

## UPWARD BOUND PROGRAM APPLICATION

The Upward Bound Program (UB) at Diablo Valley College (DVC) is a year-round, pre-college program designed to assist high school student's transition to college. Upward Bound works in collaboration with the schools, colleges and the community to provide educational opportunities and support to achieve these goals. We are currently recruiting at all grade levels at Concord, Mt. Diablo and Ygnacio Valley High Schools. The application period for Fall /Spring \_\_\_\_\_ closes on \_\_\_\_\_.

### Eligibility Requirements

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- Enrolled: Concord, Mt. Diablo or Ygnacio Valley High School
- Citizen or Permanent Resident of the United States
- Low Income and/or potential first-generation college student
- Has applied for citizenship status and can provide proof of application

### Services Available

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- Preparation for high school graduation and college admissions tests
- Assistance and guidance in following a college preparatory curriculum
- Information and assistance in completing college applications and financial aid forms
- Bi-monthly seminars and academies on Saturdays (Saturday Academy)
- Daily, non-residential summer program (Six Week Program)
- Exploration of educational and career opportunities
- Weekly tutoring in core academic subjects
- Educational, cultural and college field trips
- Summer bridge program for graduating seniors

### Application Checklist

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**Please ensure that the necessary items in the checklist below have been attached prior to submitting your application.**

- Meet Eligibility Requirements
- Complete and Submit Upward Bound Application
  - Submit application and documents to an Upward Bound staff member, Upward Bound mail box at Main Office or Upward Bound DVC Office in Student Service Center Room 258
  - Application must be typed or handwritten neatly in black or blue ink
  - Student and Parent/Guardian name and/or signature on all pages where applicable
  - Acknowledge Upward Bound Student Commitment on page 2
- Attach Required Documents
  - Attach 3 sealed envelopes of Teacher Evaluation Forms (Teacher may send separately)
  - Proof of Citizenship
    - US Citizenship (Copy of Social Security Card) or
    - Legal Residency (Copy of Alien Registration Card or
    - Pending Residency Status (Copy of Notification of Application Letter)
  - Income Verification of Parent /Guardian (*Only one of the following signed copies of documentation must be attached*)
    - Copy of tax form (1040) for 2019 or
    - Copy of Unemployment for 2019 or
    - Copy of AFDC/TANF Annual Statement for 2019 or
    - Copy of Annual Social Security Benefits Statement for 2019
- Student Interview
- Parent Interview

Lastly, once the application is completed and submitted the Student and Parent/Guardian will receive an acceptance letter by mail.

**For questions or assistance with this application, please contact a member of our program staff:**

John Trujillo	925-969-2194	<a href="mailto:jtrujillo@dvc.edu">jtrujillo@dvc.edu</a>
Stephanie Lustina	925-969-2193	<a href="mailto:slustina@dvc.edu">slustina@dvc.edu</a>
Ramona McCoy	925-969-2189	<a href="mailto:rharrell-mccoy@dvc.edu">rharrell-mccoy@dvc.edu</a>

**This Application is Due:** \_\_\_\_\_ **Please complete in black or blue ink**

**UPWARD BOUND PROGRAM APPLICATION – STUDENT INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Apt# \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Parent's Cell #: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Gender:  Male  Female Date of Birth: \_\_\_\_\_ Age: (circle) 13 14 15 16 17

School:  Concord  Mt. Diablo  Ygnacio Valley Grade:  9th  10th  11th  12th

Are you a U.S. Citizen? Yes\_\_\_ No\_\_\_ If no, what is your residency status?(e.g. Permanent Resident, in the Process)\_\_\_\_\_

Do you have a physical or learning disability? Yes\_\_\_ No\_\_\_ If yes, please specify and attach IEP/504. \_\_\_\_\_

Primary language(s) spoken in your home:  English  Spanish  Other (please list other) \_\_\_\_\_

Are you currently enrolled in another college outreach program? (e.g. Puente, AVID, EAOP, UB, UB Math/Science, Talent Search,

GEARUP, etc.) *If yes, please list all programs you are enrolled in?* \_\_\_\_\_

Are you employed?  Yes  No *If yes,*

**Employer:** \_\_\_\_\_ **Work Days & Hours:** \_\_\_\_\_

List extra-curricular activities (sports, church, hobbies, club, student government, community, etc.) you participate in: \_\_\_\_\_

If you listed a sport, when is practice (days and time)? \_\_\_\_\_

**Upward Bound (UB) Student Commitment**

Are you willing to participate in tutoring on weekday afternoons for each academic subject that you receive a grade of 'C' or below?

Yes  No

Are you willing to participate in DVC Saturday Enrichment, one Saturday each month during the school year?  Yes  No

Are you willing to participate in a six-week summer program on a college campus?  Yes  No

**We must also review your academic progress. Please give your English teacher, Math teacher and Science or Foreign Language teacher the attached evaluation forms (gold sheets).**

## STUDENT PERSONAL STATEMENT

All of us have dreams – of what we want to be, as we grow older, what we hope to achieve for ourselves and how we can make a positive contribution to society. In the questions below, tell us what you hope to accomplish in your life with the help of DVC Upward Bound, and how that relates to you moving forward to college. Please write clearly and neatly. You may attach additional sheets if necessary.

1. Why are you interested in becoming a participant of the DVC Upward Bound Program?

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2. What are your **educational** and **career** goals?

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3. Do you think you are academically successful in school?  Yes  No

If yes, how can DVC Upward Bound contribute to your success? If no, how can DVC Upward Bound help you perform better?

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Which class(es) do you need academic support to successfully complete (with a “C” or better)?

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4. Tell us about your current and past disciplinary experiences (within the past 2 years) which may have affected your performance in school and tell us how you handled it.

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5. Tell us about any circumstances/concerns, which may be affecting your academic performance and behavior in school?

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**Student Certification**

If selected as a participant in the DVC Upward Bound Program, I agree to make a commitment to participate in the entire program and conduct myself in a manner that will bring credit to myself, my family, my school, my community and the DVC Upward Bound Program.

I understand that my attendance is extremely important for my success with UB. Therefore, should I be admitted, I agree to ensure my attendance and active participation in tutoring (3 days a week), Saturday Academy (monthly), summer courses (6 weeks), meetings (monthly) and activities sponsored by Upward Bound. I understand the DVC UB Student Participation Guidelines and agree that I must meet minimum participation requirements or jeopardize my program enrollment.

I will comply with all rules and regulations of the DVC Upward Bound Program and I am aware that failure to comply with the rules and regulations as well as the failure to fulfill the commitment to the program could result in dismissal from the program.

I understand this information is protected by the privacy act and that no one may view this information unless they work with or for CCCCD/DVC/Upward Bound or are specifically authorized. This information if necessary to determine my eligibility to participate and I certify that the above information is accurate to the best of my knowledge.

**Information Release:** I would like to be part of the UB program. I authorize the DVC Upward Bound (UB) to obtain documents \ information relative to and consistent with my education. Examples of these documents may include and are not limited to a copy of my school transcript, test scores, ACT/SAT or GED scores, and school lunch program eligibility. I authorize UB to obtain information related to my application for receipt of student financial assistance (federal, state, or other), a copy of my award notification from the financial aid office, college admission acceptances and registration information. I give my college of attendance and National Student Clearinghouse permission to disclose my college enrollment status and degree attainment data to the CCCCD/DVC UB/ETS staff for the purpose of tracking my college enrollment and completion. I hereby give my permission for my name, photograph, work, and/or statements to be used by Diablo Valley College/UB for promotional, publicity (web pages, social media, brochures, newspaper, etc...), or instructional purposes.

Student Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**UPWARD BOUND PROGRAM APPLICATION – NEEDS ASSESSMENT**

Tell us what services you need from Upward Bound to ensure that you graduate from high school ready to enroll in and be successful in college. Check all services that you think will assist you in being successful.

I need	Services	I need	Services
	Study Skills, Time Management, Organization		Instructional Time with Teachers
	High School Graduation Requirements		College Preparation Requirements
	College Admissions Info./Application Assistance		College Campus Visits
	Financial Aid Information/Application Assistance		Budgeting/Money Management
	Career Advising/Exploration		Academic Advising
	Academic Tutoring in Math		Academic Tutoring in English
	Academic Tutoring in Science		Academic Tutoring in Language other than English

**FOR STAFF USE ONLY**

Eligibility Status \_\_\_\_\_ Inc. Documentation Type \_\_\_\_\_ Date of Diagnostic Review \_\_\_\_\_  
 Date Standardized Test Received \_\_\_\_\_ Date Student Interview \_\_\_\_\_ Date Parent Interview \_\_\_\_\_  
 Date of Math Assessment \_\_\_\_\_ Date of English Assessment \_\_\_\_\_ Date of Science/LOTE Assessment \_\_\_\_\_  
 Date for 4-Yr Ed Plan \_\_\_\_\_ Date of Transcript Review \_\_\_\_\_ Date Academic Review Scheduled \_\_\_\_\_  
 School Site Personnel Review Signature \_\_\_\_\_ Date \_\_\_\_\_

UB Coordinator \_\_\_\_\_ Project Director \_\_\_\_\_ Acceptance Date \_\_\_\_\_

Wait List Date \_\_\_\_\_ Rank \_\_\_\_\_ Date Letter Sent \_\_\_\_\_





What services do you feel your child needs most from Upward Bound? (check all that apply)

- Weekly tutoring in core academic subjects (like, math, English, science, language)
- Preparation for the high school graduation (CAHSEE) and college admissions tests (SAT or ACT)
- Assistance and guidance in taking the right classes to get into college
- Someone to monitor their grades and ensure they are on track to graduate
- Information and assistance in completing college applications and financial aid forms
- Career exploration and guidance
- Bi-monthly instructional seminars from teachers on Saturdays (Saturday Academy)
- Educational, cultural and college field trips
- Summer academic enrichment program (with teachers, tutors and fieldtrips)
- Assistance with improving their study skills
- Assistance with improving their time management and organizational skills

**Parent / Guardian Obligation**

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I understand that the purpose of the DVC Upward Bound Program is to prepare participants to successfully complete a program of post-secondary education. As part of my personal effort in this preparation, should my child be admitted to the program, I commit to Upward Bound and intend to participate in all academic year and summer program activities organized and sponsored by the program for parents.

I further understand that my and my child's attendance and participation is extremely important. Therefore, should my child be admitted, I agree to ensure his/her attendance and active participation in tutoring (3 days a week), Saturday College (bi-monthly), summer courses (6 weeks), meetings (monthly) and activities sponsored by Upward Bound. I understand the DVC UB Student Participation Guidelines and agree that my child must meet minimum participation requirements or jeopardize program enrollment (refer to attachment).

I will comply with all rules and regulations of the DVC Upward Bound Program and I am aware that failure to comply with the rules and regulations as well as the failure to fulfill the commitment to the program could result in my child's dismissal from the program.

I have read and understand my commitment to meeting the expectations of the DVC Upward Bound Program.

**Information Release:** I would like my child to be a part of the DVC Upward Bound Program and hereby give permission for my child to participate in all activities. I/we authorize the DVC Upward Bound (UB) to obtain documents \ information relative to and consistent with my child's education. Example of these documents may include but not limited to: a copy of my child's school transcript, test scores, ACT/SAT or GED scores, and school lunch program eligibility. I/we authorize UB to obtain information related to my child's application for receipt of student financial assistance (federal, state, or other), admissions acceptances and registration information. In addition, I hereby give my permission for my child's name, photograph, work, and/or statements to be used by Diablo Valley College/ Upward Bound Program, for promotional, publicity (web pages, social media, brochures, newspaper, etc...), or instructional purposes.

I attest to the fact that all information in this application packet is true and accurate to the best of my knowledge.

Parent 1 Name \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent 2 Name \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**UPWARD BOUND PROGRAM APPLICATION – ENGLISH TEACHER EVALUATION**

Student: print your name, school and grade below and give this form to your English Teacher. Inform your teacher of the deadline.

**Student Name** \_\_\_\_\_ **School** \_\_\_\_\_ **Grade** \_\_\_\_\_

**To the English teacher completing this form, please complete in black or blue ink.**

DVC Upward Bound is a federally funded educational program designed to motivate and prepare low income, first-generation college bound students for post-secondary education. We are a comprehensive, year-round program that offers weekly tutoring in core academic subjects, test preparation, academic advising, information and assistance in completing college and financial aid applications, exploration of educational and career opportunities, bi-monthly academies on Saturdays, educational, cultural and college field trips and a six-week summer program.

The above named student is applying for acceptance to the DVC Upward Bound Program. Your careful evaluation will assist us in determining whether the student has the potential and motivation to succeed in college and will benefit from our services.

<b>What level of English are you currently teaching the student?</b>			
How long have you known the student?	<input type="checkbox"/> 1 semester	<input type="checkbox"/> 1 year	<input type="checkbox"/> More than 1 year
The student's attendance record is:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average
The student's overall classroom behavior is:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average

**Student's academic needs as checked below will be used to prioritize selection. Check all that apply (must check at least one).**

<input type="checkbox"/> Low educational aspirations	<input type="checkbox"/> Limited proficiency in English
<input type="checkbox"/> Interest in careers in math and science	<input type="checkbox"/> Learning Disability (Diagnosed)
<input type="checkbox"/> Lack of career goals and/or need for information on careers	<input type="checkbox"/> Need academic support to pursue college education
<input type="checkbox"/> Lack of confidence, self-esteem, and/or social skills	<input type="checkbox"/> Need help with note taking, organizational and study skills
<input type="checkbox"/> Lacks motivation towards academic success	<input type="checkbox"/> Other

**Class Performance Evaluation**

Place an 'X' in the column that best describes the student's current performance level in each of the following areas.							
Statement	Above Average	Average	Below Average	Statement	Above Average	Average	Below Average
Reading Comprehension				Writing Skills/Grammar			
Written Expression				Overall Test Scores			
Homework/Class Preparation				Ability to follow through on commitments			
Student's apparent aptitude in subject area				Meets deadlines & submits assignments on time			

**Are you aware of any circumstance (personal, financial or academic) that may affect the student's performance in school?**

Yes  No If yes, please explain. \_\_\_\_\_

**Does the student have disciplinary or behavioral issues that prevent academic success?**  Yes  No

If yes, please explain. \_\_\_\_\_

**Please comment on the student's need for support services to address academic weaknesses and how they would benefit from participation in the DVC Upward Bound Program.**

\_\_\_\_\_

I highly recommend  I recommend  I recommend with reservation  I do not recommend this student

**Name**(print): \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return to student in a sealed envelope or mail directly to:

Diablo Valley College Upward Bound Program, 321 Golf Club Road, Pleasant Hill, CA 94523 or Fax to: (925) 691-9316





**UPWARD BOUND PROGRAM APPLICATION – MATH TEACHER EVALUATION**

Student: print your name, school and grade below and give this form to your Math Teacher. Inform your teacher of the deadline.

**Student Name** \_\_\_\_\_ **School** \_\_\_\_\_ **Grade** \_\_\_\_\_

**To the math teacher completing this form, please complete in black or blue ink.**

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The above named student is applying for acceptance to the DVC Upward Bound Program. Your careful evaluation will assist us in determining whether the student has the potential and motivation to succeed in college and will benefit from our services.

What level of Math are you currently teaching the student?			
How long have you known the student?	<input type="checkbox"/> 1 semester	<input type="checkbox"/> 1 year	<input type="checkbox"/> More than 1 year
The student's attendance record is:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average
The student's overall classroom behavior is:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average

**Student's academic needs as checked below will be used to prioritize selection. Check all that apply (must check at least one).**

<input type="checkbox"/> Low educational aspirations	<input type="checkbox"/> Limited proficiency in English
<input type="checkbox"/> Interest in careers in math and science	<input type="checkbox"/> Learning Disability (Diagnosed)
<input type="checkbox"/> Lack of career goals and/or need for information on careers	<input type="checkbox"/> Need academic support to pursue college education
<input type="checkbox"/> Lack of confidence, self-esteem, and/or social skills	<input type="checkbox"/> Need help with note taking, organizational and study skills
<input type="checkbox"/> Lacks motivation towards academic success	<input type="checkbox"/> Other

**Class Performance Evaluation**

Place an 'X' in the column that best describes the student's current performance level in each of the following areas.							
Statement	Above Average	Average	Below Average	Statement	Above Average	Average	Below Average
Math Concepts				Math Computations			
Quantitative Reasoning				Overall Test Scores			
Homework/Class Preparation				Ability to follow through on commitments			
Student's apparent aptitude in subject area				Meets deadlines & submits assignments on time			

**Are you aware of any circumstance (personal, financial or academic) that may affect the student's performance in school?**

Yes  No If yes, please explain. \_\_\_\_\_

**Does the student have disciplinary or behavioral issues that prevent academic success?**  Yes  No

If yes, please explain. \_\_\_\_\_

**Please comment on the student's need for support services to address academic weaknesses and how they would benefit from participation in the DVC Upward Bound Program.**

\_\_\_\_\_

\_\_\_\_\_

I highly recommend  I recommend  I recommend with reservation  I do not recommend this student

**Name**(print): \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**UPWARD BOUND PROGRAM APPLICATION – SCIENCE OR FOREIGN LANGUAGE TEACHER EVALUATION**

Student: print your name, school and grade below and give this form to your teacher. Inform your teacher of the deadline.

**Student Name** \_\_\_\_\_ **School** \_\_\_\_\_ **Grade** \_\_\_\_\_

**To the Science or Foreign Language teacher completing this form, please complete in black or blue ink.**

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The above named student is applying for acceptance to the DVC Upward Bound Program. Your careful evaluation will assist us in determining whether the student has the potential and motivation to succeed in college and will benefit from our services.

What course and level are you currently teaching the student?			
How long have you known the student?	<input type="checkbox"/> 1 semester	<input type="checkbox"/> 1 year	<input type="checkbox"/> More than 1 year
The student's attendance record is:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average
The student's overall classroom behavior is:	<input type="checkbox"/> Excellent	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average

**Student's academic needs as checked below will be used to prioritize selection. Check all that apply (must check at least one).**

<input type="checkbox"/> Low educational aspirations	<input type="checkbox"/> Limited proficiency in English
<input type="checkbox"/> Interest in careers in math and science	<input type="checkbox"/> Learning Disability (Diagnosed)
<input type="checkbox"/> Lack of career goals and/or need for information on careers	<input type="checkbox"/> Need academic support to pursue college education
<input type="checkbox"/> Lack of confidence, self-esteem, and/or social skills	<input type="checkbox"/> Need help with note taking, organizational and study skills
<input type="checkbox"/> Lacks motivation towards academic success	<input type="checkbox"/> Other

**Class Performance Evaluation**

Place an 'X' in the column that best describes the student's current performance level in each of the following areas.							
Statement	Above Average	Average	Below Average	Statement	Above Average	Average	Below Average
Subject Comprehension				Subject Concepts			
Subject Knowledge				Overall Test Scores			
Homework/Class Preparation				Ability to follow through on commitments			
Student's apparent aptitude in subject area				Meets deadlines & submits assignments on time			

**Are you aware of any circumstance (personal, financial or academic) that may affect the student's performance in school?**

Yes  No If yes, please explain. \_\_\_\_\_

**Does the student have disciplinary or behavioral issues that prevent academic success?**  Yes  No

If yes, please explain. \_\_\_\_\_

**Please comment on the student's need for support services to address academic weaknesses and how they would benefit from participation in the DVC Upward Bound Program.**

\_\_\_\_\_

I highly recommend  I recommend  I recommend with reservation  I do not recommend this student

**Name**(print): \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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