



Educational Talent Search Student Application



220 Canfield Administration Building / PO Box 880494 / Lincoln, NE 68588-0494/ Phone: (402) 472-8989 / Fax: (402) 472-9338

Instructions for completing this form:

1. Read each question carefully and **complete all sections** by writing in black or blue ink or typing on the computer.
2. If you fail to answer all necessary questions and/or omit signatures, your application will be returned to you for completion.
3. Students cannot participate in program activities until all application materials are complete and returned to the address above.
4. If you are under the age of 18, **you and your parent or guardian must sign all application materials on the back.**

*****The information you provide on this application will be secure and confidential.*****

Student Name:

_____ Last _____ First _____ Middle Initial _____

Contact Information:

_____ Street Address _____ City _____ State _____ Zip _____

_____ Student Email _____ Parent/Guardian Email _____

_____ Home Phone _____ Student Cell Phone _____ Parent/Guardian Cell Phone _____ Parent/Guardian Work Phone _____

Student Information:

_____ Birthdate _____ Age _____ Social Security Number _____ Gender (please check): Male Female

Do you identify as Hispanic or Latino? (please check) Yes No

Which of these ethnicities do you identify with? (please check all that apply)

American Indian or Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White Two or More Races

Name of school currently attending: _____ Current Grade: _____

Name of school attending next academic year: _____ LPS Student ID: _____

If not enrolled, last school attended: _____

How did you hear about Educational Talent Search? _____

Are you a member of another TRIO program? (please check) Upward Bound EOC Upward Bound Math/Science None

Are you a U.S. Citizen? (please check): Yes No - If no, please answer next question.

Are you a permanent resident of a U.S. Territory or have you applied/intend to apply for U.S. citizenship? (please check) Yes No

If yes, what is your Alien Registration Receipt Card Number? _____

Parent/Guardian Information:

Head of Household Name: _____ Relationship to Student: _____ Occupation: _____

Marital Status (please check): Single Married Separated Divorced Widowed

Total number of people in family: _____ Total number of children 18 and under in family: _____

Have either of your parents/guardians currently living in your home received a Bachelor's Degree from a four-year institution in the United States? (please check) Yes No

Emergency Information:

If ETS is unable to contact your parent/guardian in the case of an emergency, who would you like us to contact?

Name: _____ Relationship to Student: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Please continue the application on the back of this sheet.

Student Needs Assessment

In which of these areas listed do you need assistance? (please check all that apply)

- Selecting a Career
 Study Skills
 Time Management
 Personal/Academic Advising
 Financial Aid Advising
 College Exploration and Selection
 Tutoring/Homework
 Completing College and Financial Aid Forms

What careers are you interested in exploring? (please list) _____

What subjects do you enjoy? (please list) _____

Income Verification

Do you receive lunch assistance? (please check one)
 Free
 Reduced
 Do not receive

If you checked Reduced or Do not receive, please also complete Family Taxable Income Verification below.

As a federally funded free program for students, Educational Talent Search is required to verify income levels.

As parent/guardian, I hereby consent to the release of the type of assistance I receive each month to the Educational Talent Search Program at the University of Nebraska-Lincoln.

Parent/Guardian Signature: _____ Date: _____

Family Taxable Income Verification: Please check the income range which reflects the taxable income reported on your family's **2016** Income Tax return. Please check an income range even if you were not required to file. Please see appendix for further information.

- | | | |
|---|---|--|
| <input type="checkbox"/> \$0 to \$18,090 | <input type="checkbox"/> \$30,631 to \$36,900 | <input type="checkbox"/> \$49,441 to \$55,710 |
| <input type="checkbox"/> \$18,091 to \$24,360 | <input type="checkbox"/> \$36,901 to \$43,170 | <input type="checkbox"/> \$55,717 to \$61,980 |
| <input type="checkbox"/> \$24,361 to \$30,630 | <input type="checkbox"/> \$43,171 to \$49,440 | <input type="checkbox"/> Greater than \$61,980 |

Taxable Income Location
 1040EZ—Line 6
 1040A—Line 27
 1040—Line 43

AFFIDAVIT OF TRUTH STATEMENT: The information provided on this form is, to the best of my knowledge, accurate and true.

Parent/Guardian Signature: _____ Date: _____

School Record Release, Waiver to Provide Services, and Post-High School Tracking Release

By signing here, the parent/guardian hereby gives consent to release school records to Educational Talent Search. This signature also allows ETS staff to meet with students in and out of school for the duration of the time the student is enrolled in Lincoln Public Schools or any other school in the Lincoln, Nebraska area. The parent/guardian gives permission to track the student until he/she graduates from postsecondary education, and the signature allows the release of information that the student is in attendance at that specific institution.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Releases and Consents

Please read information in appendix, then check "Agree" and initial for each release and consent.

- | | | | |
|---|--|--------------------------------|---------------------------------|
| Initiating the selected releases and consents hereby provides parent/guardian consent and authorizes Educational Talent Search. | 1. Consent for Release of Information | <input type="checkbox"/> Agree | Parent/Guardian Initials: _____ |
| | 2. Authorization and Release for Photographs | <input type="checkbox"/> Agree | Parent/Guardian Initials: _____ |
| | 3. Consent for Advising and Services | <input type="checkbox"/> Agree | Parent/Guardian Initials: _____ |
| | 4. Consent for Social Networking Contact | <input type="checkbox"/> Agree | Parent/Guardian Initials: _____ |

Student and Parent/Guardian Approval Signatures

I (We) understand that Educational Talent Search will use the data provided on this form to assist in assessing any academic or career planning needs and that all of the information will be used in the strictest of confidence. I certify that all information provided is correct to the best of my knowledge.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

For office use only

The U.S. Department of Education's approved income limit for a family of _____ is \$ _____.

Participant of the Free/Reduced Lunch Program? Yes No The family's verified taxable income is \$ _____.

Therefore, the student is classified as: First-Generation/Low-Income
 Low-Income Only
 First-Generation Only
 Other

Application is: Accepted
 Denied (Reason: Does not meet federal income guidelines
 Other: _____)

Assistant Director's Signature: _____ Date: _____

This is for the student and parent/guardian to keep for record. Please do not return with application.

1. CONSENT FOR RELEASE OF INFORMATION

Your records cannot be released to any other individuals or agencies without your written consent. Certain information, however, may be released without your authorization under the following legal circumstances:

1. The receipt of a legitimate subpoena
2. In the event of a medical emergency
3. The receipt of information that suggests child abuse or neglect has occurred. Educational Talent Search is legally obligated to report any such information to Child Protective Services.

By initialing here, the parent/guardian indicates that he/she understands what information is being disclosed. The parent/guardian is aware that this consent can be revoked (in writing) at any time. The parent/guardian initialing here also means that he/she has read this form and/or has had it read to him/her and explained in a language that he/she understands.

2. AUTHORIZATION AND RELEASE FOR PHOTOGRAPHS

By initialing here, the parent/guardian hereby unconditionally releases and forever discharges Educational Talent Search, its successors, assigns, agents, clients, licensees or transferees from any or all claims, demands, or actions whatsoever arising from a picture or pictures, including stills and motion pictures, taken of the student during services with Educational Talent Search. It is specifically understood and agreed that said pictures or modifications thereof will or may be reproduced whole or in part and that they may be used on a national basis for fund-raising, illustration, advertising, trade exhibitions, displays or publications.

3. CONSENT FORM FOR ADVISING AND SERVICES

By initialing here, the parent/guardian hereby consents to academic and non-academic advising and services provided to the student through Educational Talent Search. The parent/guardian further acknowledges that no guarantees have been made as to the results of any services provided.

4. CONSENT FOR SOCIAL NETWORKING CONTACT

Educational Talent Search uses electronic communication at times to send information and programming notifications to students through email or social networking sites. By initialing here, the parent/guardian hereby gives consent for members of Educational Talent Search Staff to communicate with the student via email or social networking sites.

5. SCHOOL RECORD RELEASE, WAIVER TO PROVIDE SERVICES, AND POST-HIGH SCHOOL TRACKING RELEASE

Due to the academic nature of Educational Talent Search, transcripts, report cards, and other academic records may be requested from your student's school to assist us in providing the best service to your student. This authorization gives Educational Talent Search the permission to request academic records in the best interest of your student. The waiver section of this release allows Educational Talent Search to meet with your student during and after normal school hours. Educational Talent Search staff will meet with your student to provide educational, vocational, and cultural services. The Post-High School Tracking Release allows Educational Talent Search to follow up with the student after high school until post-secondary graduation at any institution; which means, the institution in attendance will disclose that the student is a registered student.

6. FAMILY TAXABLE INCOME VERIFICATION

This information will be used only to determine or verify eligibility for the Educational Talent Search program in the Office of TRIO Programs, at the University of Nebraska-Lincoln. All information is confidential and is never passed on to any other agency. The U.S. Department of Education provides more information about TRIO Programs and eligibility requirements at www.ed.gov/ope/trio.

Please continue reading on the back of this sheet.

Free Services Offered by Educational Talent Search

Preparation of Education Plans

Academic Advising

Development Workshops

Career Exploration Activities

Information on Post-Secondary Education

American College Test (ACT) Preparation

After-School Clubs

College Campus Tours

Cultural Enrichment Activities

Middle School Summer Program

Assistance with the Re-entry Process to High School or College



Connect with us on Social Media to stay up-to-date on all of our events and services!

Facebook: <https://www.facebook.com/ETSatUNL>

Instagram and Twitter: @ETSatUNL



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