

Application Checklist



Phase I (Student)

- ☐ Complete and sign MTC Upward Bound Application
- ☐ Submit your completed application to your Guidance Counselor

Phase II (Guidance Counselor)

- ☐ Complete *Guidance Counselor Recommendation* form
- ☐ **Submit Official Middle School and/or High School Transcript(s)** –Including student’s test results from State Standardized Test and SAT/ACT scores if applicable
- ☐ Guidance Counselor: Please mail or fax the student’s completed application to the Upward Bound Program

Phase III (Student)

- ☐ **Parent/Student Interview** – Please note that after you submit your *MTC Upward Bound Application Packet*, you and your parent(s)/guardian(s) will be contacted by the Upward Bound Administrative Specialist to schedule an on-campus interview with the Upward Bound Staff. During the interview, the staff will discuss with you and your family your educational and personal goals.
- ☐ **Income verification** – All students must submit a signed copy of their biological or adoptive parent(s)’ most recent *Federal Income Tax Return* during the on-campus interview. If you are in foster care, a homeless youth, at risk of being homeless, unaccompanied youth, or you have special circumstances, please notify the Upward Bound Administrative Specialist at 803.822.3384. If you are unable to locate your most recent *Federal Income Tax Return*, please contact your tax preparer or the IRS for a Tax Transcript.
- ☐ Complete *Information Release Form* and *Student Profile Form*

MTC Upward Bound Program • PO Box 2408 • Columbia, SC 29202 • MIDLANDSTECH.EDU/ub • 803.822.3384

Midlands Technical College does not discriminate in admissions, educational programs or employment on the basis of race, sex, national origin or ethnic group, color, age, religion, disability, genetic information, gender, military service, or pregnancy. In compliance with all federal and state laws, including Title VI and Title VII of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1992 as well as the ADA Amendments of 2008 (ADAA), and the Genetic Information Nondiscrimination Act of 2008 (GINA), Midlands Technical College offers access and equal opportunity in its admissions policies, academic programs and services, and employment of disabled individuals in that no otherwise qualified person will be denied these provisions on the basis of a disability. Mr. Ian A. MacLean has been designated to coordinate compliance with the nondiscrimination requirements contained in Section 35.107 of the Department of Justice regulations, Sections 503 and 504 of the Rehabilitation Act of 1973, Title VI and Title VII and Title IX regulations. Information concerning the provisions of the Americans with Disabilities Act and the rights and privileges thereunder are available from Mr. Ian A. MacLean in his position as Interim Director of Internal Auditing and Risk Management and the Chief Compliance Officer for Affirmative Action, Equal Opportunity, Sexual Harassment and Disability Action. He can be reached at Midlands Technical College, P.O. Box 2408, Columbia, SC 29202, 803.822.3204.

Although the UB staff is employed by Midlands Technical College, they do not recruit participants for the college.
As a UB participant, students can participate and receive assistance in applying to any vocational training program, college, and/or university.

Application

Please Print or Type Clearly



Section 1. Student Information

Today's Date: _____ Social Security Number _____

First Name _____ Last Name _____ Middle Initial _____

Mailing Address _____ Apt. # _____ Email _____

City _____ State _____ Zip Code _____

Phone Number (H) _____ (C) _____ Date of Birth ____/____/____ Age _____

Gender: ☐ Male ☐ Female

Race: (Check one) ☐ Black/African-American ☐ American-Indian/Alaska Native ☐ Asian ☐ White/Caucasian
☐ Hispanic/Latino ☐ Native-Hawaiian/Pacific Islander ☐ Multicultural ☐ Other/Unknown

Are you a U.S. citizen? ☐ Yes ☐ No

If no, are you an eligible non-citizen? ☐ Yes ☐ No Alien Registration Number A _____

Is English your first/primary language? ☐ Yes ☐ No

Are you currently a participant in another TRiO or federal program such as Talent Search, Upward Bound, and/or Gear-up?
☐ Yes ☐ No If yes, in which program are you a participant? _____

Section 2. Secondary School Information

☐ I am currently enrolled in middle school. **Current Grade Level:** _____
(Please list the complete name of your middle school) _____

☐ I am currently enrolled in high school. **Current Grade Level:** _____ **Expected Date of Graduation:** ____/____/____
(Please list the complete name of your high school) _____

Please list the name of the guidance counselor and the teacher who will provide a reference for you:

Guidance Counselor's Name: _____ Email Address: _____

Section 3. Needs Assessment

What category of service would you like to receive from the MTC Upward Program? (Check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> ACT/SAT Preparation | <input type="checkbox"/> Career Counseling | <input type="checkbox"/> College Admissions Counseling |
| <input type="checkbox"/> College Tours | <input type="checkbox"/> Cultural Event Enrichment | <input type="checkbox"/> Educational Referral Services |
| <input type="checkbox"/> Educational Counseling | <input type="checkbox"/> FAFSA Assistance | <input type="checkbox"/> Foster Youth and Homeless Educational Assistance |
| <input type="checkbox"/> Financial Aid Counseling | <input type="checkbox"/> Financial Literacy | <input type="checkbox"/> Interest/Aptitude Testing |
| <input type="checkbox"/> Scholarship Information | <input type="checkbox"/> Student Loan Counseling | <input type="checkbox"/> Tutoring |
| <input type="checkbox"/> Other _____ | | |

What do you plan to do after you graduate from high school?

- | | | |
|--|---|--|
| <input type="checkbox"/> Attend a two-year college | <input type="checkbox"/> Attend a four-year college | <input type="checkbox"/> Attend a vocational or trade school |
| <input type="checkbox"/> Enlist in military | <input type="checkbox"/> Get a job | <input type="checkbox"/> Other: _____ |

Section 4. Dependency Status

Are you any of the following?

- ☐ A dependent or ward of the court
- ☐ An emancipated minor
- ☐ In foster care or was previously in foster care
- ☐ Both parents are deceased
- ☐ Currently in legal guardianship
- ☐ Homeless or at risk of being homeless
- ☐ I have special circumstances and I am unable to provide my parental information at this time

If you answered yes to any of the questions in Section 4 above, you are not required to complete Sections 5-6 of this application.

Sections 5 through 6 To Be Completed by Parent(s) or Legal Guardian

Please answer the following questions on behalf of your child or dependent listed on Page 1 of this application.

The U.S. Department of Education requires the MTC UB Program to have income information on file for a participant's parent(s) in order to determine first-generation and low-income eligibility.

Section 5. Parent/Guardian Information

Parent/Guardian 1

First Name _____ Last Name _____ Middle Initial _____

Phone Number (H) _____ (C) _____ Email: _____

Highest level of school biological or adopted Parent 1 completed? (*Please note, if you are the student's guardian, please answer this question on the biological Parent 1.*)

- ☐ Middle School/Jr. High ☐ High School ☐ 2-year college
☐ 4-year college or beyond ☐ Other/Unknown

Parent/Guardian 2

First Name _____ Last Name _____ Middle Initial _____

Phone Number (H) _____ (C) _____ Email: _____

Highest level of school biological or adopted Parent 2 completed? (*Please note, if you are the student's guardian, please answer this question on the biological Parent 2.*)

- ☐ Middle School/Jr. High ☐ High School ☐ 2-year college
☐ 4-year college or beyond ☐ Other/Unknown

Section 6. Student's Income and Household Information

1. Did you [the student's biological or adoptive parent(s)] complete an income tax return? ☐ Yes ☐ No

If yes, please attach a completed and signed copy of the most recent Federal Tax Return when the completed application is submitted.

2. Household size (number of family members)? _____

To determine the household size, include:

- The student applying for admission into the MTC Upward Bound Program;
- Yourself [the parent(s)];
- The number of other children who will receive more than half of their support from you [the parent(s)] this school year; and
- The number of people who are not your children but who live with you and receive more than half of their support from you, and will continue to receive more than half of their support from you this school year.

3. What is parent(s)' marital status as of today? ☐ Single ☐ Married ☐ Divorced ☐ Separated ☐ Widowed

4. Who does the student listed reside with?

- ☐ Mother ☐ Father ☐ Mother and Father ☐ Mother and Stepfather ☐ Father and Stepmother
☐ Foster Parent ☐ Guardian ☐ Other: _____

5. Did the student or anyone in the student's household receive benefits from any of the following programs? (*Check all that apply.*)

- ☐ Food stamps/SNAP ☐ Free or reduced-priced lunch ☐ Temporary Assistance for Needy Families (TANF)
☐ Special Supplemental Nutrition for Women, Infants and Children (WIC) ☐ None

Section 7. Certifications

Please read the following statements and check the boxes verifying that you have read and agree.

- ☐ We certify that the information provided on this application is true and correct to the best of our knowledge.
☐ We understand that the information provided on this application will be held in strict confidence by the UB staff.
☐ We understand that if the student needs accommodation for a disability to participate in UB or in any of its scheduled activities, we must contact the UB Program at 803.822.3384 at least 30 working days prior to the activity.

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Guidance Counselor Recommendation Form

To the high school guidance counselor: Please fill out this form completely.

Please submit:

- ☐ Completed Guidance Counselor Recommendation Form;
- ☐ Student's middle/high school transcript with standardized test scores and SAT-I/ACT scores; and
- ☐ Please mail form with student application to Midlands Technical College Upward Bound, PO Box 2408, Columbia, SC 29202; email: ub@midlandstech.edu; Fax: 803.822.3414

Thank you for your assistance.

Section 1. (This section to be completed by the student.)

First Name _____ Last Name _____ Middle Initial _____

After you have completed Section 1, give this form to your guidance counselor.

Section 2.

Counselors, please complete this form and send to the UB Program via email at ub@midlandstech.edu or fax to 803.822.3414.

The above named student has applied for admission to the MTC Upward Bound (UB) Program. The UB Program is designed to provide support services to high school students (grades 9-12) in order to prepare them to graduate from high school and enroll and graduate from college. Upward Bound is funded by the US Department of Education and serves students in designated high schools in Lexington and Fairfield counties.

Secondary School: _____ Counselor's Name: _____

Counselor's Phone Number: _____ Counselor's Email: _____

If the student is currently in 8th grade, what high school will the student attend the following academic year?

- The student's GPA is _____ on a 4.0 scale Class Rank is _____ in a class of _____
- I have known the applicant for _____ months or _____ years
- How would you categorize the rigor of the student's academic program? If currently in middle school, please evaluate the courses the student will enroll in as a ninth grade student:
☐ AP and IB ☐ Honors ☐ College Prep ☐ Other _____
- Upon graduation, will the student have completed the CHE high school course prerequisites for applicants to apply to a South Carolina public colleges and universities? ☐ Yes ☐ No ☐ N/A
- Does the student have an IEP? ☐ Yes ☐ No
- Has the student ever been suspended or expelled? ☐ Yes ☐ No
- School Attendance: ☐ Regular ☐ Irregular No. of days missed _____
- Is the student currently participating in APEX and/or credit recovery? ☐ Yes ☐ No
If yes, what subject(s): _____
- Would you recommend this student to participate in the Upward Bound Program?
☐ Highly Recommend ☐ Recommend ☐ Recommend with Reservations ☐ Do Not Recommend

South Carolina Assessments:

Please indicate the student's performance level on the PASS test: (8 th Grade Year)			
	Exemplary	Met	Not Met
Writing			
English Language Arts			
Math			
Science			
Social Studies			

Counselor's Signature: _____ Date: _____