

Upward Bound Program
Avila University
 11901 Wornall Rd., Kansas City, MO 64145
 Office: (816) 501-2904 • Fax: (816) 501-2461
 Email: upwardbound@avila.edu • Website: www.avila.edu

Section 2. Parent/Guardian(s) Profile

To be completed by the Parent/Guardian. Please print legibly & use ONLY black/blue ink pen.

Parent/Guardian 1's Information
Relation to Student <i>(Please ✓ one of the following)</i> <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Step-Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other (_____)

Parent/Guardian 2's Information
Relation to Student <i>(Please ✓ one of the following)</i> <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Step-Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other (_____)

Full Name

Full Name

Address

Address *(if different from Parent/Guardian 1)*

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Cell Number (✓ if you would like to receive text messages)

Cell Number (✓ if you would like to receive text messages)

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Home Number

Home Number

Email

Email

Employer

Employer

Job Title

Job Title

Work Address

Work Address

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Work Number (✓ if we can contact you at work)

Work Number (✓ if we can contact you at work)

Do you reside with the student? Yes No

Do you reside with the student? Yes No

Marital Status <i>(Please ✓ one of the following)</i> <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Widowed

Marital Status <i>(Please ✓ one of the following)</i> <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Widowed

What is your highest grade level/degree earned? <i>(Please ✓ one of the following)</i> <input type="checkbox"/> Graduate Equivalency Degree (GED) <input type="checkbox"/> High School Diploma <input type="checkbox"/> Some College <input type="checkbox"/> Associate's Degree <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Master's Degree <input type="checkbox"/> Doctorate/Professional Degree

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Section 3. Financial Eligibility Determination

To be completed by the Parent/Guardian. Please print legibly & use ONLY black/blue ink pen.

The Upward Bound Program at Avila University and the United States Department of Education require all applicants to submit with their application a signed copy of their parent/guardian's most recent 1040, 1040A, or 1040EZ federal income tax return form.

- If you did not file an income tax return this year, please complete the Certification of Non-Tax Filing Status below and provide a copy of your AFDC payment, check stub/pay statement, or other verification of monthly income.
- If you did file an income tax return, please attach or submit a photocopy of your return with this application.

The Upward Bound Program at Avila University will secure and maintain your information in strictest confidence. Please contact Upward Bound if you have any questions or concerns regarding your personal financial information.

I have completed and submitted my most recent income tax for the last reporting year. Please see my attached 1040/1040A/1040EZ federal income tax form.

I have completed and submitted my most recent income tax for the last reporting year. I will bring my 1040/1040A/1040EZ federal income tax form to my student's interview.

I have not completed and submitted my most recent income tax for the last reporting year. I will complete the Certification of Non-Tax Filing Status below.

IMPORTANT: If you complete this section you must also provide a copy of your AFDC payment, check stub/pay statement, or other verification of monthly income (i.e., signed letter stating annual income).

Certification of Non-Filing Tax Status

I, _____ (please print your full name),
certify, under penalty of perjury, that I did not and will not file a United States Federal
Income Tax Return for tax year 20____, and that the financial information provided in this
application is accurate and true.

Parent/Guardian's Printed Full Name

Parent/Guardian's Signature

Date

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Section 4. Authorization for Release of Records

To be completed by the Student & Parent/Guardian. Please print legibly & use ONLY black/blue ink pen.

I hereby authorize the of release transcripts, grades, progress reports, standardized test scores (included but not limited to EOC, MAP, ACT, SAT, PLAN, PSAT scores, & National Student Clearinghouse), attendance records, conduct and behavior reports, and other educational information to the Upward Bound Program at Avila University. In addition, the Upward Bound staff may meet with my student at school as necessary to discuss academic and personal issues.

By signing this, I understand that all information gathered will be kept strictly confidential and will not be communicated to any other person(s) or organization(s). I authorize the Upward Bound Program at Avila University to request and obtain these documents for as long as necessary for federal reporting purposes.

Student's Printed Name

Student's Signature

Parent/Guardian's Printed Name

Parent/Guardian's Signature

Date

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. The Upward Bound Program at Avila University 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.

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Section 5. Recommendations

(To be completed by the Student. Please print legibly & use ONLY black/blue ink pen.)

Please complete the following form and return with your application. The Upward Bound Program staff will contact these references as part of your interview.

Current Math/Science Teacher	
Subject	
Email	
Phone	

Additional Teacher/School Official of Your Choice	
Subject/Title	
Email	
Phone	

Personal Reference (Non-Family Member)	
Relationship	
Email	
Phone	