| Emerging Scholars Program Participant Application 2024 : Entry # 130 | | |
|---|---|--|
| Part | Participant Personal & Background Information | |
| Name | | |
| | David Reynoso Perez | |
| Preferred Name | | |
| | David | |
| Date of Birth | | |
| | 05/22/2000 | |
| Pronouns | | |
| | He/Him | |
| Gend | ler | |
| | Male | |
| Race/ Ethnicity | | |
| | Hispanic/Latino | |
| Are you a U.S. Citizen? | | |
| | Yes | |
| Address | | |
| | 1104 blackberry lane apt 3 | |
| | Berea, KY 40403 United States | |
| | Map It | |
| Bere | a Email | |
| | reynosod1@berea.edu | |
| Mobile Phone | | |
| | (336) 410-3213 | |
| Eligibility Criteria | | |
| Did either parent or legal guardian graduate with a 4-year Bachelor's degree? | | |
| | No | |
| With whom did you reside until your 18th birthday? | | |
| | • Other | |

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| If you selected other to the previous question, please list their relationship to you. | |
| self | |
| Do you have any mental health, physical, intellectual or other disabilities? | |
| Yes | |
| Are you considered Independent or dependent | |
| Independent | |
| Did you file your taxes last year? | |
| Yes | |
| How many family members, including you, live in your home? (Brothers, Sisters, Parent(s), etc.) | |
| • 2 | |
| | |
| Academic Information | |
| High School GPA | |
| idk Toot Seeves (ACT or SAT) | |
| Test Scores (ACT or SAT) | |
| idk Student Classification | |
| Transfer Student | |
| | |
| Major (If you do not know put undecided) | |
| Psychology Comparison of the control of the contro | |
| Career Interest (If you do not know put undecided) | |
| My career interest is to get a job | |
| Were you previously involved in any other TRIO Programs | |
| Yes | |
| Which TRIO Program did you participate in | |
| Upward Bound/Upward Bound Math/Science | |
| Program Information | |
| Why did you choose to apply to the Emerging Scholars Program? | |
| | |

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| Former member wanting to experience it again | | |
| What resources might you use if accepted to the Emerging Scholars Program? Check all that apply. | | |
| Educational Planning Academic Reading Test-Taking Skills | | |
| Of the choices above, what is your first priority? | | |
| idk | | |
| Of the choices above, what is your second priority? | | |
| idk | | |
| Of the choices above, what is your third priority? | | |
| idk | | |
| Are you interested in participating in the annual ESP Kick-Off? | | |
| Yes | | |
| Are you participating in Athletics? (* Due to overlapping schedules, athletes will not be able to participate in ESP Early Kick-off) | | |
| Yes | | |
| Application Certification | | |
| I certify that the information on this application is accurate and complete to the best of my knowledge. I authorize the Emerging Scholars Student Support Services Project to obtain any information from my educational records (e.g., transcripts, entrance test scores, grades, instructor contacts, financial information, etc.) and to perform staffing activities that may be pertinent to my participation in the project. I agree that if I am selected to participate in the ESP-SSS project, I will be enrolled in and complete a .25 credit course, Strategies for Academic Success, that meets 50 minutes per week for my first semester. I will also work with an assigned Academic Counselor to create a personalized success plan. | | |
| Student Signature | | |
| PIR | | |
| Parent/ Guardian Signature | | |
| NN | | |
| Today's Date | | |

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08/24/2023

Today's Date

08/24/2023

Notes



Admin Notification (ID: 6411dede68218)

added 26 mins ago

WordPress successfully passed the notification email to the sending server.



emergingscholars emergingscholars@berea.edu

added 23 mins ago

Application Certification: Checked "I certify that the information on this application is accurate and complete to the best of my knowledge. I authorize the Emerging Scholars Student Support Services Project to obtain any information from my educational records (e.g., transcripts, entrance test scores, grades, instructor contacts, financial information, etc.) and to perform staffing activities that may be pertinent to my participation in the project. I agree that if I am selected to participate in the ESP-SSS project, I will be enrolled in and complete a .25 credit course, Strategies for Academic Success, that meets 50 minutes per week for my first semester. I will also work with an assigned Academic Counselor to create a personalized success plan."