

Mailing Address:

6363 St. Charles Ave. Box 154 New Orleans, LA 70118 (504)864-7219 (office) (504) 864-7232 (fax)

Dear Prospective Parent(s)/Student(s):

Thank you for your interest in the Loyola University New Orleans Upward Bound Program. The Upward Bound program is designed to assist high school students who demonstrate the ability, motivation, and discipline to attend college. We are a year-round, rigorous enrichment program that help to prepare students for college through tutoring, academic classes, cultural activities, college awareness workshops, career exploration workshops, and academic/personal advising.

The Upward Bound program accepts applications on a rolling basis throughout the year for $9^{th} - 11^{th}$ graders attending **L.W. Higgins, John Ehret, Helen Cox, and West Jefferson High Schools.** Applications for students not immediately accepted into the program will be placed on a waiting list. Students accepted into the program must meet the eligibility guidelines set by the Department of Education:

- Must be in $9^{th} 11^{th}$ grade
- Must be enrolled and attend one of our target schools
- Must have a **2.5 GPA** or higher
- Low-income (dependent on family size)
- First generation (Parents/Guardians have not received a Bachelor's degree)

accepted). Applications will not be considered until all documentation is received.

Must be a U.S. citizen or Permanent Resident

Applications can be mailed by our office, given by our target school counselors, or downloaded and printed from our website. Please complete it in its entirety and attach all required documentation. Once your application is completed, you can submit your packet to the Upward Bound office via mail or drop off to the Upward Bound office. You are not required to submit your entire application packet to your high school counselor or teacher for the completion of the required recommendation forms. You may submit your application to the Upward Bound office while awaiting the return of these recommendations. Teacher recommendations must be completed by core subject teachers such as English, Math, or Science (American Government Honors/AP

Required documentation includes:

- ✓ the completed **original** application with required signatures (faxes and scans not accepted)
- ✓ proof of income (a completed and **signed recent** IRS Form 1040 or 1040A; Social Security (award letter), AFDC, or Retirement Benefits Letter or a completed and signed Part III of the application)
- ✓ We do not accept W-2 forms.
- ✓ copy of current report card (8th grade report card for incoming 9th graders)
- ✓ copy of official transcript
- ✓ copy of LEAP, EOC, ACT (if applicable) test scores

Again, thank you for your interest in the Loyola Upward Bound Program.



Upward Bound is a TRIO program. TRIO programs, funded under Title IV of the Higher Education Act of 1965, help students overcome class, social, academic and cultural barriers to higher education.

LOYOLA UNIVERSITY UPWARD BOUND ADHERES TO THE PRINCIPLE OF EQUAL EDUCATIONAL EMPLOYMENTOPPORTUNITY WITHOUT REGARD TO RACE, COLOR, SEX, AND/OR NATIONALORIGIN.

UPWARD BOUND PROGRAM

ALL QUESTIONS AND SHORT ANSWER PROMPTS MUST BE ANSWERED FOR THIS APPLICATION TO BE PROCESSED. <u>PLEASE PRINT IN BLUE OR BLACK INK.</u>

APPLICANT DATA

First Name	MI	_	Last Name	
) Current High School:		Present Gr	ade Level:	
) Expected year of Graduation:	Overall	l Unweighted	l GPA:	
) Are you a U.S. Citizen? □Yes □No				
) Upon graduation from high school, what are y	your plans? Check On	ne.		
□ 4 year university/college program □	2 year college program	n i	□ Enlist in th	e military
□ □Obtain Employment □ Ted	echnical/Vocational/Trac	de program	□ Not Sur	re
) Applicant Telephone Number:		7.) Gender:_	Male	Female
Date of Birth: Month / Day / Yes Needs Assessment (Place an X next to all that a Assistance in learning how to take better not Assistance in choosing classes that will preport assistance in applying for financial aid/sch ACT/SAT/EOC/LEAP 2025 Preparation Improving self-esteem and social skills Assistance in choosing a career/college may Assistance in knowing how to prepare for a Assistance in test taking strategies and tech Assistance in developing or improving my Improving study skills and habits Assistance in applying for college admission Assistance in visiting colleges Experience more cultural activities More information on college prep courses as	otes epare me for college nolarships/grants ajor that's best for me a career that interests m nniques time management skill			
More information about college programs a				

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1.) With whom do you live? Check	One. (If you have a legal	guardian, please prov	ide proof of guardianship
Mother & Father	Mother Only	Father Only	Father & StepMother
Mother & Stepfather	Guardian	Foster Care	Grandparents
Other (Please List):			
2.) Are there any circumstances/acc	ommodations/disabilities t	hat might affect your ac	ademic progress?
YesNo			
If yes, please explain:			
ii yes, picase explain.			
3.) Applicant's Email Address:			
The personal information contained Program. The Upward Bound Program.	I herein is property of the gram is a federally-funded	Loyola University New TRIO program sponsor	Orleans Upward Bound red by the Department of
Education. This information is protec	ted by the Privacy Act. O	nly employees of the US	S Department of Education
and the Loyola University New	•		
ne information is necessary to determ federal government to measure the informatio		n order to qualify for pa	rticipation, all requested
I DECLARE THE INFORMA KNOWLE	TION SUBMITTED ON DGE, TRUE, ACCURA	· · · · · · · · · · · · · · · · · · ·	
		_	
Applicant's Signature:		Date:	/





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PARENT (GUARDIAN) EDUCATIONAL ATTAINMENT & INCOME VERIFICATION FORM

1.) Name:Relationship:			
Mailing Address:	City:	State:	Zip Code:
Place of Employment:			
Occupation:	Cell phone	e #:	
Email Address:			
Have you received a 4-year degree fr	rom a college or university?	No	Yes
2.) Name:	Relat	ionship:	
Mailing Address:	City:	State:	Zip Code:
Place of Employment:			
Occupation:	Cell phon	e #:	
Email Address:			
Have you received a 4-year degree fr	rom a college or university?	No	Yes
3.) Number of people living in your	r household?		
4.) What is your household's 20*Taxable income is less than adjuste			
ALL OF THE INFORMATION	ON ON THIS DOCUMENT HE BEST OF MY KNOWLE		D COMPLETE TO
Parent (Guardian) Signature:		Da	te· / /

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	Sahaal Caumaalan		
	School Counselor Recommendation		
	Recommendation		
Student Name			
School			
Current Grade Classification			
Does this student require 504/SPED/Disab	ility accommodations?	Yes □ N	No 🗆
In your professional opinion, what type of that apply.) EOC/LEAP 2025 limited/unsatisfactorAssistance with writing/comprehensionLow Unweighted GPA (2.5 or less)Lack of career goals and/or need for aLacks confidence, self-esteem or socialACT: Demonstrates below average scoAssistance with applying to college/finaLimited English Proficiency (ESL StudImproving study skills/developing a studTest Taking strategies/skills	y scores in 1 or more subject a/reading skills ccess to information on careers skills re in 1 or more subject areas ncial aid/scholarships lent)		· (Cincen un
Does the student have behavior infraction If yes, please provide documentation if av			
Additional Comments:			
Would you recommend this student to par		Yes - No) []
Please attach STUDENT TRANSCRIPTS a	and any STANDARDIZED TES	r SCORES.	
Signature of Counselor	Date		_

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<u>Teacher</u> <u>Recommendation</u>

	Recommendation
Student Name School Current Grade Level	
Course/Subject	□ Math □ English □ Science □ Other:
that apply.)EOC/LEAP 2025 limited/unsatisAssistance with writing/comprelLow Unweighted GPA (2.5 or leLack of career goals and/or needLacks confidence, self-esteem or	d for access to information on careers social skills age score in 1 or more subject areas ege/financial aid/scholarships L Student) ag a study routine
Would you recommend this student t	to participate in Upward Bound? Yes No
Signature of Teacher	Date

Thoughts About Yourself (Must be completed by applicant, in his/her own words and in his/her own handwriting)

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1.
1. 2. 3. 4. 2. 3. 4. 2. 3. 4. 2. 3. 4. 4. 2. 3. 4. 4. 2. 3. 4. 4. 2. 3. 3. 4. 4. 4. 4. 4.
2.
2
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ings I have enjoyed learning about: 1
1
2
3
4
1
1
2.
2.
4
itills I have learned that will help me in school: 1 2 3 4
1
2. 3. 4.
3. 4.
4.
ew skills I would like to learn before I graduate:
1
2.
3.
4
Applicant's Signature:
Date:

Applicant Essays (Must be completed by applicant, a minimum of five sentences, in blue or black ink and in the applicant's own handwriting)

"Upward Bound is looking for students who will be committed to attending weekly tutoring sessions, monthly sessions and a 6-week summer program. Please describe what benefits, you believe, that Upward Bound can provide for you as a participant.			
· · · · · ·			
	ping students get into college and finishing college to eer they chose. What's your intended major or career?		
_			

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High School Records Release Authorization

I hereby consent to the release of my high school records (transcripts, final transcripts, report cards, test scores, course evaluations, recommendations, and other information regarding my high school performance to the Loyola University New Orleans Upward Bound Program. This release is effective throughout my high school career and is effective for any high school that I attend during and after participation in the Loyola University New Orleans Upward Bound Program.

Student's Name		
Student's Social Security Nur	nber	
Student's Date of Birth		
Student's Signature	Date	
Parent Certification		
<u> </u>		
I consent to the release of my ch	nild's high school records to L	oyola University New Orleans
Upward Bound Program.		
		/ /
Print Name	Signature	

UPWARD BOUND PROGRAM 6363 St. Charles Ave-Box 154 New Orleans, LA 70118			
	University/College Records Release Authorization	on	
course evaluations, recomm performance) to Loyola Un effective throughout my column attend during and after participations.	endations, and any other informativersity New Orleans Upward	nscripts, report cards, test scores, ation regarding my postsecondary Bound Program. This release is any college/university that I may ram.	
Student's Name Student's Social Security N Student's Date of Birth	fumber		
Student's Signature	Date		
Parent Certification I consent to the release of my Upward Bound Program.	child's postsecondary records to L	oyola University New Orleans	
Print Name	Signature	/	