

ACADEMIC TALENT SEARCH U - V) \ # @ \ # Q † - k) ° Q

Sonoma State University • 1801 E Cotati Ave • Rohnert Park, CA 94928
Office (707) 664-3873 • Email: atsmc@sonoma.edu
Website: precollegiate.sonoma.edu

Application Checklist

- ✓ Application completely filled out.
- ✓ Page 2:
 - Have 2023 Federal Income Tax forms or family income for 2023 if you did not file your taxes
 - Student answer question
- ✓ Signatures on page 3. Please sign in **blue** or **black ink**.
- ✓ Transcripts or Grade Reports
 - 5th – 7th graders include a copy recent grade report.
 - 8th-11th graders include a copy of current school transcript.

(student name must appear on the documents above)
- ✓ Turn in application
 - Email to: atsmc@sonoma.edu
 - Mail to:
ATS T ^} â[&ã [
1801 E Cotati Ave
Rohnert Park, CA 94928

Lista de Verificación de la Aplicación

- ✓ *Aplicacion completamente llena.*
- ✓ *Pagina 2:*
 - *Tener formas de Impuesto Federal sobre los ingresos de 2023 o ingresos familiares para 2023 si no presento sus impuestos*
 - *Estudiante respondió la pregunta*
- ✓ *Se firmas en las página 3. Por favor firme usando **tinta azul o negra.***
- ✓ *Transcripciones o informes de calificaciones*
 - *5th – 7th grados incluyen una copia del informe de calificaciones reciente*
 - *8th-11th grados incluyen una copia de transcripcion corriente*

(Nombre del estudiante debe aparecer en los documentos anteriores)
- ✓ *Entregar aplicacion*
 - Email to: atsmc@sonoma.edu
 - Mail to:
ATS T ^} â[&ã [
1801 E Cotati Ave
Rohnert Park, CA 94928

SONOMA STATE UNIVERSITY

ACADEMIC TALENT SEARCH MENDOCINO-CLOVERDALE APPLICATION

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

Phone: (707) 664-3873 ♦ Email: atsmc@sonoma.edu

Website: <http://precollegiate.sonoma.edu/>

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

- ☐ A completed application form which includes a Short answer question
☐ Last grade report OR a full academic transcript

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. Parent's Email Address:
7. Date of Birth: 8. Gender: Male Female Non-binary
9. Do you have a diagnosed Learning Disability? ☐ No ☐ Yes, please list:
10. Do you have special needs? ☐ No ☐ Yes, please list:
11. Citizenship Status: ☐ U.S. Citizen ☐ Permanent Resident ☐ Decline to Answer
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
13. I currently live with (please check one): ☐ Both Parents ☐ Mother Only ☐ Father Only ☐ Guardian ☐ Foster Parent
14. 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 either of your parents received a Bachelor of Arts or a Bachelor of Science Degree within the United States?
(¿Alguno de sus padres recibió una Licenciatura en Artes o una Licenciatura en Ciencias en los Estados Unidos?)
Parent/Guardian 1: ☐ Yes ☐ No Parent/Guardian 2: ☐ Yes ☐ No ☐ N/A

C. STUDENT ACADEMIC INFORMATION

- 1. School I currently attend: Grade:
2. High School I expect to attend? Anderson Valley Jr/Sr High Cloverdale High Laytonville High
Round Valley High Ukiah High Willits High Other _____

OFFICE USE ONLY: LEP ___ GPA _____ Disconnect _____ LI ___ FG ___ Risk

D. INCOME VERIFICATION

Did you file 2023 taxes? (*¿Presentó los impuestos de 2023?*) Yes (Si) No

Yes, I FILED a 1040 for 2023 (*Presenté un 1040 para 2023*):

Enter amount from Line 15: (<i>Anote la cantidad de la Linea 15</i>):	\$ _____
Total number of dependents listed (including self) on tax form: (<i>Número total de dependientes reclamados (incluyó mismo/a)</i>):	_____

No, I did NOT FILE a 1040 for 2023 (*No presenté un 1040 para 2023*):

Enter your estimated family income: (<i>Indique su ingreso estimado</i>):	\$ _____
Total number of household members supported on this income: (<i>Número total de miembros del hogar sostenidos con este ingreso</i>):	_____

E. STUDENT ACADEMIC QUESTION

1. Why do you want to participate in the Academic Talent Search Program?

Student Name: _____
(First) (Last)

TRANSCRIPT AND OTHER ACADEMIC RECORDS WAIVER

<p>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.</p>	<p><i>La Ley de Privacidad y Derechos Educativos de la Familia (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) es una ley federal que protege la privacidad de los registros educativos de los estudiantes. La ley se aplica a todas las escuelas que reciben fondos bajo un programa aplicable del Departamento de Educación de Estados Unidos. Estos derechos a proporcionar consentimiento por escrito antes de que una escuela, universidad o colegio revele información de identificación personal (PII) de los registros educativos de un estudiante.</i></p>
<p>I hereby authorize my student's school(s) to provide Sonoma State University's Pre-Collegiate Programs (i.e., Academic Talent Search 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.</p>	<p><i>Por la presente autorizo a la escuela (s) de mi estudiante de proporcionar Sonoma State University y su departamento, Early Academic Outreach, el acceso a copias de los expedientes académicos de mi hijo durante la duración de su participación en el programa de ATS y hasta la finalización de la educación terciaria. Entiendo que estos registros se mantendrán confidenciales y serán utilizados para seguir el progreso educativo de mi hijo o para determinar cuándo se necesitan servicios escolares adicionales en su nombre.</i></p>

Parent/Guardian Name (Please Print) *Nombre del padre/madre/guardian (en letra de imprenta)*

Parent/Guardian Signature *Firma del padre/madre/guardian*

Date *Fecha*

**Please note: In accordance with university procedures, records of applicants not admitted to the Academic Talent Search Program will be shredded.*

Tenga en cuenta: De acuerdo con los procedimientos de la universidad, los registros de los solicitantes no admitidos al Programa de Búsqueda de Talento Académico serán destruidos.