



PLEASE RETURN COMPLETED FORM TO THE SCHOOL'S COUNSELING CENTER WITH: _____

UCSD Educational Talent Search Program Application

This is a **FREE** federally funded program. All information you provide is used to assist you and is kept absolutely confidential. Incomplete application cannot be processed. For more information, visit our website at <http://trio.ucsd.edu>

Name: _____
Last Name First Name Middle Name

Today's Date: ____/____/____

SCHOOL: Circle Attending School Below
ECVHS MEHS MMHS MVHS

GRADE: Circle One Below
8 9 10 11 12

School ID#: _____

Student Information

Home Address: _____ Phone: () _____
Number & Street Name Apt.No City State Zip

Mailing Address: _____ Cell Phone: () _____
(If Different from Home Address) Number & Street Name Apt.No City State Zip

Social Security #: _____ - _____ - _____ Date of Birth: ____/____/____ Gender: Male Female

HS Graduation Year: _____ E-mail: _____

Ethnicity Background

- 1) Do you identify yourself as Hispanic/Latino? Yes No – If **NO**, Complete #2
- 2) American Indian Alaskan Native African American Asian American Caucasian/White
 Pacific Islander Other (specify) : _____

Residency/Citizenship

Are you a U.S. citizen?: Yes No (If No, Staple a Copy of Homeland Security Alien/Permanent Resident "Green" Card, both sides)

Alien/Permanent Resident Card Number (If not U.S Citizen): _____

Other Information

What language(s) is/are usually spoken at home? _____

Are you taking English as a Second Language ESL/ELD classes? Yes No Do you have any disabilities? Yes No

Are you a foster youth or ward of the court? Yes No Are you currently homeless? Yes No

Do you participate in another program like AVID or Upward Bound? Yes No. If Yes, which programs? _____

Postsecondary Plans

What are your plans after high school graduation? (Check one below)

- 4 Year University Community College Vocational/Trade School Military/Only Work Undecided on College Careers

What do you want study after high school (college majors), or be what when you grow up (career)? _____

Mandatory Question

In at least three full sentences, please tell us how UCSD TRiO Educational Talent Search can help you with your current high school and long term college plans.

Please Check off all the high school/college needs that you have:

- I want to do more activities that will help me enter college.
- I want to attend career, SAT, and internship workshops.
- I want to learn better time management and study skills.
- I want tutorial resources/connections to do better in my classes.
- My parents need more college and financial aid information.
- I need help to find what types of colleges are right for me.
- I need to know what classes are best for college admissions.
- I need advice on financial aid availability (e.g. scholarships, Grants, FAFSA) and resources for college.
- I want financial literacy: how to use credit cards, how to open a checking account, how to manage college expenses, etc.
- I need help in completing college admission (UC, CSU Private and CC) and financial aid (FAFSA) application forms.
- I want to attend College and Cultural bus fieldtrips.
- I want TRiO to help me with: _____

Parent/Guardian Information

Name: _____ () _____ Relationship: Mother Father Other _____
 Last Name First Name Work or Another Phone #

Name: _____ () _____ Relationship: Mother Father Other _____
 Last Name First Name Work or Another Phone #

Parent E-Mail: _____ Emergency Phone # : () _____ Relationship: _____

Parents' Marital Status: Single Married Divorced Widowed Separated Other : _____

Did a parent/guardian graduated from a university with a Bachelors degree? Yes No. If Yes, in what? _____

INCOME INFORMATION: Did you file a Federal Income Tax Form (1040/1040A) last or this year? Yes (If **YES**, go to Q1)
 No (If **NO**, go to Q2)

Please Answer either Q1 or Q2 (But Not Both), and then Answer Q3

Q1. Your Taxable Income* (See the 2nd page of your *Federal Tax Form 1040 in Line 43* or *Tax Form 1040A in Line 27*):
 1A. Please write the amount of your **Taxable Income*** (from the 2nd page of your federal income tax form) \$ _____ .00
 * If you cannot find Your **Taxable Income** amount, please call (858) 967-2205 or (858) 524-9997 for assistance.

1B. Total number of exemptions claimed in 1040/1040A Income Taxes (see in First Page in Line 6d): _____

IF POSSIBLE PLEASE ATTACH A COPY OF YOUR 1040/1040A INCOME TAX FORM AND CONTINUE TO Q3.

Q2. If you did not file any Income Taxes, please indicate how many people lived in your home (2A), and in the boxes below declare any income sources you earned (2B), and Total Annual Income (3C), to the best of your ability.

2A. How many people (including yourself) reside in your household? _____

2B. Please Write **ALL** Yearly Income Sources Below:

Sources	Yearly Amount	Sources	Yearly Amount
Welfare	\$ _____	Unemployment/Compensation	\$ _____
Social Security/Retirement	\$ _____	Other (Specify Source): _____	\$ _____
Disability (SSI/SSA)	\$ _____		

3C. TOTAL ALL YEARLY INCOME SOURCES FROM ABOVE (2B): \$ _____

IF POSSIBLE PLEASE ATTACH DOCUMENTATION VERIFYING FROM INCOME LISTED ABOVE AND CONTINUE TO Q3.

Q3. Has your financial status including source(s) and amount, changed significantly during the current year as compared to last year?
 YES NO. If **YES**, briefly explain: or attach a separate sheet _____

We certify that the information reported on this application is true and accurate to the best of my knowledge. We give the school our consent to provide my daughter's/son's/ward's transcripts (while in high school and after graduation), test scores, high school graduation verification, and/or any documentations needed to ensure their enrollment and continued eligibility in the UCSD TRiO Educational Talent Search Program. We give consent for my student to be occasionally called out from class for academic advising, college application and enrollment, and FAFSA submission.

Parent/Guardian Print Full Name _____ Parent/Guardian Signature _____ Date _____ Student Print Full Name _____ Student Signature _____ Date _____



Our UCSD Address:
 UCSD Talent Search Program
 9500 Gilman Dr. MC-0341
 La Jolla, CA 92093-0341

Our UCSD Contact Information:
 Offices: (858) 534-4252; (858) 822-3471
 Fax: (858) 822-4132
 E-Mail: ets@ucsd.edu



OFFICE USE ONLY

YES NO

Federal residency (student is a US Citizen or Copy of Green Card is attached to ETS Appl.)

Verified low-income, was based on: Parent statement with signature Tax Form

First Generation (parents/guardians do not hold bachelors in/outside US)

Student selected more than 3 high school/college needs. Number of needs selected: _____

Plans to attend college after graduation

Potential for college/university success

Counselor Assessment: _____

Accepted (Date admitted: _____ / _____ / _____ First Date Service: _____ / _____ / _____)

Reviewed by: _____ Date: _____

Admitted by: _____ Date: _____

•Year Student Admitted: 20 _____ is (check one):

First Generation (FG) only (1/3 criteria)

Low Income (LI) only (1/3 criteria)

Neither FG or LI (1/3 criteria)

Both FG and LI (2/3 criteria)

•Number of Family Members in Household: _____

•TRiO Taxable Income \$ _____ .00

•Family Taxable/Other Income \$ _____ .00