Boston University Wheelock College of Education & Human Development **Boston University Upward Bound**

2 Silber Way Office #431 Boston, Massachusetts 02215 T 617-353-3551 F 617 353-2395 www.bu.edu/ub reggie@bu.edu



Priority Application Deadlines
December 1, 2025 for Spring 2026
April 15, 2026 for Summer 2026

Upward Bound at Boston University INSTRUCTIONS FOR APPLICATION

Upward Bound is a federally-funded TRIO year-round program that provides academic support to low-income and/or first-generation college bound students. To qualify students need to either meet TRIO low-income guidelines or be first-generation college, meaning neither parent has obtained a U.S. bachelor's degree. Additionally, to qualify, students must have at least started the ninth grade <a href="and-either attend one of the program's target high schools that include Brighton, the Community Academy of Science and Health, English, Margarita Muñiz Academy and Snowden or attend a public school and live in one of the program's target neighborhoods that include Dorchester, East Boston, Mattapan, and Roxbury. Students attending the target high schools are given priority in the admissions process. For more information, go to www.bu.edu/ub.

Dear Student:

Please follow these steps in completing your application and use the check boxes as you complete each step:

- □ Review the program calendar on page 2 to make sure you can participate in all program dates.
- □ Fill in your personal information on the *page 3*.
- □ Please be sure to complete the short application essays, which are located on page 4.
- Choose a high school teacher who knows your work as a student and ask him or her to write a short <u>letter of recommendation</u>. You should give this person the attached letter of recommendation form on page 8.
- You and your parents or legal guardian should complete the <u>release of student information</u> on <u>page 10</u>. Please ask your guidance counselor for a copy of your <u>complete high school transcript</u> and copies of your most recent MCAS and BPS test scores.
- □ You and your parents or legal guardian should complete the <u>data sheet</u> on <u>page 6</u>. You will also need to submit one of the following: <u>a copy of your United States birth certificate</u>, <u>permanent resident card</u>, <u>or United States passport</u>.
- Ask your parent or legal guardian to fill out and sign the <u>statement of family income form</u> on *page 7*. Your parent will also need to submit income verification (see enclosed form on page 7 for examples).
- Ask your parent or legal guardian to read and sign the parental consent, waiver and release on page 5.
- You and your parent or legal guardian should complete the <u>required expectations for student participation</u> on page 9.
- You and your parent may <u>choose</u> to complete and sign the <u>media release</u> form on <u>page 11</u>.
- □ Students who do not attend a target school will need to provide proof of address (e.g., utility bill).
- You may return the completed application to your school guidance counselor, <u>or</u> directly to Upward Bound. Applications can also be emailed to <u>reggie@bu.edu</u> or faxed to (617) 353-2395. Once we receive your <u>complete application</u>, we will contact you to arrange an interview. <u>At least one of your parents or legal guardians must accompany you to the interview.</u>

Please feel free to contact us at 617-353-3551 with any questions. I look forward to receiving your application.

Sincerely, Reggie Jean

<u>Do not e-mail any pages or supporting documents that contain a Social Security Number.</u> Please fax such documents to (617) 353-2395, mail, or hand deliver these items instead. (See address on top of page.)

Upward Bound and Upward Bound Math Science Calendar 2025 - 2026

Fall Semester 2025

September 22 Student Fall Assembly & Registration* 4:00 - 5:30 p.m.

> *Please note: Students will not be able to register by phone. Students who cannot attend the student assembly must call the office at (617) 353-3551 to

make other arrangements.

September 29 Afterschool Program Begins

Indigenous People's Day Holiday, No Program October 13 November 11 Veteran's Day Holiday Observed, No Program

November 17 - 21 Upward Bound Gear Week. Wear your UB & UBMS Gear to School/UB

Thanksgiving Holiday Observed, No Program November 26 - 28

Last Day of the UB Semester December 12

Spring Semester 2026

January 19 MLK Jr. Day, No Program

January 20 **New Student Orientation and Registration*** 4:00 p.m. – 5:30 p.m.

Location TBD

January 21 Returning Student Spring Assembly & Registration* 4:00 p.m. – 5:30

Location TBD

*Please note: Students will not be able to register by phone. Students who cannot attend student registration must call the office at (617) 353-3551 to make other arrangements.

January 26 Classes and Study Hall Begin

February Vacation, UBMS Science Week, No Afterschool Program February 16 - 20

March 21 UB and UBMS mid-term grades due

March 24 MCAS ELA Transitions to MCAS Math Test Prep Classes. (MCAS Math

class begins this week)

Spring Parent Open House (Saturday, 10 a.m. – Noon) March 28

April 3 Good Friday Holiday, No Program

April 20 – 24 April Vacation, UBMS Science Week, No Afterschool Program

May 8 Final Grades Due and Last Day of the Semester

May 11 – 15 Summer Placement Testing*

Summer 2026*

June 6 Summer Parent Open House

Juneteenth Holiday Observed – Boston University closed June 19

June 21 Summer Program Begins*

July 4 Independence Day Holiday Observed – Students return the evening of

Sunday, July 5.

Summer Program Ends* July 31

Students and families should not make any vacation plans between June 21 and July 31. Students are expected to participate in all summer program classes and activities. Please try to schedule medical appointments for Fridays after 2pm.

*Please Note: Extenuating circumstances and/or inclement weather may necessitate changes to the calendar. Visit www.facebook.com/BUUpwardBound for updates.





For Official Us	e Only	
FG:	LI:	

Upward Bound at Boston University 2025 - 2026 APPLICATION

(Please print or type)

Date:	Gende		male (For reporting JS Department of Education)
First Name:	Last Name:		M.l.:
Student Date of Birth:	Student Social	Security Number*:	
Name of High School:			Grade:
High School I.D. Number:	Name of High	n School Counselor:	
Home Address	(Street)		(Apt. No.)
(City)		(Zip Cod	e)
Home Phone:	Studen	t Cell Phone:	
Parent or Guardian Phone	:	[] Cell [] Work	
Student e-mails:			
Parent e-mail:			
Parent 1 (including Adoptive Parent)	Parent 2 (including Adoptive Parent)	Legal Guardian 1 (If other than Parent)	Legal Guardian 2 (If other than Parent)
	[]Mother []Father []Unknown	Relationship to student:	Relationship to student:
Name:	Name:	Name:	Name:
Living: [] Yes [] No Lives with Student: [] Yes [] No	Living: [] Yes [] No Lives with Student: [] Yes [] No	Lives with Student: [] Yes [] No	Lives with Student:
[] Guidance Counselor [] A Newspaper Advertise [] Summer Stuff	low that <u>best</u> indicates how yo [] Presentation at schoement [] Upward Bound webs [] Community Leader/ocial Security Number. Do not	ool [] A Friend or Resite [] HS Teacher:_ Clergy [] Other (specify	elative

^{*}The program uses this information for participants' stipends and for performance reporting purposes to the U.S. Department of Education.

Check one box below complete:	<i>t</i> that represents the <u>highest</u> level of e	education that <u>you</u> (the stud	ent) expect to
[] High School	[] Career or Vocational Degree Pro	ogram []Two-year	College
[] Four-year College	[] Master's Degree	[] Doctoral D	•
If any, what college majors or careers are you considering:			
Please complete the	following essays, which are started	d for you. (Attach additiona	l pages if needed)
the hopes you may ha	be selected to participate in Upward ave for continuing your education be chool subjects you like, and which su	yond high school, what yo	u want to gain from the
_			
particular interest or of	u will want to choose me as a parti a special skill or talent, if you have p ate to others, or if you are a hard worl	articipated in a special proj	
			-
Please check <u>all</u> boxe participate or have rec	es below that represent any other colently applied:	lege access programs in w	hich you currently
[] Artists for Humanity [] Bottom Line [] Build [] buildOn	[] College Bound [] Freedom House [] GEAR-UP [] Harvard Crimson	[] SquashBusters [] Summer Search [] Tenacity [] Thrive Scholars [] TRIO Talent	Search [] Other:
Student's Signature		Date	<u> </u>

PARENTAL CONSENT, WAIVER & RELEASE

I,	_ the parent/legal guardian of			
, give my consent of his/her participation in the Upward Bound program being sponsored by Boston University and the Boston Public Schools. I understand my child will be attending after school classes, field trips, science labratory and tutoring sessions at the university during the school year and attending a six-week summer residential program at Boston University during the summer. I understand that the university has made no representation concerning the safety of the methods of travel to and from or the travel sites visited.				
I hereby agree, on behalf of myself and my chil child's attendance at and participation in the Upward Boston University from any and all liabilities and claims attendance and participation, including travel, except in University's gross negligence or willful misconduct.	ound Program, including travel, ar whatsoever arising in connection	nd I agree to release with my child's		
I hereby give explicit consent and opt-in for my Bound, including text messaging, regardless of type of		tion from Upward		
I consent to and authorize emergency and non-emergency medical care to be provided to my child in the event of a health problem, emergency or injury occurring during my child's attendance at or participation in the Boston University Upward Bound program. I give my consent and authorization to the Upward Bound director or his/her designee to use his/her judgment in seeking medical care for my child. I understand that an attempt will be made to contact me in the event that emergency medical care is needed.				
The term Boston University shall include the corporation named Trustees of Boston University and its successors, trustees, officers, agents, representatives, contractors, and all persons for whose conduct the University is or could be legally responsible.				
I agree that the laws of the Commonwealth of Massachusetts shall govern this Waiver & Release. I affirm that I have read and understood this document.				
Signature of Parent or Legal Guardian Date	Printed Name			
Parent/Guardian 1:	_,	<u></u> -		
Last Primary Telephone: [] Home [] Cell [] Work (First _)	M.I.		
Alternative Telephone: [] Home [] Cell [] Work ()			
E-mail address:		_		
Parent/Guardian 2:	, First			
Last Primary Telephone: [] Home [] Cell [] Work (First _)	M.I.		
Alternative Telephone: [] Home [] Cell [] Work (
E-mail address:		_		
Emergency Contact Person (Individual to co	ontact if persons listed above are i	not available)		
,	, Relationship to student:			
Last First				
Primary Telephone: [] Home [] Cell [] Work (_)			
Alternative Telephone: [] Home [] Cell [] Work ()			

DATA SHEET

Applicant's name If you wish to be identified with (Please note this information Education)	n a particular racial and	d ethnic group, please		ment of
Please mark <u>one or mor</u> American Indian Black or African Native Hawaiian	or Native American	Asi Whi		
Please mark one of the t			ino	
3. Is English your first language?	? []Yes	[] No		
4. Is English the primary languag	ge spoken at home?	[]Yes []	No	
If no, what language is s	poken at home:			
□ Spanish □ Haitia	n Creole 🗆 Chir	nese (specify dialect:		_)
□ Vietnamese □ Soma	li □ Cape Verde	an Creole □ Po	ortuguese	
□ Arabic □ Other	; please specify:			
5. Verification of United States	citizenship or residenc	y. Attach a copy of o	ne of the following	documents:
Permanent Resi				
U.S. Birth Certifi	_			
Naturalization P	aper #			-
 Please indicate the highest of below by writing each participates represents the highest I 	arent/legal guardian na	me on the first line and	putting an X in the	box that
	Parent 1 (including Adoptive Parent)	Parent 2 (including Adoptive Parent)	Legal Guardian 1	Legal Guardian
Please write parent or legal guardians' name(s) in this space				
Below 8th grade				
Completed 8th grade				
Graduated from high school				
Graduated from a 2 yr. college				
Graduated from 4 yr. college (Bachelor's)				
Degree beyond the Bachelor's				
Certification: All of the informat asked by an authorized official, I also realize that purposely giving prison sentence, or both. I also admittance to Upward Bound at	agree to give proof of g false or misleading in realize that if I do not g	the information that we formation on this applic	e have given on this cation may result in a	application. I a fine, a
Signature of Parent or L	egal Guardian		Date	-

STATEMENT OF FAMILY INCOME

The student's parent or legal guardian must complete this statement. Please answer the questions below and sign the certification that follows. To be income eligible for Upward Bound, a student's family taxable income for the year prior cannot exceed 150 percent of the poverty level. For specifics and the taxable income levels, please visit https://www.ed.gov/about/ed-offices/ope/trio/federal-trio-programs-current-year-low-income-levels.

Parent's or Legal Guardian's Name:						
For Students Applying in Calendar Year 2025		For Students Applying in Calendar Year 2026			ear 2026	
Did your family receive any of the following in 2024? (Please circle responses)		Did your family receive any of the following in 2025? (Please circle response)		lowing in		
SNAP/food stamps	Yes	No	SN	AP/food stamps	Yes	No
TAFDC	Yes	No	TAI	FDC	Yes	No
Note: If you answer question #1, please documentation from verifies your family skip to the certification include the Mass Transitional Assistant verification letter from If you answered no please complete que certification below.	e attach written m a government a n's receipt of beno ntion below. Such sachusetts Depart nce. (To request an m DTA call 1-877-3 to all parts of qu uestions 2 and 3 a	agency that efits and agencies ment of n income 382-2363.) restion #1,	que doc ver ski car Tra ver If y	te: If you answer "Yestion #1, please at cumentation from a fifies your family's p to the certification include the Massac insitional Assistance ification letter from E tou answered no to ase complete questification below.	ttach written a government a receipt of bene n below. Such chusetts Departn to (To request an OTA call 1-877-3	gency that fits and agencies nent of income 82-2363.)
2. Please enter the household in 202		eople in your —	2.	Please enter the to household in 2025.		ople in your –
3. Please enter you income.	ur family's 2024 an	nual <u>taxable</u> —	3.	Please enter your fincome.	amily's 2025 anr	nual <u>taxable</u> –
Note: Taxable income can be found on line 15 of the 2024 IRS Form 1040. Please attach a photocopy of your 2024 US tax return and sign and date the certification below.		the ph	e: Taxable income of 2025 IRS Form 104 otocopy of your 201 e the certification I	0. Please attac 25 tax return an	h a	
Certification: All of the information on this application is true and correct to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that we have given on this application. also realize that purposely giving false or misleading information on this application may result in a fine, prison sentence, or both. I also realize that if I do not give proof when asked, that my child with be denied admittance to Upward Bound at Boston University.						
Signature of	Parent or Legal G	uardian			Date	

Supporting documentation for this page, such as tax returns, may include Social Security Numbers. Do not e-mail any documents that include Social Security Numbers. These documents should be faxed to (617) 353-2395, dropped-off at the UB office, or mailed.

LETTER OF RECOMMENDATION

<u>TO THE STUDENT:</u> Please separate this sheet from the rest of application and give to a high school teacher/school counselor to fill out. Students can submit other parts of the application to Upward Bound before the recommendation is submitted.

TO THE HIGH SCHOOL TEACHER OR SCHOOL COUNSELOR:

Upward Bound is a higher educational opportunity program offered by Boston University. During the academic year, the students come to Boston University for afternoon classes and tutoring. During the summer, the students live on the Boston University campus and have a full-time schedule of rigorous academic activities for six weeks.

Please assess the above student's potential to be a successful participant in the program. We would appreciate your comments on the student's ability in any of the following areas: initiative, sense of responsibility, intellectual curiosity and imagination, desire to go to college, writing and oral expression, working with and relating to others, common sense and good judgment, and persistence to carry through on tasks. Please indicate how long you have known the student and name the course in which you have had the student.

You may return this recommendation to the student, email it to reggie@bu.edu, fax it to 617 353-2395, or mail or hand deliver it directly to:

Boston University Upward Bound Two Silber Way, Room 431 Boston, MA 02215

If you prefer, you can submit the recommendation on-line at https://bostonu.qualtrics.com/jfe/form/SV 8oiqkvM4dqrptZk.

Thank you for your time and for your support of this student.

<u>Please feel free to email, write your recommendation on the reverse side of this form, or attach your recommendation to this form.</u>

Teacher's Signature	Date:	
Teacher's Name	Title	
Teacher's Email		

REQUIRED EXPECTATIONS FOR STUDENT PARTICIPATION

I understand that Upward Bound requires students to do the following:

- 1. Students are expected to remain in Upward Bound through high school graduation.
- 2. Students are required to participate in **both** the six-week summer program and the after-school program.
 - During the summer program students live in a residence hall on the Boston University campus from Sunday night through Friday afternoon.
 - <u>During the school year, students commute to the Boston University campus after school</u> for weekly tutoring, enrichment classes like MCAS or SAT test preparation, and workshops to assist with the college and financial aid application process.
- 3. Students are expected to follow the rules and regulations of Upward Bound and Boston University. Full copies of the Upward Bound rules and regulations are distributed at the start of the fall semester, spring semester and summer program, and are also available upon request. Students and parents are expected to read the full version of the program's rules and regulations. The program rules can be summarized as follows:
 - Students are expected to earn at least the grade of a C in all of their high school classes each
 marking term. If a student earns a grade below a C, Upward Bound will place them on academic
 probation. Any student on academic probation for three consecutive marking terms could be
 dismissed from the program.
 - Students are graded for their Upward Bound enrichment classes on a scale of 1-5 and are expected to maintain at least a 3.
 - Students are expected to be on time and prepared for all program classes and activities.
 - Students are expected to show respect for themselves and to others at all times.
 - Students are expected to follow reasonable staff directives.
 - Students are not allowed to have non-program friends as visitors on the Boston University campus while participating in Upward Bound.
 - Students are expected to inform Upward Bound staff of their whereabouts and during the summer program students are required to sign-in and out of the resident hall after 7 p.m.
 - Students are expected to observe the program's curfew and lights-out policy during the summer program.
 - Students may not use cell phones or other mobile communication devices during classes or other program activities.
 - Students are not allowed to leave the Boston University campus during the summer program without parent permission. (Try to schedule summer doctor appointments for Friday afternoons).
 - Students will be dismissed for any of the following infractions: possession or use of illegal drugs, alcohol, weapons, or fireworks; physical violence or the threat of physical violence; intentional destruction of property (including graffiti); taking of someone else's property without their permission; and during the summer students are not allowed in the dormitory tower reserved for the opposite sex nor are they allowed to use the dormitory or dining hall outside of approved times.

I have read and understand the required expectations for student participation.		
Signature of Parent or Legal Guardian	Date	_
Signature of Student	Date	_

Boston University Upward Bound and Upward Bound Math Science 2 Silber Way Boston, Massachusetts 02215



RELEASES OF STUDENT INFORMATION – REQUIRED

Permission to Release Student Information to Upward Bound		
I,		
Signature of Parent or Legal Guardian Date		
I,, do hereby permit the release of my academic records including but not limited to courses, grades, individual education plans, standardized test scores, and proof of graduation to Upward Bound at Boston University for the purposes of tracking student progress, and compiling and reporting data to the United States Department of Education, Office of Post-Secondary Education. I understand that the United States Department of Education requires Upward Bound at Boston University to report on my academic progress through either my graduation from college or for at least four years after my high school graduation.		
Student's Signature Date		
Permission for Upward Bound to Release Student Information to External Partners		
I,		
Signature of Parent or Legal Guardian Date		
I,, do hereby permit Upward Bound at Boston University to release the academic records about me and my participation in Upward Bound to the Boston Public Schools, the Massachusetts Office of Elementary and Secondary Education, and to the U.S. Department of Education <u>for legitimate educational interests</u> and to release the following information about me to Boston Afterschool and Beyond (http://www.bostonbeyond.org) for purposes of a Summer Measurement project (http://bostonbeyond.org) for purposes of a Summer Measurement project (http://bostonbeyond.org) for purposes of a Summer Measurement project (http://bostonbeyond.org) for purposes of a Summer Measurement project (http://bostonbeyond.org) for purposes of a Summer Measurement ID number, and home zip code.		
Student's Signature Date		

MEDIA RELEASE - OPTIONAL

I hereby give my permission to Boston University to photograph, film, videotape and/or make sound recordings of my child, to quote or publish statements of my child and to use such photographs, films, videotapes, sound recordings and/or other statements in Boston University educational and promotional/advertising materials and for other purposes specified below. I understand that my child may be identified in any photographs, news stories or publications that Boston University considers appropriate for release to magazines, newspapers, Boston University's World Wide Web site, and/or other publications. I further understand that any such photographs, films, videotapes, sound recordings and/or written works are the property of Boston University and that neither my child nor I am entitled to any compensation for or rights in these materials.

I release Boston University from all liability with respect to the matters covered by this release.

Child's Name:	-
Parent's or Legal Guardian's Name:	
Parent's or Legal Guardian's Signature:	Date: