

Veterans Upward Bound Program Application for Services

For Staff Use: Eligibility	LIFG	LI	FG	Academic	Documents:	Taxes	DNF Taxes	DD214	Accuplacer
Services:	Online Training	Classroom	Online & Classroom	Admissions/FA/Advising	Potential	Served	SACDC		

Last Name: _____ First Name: _____ MI: _____ SSN: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

County you live in: **Berkeley** **Charleston** **Dorchester** Date of Birth: ____/____/____

Email Address: _____ Day Phone: _____ Cell: _____ Evening: _____

Emergency Contact Name: _____ Phone: _____ Relationship: _____

EDUCATION:

High School: Have you completed High School?

HS Graduation Year _____ Not completed

GED Graduation Year _____

College/Technical School:

College Graduate Degree _____

Enrolled in a College/VOC-Tech Program?

Never enrolled Enrolled in the past (Year: _____)

Currently enrolled

What college(s) did you attend? _____

After completing the Veterans Upward Bound Program, what are your education plans? _____

MILITARY SERVICE:

Service

Air Force Marine Corps Coast Guard
Army Navy Reserve/NG

Date of most recent discharge: _____

Type of Discharge:

Honorable General Other than Honorable
Bad Conduct Dishonorable Other _____

Are you eligible for G.I. Bill education benefits?

Yes No Unsure

Do you have a disability related to your military service?

Yes No

Select one:

I served at least 181 days of active duty service
I did not serve at least 181 days of active duty service, but was discharged with a service-connected disability
Other: _____

COMPLETION OF THE FOLLOWING IS REQUIRED FOR REPORTING AND VERIFICATION PURPOSES. RESPONSES ARE KEPT CONFIDENTIAL.

Employment

Unemployed Part-time Full-time Retired

ADA Disability?

☐ Yes No

Gender

Male Female

Ethnicity

Are you Hispanic/Latino? Yes No

Race: Check all that apply

American Indian/Alaskan Native Black or African American
Native Hawaiian or other Pacific Islander Asian White

FIRST GENERATION STATUS

Has either parent graduated from a college or university with a 4-year (baccalaureate) degree?

Mother: Yes No Father: Yes No

CITIZENSHIP:

Are you a Citizen, National or Permanent Resident of the United States?

Yes No

If "No," do any of these situations apply?

I am in the United States for other than a temporary purpose (please provide evidence from the Immigration and Naturalization Service of your intent to become a permanent resident).

I am a permanent resident of Guam, the Northern Mariana Islands, or the Trust Territory of the Pacific Islands.

I am a resident of the Freely Associated States – the Federated States of Micronesia, The Republic of the Marshall Islands, or the Republic of Palau.

What Veterans Upward Bound Services are you most interested in?

Check all that apply

Assessment of academic skills	Academic refresher courses
Assessment of career interests	Math
Development of an education or career plan	Science
Assistance with financial aid and veterans' benefits applications	Foreign Language
Assistance with postsecondary school applications	Composition
Information about college degree plans and programs	Literature
	Computer

How Did You Hear About Veterans Upward Bound?

Referral from community agency	Word of mouth/walk-in
Referral from veterans agency (VA, Vet Center)	Referral from another TRIO project
Advertisement	Other: _____
Our website	
Referral from a school or educational institution	

I would like to participate in the Veterans Upward Bound program and receive the free services provided. I hereby certify that the information provided in this application is accurate and complete to the best of my knowledge.

Applicant Signature _____

Date _____

Privacy Act

In accordance with the Privacy Act of 1974 (Public Law No. 93-579, 5 U.S.C. 552A), you are hereby notified that the Department of Education is authorized to collect information to implement the Upward Bound program under Title IV of the Higher Education Act of 1965, as amended (Pub. Law 102-325, sec. 402C). In accordance with this authority, the Department receives and maintains personal information on participants in the Upward Bound program. The principle purpose for collecting the information is to administer the program, including tracking and evaluating participants' academic progress. Providing the information on this form, including a social security number (SSN) is voluntary; failure to disclose a SSN will not result in denial of any right, benefit or privilege to which the participant is entitled. The information that is collected on this form will be retained in the program files and may be released to other Department officials in the performance of official duties.