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## **2024-2025 NEW STUDENT APPLICATION FOR ADMISSION**

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# **Upward Bound at Vermont State University- Johnson**

**A FREE college access program to support 9-12th graders research, prepare for, enroll, and be successful in college!**  
Program eligibility is based on family income and first - generation status (student will be the first in their immediate family to obtain a 4 - year college degree, \*does not include siblings\*)

### **Some of the perks of being a participant with UB:**

- Meet and make connections with students from seven other Vermont high schools
- We spend \$5,000 per student/per year on resources to help you get to college (travel opportunities, tutoring services, educational supplies, conferences, events, transportation)
- Summer Program Experience (including residential experience, living on a college campus ranging from 2 - 6 weeks, depending on your grade level)
- College Research and Application Fee Waivers
- Financial Aid and Scholarship Support
- Standardized Test Preparation & Fee Waivers (ACT, SAT, AP Exams)
- Parent/Guardian Workshops
- Academic Tutoring & Support
- Program Stipends (\$\$ each month, sent directly to you - for active participation in the program)
- College Tours and Fairs
- Travel Opportunities (around Vermont, and New England)
- Dual Enrollment Class Opportunities & Potential to Earn College Credit During the Summer Program
- Potential to Earn High School Credit for PE and Service Learning
- STEAM Programming
- Career Exploration
- Internship Opportunities
- Become a part of a strong, supportive, and engaging community!

**Currently accepting applications for the 2024- 2025 Academic Year and Summer Program.**

**Please contact Program Director, Jessica Courchaine with any questions, or to learn more about UB! [Jessica.Courchaine@vermontstate.edu](mailto:Jessica.Courchaine@vermontstate.edu) (802) 635 - 1267**

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## STUDENT PERSONAL DATA

**Note: Please include a copy of your birth certificate or your signed social security card with your application. All information will remain confidential.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Social Security Number: \_\_\_-\_\_\_-\_\_\_    \_\_\_-\_\_\_-\_\_\_    \_\_\_-\_\_\_-\_\_\_    Date of Birth: \_\_\_/\_\_\_/\_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: (\_\_\_\_-\_\_\_\_-\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

Student Cell Phone: (\_\_\_\_-\_\_\_\_-\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

Student Email: \_\_\_\_\_

Student Lives With (Circle One): Both Parents    Guardian    Mother Only    Father Only    Other: \_\_\_\_\_

Student is a Citizen of (Circle One): United States    Other: \_\_\_\_\_

Please Select All that Apply to the Student\*:    White    Non-Hispanic    Black/African American

Asian    American Indian/Native American    Hispanic or Latino    Native Hawaiian/Other Pacific Islander

Other(Please Specify): \_\_\_\_\_

*\*This information is required by the federal government for statistical purposes only. Johnson State College does not discriminate based on race, color, creed, ancestry, ethnicity, national origin, place of birth, sex, sexual orientation, gender identity, disability, age, veteran status, marital status or any other status protected by law*

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## STUDENT EDUCATIONAL DATA

**Note: Please make sure your school counselor includes a copy of your student transcript and proficiencies with this application.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Counselors Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of School: \_\_\_\_\_ Program of Study (Circle One): College Prep Mixed

General Vocational

Are you interested in or able to enroll in a \*college-preparatory curriculum (Circle One)? Yes No

*\*A college-preparatory curriculum generally consists of at least four years of English; at least three years of mathematics, including Algebra II; three years of science, including at least one lab science; and two years of the same foreign language.*

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## STUDENT ESSAY

**Note: Please use additional paper or type your responses to the questions below.**

1. Please describe any personal or academic challenges you have experienced in your educational career so far and how you have handled these situations.
2. What academic subjects do you enjoy and why? What subjects have you struggled with, and what steps have you taken to improve your performance or grade in those subjects?
3. please list any thoughts you currently have about possible colleges you are interested in applying to, possible college major, or career pathway you would like to explore.
4. If accepted into Upward Bound, what do you hope to gain from our program and what do you think as a student you will be able to contribute back to our community. Please describe your level of motivation to attend and graduate from college.
5. Please note anything else you think we should know about you as a student that could help us in evaluating your application.

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## FAMILY PERSONAL DATA

**Note: All information will remain confidential.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

### PARENT/GUARDIAN 1

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Day Phone: (\_\_\_\_-\_\_\_\_-\_\_\_\_) \_\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

Night Phone: (\_\_\_\_-\_\_\_\_-\_\_\_\_) \_\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

Cell Phone: (\_\_\_\_-\_\_\_\_-\_\_\_\_) \_\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

Preferred Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer, if Applicable: \_\_\_\_\_

Highest Level of Education Completed(Circle One): HS Grade 9    HS Grade 10    HS Grade 11

HS Grade 12    College 1    College 2    College 3    College 4    Additional Studies

Did Parent/Guardian 1 graduate with a bachelor's degree or higher? (Circle One): Yes    No

If yes, note degree and college attended: \_\_\_\_\_

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## FAMILY PERSONAL DATA

### PARENT/GUARDIAN 2

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Day Phone: (\_\_\_\_-\_\_\_\_-\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_

Night Phone: (\_\_\_\_-\_\_\_\_-\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_

Cell Phone: (\_\_\_\_-\_\_\_\_-\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_

Preferred Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer, if Applicable: \_\_\_\_\_

Highest Level of Education Completed(Circle One): HS Grade 9 HS Grade 10 HS Grade 11

HS Grade 12 College 1 College 2 College 3 College 4 Additional Studies

Did Parent/Guardian 2 graduate with a bachelor's degree or higher? (Circle One): Yes No

If yes, note degree and college attended: \_\_\_\_\_

## OTHERS IN HOUSEHOLD

Names: \_\_\_\_\_

#Brothers: \_\_\_\_\_ #Sisters: \_\_\_\_\_ #Others(Specify): \_\_\_\_\_ #Total \_\_\_\_\_

OPTIONAL note any special family circumstances you would like us to know about (e.g., adoption, guardianship, divorce): \_\_\_\_\_

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## FAMILY FINANCIAL DATA

STUDENT Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

*Upward Bound is an educational program sponsored by the U.S. Department of Education for high school students from modest-income families and/or first-generation, college-bound students (students who are the first generation in their family attending college). Please provide all documentation requested in order to verify that one or both of these requirements are met and that the student is therefore eligible for this program.*

Is the student a ward of the state (Circle One)? Yes No

**If YES, you may stop here.** The student automatically meets the income guidelines for Upward Bound, and you do not need to provide additional information on this form; however, you will need to **enclose proof of state custody with this application.**

As reported on your most recent Federal Income Tax Return (year 20\_\_), what was your taxable income?

(from line 43 on Form 1040, or line 27 of Form 1040A) \_\_\_\_\_

How many exemptions did you claim (line 6d)? \_\_\_\_\_

What is your filing status (Circle One)? Married, Filing Jointly Married, Filing Individually

Single/Head of Household Other: \_\_\_\_\_

**Enclose a copy of your most recent federal tax return OR proof of public assistance/ANFC with this application.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## TRANSCRIPT RELEASE

**Please submit this form with your completed application to your school counseling office or to Upward Bound.**

*I hereby give my permission to have the Guidance Office send a copy of my academic transcript, report cards and test scores to the Upward Bound Program at Vermont State University- Johnson, Vermont. The files at Upward Bound are only open to the students and his/her parents. This information will only be used by the Upward Bound office for internal purposes and to complete a federally mandated annual program report for the US Department of Education. Information will not be released to any other third parties without the student and/or parent's permission.*

Student Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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# 2024-2025 NEW STUDENT APPLICATION FOR ADMISSION

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## SCHOOL COUNSELOR RECOMMENDATION

TO BE COMPLETED BY THE STUDENTS SCHOOL COUNSELOR

**A copy of the student's transcript and most recent report card should accompany this form.**

STUDENT Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Current Grade(Circle One): 9 10 11 12

Name of School Counselor: \_\_\_\_\_

In your judgment, why does this student have the potential for success in a formal, post-secondary educational institution? please give specific examples that support this judgment.

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Courses/topics in which the student may need improvement or additional preparation (Circle All that Apply):

Writing Reading Mathematics Science Foreign Language Learning Skills Self Image

Educational Planning Career Planning Other: \_\_\_\_\_

Is this student capable of succeeding in a college preparation curriculum (Circle One)? Yes No

Please Describe any academic weaknesses: \_\_\_\_\_

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## SCHOOL COUNSELOR RECOMMENDATION

### CONTINUED

Current Academic Program (Circle One): College Prep    Mixed    General    Vocational

Cumulative Grade point Average: \_\_\_\_\_ Expected date of Graduation: \_\_\_\_\_ Class Rank (if known): \_\_\_\_\_

**Please include a copy of the most Recent VT Standardized Test Results:**

#### **New England Common Assessment Program (NECAP)**

Met Math proficient standard:

Date: \_\_\_\_\_ Met standard (Circle One): Yes    No

Met Reading/Language Arts proficient standard:

Date: \_\_\_\_\_ Met standard (Circle One): Yes    No

**PSAT Scores** (if taken): Math: \_\_\_\_\_ Reading: \_\_\_\_\_ Writing: \_\_\_\_\_

Has the student ever been suspended or expelled (Circle One)? Yes    No

IF YES, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

School Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please call the Upward Bound Office at 635-1267 if you feel it would be useful to talk with the Upward Bound staff about this applicant.*

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## TEACHER RECOMMENDATION TO BE COMPLETED BY THE STUDENT'S MATH, SCIENCE OR ENGLISH TEACHER

STUDENT Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

School Name: \_\_\_\_\_

To be eligible for Upward Bound, applicants must demonstrate **academic need and potential for success in postsecondary education**. Your honest response to the following items is greatly appreciated. Thank you for your help! Feel free to include a typed response if you would like to make additional comments.

Class Participation (Circle One): Cooperative    Passive    Disruptive

Homework Completion (Circle One): Complete and always on time    Occasionally late or incomplete

Frequently late or incomplete    Does not hand in assignments on a regular basis

Please Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Degree to which self-image may inhibit academic success: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe any personal barriers to academic success (i.e. attitude, level of enthusiasm, inquisitiveness, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## TEACHER RECOMMENDATION CONTINUED

Is this student capable of succeeding in a college preparation curriculum (Circle One)? Yes No

Describe any academic weaknesses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student's motivation to enroll in a postsecondary education (Circle One): High Mid Low

Type of postsecondary education (Circle One): 4 Year 2 Year Vocational/Tech Unknown

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Teachers Name in Print: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_

Title/Subject: \_\_\_\_\_ Date: \_\_\_\_\_

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## RELEASE OF INFORMATION

**By signing this form, I hereby authorize the release of:**

1. All high school records
2. College financial aid records
3. VSAC records
4. FAFSA records
5. College transcripts and notification of change of address to the Vermont State University Johnson Upward Bound program for record keeping and college tracking purposes.

Parent Name in Print: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Student Name in Print: \_\_\_\_\_

Student Signature: \_\_\_\_\_

**FOR MORE INFORMATION, OR ANY QUESTIONS  
ABOUT THE UPWARD BOUND PROGRAM  
PLEASE CONTACT THE UB OFFICE:**

PHONE: 802-635-1267

FAX: 802-635-1490

EMAIL: [JESSICA.COURCHaine@VTTRIO.ORG](mailto:JESSICA.COURCHaine@VTTRIO.ORG)