



SCHOOL OF EDUCATION
ONE SHIELDS AVENUE
DAVIS, CA 95616
TEL: 530-752-8258

College Opportunity Programs
1407 Market Street
Redding, CA 96001

Dear Parent/Guardian and Student,

The UC Davis Shasta Educational Talent Search (ETS) is a federally funded nation-wide grant-based TRIO program that places advisors in local middle and high schools and provides individualized advising about post-secondary education (college or any education beyond high school). ETS advisors help students **at no cost to the student or family** to identify their education and career goals. Advisors help students and parents understand the steps necessary to reach goals including but not limited to college admission requirements, the college application process, financial aid, scholarships, and paying for college. All ETS sponsored events, workshops, field trips, tutoring, etc. are paid for solely by the program, no cost is ever passed on to the student, family, or school.

Our advisors meet with the students in regularly scheduled small group workshops during school, as well as individual advising appointments. **Students involved in ETS have priority for participation in college campus visits and are eligible for special scholarships.**

If you are interested in having your student, take part in the ETS program, please fill out the attached application and have your student return it to his/her school office or counseling center. Please contact the ETS Director or the ETS Outreach Advisor at your student's campus if you have any questions.

Once the application has been received and your student has been accepted, a welcome letter will be sent to your student. You will also be notified if there is a waitlist for the program and every attempt will be made to move your student into the program as space comes available. Once accepted, the advisor assigned to your student's school site will reach out to your student through a school call slip during an appropriate class period and/or lunch/passing period. This initial meeting will be used to sign your student up for Remind (HS) and Student Access Messaging (MS) (our two main communication sources), discuss academic and career goals, and discuss any academic need. Once this meeting takes place, your student will be notified of upcoming field trips, college representative presentations, workshops and any other ETS sponsored events. If you would like to be included on those Remind/Student Access texts, we'd be happy to send you information on how to join. To do so, please call the UC Davis ETS office at 530-255-8035.

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530-255-8035
530-409-4031

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530-255-8035



Today's Date: _____

Please be sure to complete the ENTIRE application for immediate consideration. Incomplete applications will delay the application process. **Print clearly in BLUE or BLACK ink only.**

SECTION 1: STUDENT INFORMATION

Legal Name: _____
(First) (Last) (MI) (Nickname, if any)

Mailing Address: _____

Home Phone: (____) _____ (City) _____ (State) _____ (Zip) _____
Student Cell Phone: (____) _____

Student **Non-School** Email Address: _____

Gender: ☐ Female ☐ Male Date of Birth: _____ Place of Birth: _____

School: _____ Grade: _____ High School Graduation Year: _____ GPA: _____

Are you of Hispanic or Latino descent? ☐ Yes ☐ No

Ethnic Background: ☐ American Indian or Alaska Native ☐ Black or African American ☐ Hispanic/Latino of any race
☐ Asian ☐ White ☐ Native Hawaiian or Other Pacific Islander ☐ Other (specify) _____

Names of siblings currently in Educational Talent Search: _____

Have you ever been in foster care ☐ Yes ☐ No Are you homeless ☐ Yes ☐ No At risk for becoming homeless ☐ Yes ☐ No

Are you currently enrolled in any of the programs listed below:

☐ Gear UP ☐ Upward Bound (UB)**SECTION 2: PARENT or LEGAL GUARDIAN INFORMATION**

Student Resides with: ☐ Both Parents ☐ Mother Only ☐ Father Only ☐ Mother & Guardian ☐ Father & Guardian
☐ Foster Parent(s) ☐ Legal Guardian(s) ☐ Grandparent(s) ☐ Aunt/Uncle ☐ Other: _____

Parent or Legal Guardian Name: _____

Relationship to Student: _____ Relationship to Student: _____

Place of Employment: _____ Place of Employment: _____

Contact Phone: _____

Email: _____ Email: _____

What is the primary language used in the home? _____

List ALL persons currently living in student's home, including yourself:

[illegible]

TO BE COMPLETED BY PARENT or LEGAL GUARDIAN ONLY

Funding is provided by the US Department of Education and requires specific documentation of household income level and educational background for enrollment into the Educational Talent Search Program. The information is protected by the Family Rights and Privacy Act. The information is used to determine if the student is eligible to participate in the ETS Program.

SECTION 3: ELIGIBILITY CRITERIA

A. Number of People in Household (including parents/guardians, children, and other dependent family members): _____

B. Does your student receive lunch assistance? ☐ Free ☐ Reduced ☐ Does Not Receive ☐ Did Not Apply

C. Family Income Status:

Taxable Income, not family's total income. This can be found on federal tax forms **IRS 1040, line 15)**

15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-	15	
Privacy Act and Paperwork Reduction Act Notice: see separate instructions		Cat. No. 11320B	Form 1040 (2020)

- | | | |
|---|--|---|
| <input type="checkbox"/> \$0-\$22,590 | <input type="checkbox"/> \$38,731-\$46,800 | <input type="checkbox"/> \$62,941-\$71,010 |
| <input type="checkbox"/> \$22,591-\$30,660 | <input type="checkbox"/> \$46,801-\$54,870 | <input type="checkbox"/> \$71,011-\$79,080 |
| <input type="checkbox"/> \$30,661-\$38,730 | <input type="checkbox"/> \$54,871-\$62,940 | <input type="checkbox"/> \$79,081 or above (add \$8,070 for each family member above 8) |
| <input type="checkbox"/> Did Not File Taxes | | |

D. Parent Education Level:

Please check highest level of education **completed** by biological mother/legal guardian

☐ No Formal Education ☐ Elementary School ☐ Jr. High ☐ High School ☐ Associate's Degree ☐ Bachelor's Degree

Has biological mother/legal guardian received a four-year degree from a college or university in the USA?

☐ Yes ☐ No If so, please list degree(s) earned, year, and institution where earned: _____

Please check highest level of education **completed** by biological father/legal guardian

☐ No Formal Education ☐ Elementary School ☐ Jr. High ☐ High School ☐ Associate's Degree ☐ Bachelor's Degree

Has biological father/legal guardian received a four-year degree from a college or university in the USA?

☐ Yes ☐ No If so, please list degree(s) earned, year and institution where earned: _____

SECTION 4: PARENT or LEGAL GUARDIAN AUTHORIZATION

Medical Release: Should my student require medical attention while participating in ETS activities and I cannot be contacted, I give my consent to medical examination and treatment deemed necessary by the attending medical professional.

Mandated Reporting: Most information shared between participants and Program Representatives is held completely confidential. Please be aware of the few exceptions. Information shared regarding abuse (physical, mental, or sexual) and/or harm to oneself or others must be reported by law to the appropriate individuals.

Permission to Access School Records: I hereby give TRIO/ETS Program staff permission to have access to grades, progress reports, school transcripts, assessment test scores, school lunch program eligibility, and updated contact information from the school administration. I authorize ETS to obtain information related to my child's application for college admission and acceptance status, financial aid application (FAFSA), and award letter at any and all colleges and universities.

Media Release: I hereby give permission to the TRIO/ETS Program Staff to photograph my child for promotional purposes and/or file records related to the TRIO/ETS Program and/or statements to be used by ETS for promotion, publicity, or instructional purposes.

Participation: I give permission for my child to participate in ETS activities. I agree to encourage my child to do well in high school and pursue post-secondary education. (Participation during pandemics and natural disasters, would require online Zoom activities).

By signing my name on the signature line, I certify that each response within this application is true and complete to the best of my knowledge. It also indicates that I acknowledge and give consent to the requests of the ETS Program.

Parent Signature (Electronic OK)

Date

Office Use Only:

Eligibility: ☐ LI ☐ HI ☐ FG ☐ NFG Program Admit: ☐ Yes ☐ No ☐ WL Transcript: ☐ Yes ☐ No

Advisor Review: _____ Date: _____ Director's Approval: _____ Date: _____ Entered By: _____ Date: _____

TO BE COMPLETED BY STUDENT ONLY

Name: _____ School: _____

SECTION 5: NEEDS ASSESSMENT**What are your plans after you graduate from high school?**☐ 4-Year College ☐ Community College ☐ Technical/Vocational School ☐ Work ☐ Military Other _____**What are your top three college choices?**

What are your top three career choices?

What do you see as your strengths (academically or socially)? _____

What areas would you like to improve in (academically or socially)? _____

What services do you need in order to prepare yourself for college?

- ☐ Tutoring in: _____
- ☐ Information on high school and college requirements.
- ☐ Information about the benefits of going to college and earning a degree.
- ☐ Information on college costs and help completing financial aid applications.
- ☐ Information on the college admissions process and help completing college applications.
- ☐ Information on how to strengthen my study and test taking skills.
- ☐ Help preparing for college entrance exams.
- ☐ Assistance with the college enrollment process.

How did you hear about ETS? ☐ Classroom presentation ☐ Friend in ETS ☐ Small group presentation Other _____**SECTION 6: STUDENT CONTRACT**

I, _____ agree that if I am accepted into the Educational Talent Search Program I will:

1. Strive continually to improve my school grades and maintain at least a 2.0 GPA;
2. Follow the recommendations of my ETS Advisor to attend tutoring sessions when my grades are not meeting appropriate standards;
3. Attend all ETS workshops and activities unless they conflict with other academic, extracurricular activities, obligations or responsibilities and prior notification is given to the my ETS Program Advisor;
4. Remain an active participant in the ETS Program through my high school graduation;
5. Follow the instructions and complete required documentation while participating in ETS activities and traveling on official ETS approved trips;
6. Communicate with my ETS Program Advisor about my educational and personal goals;
7. Graduate from high school;
8. Make every attempt to enter and complete a post-secondary educational program after high school graduation;
9. Provide follow-up information to the ETS Program concerning my success in obtaining a post-secondary degree.

By signing my name on the signature line, I certify that each response within this application is true and complete to the best of my knowledge. It also indicates that I have read, reviewed and understood the preceding material.

Student Signature (electronic ok)_____
Date