

OLD FORGE SCHOOL DISTRICT

www.ofsd.cc

"Home of the Blue Devils"

300 Marion Street, Old Forge, PA 18518

Phone: (570) 457-6721

Fax: (570) 457-8389

John Rushefski, Superintendent

Shawn Nee, Secondary Counselor

January 2019

Dear Parent/Guardian,

Enclosed is an application for the University of Success Program. This program is a pre-college program at The University of Scranton. Current **eighth** grade students who intend to enroll in a **public high school** and that meet at least two more of the following qualifications are eligible:

- The student's family is economically disadvantaged.
- The student's cultural background is typically underrepresented in higher education.
- The student possesses at average or higher academic ability.
- The student exhibits strong academic motivation with a strong desire to attend college.
- The student is a potential first generation college student in his/her family.

Any student who is interested and meets the criteria should complete the application and essay as soon as possible. Then return the completed application to the Guidance Office where we will attach a current report card and mail to the University of Success Program coordinator.

Deadline is April 1, 2019.

Students who are accepted into the program will be invited to attend a two-week Residential Program, from July 7, 2019 through July 19, 2019, on the University of Scranton Campus.

If you have any questions or concerns, please contact the Guidance Office.

Shawn Nee
Secondary Counselor

The University of Scranton
UNIVERSITY OF SUCCESS PROGRAM

Cover Sheet

Student Name: *(please, print)* _____

To qualify for admission to the University of Success, a student must be enrolled in the eighth grade and must meet at least three of the following qualifications at the time of application to the program and throughout the duration of enrollment in the program:

- The student's family is economically disadvantaged.
- The student's cultural background is typically underrepresented in higher education
- The student possesses average to high academic ability and is academically motivated.
- The student is a potential first generation college student in his/her family.
- The student must attend a public school

Since the University of Success is funded almost entirely by corporate and foundation grants, there is *no charge* to students and their families.

Application Checklist:

- ____ Student Information Form
- ____ Student Picture
- ____ Parent/Guardian Information Form
- ____ Student Essay
- ____ Letter of Recommendation
- ____ Permission for Grade Release **AND** a copy of your most recent grade report

The student must complete the Student Information form and write an essay about why she/he wants to be in the program. A Parent or Guardian of the student must complete and *sign* the Parent/Guardian Information form, as well as, the Permission for Grade Release form. A letter of recommendation from an adult who can attest to the student's character is also required. A picture must be included for The University of Scranton's files.

Return all documents along with this Cover Sheet to:

Margaret Loughney
McGurrin Hall, Room 015
University of Success Application
University of Scranton
Scranton, PA 18510
margaret.loughney@scranton.edu

Application Deadline: April 1, 2019

Date Received _____

The University of Scranton

UNIVERSITY OF SUCCESS PROGRAM

Application

(Please Print)

STUDENT INFORMATION

Student Name: _____

Date of Birth: _____

Gender: ___ Male ___ Female E-mail: _____

Student lives with:

___ Both Parents ___ Mother ___ Father ___ Other (specify) _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone No: _____ Cell Phone No: _____

Country of Citizenship: _____

School you are presently attending: _____

Current Grade: _____ Guidance Counselor Name: _____

High School you will attend: _____

How would you describe yourself?

Race

___ American Indian or Alaska Native

___ Asian

___ Black or African American

___ Native Hawaiian or other Pacific Islander

___ White

___ Other (_____)

Ethnicity

___ Hispanic or Latino

___ Not Hispanic or Latino

Application Deadline:

April 1, 2019

The University of Scranton
UNIVERSITY OF SUCCESS PROGRAM

Application

(Please Print)

PARENT/GUARDIAN INFORMATION

(To be completed by a parent or guardian)

Mother/Guardian Name(s): _____

Address: _____

City, State, Zip: _____ E-mail _____

Home Phone No: _____ Cell Phone No: _____

Place of Employment: _____

Job Title: _____

What is the highest level of education you completed?

- Elementary School (K grade)
- Junior High (6-8th grade)
- Senior High (9-12^h grade)
- College (List degree/Major _____)
- Other education/training _____

Father/Guardian Name(s): _____

Address: _____

City, State, Zip: _____ E-mail _____

Home Phone No: _____ Cell Phone No: _____

Place of Employment: _____

Job Title: _____

What is the highest level of education you completed?

- Elementary School (K grade)
- Junior High (6-8th grade)
- Senior High (9-12^h grade)
- College (List degree/Major _____)
- Other education/training _____

Financial Information

List all income received during the 1/1/18-12/31/18 year. You must determine the total gross income of all family members. *You may be asked to verify this information if your child is chosen for this program.*

Yearly Salary, from work	\$ _____
Pension	\$ _____
Social Security Benefits	\$ _____
Disability	\$ _____
Public Assistance/Child Support	\$ _____
Other _____	\$ _____

How many individuals live in your household? _____

Has your son/daughter applied for or received any scholarships, grants or awards for high school.

If so, describe: _____

I understand that I am responsible for notifying the Success Program Director of any change in financial or academic status that occurs at any time while my son/daughter is enrolled in the program.

PENALTIES FOR MISREPRESENTATION: I certify that all the above information is true and correct and that all income is reported. Inaccurate information will jeopardize the status of the application. Failure to report change in financial and/or academic status may jeopardize my child's continuation in the program.

Signature of Adult: _____

Date _____

Printed Name of Adult: _____

Application Deadline: April 1, 2019

The University of Scranton

UNIVERSITY OF SUCCESS PROGRAM

Application

STUDENT ESSAY

In your own words, please write an essay about why you are applying to the University of Success Program. You can use the space below or a separate sheet of paper for your essay.

Application Deadline: April 1, 2019

University of Scranton

UNIVERSITY OF SUCCESS PROGRAM

Letter of Recommendation

Please ask a Teacher, Guidance Counselor, Clergy, or community leader who knows you well to submit a letter of recommendation on your behalf. Letters of Recommendation written by relatives are not acceptable.

The letter should state how long the person has known you and in what capacity. It should include the reasons why the person thinks that you should be accepted into the program. Please attach the letter to the application.

Application Deadline: April 1, 2019