

**Veterans Upward Bound Program**

# Application for Services

**For Staff use Eligibility:**  LIFG  LI  FG  Academic Need **Documents:**  Taxes  DNF Taxes  DD214  Compass  
**Services:**  Classroom  Workshop  Online  Online Tutorials  Admissions/FA/Advising/CAI  Other  
 Expected Start: \_\_\_\_\_ Project Location: \_\_\_\_\_ Reviewed By: \_\_\_\_\_

Personal Information					
Name	Last	First	Middle	Social Security #	Date of Application
Address				Date of Birth	Birthplace (City, State)
City	State	Zip	Preferred method of contact? <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Mail		
Email Address			Day Phone	Cell Phone	Evening Phone
Emergency Contact Name			Phone	Relationship	

Education	
<b>High School:</b> Have you completed High School? <input type="checkbox"/> HS Graduation year _____ <input type="checkbox"/> GED Graduation year _____ <input type="checkbox"/> Not completed	
<b>College/Technical School:</b> <input type="checkbox"/> College Graduate <input type="checkbox"/> Degree _____ Enrolled in a 4-year college/2-year program? <input type="checkbox"/> Never Enrolled <input type="checkbox"/> Enrolled previously Year _____ <input type="checkbox"/> Currently enrolled What college(s) did you attend? _____	
Do you have a defaulted student loan? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
What is your future education/career goal? _____	
After completing the Veterans Upward Bound Program, what are your education plans? _____	

Military Service	
<b>Service</b> <input type="checkbox"/> Air Force <input type="checkbox"/> Marine Corps <input type="checkbox"/> Coast Guard <input type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Reserve/NG Date of enlistment: _____ Date of discharge: _____ Were you deployed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you eligible for G.I. Bill education benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure <input type="checkbox"/> I am interested in using my G.I. Bill while enrolled in VUB. Do you have a disability related to your military service? <input type="checkbox"/> Yes ____ % <input type="checkbox"/> No Rated for: _____
<b>Type of Discharge:</b> <input type="checkbox"/> Honorable <input type="checkbox"/> Bad Conduct <input type="checkbox"/> General <input type="checkbox"/> Dishonorable <input type="checkbox"/> Other than Honorable <input type="checkbox"/> Other _____	<b>Select one:</b> <input type="checkbox"/> I served at least 181 days of active duty service. <input type="checkbox"/> I did not serve 181 days of active duty service, but was discharged with a service-connected disability. <input type="checkbox"/> Other _____

**Completion of the following is required for reporting and verification purposes.  
 Responses are kept confidential!**

<b>Employment</b> <input type="checkbox"/> Unemployed <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Retired	<b>Documented Disability?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Ethnicity</b> Are you Hispanic/Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Race: Check all that apply</b> <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White			

Citizenship	
Are you a Citizen, National, or Permanent Resident of the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "no" do any of these situations apply? <input type="checkbox"/> I am in the United States for other than a temporary purpose (please provide evidence from the Immigration and Naturalization Service of your intent to become a permanent resident). <input type="checkbox"/> I am a permanent resident of Guam, the Northern Mariana Island, or the Trust Territory of the Pacific Islands. <input type="checkbox"/> I am a resident of the Freely Associated States – the Federated States of Micronesia, The Republic of the Marshall Islands, or the Republic of Palau.	

**First Generation Status**

Has either parent graduated from a college or university with a 4-year (baccalaureate) degree?  
Mother:  Yes  No      Father:  Yes  No

**Income**  
**Complete ONE of the two boxes below.**

**Complete this item if you DID file a tax return last year**  
I filed an income tax return last year. The number of individuals currently living in my household and/or claimed as dependents (including yourself) is \_\_\_\_\_.  
My total *taxable* income for last year was:  
 \$0 - \$17,655 (1)       \$42,616 - \$48,855 (6)  
 \$17,656 - \$23,895 (2)       \$48,856 - \$55,095 (7)  
 \$23,896 - \$30,135 (3)       \$55,096 - \$61,335 (8)  
 \$30,136 - \$36,375 (4)       over \$61,336  
 \$36,376 - \$42,615 (5)

**Complete this item if you did NOT file a tax return last year**  
I did not file a tax return last year. My total *non-taxable* income for last year (from all sources) was \_\_\_\_\_ and the number of individuals currently living in my household and/or claimed as dependents (including yourself) is \_\_\_\_\_.

**What Veterans Upward Bound Services are you most interested in?**

**Check all that apply**  
 Assessment of academic skills  
 Development of an education or career plan  
 GED completion  
 Assistance with financial aid and veterans' benefits application  
 Referral to community/veterans' agencies and supportive services

Assessment of career interests  
 Assistance with postsecondary school applications  
 Information about college degree plans and programs  
 Cultural and social opportunities  
 Study Skills  
 College visits/tours

Academic refresher courses  
 Math  
 Science  
 Foreign Language  
 Composition  
 Literature  
 Reading  
 Computer  
 Financial Literacy

**How Did You Hear About Veterans Upward Bound?**

Referral from community agency  
 Referral from veterans' agency (VA, Vet Center)  
 Advertisement  
 Our website  
 Referral from a school or educational institution

Word of mouth/walk-in  
 Referral from another TRIO project  
 Referral from non-TRIO program  
 Other  
\_\_\_\_\_

**Safety and Security**

*A felony under Montana State law is defined as a crime for which more than one year in prison may be imposed.*  
1. Have you ever been convicted of a felony (please include instances of deferred sentencing)?  
 Yes  No  
2. Have you ever been subjected to court-ordered confinement for threatening or causing physical or emotional injury to persons or property?  
 Yes  No

*Suspension is defined as a sanction imposed for disciplinary reasons that results in a student leaving school for a fixed time period, less than permanently. Dismissal from a college for disciplinary reasons is defined as permanent separation from an institution of higher education on the basis of conduct or behavior.*  
3. Have you ever been disciplined, suspended from, or placed on probation at any educational institution for non-academic reasons?  
 Yes  No  
4. Have you ever been required to register as a sexual or violent offender?  Yes  No

*An affirmative response to any of these questions will not prevent admission to VUB, but any falsification or omission may result in dismissal from the program. A criminal history will not bar college admissions, but there is a process college applicants must follow to report it, and it may include an interview with a campus official. An applicant's admission may be deferred or denied.*

I would like to participate in the Veterans Upward Bound program and receive the free services provided. I hereby certify that the information provided in this application is accurate and complete to the best of my knowledge.

Applicant Signature \_\_\_\_\_ Social Security # \_\_\_\_\_ Date \_\_\_\_\_

**Confidentiality & Release of Information Policy**

The Veteran's Upward Bound program, under the US Department of Education, is authorized to maintain an information file on program participants (20 USC 123 1a). The personal information you provide will be used to determine your eligibility for this program, establish eligibility for other programs/benefits you may be entitled to, and to identify needs and ongoing concerns. Unless written permission is given by you, information maintained in your file will remain confidential and will not be released to a third party or agency. Your file is closed upon graduation or termination from the program. As required by law, the program is responsible for tracking academic performance of our participants until graduation or termination of a college or training program. Student records are kept for a period of eight years, and academic tracking records are maintained as long as you are pursuing college or training. Furthermore, I authorize VUB to collect information from third party(ies) regarding previous academic performance and proof of military service such as colleges/universities, Veterans Affairs offices and other VA related facilities on my behalf.