



Be COLLEGE bound with UPWARD BOUND



UOG Upward Bound

Do you plan on going to college? If YES, UB can help you get there!

UPWARD BOUND (UB) is a 100% federally funded program by the U.S. Education Department. UB is aimed at generating the skills and motivation necessary for low income and/or First Generation College bound students to complete high school and continue on to college.

FREE services include: college preparation activities, after school tutorial sessions, career exploration activities, fieldtrips, self-development workshops, financial aid & financial literacy information, test prep, 6-week summer program at UOG with high school credit, and much more!



Eligibility Requirements:

- Minimum GPA 2.5 or 80% and higher.
- High school 9th, 10th or 11th grader from public high schools. (GW, JFK, SSHS, SHS, Okkodo, or Tiyan High) 12th graders accepted only on space availability.
- Parents/ legal guardians do not have a 4-year college degree from a postsecondary institution OR student comes from a low-income household based on taxable income.
- Citizen of the U.S. CNMI, Marshall Islands, Palau, FSM, other U.S. Trust territories, U.S. permanent residents.
- Plans to attend college/university immediately after high school graduation by August/ September.

**For Applications or Inquiries
Contact UB staff at:**

*Phone: 735-1992/ 2245
Email UB Assistant Director:
ubuog1992@gmail.com
Fax: 734-7514*

**Application Deadline:
October 28, 2016**

Visit the Upward Bound Office at:
University of Guam
Field House --UB/ TRIO
Main Office 1st Floor (last door in hallway with weight machines)

100% federally funded with an annual funding of \$414,012.00.

This material was produced with Upward Bound funding from the U.S. Education Department.

University of Guam Campus Map



Upward Bound Office (#9- UOG Field House, 1st Floor- Last Door on the left wing past the Fitness Center)
If further directions are needed please call the UB Office at 735-1992/2245 or 929-7952.

#4—UOG/CLASS Lecture Hall for Orientations, End of Year Ceremony, & Large group workshops.

#5—MARC/Computer Center for computer related classes / Workshops

#11—Humanities & Social Sciences (HSS) building for standardized test prep classes, small group workshops & summer classes.

#12—School of Business and Public Administration (SBPA) building for standardized test prep classes, small group workshops & summer classes.

#16—School of Nursing & Health Science (SNHS) building for summer classes.

#17—Science building for summer classes.

#18—Student Services Center (Cafeteria & Rotunda) for summer meals, student & parent meetings, and recreational activities.

#20—RFK Library/AV Rooms for summer classes and library work.



UPWARD BOUND APPLICATION

(Application Form as of September 6, 2016)

We are required by the United States Department of Education to obtain income information from all students served by the UB program. This information is protected by the Privacy Act of 1974. No one may see the information unless employed by the UB program or specifically authorized to see it. The U.S. Dept. of Education has the authority to gather such information (20 USC 1231a.) Your child will not be accepted into the program unless and until verification of eligibility is determined. (All information provided is kept confidential)

DIRECTIONS: A parent or legal guardian of a student applying for enrollment into the UOG Upward Bound Program must complete this information. Please print or type all requested materials using **black** or **blue** ink. This application will be considered incomplete and will not be processed without the requested supporting documents listed on pg. 3 of this application.

FOR OFFICIAL USE:

Date Received: _____

By: _____

Eligibility Status

PART A - STUDENT INFORMATION

Name: Last, First, M.I.	M / F	M/D/Y		Social Security #
Print School Name		Grade Level		GPA (cumulative)
Student Cell Phone, if any:	Student Email:			
Student Mailing address: P.O Box or Street Address (if home delivery available)	Village	State	Zip Code	
Are you currently a participant in any federally funded pre-college programs, such as *UOG/ TRIO- ETS or *another college prep program?				
<input type="checkbox"/> NO / <input type="checkbox"/> *YES, if yes please specify: <input type="checkbox"/> UOG Educational Talent Search <input type="checkbox"/> Other: _____				
Application Status: (Check one) <input type="checkbox"/> New Student <input type="checkbox"/> Returning UB Student (attended UB, but exited before) <input type="checkbox"/> Transferring from other program				
CITIZENSHIP:		LANGUAGE BACKGROUND:		
Please indicate your citizenship status by marking a box below:		Please provide answers to each question.		
<input type="checkbox"/> Citizen, national, or permanent resident of the United States <input type="checkbox"/> Citizen of the Republic of Palau Citizen of the Freely Associated States (✓ Check island) <input type="checkbox"/> Chuuk <input type="checkbox"/> Pohnpei <input type="checkbox"/> Kosrae <input type="checkbox"/> Yap <input type="checkbox"/> Citizen of the Republic of the Marshall Islands <input type="checkbox"/> Other (please specify) _____		What is your ethnicity? (See page 4 of application, e.g. Chamorro, Filipino) Is English your first language? <input type="checkbox"/> YES / <input type="checkbox"/> NO If English is NOT your first language, what is your first language? Language spoken at home: _____ Language spoken by your parents/ guardians: _____		
CAREER FIELD INTEREST		EDUCATIONAL and CAREER PLANS:		
I am interested in exploring the following careers (example: Doctor)		Immediately after high school I plan to:(please indicate by marking a box below)		
1. _____ 2. _____ 3. _____		<input type="checkbox"/> Attend college/ university <input type="checkbox"/> Work <input type="checkbox"/> Enlist in US Armed Forces / military <input type="checkbox"/> Undecided/ other: _____		

EDUCATIONAL NEEDS / SERVICES REQUESTED FROM UB:

I need the following information or assistance (please indicate by marking a box below):

UB Services & Assistance (Mark below all that apply)		
<input type="checkbox"/> Academic Assistance for GPA Improvement <input type="checkbox"/> Career Exploration Activities <input type="checkbox"/> College Admission & Entrance Exam Preparation <input type="checkbox"/> Exposure to Academic Programs & Cultural Events <input type="checkbox"/> Financial Aid Assistance & Financial Literacy Info <input type="checkbox"/> Standardized Test Prep	<input type="checkbox"/> Academic Tutoring Please list subjects below:	<input type="checkbox"/> Other ACADEMIC services needed (please specify)
		<input type="checkbox"/> Advice and Assistance in High School or College Course Selection <input type="checkbox"/> Study Skills /Self Development <input type="checkbox"/> Guidance & Assistance for HS Re-entry, GED, & Postsecondary Entrance <input type="checkbox"/> OTHER:

PART B – PARENT/ LEGAL GUARDIAN INFORMATION

APPLICANT LIVES WITH:	<input type="checkbox"/> FATHER (Biological/ Adoptive) <input type="checkbox"/> MALE GUARDIAN <input type="checkbox"/> OTHER: _____	*APPLICANT LIVES WITH:	<input type="checkbox"/> MOTHER (Biological/ Adoptive) <input type="checkbox"/> FEMALE GUARDIAN <input type="checkbox"/> OTHER*: _____
Name:	Name:		
Mailing Address:	Mailing Address:		
Home No:	Home No:		
Cell No:	Cell No:		
Work No.	Work No.		
Email:	Email:		
Employer:	Employer:		
Occupation:	Occupation:		
Work Schedule including days off:	Work Schedule including days off:		
DO YOU HAVE A 4-YEAR COLLEGE DEGREE?		DO YOU HAVE A 4-YEAR COLLEGE DEGREE?	
<input type="checkbox"/> NO <input type="checkbox"/> YES, if yes please write down your college degree and the name of the college you attended. Degree: _____ College: _____		<input type="checkbox"/> NO <input type="checkbox"/> YES, if yes please write down your college degree and the name of the college you attended. Degree: _____ College: _____	

*Refer to McKinney-Vento Homeless Education Assistance Act

PART C – HOUSEHOLD INFORMATION

- House hold size (include the # of dependent children, parents/ legal guardians, and other dependents) : _____
- What was your family's total annual **TAXABLE INCOME** from **most current** income tax form? \$ _____
- Is your family presently receiving any public assistance such as welfare, food stamps, AFDC, social security, disability, and/or retirement? NO / YES, list the program(s): _____
- Is your family currently participating in any publicly-funded programs such subsidized housing, training (AHRD), free or reduced lunch program, etc.? NO / YES, list the program(s): _____

Federal TRIO Programs
Current-Year Low-Income Levels
(Effective January 25, 2016 Until Further Notice)

For family units with more than eight members, add the following amount for each additional family member: \$6,240 for the 48 contiguous states, the District of Columbia and outlying jurisdictions; \$7,800 for Alaska; and \$7,170 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 25, 2016.

Size of Family Unit	Taxable Income (Contiguous States)
1	\$17,820
2	\$24,030
3	\$30,240
4	\$36,450
5	\$42,660
6	\$48,870
7	\$55,095
8	\$61,335

PART D - AUTHORIZATION FOR VERIFICATION OF INFORMATION & RECORDS

Only authorized individuals are allowed to sign UB documents. If the student is currently living with someone other than their biological parents, such as adoptive parents / legal guardians, A COPY OF ADOPTION PAPERS / LEGAL GUARDIANSHIP must be submitted to the Upward Bound Office if selected for enrollment.

Student Name:	Last,	First,	M.I.	SSN
Print School Name				Current Grade Level

I/ We verify that the information provided in this form is true and accurate to the best of my knowledge. I authorize Upward Bound staff and the TRIO Programs Director to obtain or verify the information from Guam Department of Education or my child's school, and other designated agencies as deemed necessary. This includes but is not limited to report cards, transcripts and standardized test scores.

I/We authorize the use of my income tax form or other income verification forms submitted to Upward Bound as supporting documents for the application and enrollment of my child into UB.

I/We understand that any records obtained by the UB staff will be kept confidential.

I/We hereby give permission for any educational institution to release (my/ our) child's school records to the program's contact counselor and/or UB staff.

I/We understand and acknowledge that UB will follow federal regulations, required to prevent duplication of services and to ensure more students are served, as designated by federal guidelines 34 CFR 645.11 and 645.12. **To prevent such duplication, I will exit other college prep programs such as *TRIO-ETS or *other college prep programs should I be accepted into UB since those programs provide the same basic services listed in the federal guidelines.**

Acknowledged by:

Print Parent / Guardian's Name

Parent / Guardian's Signature & Date

Student's Signature & Date

PLEASE NOTE:

This application will be considered **INCOMPLETE** and **WILL NOT BE PROCESSED** without the following supporting documents:

- A copy of the parent/ legal guardian's **SIGNED 2015 Income Tax form OR any other form of verification of income.** (This may include other government documents, such as Unemployment, Social Security, Disability, or the school lunch program applications, etc.)
- Copy of the **most recent school report card/ transcript.**
- Copy of student's **standardized test scores** for last school year, e.g., GDOE ACT Aspire/ Teacher Produced Test, SAT10, etc. (**NOTE: Please submit the most recent standardized test score available until last school year's scores become available.**)
- Copy of a **Proof of citizenship** (passport, birth certificate, Alien Registration Number OR "green" card)
- Completed **Counselor and Teacher Recommendation Forms from Math and English classes**.

If you have any questions about these supporting documents please contact our office at (671) 735-1992/ 2245.

APPLICATION DEADLINE: October 28, 2016 (SY2016)

DESCRIPTION OF ETHNICITIES FOR PAGE 1 OF APPLICATION

**Descriptions provided by the U.S. Education Department*

NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER: A person having origins in any of the original peoples of Hawaii or other Pacific Islands such as Samoa, Guam, or Micronesia (Marshall Islands, FSM, Palau, or CNMI).

ASIAN: A person having origins in any of the original peoples of the Far East, Southeast Asia, and the Indian subcontinent. This area includes, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

WHITE: A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

HISPANIC: A person having origins in any of the original peoples of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

BLACK OR AFRICAN AMERICAN: A person having origins in any of the Black racial groups of Africa.

AMERICAN INDIAN/ ALASKAN NATIVE: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.



English Teacher Recommendation Form

For School Year 2016 - 2017

To the Student: Please have your current **English** teacher complete this form. (*If you're an incoming 9th grader, please have your 8th grade teacher complete the form.*)

Student's Name: _____ Grade: _____

High School: _____ How long in your class? _____ months

To the Teacher: The University of Guam Upward Bound (UB) Program is a college preparation program aimed to help high school students graduate and enroll into college. Students who show potential but need academic guidance, study skills development, or tutoring to succeed may be recommended. Please be as specific as possible in your remarks and provide the requested information on both sides of this form.

We understand that you may not know the student long enough to assess his/her abilities, but please fill this out to the best of your knowledge. **Once you have completed this form please return it to the student so it could be attached to his/her application.**

Please note that the deadline for students to submit this form is before or on **FRIDAY, OCTOBER 28, 2016.** (Deadline will be changed for summer and new school year enrollment.)

Teacher's Name: _____ Contact Number: _____

School: _____ Email Address: _____

Please rate the student in the following categories based on your knowledge. If you're unable to rate the student, please write in N/A in the box.

4 - Excellent 3 - Good 2 - Satisfactory 1 - Poor/Needs Improvement

EFFORT: Puts effort in class related assignments and activities	
PARTICIPATION: Contributes to class discussions and activities	
PUNCTUALITY AND ATTENDANCE: Consistently attends class and is on time	
MOTIVATION: Is ambitious and goes beyond what is required	
ASSIGNMENTS: Turns in assignments <u>on time</u> and follows directions	
COOPERATION: Works well with peers and follows instructions	
ATTITUDE: Displays maturity and responsibility as well as academic interest and enthusiasm	
PARENT INVOLVEMENT: Parents are active in the student's education	
TOTAL SCORE:	

UOG Station, Mangilao, Guam 96923

Tel. (671) 735-2245/1992 Fax: (671)734-7514 Website: www.uog.edu

A U.S. Land Grant Institution accredited by the Western Association of Schools & Colleges

The University of Guam is an Equal Opportunity Employer and Provider.

1. What is your assessment of the student's academic potential for college?

Yes No

2. Has the applicant been subjected to disciplinary action in your class? If Yes, please explain.

3. What type of assistance do you think this student should be given to do better in your class?
Please be specific, if possible.

4. Please mark one:

I... Recommend Recommend with reservation Do not recommend the student to the University of Guam Upward Bound Program.

Teacher's Signature

Date

<p>Contact these GDOE counselors if you have questions about UB and to Submit UB Recommendation Form. Counselors' names may change during the school year.</p>	<p><input type="checkbox"/> GW Counselor: Dr. Elisabeth Ichihara-Rosario <input type="checkbox"/> JFK Counselor: Dr. Billie-Jo Marzan <input type="checkbox"/> OHS Counselor: Mrs. Annie Palomares <input type="checkbox"/> SHS Counselor: Ms. Rosemarie Guilliot <input type="checkbox"/> SSHS Counselor: Mrs. Maria Blessa Ramos <input type="checkbox"/> THS Counselor: Dr. Valorie Alig <input type="checkbox"/> UB Office Staff: Rowena Andrade, UB Assist. Director (Incoming 9th graders and other high schools not listed.)</p>
<p>Contact Rowena Andrade, UB Asst. Director</p>	<p>Phone: 735-1992/ 2245 Email: ubuog1992@gmail.com</p> <p>(UB/ TRIO Main Office Location: UOG Field House, 1st Floor (left wing at end of hallway)</p>



UNIVERSITY OF GUAM

UNIBETSEDÅT GUAHAN



UPWARD BOUND PROGRAM

Math Teacher Recommendation Form

For School Year 2016 - 2017

To the Student: Please have your current **Math** teacher complete this form. (*If you're an incoming 9th graders, please have your 8th grade teacher complete the form.*)

Student's Name: _____ Grade: _____

High School: _____ How long in your class? _____ months

To the Teacher: The University of Guam Upward Bound (UB) Program is a college preparation program aimed to help high school students graduate and enroll into college. Students who show potential but need academic guidance, study skills development, or tutoring to succeed may be recommended. Please be as specific as possible in your remarks and provide the requested information on both sides of this form.

We understand that you may not know the student long enough to assess his/her abilities, but please fill this out to the best of your knowledge. **Once you have completed this form please return it to the student so it could be attached to his/her application.**

Please note that the deadline for students to submit this form is before or on **FRIDAY, OCTOBER 28, 2016**. (Deadline will be changed for summer and new school year enrollment.)

Teacher's Name: _____ Contact Number: _____

School: _____ Email Address: _____

Please rate the student in the following categories based on your knowledge. If you're unable to rate the student, please write in N/A in the box.

4 - Excellent 3 - Good 2 - Satisfactory 1 - Poor/Needs Improvement

EFFORT: Puts effort in class related assignments and activities	
PARTICIPATION: Contributes to class discussions and activities	
PUNCTUALITY AND ATTENDANCE: Consistently attends class and is on time	
MOTIVATION: Is ambitious and goes beyond what is required	
ASSIGNMENTS: Turns in assignments <u>on time</u> and follows directions	
COOPERATION: Works well with peers and follows instructions	
ATTITUDE: Displays maturity and responsibility as well as academic interest and enthusiasm	
PARENT INVOLVEMENT: Parents are active in the student's education	

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1. What is your assessment of the student's academic potential for college?

2. Has the applicant been subjected to disciplinary action in your class? If Yes, please explain.

Yes No

3. What type of assistance do you think this student should be given to do better in your class? Please be specific, if possible.

4. Please mark one:

I... Recommend Recommend with reservation Do not recommend the student to the University of Guam Upward Bound Program.

Teacher's Signature

Date

<p>Contact these GDOE counselors if you have questions about UB and to Submit UB Recommendation Form. Counselors' names may change during the school year.</p>	<p><input type="checkbox"/> GW Counselor: Dr. Elisabeth Ichihara-Rosario <input type="checkbox"/> JFK Counselor: Dr. Billie-Jo Marzan <input type="checkbox"/> OHS Counselor: Mrs. Annie Palomares <input type="checkbox"/> SHS Counselor: Ms. Rosemarie Guilliot <input type="checkbox"/> SSHS Counselor: Mrs. Maria Blessa Ramos <input type="checkbox"/> THS Counselor: Dr. Valorie Alig <input type="checkbox"/> UB Office Staff: Rowena Andrade, UB Assist. Director (Incoming 9th graders and other high schools not listed.)</p>
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UNIVERSITY OF GUAM

UNIBETSEDÅT GUAHAN



UPWARD BOUND PROGRAM

Counselor Recommendation Form School Year 2016 - 2017

To the Student: Please have your current **Counselor** complete this form.

Student's Name: _____ Grade: _____

Current School: _____

To the Counselor: The University of Guam Upward Bound (UB) Program is a college preparation program aimed to help high school students graduate and enroll into college. Students who show potential but need academic guidance, study skills development, or tutoring to succeed may be recommended. Please be as specific as possible in your remarks and provide the requested information on both sides of this form.

We understand that you may not know the student long enough to assess his/her abilities, but please fill this out to the best of your knowledge. **Once you have completed this form please return it to the student so it could be attached to his/her application.**

Please note that the deadline for students to submit this form is before or on October 28, 2016 (School Year Enrollment).

Counselor's Name: _____ Contact Number: _____

Current School: _____ Email Address: _____

1. Please provide a copy of the student's **current school transcript** to this form. (For incoming or current 9th graders, the student's 8th grade report card for 4th quarter may be used instead if the student doesn't have a SY2015 transcript or a report card for this school year.)

2. How many credits has the student earned? (Only for current high school students) _____ credits

3. What academic path is the student currently placed ? If applicant is an incoming 9th grader, which academic path will he/she be placed for new school year?

COLLEGE CAREER

4. Please attach a copy of the student's standardized test scores for **last** school year or the most recent scores available, e.g. GDOE ACT Aspire, SAT10, GDOE Teacher Designed Test, or other standardized test given by the student's school.

5. Has the applicant been subjected to disciplinary action? Yes No If Yes, please explain.

6. Do you have any other comments on the student or information that we should take into account when considering the student for the program?

7. Please mark one:

I... Recommend Recommend with reservation Do not recommend the student to the University of Guam Upward Bound Program.

Counselor's Signature

Date

<p>Contact these GDOE high school counselors/ UB Staff if you have questions about UB and to Submit UB applications. Counselors' names may change during the school year.</p>	<p><input type="checkbox"/> GW Counselor: Dr. Elisabeth Ichihara-Rosario <input type="checkbox"/> JFK Counselor: Dr. Billie-Jo Marzan <input type="checkbox"/> OHS Counselor: Mrs. Annie Palomares <input type="checkbox"/> SHS Counselor: Ms. Rosemarie Guilliot <input type="checkbox"/> SSHS Counselor: Mrs. Maria Blessa Ramos <input type="checkbox"/> THS Counselor: Dr. Valorie Alig <input type="checkbox"/> UB Office Staff: Rowena Andrade, UB Assist. Director (Incoming 9th graders and other high schools not listed.)</p>
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