



New Jersey's Science & Technology University



NEW JERSEY INSTITUTE OF TECHNOLOGY

Center for Pre-College Programs
Upward Bound Program
110 Summit Street, Campbell Hall, 4th & 5th Floor
Newark, NJ 07102
Phone: (973) 596-3580

This Program is sponsored by the US Department of Education and The New Jersey Institute of Technology

TODAY'S DATE: _____

PLEASE TYPE OR PRINT LEGIBLY

PART I ----YOUR PERSONAL PROFILE

NAME _____
(LAST) (FIRST) (MIDDLE INITIAL)

ADDRESS _____
(NUMBER) (STREET) (APT.)

(CITY) (STATE) ZIP CODE

TELEPHONE (____) _____ SOCIAL SECURITY NUMBER _____

BIRTHDATE: _____ PLACE OF BIRTH _____
MONTH/ DATE / YEAR (CITY) (STATE) (COUNTRY)

PLEASE CHECK ONE: FEMALE _____ MALE _____

EMAIL ADDRESS: _____

CITIZENSHIP

ARE YOU A US CITIZEN? YES _____ NO _____

IF NOT, ARE YOU A PERMANENT RESIDENT OF THE UNITED STATES? YES _____ NO _____

IF YES, YOU MUST SUBMIT A COPY OF YOUR GREEN CARD WITH YOUR APPLICATION.

ETHNIC BACKGROUND

- _____ AMERICAN INDIAN OR ALASKAN NATIVE
- _____ HISPANIC
- _____ WHITE
- _____ ASIAN OR PASCIFIC ISLANDER
- _____ AFRICAN AMERICAN/BLACK
- _____ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- _____ MORE THAN ONE RACE

WHAT LANGUAGE OTHER THAN ENGLISH, IS SPOKEN IN YOUR HOME? _____ ARE YOU FLUENT IN THAT LANGUAGE? YES _____ NO _____

PART II ----- EDUCATIONAL DATA

SCHOOL'S NAME & ADDRESS

PRESENT GRADE _____ GRADE POINT AVERAGE: _____

GUIDANCE COUNSELOR/ADVISOR'S NAME: _____

TEST INFORMATION:

In the following, enter your scores on the appropriate line (Include a copy of the test results).

If you have not taken the test, leave it blank:

STANDARDIZED TESTS	DATE ADMINISTERED	SCORE RESULTS				
		MATH	READING	WRITING	SCIENCE	TOTAL
GEPA						
PSAT						
HSPA						
SAT						
SAT II						

ACADEMIC HONORS: LIST ANY HONORS/AWARDS YOU HAVE RECEIVED

1. _____ 3. _____
2. _____ 4. _____

EXTRACURRICULAR ACTIVITIES: LIST OF EXTRACURRICULAR, COMMUNITY/FAMILY ACTIVITIES

1. _____ 3. _____
2. _____ 4. _____

AFTER HIGH SCHOOL

DO YOU PLAN TO ATTEND COLLEGE? _____

COLLEGE MAJOR (s): Possible area(s) of concentration/ major: _____

CAREER OBJECTIVES: Possible career or professional plans: _____

WORK EXPERIENCE: List any job (including SYETP) you have held during the past three years.

_____ **A PHOTOCOPY OF YOUR GRADES AND CURRENT CLASS SCHEDULE
MUST BE SUBMITTED WITH APPLICATION.**

_____ **THREE RECOMMENDATION LETTERS MUST BE INCLUDED IN APPLICATION
PACKET (MATH INSTRUCTOR/SCIENCE INSTRUCTOR/GUIDANCE COUNSELOR)**

Are you in Talent Search, another pre-college program, or intend to apply to one? Yes _____ No _____
If yes, which program? _____

PART III ----PARENT/FAMILY CONFIDENTIAL INFORMATION

Please check if parents are:

- a. Married _____
- b. Divorced _____
- c. Single/Never Married _____
- d. Widowed _____
- e. Separated _____
- f. Other: _____

FATHER/MALE GUARDIAN NAME: _____

HOME ADDRESS IF DIFFERENT FROM YOURS: _____

IS HE LIVING? _____

MOTHER/FEMALE GUARDIAN NAME: _____

HOME ADDRESS IF DIFFERENT FROM YOURS: _____

IS SHE LIVING? _____

If not with both parents, with whom do you make your permanent home? _____

NAME/AGES OF OTHER CHILDREN OR "DEPENDENTS" IN YOUR FAMILY HOUSEHOLD

Name	Sex	Age	Relationship	School/College Attending
1. _____				
2. _____				
3. _____				
4. _____				

Total number of people in household (include applicant) _____

If the applicant is a *Foster Child*, check here _____ (A *Foster Child* is considered a "family of one" and the child's support payment is considered that families income.)

FAMILY INCOME INFORMATION (INCLUDE ONLY PESONS LIVING IN HOUSEHOLD)

Father/Male Guardian/Head of household employed? Yes _____ No _____

Mother/Female Guardian/Head of Household employed? Yes _____ No _____

SOURCE OF INCOME

- _____ EMPLOYMENT
- _____ WELFARE
- _____ SOCIAL SECURITY
- _____ V.A. BENEFITS
- _____ UNEMPLOYMENT

TOTAL FAMILY INCOME \$ _____ PER YEAR

You must submit photocopy one of the following as Proof of Income

- (1) *A signed photocopy of your most recent 1040/1040A NOT A W2 FORM*
- (2) *Welfare Statement explaining amount of allotment*
- (3) *Social Security Statement explaining amount of allotment*
- (4) *V.A. Statement explaining monthly benefits*
- (5) *Unemployment Award Statement explaining benefits*
- (6) *Notarized Letter explaining your situation if none of the above applies. And the amount of that annual income.*

PARENT (S) OCCUPATION & EDUCATIONAL CERTIFICATION

FATHER/GUARDIAN OCCUPATION: _____

MOTHER/GUARDIAN OCCUPATION: _____

PLEASE CHECK ONE

_____ Neither parent/guardian of the applicant has received a Bachelor's Degree (4 year college degree) and living in the household.

_____ At least one parent/guardian of the applicant has received a Bachelor's Degree (4 year college degree) and living in the household.

If either parent graduated from a college please indicate the college:

Father _____

Mother _____

Certification

_____ I certify that this information is true and correct to the best of my knowledge. I understand that this application is being made in connection with receipt of Federal funds and that Organization officials may verify information.

_____ I approve my child's application for the Upward Bound Program.

IN ORDER TO PROCESS THIS APPLICATION BOTH PARENT (S) AND STUDENT MUST SIGN AND DATE THE FORM.

Name of Father/Guardian

Name of Mother/Guardian

Signature of Father/Guardian/Date

Signature of Mother/Guardian/Date

Applicant/Student Signature/Date

Please mail completed applications to:
New Jersey Institute of Technology
Center for Pre-College Programs
Upward Bound Program
110 Summit Street, Campbell Hall, 4th & 5th Floor
Newark, NJ 07102
Phone: (973) 596-3580

GUIDANCE COUNSELOR'S RECOMMENDATION

Student's Name: _____

How long have you known the applicant: _____

Academic Work Habits

Good Performance _____

Capable of Better Work _____

Need Better Preparation/Study Habits _____

Attitude/Behavior In & Out of Classroom

Displays Interest _____

Polite & Respectful _____

Well-Mannered _____

Attentive to Suggestions _____

Disruptive/Inattentive in Class _____

Displays No Interest toward Learning _____

Disrespectful _____

Are you aware of any behavior (situation) that suggests this applicant is or may not be reliable, honest, or of good character?

Use the space below to describe the student's attitude toward academics while commenting on their interests toward mathematics, technology, or science. The recommendation should include an overall assessment of the student abilities and potential.

Counselor's Name _____

High School _____

Phone _____ Fax # _____

Program _____