

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

(Please print student's full name)

**Grade:** 6 7 8 9 10 11 12

(Please circle the student's current grade above)

**School:** \_\_\_\_\_

(Please print the school's full name)

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

(month/day/year)

# TALENT SEARCH

PARTICIPANT APPLICATION



## ALL SERVICES ARE FREE!

Talent Search is a FREE educational program that works with the guidance counselor's office at your school to assist students in graduating from high school and enrolling in a college, university or career technical training program.

***All applicants are selected without regard to race, color, national origin, gender, age, or disability.***

**TALENT SEARCH IS FUNDED BY THE UNITED STATES DEPARTMENT OF EDUCATION  
AND SPONSORED BY LEWIS CLARK STATE COLLEGE**



**Lewis Clark State College  
500 8<sup>th</sup> Ave., RCH 215**

**Lewiston, ID 83501 Telephone: (208) 792 2928**

**TRIO**  
TALENT SEARCH

## **STUDENT INFORMATION**

**Name** \_\_\_\_\_

<i>Last</i>	<i>First</i>	<i>Middle</i>	<i>Prefers to be called</i>
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**Date of Birth** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Mailing Address** \_\_\_\_\_

Student Cell Phone (if applicable) \_\_\_\_\_

Personal Email: \_\_\_\_\_ School Email: \_\_\_\_\_

**U.S. Citizen:** Yes No **Sex:** M F Prefer not to say

**Ethnicity:** American Indian or Alaska Native Asian African American Hispanic/Latin  
Native Hawaiian or Pacific Islander White Two or More Races Other \_\_\_\_\_

Are you currently participating in any other college preparatory programs? If yes please list the programs:  
(Example: Upward Bound, GEAR UP, etc). \_\_\_\_\_

**Do you have siblings who were previously or currently in Talent Search? If yes, please list their names:**

List any younger siblings, their current grade level, and school:

**I am interested in joining TRIO Talent Search because I would like access to information or assistance with:**

Tutoring  
Academic Advising  
College Exam Preparations  
Scholarship/Financial Aid Info  
Financial Literacy

College Admissions  
Career Information  
Communication Skills  
Study Skills  
College Visits

Character Development  
Academic Counseling  
Decision Making  
Conflict Resolution

What do you plan to do after you graduate from high school? (Check one)

**Work**      **Community College**      **4-Year Institution**      **Military**      **Trade/Vocational School**      **Other**

How can Talent Search help you meet your goals after high school graduation?

Were you referred by another TRIO participant? If yes, please list their name

**If accepted into the Talent Search Program, I agree to meet with my Talent Search Academic Coordinator, attend meetings, and do my best academically. (sign below)**

**Student Signature:**

Date:

(month/day/year)

# PARENT / GUARDIAN INFORMATION

Please list the name(s) of the adult(s) the student lives **MOST** of the time, and select the correlating relationship:

Both Parents Guardian(s)	Mother Stepdad	Father Stepmom	Grandparent Aunt/Uncle	Older Sibling Cousin	Foster Parent Other _____
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**Name of Adult #1** \_\_\_\_\_

Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Contact Preference: Cell Work Email Mail

**Name of Adult #2** \_\_\_\_\_

Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Contact Preference: Cell Work Email Mail

*If student is currently in **FOSTER CARE** please provide the name and contact information for the student's **FOSTER CARE SOCIAL WORKER***

Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**What is the HIGHEST level of education obtained by either BIOLOGICAL or ADOPTED PARENT, with whom the student lives.**

Bachelor's Degree

Program Certificate

Associate Degree

High School Diploma or GED

Some High School

8<sup>th</sup> Grade

Other

**If either parent (biological or adopted) has a college degree, what was the program of study and where was the degree obtained?**

(Example: Bachelor's in Psychology at Lewis-Clark State College)

## CONFIDENTIAL HOUSEHOLD AND FINANCIAL INFORMATION

The U.S. Department of Education funds Talent Search Programs to serve a percentage of students who meet the eligibility criteria of low-income, first-generation potential college students (meaning neither parent has a four-year college degree "Bachelor's Degree"). In fulfilling this federal regulation, we ask that you provide the following information used to determine eligibility. The information you provide is confidential and used solely to determine program eligibility.

**Total number of people in the household (including the student):** \_\_\_\_\_

**What was your household income last year? \$** \_\_\_\_\_

(NOTE: Don't use gross or net income, but your **TAXABLE INCOME**, found on Line 15 of the IRS 1040 form.)

**Is student eligible for any of the following? Check all that apply.**

Free lunch program

SNAP benefits

Section 8 housing

## RELEASE OF RECORDS (required for program participation)

Records will be used to assess student needs, monitor progress, document eligibility, and for reporting purposes. **This information is confidential and protected under the General Education Provision Act.** Confidential information will not be released without your written consent: *I hereby grant permission for the Talent Search program at LC State to have access to educational records of (name of student) \_\_\_\_\_ including (but not limited to) grades, test scores, free/reduced-price lunch eligibility, class schedules, postsecondary enrollment, discipline records and attendance for the duration of the student's enrollment in Talent Search. This also authorizes the postsecondary institutions to release to the LC Talent Search program copies of college academic enrollment and student aid award information.*

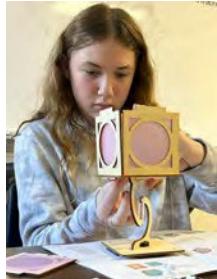
*I authorize the use of my child's photo by Talent Search for publicity and recruitment purposes for the duration of the student's involvement in the Talent Search program (social media posts, brochures, etc.).* **YES** **NO**

*I authorize Talent Search advisors to access my child's Powerschool.* **YES** **NO**

*I, the undersigned, confirm that all the information on this application is true to the best of my knowledge. My child has my support in this endeavor as they strive to be engaged in achieving success through Talent Search. (Signature required below):*

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

Date \_\_\_\_\_



## Office Use Only

Student Motivation:			Student Attendance:			Student Behavior:		
Idle	Average	High	Irregular	Good	Excellent	Indifferent	Good	Excellent

*Based on the available information, it is my belief that the above-named individual possesses the academic potential to successfully enroll in and complete a postsecondary education program.*

**TRIO Official Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Participant Eligibility Verification:

*The student listed in the application has provided family income information, in order to be considered eligible for services through Talent Search. The Staff has attempted to gain the most verifiable means of documentation for this participant. the form used for eligibility was by my determination the most*

**Both** Neither parent has a bachelor's degree \_\_\_\_\_ Number of people in household \_\_\_\_\_ Taxable income: \$ \_\_\_\_\_ **Other**

**First Generation Only** \_\_\_\_\_ **Low-Income Only** \_\_\_\_\_ Number of people in household \_\_\_\_\_ Taxable income: \$ \_\_\_\_\_

ACCEPTED ON: \_\_\_\_\_

WAIT-LISTED ON: \_\_\_\_\_

MOVED TO INACTIVE: \_\_\_\_\_

**Talent Search Project Director:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Signature)

(month/day/year)