



**HILLSBOROUGH COMMUNITY COLLEGE**  
**Educational Talent Search Project**



**High School Application For Participation**

<b>Last Name</b>		<b>First Name</b>		<b>Social Security Number</b>		<b>Date of Birth</b>	
<b>Permanent Street Address</b>				<b>City</b>		<b>Zip Code</b>	
<b>Email Address</b>				<b>Home Phone #</b>		<b>Cell Phone #</b>	
<b>Current Age (Circle One)</b>		<b>Gender (Circle One)</b>		<b>Race (Circle all that apply)</b>		<b>Citizenship (Circle One)</b>	
11    12    13 14    15 16    17    18		Male  Female		American Indian/ Alaska Native    Asian White    Hispanic/ Latino Black/ African American Native Hawaiian/ Pacific Islander Other: _____		Are you a US Citizen? _____ Yes    _____ No If no, Alien Registration #: #: _____	

**EDUCATIONAL STATUS**

<b>Current School/ School Number</b>		<b>Grade (Circle One)</b>		<b>Student ID Number</b>	
		9    10    11    12			
<b>Do you currently attend a College Prep Program? (Circle All That Apply)</b>			<b>Do you receive free or reduced lunch? (Check One)</b>		
CROP    Upward Bound    Gear Up Other _____			_____ Free Lunch    _____ Reduced Lunch _____ Not eligible		

**FAMILY INFORMATION**

<b>Who Do you Currently Live With? (Circle all that apply)</b>				<b>How many people are in your family?</b>			
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  
 Name of person: \_\_\_\_\_

Please check all of the services you would like to receive from Educational Talent Search. I need help with:

- |  |   |
|--|---|
| <input type="checkbox"/> Study Skills and Habits       | <input type="checkbox"/> Communication/ Listening Skills      |
| <input type="checkbox"/> Goal Setting/ Decision Making | <input type="checkbox"/> Organization/ Time management skills |
| <input type="checkbox"/> Academic tutoring             | <input type="checkbox"/> Career Exploration and Information   |
| <input type="checkbox"/> SAT/ ACT Preparation          | <input type="checkbox"/> College Application Process          |
| <input type="checkbox"/> Financial Aid                 | <input type="checkbox"/> Financial Aid/ Scholarship Searching |

Do you plan to go to college after you graduate from high school?     Yes     No     Not Sure  
 What careers or jobs interest you most? \_\_\_\_\_

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

Return Completed Forms (Front and Back):  
**INCOMPLETE FORMS WILL NOT BE PROCESSED!**  
 Educational Talent Search, 39 Columbia Drive, Tampa, Florida 33606  
 Office Phone Number: (813) 253-7059

Congratulations on your decision to enroll your child in the Hillsborough Community College Educational Talent Search program. By completing this application in its entirety, your child 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) the child lives with does not have a bachelor's degree). The remaining one third must demonstrate an interest in postsecondary education. Prior to submission, please review the information that your child has already provided on the reverse side of this form.

**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED!**

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

Mother/ Guardian Information	Father/ Guardian Information
Mother's Name: _____	Father's Name: _____
Employer: _____	Employer: _____
Work Phone #: _____	Work Phone#: _____
Cell Phone #: _____	Cell Phone #: _____
Highest grade/ degree completed: _____	Highest grade/ degree completed: _____

**Income Verification**

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

**Applications will not be processed without this 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.**

**Select your family's annual income:**

Check One	Income Amount	Check One	Income Amount
<input type="checkbox"/>	Less than \$15,315	<input type="checkbox"/>	\$30,976 - \$36,195
<input type="checkbox"/>	\$15,316 - \$20,535	<input type="checkbox"/>	\$36,195 - \$41,415
<input type="checkbox"/>	\$20,536 - \$25,755	<input type="checkbox"/>	\$41,416 - \$46,635
<input type="checkbox"/>	\$25,756 - \$30,975	<input type="checkbox"/>	More than \$46,636

**Needs Assessment**

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

<input type="checkbox"/> Study Skills and Habits	<input type="checkbox"/> Goal Setting/ Decision Making
<input type="checkbox"/> Organization/ Time Management Skills	<input type="checkbox"/> Academic Advising/ Course Planning
<input type="checkbox"/> Academic Tutoring	<input type="checkbox"/> Scholarships/ Financial Aid
<input type="checkbox"/> Communication Skills	<input type="checkbox"/> Career Information
<input type="checkbox"/> SAT/ ACT Preparation	<input type="checkbox"/> College Admissions

Do you plan to have your child go to college after high school?  Yes  No  Don't know

**Information Release**

I/ we authorize Educational Talent Search (ETS) to obtain documents relative and consistent with my child's 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 permission for my child to participate in all Educational Talent Search activities. In addition, I hereby give my permission for my child's 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:** \_\_\_\_\_

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

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_