward Bound program and six years after their high school graduation. To facilitate provision of program services, I grant consent for my child to be occasionally called out of class for advising by Upward Bound staff. Finally, I certify that all information provided in this application is accurate and true to the best of my knowledge.

In the event that my child is offered and accepts an invitation to participate in the Upward Bound program:

- *I affirm that my child is in good health and able to participate in Upward Bound activities. I voluntarily assume the risk of any possible injury/illness or property damage associated with their participation in UB activities. If my child needs emergency medical treatment and their emergency contact cannot be reached, I consent to any medical treatment deemed advisable by any licensed physician and agree to be financially responsible for any costs incurred as a result of such treatment. I understand that California State University, Fullerton does not provide health or accident insurance for participants. I have been advised to provide my own medical and hospital insurance.*
- *I grant the University permission and the right to photograph my child and to place such photographs in University publications and/or to make them available to outside media. I understand and acknowledge that neither I nor my child will receive any monetary compensation for the use of their likeness; have the opportunity to inspect or approve any photograph prior to its use or release; or have any copyright interests in any photograph. The University agrees that if it selects a photograph of my child, that photograph will not be used for any purpose other than to promote the University. I understand that the determination of what is "promotional" rests solely with the University.*
- *In consideration of my child's participation in Upward Bound, on behalf of their, myself, all heirs and assigns, I release and hold harmless the State of California, the California State University Trustees, California State University, Fullerton, the California State University, Fullerton Foundation, and their respective officers, agents, volunteers and employees from any and all claims, damages, losses, causes of action and demands and all costs and expenses incurred in connection therewith resulting from or in any manner arising out of or in connection with my child's participation in Upward Bound.*
- *I agree to indemnify and hold harmless the State of California, the California State University Trustees, California State University, Fullerton and their respective officers, agents, volunteers and employees from liability and responsibility for any claims or demands arising out of the acts or omissions of my child during their participation in Upward Bound.*

Student Signature

Date

Parent/Step-Parent Guardian A Signature*

Date

Parent/Step-Parent Guardian B Signature*

Date

**If the student is less than 18 years old, has not married, and answered NO to all of the questions under Dependency Information on Page 1, a parent or legal guardian must sign this form for it to be considered complete.*



Upward Bound Program

www.fullerton.edu/upwardbound

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Información de Elegibilidad de Ingresos | Por favor complete en tinta NEGRA o AZUL.

<p>Nota: Esta información se puede encontrar en la declaración federal de impuestos.</p> <ul style="list-style-type: none"> • En el formulario del IRS 1040 vea la línea 43. • En el formulario del IRS 1040A vea la línea 27. • En el formulario del IRS 1040 EZ vea la línea 6. 	<p>Que fueron los <i>ingresos gravables</i> (no total) de su familia del último año calendario? (por favor seleccione uno):</p> <p><input type="checkbox"/> Mi familia reporto impuestos federales para el último año calendario, y el ingreso imponible de mi familia del último año calendario fue: _____</p> <p><input type="checkbox"/> Mi familia no reporto impuestos federales para el último año calendario, pero los ingresos totales de mi familia del último año calendario fue: _____</p> <p><input type="checkbox"/> Mi familia no tuvo ingresos imponibles durante el último año calendario.</p>
<p>¿Cuál es el número total de personas (incluyendo usted) en su casa?</p>	<p>¿Califica su hijo/a para unos de los programas federales?</p> <p><input type="checkbox"/> Almuerzo Reducido <input type="checkbox"/> Almuerzo gratis</p>

Certificación, Permiso, y Consentimiento

Por este medio le doy al personal del programa Upward Bound permiso para tener acceso a las boletas de calificaciones, transcripciones de la secundaria, transcripciones del colegio/universidad y datos de inscripción, los resultados de pruebas estandarizadas y otra información pertinente. Yo entiendo que esta autorización estará en efecto durante la participación de mi estudiante en el programa Upward Bound y seis después de su graduación secundaria. Para facilitar la prestación de los servicios del programa, concedo permiso para que mi estudiante sea llamada/o fuera de clase ocasionalmente para recibir asesoramiento por parte del personal Upward Bound. Finalmente, yo certifico que toda la información proporcionada en esta solicitud precisa y verdadera a lo mejor de mi conocimiento.

En el evento que mi estudiante sea ofrecido o acepte invitación a participare en Upward Bound:

- *Yo afirmo que: Mi estudiante está en buena salud y dispuesto a participar en las actividades. Voluntariamente supongo el riesgo probablemente de una herida enfermedad o de daños de propiedad asociado con la participación de cualquier actividad. Si en caso mi estudiante necesita tratamiento médico y su contacto de emergencia no es contactado, consiento a cualquier tratamiento médico aconsejable por un médico licenciado y estoy de acuerdo que puedo ser responsable económicamente por contraer a los gastos resultados por el tratamiento. Entiendo que California State University, Fullerton no proporciona seguro accidental o médicos. He sido aconsejado proporcionar mi propio seguro médico y de hospital.*
- *Concedo permiso y derecho a la universidad de tomar fotos de mi estudiante y poner las fotos en las publicaciones de la universidad o hacerlas disponible a los medios de comunicación. Entiendo y reconozco que mi estudiante ni yo recibiremos ninguna compensación monetaria por el uso de su gusto; tener la oportunidad de inspeccionar las fotos antes de su uso o liberación; o tener algún interés de derechos de reproducción en las fotografías. La universidad está de acuerdo si selecciona una fotografía de mi estudiante, que la fotografía no será usada por otro propósito más que promover la universidad.*
- *En consideración de la participación de mi estudiante en la actividad, en nombre de mi estudiante, mío y todos los asignados, yo libero y detengo inocente al Estado de California, Fideicomisarios de California State University, la California State University, Fullerton, la California State University, la Fullerton Fundación, y sus respectivos oficiales, agentes, voluntarios y empleados de alguna y de todas atribuciones, incurrir en daños, pérdidas o demandas o acciones a causa de y a todos los costos y gastos en conexión resultando en forma o manera de participación en la actividad de mi estudiante.*
- *Estoy de acuerdo de indemnizar y sostengo inofensivo al Estado de California, Fideicomisarios de California State University, la California State University, Fullerton y a sus respectivos oficiales, agentes, voluntarios y empleados de tendencia y responsabilidad de algunas demandas o demandas a cabo de originadas de los actos u omisiones de mi estudiante durante la participación en la actividad.*

Firma del Estudiante

Fecha

Firma del Padre/Padrastro o Tutor Legal A*

Fecha

Firma del Padre/Padrastro o Tutor Legal B*

Fecha

**Si el estudiante es menor de 18 años de edad, no se ha casado, y contesto NO a todas las preguntas debajo de la Información de Dependencia en la Página 1, un(a) madre, padre, o tutor legal firmara este formulario para que sea considerado completo.*

RECOMMENDATION FORM:

Applicant: Please print in ink or type your name, grade level and current date on the top portion of this form, then give it to a teacher/counselor who will recommend you to our program. Please do not give this form to a relative or a friend to fill out.

STUDENT NAME:

SCHOOL:

Teacher/Counselor: The above-named student is interested in participating in the Upward Bound Program at California State University, Fullerton (CSUF). Upward Bound is an academic program designed to prepare and help motivate students who have the potential for success in postsecondary education.

We would appreciate your honest feedback of this student and their potential for benefiting from participation in the Upward Bound Program. Please use the space provided to comment on the relative strengths and weaknesses of the student, how long you have known them and in what capacity. Please return this form to the student or the Upward Bound Program at 800 N. State College Blvd., Titan Hall-1216, Fullerton, CA 92834.

Recommender, using the scale provided below, please place the number that most accurately describes the student in regards to each statement:

4 = Strongly Agree 3 = Agree 2 = Disagree 1 = Neutral

_____ Expresses interest in their academic endeavors education	_____ Has expressed interest in pursuing a postsecondary education
_____ Is motivated to succeed in their class commitments	_____ Consistently follows through on classroom commitments
_____ Has good attendance record enrichment	_____ Would benefit from supplemental educational enrichment
_____ Shows motivation to achieve their endeavors classroom	_____ Regularly exhibits a positive attitude in the classroom
_____ Demonstrates punctuality	_____ Respects classroom rules and expectations
_____ Relates well to peers	
_____ Exemplifies dependable and reliable behavior in and out of the classroom	

Please indicate the areas in which you feel that Upward Bound could help the student:

- Postsecondary planning and selection
 Financial aid advisement and assistance
 Academic skills
 Self-esteem/social skills
 College entrance exams
 Career awareness
 Other: _____

Does the student have the potential to succeed in postsecondary education?

- Yes
 No
 Unsure

Please indicate your assessment of the student's postsecondary potential or interest:

- College or University
 Vocational Technical School
 Other _____
 Community College
 Armed Forces
 Unknown

Teacher/Counselor Printed Name _____

Teacher/Counselor Signature _____ **Date** _____

Visual/ Audio Image Release Form

I grant permission to the State of California, the Board of Trustees of the California State University, California State University, Fullerton, CSU Fullerton Auxiliary Services Corporation and their respective employees, officers, agents and volunteers (collectively University), to take and use visual/audio images of me. Visual/audio images are any type of recording, including but not limited to photographs, digital images, drawings, renderings, voices, sounds, video recordings, audio clips or accompanying written descriptions. The University will not materially alter the original images. I agree that the University owns the images and all rights related to them. The images may be used in any manner or media without notifying me, such as university-sponsored web sites, publications, promotions, broadcasts, advertisements, posters and theatre slides, as well as for non-university uses. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them, or to be compensated for them.

I release the University and its employees and agents, including any firm authorized to publish and/ or distribute a finished product containing the images, from any claims, damages or liability which I may ever have in connection with the taking of use of the images or printed material used with the images.

I am at least 18 years of age and competent to sign this release. I have read this release before signing, I understand its contents, meaning and impact, and freely accept the terms.

Participant Printed Name

Date

Participant Signature

Telephone or email address

Parent or Guardian if under 18 years of age

Address (optional)

Project name: CSUF Upward Bound

Photographer name/signature/contact information/notes:

