

The University of Tennessee, Knoxville

EDUCATIONAL
ADVANCEMENT
PROGRAM
APPLICATION 2008-2009

****For Office Use Only****
ACT: E M C HSGPA
SAT V: M: GED:
G= H=
F= VR=
Transcript Req. Rec.
FA Form Req. Rec.

Name SS# - - Date

E-mail Address @ Local Phone -

Local/Campus Address Zip

Major Birth Date / / Gender Country of Citizenship

African American Caucasian American Hispanic/Latino American Other Mixed

Classification: 1st Semester Freshman Sophomore Junior Senior
(0-29 hours) (30-59 hours) (60-89 hours) (90+)

TRIO History Participation: UT LEAD Student Participation:
Place of Employment Hours per Week

Parents/Spouse Address

City State Zip Phone () -

Person to Contact in an Emergency Phone () -

Address City State Zip

Have either of your parents graduated from college with a Bachelors degree?
Where

Have you applied for financial aid? On what date did you submit your forms?
Have you been granted financial aid?

Are you a veteran? What type of assistance are you receiving?

Please describe any learning disabilities you have

Please describe any physical disabilities you have

Do you receive aid from Vocational Rehabilitation? Explain

Name of VR Counselor Phone () -

****FOR OFFICE USE ONLY****
Academic Need Verification - Counselor Intake Statement
Current GPA = H.S. GPA = ACT (SAT) = Academic Review =
Academic Index =
Date Signed

Please check the programs you participated in.

_____ UB _____ ETS _____ SS _____ EVC _____ VUB _____ UBMS
 _____ Gear Up

Describe your previous college experience:

School: _____ Dates attended: from _____ to _____
 School: _____ Dates attended: from _____ to _____
 School: _____ Dates attended: from _____ to _____

In planning for future career goals, what stands out about attending college?

Please circle the number, which most closely reflects your level of agreement with the following statements:

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. Effort plays a large role in making the grade I want in a college classroom.	1	2	3	4	5
2. Graduating alongside my peers is something that I will accomplish.	1	2	3	4	5
3. I utilize study groups and classmates to help me learn more effectively.	1	2	3	4	5
4. Written assessments and tests are a good measure of my knowledge and ability.	1	2	3	4	5
5. I have open communication with my family regarding what college life is like.	1	2	3	4	5
6. My parents/guardians are supportive of my of my educational and academic endeavors.	1	2	3	4	5
7. Most of my childhood friends are in college.	1	2	3	4	5
8. Time management is something that I have mastered and I am in control of my time.	1	2	3	4	5
9. Test taking is something that I excel at.	1	2	3	4	5
10. I allow others to help support my college development.	1	2	3	4	5
11. I have efficient organizational skills.	1	2	3	4	5
12. I fit I with other college students.	1	2	3	4	5
13. I view myself as smart and college material.	1	2	3	4	5
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree

14. I communicate my needs and concerns effectively.	1	2	3	4	5
15. Weekly attendance at class is a priority.	1	2	3	4	5
16. My note taking skills are polished and excellent.	1	2	3	4	5
17. I made a smooth college transition.	1	2	3	4	5
18. I am active in clubs or campus organization.	1	2	3	4	5
19. I enjoy learning and taking classes.	1	2	3	4	5

The University of Tennessee
Educational Advancement Program (Student Support Services)
Ronald McNair Post Baccalaureate Achievement Program

Program Commitment Contract
and
Waiver of Confidentiality

Name _____

Social Security Number _____

Date _____

This is to certify that I agree to actively participate in the Educational Advancement Program/Ronald McNair Post Baccalaureate Achievement Program. As an integral part of my participation, I agree to complete all assessment, evaluation, and interest inventories and other data gathering devices as may be needed for research and programmatic evaluation. I understand that it is a program that provides holistic services over the length of my undergraduate/graduate educational experience, and that I should be willing to take advantage of a multiplicity of services including, but not limited to, academic advising, counseling, workshops, special instruction, tutoring, mentoring cultural events, and information exchange.

This is to certify that I agree to waive my rights under the Family Privacy Act (Buckley Amendment), and agree to permit the Educational Advancement Program/Ronald McNair Post Baccalaureate Achievement Program/Tennessee Pre Health Fellowship Program and Tennessee Pre Law Fellowship Program to have access to my term grades and academic history, and all other academic and cognitive measures deemed necessary by program administrations for successful operation and evaluation of the program. I recognize that my grades will be held in strict confidentiality and only utilized in periodic performance reporting.

Signed _____

Date _____

Witnessed _____