



HENDERSON STATE UNIVERSITY
Upward Bound (UB) Classic Application
 590 West Grand, Hot Springs AR 71901

SECTION 1 STUDENT INFORMATION

Name: _____ Social Security Number _____ - _____ - _____
 (Please print full name)

Mailing Address _____
 Street Address or Box Number City & State Zip Code

Student Cell Number _____ Alternate Phone Number _____

Parent or Guardian Cell Number _____ Parent or Guardian Email Address: _____

Student's Email: _____ May we contact you via email? Yes _____ No _____

School Name: _____ Grade or GED (circle one): 6 7 8 9 10 11 12 GED

Age: _____ Date of Birth: _____ Sex: M _____ F _____ Are you Hispanic/Latino? Yes _____ No _____

Are you currently a participant in an Upward Bound (UB) or Educational Talent Search (ETS) program? _____ Yes _____ No

SECTION 2: DEMOGRAPHIC INFORMATION

Ethnicity (for statistical purposes only):
 American Indian/Alaska Native Asian
 Black/African American Native Hawaiian/Pacific Islander White/Caucasian

Student lives with (circle one): Both parents Mother Father Parent & Stepparent
 Guardian Self Foster Care Other _____

SECTION 3: CITIZENSHIP AND VETERAN STATUS

Are you a U.S. Citizen? Yes _____ No _____ Alien Registration Number: _____

Are you the spouse of a veteran? Yes _____ No _____

Are you the student of a veteran? Yes _____ No _____

Please note that all applications are accepted for review regardless of race, color, national origin, religion, gender or disability (U.S. Department. of Education -GEPA Section 427).

Office use only: Date FG Both LI Other

Database _____ Welcome Letter: _____
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SECTION 4: TELL US ABOUT YOURSELF

Your Career Interests:
† Health/Medical Education
†

Future Educational Plans:
† 2-year College
† 4-year College
† Career/Technical

List Colleges and/or Universities you are interested in attending _____
Are you enrolled in College Prep Courses? YES NO Are you enrolled in concurrent College Courses? YES NO
Are you pleased with your grades? Yes or No? Why or why not? _____

For which academic subjects do you need improvement? _____
In which extracurricular activities are you involved? _____
Are you presently employed? Yes ___ No ___ If Yes, how many hours do you work and where are you employed? _____

In what areas can HSU Upward Bound help you? (Circle all that apply)
Manage my time Improve my grades Explore ways to pay for college
Choose a career Build my self-esteem Study skills
Visit college campuses Cultural Enrichment Prepare for tests

SECTION 5: PARENT/GUARDIAN INFORMATION & FAMILY FINANCIAL STATEMENT

Please complete the following section to determine eligibility. All information is confidential.
Did either parent graduate from a 4-year college/university? Father: Yes ___ No ___ Mother: Yes ___ No ___
If yes, did participant regularly reside with and receive support from the parent with the four year degree? Yes ___ No ___
Highest schooling completed by mother:
 Jr. High or some high school Jr. High or some high school
 High school graduate High school graduate
 Some college Some college
 College graduate (4-year degree) College graduate (4-year degree)
 Other (specify: _____) Other (specify: _____)

TAX FILING STATUS previous year (Circle one) Single, Married-Joint, Head of Household, or Married-Separately
How many people lived in your household in the previous calendar year? _____
The Program requires documentation of your family’s taxable income for the preceding calendar year.
Taxable income is on Form 1040 (line 43), Form 1040A (line 27), and Form 1040EZ (line 6). Your student cannot be admitted to the program without this information.
Taxable Income: _____ No Taxable Income from the last calendar year _____

I hereby certify that the above information is accurate and complete to the best of my knowledge. I agree that all grades and educational records may be released as needed to officials of HSU’s Upward Bound Classic Program. It is permissible for photographs to be taken and used in any publication/social media that the project may deem necessary. I also give permission for my student to participate in UB Classic activities, including field trips. I will commit to actively participating in the UB Classic parent workshops.

Parent or Guardian’s Signature Date

I hereby certify that the above information is accurate and complete to the best of my knowledge. I agree that my educational records may be released as needed to program officials. I give permission for my photograph to be taken and used for the purpose of promoting this program. I agree to participate in all UB Classic activities including academic tutoring, advising, mentoring, field trips, financial workshops, and summer component as outlined on the student commitment form.

Student Signature Date