

**Application Deadline: February 15, 2021**

SONOMA STATE UNIVERSITY

**UPWARD BOUND PROGRAMS – STUDENT APPLICATION**

Pre-Collegiate Programs ♦ 1801 E. Cotati Avenue ♦ Rohnert Park, CA ♦ 94928-3609

Office: (707) 664-3273 ♦ Fax: (707) 664-2886

Email: [upwardbound@sonoma.edu](mailto:upwardbound@sonoma.edu) ♦ Website: <http://precollegiate.sonoma.edu/>

**DIRECTIONS:** In order for your Upward Bound application to be processed, you **MUST** turn in the following items by the deadline:

- A completed application form which includes a Personal Statement
- A full academic transcript
- The Income Verification Form
- Counselor Recommendation Form
- Teacher Recommendation Form

APPLYING TO:  UB Sonoma County  UB North  UB Math & Science  UB Piner

**PLEASE PRINT ALL INFORMATION IN INK.**

Date: \_\_\_\_\_

**A. STUDENT INFORMATION**

1. Name: \_\_\_\_\_  
(First) (Middle Initial) (Last)
2. Mailing Address: \_\_\_\_\_  
(Number & Street or P.O. Box) (City, State) (Zip)
3. Home Phone Number: \_\_\_\_\_
4. Student's Cell Phone: \_\_\_\_\_
5. Student's Email Address: \_\_\_\_\_
6. Date of Birth: \_\_\_\_\_
7. Gender:  Male  Female  Non-binary
8. Do you have a diagnosed Learning Disability?  No  Yes, please list: \_\_\_\_\_
9. Do you have special needs?  No  Yes, please list: \_\_\_\_\_
10. Citizenship Status:  U.S. Citizen  Permanent Resident
11. Ethnic Background (please check ALL that apply):
  - American Indian/Alaskan Native
  - Asian, Cambodian, Chinese, Filipino, Korean, Laotian, Vietnamese
  - Black, African-American, African
  - Mexican-American, Mexican, Chicano, other Latino, Spanish-Origin, Hispanic
  - Native Hawaiian or other Pacific Islander
  - White, European-American, Italian, Irish
  - Other
12. I currently live with (please check one):  Both Parents  Mother Only  Father Only  Guardian  Foster Parent
13. Is English the primary language spoken at home?  Yes  No

**B. PARENT/GUARDIAN INFORMATION**

1. Parent/Guardian 1's Name: \_\_\_\_\_ Cell/Work Phone: \_\_\_\_\_
2. Parent/Guardian 2's Name: \_\_\_\_\_ Cell/Work Phone: \_\_\_\_\_
3. Has your parent received a Bachelor of Arts or a Bachelor of Science Degree within the United States?  
Parent/Guardian 1:  Yes  No Parent/Guardian 2:  Yes  No

**C. STUDENT ACADEMIC INFORMATION**

1. School I currently attend: \_\_\_\_\_ Grade: \_\_\_\_\_
2. Are you currently enrolled in Academic Talent Search (ATS)?  Yes  No

OFFICE USE ONLY: T \_\_\_\_ G \_\_\_\_ A \_\_\_\_ / LI \_\_\_\_ FG \_\_\_\_ Risk \_\_\_\_

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

(First)

(Last)

### TRANSCRIPT AND OTHER ACADEMIC RECORDS WAIVER

#### Transcript and Other Academic Records Waiver

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. These rights include the right to provide written consent before a school, university, or college discloses personally identifiable information (PII) from a student's education records.

I hereby **authorize** my student's school(s) to provide Sonoma State University's Pre-Collegiate Programs (i.e., Upward Bound Programs) **access to copies of my student's academic records and transcripts** for the duration of their secondary and post-secondary education. I understand these records will be kept confidential and will be used strictly to meet federal reporting guidelines outlined by the Department of Education, to follow student's educational progress, and to determine when extra scholastic services are needed on his/her behalf.

**Parent/Guardian Name (Please Print):** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*\*Please note: In accordance with University procedure, records of applicants not admitted to the Upward Bound Program will be shredded.*

---

---

#### SUMMARY

##### Parent/Guardian

Before my student is accepted into the Upward Bound Program, I agree to submit my current year's income tax or other income verification.

I certify that all the information on this application is complete and accurate to the best of my knowledge.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TELL US ABOUT YOURSELF**

Please print in ink.

Please answer all questions thoughtfully and thoroughly.

1. Why do you want to participate in Upward Bound Program?

---

---

---

---

---

---

---

---

---

---

2. What **skills** are you hoping to learn in high school that might help you prepare for college?

---

---

---

---

---

---

---

---

---

---

3. List the colleges/universities you are interested in:

---

4. Why do you want to go to college?

---

---

---

---

---

---

---

---

---

---

5. What academic area(s) are you interested in studying in college and why? Comment on the careers you are interested in pursuing.

---

---

---

---

---

---

---

6. What do you feel are your strengths and weaknesses, both in and out of school?

---

---

---

---

---

---

---

7. What do you enjoy doing during your free time?

---

---

---

---

---

---

---

