



Dr. Earnest L. Davis, Executive Director/President

Huntsville Office

513 Sparkman Drive | Huntsville, AL 35816
Office: 256.372.4600 | Fax: 256.722.9795

Scottsboro Office

605 East Laurel St. | Scottsboro, AL 35768
Office: 256.259.3072 | Fax: 256.259.3286

EMERGING SCHOLARS PROGRAM STUDENT APPLICATION 2017-2018

Our mission is to promote pre-college programs, student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.

All Services Provided Are FREE!!!



North Alabama Center for Educational Excellence
Emerging Scholars Program
Program Application
2017-2018
www.nacee.net

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DIRECTIONS

- Type or print clearly in ink. Be sure to answer all questions.
- Remember student and parent/guardian signatures are required.
- Please submit your completed application to an Emerging Scholars Program staff member or representative at your school.
- Or fax your completed application to one of the above addresses.

Part 1: STUDENT APPLICANT INFORMATION

Date:	First Name:	Middle Initial:	Last Name:
Social Security No.:		Email Address:	
School:		Current Grade Level:	
Mailing Address: Street and Apt. No.			
City:		State:	Zip:
Home Phone Number:		Alternate Phone Number:	
Date of Birth:	Age:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Citizenship: Are you a U.S. Citizen or Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, provide A# from Green Card:		Do you qualify for free/reduced lunches? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Ethnic Background: <input type="checkbox"/> African American or Black <input type="checkbox"/> American Indian		<input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other: _____	
What are your favorite school subjects?		Which subjects would tutoring be most beneficial?	
Provide your current grades in the following core subjects:			
Math:	Science:	English:	History:
Extracurricular activities:			
List the two colleges that interest you the most: <input type="checkbox"/> Undecided		What is your desired/intended major? <input type="checkbox"/> Undecided	
What type of degree do you plan to obtain? (You can check more than one).			
<input type="checkbox"/> High School Diploma <input type="checkbox"/> Vocational or Technical School Certificate		<input type="checkbox"/> 4 Year College Degree <input type="checkbox"/> Masters Degree	
		<input type="checkbox"/> Doctoral Degree <input type="checkbox"/> Undecided	
What qualities best prepare students to be college-ready?			
State two reasons for your interest in becoming part of the NESP program.			

Student's Name: _____

School & Current Grade Level: _____

Part 2: Education & Household Income Information

(To Be Completed by Parent/Guardian. Please note the following information is required)

Mother's Name:	Father's Name:
Mother's Address:	Father's Address:
Mother's Home Phone Number:	Father's Home Phone Number:
Mother's Cell Phone Number:	Father's Cell Phone Number:
Does applicant's mother currently hold a Bachelors degree? <input type="checkbox"/> No <input type="checkbox"/> Yes	Does applicant's father currently hold a Bachelors degree? <input type="checkbox"/> No <input type="checkbox"/> Yes
Number of people living in household?	
What is your household's Annual Taxable Income (for the previous year)? \$	

*Please note that Taxable Income is usually lower than Adjustable Gross Income which is located at the bottom of the first page of most tax forms. **Annual Taxable Income can be found on page 2 of most tax forms.** Please call 256.372.4600 if you have any questions or need assistance locating this information.*

- | | | |
|--|--|--|
| <input type="checkbox"/> \$ 0 - \$ 17,820 | <input type="checkbox"/> \$ 30,241 - \$ 36,450 | <input type="checkbox"/> \$ 48,871 - \$ 55,095 |
| <input type="checkbox"/> \$ 17,821 - \$ 24,030 | <input type="checkbox"/> \$ 36,451 - \$ 42,660 | <input type="checkbox"/> \$ 55,096 - \$ 61,335 |
| <input type="checkbox"/> \$ 24,031 - \$ 30,240 | <input type="checkbox"/> \$ 42,661 - \$ 48,870 | <input type="checkbox"/> \$ Over _____ |

RELEASE OF SCHOOL RECORDS

I authorize the North Alabama Center for Educational Excellence Emerging Scholars Program (NESP) to obtain and receive copies of my student's academic records, counselor's reports, and any other academic information necessary to complete the program's application. I further grant NESP the right to utilize media resources (e.g. Facebook, Twitter, email, digital video/cameras, etc.) for services which promote, advance, and adhere to the federal mission of NESP.

I certify that all information provided above is correct and true to the best of my knowledge.

Parent's or Guardian's Signature

Date

Student's Signature

Date

Please note that all applications are accepted for review regardless of race, color, national origin, religion, gender or disability (U.S. Dept. of Education – GEPA Section 427).

FOR OFFICE USE ONLY

<input type="checkbox"/> New Participant	<input type="checkbox"/> Low Income & First Generation	Date Received:
<input type="checkbox"/> Prior NACEE Participant	<input type="checkbox"/> Low Income Only	Date Processed:
<input type="checkbox"/> Referral / Participant in another TRIO Project (i.e., UB, UBMS)	<input type="checkbox"/> First Generation Only	<input type="checkbox"/> Ages 11-18
<input type="checkbox"/> Referral	<input type="checkbox"/> Other	<input type="checkbox"/> Grades 6-12
Cohort Year:	Entry School:	
Location: <input type="checkbox"/> Huntsville <input type="checkbox"/> Scottsboro	Staff:	

North Alabama Center for Educational Excellence
Emerging Scholars Program
Educational Plan (EP) 2017-2018

First Name:		Middle Initial:		Last Name:	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male			Date of Birth:		
Mailing Address:		City:		State:	Zip:
Home Telephone:		Other Phone:		Email:	
Social Security #:			Current School:		
Current Grade:	Current Teacher's Last Name:			Class Period:	
Mother's/Guardian Name:			Mother's Work/Cell #:		
Father's/Guardian Name:			Father's Work/Cell #:		
Do you qualify for free or reduced lunches? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you following a rigorous curriculum? <input type="checkbox"/> Yes <input type="checkbox"/> No			

SERVICE PLAN STATEMENT

The NACEE Emerging Scholars Program (NESP) participant will be offered project services for the appropriate grade-level based on the "Student Needs Assessment." These services will be provided either through academic advising, career counseling, various workshops, and/or guest speakers. They are designed to help participants transition to the next grade, complete high school, and enroll in the postsecondary educational institution of their choice.

Student Signature: _____

Date: _____

NESP Staff Signature: _____

Date: _____

STUDENT NEEDS ASSESSMENT (For Office Use Only)

6th Grade

- Career Awareness
- Financial Literacy
- Study Skills/Time Management
- Test Taking Skills
- Tutorial Assistance

7th Grade

- Career Awareness
- Financial Literacy
- Study Skills/Time Management
- Team Building
- Test Taking Skills
- Tutorial Assistance

8th Grade

- Career Awareness
- Decision Making/Problem Solving
- Financial Literacy
- Goal Setting
- Transitioning to HS
- Tutorial Assistance

9th Grade

- Academic Advising
- ACT Prep Essentials
- Career Interest Workshop
- Financial Literacy
- Rigorous Curriculum
- Study Skills
- Tutorial Assistance

11th Grade

- Academic Advising
- ACT Prep
- College Visit/Fair
- Financial Aid Information
- Rigorous Curriculum
- Scholarship Resources
- Tutorial Assistance

Gifted and Talented

Academic Competitions (Science Bowl)

- NOBCCHE STEM
- NSBE, Jr. STEM
- Academic Bowl
- Mentoring Research
- Confucius Institute
- Other _____

10th Grade

- Academic Advising
- ACT Prep Essentials
- Career Interest Survey
- College Information
- Financial Literacy
- Rigorous Curriculum
- Tutorial Assistance

12th Grade

- Academic Advising
- ACT Prep
- College Admission Apps.
- College Visit/Fair
- FASFA Application
- Financial Aid Information
- Rigorous Curriculum
- Scholarship Resources
- Tutorial Assistance

**NORTH ALABAMA CENTER FOR EDUCATIONAL EXCELLENCE
PARENTAL CONSENT FORM**

PARENT/GUARDIAN INFORMATION

Child Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian: _____

Home Number: _____ Work Number: _____

PERSON(S) AUTHORIZED WITH WHOM CHILD MAY BE RELEASED

Name: _____ Relationship: _____

Name: _____ Relationship: _____

EMERGENCY CONTACT WHEN A PARENT/GUARDIAN CANNOT BE REACHED

Name: _____

Home Number: _____ Work Number: _____

Relationship to Child: _____

MEDICAL INFORMATION

Family Physician: _____ Phone Number: _____

Medications: _____ Dosage/Time to Take: _____

Physical Disabilities, etc.: _____

Allergies: _____

Date of most recent Tetanus shot: _____

Insurance Company: _____ Policy Number: _____

We authorize the North Alabama Center for Educational Excellence (NACEE) employees to render any medical care and treatment to our child/ward deemed necessary with respect to any illness or injury occurring during any activities. I (we) understand that the NACEE has no medical coverage and I (we) agree to pay additional medical costs incurred. I also understand my child may be photographed or interviewed by media during NACEE activities.

I understand that neither NACEE nor its staff is obligated to provide transportation in connection with the Program. I understand that I am expected to carry my own automobile liability insurance coverage if driving on premises or to scheduled events.

Assumption of Risk and Release of Claims: *In consideration of being permitted to participate in the Program, I agree, on behalf of my family, heirs, and personal representative(s), to assume all the risks and responsibilities surrounding my participation in the Program. To the maximum extent permitted by law, I release the indemnify NACEE and its staff from and against any present or future claim, loss or liability for injury or injuries to person or property which I may suffer, or for which I may be liable to any other person, during my participation in the Program (including periods in transit).*

RELEASE OF SCHOOL RECORDS

I authorize the North Alabama Center for Educational Excellence Emerging Scholars Program (NESP) to obtain and receive copies of my student's academic records, counselor's reports, and any other academic information necessary to complete the program's application. I further grant NESP the right to utilize media resources (e.g. Facebook, Twitter, email, digital video/cameras, etc.) for services which promote, advance, and adhere to the federal mission of NESP.

I have carefully read this Release form before signing it. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This agreement shall become effective only upon receipt by the North Alabama Center for Educational Excellence at its offices in Alabama and shall be governed by the laws of the state of Alabama.

Signature of Student Participant

Date

Witness

Signature of Parent/Guardian

Date

Witness