

Harvey Mudd College Upward Bound Program 2025 STUDENT APPLICATION

App. Deadline: _____

You must fully complete this page for your application to be considered.

Name _____ Sex: Male Female
Address _____ City _____ State _____ Zip _____
Home Phone (____) ____ - ____ Date of Birth ____ / ____ / ____ Place of Birth _____
Student ID# _____ High School _____ Graduation Year _____
School Email: _____ Alt. Email: _____

Please Tell Us About Your Father/Stepfather/Legal Guardian

Name _____ Age ____ Phone (____) ____ - ____
Occupation _____ Presently Employed? Yes No
Level of Education: High School Graduate? Yes No
If he graduated from high school, has he obtained a college degree in the U.S.? Yes No
If yes, what degree has he earned? Associate's Degree (AA) Bachelor's Degree (BA or BS)
 Master's Degree (MA) Other _____

Please Tell Us About Your Mother/Stepmother/Legal Guardian

Name _____ Age ____ Phone (____) ____ - ____
Occupation _____ Presently Employed? Yes No
Level of Education: High School Graduate? Yes No
If she graduated from high school, has she obtained a college degree in the U.S.? Yes No
If yes, what degree has she earned? Associate's Degree (AA) Bachelor's Degree (BA or BS)
 Master's Degree (MA) Other _____

Please Tell Us About Everyone Who Lives In Your Home: List the name & age of everyone living in your home and include their relation to you (brother, mother, cousin, etc.):

Name _____ Relation _____ Age ____
Name _____ Relation _____ Age ____
Name _____ Relation _____ Age ____
Name _____ Relation _____ Age ____

(If you need to list more family members than this space allows, please do so on a separate sheet of paper.)

Harvey Mudd College Upward Bound Program

Financial Information

To be completed by Parent(s) or Guardian(s)
 Questions? Please call us at 909-621-8123

Please complete either Section I or Section II

<p>I.</p> <p>Please Complete This Section ONLY if:</p> <p><i>Your family files annual IRS 1040 form</i></p>	<p>Financial Information based on 2024 IRS Tax Form 1040</p> <p>1. 2024 Adjusted Gross Income (Line 11 of 1040) \$ _____</p> <p>2. Standard Deductions (Line 12 of 1040) \$ _____</p> <p>3. Total Number of Household Member _____</p> <p>4. TAXABLE INCOME (Line 15 of 1040) \$ _____</p> <p>*NOTE: Upward Bound uses TAXABLE INCOME to determine financial eligibility.</p>
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<p>II.</p> <p>Please Complete This Section ONLY if:</p> <p><i>Your family DOES NOT file annual IRS 1040 form or has not yet filed</i></p>	<p>1. INCOME FROM WORK: If the applicant’s family did not file a 2024 IRS tax form, then indicate what the parent/guardian’s annual income is.</p> <p style="text-align: right;">\$ _____ for 2024</p> <p>2. OTHER INCOME: If the applicant’s family receives other forms of income or assistance, please provide the monthly amount of each type of aid.</p> <p>a. Social Security \$ _____ per month</p> <p>b. Welfare (CALWORKS, Disability) \$ _____ per month</p> <p>c. Unemployment Benefits \$ _____ per month</p> <p>d. Other (Please Specify) _____ \$ _____ per month</p> <p>3. TOTAL MONTHLY INCOME: (Add 2a-2d) \$ _____ per month</p>
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ALL MUST SIGN: I certify that the above information is true to the best of my knowledge.

 Parent/Guardian Signature

___ / ___ / _____
 Date

 Parent/Guardian Signature

___ / ___ / _____
 Date

Summer Dates: June 16 – July 25, 2025

Harvey Mudd College Upward Bound Program

Información Financiera

Debe ser llenado por los Padres o Tutor legal
¿Preguntas? LLámenos al 909-621-8123

Complete Sección I o Sección II

I. Favor de llenar esta sección si: <i>Su familia report las formas de impuestos 1040</i>	Información de 2024 basada en la forma de impuestos 1040	
	1. 2024 Ingreso Bruto Ajustado (línea 11 de 1040)	\$ _____
	2. Deducciones (línea 12 de 1040)	\$ _____
	3. Número de miembros del hogar	_____
	4. INGRESO SUJETO A IMPUESTOS (línea 15 de 1040)	\$ _____
*NOTA: Upward Bound usa INGRESO SUJETO A IMPUESTOS para determinar si califica financieramente.		

II. Favor de llenar esta sección si: <i>Su familia NO reporta o no ha reportado las formas de impuestos 1040</i>	1. INGRESO DE TRABAJO: Si la familia del estudiante no reporta una forma de impuestos para el año 2024, entonces indica el ingreso anual de los padres. \$ _____ en el año 2024	
	2. OTRA FORMA DE INGRESOS: Si la familia del estudiante recibe otra forma de ingreso o asistencia, favor de incluir la cantidad <i>mensual</i> de cada tipo de ayuda.	
	a. Seguro Social	\$ _____ por mes
	b. Ayuda Pública (CALWORKS, Incapacidad)	\$ _____ por mes
	c. Beneficios de Desempleo	\$ _____ por mes
	d. Otros (especifique) _____	\$ _____ por mes
3. TOTAL INGRESO MENSUAL: (Suma 2a-2d) \$ _____ por mes		

TODOS FIRMAN: Certifico que la información anterior es verdadera a lo mejor de mi conocimiento.

Padre/Guardián

____ / ____ / ____
Fecha

Padre/Guardián

____ / ____ / ____
Fecha