



HILLSBOROUGH COMMUNITY COLLEGE
Educational Talent Search Project



High School Stop-Out Application For Participation

Congratulations on your decision to enroll in the Hillsborough Community College Educational Talent Search program. By completing this application in its entirety, you will be considered for acceptance. Two thirds of all accepted Educational Talent Search students must meet the federal income guidelines AND be first generation students (the parent(s) of the participant does not have a bachelor's degree). The remaining accepted one third must meet at least one of the above listed criteria. If you meet one or both of these requirements, please continue to fill out the application.

Please contact the ETS office at 813-253-7059 with any questions you may have.

CONTACT INFORMATION

Student Name		Social Security Number	Date of Birth
Permanent Street Address		City	Zip Code
Home Phone	Cell Phone	Email Address	Best Time To Contact
Current School	Gender (Circle One)	Race (Circle all that apply)	Citizenship (Circle One)
	Male Female	American Indian/ Alaska Native Asian White Hispanic/ Latino Black/ African American Native Hawaiian/ Pacific Islander	Are you a US Citizen? Yes No

EDUCATIONAL STATUS

Last School Attended	Highest Grade Completed	Date Withdrawn

Have you ever been diagnosed with a learning disability? Yes No
What was the diagnosis/ treatment: _____

FAMILY INFORMATION

Who Do you Currently Live With? (Circle all that apply)	How Many People are In your Family?
Spouse Mother Father Stepmother Stepfather Grandparent Aunt Uncle Guardian	

How did you hear about ETS? (Circle all that apply)

Guidance Counselor Teacher Student Intervention Specialist Friend Sibling Parent

Mother/ Guardian Information

Father/ Guardian Information

Mother's Name: _____	Father's Name: _____
Employer: _____	Employer: _____
Work Phone #: _____	Work Phone #: _____
Cell Phone #: _____	Cell Phone #: _____
Highest degree earned: _____	Highest degree earned: _____

EMPLOYMENT INFORMATION

Are you currently working? (Circle One) Yes No	When do you work? (Circle One) Full time Part time Both
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INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED!

Return Completed Application To:
 Educational Talent Search, 39 Columbia Drive, Tampa, Florida 33606
 Office Phone Number: (813) 253-7059

PRIMARY EMPLOYER

Employer Name: _____
 Address: _____
 Phone #: _____
 Length of time you have worked there: _____
 Schedule: _____

SECONDARY EMPLOYER

Employer Name: _____
 Address: _____
 Phone #: _____
 Length of time you have worked there: _____
 Schedule: _____

Income Verification

Please use the most recent tax return in completing the following information

Year of tax return _____ I/ We Claimed _____ exemptions
 Filing Status: _____ Single _____ Married, filing jointly _____ Married, filing separately _____ Head of Household
 My exact taxable income was \$ _____ (Use Form 1040, Line 40 - Form 1040A, Line 27 – Form 1040EZ, Line 6).

DO NOT LEAVE THIS SPACE BLANK. IF ANSWER IS ZERO PLEASE USE 0.

I did not and will not file a Federal Income Tax Return, IRS Form 1040, 1040A or 1040EZ last year for the reason listed below. If requested, I provide confirmation form the Internal Revenue Service to this effect.

_____ Family household's annual taxable income was less than the amount required for filing.

_____ Received no taxable income. Check all that apply:

_____ Social Security	Monthly \$ _____	Annually \$ _____
_____ Child Support	Monthly \$ _____	Annually \$ _____
_____ Foster Care Support Payment	Monthly \$ _____	Annually \$ _____
_____ Public Assistance (TAFI or other)	Case Number: _____	
_____ Other : _____	Monthly \$ _____	Annually \$ _____

Needs Assessment

Please check all of the services you would like to receive:

_____ Study Skills and Habits	_____ Self-Esteem/ Social Skills
_____ Goal Setting/ Decision Making	_____ Reading/ Writing Skills
_____ Organization/ Time Management Skills	_____ Academic Advising/ Course Planning
_____ Academic Tutoring	_____ Scholarships/ Financial Aid
_____ Communication Skills	_____ Career Information
_____ SAT/ ACT Preparation	_____ College Admissions

Do you plan to go to college after you complete your high school diploma? _____ Yes _____ No _____ Don't know

Information Release

I/ we authorize Educational Talent Search (ETS) to obtain documents relative and consistent with my education. Such documents may include, but are not limited to: a copy of school transcript, test scores, ACT/ SAT or GED scores, and school lunch program eligibility. I/we authorize ETS to obtain information related to my application for receipt of student financial assistance (federal, state or other), a copy of my award notification from the financial aid office, and college admission information. I/we authorize ETS To release or obtain information from any agency or program providing supplemental services. We would like to be a part of the ETS program. I hereby give my permission for my name, photograph, work and/or statements to be used by Educational Talent Search for promotional, publicity or other instructional purposes.

Parent Signature: _____ Student Signature: _____ Date: _____
 (Parent Signature required if under age 18)

I certify that the information on this form and any attachments are true, complete and accurate to the best of my knowledge.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____
 (Parent Signature required if under age 18)