612 Boulevard Street Tel +1 803.5535.5063 Fax +1 803.534.8323



Dear Prospective Participant:

Thank you for your interest in the Upward Bound Math and Science Program, also known on the campus of Claflin University as the P.R.I.S.M. Program. P.R.I.S.M. is an acronym for Pursuing Rewards in Science and Mathematics. This program is federally funded by the U. S. Department of Education. It consists of two components, the 2017 Summer Component and the 2017-2018 Academic Component. Each person who is accepted is expected to fully engage in both components.

The Summer Component consists of an intense, six week, summer residential session spent on the campus of Claffin University, June 11, 2017 through July 21, 2011. No school course credit is given for the courses taken during this component. However, participants will be exposed to coursework that should be beneficial upon returning to their respective high school during the 2017-2018 Academic Year.

During the Academic Component, one school visit will be conducted with each participant by one or more of the UBMS/PRISM Program staff. When completing the acceptance packet prior to attending the 2017 Summer Component, each participant will select a mentor (preferably a mathematics or science teacher), from his/her high school. Upon returning to school for the 2017-2018 Academic Component/Year, the participant is expected to meet with his/her mentor at least twice a month. The mentor will receive a form to complete and return each month or every other month, outlining what took place during the meetings. Additionally, each participant will be asked to complete and return one assignment each month, as well as have a conversation with on of the program's staff members each month.

I look forward to receiving your completed application. Best wishes on your acceptance to the program.

Respectfully,

Sharon M. Capers

Sharon M. Capers

Director of UBMS/PRISM





Upward Bound Math and Science/ PRISM Program APPLICATION PACKET



HOW TO APPLY

Complete the <u>entire</u> application packet and supply <u>all</u> information requested. Return the forms and a copy of your high school transcript and test scores (if applicable) by

March 3, 2017.

QUALIFICATIONS

- 1. Must be enrolled in the 9th, 10th, or 11th grade and must be enrolled in or have completed at least Algebra I and one year of high school science;
- 2. Must have an interest in and an aptitude for mathematics and science;
- 3. <u>Must have a genuine interest in pursuing a career in mathematics or science related</u> field *not* other career fields;
- 4. Must meet federal income guidelines and/or be a potential first-generation college student;
- 5. Must be a U. S. citizen who is a resident of Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, or Tennessee.

RETURN COMPLETED APPLICATION TO:

Claflin University UBMS/PRISM Program 400 Magnolia Street Orangeburg, SC 29115

Phone: (803) 535-5063/5062/5057

Fax: (803) 534-8323

Email: scapers@claflin.edu Email: sprioleau@claflin.edu Email: cjacobs@claflin.edu

UBMS/P. R. I. S. M.

AN UPWARD BOUND SCIENCE & MATH REGIONAL CENTER

An Intensified Experience for High School Students Interested in Science and Math Careers

UBMS/PRISM Program

CHECKLIST

To expedite the selection process, please use this CHECKLIST to insure that you have completed ALL forms and included all REQUIRED materials for consideration.

 Part A: Personal and Academic Information			
 Part B: Academic and Career Interests			
 Part C: Parent's Statement			
Copy of Parent's 2016 Income Tax Form 1040			
Letter documenting other sources of income for 2016			
 Part D: Releases and Signatures			
 Part E: Needs Assessment			
 Part F: Summer Research Project Summary			
 Part G: Recommendations and Attachments			
Teacher Recommendation Form			
Counselor Recommendation Form			
Transcript with high school graduation test scores (if applicable)			
Current Report Card			
Current schedule			

Claflin University does not discriminate on the basis of Race, Color, Religion, Sex, Handicap/Disability, National Origin or Veteran Status.

NOTE: Incomplete applications will <u>not</u> be considered.

All forms must be postmarked on or before March 17, 2017

FOR OFFICE USE ONLY:

Date Received

CLAFLIN UNIVERSITY | Eligibility Code_

Upward Bound Math/Science Regional Center UBMS/PRISM Program

Dates: June 11, 2017—July 21, 2017

APPLICATION FORM

PLEASE TYPE OR PRINT

PART A

Personal Informat	าก	n

Name:			
Last		First	MI
Address: P. O. Box or Complete Street	City/Town	State	Zip
Home Telephone: ()	Email Ad	dress:	
Alternate Telephone ()	Social Sec	curity Number:	
Date of Birth:/	Age:	Sex:MF	
Physical Handicap/Learning Disability: U. S. Citizen:YesNo Ethnic CAsianCaucasian Hispar	Origin:Africa		
Academic Information			
Current Grade Level:		Cumulative 4.0 GPA	.:
High School:		l Address:	
Most recent test scores: PSAT:		ACT:	
Check the appropriate program, if any,	in which you cu	rrently participate:	
Upward BoundEducational	Talent Search	Upward Bound M	Tath/Science
Program Director:			
College/University:			
Director's Email Address:		Telephone: ()	

Part B: Academic and Career Interests

Please answer the following questions. If needed, you may use additional paper.

1.	Why do you want to participate in the UBMS/PRISM program? How will it benefit you?
2.	What is your math or science career goal?
3.	Describe your interests and hobbies.
4.	What are your favorite subjects in school? What are your least favorite subjects? Please explain your choices.
5.	What do you think are your strengths and weaknesses? Why?
6.	List organizations, honors, awards, community service activities:

PARENT'S STATEMENT

The following information is provided in order to establish my child's eligibility to participate in an Upward Bound Math and Science Program. I understand that the information concerning my child and me will be kept confidential and will not be revealed to anyone except Upward Bound Math and Science/PRISM personnel in accordance with the Family Educational Rights and Privacy Act.

Applicant's Name:				
Parent/Guardian Name: _				
	(Mot	ther)		(Father)
Parents' Marital Status:	_Single _Widowed	_Married _	Separated _	Divorced
Has the parent(s) or guar college degree program (Ba			<u>child resides</u> c	completed a four-yea
(ONLY RESPOND FOR TH	HE CUSTO	DIAL PAREN	NT(S) OR GUAR	DIAN(S))
Highest level of education of	ompleted b	y mother/fer	nale guardian:	
Highest level of education of Number of persons in the a	-):
ATTACH <u>ALL HOUSE</u> OF THE FOLLOWING				
A <u>signed</u> copy of you	r 2016 IRS	5 Form 1040,	1040A, or 1040	EZ
Family <u>Taxable</u> Inco	ome in 2016	Taxable	Income \$	
A letter or other age income from TANF,	•		0	nt of total family etc. received in 2016
(Signature of Parent/Gu	ardian)		(Da	ate)
NOTE: BY SIGNING THIS FO	RM, I ATTE	ST THAT ALL	INFORMATION I	PROVIDED IS TRUE AN

COMPLETE TO THE BEST OF MY KNOWLEDGE.

RELEASES AND SIGNATURES

We understand that the UBMS/P.R.I.S.M. Program is for students who are interested in math and/or science and who would like to major in a math and/or science related area in college, not for other majors unless they are technology, engineering or social sciences.

We understand that the UBMS/P.R.I.S.M. Program is for students who are able to handle the responsibility of being away from home for six weeks.

We understand that if the applicant is accepted by the UBMS/P.R.I.S.M. Program, he/she will have to adhere to all of the program's rules and regulations concerning student responsibility and behavior in the academic and residential life programs. We understand that the UBMS/P.R.I.S.M. Director will have the right to dismiss any student whose behavior is incompatible with the goals and standards of the UBMS/P.R.I.S.M. Program.

We agree that the student, if accepted into the UBMS/P.R.I.S.M. Program, may participate in answering questionnaires and other appropriate and approved research projects done as a part of the program's evaluation. We also agree that photographs of the student taken during the program, papers written by the student during the program, and similar items may be used by the UBMS/P.R.I.S.M. Program in reports and public information materials. We further agree to allow the UBMS/P.R.I.S.M. Program to release for educational purposes, photographs and video recordings, with or without audio, of the UBMS/P.R.I.S.M. Program's activities and projects involving the student.

recordings, with or without audi involving the student.	io, of the	UBMS/P.R.I.S.M.	Program's	activities	and	projects
Student Signature/	'Date	Parer	nt/Guardian S	Signature/D	Date	

ADDITIONAL RELEASES AND SIGNATURES

We recognize that the UBMS/P.R.I.S.M. Program is a major investment by the United States Department of Education. If the student is accepted and wishes to attend, <u>he/she will be required to be in attendance during the ENTIRE summer program period, except during the university closure for the July 4th holiday.</u>

We understand that if accepted, weekend visits home are <u>NOT</u> permitted. Any visitation should be arranged with the program director <u>a WEEK in advance</u>. Unless it is a case of an emergency, students will not be excused without the aforementioned advanced notification.

We understand that (ONE ROUND TRIP) travel expense to and from Claflin University, via one method of travel, is provided free of charge for the student or one round trip mileage reimbursement will be provided. We understand that travel arrangements to the student's home or elsewhere for the July 4th holiday must be completed by the parent, along with the responsibility of assuming travel expenses and arrangements to and from Claflin University.

Student Signature/Date	Parent/Guardian Signature/Date

NOTE: OUR SIGNATURES INDICATE THAT WE HAVE READ AND AGREE TO THE ABOVE RELEASES.

Part E

UBMS/PRISM Program NEEDS ASSESSMENT

	pplicant's Name	
1.	Have you ever thought about dropping out of school?	Yes or No
2.	Are you currently participating in any other programs such as Upward Bound, Educational Talent Search, etc.? If yes, give name of program.	Yes or No
	Do you participate in any extracurricular activities? How often do you meet with your high school counselor per semester? () one-three times () four or more times () have not met yet	Yes or No
5.	Do you know the correct high school classes to take to prepare for college?	Yes or No
	Do you need tutoring?	Yes or No
	Have you decided on a career?	Yes or No
	If so, your career choice is	
	Do you know what courses you should take for the career you want to pursue?	Yes or No
	Are you able to take all the science and math courses you need at high school?	Yes or No
	Do you need assistance in improving your math skills?	Yes or No
	. Do you need assistance in improving your math skills?	Yes or No
	. Do you need help in "study skills?"	Yes or No
	 . Have you begun preparation for the ACT/SAT/PSAT tests? . How many years of college do you plan to complete after high school graduation? 1-6 months certificate program 1-2 years Community or Technical College 3-5 years Bachelors Degree Six years or more a Masters or Doctorate Degree Undecided 	Yes or No
15	. Have you attempted to contact the college of your choice for information?	Yes or No
16	. Do you know the procedures to enroll in the college you plan to attend?	Yes or No
17	7. Do you need help in applying for college? 8. Do you have information about financial aid programs that may be able to	Yes or No
	you with continuing your education after high school?	Yes or No
19	. Do you need help in applying for financial aid?	Yes or No
	Do you need help in applying for scholarships?	Yes or No
21	. Do you personally know anyone with a career in math or science other than teachers?	Yes or No
de	ease tell us about any specific needs that you would like the program to meet. sire to visit a career-related institution, a personal desire to learn a new skill, a riting skills, a need to improve research skills, a computer related desire, etc.)	•

Part F

UBMS/PRISM Program SUMMER RESEARCH PROJECT SUMMARY

NOTE: Participants will complete a <u>RESEARCH</u> project during the summer program. Complete this form completely. You may ask your science teacher for assistance or use other resources from the internet for ideas.

Biology	Chemistry	
Mathematics	Physics	
Other (specify):		
	Biology Mathematics Other (specify):	Biology Chemistry Mathematics Physics Other (specify):

(continue on back or on another sheet if necessary)

Part G

Claffin University Upward Bound Math/Science Regional Center TEACHER RECOMMENDATION FORM

Directions: This form should be completed by a <u>MATH</u> or <u>SCIENCE</u> teacher. As you complete this form, please remember these points:

- 1. This program is funded by the U.S. Department of Education to help prepare high school participants for college. The ultimate goal of this program is to increase the number of underrepresented groups in math and science careers.
- 2. UBMS/PRISM Program participants will live for six weeks on the Claffin University campus. Although they will have resident advisors, it is very essential that their ability to handle the responsibility of being away from home supervision be considered when making a recommendation.
- 3. UBMS/PRISM is not a remedial program. It is an *intense*, technically oriented program. It is essential that participants possess genuine interest, curiosity and potential in mathematics and/ or the sciences. Participants will be required to complete a research project. Those accepted must be self-directed and motivated.

N	ame of applicant:					
C	apacity in which you know the applicant	t:				
ap	rections: Using a scale of 1 to 5, rate the applicant, relevant to a particular statement, exponses for statements 6 and 7.					
IN	MY OPINION					
		STRONGI DISAGRE		AGREE	S	STRONGLY AGREE
1.	This student has the internal motivation					
	to be successful in this program.	1	2	3	4	5
2.	This student is strongly interested in					
	science and/or mathematics.	1	2	3	4	5
3.	This student has a strong background					
•	in science and/or math.	1	2	3	4	5
4	This student is self-disciplined enough to					
т.	work on an independent research project.	1	2	3	4	5
5	This student is responsible enough to					
э.	attend a six-week residential program					
	away from parental supervision.	1	2	3	4	5
6.	Evaluate the student's interest in academic wo		ellent rage			verage Average
7.	Do you recommend this student for the Upwa		Ü			J
٠.		th Reservation		iice Kegiona N		;1 :
	Please print name/Phone number			Signatu	re/Date	
	Position			High S	School	
	Address			City/State	e/Zip Cor	 de

Part G

Claflin University Upward Bound Math/Science Regional Center COUNSELOR RECOMMENDATION FORM

Applicant Name Claflin University Upward Bound Ma	is applath/Science Regional Center.	ying for admission to the
Please complete this form and subn current report card, and a copy of the	nit with a transcript, high sch	
	Claflin University JBMS/PRISM Program 400 Magnolia St. eburg, South Carolina 29115 Phone: (803)535-5063	
Is the applicant enrolled in (check one	of the following):	
IB Program or College Preparator	ry Curriculum (Honors/AP)	
Tech Prep Curriculum		
Vocational Curriculum		
Evaluate the student's potential or of ExcellentAbove Average Summarize any special circumstance	AverageE	Below Average
Do you recommend this student for	the Upward Bound Math/Sc	ience Regional Center?
Enthusiastically	With Reservations	No
NOTE: The UBMS/PRISM Program is not of Participants must possess a genuine interest at the ability to handle the responsibility of being University campus. Counselor *Note: NCES Code may be found a	and potential in math and/or the science g away from home supervision and livin High School	es. Participants must also have ag, for six weeks, on the Claflin *NCES Code
Email Address	Telephone Number	Fax Number