Colorado State University-Pueblo Talent Search Program STUDENT APPLICATION

CONFIDENTIALITY OF INFORMATION AND PRIVACY ACT

The financial and educational information you provide to the Talent Search Program is required by the U.S. Department of Education in order for your student to participate in TRIO Talent Search and is protected by the Privacy Act. No one may see the information unless they are employed by the program or are specifically authorized by the U.S. Department of Education to evaluate the project.

STUDENT PERSONAL INFORMATION (Please print clearly)

Student Name: First:	Middle:	Last:			
Birth Date://	Age: Student ID (SASII	D)#:			
Mailing Address:	City:	State/Zip Code	e:		
Email Address:	Student Cell: ()	Home Phone: ()			
Middle School/High School:		Grade Level:			
If in Middle School what High School do you plan to attend?:					
Citizenship:	Gender: □Female □Male		Adult T-shirt		
U.S. Citizen	Ethnicity: Are you of Hispanic or Latino (Origin? Yes No	Size:		
 Permanent Resident (Attach copy of residency card) Other 	Race : (<i>Choose one or more from the list be</i> African American/Black American In	elow)	 Small Medium Large X-Large 		

PARENT OR LEGAL GUARDIAN INFORMATION (To be completed by the parent or legal guardian)

With whom does student primarily live? Please check: Both Parents Father Mother Legal Guardian(s)

Parent/Legal	l Guardian	1:
--------------	------------	----

Name:	Relationship to Child:		
Mailing Address: Same as student's above Other:			
Phone #:	Email Address:		
Has this person earned a college Bachelor's degree?	YES NO		
Parent/Legal Guardian 2:			
Name:	Relationship to Child:		
Mailing Address: Same as student's above Other:			
Phone #:	Email Address:		
Has this person earned a college Bachelor's degree?	YES NO		

ACADEMIC AND PERSONAL REFERENCES

Reference 1 (Teacher, Counselor): Name:

Email:

Phone:

Reference 2 (Non-Family Member): Name: Phone:

TAXABLE INCOME STATEMENT

Number of people in household:

(Note: Include yourself, your spouse, your children, and any other individual who is receiving more than half of their support from you.)

Please check one of the boxes below and provide the requested information:

□ Filed a Tax Return for Last Year

Our family's taxable income for last year was \$______(See 1040 line 43, 40A line 27, or 1040EZ line 6.) (if taxable income was 0, put 0) 1040A line 27, or 1040EZ line 6.)

OR

Did Not File Taxes or Tax Return is Not Available.*

*Please contact the Talent Search Office (719-549-2592) for assistance in determining taxable income and completing the following income statement:

Our family's taxable income for last year was \$ (if taxable income was 0, put 0)

Family income information is required by federal guidelines for participation in Talent Search. Please contact the Talent Search Office if you have any questions regarding the information required or about how to complete this form.

I certify that the above information is correct to the best of my knowledge and that all income is reported.

Parent/Legal Guardian Signature: _____ Date: _____

NEEDS AND ACADEMIC INFORMATION Are you currently participating in any of the following programs? (Check all that apply)				
			□ TRiO Upward Bound (CSU-Pueblo)	□ My Life
□ TRiO Upward Bound (PCC)	□ AVID			
\Box GEAR UP	□ Boys and Girls Club			
Please check all of the services you are interested in:				
□ Academic support/study skills	\Box Field trips to colleges			
□ Exploration of Careers and College Majors	□ Assistance with course selection			
□ Course selection	College admissions and applications			
□ Tutoring	□ Financial aid and scholarships			
□ College selection	□ Mentoring			
Please list school activities (sports, clubs, b	and, etc.) you are involved in:			
Please provide your cumulative GPA:	(Please attach copy of grades from Infinite Campus)			
In your own words, tell us why you want to program will help you become successful.	participate in the TRIO Talent Search Program and how the			

Colorado State University-Pueblo TRiO Talent Search CONSENT AND RELEASE OF RECORDS SIGNATURES

Our signatures below indicate that to the best of our knowledge, the information given on this application is true, complete, and accurate. We authorize any public school, educational program, and/or postsecondary institution to release to the Colorado State University-Pueblo TRIO Talent Search, upon their request, information pertaining to my academic, enrollment and financial assistance records.

With my signature below (parent, or student if 18 or over), I hereby grant permission to the staff of the Talent Search Program at Colorado State University-Pueblo to access my (my child's) school records, including grades, test scores, and free or reduced lunch eligibility. These records will be used to assess student needs, monitor student progress, document eligibility for the program, and for reporting purposes.

I, (parent, or student if 18 years or older) hereby authorize post-secondary institutions to release to Talent Search copies of **college academic, enrollment, and student aid award** at the college/university I will be attending after high school graduation.

As a parent or legal guardian signing this form, I give permission for my child to participate in all program-sponsored activities and for any Talent Search staff member to transport my child to and from program-sponsored events. I waive liability, release, and forever discharge Colorado State University-Pueblo and the State Board of Governors of the Colorado State University System, all of its members, and anyone employed with community or educational organizations in partnership with Talent Search from any and all demands, rights, and causes of action of whatever kind of nature arising out of all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property, and the consequences thereof, including death, resulting from my child's voluntary participation in Talent Search. I authorize my child to be treated by qualified medical personnel if the need arises while engaged in official Talent Search activities.

I give permission for the use of my (my child's) name and/or photograph for editorial, promotional, recruitment, or educational purposes.

If accepted into the program, I agree to attain personal, academic, and career goals that I and Educational Talent Search set for myself. I also agree to treat myself, other Educational Talent Search students, and staff with respect, and be a positive representative of the program.

Student's Full Name (print):

Student's Signature

Date

Parent's/Guardian's Name (print):____

Parent's/Guardian's Signature

Date

Submit Completed Application to: Colorado State University-Pueblo / Talent Search 2200 Bonforte Blvd., Buell 107 Pueblo, CO 81001 Phone: (719)549-2592