



For UB office use only Income: _____ Education: _____

LBCC UPWARD BOUND PROGRAM
2019-2020 STUDENT ELIGIBILITY FORM

The Long Beach City College Upward Bound Program is a federally funded initiative that encourages eligible students to complete high school successfully and continue on to post-secondary education. Participants must meet the eligibility criteria of being low-income and/or first generation. Completing this *eligibility form* does NOT mean you have been accepted into the program. However, we review all *eligibility forms* and schedule an information session and interview with students who are eligible. Please return completed form to the UB Program Specialist, Ms. Morales, or email a copy to upwardbound@lbcc.edu.

STUDENT INFORMATION

Student Name _____ Student ID Number _____

High School Attending _____ Grade _____ Birth Date _____

Birthplace _____ Ethnicity _____

Address _____

Street Apt. City Zip code

Student Cell _____ Parent/Guardian Cell _____

Student Email _____

Parent Email _____

High School Counselor Name _____

1. Are you currently enrolled in Talent Search, EAOP, or Gear Up? ___ Yes ___ No
2. Do you wish to attend college after you graduate from high school? ___ Yes ___ No
3. Did you pass the ELA *caaspp*, standardized testing? ___ Yes ___ No
 Math *caaspp*, standardized testing? ___ Yes ___ No
4. What is your current overall GPA? _____ (please attach current progress report or unofficial transcript)
5. Are you a U. S. citizen or resident? ___ Yes ___ No
6. How did you hear about Upward Bound? _____
7. Do you have a family member in the program? ___ Yes ___ No Who? _____

FAMILY INFORMATION

8. Parent/ Guardian Name: _____ Occupation: _____

9. Parent/ Guardian Name: _____ Occupation: _____

10. Education background (*Please mark the appropriate box and identify the birth parent who has the highest level of education*)

Highest education level or degree your birth parent(s) completed:

() Unknown () Middle school () High School () A.A./ A.S. () B.A./ B.S. () Other

Please complete back of form

FINANCIAL INFORMATION

11. Does your parent/guardian receive CalFresh, CalWORKs, Kin-GAP or SSI?
___ Yes ___ No
12. How many people are there in your "household"? _____ ("household" is defined as the total number of persons who are related to you by blood, marriage or adoption and are dependent on the head of the household for support. A stepparent or stepchild is considered related by marriage.)
13. Is your parent/guardian required to file an income tax form? ___ Yes ___ No
14. What was your parent/guardian's taxable income? (This information can be found on any of the forms listed below) \$ _____
IRS FORM 1040----LINE 37
IRS FORM 1040A--LINE 22
IRS FORM 1040EZ--LINE 6

I certify that the information I have given on this application is true. I agree for the release of my/my child's high school and postsecondary academic records to the LBCC Upward Bound Program.

Student name

Student signature Date

Parent/guardian name

Parent/guardian signature Date

The LBCC Upward Bound Program complies with Federal civil rights law and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Funded by the U.S. Department of Education.

Please return this form along with your most recent transcript or progress report to your school career center or deliver it to the LBCC Upward Bound office at Pacific Coast Campus 1305 E. Pacific Coast Hwy. Long Beach, CA 90806. Our offices are located in AA109.

If you have questions, please call Wendy Porter-Coste, Upward Bound Program Director at (562)938-3177 or Liza Morales, Upward Bound Program Specialist at (323)400-7643 *cell*. Thank you for your interest and we will contact you for an interview.

ALL INFORMATION PROVIDED WILL BE KEPT CONFIDENTIAL

upwardbound@lbcc.edu (562)938-3177