College Bound Scholarship Program Application and Pledge 2011-2012

DEADLINE - JUNE 30, 2012

- Enroll online! The process is quick and easy. Apply online at: www.hecb.wa.gov/collegebound
- Apply in 7th OR 8th grade you only need to apply once.
- The **deadline** is June 30 of your 8th grade year.

WASHINGTON

IGHER

DUCATION

ORDINATING BOARD

• You will receive a College Bound Scholarship certificate once your application is complete.

Complete each section and **PRINT NEATLY** using a pen.

STUDENT INFORMATION (PRIN	T your legal name)				
First name:	Middle initial:	Last name:			
State Student Identification Number (10 digit number found on Measure	: of Student Progress [MSP] score	Social Securit	y Number:	- 	- <u>xxxx</u>
To receive the scholarship, you will r The HECB is required by law to keep				SN).	
Email address for student:					
May we text you?	No Cell phone	number to text ()		
Date of Birth: / /	YYYY C	Grade in 2011-2012	school year:	□ 7 th	□ 8 th
School attending in 2011-2012 scho	ool year: Please do not us	e abbreviations or school	City:		
PARENT/LEGAL GUARDIAN IN	FORMATION (Print y	our full, legal name)			
First name:	Middle initial:	Last name:			
Highest educational level earned by	either parent/legal gua	rdian now living with	the student:		
Less than a high school diploma	-	- .		Some college	
Certificate/Associate degree	□ Bachelor's	□ Bachelor's degree		□ Master's/doctorate	
Home phone: ()					
Email address for parent/legal guardi	an:				
Mailing address: House Number, Street N	ame, Apartment Number or	P.O. Box			
Citv		State	Zip		

INCOME STANDARDS

You must meet one of the four income standards below when you apply for the College Bound Scholarship.

We, the student and parent or legal guardian, certify that one or more of the following is true. **Please check all that apply:**

- Student is eligible for the federal free- or reduced-price lunch program.
- Student's family receives basic food/TANF benefits.
- Our 2010 family income from all sources (taxable and nontaxable) was less than or equal to the amounts in the chart.
- Student is currently in foster care and is automatically eligible to apply.
- □ None of the above apply.

NOTE: Family income from the student's senior year will be used to verify financial eligibility for this scholarship award.

Family Size	2010 Income Family income must be less than or equal to this amount based on family size	Monthly Income
2	\$27,200	\$2,300
3	\$34,300	\$2,900
4	\$41,300	\$3,400
5	\$48,400	\$4,000
6	\$55,500	\$4,600
7	\$62,600	\$5,200
8	\$69,600	\$5,800
Each additional family member	Add \$7,000	Add \$600

RELEASE OF INFORMATION – Must be completed by the Parent/Legal Guardian

Checking "YES" to the statements below allows the Higher Education Coordinating Board to exchange information about the student with selected educational organizations such as colleges and universities, public and non-profit organizations, the Office of Superintendent of Public Instruction, and the middle and high school attended by the student.

This exchange may include the student's name, address, birth date, ID number, and other personally identifiable information. Answering "NO" to these questions will not affect the student's eligibility for the College Bound Scholarship, but will reduce the services the HECB and other educational entities can provide the student.

Student information is secure and is not shared with unauthorized people or organizations.

 I authorize the Higher Education Coordinating Board to share information with the Office of Superintendent of Public Instruction, the school(s) where my student is enrolled, and colleges and universities, in order to provide the College Bound Scholarship and other assistance.

□ YES □ NO

2. I authorize the Office of Superintendent of Public Instruction and school(s) where my student is enrolled to share information with the Higher Education Coordinating Board to maintain accurate contact information and track student progress.

□ YES □ NO

3. I authorize the **Higher Education Coordinating Board** to share information with selected **public and non-profit agencies** whose goals are to assist students with academic success and college preparation.

□ YES □ NO

STUDENT PLEDGE – Yes, I am College Bound! I pledge that I will:

- Do well in middle school and high school, and graduate with a cumulative high school grade point average of 2.0 or higher on a 4.0 scale.
- Be a good citizen in school and in my community, and not commit a felony.
- Apply for financial aid by submitting the Free Application for Federal Student Aid (FAFSA) in a timely manner my senior year of high school.

AGREEMENT – The student and one parent or legal guardian must sign this before submitting to the HECB. (See the Questions & Answers sheet for details regarding who should sign the form.)

- I, the parent/guardian, declare that our family meets one of the four income standards listed above.
- I, the student, agree to meet the student pledge requirements as stated above.
- We understand that the student will only be eligible to receive scholarship assistance if the student fulfills the pledge requirements and the family income does not exceed the cutoff at the time of high school graduation.
- We certify that the information contained in this application is true and correct to the best of our knowledge.

Student Signature			Date
Parent/Le	gal Guardian Signature		Date
Mail to:	HECB College Bound Scholarship P.O. Box 43430 Olympia, WA 98504-3430	Questions?	See Q&As at: <u>www.hecb.wa.gov/collegebound</u> Email: <u>collegebound@hecb.wa.gov</u> Phone: 1-888-535-0747 FAX: (360) 704-6218