

## **EDUCATIONAL TALENT SEARCH ADULT ENROLLMENT APPLICATION**

220 Wolf Ledges Parkway (Buckingham Center) Suite 051, Akron, OH 44325-7909 Office: 330-972-5771 Fax: 330-972-8553 <u>www.uakron.edu/aap/ets/</u>



## **OBJECTIVE**

Educational Talent Search (ETS) is a federally funded TRiO program which provides services to assist in the successful enrollment or re-enrollment of students into postsecondary education. The Educational Talent Search Program is sponsored by The U.S. Department of Education and The University of Akron. The total dollar amount of Federal Funds awarded for the 5-year grant period (2021-2026) is approximately \$2,332,800. Our mission is to provide academic, social, and cultural experiences for students from grades 6th-12th. We also provide academic services for adults who have not completed high school or received their GED as well as those who stopped out of college. The ETS program enhances academic instruction through an intensive summer program and academic activities throughout the year.

## **SERVICES**

ETS provides the following services at no cost to the student:

- Financial Aid Information
- Monthly Workshops
- Tutoring
- Career Assessment & Exploration
- College Campus Visits
- ACT Preparation Classes
- ACT Waivers
- College Application Waivers
- Assistance in Completing College Applications
- Assistance with Financial Aid Applications & Scholarships

# **OPPORTUNITIES**

ETS provides the following opportunities for students at no cost to the student:

- 3 Week Summer Enrichment Program (1 Week for Seniors)
  - \* Academic Preparation Courses
  - \* Cultural Field Trips
- Special Events During the Academic Year
- Ceremonies

# **STUDENT EXPECTATIONS**

In order to participate in the ETS program, students are expected to:

- Maintain a 2.3 or above GPA
- Attend In-School Workshops
- Attend Tutoring if their GPA falls below a 2.3
- Be Respectful & Have Good Character

## **ELIGIBILITY**

Educational Talent Search provides services to a diverse population of students. 2/3 of the ETS participants are low income and potential first generation college students. The remaining 1/3 of the participants are either low income, potential first generation, or neither. All students are welcome to apply if they have a 2.3 grade point average or above and are enrolled in our service area

# **TO APPLY**

- Contact your School Counselor for an Application
- Contact the ETS office for an application
- Apply online at: <u>www.uakron.edu/aap/ets/</u>



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<b>College Enrol</b>	lment Informa
 List your career or major in	terests:
 List the post-secondary sch	ools, colleges, or universiti
1)	2)
Please provide the date (mo	onth and year) you plan to b
Fall (August) 20	Spring (January

Have you taken the ACT/SAT? It is typically	not re
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] Yes	s, I have taken the ACT o	or ACT
Score		

Who referred you to ETS:

## **HOUSEHOLD INFORMATION**

What is the range of your total TAXABLE family income? "Taxable In-Does your family receive benefits from any of the following? come" is the amount you earned after exemptions and deductions are figured **No Benefits Received** (Line 6 of your 1040 EZ form, Line 43 of your 1040 form, or Line 27 of your □ Unemployment □ Disability 1040 A form). □ Veteran's Benefits ark the appropriate box. Pension Benefits □ Social Security Benefits ■ Food Stamps □ \$27,466 - \$34,545 Housing Assistance □ \$48,706 - \$55,785 □ Eligible for Free Lunch ■ \$69,946 + □ Eligible for Reduced Lunch □ Public Assistance (TANF and/ How many in the household are supported by this income? or OWF) Medicaid Do you have a 4 year college degree? No Yes No □ Other: Does either parent with whom you live have a 4 year college degreee?

Provide your actual taxable i Actual Taxable Income:		nco \$_	ome in the blank space and	m
	\$0 - \$20,385		\$20,386 - \$27,465	C
	\$34,546 - \$41,625		\$41,626 - \$48,705	C
	\$55,786 - \$62,865		\$62,866 - \$69,945	C

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## **STUDENT INFORMATION**

Last Name	First Name	Middle Name		ldle Name
Home Address		City		Zip Code
	Home	Cell		/ / Date of Birth:
Primary Telephone Number				
	Cell	Neighbor	Relative	Gender Assigned at Birth:
				Emale
Alternative Telephone Number				Male
Email Address:				Preferred Gender:
	Female			
What languages are spoken at home?				□ Male
In what country were you born?				□ Other
Consideration for physical limitat	ion? Describe:			
• Consideration for hearing limitation	on? Describe: _			Preferred Name:

Name of the school you last attended?

Did vou complete High School?

If yes, what year did you graduate from from Hgh School?

Do you have a GED?

Did you attend College?

Are you currently enrolled in GED classes? What college did you attend and how long?

## ETHNIC/ RACIAL BACKGROUND (USED FOR STATISTICAL PURPOSES ONLY)

☐ African American

□ Asian: Specify:\_\_\_

□ Hispanic/ Latino

American Indian/ Alaskan: Tribal Affiliation:

Native Hawaiian/ Other Pacific Islander
Other: Specify:

## **STUDENT U.S. CITIZENSHIP**

Are you an U.S. □ Yes, I am an U.S. Citizen Citizen?

■ No, but I am an eligible non-citizen

□ Caucasian/ White

If you are NOT an U.S. Citizen, we will need verification of permanent residency from the Immigration **Department: Permanent Resident** 

Number:

Date Issued:

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## TION

ies you are interested in attending:

3)

begin your post secondary(college) education:

Spring (January) 20

Summer (June) 20

equired for those over 21 years old.

 $\Box$  No, I have not taken the ACT or SAT



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FIRST NAME

I hereby consent to the release of my school/college records to The University of Akron's Educational Talent Search program. I understand that these records may include: high school/ college transcripts, grade reports, test results, and financial aid award information. I also grant permission to the Educational Talent Search staff to speak with teachers/counselors/principals at my school in order to obtain and exchange information as part of the services I will receive through Educational Talent Search program. I further understand this information will be kept on file in the Educational Talent Search office and will be kept confidential.

Signature

## **ESSAY QUESTION**

Write briefly why you want to be in Educational Talent Search (ETS) and what you want to receive fron the program.



## **CERTIFYING SIGNATURE**

I certify that this application has been filled out completely and correctly to the best of my knowledge. I certify that the income information as stated above is accurate. I understand that providing false information could result in my being ineligible for ETS. I understand that as an ETS participant who is not currently enrolled in either high school or a postsecondary program, I am eligible for services until I enroll in a postsecondary program. I understand that I am expected to strive toward my goal of enrollment through attendance at workshops, field trips, or office visits. I further understand that Educational Talent Search will only provide services for one calendar year. I understand it is my responsibility to provide updated information regarding my post-secondary enrollment status to ETS personnel.

**Participant Signature** 



## **ACADEMIC RECORDS RELEASE FORM**

# **TO BE COMPLETED BY ADULT APPLICANTS**

### MIDDLE NAME

### LAST NAME

Date