



Participant Application/Transcript/Financial Release

Student Information	School Currently Attending: _____ Current Grade Level: 6 7 8 9 10 11 12	
	Student's Name _____	Student Cell Phone _____
	Parents's Cell _____	Home Phone _____
	Mailing Address _____	City _____ State _____ Zip _____
	Student's SSN: _____ Student's Birthdate: _____	Gender: Male Female
	US Citizenship: Y N (You must be a US Citizen or legal resident to participate in Project ASPIREE.) Is English your first/primary language? (Circle) Yes No Circle One: Hispanic/Latino Not Hispanic/Latino Circle Ethnic Origin: Asian American Indian/Alaskan Native Native Hawaiian or Other Pacific Islander Black/African American White 2 or more races	
Parent Information	In order to fulfill United States Department of Education Regulations concerning parental college status and income disclosure, it is necessary to complete the following for participation in this grant program. Has either parent that the student lives with obtained a Bachelor's Degree? <input type="checkbox"/> Yes <input type="checkbox"/> No Where? _____	
	Does your family QUALIFY for any of the following programs? Please circle all that apply: TANF WIC Food Stamps SS/SSDI/SSI Heating Assistance Foster child/Ward of the court AFDC Cash Assistance Textbook Assistance Federal Free Lunch Program 21 st Century Scholar	
	Please check one of the following Family Taxable Income Ranges. Taxable Income is usually lower than adjusted gross income. Effective January 12, 2022, until further notice. *Taxable income can be found on: [Form 1040- line 43] [Form 1040A- line 27] [Form 1040EZ- line 6]* \$0--\$20,385 _____ \$20,386--\$27,465 _____ \$27,466--\$34,545 _____ \$34,546--\$41,625 _____ \$41,626--\$48,705 _____ \$48,706--\$55,785 _____ \$55,786--\$62,865 _____ \$62,865--\$69,945 _____	
	Family members living in household: 1 2 3 4 5 6 7 8 or more above \$69,946 _____	
Certification and Release	I certify that the information given above is true and correct. I authorize counselors or schools to release my child's transcript information regarding educational progress, any financial aid award, and enrollment status to Project ASPIREE. I authorize Project ASPIREE to transmit this information for the purpose of assistance in making post-secondary educational plans. I relieve Project ASPIREE of any responsibility for accidents, illnesses, or injuries that may result from participation, and I authorize the use of my child's photo in Project ASPIREE publications, newsletters, and websites. I also agree to encourage my student in his/her plans to successfully complete high school and enter an institution of postsecondary education. I give Project ASPIREE permission to contact my student via cell phone/text or email.	
	Parent/Guardian Signature _____	Date _____
	Parent E-mail address _____ to be used for electronic communication by Project ASPIREE staff. Please be advised that this information will be kept strictly confidential, and will be used only for eligibility determination, student demographic recordkeeping, needs assessment, federal reporting, and other administrative purposes.	

Project ASPIREE, a Talent Search program, is 100% federal TRIO funded at \$328,413.00 (Effective 09/01/2022).

Office use only: Received _____ Outreach Advisor _____ Director _____ Eligibility: FG _____ LI _____ LIFG _____ Other _____