

Palau Community College
UPWARD BOUND PROGRAM

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Rev. August 2021

Palau Community College Upward Bound Program is a US Department of Education funded college preparatory program which provides year-round academic and guidance services to students who demonstrate academic potential and interest in pursuing a college education.

APPLICATION DEADLINE:

APPLICATION CHECK-LIST

- Student Application
- Copy of Social Security Card
- Copy of 8th Grade Annual Report Card (*for 9th grade applicants only*)
- High School Transcript (*for 10th and 11th grade applicants only*)
- Family Income Verification
 - _____ Wage & Tax Statement - (*for parent who is employed*)
 - Social Security Benefit Verification – (*for parent that receives SS benefits*)
 - Retirement Benefit Verification – (*for parent that receives Retirement benefits*)
 - Other Source of Income Verification
- Verification of Citizenship – Copy of Passport or Birth Certificate
- Two Recommendation Forms

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Education Records Release Form

The Palau Community College Upward Bound Program is required to follow the progress of its participants through high school and college for tracking and reporting purposes. In compliance with the Family Educational Rights and Piracy Act (FERPA), Palau Community College Upward Bound Program must obtain a signed Education Records Release from student and parent upon enrollment to the Upward Bound Program.

Note to high school and college registrars

In accordance with the FERPA, we are requesting the records of the student signatory below to Palau Community College Upward Bound Program. The records will meet the mandate of the US Department of Education which is to follow the progress of its participants through high school and college.

Student / Parent Agreement

We understand that the Palau Community College Upward Bound Program requires school records including transcripts, report cards, and standardized test scores. We also understand that the Palau Community College Upward Bound Program will continue to require these information throughout high school and college. We hereby authorize and permit Palau Community College Upward Bound Program to request these information directly from high school or institution of post-secondary education for the next ten years.

1) School records

4) Complete educational records

2) Standardized test scores

*5) Student's phone number and mailing
Address*

*3) Student's status and performance with the
institution*

6) Student's financial aid award

Student's Name (print)

Student's Signature

Date

Parent/Legal Guardian's Name (print)

Parent/Legal Guardian's Signature

Date

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VI. Parental Authorization & Release

Field Trip Release Authorization

My child has my permission to participate in field trips and all activities planned and supervised by the Palau Community College Upward Bound Program. I further release the program, Palau Community College and its employees from all claims and responsibilities which may arise as a result of injury or death to my child while he/she is participating in program sponsored activities.

Information/Photograph Release Authorization

I give permission to Palau Community College Upward Bound Program to use, release and publish information about and photographs of my child. I trust that the information and/or photographs will only be released when it is in the best interest of my child, or the Upward bound Program in general, or when the recipient has a legal "need to know" as prescribed in the FERPA and the US Department of Education regulations.

Media Publication & Internet Use Release

I give permission to Palau Community College Upward Bound Program to copyright, publish, display, and use information about or photographs of my child. I trust that the information and/or photographs will only be released when it is in the best interest of my child, or the Upward Bound Program in general, or when the recipient has a legal "need to know" as prescribed in the FERPA and the US Department of Education regulations. I also hereby grant permission for my child to access networked computer services such as the internet, World Wide Web, and email at the computer lab of PCC Upward Bound Program.

Medical Release to be signed by Parent or Legal Guardian

Should (print student's complete name) _____ require medical attention and/or care while under the supervision of Palau Community College Upward Bound Program, I give my consent to medical examinations and necessary treatment, including drugs and x-rays, as may be deemed advisable and necessary by the attending physician. This consent shall be in effect as long as my child is a participant in the Upward Bound Program.

Parent's/Guardian's Name (print)

Parent's/Guardian's Signature

Date

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Office Use Only

Date Received: _____

Received By: _____

Instruction: Complete the application and attach all the required documents and submit to the Upward Bound Office before the deadline date. If a question is not applicable, mark "N/A" in the space provided. **Upward Bound will ensure that all information provided are kept confidential.**

Recent
Photo

I. Personal Information

1. Student Name: _____ High School: _____ Current Grade Level: _____
2. Date of Birth: _____ Age: _____ Gender: Female Male
3. Social Security Number: (Palau) _____ (US) _____
4. Mailing Address: (*Box*) _____ Where do you live? (*State*) _____
5. Contact Number: (H) _____ (C) _____ Email Address: _____
6. Ethnicity: Pacific Islander Asian African-American
 Caucasian/White Native American Others: Specify _____

II. Assessment

1. What are your two strongest subjects in school? (a) _____ (b) _____
2. What are your two weakest subjects in school? (a) _____ (b) _____
3. I need help with (check all that apply)
 College Planning College Applications Process Assistance in Course Selection
 Study Skills College Admission Tests Academic or Tutoring Assistance
 Secondary School/Programs Reentry Federal Financial Aid Program
 Scholarships Information Financial & Economic Literacy
4. My plan after graduation from high school:
 Go to college Enter the workforce Join the Military Other (specify) _____
5. What are your career interests? (a) _____ (b) _____

(Provide a copy of 8th grade report card for 9th grade applicants and school transcript for 10th and 11th grade applicants.)

III. Student Certification

I certify that the information I have stated are true and accurate to the best of my knowledge as indicated by my printed name and signature below.

Student's Name (print)

Student's Signature

Date

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The remaining section of this application is to be completed by applicant's parents or legal guardians

IV. Household Information

1. <u>Father/Guardian</u> <u>Employment</u> <u>Mailing Address</u> <u>Email Address</u> Phone #: Home: _____ Work: _____ Cell: _____	<u>Mother/Guardian</u> <u>Employment</u> <u>Mailing Address</u> <u>Email Address</u> Phone #: Home: _____ Work: _____ Cell: _____
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Attach copies of your _____ Wage & Tax Statements and/or verification of other source of income (Retirement, Social Security, and other income benefits)

2. Family members living in the household. Be sure to list parents or guardians, the student, and any other relatives supported by the family income. **(Use additional sheet if necessary)**

No.	Name	Age	Relationship to applicant
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
	Total # of Family		

3. Does the mother/guardian have a 4 yrs./bachelor's degree or higher? Yes _____ No _____
4. Does the father/guardian have a 4 yrs./bachelor's degree or higher? Yes _____ No _____
5. Student citizenship status: Palauan U.S. Other (specify): _____
6. Student resides with: Both parents Mother Father Guardian

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Medical Information

1. Does your child have allergies (i.e., food, medications, insect bites, etc.)? Yes _____ No _____
 - a. If yes, explain _____
2. List activities that your child should not participate in: _____

Emergency Contact Information

1. List two people to notify in case we are not able to contact you.

(a) Name	Relationship	Phone #
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(b) Name	Relationship	Phone #
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V. Parents/Guardians Certification

I/We certify that the information stated above are true and accurate to the best of my/our knowledge as indicated.

Parent's/Guardian's Name (print)	Parent's/Guardian's Signature	Date
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