

WE BELIEVE IN YOU WE BELIEVE IN YOU WE BELIEVE IN YOU WE BELIEVE IN YOU



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Gracias por su interés en el programa de Upward Bound de Waubonsee Community College, un programa de finalización de estudios universitarios sirviendo a los estudiantes de East Aurora High School y West Aurora High School, Aurora, IL.

Proporcionamos el apoyo y la motivación necesaria para graduarse de la escuela secundaria y obtener un título universitario. Los estudiantes participan hasta que se gradúen de la escuela secundaria y reciben todos los servicios sin costo. Los estudiantes no están obligados a asistir Waubonsee Community College.

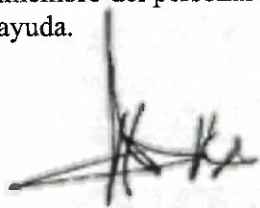
Los servicios ofrecidos todo el año incluyen:

- La tutoría en matemáticas, ciencia, Inglés, ciencias sociales y lengua extranjera;
- Desarrollo académico y personal, y talleres de preparación para la universidad;
- Oportunidades para obtener créditos universitarios;
- Actividades de exploración de carreras y oportunidades de pasantías;
- Asesoramiento académico y asistencia individual con la admisión a la universidad y el proceso de ayuda financiera;
- Visitas a universidades, actividades de enriquecimiento cultural, y eventos especiales;
- Un programa académico de verano de seis semanas opcional en el campus de Waubonsee en Sugar Grove.

Las decisiones de admisión se basan en una revisión cuidadosa de la Solicitud de Nuevo Estudiante, expedientes académicos, cartas de recomendación y entrevista familiar.

Para ser elegible, el estudiante debe ser ciudadano, nacional o residente permanente de los Estados Unidos y matriculado (o planeando inscribirse) en East Aurora High School o West Aurora High School, Aurora IL.

No dude en ponerse en contacto conmigo u otro miembro del personal si tiene preguntas o necesita ayuda.



Robert Cook, Ed.D.
TRIO / Upward Bound Manager
rcook@waubonsee.edu

Proceso de Solicitud

PASO 1 - Complete y envíe la aplicación New Student Application y adjunte los siguientes documentos:

- ☐ Transcripción no oficial o el informe más reciente de grados;
- ☐ Copia del Certificado de Nacimiento del estudiante;
- ☐ Copia de la Tarjeta de Seguro Social del estudiante; y
- ☐ Copia firmada de declaración de impuestos federales del año anterior de los padres / tutores (Formulario 1040, 1040SR).

PASO 2 - Una vez procesada su solicitud, nos pondremos en contacto con usted para programar una entrevista con la familia. Horario flexible y personal bilingüe están disponibles.

PASO 3 - Los nuevos estudiantes deben completar con éxito un periodo de observación de 10-60 días antes de ser admitidos en el programa. *Se espera que los estudiantes participen hasta que se gradúen de la escuela secundaria, y mantengan estándares académicos y de participación.*

Las solicitudes no completadas dentro de treinta días serán destruidas

Las solicitudes podrán presentarse en persona, o enviadas por correo a:

Waubonsee Community College
Upward Bound Program
East Aurora High School – Room 201
West Aurora High School – Nexus A104A

Waubonsee Community College
TRIO Upward Bound Manager
Route 47 at Waubonsee Drive
Sugar Grove, IL 60554

(630) 299-8155 – UB **EAHS** Office
(630) 301-6560 – UB **WAHS** Office
upwardbound@waubonsee.edu
waubonsee.edu/upwardbound

Upward Bound es financiado por el Departamento de Educación de los Estados Unidos y es un departamento dentro del Desarrollo Estudiantil en Waubonsee Community College.

Waubonsee no discrimina en función de las características reales o percibidas de ningún individuo protegidas por la ley en sus programas o actividades. Las consultas relacionadas con esta política pueden dirigirse a: Michele Needham, Coordinadora del Título IX/ADA/Sección 504, Ruta 47 en Waubonsee Drive, Sugar Grove, IL 60554, compliance@waubonsee.edu.



WAUBONSEE
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A College Completion Program



New Student Application 2024

Section 1 – Student Information

Student Name: _____	Today's Date: ____/____/____
Last First Middle	Month Day Year
EA / WA No.: _____	Social Security No.: _____ - _____ - _____
Date of Birth: ____/____/____	Gender: ☐ Male ☐ Female
Month Day Year	Pronouns: ☐ He / Him ☐ She / Her ☐ They / Them
Home Address: _____	
Street Address Apartment / Unit No. City State Zip	
Telephone: _____ - _____ - _____	Telephone: _____ - _____ - _____
Student	Parent / Guardian
E-mail Address: _____	

School Currently Attending: _____	Current Grade Level: ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12
School Counselor: _____	
Do you have an Individualized Education Program (IEP) or a Section 504 Plan? ☐ Yes ☐ No	
If yes, please attach a complete copy including the most recent review.	

This information is requested to comply with federal and state laws. Your response will not affect consideration of your application. Ethnic Background: Are you Hispanic or Latino? ☐ Yes ☐ No Check one or more of the following race/ethnicity groups with which you identify: <table border="0"><tr><td>☐ American Indian/ Alaska Native</td><td>☐ Black/ African American</td></tr><tr><td>☐ Native Hawaiian/ Other Pacific Islander</td><td>☐ Asian</td></tr><tr><td></td><td>☐ White</td></tr><tr><td></td><td>☐ _____ other not listed</td></tr></table> Is English your native language? ☐ Yes ☐ No If no, please list your native language: _____	☐ American Indian/ Alaska Native	☐ Black/ African American	☐ Native Hawaiian/ Other Pacific Islander	☐ Asian		☐ White		☐ _____ other not listed	Are you a U.S. citizen? ☐ Yes ☐ No If not, are you a Permanent Resident of the U.S., or have you applied for Permanent Residency? ☐ Yes ☐ No If yes, please attach a copy of form(s). Are you interested in participating in the optional six-week academic summer program on the Waubonsee Sugar Grove campus? ☐ Yes ☐ No ☐ Not Sure Staff Use Only Received: _____
☐ American Indian/ Alaska Native	☐ Black/ African American								
☐ Native Hawaiian/ Other Pacific Islander	☐ Asian								
	☐ White								
	☐ _____ other not listed								



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Other not listed



New Student Application 2024

Sección 4 – Información de los padres / tutores legales

Madre / Tutor Legal				
Apellido	Primer Nombre	Segundo Nombre	Teléfono Celular	
Dirección de Correo Electrónico		Empleador		Ocupación
Ha recibido un título universitario? ☐ Sí ☐ No		Idioma preferido: _____		

Padre / Tutor Legal				
Apellido	Primer Nombre	Segundo Nombre	Teléfono Celular	
Dirección de Correo Electrónico		Empleador		Ocupación
Ha recibido un título universitario? ☐ Sí ☐ No		Idioma preferido: _____		

Sección 5 – Información Financiera / Información del Hogar

Con quién vive el estudiante? ☐ Madre solamente ☐ Padre solamente ☐ Madre y Padre ☐ Otro _____

Esta el estudiante bajo la tutela del Estado? ☐ Sí ☐ No

El estudiante reside en hogares de cuidado temporal o un hogar comunitario? ☐ Yes ☐ No

En los últimos 12 meses ha estado sin hogar la familia? ☐ Sí ☐ No

Número de miembros de la familia en su hogar (incluyendo el solicitante)? _____

Cuál fue el **ingreso imponible** de su familia durante el año anterior? \$ _____
Formulario 1040 (Declaración de Impuestos Federales), línea 15

En cualquier momento de los últimos 12 meses recibió SNAP, TANF, bono de vivienda, etc.? ☐ Sí _____ ☐ No
cual?

Si no estaba obligado a presentar una declaración de impuestos para el año anterior, por favor enviar la verificación de sus ingresos no imposables. Se le requerirá completar un Formulario de Verificación de Ingresos del Programa Upward Bound.

Por este medio certifico que, a lo mejor de mi conocimiento, la información proporcionada es verdadera y completa. Entiendo que si se encuentra que es lo contrario, es causa suficiente para el despido del programa.

Firma de Madre / Tutor Legal

Fecha

Firma de Padre / Tutor Legal

Fecha

Firma del Estudiante

Fecha



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THE UNIVERSITY OF CHICAGO



New Student Application 2024

Autorización para Divulgar Información

Nombre del Estudiante: _____ Fecha de Nacimiento: _____
Apellido Primer Nombre Segundo Nombre Mes Día Año

Número del Estudiante: _____ Número X de WCC: _____
Si no se sabe dejar en blanco

Por este medio consentimiento divulgación de mis registros estudiantiles y académicos de la escuela secundaria y postsecundaria al programa Upward Bound.

El programa Upward Bound requiere mi información académica para determinar la elegibilidad para la admisión; con fines de asesoramiento, mientras que yo soy un estudiante de los estudios secundarios; para las normas anuales de presentación de informes y para realizar un seguimiento de mi progreso hacia la finalización de un título de postsecundaria mientras estoy asistiendo a una institución de educación superior.

El acceso a mis registros académicos se requiere por la agencia de financiación del programa de Upward Bound (Departamento de Educación de EE.UU.).

La información solicitada por el programa Upward Bound incluirá calificaciones e informes de progreso, asistencia y registros de comportamiento, transcripciones, resultados de las pruebas y evaluaciones estandarizados, registros de educación especial, registros de inscripción, concesiones de ayuda financiera, y materiales relacionados no listados.

Entiendo perfectamente que el programa Upward Bound de Waubonsee solicitará información únicamente para los fines antes mencionados, y que van a observar mi confidencialidad a través del mantenimiento adecuado de los registros en archivos protegidos.

Para más información, póngase en contacto con el Administrador de Upward Bound al (630) 466-6800, upwardbound@waubonsee.edu, o visita waubonsee.edu/upwardbound

Nombre del Estudiante

Firma

Fecha

Nombre del Padre / Tutor Legal

Firma

Fecha

Waubonsee Community College no discrimina por motivos reales o percibidos de la raza, el color, el credo, la religión, el género, la identidad de género, el sexo, la orientación sexual, la edad, el origen nacional, la ascendencia, el estado de veterano, el estado militar, la baja desfavorable del servicio militar, el estado civil, estado de orden de protección, embarazo, discapacidad, estado de ciudadanía o cualquier otra característica protegida por ley en programas educativos, actividades, o servicios. Las consultas sobre esta póliza de no discriminación pueden dirigirse a: Michele Needham, Coordinadora del Título IX/ADA/Sección 504; Waubonsee Community College, Ruta 47 en Waubonsee Drive, Sugar Grove, IL 60554-9454; compliance@waubonsee.edu.



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New Student Application 2024

Authorization to Release Information

Student Name: _____
Last First Middle

Date of Birth: ____/____/____
Month Day Year

Student Number: _____ WCC X Number: _____
If unknown leave blank

I hereby consent release of my secondary and post-secondary academic and student records to the Upward Bound Program.

The Upward Bound Program requires my academic information to determine eligibility for admission; for advisement purposes while I am a high school student; annual reporting standards, and to track my progress towards completion of a post-secondary degree.

Access to my academic records is required by the Upward Bound Program's funding agency (U.S. Department of Education).

Information requested by the Upward Bound Program will include grade and progress reports, attendance and behavioral records, transcripts, standardized test and assessment scores, special education records, enrollment records, financial aid awards, and related material not otherwise listed.

I fully understand that the Waubonsee Upward Bound Program will request information for only the purposes mentioned above, and that they will observe my confidentiality through the proper maintenance of records in secured files.

For more information, contact the TRIO Upward Bound Manager at (630) 466-6800, upwardbound@waubonsee.edu, or visit waubonsee.edu/upwardbound

Student Name Signature Date

Parent / Guardian Name Signature Date

Waubonsee does not discriminate on the basis of any individual's actual or perceived race, color, creed, religion, gender, gender identity, sex, sexual orientation, age, national origin, ancestry, veteran's status, military status, unfavorable discharge from military service, marital status, order of protection status, pregnancy, disability, citizenship status or any other characteristic protected by law in its programs or activities. Inquiries regarding this policy may be directed to: Michele Needham, Title IX/ADA/Section 504 Coordinator, Route 47 at Waubonsee Drive, Sugar Grove, IL 60554, compliance@waubonsee.edu.



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New Student Application 2024

Counselor Evaluation

Student Name: _____			Student Number: _____
_____	_____	_____	_____
<i>Last</i>	<i>First</i>	<i>Middle</i>	<i>Student Number</i>
Por este medio consentimiento divulgación de mis registros estudiantiles y académicos de la escuela secundaria al programa Upward Bound.			
_____		_____	_____
<i>Student Name</i>		<i>Signature</i>	<i>Date</i>
_____		_____	_____
<i>Nombre del Padre / Tutor Legal</i>		<i>Firma</i>	<i>Fecha</i>

El estudiante y los padres no deben escribir debajo de esta línea.

The above named student has applied for admission to the Waubonsee Upward Bound Program, a college completion program serving students at East Aurora High School and West Aurora High School. The program assists potential first generation college students who reside in limited income households. Upward Bound provides the support and motivation necessary to graduate high school and earn a post-secondary degree. Students participate until they graduate from high school and receive all services at no cost. Students are not required to attend Waubonsee Community College. Upward Bound is funded by the U.S. Department of Education and is a department within Student Development at Waubonsee Community College.

For more information, contact the TRIO Upward Bound Manager at (630) 466-6800, upwardbound@waubonsee.edu, or visit waubonsee.edu/upwardbound

Please assist us in evaluating this student by completing this evaluation form, and attaching a copy of the student's unofficial transcript, most recent standardized test scores, and IEP / Section 504 Plan summary if applicable. You may return the recommendation form and documents to the student for submission, send via e-mail, or interoffice to Waubonsee Upward Bound at EAHS / WAHS.

Waubonsee does not discriminate on the basis of any individual's actual or perceived characteristic protected by law in its programs or activities. Inquiries regarding this policy may be directed to: Michele Needham, Title IX/ADA/Section 504 Coordinator, Route 47 at Waubonsee Drive, Sugar Grove, IL 60554, compliance@waubonsee.edu.

Staff Name: _____	Title: _____
School: _____	
_____	_____
<i>E-mail Address</i>	<i>Office Phone</i>
How long have you known the student? _____	



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Counselor Evaluation Page 2

Current Grade Level: _____ Cumulative GPA: _____ Class Rank: _____ / _____
Unweighted

Did the student achieve proficiency in math on the most recent standardized assessment? ☐ Yes ☐ No

Did the student achieve proficiency in reading / language arts on the most recent standardized assessment? ☐ Yes ☐ No

Standardized Assessment: _____ Semester / Year: _____

What is the student's overall academic performance? ☐ Poor ☐ Average ☐ Good ☐ Excellent

What type of curriculum is the student enrolled?

☐ Special Education ☐ Developmental ☐ Regular Only ☐ Regular and Advanced ☐ Advanced

Has the student had any discipline or behavioral issues in the previous 12 months? ☐ Yes ☐ No

If yes, please indicate below and include a copy or summary.

☐ Aggressive Behavior ☐ Disobey Staff Directives ☐ Excessive Absences/Tardies ☐ Gang Activity
☐ Interference / Disruption of Educational Function ☐ Trespassing ☐ Vandalism / Property Damage / Theft
☐ Electronic Device ☐ Misuse of Technology ☐ _____

What are the student's habits with regard to attendance and punctuality?

☐ No Issues ☐ Occasional / Monthly Issue ☐ Frequent / Weekly Issue ☐ Daily Issue

What is the student's level of maturity? ☐ Below Average ☐ Average ☐ Above Average ☐ No Opinion

Does the student have an Individualized Education Program (IEP) or a Section 504 Plan? Yes No

If yes, please attach a complete copy including the most recent review.

Please indicate any academic, personal, or family circumstances we should take into consideration when considering this student's application:

Recommendation:

☐ Do not recommend ☐ Recommend with reservations ☐ Recommend ☐ Highly recommend

Staff Name

Signature

Date



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New Student Application 2024

Teacher Evaluation

Student Name: _____
Last First Middle Student Number:

The student and parent should not write below this line.

The above named student has applied for admission to the Waubonsee Upward Bound Program, a college completion program serving students at East Aurora High School and West Aurora High School. The program assists potential first generation college students who reside in limited income households. Upward Bound provides the support and motivation necessary to graduate high school and earn a post-secondary degree. Students participate until they graduate from high school and receive all services at no cost. Students are not required to attend Waubonsee Community College. Upward Bound is funded by the U.S. Department of Education and is a department within Student Development at Waubonsee Community College.

For more information, contact the TRIO Upward Bound Manager at (630) 466-6800, upwardbound@waubonsee.edu, or visit waubonsee.edu/upwardbound

Please assist us in evaluating this student by completing this recommendation form. You may return the recommendation form and documents to the student for submission, send via e-mail, or interoffice to Waubonsee Upward Bound at EAHS / WAHS.

Staff Name: _____ Title: _____

School: _____

E-mail Address

Office Phone

How long have you known the student? _____

What is the students overall academic performance? Poor Average Good Excellent

What is the student's level of maturity? Below Average Average Above Average

Please select the characteristics that usually describe the student:

- | | | | | |
|---|---|--|---|--|
| ☐ Honest | ☐ Responsible | ☐ Respectful | ☐ Obeys school / class rules | ☐ Leader |
| ☐ Accepts responsibility for his/her actions | ☐ Gets along with others | | ☐ Positive influence | |
| ☐ Completes and submits assignments on time | | ☐ Arrives to class on time and prepared to work | | |
| ☐ Shows initiative | ☐ Seeks out assistance | ☐ Actively participates in class | | ☐ Appropriate behavior in class |

Teacher Evaluation Page 2

How would you describe the student in the following areas?

Critical thinking	☐ Below Average	☐ Average	☐ Above Average
Problem solving	☐ Below Average	☐ Average	☐ Above Average
Decision making	☐ Below Average	☐ Average	☐ Above Average
Persistence	☐ Below Average	☐ Average	☐ Above Average
Work ethic	☐ Below Average	☐ Average	☐ Above Average
Teamwork	☐ Below Average	☐ Average	☐ Above Average
Organizational skills	☐ Below Average	☐ Average	☐ Above Average
Time management	☐ Below Average	☐ Average	☐ Above Average
Prioritization	☐ Below Average	☐ Average	☐ Above Average
Creativity	☐ Below Average	☐ Average	☐ Above Average
Communication	☐ Below Average	☐ Average	☐ Above Average

Please indicate any academic, personal, or family circumstances we should take into consideration when considering this student's application:

Recommendation:

☐ Do not recommend ☐ Recommend with reservations ☐ Recommend ☐ Highly recommend

Staff Name

Signature

Date

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New Student Application 2024

Teacher Evaluation

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Staff Name: _____ Title: _____

School: _____

E-mail Address

Office Phone

How long have you known the student? _____

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- | | | | | |
|---|--|---|--|---------------------------------|
| ☐ Honest | ☐ Responsible | ☐ Respectful | ☐ Obeys school / class rules | ☐ Leader |
| ☐ Accepts responsibility for his/her actions | ☐ Gets along with others | ☐ Positive influence | | |
| ☐ Completes and submits assignments on time | ☐ Arrives to class on time and prepared to work | | | |
| ☐ Shows initiative | ☐ Seeks out assistance | ☐ Actively participates in class | ☐ Appropriate behavior in class | |

Teacher Evaluation Page 2

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Prioritization	☐ Below Average	☐ Average	☐ Above Average
Creativity	☐ Below Average	☐ Average	☐ Above Average
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Please indicate any academic, personal, or family circumstances we should take into consideration when considering this student's application:

Recommendation:

☐ Do not recommend
 ☐ Recommend with reservations
 ☐ Recommend
 ☐ Highly recommend

Staff Name

Signature

Date

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