

JCYC Upward Bound  
Pre-Screening Questionnaire (PSQ)

If you have any questions, please call the JCYC Upward Bound Office at: (415) 202-7901.  
*Please use ink and print clearly. Only complete forms will be considered.*

**Student Section**

Social Security Number       Student ID (HO#): \_\_\_\_\_

Name of Applicant \_\_\_\_\_  
FIRST MIDDLE LAST

Street Address \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone \_\_\_\_\_ Student Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Birthday \_\_\_\_\_

Gender  Male  Female  Other  Decline to State

Ethnicity (check all that apply)  African-American / Black  American Indian / Alaska Native  Asian: \_\_\_\_\_  
(Please Specify)  
 Hispanic / Latino  Native Hawaiian or other Pacific Islander  Caucasian / White

Have you ever, or are you currently enrolled in an ELD course?  Yes  No

**NOTE:** You must be a US citizen or legal resident of the United States in order to participate in and receive services from Upward Bound.

Grade Level:  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup> |  Balboa  Thurgood Marshall  Mission  John O'Connell  Other: \_\_\_\_\_

**Parent/Guardian Section**

	Parent/Guardian #1			Parent/Guardian #2		
Name _____	Elementary	Middle School	High School	4-Year College	School Outside of the U.S	
Parent/Guardian 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Parent/Guardian 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Family Size and Income Information (to be completed by the parent/guardian)**

Do you or your child receive School Lunch Program  Free or  Reduced  TANF  Food Stamps  Medi-Cal  
(check all that apply)  Social Security  Subsidized Housing  General Assistance

Parent's / Guardian's total **TAXABLE** income (Not AGI)

See line 43 on Form 1040, line 27 on Form 1040A, line 6 on Form 1040EZ

\$19,140 or below  \$25,861 - \$32,580  \$39,301 - \$46,020  \$52,741 - \$59,460  \$66,181 or over

\$19,141 - \$25,860  \$32,581 - \$39,300  \$46,021 - \$52,740  \$59,461 - \$66,180

This income supported \_\_\_\_\_ number of people

**Certification:**

We certify that the responses on this form are accurate and complete to the best of our knowledge and that any misrepresentation may cause for denial or cancellation of admission. We understand that we may be requested to provide income documentation and proof of citizenship if admitted into the JCYC Upward Bound (UB) Program. In signing this form, as the Parent/Guardian, I release all school information concerning the academic progress, eligibility and needs of my child to JCYC UB. In addition, I give my consent for the National Student Clearinghouse and my child's college of attendance to disclose college enrollment status and degree attainment data to JCYC UB for the purpose of tracking my child's college enrollment and completion. Furthermore, I give my consent to JCYC UB: a) to contact my child via email, text, phone, mail, and/or virtual meeting platforms to provide UB program services and, unless stated in writing to JCYC, b) to release media images (photo, video, etc.) of my child to be used for JCYC UB program promotion.

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

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