



The
UNIVERSITY
of VERMONT

TRiO
UPWARD BOUND

234 Living and Learning, Burlington, VT 05405

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

Application Form

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

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

Date of Birth: _____ Age: _____ High School _____ Grade: _____

Home Phone Number: _____ Parent Cell #: _____ Student Cell #: _____

Parent E-Mail: _____ Student Email: _____

VSAC Outreach: Yes No Social Security Number: _____ - _____ - _____
 US Citizen Permanent Resident Other _____ Language(s) Spoken at home: _____

Student lives with: Both Parents Mother Only Father Only Guardian Other _____

Parent/Guardian Name: _____ Employer: _____

Parent/Guardian Name: _____ Employer: _____

Eligibility Information

Is the student a foster child? Yes No

If yes, you may stop here. If accepted, you will need to provide proof of state custody.

As reported on last year's Federal Income Tax Return, what was your **taxable** income? (Form 1040 line 43 or Form 1040A line 27): _____ Number of exemptions (line 6d): _____

Filing status: Married, filing jointly Married, filing individually Single, Head of Household Other

Did either the natural or adoptive parent, with whom the student is now living, graduate from a four year college or university? Yes No

I certify that the information above is true and accurate as reported. I agree to provide supporting documents as requested.

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

Please submit this form and the Transcript Release Form to your School Counselor or Upward Bound [Adam Hurwitz, adam.hurwitz@uvm.edu].