



Office Use Only

Eligibility:

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Approved By: _____

Date: _____

ENROLLMENT APPLICATION

Personal Information

All fields must be filled in.

1. Student Name: _____

2. Address: _____

City: _____ State: _____ Zip: _____

3. Home Phone Number: _____

Student E-Mail: _____

Student Cell Phone: _____

4. Social Security Number*: _____

5. Date of Birth: _____ (*Please attach Birth Certificate)

6. Sex: Male Female

Race: Black or African-American White, non Hispanic-Latino Asian, non Hispanic-Latino

Hispanic/Latino Native Hawaiian or Other Pacific Islander, non Hispanic-Latino

Two or more races, non Hispanic-Latino

7. Are you a U.S. Citizen? Yes

No *Alien Registration #: _____

(*Please attach copy of card or official letter)

Caregiver Information

Father/ Male Guardian Name: _____ Cell phone #: _____

Mother/ Female Guardian Name: _____ Cell phone #: _____

The student resides with: Both Father/Male Guardian

Other: _____ Mother/Female Guardian

Guardian Email: _____

Educational Information

1. School Applicant Currently Attends: _____

2. Secondary Schools Previously Attended: _____

3. Current Grade Level: _____

4. Grade point average (GPA): _____

5. Expected Date of Graduation: _____

Eligibility Information

The Brooklyn College Educational Talent Search Program is a federally funded TRiO program designed to provide services to students of low-income, first generation families. We are required to document and verify your family's income and educational background to determine eligibility. Supporting documents may be requested.

- 1. Does either parent with whom the applicant now lives or lived with before turning 18 have a 4-year college degree? Yes No
- 2. If the applicant is under age 18, is he/she a ward of the State of New York (in foster care placement)? Yes No
- 3. Does the applicant receive Free/Reduced Lunch? Yes No
- 4. Does the applicant participate in other programs? Yes No

If Yes, please list: _____

5. Parent/ Guardian Income: Information for this section is to be based on the most recent document available.

a. Employed: Adjusted Gross Income (AGI): \$ _____ (yearly only)

If the student resides with BOTH parents, the AGI should reflect their **COMBINED AGI. The AGI can be found on a tax return forms on the Chart.*

Tax Return Form Chart	
Form	Line #
1040	37
1040A	21
1040EZ	4

b. Unemployed/Federal Assistance Received:
Type: _____ Amount: \$ _____

6. How many people live in the household, including the applicant? _____

Applicant Signature of Verification

I understand that in order to grow personally and academically, I need to commit myself to attend Educational Talent Search activities each program year (September 1 to August 31).

Applicant Name (Printed): _____

Signature of Applicant: _____ Date: _____

If the previously named parent/guardian or adult to contact in case of an emergency cannot be contacted, or if time is an important factor, I authorize the staff to take the most reasonable action possible in the situation.

Under penalties of immediate expulsion from the program, reimbursement of all funds allocated to services to the applicant, and/or possible legal actions, I declare that I have examined all sections of this application and its statements, and to the best of my knowledge and belief, they are true, correct, and complete.

Parent/ Guardian Name (Printed): _____

Signature of Parent/ Guardian: _____ Date: _____



STUDENT RECORDS RELEASE

Student Name: _____

As part of participation in the Brooklyn College Educational Talent Search Program (BCETSP), TRIO, I hereby consent to the release of all personal and academic related documents (birth certificate, transcripts, etc) related to my son/daughter by my son/daughter’s high school to BCETSP. I understand that access to my child’s personal and academic documents will help expedite and advance the start of service and type of support he/she receives by BCETSP. I understand that this information will not be shared with any third-party institution and will be held confidential and exclusive to BCETSP staff.

Parent/Guardian Name: *(Print)* _____

Signature of Parent/Guardian _____ Date: _____

Address of Parent/Guardian: _____

MEDIA RELEASE CONSENT (Check only one of the following.)

I hereby consent to the participation in interviews, the use of quotes, and the taking of photographs, movies or video tapes of the student named above by the Brooklyn College Educational Talent Search Program.

I also grant to Brooklyn College Educational Talent Search Program the right to edit, use, and reuse said products for non-profit purposes including use in print, on the internet, and all other forms of media. I also hereby release Brooklyn College, CUNY and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

I do not consent to the use of my student’s photo/image.

Parent/Guardian Name: *(Print)* _____

Signature of Parent/Guardian _____ Date: _____

Address of Parent/Guardian: _____