



University of Maine at  
**PRESQUE ISLE**  
*North of Ordinary*



UNIVERSITY OF MAINE  
**FORT KENT**  
UNIVERSITE DU MAINE

# TRIO

**UPWARD BOUND**



## Application for Admission

**TRIO College Access Services - Upward Bound**  
**University of Maine at Presque Isle**  
Suite 16, Preble Hall, 181 Main Street,  
Telephone: 207-768-9456; 1-800-734-3636; FAX 207-768-9464  
Presque Isle, Maine 04769

## Student Information

First name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

School: \_\_\_\_\_ Current Grade 9 10 11 12

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender:  M  F

(Required of all applicants)

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State ME Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Cell: \_\_\_\_\_

Student Email address: \_\_\_\_\_

Race: Do you identify yourself as Hispanic or Latino  YES  NO

Check all that apply:  American Indian or Alaska Native  Asian  Black or African American  
 Native Hawaiian or Other Pacific Islander  White

With whom do you live?  Both Parents  Mother  Father  Grandparent(s)  Legal  
Guardian  Self

## Student Questionnaire

Are you a participant in a TRIO Educational Talent Search program?  YES  NO

Do you plan to attend college immediately after graduating from high school? \_\_\_ Yes \_\_\_ No

Why would you like to be a part of TRIO Upward Bound

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## Household Information

Mother's/Legal Guardian's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing address (if different): \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Please indicate the highest education level completed by each of the student's biological or adoptive parents with whom student's live. Please do not indicate educational levels for stepparents, grandparents or legal guardians.

### Mother

- Elementary school
- Some high school
- High school diploma or GED
- Some college (did not complete a degree)
- 2-year college (completed an Associate Degree, Diploma or Certificate)
- 4-year college (completed a Bachelor Degree or higher)

Father's/Legal Guardian's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing address (if different): \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

Email address: \_\_\_\_\_

### Father

- Elementary school
- Some high school
- High school diploma or GED
- Some college (did not complete a degree)
- 2-year college (completed an Associate Degree, Diploma or Certificate)
- 4-year college (completed a Bachelor Degree or higher)

**Emergency Contact First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Daytime phone:** \_\_\_\_\_ **Evening phone:** \_\_\_\_\_

**Relationship to student:**

\_\_\_\_\_

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If the applicant is a ward of the State, please give the name, office address and phone numbers of social worker: \_\_\_\_\_

\_\_\_\_\_

List all persons living in the household:

Name	Age	School/Grade level	Occupation (if out of school)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use additional page if necessary)

If applicant's parents are unmarried, separated or divorced, please describe any custody and/or visitation restrictions: \_\_\_\_\_

\_\_\_\_\_

### Income & US Citizenship Verification

Upward Bound is required to verify that our participants meet federal criteria based on educational background and household income level. This information is required of all applicants. TRiO College Access Services-UB and the University of Maine at Presque Isle insure that all information provided will be held in confidence.

#### Taxable income range

Please indicate your **taxable income** range below. Do NOT use gross income, but after all deductions. See line 43 of your 1040 federal income tax form. If you did not file taxes, please indicate income.

I, \_\_\_\_\_ certify that my taxable income for last year was \$\_\_\_\_\_.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Is the student a U.S. citizen?  YES  NO

If NO, do you have Permanent Resident status?  YES  NO

**I certify that my student is a US Citizen or Permanent Resident:**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Certification and Signatures

Student Name \_\_\_\_\_

By my signature below, I attest to all the conditions set forth:

I agree to the exchange of information and records between the Upward Bound program and the school system or postsecondary institution in which the applicant is enrolled. Information can include but is not limited to: complete transcript, PowerSchool access information, grades, PSAT results (if taken), any pertinent health information from the school nurse, most recent PET minutes, (if applicable), IEP's (if applicable), and profiles or scores for any other tests which will help us assess the student's educational and vocational status. I understand that permission for access to the student's records will continue until he/she graduates from college or for 6 years after he/she graduates from high school, according to the terms of the federal grant, even if he/she stops participating in the Upward Bound program.

I authorize TRiO College Access Services the use of my image in UB publications and media releases.

I am aware that a photocopy of this authorization shall be considered as valid as the original and that this authorization is in effect from the date indicated below until the time that the applicant is no longer considered a participant.

I understand that if I need accommodations for a disability to participate in UB, or any of its scheduled activities, I must contact the Director of College Access Services, UMPI at (207) 768-9456 at least 30 working days prior to the activity.

I certify that all the information provided within this application is, to best of my knowledge and belief, true, correct, and complete.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_  
required

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
required

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In complying with letter and spirit of applicable laws and pursuing its own goals of diversity, the University of Maine shall not discriminate on the grounds of race, color, religion, sex, sexual orientation, including transgender status or gender expression, national origin, citizenship status, age, disability, or veteran's status in employment, education, and all other areas of the University. The University System provides reasonable accommodations to qualified individuals with disabilities upon request. Questions and complaints about discrimination in any area of the University should be directed to the Director of AA/EEO, the University of Maine at Presque Isle 205 South Hall, Presque Isle, ME 04769/

**Completion of this application does not guarantee acceptance in the TRIO College Access UB program at UMPI.**