



ACC Educational Talent Search
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www.alpenacc.edu/ets



Educational Talent Search

2009-2010 Application

TRiO
TALENT SEARCH

Educational Talent Search Application

STUDENT INFORMATION—Please Print

Name _____
Last First Middle Initial

Address _____

City _____ State _____ Zip _____

Phone _____ Soc. Sec. Number _____/_____/_____

Email _____ Date of Birth _____/_____/_____

Gender Male Female Do you have a physical handicap or a learning disability Yes No

What is your racial group? White Black or African American American Indian or Alaskan Native
 Asian Hispanic or Latino Native Hawaiian or Other Pacific Islander

Are you a U.S. Citizen? Yes No **If no, you must provide proof of permanent residency**

For Academic Year 2009-10, please state your school and education level (grade): School _____

- | | | |
|-------------------------------------|---|---|
| <input type="checkbox"/> 6th Grade | <input type="checkbox"/> 11th Grade | <input type="checkbox"/> High School Graduate |
| <input type="checkbox"/> 7th Grade | <input type="checkbox"/> 12th Grade | <input type="checkbox"/> 1, 2, or 3 years of college (circle one) |
| <input type="checkbox"/> 8th Grade | <input type="checkbox"/> Did not complete high school | <input type="checkbox"/> Other (explain) _____ |
| <input type="checkbox"/> 9th Grade | <input type="checkbox"/> Working toward GED Certificate | |
| <input type="checkbox"/> 10th Grade | <input type="checkbox"/> GED Certificate | |

I am interested in the following FREE services (check all that apply):

If known, please state the type of educational training (field of study or career area) you are interested in: _____

- | | | |
|---|--|--|
| <input type="checkbox"/> Study Skills | <input type="checkbox"/> Tutoring | <input type="checkbox"/> ACT/SAT Fee Waivers |
| <input type="checkbox"/> Career Information | <input type="checkbox"/> Job Shadowing | <input type="checkbox"/> Financial Aid Assistance |
| <input type="checkbox"/> Academic Advising | <input type="checkbox"/> College Visits | <input type="checkbox"/> Portfolio Assistance |
| <input type="checkbox"/> Personal Advising | <input type="checkbox"/> College Admissions Assistance | <input type="checkbox"/> Life Management Training |
| <input type="checkbox"/> Time Management Skills | <input type="checkbox"/> College Application Fee Waivers | <input type="checkbox"/> Volunteering/Service Projects |

If known, please name some postsecondary schools (colleges) you are interested in attending: _____

Are you currently accepted at any of the above schools? Yes No If yes, which ones? _____

Seniors/Adults only:

Are you a veteran? Yes No

Have you applied for financial aid? FAFSA (Free Application for Federal Student Aid) Yes No

Scholarships Yes No If yes, please state which ones _____

Please give the date you plan to begin your postsecondary education _____/_____/_____
Month Year

PARENT/GUARDIAN INFORMATION

This section must be completed if the applicant is under 18 years of age or is under 18 years of age and resides with a parent/guardian.

If you are an applicant over 18 years of age, complete this application as if you are the applicant and the parent.

What is Talent Search? Educational Talent Search (ETS) is a program designed to assist persons who have academic potential and are interested in returning to school or continuing their education. ETS is funded entirely by the U.S. Department of Education (\$323,796 FY 2009-10).

ETS Services Please check all services you would like the applicant to receive.

- Study Skills Tutoring ACT/SAT Fee Waivers
 Career Information Job Shadowing Financial Aid Application Assistance
 Academic Advising College Visits Portfolio Assistance
 Personal Advising College Admissions Assistance Life Management Training
 Time Management Skills College Application Fee Waivers Volunteering/Service Projects

Who can qualify for ETS Services? Anyone 11 years of age or older who has completed 5th grade and who resides in Alcona, Alpena, Presque Isle, or Montmorency counties, or Oscoda School District. Participants must want to attend college and must want ETS services.

Although all program services are available to all ETS participants regardless of income status, our records must reflect that participants meet federal requirements to be eligible for services. Those requirements are as follows: (a) 2/3 of ETS participants have an income level within established federal guidelines and neither parent/guardian has completed a 4-year college/university degree (first generation college potential) AND (b) all participants must want to attend postsecondary education (college/technical school) after high school and want ETS services.

ETS is required by the U.S. Department of Education to document income information for all participants. Please be assured that our staff is very respectful of your concerns for privacy. Therefore we are very conscientious with personal information and take great pains to assure that all information is kept in a secure environment.

Please send a copy of your income verification with this application. Acceptable types are as follows: Federal IRS income tax forms (1040, 1040A, 1040 EZ), Free/Reduced Lunch Verification (see below), or benefit statements from Dept. of Social Services, Social Security, Veterans, Pension, or Unemployment. **Please send only the pages of your 1040 form which state your household's taxable income and number of dependants (usually the first two pages).**

Family Taxable Income

Please check the appropriate boxes in both boxed areas below.

What is the size of your household, including yourself? _____

Source (send copy with application)
 1040 Line 43*
 1040 A Line 27*
 1040 EZ Line 6*
 Did not file income tax forms
*Line numbers refer to 2008 Tax forms

And

Taxable Income (amount after deductions)
 \$0—16,245 \$38,686—44,295
 \$16,246—21,855 \$44,296—49,905
 \$21,856—27,465 \$49,906—55,515
 \$27,466—33,075 \$55,516 and up
 \$33,076—38,685

Does your son/daughter participate in the school (circle one) **Free** **Reduced** Meals Program? Yes No

If Yes, do you authorize your school district to share information regarding your child's participation in the Free/Reduced Lunch program for the purpose of income verification for the ETS program? Yes No

If yes, you do not need to provide income verification. Our office will request a copy from the school. This information will be kept confidential and will expire at the end of the school year.

Please check if you are receiving: Medicaid Social Security Benefits
 Unemployment Compensation Other (please specify) _____
 Public Assistance (ADC, AFDC, General Assistance, Food Stamps, etc.)

Does the applicant have medical coverage? Yes No
Is the applicant a ward of the state? Yes No
Are you employed at this time? Yes No
Is your spouse employed at this time? Yes No

IMPORTANT—Please see back of form!

PARENT/GUARDIAN INFORMATION (continued)

Please Print

Parent/Guardian (1) _____ <div style="text-align: center; margin-left: 100px;">Last</div> <div style="text-align: center; margin-left: 150px;">First</div> Address _____ City/St/Zip _____ Phone _____ <div style="text-align: center; margin-left: 50px;">Home</div> <div style="text-align: center; margin-left: 100px;">Work</div> Email _____	Parent/Guardian (2) _____ <div style="text-align: center; margin-left: 100px;">Last</div> <div style="text-align: center; margin-left: 150px;">First</div> Address _____ City/St/Zip _____ Phone _____ <div style="text-align: center; margin-left: 50px;">Home</div> <div style="text-align: center; margin-left: 100px;">Work</div> Email _____
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Do either of the applicant's parents, with who he/she now resides or resided before becoming independent, hold a bachelor's degree (B.A. or B.S.) from a four-year college or university? Yes No

If no, would you as a parent/guardian be interested in services for yourself? Yes No

Are there other children in grades 6 thru 12 you would like to have ETS services? Yes No

Please list only students who are not currently enrolled in ETS:

Name/Grade _____ / _____ Name/Grade _____ / _____ Name/Grade _____ / _____

Educational Talent Search is a pre-college program that works with students that demonstrate college potential. ETS reserves the right to terminate from the ETS program any student who subsequently demonstrates that they no longer have the potential for college success.

Participation is voluntary in all ETS workshops—attendance indicates consent. I certify that this application has been filled out completely and correctly to the best of my knowledge. I authorize release of transcripts to Educational Talent Search and use of participant's photograph in ETS/TRIO publications.

Student Signature

Date

Parent Signature

Date

***Reminder to Parents: Attach supporting income verification.**



REALIZING THE COLLEGE DREAM!

FOR OFFICE USE ONLY:

_____ U.S. Citizen or Permanent Resident	_____ Need
_____ Completed 5th grade or 11-27 years old OR meets criteria for adult participation	_____ Signatures

LI/FG LI FG OTHER _____ Verified

Add Waiting List Pending Not Eligible (reason) _____

Director's Initials _____ Date _____

Notes _____