

## CREIGHTON UNIVERSITY

# Classic Upward Bound

### Department of Educational Opportunity Programs

We are a federally funded program designed to assist students in developing the academic skills and personal growth necessary for successful completion of high school and admission to a four-year university or college. The Classic Upward Bound (CUB) program provides career exploration, academic, cultural, and social activities intended to build confidence and motivation, who will in turn lead students to succeed in college and have a better future. CUB is offered at no cost to participants.

#### Eligibility:

- Attend an Omaha metropolitan area high school and be currently in the 8<sup>th</sup>, 9<sup>th</sup>, 10<sup>th</sup>, or 11<sup>th</sup> grade.
- Have a strong desire and motivation to attend college or university
- Have minimum of a 2.00 GPA or higher
- Be a first-generation student (neither parent/guardian have graduated with a four-year degree) and/or meet federal income guidelines based on the U.S. Department of Education
- Be a U.S. citizen or permanent U.S. resident

#### Services:

##### **Academic Year**

- **Tutoring** – Participants are required to attend at least two hours of tutoring each week. Tutorial services are available for subjects taught in high schools that are a part of the college preparation core curriculum (i.e., English, Science, Math, Language).
- **Workshops** – CUB provides students with academic skill coaching, career counseling, ACT/SAT test preparation, and college selection advisement.
- **Saturday Morning Classes (SMC)**– Students attend classes every first and third Saturday of each month from 9:00 A.M. – 12:00 P.M. SMC includes ACT prep classes, supplemental academic instruction, hands-on activities, and off-campus field trips.
- **College Tours** – CUB participants will attend college tours locally and out of state, such as UNO, UNL, University of Kansas, University of Chicago, etc.
- **Cultural Activities** – To spark curiosity and increase exposure to new ideas and experiences, students attend activities such as musicals, theatre, workshops, museums, etc.
- **Community Service** – Students have opportunities to develop a stronger connection to their community, develop life skills, and create connections that can guide them to career opportunities.

##### **Summer Session**

- **Six-week Summer Residential Program** – During the summer, students that meet qualifications are invited to participate in the 6-week summer program held at Creighton University. Students live in one of the residence halls, attend core and elective classes, and experience the various sides of student life on a college campus.
- **End of Summer Trip** – During the week-long trip, students visit multiple universities and engage a variety of new academic, cultural, and social activities in different cities throughout the U.S. Past trips have included Miami, Denver, Washington D.C., and Los Angeles.

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*Thank you for applying for admission to the Creighton University  
Classic Upward Bound Program.*

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Applying to CUB requires completion of an application and gathering necessary documents to submit to the program for review. Before completing an application, discuss with your parent/guardian the eligibility requirements for the program. Feel free to call our office if you have any questions.

### **APPLICATION INSTRUCTIONS**

1. Please print or type. Applicant and parent/guardian should completely fill out all sections.
  2. Students should ask their guidance counselor, English teacher, science teacher, and math teacher to complete their evaluation forms. These forms should be returned to the student in a sealed envelope or sent directly to the Classic Upward Bound Program *via* email, fax, or mail.
  3. Attach a copy of your transcript showing at least your two most recent semesters.
  4. Attach a copy of the parent/guardian's most recent **Federal** income tax form(s). If taxes are not filed, letter of income may be submitted. (contact coordinator)
  5. Return completed materials via email or mail to:  
**Classic Upward Bound Office**  
**Creighton University**  
**Labaj Building**  
**523 N. 20th Street**  
**Omaha, Nebraska 68178**
- If you have any questions, please contact our office at (402) 280-2958 or email a Classic Upward Bound Coordinator.
  - Following the completion of this application, if you meet eligibility requirements, both the student and parent(s)/guardian(s) will be scheduled for an interview with the CUB coordinator. The interview is the final step of the application process before an admissions decision will be made.

**Applicants will NOT be contacted for an interview or considered for admission until the application is complete.**

**An application is considered complete when it contains:**

- A complete, signed Student Information form
- A complete, signed Parent Information form
- A complete, signed School Records Release form
- A complete, signed Guidance Counselor's form
- A complete, signed English, Math, and Science Teacher's Evaluation form
- Student's school transcript showing at least the two most recent semester grades
- Parent/guardian's proof of income

# STUDENT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Preferred name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Apt. # City State Zip

Home/Cell: \_\_\_\_\_ Student Email: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: M  F  Social Security #: \_\_\_\_-\_\_\_\_-\_\_\_\_

Do you identify as Hispanic/Latino:  Yes  No

Race:  African American  Caucasian/White  Asian  American Indian/Alaska Native  
 Native Hawaiian/Pacific Islander  Other: \_\_\_\_\_

Please list the names of those who live with you and their relation to you. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EDUCATION INFORMATION:

1. What Middle/High school do you currently attend: \_\_\_\_\_ School Year: \_\_\_\_\_
2. What is your current grade?  8<sup>th</sup> Grade  Freshman  Sophomore  Junior
3. If you are an 8<sup>th</sup> grader, what school are you planning on attending in the fall? \_\_\_\_\_
4. What do you plan to do after you graduate from high school? (Check all that apply):  Enlist in the military  
 Enroll in a technical/trade school  Attend a four-year college/university  Attend a community college  
 Full-time employment  Other(specify) \_\_\_\_\_

## OTHER INFORMATION:

1. Are you enrolled in another TRIO program (Upward Bound, Talent Search, Aim Institute, etc.)?  Yes  No  
If yes, which one: \_\_\_\_\_
2. Why are you interested in becoming a participant of the Classic Upward program? \_\_\_\_\_  
\_\_\_\_\_
3. When would you like to start CUB?  Fall  Spring  Summer Year \_\_\_\_\_
4. How did you hear about Upward Bound? \_\_\_\_\_

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

# PARENT/GUARDIAN INFORMATION

Name: _____ <div style="text-align: center; margin-left: 100px; margin-right: 100px;">                     First                      Last                 </div> Address: _____ <div style="text-align: center; margin-left: 100px; margin-right: 100px;">                     Street                                      Apt#                 </div> _____ <div style="text-align: center; margin-left: 100px; margin-right: 100px;">                     City                                      State                                      Zip                 </div> Home/Cell: _____ Work: _____ Relation to student: _____ Email: _____	Name: _____ <div style="text-align: center; margin-left: 100px; margin-right: 100px;">                     First                      Last                 </div> Address: _____ <div style="text-align: center; margin-left: 100px; margin-right: 100px;">                     Street                                      Apt#                 </div> _____ <div style="text-align: center; margin-left: 100px; margin-right: 100px;">                     City                                      State                                      Zip                 </div> Home/Cell: _____ Work: _____ Relation to student: _____ Email: _____
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**❖ Which Parent/Guardian is primary point of contact:** \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Please provide the name of an adult who can be contacted in case of an emergency involving your child.

Name: \_\_\_\_\_ Relation to applicant: \_\_\_\_\_

Address: \_\_\_\_\_ Home/Cell: \_\_\_\_\_ Work: \_\_\_\_\_

**ELIGIBILITY INFORMATION:**

1. Either parent/guardian obtain a degree from a 4-year college or university?  Yes  No
2. Is your child a United States citizen or permanent resident?  Yes  No If not a U.S. citizen, please provide Resident registration #: \_\_\_\_\_
3. What is the total TAXABLE income (the amount after deductions are subtracted as reported on your most recent Federal IRS tax form) \$ \_\_\_\_\_
4. Total number of persons claimed on your most recently filed tax returns (including yourself) \_\_\_\_\_

**If you did NOT file taxes, check here**

If you did not file an income tax return for the most recent year, please indicate your source(s) of income by checking the appropriate box(es) below and include a signed written statement verifying your annual income.

<input type="checkbox"/> Social Security	<input type="checkbox"/> Public Assistance	<input type="checkbox"/> Veteran's Benefits
<input type="checkbox"/> Unemployment	<input type="checkbox"/> Disability	

**Other: (please explain):** \_\_\_\_\_

**I declare that the information provided is to my knowledge fully true and correct.**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

**FOR OFFICE USE ONLY**

Family income: \$ \_\_\_\_\_ Family Size: \_\_\_\_\_

First Generation/Low Income     Low-Income only     First-Generation only

Current grade: \_\_\_\_\_ GPA: \_\_\_\_\_

Eligibility met? Y/ N



DEPARTMENT OF EDUCATIONAL OPPORTUNITY PROGRAMS  
CLASSIC UPWARD BOUND PROGRAM

**SCHOOL RECORDS RELEASE FORM**

**Student Permission:**

I, \_\_\_\_\_, hereby consent to the release of my academic records, including but not limited to transcripts, grade reports, test scores, course evaluations, attendance records, recommendations and other information regarding my school performance, to **Creighton University’s Classic Upward Bound Program**. This release is to be effective throughout my middle school, high school, and college career and includes my final transcripts upon graduation from secondary school and college. It is effective regardless of whether or not I am actively involved with Upward Bound Programs at the time of the records request.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
DOB DD/MM/YYYY

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip Code

**Parent/Guardian Permission:**

As the parent/guardian of \_\_\_\_\_, I hereby consent to the release of my child’s academic records, including but not limited to transcripts, grade reports, test scores, course evaluations, attendance records, recommendations and other information regarding my school performance – to **Creighton University’s Classic Upward Bound Program**. This release is to be effective throughout his/her middle school, high school, and college career and includes his/her final transcripts upon graduation from secondary school and college. It is effective regardless of whether or not my child is actively involved with Upward Bound Programs at the time of the records request.

I declare that the information provided is to my knowledge fully true and correct.

\_\_\_\_\_  
Parent/Guardian’s Signature

\_\_\_\_\_  
Date



**Educational Opportunity Programs  
Classic Upward Bound**

Labaj Building, 532 N 20<sup>th</sup> street, Omaha, NE 68178  
Office: 402.280.2958 Fax: 402.280.3032

**Guidance Counselor Evaluation**

The student listed below is applying to join the Classic Upward Bound Program (CUB) at Creighton University. Classic Upward Bound is an educational enrichment project funded by the United States Department of Education. It is designed to increase its members' academic skills so they can complete high school and enroll in the college of their choice. The program supplements its students' high school experience and assists them in academic preparation, career exploration, and self-development.

To assist our program in determining this student's academic motivation and need for program services, it would be greatly appreciated if you would complete this questionnaire. It is important that we have a thorough evaluation of the student's strengths and weaknesses. Please return the completed evaluation in a sealed envelope to the student, send it via fax or email, or mail it directly to the CUB office.

Thank you in advance for your anticipated cooperation. Should you have any questions or concerns that about the evaluation process, please feel free to contact the Classic Upward Bound office at (402) 280-2958.

**Student Name:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Counselor Name:** \_\_\_\_\_

Please rate the student according to your observation or knowledge:

1 = Excellent      2 = Good      3 = Satisfactory      4 = Unsatisfactory      0 = No opportunity to observe

	1	2	3	4	0	Explain areas of difficulty
Ability to understand and apply basic concepts for his/her grade.						
Is the student living up to his/her full potential in school?						
Behavior in school.						
Level of motivation in school.						
Level of initiative in seeking assistance when needed.						
Level of participation in extracurricular activities.						
Attendance and punctuality.						
Level of parental involvement in school.						
Ability/interest in maintaining a college preparatory curriculum.						
Level of interest in attending college.						
Potential for success in post-secondary education.						
Commitment of student to CUB for entire high school career.						
Commitment of parent to support student in CUB for entire high school career.						
Your anticipated level of support of student in CUB for entire high school career?						

Please provide any additional comments: \_\_\_\_\_

**Counselor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This form may be returned to the student in a sealed envelope, mailed directly to the CUB office, faxed to 402-280-3032, or emailed: [lucymontanez@creighton.edu](mailto:lucymontanez@creighton.edu) (9<sup>th</sup> & 10<sup>th</sup> grade applicants) or [deannaprentice@creighton.edu](mailto:deannaprentice@creighton.edu) (11<sup>th</sup> grade applicants).

**English Teacher’s Evaluation**

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Thank you in advance for your anticipated cooperation. Should you have any questions or concerns that about the evaluation process, please feel free to contact the Classic Upward Bound office at (402) 280-2958.

**Student Name:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Teacher’s Name:** \_\_\_\_\_

Please rate the student according to your observation or knowledge:

1 = Excellent      2 = Good      3 = Satisfactory      4 = Unsatisfactory      0 = No opportunity to observe

	1	2	3	4	0	Explain areas of difficulty
Ability to understand and apply basic concepts of your class/subject.						
Level of productivity <u>during</u> class. (Does the student stay on task, fully participate, and complete assignments?)						
Level of productivity <u>outside</u> of class. (Does the student complete assignments and the required amount of studying to perform well in your class?)						
Student’s <u>level of interest</u> in your class/subject. (Has the student expressed or demonstrated that your field is of interest to him/her?)						
Behavior in class. (Does student follow rules, accept feedback positively?)						
Level of required supervision. (Is the student able to work on his/her own?)						
Student’s <u>achievement</u> in your class/subject (Is the student living up to his/her full potential in your class/subject?)						
Attendance and punctuality for your class						

Please provide any additional comments: \_\_\_\_\_

**Teacher’s Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This form may be returned to the student in a sealed envelope, mailed directly to the CUB office, faxed to 402-280-3032, or emailed: [lucymontanez@creighton.edu](mailto:lucymontanez@creighton.edu) (9<sup>th</sup> & 10<sup>th</sup> grade applicants) or [deannaprentice@creighton.edu](mailto:deannaprentice@creighton.edu) (11<sup>th</sup> grade applicants).

**Math Teacher’s Evaluation**

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Thank you in advance for your anticipated cooperation. Should you have any questions or concerns that about the evaluation process, please feel free to contact the Classic Upward Bound office at (402) 280-2958.

**Student Name:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Teacher’s Name:** \_\_\_\_\_

Please rate the student according to your observation or knowledge:

1 = Excellent      2 = Good      3 = Satisfactory      4 = Unsatisfactory      0 = No opportunity to observe

	1	2	3	4	0	Explain areas of difficulty
Ability to understand and apply basic concepts of your class/subject.						
Level of productivity <u>during</u> class. (Does the student stay on task, fully participate, and complete assignments?)						
Level of productivity <u>outside</u> of class. (Does the student complete assignments and the required amount of studying to perform well in your class?)						
Student’s <u>level of interest</u> in your class/subject. (Has the student expressed or demonstrated that your field is of interest to him/her?)						
Behavior in class. (Does student follow rules, accept feedback positively?)						
Level of required supervision. (Is the student able to work on his/her own?)						
Student’s <u>achievement</u> in your class/subject (Is the student living up to his/her full potential in your class/subject?)						
Attendance and punctuality for your class						

Please provide any additional comments: \_\_\_\_\_

**Teacher’s Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Science Teacher’s Evaluation**

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Thank you in advance for your anticipated cooperation. Should you have any questions or concerns that about the evaluation process, please feel free to contact the Classic Upward Bound office at (402) 280-2958.

**Student Name:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Teacher’s Name:** \_\_\_\_\_

Please rate the student according to your observation or knowledge:

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	1	2	3	4	0	Explain areas of difficulty
Ability to understand and apply basic concepts of your class/subject.						
Level of productivity <u>during</u> class. (Does the student stay on task, fully participate, and complete assignments?)						
Level of productivity <u>outside</u> of class. (Does the student complete assignments and the required amount of studying to perform well in your class?)						
Student’s <u>level of interest</u> in your class/subject. (Has the student expressed or demonstrated that your field is of interest to him/her?)						
Behavior in class. (Does student follow rules, accept feedback positively?)						
Level of required supervision. (Is the student able to work on his/her own?)						
Student’s <u>achievement</u> in your class/subject (Is the student living up to his/her full potential in your class/subject?)						
Attendance and punctuality for your class						

Please provide any additional comments: \_\_\_\_\_

Teacher’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This form may be returned to the student in a sealed envelope, mailed directly to the CUB office, faxed to 402-280-3032, or emailed: [lucymontanez@creighton.edu](mailto:lucymontanez@creighton.edu) (9<sup>th</sup> & 10<sup>th</sup> grade applicants) or [deannaprentice@creighton.edu](mailto:deannaprentice@creighton.edu) (11<sup>th</sup> grade applicants).

# Creighton UNIVERSITY

## CLASSIC UPWARD BOUND PROGRAM

**Mrs. Anitra Townsend, Project Director**

Telephone: 402-280-2050

E-mail: [afd@creighton.edu](mailto:afd@creighton.edu)

**Ms. Deanna Prentice, Senior Coordinator**

Telephone: 402-280-2959

E-mail: [deannaprentice@creighton.edu](mailto:deannaprentice@creighton.edu)

**Mrs. Lucy Montanez, Coordinator**

Telephone: 402-280-2267

E-mail: [lucymontanez@creighton.edu](mailto:lucymontanez@creighton.edu)

### OFFICE:

Labaj Building

523 North 20th Street

Omaha, NE 68178

Telephone: 402.280.2958 \* Fax:402.280-3032

Office Hours: 8:00 a.m. - 4:30 p.m. Monday-Friday



### ALL INFORMATION IS CONFIDENTIAL

*Please note that all information provided in this application is protected by the privacy act. However, the Department of Education does have the authority to gather statistical data about the program and its participants in order to improve and measure the success of the Classic Upward Bound Program.*



*Funded at 100% by a grant from the United States Department of Education and affiliated with the Division of Academic Affairs at Creighton University.*