



227 Living and Learning, Burlington, VT 05405

Phone: 802-656-2961 Fax: 802-656-0055

Eligibility and Parent/Guardian Permission Form

Dear Parent or Guardian:

TRIO/Upward Bound is a federally funded college preparatory program that assists students in finishing high school with the goal of attending college. By signing this document, you are certifying that you:

- 1. Meet the income guidelines as mandated by the Department of Education and/or;
2. That neither you nor your spouse holds a four-year college degree.

Personal Information

Student Name: (Last) (First) (Middle) Gender: M F

Mailing Address: (Street) (City) (State) (Zip Code)

Date of Birth: Age: High School E-Mail:

Graduation Date: Home Phone Number:

Participate in Talent Search? Yes No

Social Security: US Citizen Permanent Resident Other

Parent/Guardian Name: Work Phone Number:

Eligibility Information

I, (parent/guardian name) give my child, permission to participate in the TRIO/Upward Bound Project at the University of Vermont. My child qualifies for the program because: (Please check all that apply)

- Neither my spouse nor I have obtained a four-year college degree at the time of this application.
My family meets the income guidelines as mandated by the United States Department of Education.

(See TRIO Programs' Family Income Table on back of this paper.)

- I meet both guidelines as stated above.

Parent/Guardian Signature: Date:

# Upward Bound/TRiO PROGRAMS FAMILY INCOME TABLE

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School Year 2005-2006

Family Size	2004 Taxable Family Income*
1	\$14,355 or less
2	\$19,245 or less
3	\$24,135 or less
4	\$29,025 or less
5	\$33,915 or less
6	\$38,805 or less
7	\$43,695 or less
8	\$48,585 or less
For more than 8	Add \$4,890 in TAXABLE INCOME for each family member

**\*From 2004 tax return Form 1040, line 42; or Form 1040A, line 27; or  
Form 1040 EZ, line 6**

## STUDENT STATEMENT

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Please submit this statement with the Eligibility and Parent's Permissions Slip in order to complete your application for the University of Vermont's Upward Bound Program.

How did you hear about Upward Bound? \_\_\_\_\_

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Why do you want to be in Upward Bound? \_\_\_\_\_

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What do you want to do after completing high school? \_\_\_\_\_

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What are your interests, i.e., hobbies, athletics, extra curricular activities? \_\_\_\_\_

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**Admission to Upward Bound is based on the qualifications of the applicant without regard to gender, creed, national origin, or handicap.**

Applicant's Signature: \_\_\_\_\_

Date of Application: \_\_\_\_\_

UPWARD BOUND TRANSCRIPT RELEASE FORM

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I hereby give my authorization to: \_\_\_\_\_  
(Name of School)

to release transcripts and other pertinent records for : \_\_\_\_\_  
(Student)

to the University of Vermont Upward Bound Program. If accepted into the Upward Bound Program, the school may continue to release the above-mentioned records so long as he/she is a participant in the program.

\_\_\_\_\_  
(Signature of Parent/Guardian)

\_\_\_\_\_  
(Date)