



1570 East Colorado Blvd.,  
Pasadena, CA 91106  
(626) 585-3114  
www.pasadena.edu/UBMS



## STUDENT APPLICATION

(TO BE COMPLETED BY PARENT/GUARDIAN)

For more information or help with this application contact:

**Chelsy Atilano**  
[catilano@pasadena.edu](mailto:catilano@pasadena.edu)  
626-720-9454

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626-720-1738

Is the student in any of these programs?  AVID  Upward Bound  Upward Bound Math-Science  Cal SOAP  Talent Search  Other \_\_\_\_\_

*Upward Bound Math-Science is a **NO COST** program designed to provide supplemental college readiness services to students who are committed to continuing their studies in a STEM major after high school graduation.*

### STUDENT INFORMATION

Name of School: \_\_\_\_\_ Counselor's Name: \_\_\_\_\_

Student's First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Student's E-mail Address: \_\_\_\_\_ Current Weighted GPA: \_\_\_\_\_

Street Address/P.O. Box: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Student's Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade Level: **9 10 11 12**

Student's Citizenship Status:  U.S. Citizen  Permanent Resident

Student's Race/Ethnicity:  Hispanic/Latino  Black or African American  Native Hawaiian/Other Pacific Islander  
 American Indian/Alaskan Native  White  Asian  Other, specify \_\_\_\_\_

**ALL INFORMATION PROVIDED IS CONFIDENTIAL AND WILL NOT BE SHARED WITHOUT PARENTAL PERMISSION.**

### PARENT/GUARDIAN INFORMATION

Father/Guardian Name: \_\_\_\_\_ Mother/Guardian Name: \_\_\_\_\_

Cell Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

Does Father/Guardian Have a Degree?  Yes  No

Check Degree:

Associate Degree  Bachelor's Degree  Master's Degree

Does Mother/Guardian Have a Degree?  Yes  No

Check Degree:

Associate Degree  Bachelor's Degree  Master's Degree

### FAMILY INCOME VERIFICATION

How many people are living in your household? \_\_\_\_\_ Does student participate in free/reduced lunch at school?  Yes  No

Taxable Income: \$ \_\_\_\_\_ Parent/Guardian Initial: \_\_\_\_\_

(Federal Tax Form-1040/A p.2)

(Verification)

### PARENT/GUARDIAN ACKNOWLEDGEMENT AND CONSENT:

*Please initial:*

\_\_\_\_\_ I hereby authorize the Upward Bound Math-Science Program at Pasadena City College to obtain transcripts and other academic cumulative records for the above-named student. Information may contain high school graduation requirements: credits completed and credit deficiencies; grade point average (GPA); college admission test scores such as ACT and SAT; and other information necessary to provide services. I understand that I will be asked to make my Social Security number available upon request.

**#TRIO Works! PCC Upward Bound Math-Science is 100% funded by a U.S. Department of Education grant.**



# STUDENT APPLICATION

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(TO BE COMPLETED BY STUDENT)

STUDENT NAME: \_\_\_\_\_

## Part II: Essay Questions

*What major do you want to take in college?* \_\_\_\_\_

*What career are you interested in?* \_\_\_\_\_

**INSTRUCTIONS:** Please answer the following questions, use a separate sheet if needed (one paragraph minimum):

1. Please explain why you would like to attend the Upward Bound Math-Science program at Pasadena City College. In which areas (academic or personal) can our program help you improve?

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2. Describe a math or science-related problem in the world, why is it an issue, and why is it important to you?

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3. Why is it important for you to attend college? Is this goal for yourself or for your family?

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4. The Upward Bound Math-Science program requires a large commitment on your part. It requires tutoring, Saturday Academies and a summer program. Explain why you think you have the commitment to follow through on all the required activities.

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## Part III: Extra Curricular Activities

Please list meaningful activities you would like to be a part of in each category:

Career Exploration: \_\_\_\_\_

Academic Preparation: \_\_\_\_\_

Personal Development: \_\_\_\_\_

Please list the school, community, sports, and activities you are involved in: \_\_\_\_\_



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## Part IV: Emergency Contact

Please give the name, address, and phone number of two adults (relatives or friends) who do not live with you, but can be contacted in the event of an emergency. A TELEPHONE NUMBER IS MANDATORY.

Name: _____	Relationship _____
Address: _____	City, Zip _____
Home Phone: _____	Cell Phone: _____
Name: _____	Relationship _____
Address: _____	City, Zip _____
Home Phone: _____	Cell Phone: _____

## Part V: Parent/Student Contract

Please initial:

\_\_\_\_\_ If selected as a participant of the **Upward Bound Math-Science program at Pasadena City College**, I agree to participate in the entire program, including tutorial sessions, the Saturday Academies, and 5-week summer program. Arrangements may be made ahead of time with the Director or Educational Advisor.

\_\_\_\_\_ If accepted, I will conduct myself in a manner that will bring credit to my family, my school, my community, and myself. I also agree to abide by the rules and regulations established by the Upward Bound Math-Science Program during all program activities.

\_\_\_\_\_ I understand that the Director has the right to dismiss any student if the student does not adhere to the rules and regulations of the program or is not showing a positive attitude in participating in the activities of the program.

\_\_\_\_\_ I Understand that priority will be given to students that meet both the federal low-income guidelines and that neither parent graduated from college.

\_\_\_\_\_ If selected as a participant of Upward Bound Math-Science I will work towards attending a 2-year or 4-year college following high school.

By checking this box, I \_\_\_\_\_ certify on \_\_\_\_\_:  
Parent/Guardian First and Last Name Date

The information provided in this application is accurate. I understand that the Upward Bound Math-Science Program may deny my child's admission if any information is found to be incomplete or inaccurate. **For online submissions:** Please note that Parent/Guardian and Student signatures will be required at a later time.

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

\_\_\_\_\_  
Parent/Guardian Name (Print) Parent/Guardian Signature Date