



Dear Applicant,

Thank you for your interest in the Upward Bound Six-Week Summer Enrichment Program at Florida Atlantic University. During the summer, UB participants have the opportunity to take academic preparation courses in Math, Language Arts, Science, Foreign Languages and program electives, all of which have been designed to give them a head start in school for the following school year. In addition, participants engage in a full menu of college preparatory activities such as college prep workshops, ACT/SAT prep, tutoring, college tours, cultural events/field trips, all at **no charge to the student.**

The summer enrichment also including a one-week residential program. The programs' 1-week residential component allows every summer UB/UBMS participant the opportunity to live on the FAU Boca Raton campus. This part of our summer program is designed to give students a glimpse of what college life is like by giving them a chance to live in the dorms, have roommates, attend classes in university facilities, and dine at the marketplace or breezeway food court.

Eligibility to participate in the program is determined individually. However, each applicant must meet basic eligibility requirements set forth by the federal government that require neither parent to have a four-year college degree and family's income level verification or there is an academic need.

Below you will find instructions for completing the application process. Once we receive your application, and it is reviewed, someone from our office will notify you of your application status. We look forward to serving you!

Sincerely,

Sherry Byner, Director of Upward Bound Programs

Sbyner1@fau.edu

3200 College Ave | Education and Science Bldg. | Davie, FL 33314 | Phone: 954-236-1318 | Fax: 954-236-1341

The Application Process:

1. Program receives completed application with all required signatures.
2. Only complete application packet will be reviewed by Program Director.
3. Student and parent(s) will be notified of application status by email or phone.
4. All eligible students must attend an orientation. Parents must be present.

APPLICATIONS ARE DUE BEFORE MANDATORY ORIENTATION DATES

Tuesday, APRIL 9, 2019

Mandatory Orientation

Summer Enrichment Program

6 - 7:30pm

North Lauderdale Library

Saturday, April 13, 2019

Mandatory Orientation

Summer Enrichment Program

10am – 12noon

FAU's Davie Campus - Room ES 106

To note: If you do not hear anything from our within one week of submission, please call our office at 954-236-1318. We recommend keeping a copy of all application materials in case resubmission is necessary.

SUMMER ENRICHMENT PROGRAM

Student Application Checklist

As you complete the application, please check off the item that is complete so that you assure that everything is included, signed and dated. If something is not checked off on the application may be considered incomplete and entrance into the program may be at risk.

Please select the appropriate program: ☐ Upward Bound ☐ Upward Bound Math Science

| | | | |
|-------------|----------------|-------------|--|
| First Name | Middle Initial | Last Name | |
| High School | Student ID # | Grade Level | |

- ☐ Student Application Check List (complete, check off, signed and date)
- ☐ Student/Parent Information (fill out)
- ☐ Student Agreement (read, signed and dated)
- ☐ Parent/Guardian Release Form (complete)
- ☐ Copy of Transcript or Report Card
- ☐ Copy of Medical Insurance Card (if one has not been submitted previously)

I hereby attest that all information in this application is true and correct. I also understand that a false statement or misrepresentation will make the applicant ineligible for the Upward Bound Programs.

Student Signature: _____ Date: ____/____/____

Parent/Guardian Signature: _____ Date: ____/____/____

SUMMER ENRICHMENT PROGRAM

| Student Information | | | | |
|--|----------------------------------|--|----------------------------|-------|
| School | | Student ID# | | Grade |
| First Name | Middle Initial | | Last Name | |
| Address | | City | State FL | Zip |
| Phone (____) - ____ - ____ | | E-mail: _____@_____ | | |
| Date of Birth: ____/____/____ | Gender: ____ Male ____ Female | Ethnicity? <i>(Please check one)</i> ____ Black/African American ____ White/Caucasian ____ Asian ____ Hispanic/Latino ____ Other not listed (please specify) | | |
| Are you able to complete the entire six-week summer program? ____ Yes ____ No | | If no, briefly explain. | | |
| Are you involved in any summer programs or school activities? ____ Yes ____ No | | If Yes, please circle or list the activities? Football Basketball Soccer Drivers Ed Other _____ | | |
| What is your interest in Upward Bound Summer Program? <i>(Please Circle all that apply)</i> Co-Circular Workshops College prep Academic Support Residential Component | | | | |
| Program Commitment (Student) I understand that I am making a commitment to participate in the Upward Bound Programs Six-week Summer Enrichment program. Student Signature: _____ Date: ____/____/____ | | | | |
| Parent Information | | | | |
| First Name | | Last Name | | |
| Phone (____) - ____ - ____ | | E-mail: _____@_____ | | |
| Adult References <i>(list two adults other than yourself whom we could contact in the event of an emergency)</i> | | | | |
| Name | Address | | Phone (____) - ____ - ____ | |
| Name | Address | | Phone (____) - ____ - ____ | |

SUMMER ENRICHMENT PROGRAM

Student Agreement

I understand the purpose of the Florida Atlantic University's Upward Bound Programs is to prepare participants to successfully complete high school and college. As a part of my personal effort in this preparation, I commit to Upward Bound programs participation in academic year and summer components of the program. I understand that attendance is an important part of my participation and is a major contingency for receiving a stipend. Therefore, I agree to attend and actively participate in all classes, meetings, tutorial sessions and cultural enrichment activities sponsored by the program. In order to remain an active member of the Upward Bound Programs, students must participate in at least 51% of all activities.

Non-active members will not receive stipends and risk being expelled from the program. Additionally, when participants are accepted into the Upward Bound Programs, their acceptance is probationary – 10 days during the Summer Program, 60 days otherwise. Participants are NOT eligible for stipends during their probationary period or during periods when there is no academic programming.

I will comply with all rules and regulations of the Upward Bound Programs and FAU Student Code of Conduct. I am aware that failure to comply may result in dismissal from the program.

Below is a list of prohibited activities:

1. Violence or threat of violence to others or against oneself
2. Any form of bullying, harassment, or behavior which can reasonably be seen to cause another student embarrassment or distress (including behaviors which take place through social media, i.e. Facebook/Twitter).
3. Theft, conversion, misuse, damage, or destruction of University property of member of the University community
4. Interfere with the freedom of movement of any member or guest of the University
5. Interfere with rights of others to carry out their activities of the University
6. Interfere with the academic freedom and freedom of speech of any other member or guest of the University
7. Non-compliance with written or oral request or orders of authorized University personnel in the performance of their official duties. Such orders may include, but shall not be limited to, orders given by authorized University facilities managers or campus police to vacate campus premises
8. Providing false information to the University officials, the withholding of required information, or the misuse of University documents
9. The possession, use and or consumption of alcoholic beverages, drugs or other controlled substances
10. Possession of fireworks, explosives, or weapons on campus
11. Other violations of University rules, regulations or policies

I understand that I may be dismissed from the program without prior warning for the actions listed above or any other behaviors deemed dangerous or unrepresentative of the Upward Bound Programs by its Director.

As a participant, I will behave in a respectful manner at all times and will follow instructions of staff and representative of FAU and Upward Bound. I will come to class prepared to participate and will not use profane, vulgar or abusive language. I will dress appropriately at all times and will not use electronic devices in classrooms (including cell phones) without the approval of Upward Bound staff.

Student Signature: _____ Date: ____/____/____

Parent/Guardian Signature: _____ Date: ____/____/____

SUMMER ENRICHMENT PROGRAM

Parent/Guardian Release

I, _____, give my child _____
PRINT (Parent/Guardian Name) *PRINT (Student's Name)*

permission to participate in the Upward Bound Program at Florida Atlantic University.

I/We hereby release from liability and hold the Florida Atlantic University Board of Trustees, Florida Atlantic University, and its officers, employees and agents (including Florida Atlantic University's Upward Bound/ Upward Bound Math Science) (the "Releasees") harmless from any and all claims, damages, liabilities and causes of action, including personal injury or property damage or loss, which might arise out of any activity conducted by or under the control of the Releasees. I also understand that my child will be photographed or videotaped for program documentation purposes and release all rights to such photographs and videos. I acknowledge that I am foregoing substantial rights by signing this form, and I do so knowingly, and I freely assume the risk in doing so.

Parent/Guardian Signature: _____ Date: ____/____/____

Parent/Guardian Medical Release

I/We hereby authorize Florida Atlantic University personnel on or off University property to obtain and give consent to emergency medical treatment for my child that such personnel deems necessary, including the administration of anesthesia and surgery; and do hereby release from liability and hold the Florida Atlantic University Board of Trustees, Florida Atlantic University, and its officers, employees and agents (including Florida Atlantic University's Upward Bound/ Upward Bound Math Science) (the "Releasees") harmless from any and all claims, damages, liabilities and causes of action, including personal injury or property damage or loss, which may arise from such personnel obtaining and consenting to said medical treatment for my child. **In case of an emergency, 911 will be called and parent(s) will assume all related cost.** I acknowledge that there is no reason that my child cannot, for health reasons, adequately participate in the Upward Brown program.

Is the student currently under medical care? ____Yes ____No Is the student currently on medication? ____Yes ____No

Brief medical history (if any) and current medical conditions: _____
 In case of emergency, please notify: _____ Relationship: _____ Phone: _____

Home Phone (____) - ____ - ____ Cell Phone (____) - ____ - ____
 Please list any insurance policy covering your child _____ Policy No. _____
Please provide copy of insurance card

Physician's Name: _____ Phone (____) - ____ - ____
 Parent/Guardian Signature: _____ Date: ____/____/____

Academic Record Release

I/We hereby give authorization/permission to school personnel to obtain and release academic data (*i.e. report cards, progress reports, transcripts*) and demographic data regarding my child to Upward Bound Program personnel. The information will be used for academic evaluation and assessment purposes.

Parent/Guardian Signature: _____ Date: ____/____/____