



**\*\*Return to Your Counselor\*\***

# APPLICATION

## Educational Talent Search

### Paris Junior College

2400 Clarksville St. Paris, Tx 75460

#### I. PERSONAL INFORMATION:

**DATE:** \_\_\_\_\_

**Please Print**

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex  Male  Female

Ethnic Background (**please check only one**)

African-American  Asian  Hispanic  White  Multi-Racial  Other (specify) \_\_\_\_\_

Are you a ...  U.S. Citizen  Eligible non-citizen # \_\_\_\_\_ Country of Birth \_\_\_\_\_

School Name \_\_\_\_\_ Grade \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone# \_\_\_\_\_

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#### II. FAMILY INFORMATION:

**(TO BE COMPLETED BY PARENT/GUARDIAN)**

**ETS is required to verify that our participants meet federal criteria based on educational background and household income level. This information is required of all applicants, and may need to be verified in order for students to qualify for participation. The information provided will be kept confidential.**

<i>Heads of Household</i>	<i>Relation to Student</i>	<i>Employer / Number</i>
Name _____	_____	_____
Name _____	_____	_____
Does Mother/Female Guardian have a 4 year degree	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does Father/Male Guardian have a 4 year degree	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does student live with	<input type="checkbox"/> Both Parents <input type="checkbox"/> One Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Parent(s) <input type="checkbox"/> Other	
Number of people living at home	_____ Adults _____ Children	

#### FAMILY TAXABLE INCOME:

PLEASE USE **2007** INCOME TAX RETURN IF AVAILABLE, OTHERWISE USE YOUR **2006** RETURN:

If you filed a **2007** TAX FORM 1040, report from line #43 \$ \_\_\_\_\_

If you filed a **2007** TAX FORM 1040A, report from line #27 \$ \_\_\_\_\_

If you filed a **2007** TAX FORM 1040EZ, report from line # 6 \$ \_\_\_\_\_

INDICATE THE TOTAL NUMBER OF EXEMPTIONS ON INCOME TAX RETURN: \_\_\_\_/Adults \_\_\_\_/Children

IF YOU DID NOT FILE AN INCOME TAX RETURN, PLEASE INDICATE YOUR SOURCE OF INCOME AND ANNUAL AMOUNT. \_\_\_\_\_

**IF AVAILABLE, PLEASE ATTACH A COPY OF LAST YEARS FEDERAL INCOME TAX FORM (1040).**

Do you receive any of the following benefits?

If so, please check those that apply and attach a copy of the latest benefits notification letter (if available).

<input type="checkbox"/> Government Housing	<input type="checkbox"/> Social Security	<input type="checkbox"/> Food Stamps	<input type="checkbox"/> AFDC
<input type="checkbox"/> Unemployment	<input type="checkbox"/> School Lunch Program	<input type="checkbox"/> Child Support	<input type="checkbox"/> None

**III. PARENT/GUARDIAN PERMISSION AUTHORIZATION STATEMENT:**

I, \_\_\_\_\_ give my permission for \_\_\_\_\_ to receive any medical attention, including preventive routine and/ or emergency care and dental services as deemed necessary by qualified medical personnel in the event such treatment is necessary during the entire time my son/daughter is participating in an Educational Talent Search planned activity. I further agree and understand that the Educational Talent Search Program staff members CANNOT and WILL NOT be held responsible for accident or injuries. I give my son/daughter permission to be interviewed and/or photographed by digital, still photo film or video recorder by Educational Talent Search Program for use on radio, TV, printed media, or in project documentation and promotional materials. Educational Talent Search Program staff members may request and receive any educational records and/or other required documentation for the above named applicant to participate in the Educational Talent Search Program. With my signature, I certify that all information given is true and correct.

*Parent Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

**IV. STUDENT COMMITMENT STATEMENT:**

If selected as a member of Educational Talent Search of Paris Junior College, I agree to participate in the program and conduct myself in a way to bring credit to myself, my family, my school, and the Educational Talent Search Program. I agree to attend planned meetings during the academic year, and attend selected field trips

*Student Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

**Personal Statement:**

Please write a brief statement indicating why you want to participate in the Educational Talent Search Program. You may also include what you expect to gain from your participation in the program.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**V. SCHOOL COUNSELOR REFERRAL STATEMENT:**

**Statement of Need:**

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Statement of Academic Potential:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Signature of Evaluating School Official* \_\_\_\_\_

*Date* \_\_\_\_\_

FOR OFFICE USE ONLY

DATE RECEIVED \_\_\_\_\_  
LI/FG \_\_\_\_\_  
OTHER \_\_\_\_\_  
A.I. \_\_\_\_\_  
T.I \_\_\_\_\_  
SCHOOL \_\_\_\_\_  
GRADE \_\_\_\_\_