

# Lourdes University

## Upward Bound Application

### Application Check List



**Please be sure to complete the following before submitting your application to the Lourdes University Upward Bound Program.**

- ✓ Please answer all questions asked on the application.
- ✓ Please be sure to fill out the Family Financial Statement, sign and attach documentation.
- ✓ Please be sure to complete the Autobiography in no less than 50 words.
- ✓ Please be sure to answer the questions on the Initial Needs Assessment to the best of your ability. If a question does not apply to you please respond with N/A (not applicable).
- ✓ Please be sure to complete the Release of Information with signature of both the parent/guardian and student.
- ✓ Please be sure to submit both references; counselor and teacher.
- ✓ Please ask your guidance counselor for a copy of your most recent grade card and attach it to the application.
- ✓ **PLEASE COMPLETE THE APPLICATION IN BLUE OR BLACK INK.**

#### **PLEASE BE ADVISED**

**An application which has not been completed will NOT be accepted!**



**Academic Year  
2022-2023**

## ***Purpose***

The Lourdes University Upward Bound Program is a pre-college program, which helps to prepare students, who are first generation and/or low income for post-secondary education.

## ***Mission***

Lourdes University TRiO/Upward Bound (UB) is committed to providing support to participants in their preparation for post-secondary education and to increase the rates at which these participants enroll in and graduate from college. Our program helps participants succeed by providing cultural and educational opportunities to encourage both academic and personal growth. Fulfilling the mission is possible because of cooperation with academic departments and student services at Lourdes University.

## ***Goals***

- Generate the skills and motivation necessary for success in completing high school and enrolling into post-secondary education.
  - Encourage youth in the program to remain and complete the secondary level of education.
- Encourage youth to enroll in a post-secondary institution and graduate.

## ***Services and Benefits***

Individual and Group Tutoring

ACT and OST Preparation

On-Campus Summer Program at Lourdes University

College Preparatory Classes

Academic Counseling and Workshops

Personal Counseling

- |   |                             |
|---|-----------------------------|
| ☺ Assistance with college applications  | ☺ Cultural Events           |
| ☺ Fee-waiver for college entrance exams | ☺ College University Visits |
| ☺ Meet new friends                      | ☺ Stipends                  |
| ☺ Recognition Banquet                   | ☺ In-School tutoring        |
| ☺ Traveling                             | ☺ Leadership Skills         |

## ***Why choose Lourdes University Upward Bound?***

This program gives students the opportunity to enhance their skills and make successful transition from high school to college. It is sponsored by the U.S. Department of Education and Lourdes University.



6832 Convent Blvd.  
 Sylvania, Ohio 43560  
 (419) 824-3864  
**Upward Bound Application**



Date of Application: \_\_\_\_\_

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

Sex: Male  Female

Address: \_\_\_\_\_

Social Security No: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_(\_\_\_\_\_)\_\_\_\_\_

Student Cell: \_(\_\_\_\_\_)\_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

Are you a United States Citizen?  Y  N

High School Attending: \_\_\_\_\_

Grade: \_\_\_\_\_ GPA: \_\_\_\_\_

Counselor: \_\_\_\_\_

Taking College Prep classes?  Y  N

Interested in Attending College?  Y  N

Extracurricular Activities: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Cell Phone: \_(\_\_\_\_\_)\_\_\_\_\_

Cell Phone: \_(\_\_\_\_\_)\_\_\_\_\_

Bachelor's Degree Obtained?  Y  N

Bachelor's Degree Obtained?  Y  N

Legal Guardian & Relationship, if different from above \_\_\_\_\_

Address: \_\_\_\_\_ Phone No: \_(\_\_\_\_\_)\_\_\_\_\_

Ethnic/Race Background: (You may check more than one, if appropriate.)

Asian  Black or African American  Alaskan Native or American Native Indian  White/Caucasian

Latino or Hispanic  Native Hawaiian or other Pacific Islander

How did you learn about Upward Bound? \_\_\_\_\_

Are you a participant in another Upward Bound or Educational Talent Search Program?  Y  N

**DO NOT WRITE BELOW THIS LINE- FOR OFFICE USE ONLY**

App Rec'd	App Rev'd	Applicant Accepted <input type="checkbox"/> Yes <input type="checkbox"/> No Date Notified:  If no, why?	Entry Date	EGPA: FG <input type="checkbox"/> LI <input type="checkbox"/> HRAF: GPA <input type="checkbox"/> Test <input type="checkbox"/> Algebra <input type="checkbox"/> No. in family:  Annual Income:
-----------	-----------	---	------------	--

## Family Financial Statement

One of the criteria for admission into the Lourdes University Upward Bound Program is meeting the income guidelines established by the U.S. Department of Education (see below). Before we can determine your student's eligibility we need the following information. **Please read carefully and answer all questions. If information is not complete, the application cannot be processed.**

Did you file an income tax return last year?  Yes  No

Gross Family Income = \_\_\_\_\_

Adjusted Gross Income = \_\_\_\_\_

How many dependents were claimed on your tax form last year? \_\_\_\_\_

Total number of persons living in household (including self)? \_\_\_\_\_

Do either you and/or your student receive any of the following:

Public Assistance?  Yes  No

If Yes, OHIO BENEFITS (SNAP) Benefit Number (7-digit number) \_\_\_\_\_

or OHIO WORKS FIRST Number \_\_\_\_\_

Social Security or SSI?  Yes  No If yes, please specify amount? \_\_\_\_\_

Other income?  Yes  No If yes, please specify type and amount? \_\_\_\_\_

Does your student qualify for free lunch:  Yes  No

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

***Please be sure to attach a signed copy of your last 1040 tax form. If a member is receiving AFDC, Social Security Benefits or Unemployment Compensation, please be sure to also attach a letter of benefits.***



U. S. Department of Education  
Promoting educational excellence for all Americans

### Federal TRIO Program Current-Year Low-Income Levels

(Effective **January 12, 2022** until further notice)

Size of Family Unit	48 Contiguous States, D.C., and Outlying Jurisdictions	Alaska	Hawaii
1	\$20,385	\$25,485	\$23,445
2	\$27,465	\$34,335	\$31,590
3	\$34,545	\$43,185	\$39,735
4	\$41,625	\$52,035	\$47,880
5	\$48,705	\$60,885	\$56,025
6	\$55,785	\$69,735	\$64,170
7	\$62,865	\$78,585	\$72,315
8	\$69,945	\$87,435	\$80,460

For family units with more than eight members, add the following amount for each additional family member: \$6,810 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; \$8,520 for Alaska; and \$7,830 for Hawaii.

The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount.

The figures shown under family income represent amounts equal to 150 percent of the family income levels established by the Census Bureau for determining poverty status. The poverty guidelines were published by the U.S. Department of Health and Human Services in the [Federal Register](#) on January 21, 2022 and are effective as of January 12, 2022.

**1990 K Street, N.W. Washington, D.C. 20006**

Our mission is to ensure equal access to education and to promote educational excellence throughout the Nation.

## **Confidentiality of Information**

The personal information you give to the Upward Bound Program is sent to the federal government (Department of Education) and helps the government to measure your success. The information is protected by the Privacy Act. No one may see the information unless they work with or for the Upward Bound Project or are specifically authorized to determine if you are eligible to participate in the program. The Department of Education has authority to gather information to help make Upward Bound a better program (20 U.S.C. 1231a).

Great care is taken to make sure that the personal information collected on Upward Bound students is kept confidential. Information or records relating to individual Upward Bound students or groups of students who are participating or have participated in Upward Bound Projects shall not disclose to any person, group, agency or organization without the expressed permission of the Director, Upward Bound Program, or U.S. Department of Education. When a project or contract terminates, all Upward Bound records in possession of the project or contractor shall be disposed of only by the authority of and in accordance with procedures approved by the Upward Bound Program.

In addition, any officer or employee of the United States or any department or agency thereof who publishes, divulges, discloses or makes known in any manner or to any extent not authorized by law any information coming to him/her in the course of his/hers employment or official duties or by reason of any examination or investigation made by or return, report or record made to or filed with such department agency or officer or employee thereof, which concerns or relates to the Upward Bound Program shall be subject to fine of not more than \$1,000 or imprisoned not more than one year, or both, and shall be removed from office or employment under the provisions of Title 18, Section 1905 of the U.S. code.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Date

## **Notice of Non-Discrimination**

Lourdes University does not discriminate on the basis of race, color, national origin, sex, disability, age, or any other legally protected category in its programs and activities, as required by Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, 34 CFR Part 106, the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973 and 34 CFR 104.7, the Age Discrimination Act of 1975, the Age Discrimination in Employment Act of 1967, and the Genetic Information Non-Discrimination Act of 2008.

## **Accuracy of Information Statement**

I certify the information provided on this application above is accurate. I understand that any misrepresentation of facts on this application will be cause for refusal of admission, cancellation of admission, and/or expulsion from the program. Furthermore, I understand that if I do not complete the above requested fields, this application cannot be processed for admission to the Lourdes University Upward Bound Program.

By signing this form, I, the parent or guardian of the applying student, state that ALL INFORMATION on this application, including but not limited to income, educational level of both parents and citizenship status is true to the best of my knowledge.

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Parent

\_\_\_\_\_  
Date



## Lourdes University Upward Bound Initial Needs Assessment

Instructions: To help the Upward Bound staff assess your needs and develop a plan of services for you, we need to know what you think you need. Please read and answer the following questions.

1. What grades do you usually earn? (check all that apply)

A's

B's

C's

2. What is your favorite class or subject? \_\_\_\_\_

3. What is your least favorite class or subject? \_\_\_\_\_

4. Do you participate in any extracurricular activities? Yes  No

Please list activities: \_\_\_\_\_  
\_\_\_\_\_

5. Indicate the Ohio Standardized Tests (OST's) you have taken, and score received:

I have taken:

Algebra 1 \_\_\_ Geometry \_\_\_ Biology \_\_\_ American History \_\_\_ American Government \_\_\_

English 1 \_\_\_ English 2 \_\_\_

I have not yet taken any OST's

6. Which of these tests have you taken and what were your scores?

PSAT  SAT  PLAN  ACT  None

7. Which three colleges or universities would you like to visit or attend?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Have you decided on a career/major? Yes  No

If yes, what is the name of the career/major? \_\_\_\_\_

8. Do you know facts about this career? Yes  No

9. Have you ever thought about dropping out of school? Yes  No

If yes, what changed your mind? \_\_\_\_\_

11. Are you currently participating in an Upward Bound Program? Yes  No

12. Do you need tutoring? Yes  No

If yes, please list the subject(s) below: \_\_\_\_\_  
\_\_\_\_\_

13. Do you need help with study skills? Yes  No
14. Do you know the “right” academic classes that should be taken to prepare you for college?  
Yes  No
15. Do you need help applying for college? Yes  No
16. How many years of college do you plan to complete after high school?  
(check only one)
- 1-6 months (Certificate Program)  1-2 years (Community College)
- 3-5 years (Bachelors Degree)  6 or more years (Masters)
- Not Sure  Will not attend
17. Do you need help in applying for financial aid? Yes  No
18. Do you need help in applying for scholarships? Yes  No

**For the following, please indicate whether you feel you have a “high need”, “some need” or “no need” for help or improvement in that area:**

	High Need	Some Need	No Need
<b>Personal Motivation:</b>			
Improving school/class attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Studying/doing homework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improving attitude toward school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Setting goals and priorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Personal Counseling:</b>			
Improving interpersonal skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working through a personal problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working through a family problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug or alcohol use or abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are there other academic or personal areas with which you would like assistance or counseling? If yes, please explain:

---



---



---



---



## Guidelines

It is very important to us that students applying to this program understand the essential aspects of the Lourdes University Upward Bound Program. We consider it a wonderful opportunity for all students. However, experience has taught us that the students who have most enjoyed our program came in with a basic understanding of its structure and purpose. For this reason, we ask that you **initial each of the following statements and sign below**. We also ask that your parent(s) or guardian(s) read this with you and sign below.

\_\_\_\_\_ I understand Upward Bound is an academic program and academics come first.

\_\_\_\_\_ I understand this program will help me prepare for a four-year college while exposing me to the opportunities available on college campuses.

\_\_\_\_\_ I understand the program emphasizes respect. I understand this means to respect not only the Upward Bound Staff but also, teachers, tutors, students, and all others whom you may meet through the Lourdes University Upward Bound Program (*LUUB*).

\_\_\_\_\_ I understand I am expected to carry myself in the highest regard at all times.

\_\_\_\_\_ I understand the program includes a rigorous academic curriculum and as a participant, I must take a college preparatory curriculum while in high school.

\_\_\_\_\_ I understand I am expected to attend LUUB afterschool tutorials at least 4 hours each week.

\_\_\_\_\_ I understand I am expected to bring class/homework to afterschool tutorials and work will be given.

\_\_\_\_\_ I understand I may be excused for one extra-curricular activity throughout the academic year. (*i.e. Students will be excused for one sport or other afterschool activity where they may be unable to meet the required 4 hours per week.*)

\_\_\_\_\_ I understand Upward Bound is an academic program, which also includes a summer component, which I am expected to attend.

\_\_\_\_\_ I understand I will be expected to participate in scheduled Upward Bound social/cultural events, workshops and community service projects.

\_\_\_\_\_ I understand I will be expected to follow program rules, policies and regulations during my participation in the LUUB Program outlined in the LUUB Handbook. (*Given at Interview*)

\_\_\_\_\_ I understand that once I become a participant (*six weeks of full participation after start date*), I am a participant until I graduate. Should I decide to withdraw myself from the LUUB Program, I am expected to immediately notify LUUB staff by submitting a written letter with both mine and my parent's signature, date and reason for withdraw.

\_\_\_\_\_ I understand I will be expected to meet with Upward Bound Staff for advising purposes.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

# Upward Bound Application Release of School Information

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

High School/Educational Institution: \_\_\_\_\_

## Student Information

Name: \_\_\_\_\_ School ID#: \_\_\_\_\_

Student Address: \_\_\_\_\_

Street

City

State

Zip Code

Date of Birth: \_\_\_\_\_ Date of Enrollment: \_\_\_\_\_

## Parent/Guardian Permission for Release of School Information

I, the undersigned, am the parent or legal guardian of the student named above. I give my permission for the above high school, educational institution, or program, to release grades, transcript, test scores, and any other relevant information to the Lourdes University Upward Bound Program upon request of the Program or its representative. I understand that the Upward Bound Program will hold this information strictly confidential. This release will remain in effect until my student has graduated from high school. Finally, if my student moves to an out of district school, this form can be utilized to obtain the information stated above for the purpose of annual reporting to the United States Department of Education until my student graduates with a high school diploma.

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

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The student named above has applied and/or been selected to participate in the Lourdes University Upward Bound Program. In order to assess this student's need for the program, potential for academic success, and academic progress, we would appreciate the release of a copy of his/her grades, transcript, test scores, and any other relevant information to:

Lourdes University, Upward Bound Program  
6832 Convent Blvd. Sylvania, Ohio 43560

# Counselor Recommendation

This page is to be filled out by a counselor recommending the applicant for the Lourdes University Upward Bound Program. Please add comments as needed.

**◆◆ PLEASE ATTACH A COPY OF THE STUDENT'S CURRENT HIGH SCHOOL TRANSCRIPT/GRADE CARD AND TEST SCORES. ◆◆**

Student's Name: \_\_\_\_\_ Student's Current Grade: \_\_\_\_\_

Cum GPA: \_\_\_\_\_ Credits Earned to Date: \_\_\_\_\_ Eligible for Free Lunch: Y  N

Student's Attendance Record: Excellent  Good  Fair  Poor

**Please indicate if the student has passed/failed the following tests of their most recent state assessment.**  
(If the student is a freshman, please answer according to performance on 8<sup>th</sup> grade assessments.)

Reading/Language Arts: Passed  Failed  Math: Passed  Failed

## Assessment

The above named student is applying to the Lourdes University Upward Bound Program. Please assist us in evaluating the needs of the student by filling out this form. We are looking for talented and motivated students who are striving to go to college and overcome social, personal and academic barriers.

Student's Motivation for Enrolling in Postsecondary Education: High  Average  Low

Desire to Attend College: High  Average  Low

Leadership Capabilities: High  Average  Low

Relationship with Others: High  Average  Low

Involvement in School Activities: High  Average  Low

**Please recommend focus areas to address the student's needs:**

Writing  Reading  Math  Science  Foreign Language  Learning Skills

Educational Planning  Career Information  Self-Concept

Other (Please specify) \_\_\_\_\_

## Recommendation

I would recommend \_\_\_\_\_ for admission to the Lourdes University Upward Bound Program. I believe that this student has the potential to succeed in college, although his/her present grades may not reflect it. To the best of my knowledge, this student meets the requirements for participating in the Upward Bound Program.

I would not recommend \_\_\_\_\_ for admission to the Lourdes University Upward Bound Program. Reason(s): \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

(Please place completed form in the LU Upward Bound mailbox located in the main office.)



# *Teacher Recommendation*

## *Lourdes University Upward Bound Program*

*This page needs to be completed by a teacher who has had the student enrolled in his or her class within the past year.*

Student's Name: \_\_\_\_\_

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

Relationship to the Student: \_\_\_\_\_

Length of Time Known: \_\_\_\_\_

<i>5= Excellent</i>	<i>4</i>	<i>3</i>	<i>2</i>	<i>1= Poor</i>	<i>Please rate the following:</i>
5	4	3	2	1	Has good attendance and demonstrates punctuality.
5	4	3	2	1	Seems motivated to achieve in class.
5	4	3	2	1	Demonstrates good study habits.
5	4	3	2	1	Accepts responsibility for his/her work.
5	4	3	2	1	Is cooperative.
5	4	3	2	1	Relates well with peers.
5	4	3	2	1	Exhibits dependable and reliable behavior.
5	4	3	2	1	Appearance and behavior reflect a positive self-image.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### *Recommendation*

I would recommend \_\_\_\_\_ for admission to the Lourdes University Upward Bound Program. I believe that this student has the potential to succeed in college, although his/her present grades may not reflect it. To the best of my knowledge, this student meets the requirements for participating in the Upward Bound Program.

I would not recommend \_\_\_\_\_ for admission to the Lourdes University Upward Bound Program.

Reason(s): \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

*(Please place completed form in the LU Upward Bound mailbox located in the main office.)*