Grant Year 2020-2021

Project ASPIREE, Vincennes University 1002 N. 1st St YB 29 Vincennes, IN 47591 Phone: (812)888-5063 Participant Application/Transcript/Financial Release



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	School Currently Attending: Current Grade Level: 6 7 8 9 10 11 12			
Student Information	Student's Name Student Cell Phone			
	Parents's Cell Home Phone			
	Le 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 Black/African American White	or Other Pacific Islander 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? Yes 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 chil	d/Ward of the court		
	AFDC Cash Assistance Textbook Assistance Federal Free Lunch Program 2	1 st Century Scholar		
	Please check one of the following Family Taxable Income Ranges. Taxable Income is usually lower than adjusted gross income. Effective January 15, 2020, until further notice. (Received 2/12/20)			
	Taxable income can be found on: [Form 1040- line 43] [Form 1040A- line 27] [Form 1040EZ- line 6]			
	\$0\$19,140 \$19,141\$25,860 \$25,861\$32,580	\$32,581\$39,300		
	\$39,301\$46,020 \$46,021\$52,740 \$52,741\$59,460	\$59,461\$66,180		
	Family members living in household: 1 2 3 4 5 6 7 8 or above	above \$66,181		
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 addressto 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	Project ASPIREE, a Talent Search program, is 100% federal TRIO funded at \$328,413.00 (Effective 09/01/2020).		

Office use only: Received ______ Outreach Advisor _____ Director _____Eligibility: FG _____ LI ___ LIFG _____ Other _____

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