



**A Work of Faith
Ministries, Inc.**

Developing happy purposeful people committed
to giving something back to community

AWOFINC

Application for Parent and Child Participation

(Please print neatly or type all information, print, sign, and mail, fax, email, or hand-deliver.)

SEQ

ACADEMIC TALENT SEARCH COLLEGE PREP PROGRAM

Yep, college is possible and we can help!®

A Work of Faith Ministries, Inc.
Youth Leadership & Development
1101 Davis St, #3
Evanston, IL 60204

Main: 872 216 7058* Email: yld@awofinc.org

Website: **AWOFINC SEQ**



AWOFINC - A Work of Faith Ministries, Inc.
Scholastic Endowment Quest College Prep Program
1101 Davis Street, #3 Evanston, IL 60204 Phone: 872 216 7058 Email: yld@awofinc.org
Application Packet for Parent and Child Participation

Our Mission: "The Scholastic Endowment Quest College Prep Program is designed to create and sustain a college-going culture for its target schools and target areas and to improve parents' capacity to prepare their child/children for college."

PART I: BACKGROUND, ACADEMIC, CONTACT INFORMATION RELATED TO THE CHILD

Child's First Name, Middle Initial, and Last Name: _____

Social Security Number: (required for federal purposes): _____ Gender: _____ Is child an ESL student?: _____

Address and Zip Code: _____

Best Contact Phone(s): _____ **Alternate Contact Phone:** _____

Parent email: _____ **Student email:** _____

School enrolled in currently: _____ Is the child/student a ward of the court or foster child? _____

Which of the following best describes your child's current status at time of application (select one option)?

Middle school (6th–8th grade) _____
High school non-senior (9th–11th grade) _____
High school senior (12th grade only) _____
Not older than 18 years **AND** enrolled in an alternative education program at an academic level *equivalent* to that of a high school senior _____
Under the age of 19 and is a potential college transfer _____
Other participant not older than 18 years _____

Are you participating in TRIO Upward Bound Program? ☐ Yes ☐ No ☐ Unsure If yes, where?: _____

Do you wish to disclose a **documented** disability? _____ If so, what accommodations are required for participation?: _____

Race/Ethnicity (Must be completed by parent/guardian/caregiver):

_____ American Indian or Alaska Native _____ Asian _____ Bi- or multi-racial _____ Black or African American
_____ Hispanic or Latino _____ Native Hawaiian or Other Pacific Islander _____ White

PART II: ELIGIBILITY INFORMATION BASED ON FEDERAL REGULATIONS

Is the child a U.S. Citizen?: ☐ Yes ☐ No If not, is the child a Permanent Resident?: _____ If "yes," please attach copy of resident card.

Child's Age: _____ **Child's Birthday:** _____ **Child's Current Grade:** _____

Is the applying participant a veteran of the U.S. Armed Forces?: _____

Has person applying dropped/stopped out of school?: _____ If "yes," grade last enrolled: _____ School last attended: _____

Who has a bachelor's degree?: ☐ Mother/female guardian ☐ Father/male guardian ☐ Neither has a bachelor's degree

Did parent/caregiver/guardian earn enough income to file federal 1040 tax form last year?: ☐ Yes ☐ No

If yes, find the line that says "**TAXABLE INCOME**" and enter here: \$ _____ (**attach signed copy of tax form**)

How many **total people** live in the household _____

Does your child qualify and/or participate in his or her school's free - and reduced-lunch program? ☐ Yes ☐ No

Which do you the parents/guardians/care givers receive? (Put check mark by all that apply **which is required if not providing tax statement**)

_____ AFDC (Aid to Families with Dependent Children) _____ Child support _____ Disability _____ Food Stamps
_____ Foster care assistance _____ Public assistance _____ WIC
_____ Unemployment compensation _____ Veteran's Benefits _____ Social Security Benefits or retirement

PART III: EMERGENCY CONTACT INFORMATION

Name: _____ Relationship: _____

Best phone(s): _____ Best email: _____

Is this person authorized to drop off for or pick up student from activities? _____ Please initial here: _____

PART IV: OPTIONAL STATEMENT OF INTEREST

Please share why you are interested in the program or why you want your child to be in the program.

PART V: PERMISSIONS, DISCLOSURES, VERIFICATION STATEMENT, AND CONSENT TO RELEASE RECORDS

I (print parent/guardian name), _____, understand that if (print student name), _____ is accepted, participation in the program is a privilege and that rules and regulations of the program must be adhered to on all occasions related to program activities or my child/I may be dismissed. **I also confirm that the information contained in this application is true to the best of my knowledge. Specifically, I confirm that the citizenship, academic, financial, and other eligibility information provided is accurate. I understand that I may be asked to provide supporting documentation.** I have read information about the program and fully understand the goals of the program which, in sum, are school retention, school graduation, college enrollment *the fall* after high school graduation, and college graduation. I understand that should the information contained herein is found to be false, my child/I may be dismissed from the program. Participation in the program is not a promise of admission to any of the University campuses.

Consent to Release School Records for Limited Purposes: I understand that application and other data (e.g., grades, test scores, graduation, college choices, courses, income) are being requested, maintained, and used for eligibility, needs assessment, service delivery, and research and reporting purposes to show general profiles and effectiveness of program. At no time will my child's name or my name be identified or linked to published data results without my written permission. I also understand that my child/I may withdraw from participating in any data collection activities without penalty, interruption, or denial of services.

The purpose of this form is for parents to give their expressed consent to their child's current or last-attended schools to release educational records including: academic transcripts, discipline record, enrollment status, evidence of income, free or reduced lunch status, graduation date, latest report card, standardized test scores, and other educational records that will be used to determine eligibility and need for services; to understand, monitor, and track academic performance; to monitor and track enrollment status; to assess potential for postsecondary education; and to assess effectiveness of intervention services. All records provided to the program will be confidential, reviewed by program personnel only and auditors assessing compliance and accountability with federal and institutional regulations, and maintained in a secure location at the business offices of BLACK.

Needs Assessment: I/my child needs tutoring in Math, Science, and/or English. I/my child also needs other college prep services such as academic advising, exposure to postsecondary opportunities, financial literacy, test-taking strategies, cultural opportunities, and career development. I understand that the purpose of this statement is to assess need for program services.

Permission to Use Images (Please answer yes or no at the end of the statement): I authorize the program to interview my child/me and to use my child's image/my image for promotional material, such as advertising, publications, websites, schedules, catalogs, reports, recruiting presentations, view books, radio, T.V., and other methods of communication not stated herein. My child/I may elect to withdraw this permission at any time without penalty, interruption, or denial of services. [] **Yes** [] **No**

Parent's/Guardian's/Caregiver's Signature: _____ **Date:** _____

Thank you for completing the application. Please remember to include the following additional items when you mail or hand-deliver the application:

- ✓ Most recent academic transcript (9th-12th graders or older) or most recent report card (middle school students).
- ✓ If completed, and your student does not receive Free/Reduced Lunch from their district **a copy of most recent signed copy of the federal U.S. 1040 tax form is needed to complete the application (verification of Taxable Income)**. The form will be used to determine income-eligibility range based on federal guidelines. You may block out sensitive information if you wish but we need to see TAXABLE INCOME and DEPENDENTS lines.
- ✓ Documentation of foster child status if applicable.
- ✓ Documentation of ward of the court status if applicable.
- ✓ Copy of permanent resident card from Immigration Services if applicable

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