



Interest Application for Program Admission

Pre-College Services Unit of The Renaissance Education Group, Inc.

Upward Bound

2016-2017

- Print or type clearly in ink.
- Be sure to answer all questions.
- Your parent/guardian's signature is required.
- **Please mail your completed application to:**
 The Renaissance Education Group, Inc.
 Pre-College Services Unit
 4841-E Industry Lane
 Durham, NC 27713

Please Consider this my Talent Search application
In the event that space is unavailable in Upward Bound, you will be considered for admittance into the Talent Search Program

This form will be used to determine eligibility for program services. Please complete this application in full. All of the information collected will be held in the strictest of confidence. Applications will be processed once all materials are received. *Admission into the program will be based on eligibility, need, and readiness for the program.* **For additional questions, please contact our office at 1-877-416-1736.**

Please check the program that you are applying to (please check only one):		
<input type="checkbox"/> Upward Bound <input type="checkbox"/> Other: _____		
Date:	Name (Last Name, First Name, M.I.):	Social Security #:
High School (HS) Enrollment Status: <input type="checkbox"/> Enrolled <input type="checkbox"/> Not Enrolled <input type="checkbox"/> Graduated		School Name:
College Enrollment Status: <input type="checkbox"/> Enrolled <input type="checkbox"/> Not Enrolled		Counselor's Name:
Current GPA: <input type="checkbox"/> Unknown <input type="checkbox"/> N/A – I do not have a GPA	Current Grade Level:	Expected Graduation Date (mmyy):
Mailing Address: Street and Apt. No. _____		
City	State	Zip
Home Phone Number: () ()	Cell Phone or Alternate Number: () ()	
Date of Birth (DOB):	Age:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
		Are you a US Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No
Citizenship: <input type="checkbox"/> United States Citizen or <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other (please explain): _____		Primary language spoken at home: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other: _____
Ethnic Background (please check all that apply): _____ African American or Black _____ American Indian/Alaskan Native _____ Asian/Pacific Islander _____ Hispanic or Latino _____ White _____ Native Hawaiian/Pacific Islander _____ Other: _____		
How did you find out about our program(s)? <input type="checkbox"/> School Referral <input type="checkbox"/> Recruitment <input type="checkbox"/> Friend/Family Member <input type="checkbox"/> Other (please list): _____		
What extracurricular activities are you involved in?	Do you have internet access at home? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Email Address:	

What are your favorite school subjects?		What are your least favorite school subjects?	
What grades do you usually get?		What classes (if any) do you think that you will need tutoring in?	
Do you want to go to college? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Undecided		What college or university do you plan to attend? <input type="checkbox"/> Undecided <input type="checkbox"/> N/A	
What do you plan on majoring in? <input type="checkbox"/> Undecided <input type="checkbox"/> N/A		What kind of career or job would you like to have? <input type="checkbox"/> Undecided	
What type of degree do you plan to obtain? You may check more than one.			
_____ High School Diploma _____ 4 Year College Degree		_____ Vocational or Technical School Certificate _____ Masters Degree	
		_____ Doctoral Degree _____ Undecided	
Do you currently participate in a state monitored program? <input type="checkbox"/> Yes <i>If yes, then please check all that apply:</i> <input type="checkbox"/> Foster Care <input type="checkbox"/> Juvenile Justice/Youth Detention <input type="checkbox"/> Homeless Shelter <input type="checkbox"/> Other: _____			
<input type="checkbox"/> No			
Have you ever applied, or participated in, an Educational Opportunity Program (i.e. Talent Search, Upward Bound, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please specify:</i> _____			
Does your parent/guardian currently serve in the US Military?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you work or plan to work this school year and/or summer?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, when? _____ Where? _____ How many hours a week? _____			
Who do you live with? <input type="checkbox"/> Mother & Father <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Grandparent <input type="checkbox"/> Other Name of Guardian if you do not live with one of your parents: _____			
Mother's/Guardian's Name:		Father's/Guardian's Name:	
Mother's/Guardian's Address:		Father's/Guardian's Address:	
Mother's/Guardian's Home Phone Number:		Father's/Guardian's Home Phone Number:	
Mother's/Guardian's Cell Phone/Alternate Number:		Father's/Guardian's Cell Phone/Alternate Number:	

RELEASE OF SCHOOL RECORDS

I authorize **The Renaissance Education Group, Inc.** to access and/or receive copies of my school records including academic transcripts, grade reports, report cards, EOG/EOC scores, and any other academic information and test results necessary to complete the program's application process, review academic progress, and report academic performance. **For federal reporting purposes, this release is good for ten years post signature.**

Student Signature
Name: _____
School: _____

Date
Social Security #: _____
Current Grade: _____

I am interested in learning more about the Pre-College Programs of The Renaissance Education Group, Inc. Please contact my parent(s)/guardian(s).

Student Signature

Date

Applications are accepted for review, and participants are selected, regardless of race, color, national origin, religion, gender or disability (U.S. Dept. of Education -GEPA Section 427). The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §1232g, is the law providing for the review and disclosure of student educational records. TRiO will not permit access to or the release of personally identifiable information contained in student educational records to any party without the written consent of the student, except as authorized by FERPA.

PART II – RECOMMENDATION FORMS



The Renaissance Education Group, Inc.
 Pre-College Services Unit
 4841-E Industry Lane
 Durham, NC 27713

Recommendation Form

To Whom It May Concern:

The student listed below is applying for admission into one of the Pre-College Programs of **The Renaissance Education Group, Inc.** Your assessment of the student’s conduct, character and academic need for program services is an integral element in the admission process. Please give us your honest assessment of this student’s desire and ability to learn. Please mail the completed Recommendation Form to the above address. You may also return the completed Recommendation Form to the student in a sealed envelope to submit with his/her completed student application. Should you have any questions or concerns, please feel free to contact our office at 1-877-416-1736. The time and effort you have taken to complete this form is sincerely appreciated.

Student’s Name _____ Grade Level _____ School _____

Class/Course Subject _____ Current Class/Course Grade _____

Please place an "x" in the appropriate column for each characteristic listed below:

STUDENT CHARACTERISTICS	EXCELLENT	AVERAGE	FAIR	POOR
CONDUCT IN CLASS				
WILLINGLY PARTICIPATES IN CLASS				
RESPECTS OTHERS AND THEIR PROPERTY				
ABILITY TO FOLLOW INSTRUCTIONS				
COMPLETES ASSIGNED WORK ON TIME				
STUDY SKILLS/HABITS				
ANALYTICAL THINKING SKILLS				
MATURITY/INTEGRITY				
PUNCTUALITY				
EAGER TO LEARN NEW THINGS				
DEMONSTRATES MOTIVATION TO COMPLETE A 6-WEEK SUMMER				

Please provide comments on motivation, behavior, personality, strengths or weaknesses that you feel are pertinent to the student’s performance in our Pre-College Program. Additional comments may be written on the back. _____

 Recommender’s Printed Name & Title

 Contact Telephone Number

 Recommender’s Signature

 Date

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 Recommender’s Printed Name & Title

 Contact Telephone Number

 Recommender’s Signature

 Date

PART III (A) – PARENT / GUARDIAN LETTER



The Renaissance Education Group, Inc.
Pre-College Services Unit
4841-E Industry Lane
Durham, NC 27713

Dear Parent/Guardian:

Your child has indicated an interest in one of the Pre-College Programs of **The Renaissance Education Group, Inc.** We offer preparatory programs specifically designed to strengthen the academic skills of eligible students who aspire to excel academically and pursue post-secondary degrees after high school graduation.

Year-round services include:

- Activities during the school year to strengthen academic skills and prepare students for success at the college level;
- Summer programs designed to simulate a college-going experience that includes daily coursework in math, science, and foreign language as well as other related activities such as field trips and special events;
- Academic advising from staff;
- Parent/Family activities that encourage education and engagement; and
- Individual assistance with the college admissions and financial aid application process.

In order to comply with Federal and program regulations, parents/guardians must complete the parent application and return with your child's **additional application forms** (e.g. transcript, recommendation letters (2), etc.) to the address listed above. Additionally, please find the **Income Verification Document List** enclosed for your review. All completed applications will be reviewed and eligible applicants will be contacted for an interview with project staff.

Thank you for your interest in our programs. Please phone our office at 1-877-416-1736 if you have any questions or need additional assistance.

Sincerely,

Kenneth Mitchell

Dr. Kenneth Mitchell, Certified Master Coach, BCC # 254
Executive Director
The Renaissance Education Group, Inc.

Enclosures (2)

- Parent Application
- Income Verification Document List

Child's Name:	Current School:	Grade Level:
Child's Social Security Number: _ _ _ - _ _ - _ _ _	Student's Date of Birth (mm/dd/yyyy):	
Mother's/Guardian's Name:	Father's/Guardian's Name:	
Mother's/Guardian's Address:	Father's/Guardian's Address:	
Mother's/Guardian's Home Phone Number:	Father's/Guardian's Home Phone Number:	
Mother's/Guardian's Cell Phone Number:	Father's/Guardian's Cell Phone Number:	
Mother's/Guardian's Work Number:	Father's/Guardian's Work Number:	
Mother's/Guardian's Email Address:	Father's/Guardian's Email Address:	
Has either parent <u>received a 4-year degree</u> from a college or university? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Does your child participate in the free or reduced lunch program? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is the child or his/her family homeless? <input type="checkbox"/> Yes <input type="checkbox"/> No		
What is the total number of people living in the household (including parents/guardians)? _____		
What was the total <i>taxable</i> income, for the last tax year, from all Parent(s)/Guardian(s) living in the same household with the student? \$ _____		
What were the source(s) of income listed above? _____ _____		

I certify that the annual income, source of income, current number in household and other information provided on this form is true and complete to the best of my knowledge.

Parent's/Guardian's Signature

Date

INCOME INFORMATION

Please attach **an approved document** from the Income Verification Document List to verify annual income.

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Parent's/Guardian's Signature

Date

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PART III (C) – INCOME VERIFICATION INSTRUCTIONS



The Renaissance Education Group, Inc.
Pre-College Services Unit
4841-E Industry Lane
Durham, NC 27713

INCOME VERIFICATION DOCUMENT LIST

INSTRUCTIONS FOR PROVIDING VERIFICATION OF INCOME - Please provide verification for **ONE** of the applicable types of income listed below:

If student qualifies for the free or reduced lunch program: provide a copy of the free/reduced lunch verification letter.

If parent(s) or guardian(s) file a Federal 1040 Income Tax form: provide a **SIGNED COPY** of **your most recent tax return** showing the number of dependents claimed and the taxable income.

If parent(s) or guardian(s) receive public assistance (TANF, AFDC, General Assistance, etc.) provide verification of monthly benefits.

If parent(s) or guardian(s) receive Social Security payments (SSI, Disability, etc.) provide verification of monthly benefits from your local Social Security office.

Foster Children or Wards of the Court: no income verification is required – provide a signed letter from foster parent or guardian detailing foster child/ward of the court status. Include caseworker's name, address and telephone number.

If you cannot provide any of the above sources of income verification, please contact Renaissance at 1-877-416-1736.