

Thank you for your interest in applying to College Track!

In order to complete this application, you will need to have the following information:

Contact Information (Phone Number & Email Address) for:

- Yourself, so we can notify you about your application status.
- Parents or Guardians
- An Emergency Contact, ideally someone who does not live with you

Your Household Income and Size

- Why? College Track supports students whose parents did not obtain a Bachelor's degree in the United States OR students whose households are low-income.
- Due to government and other funding College Track receives, we are required to verify parent or guardian income.

An active Email Address for a Teacher or Counselor from whom you will request a letter of recommendation (if required)

- Not all College Track Sites requires a Letter of Recommendation at this time.
- Please check with your site's Operations Manager to confirm if a recommendation is, or isn't, required with your submission.

Part 1: Student Information

All information provided in the Student Information Section is to be completed by the student applying to College Track. We will use this information to contact you about an interview so please ensure all information is accurate.

To get started, choose the College Track Site near you.

- | | | |
|---|--|--|
| <input type="checkbox"/> College Track Oakland | <input type="checkbox"/> College Track Boyle Heights | <input type="checkbox"/> College Track Denver |
| <input type="checkbox"/> College Track San Francisco | <input type="checkbox"/> College Track Watts | <input type="checkbox"/> CT at the Durant Center |
| <input type="checkbox"/> College Track East Palo Alto | <input type="checkbox"/> College Track Crenshaw | <input type="checkbox"/> College Track Ward 8 |
| <input type="checkbox"/> College Track Sacramento | <input type="checkbox"/> College Track Aurora | <input type="checkbox"/> College Track New Orleans |

Your Academic Information

***Student Legal First Name:** _____ ***Middle Initial:** _____

***Student Legal Last Name:** _____ ***Birthdate:** _____

***Gender:** Male Female Other Decline to state

Gender Pronouns: He / Him She / Her They / Their Ze / Zir

Your Current School Information

*Your Current Grade

- | | | | | |
|---------------------------------------|---------------------------------------|--|--|--|
| <input type="checkbox"/> 8th
Grade | <input type="checkbox"/> 9th
Grade | <input type="checkbox"/> 10th
Grade | <input type="checkbox"/> 11th
Grade | <input type="checkbox"/> 12th
Grade |
|---------------------------------------|---------------------------------------|--|--|--|

***Middle School:** _____ ***Your Middle School G.P.A.:** _____

***Current or Intended High School:** _____

If you are currently in middle school, please enter the high school you will attend for 9th grade.

Expected High School Graduation Year: _____

*What is your educational goal?

- | | | |
|---|--|---|
| <input type="checkbox"/> Earn a High School Diploma or G.E.D. | <input type="checkbox"/> Attend a 2-Year College | <input type="checkbox"/> Earn a Master's Degree, Ph.D, or another advanced degree |
| <input type="checkbox"/> Attend a Technical or Trade School | <input type="checkbox"/> Attend a 4-Year College or University | |

What are your extracurricular activities? (Select one or more)

- | | | |
|---|--|---|
| <input type="checkbox"/> Academic Programs | <input type="checkbox"/> ROTC/JROTC | <input type="checkbox"/> Other (please list)
_____ |
| <input type="checkbox"/> Athletics | <input type="checkbox"/> School-sponsored Clubs | |
| <input type="checkbox"/> College & Career Preparation | <input type="checkbox"/> Other clubs or groups outside of school | <input type="checkbox"/> None |

Your Contact Information

Home Phone: _____ *Mobile Phone: _____

*Personal Email: _____

*What is the best way to contact you?

- Text Message Phone Call Email

Your Current Address

*Home Address: _____

Apartment / Building / Suite Number: _____

*City: _____ *State: _____ *Zip Code: _____

Your Personal and Demographic Information

Information you share in this section is confidential and for internal purposes only.

*What is your Ethnicity?

- | | | |
|---|---|---|
| <input type="checkbox"/> African-American | <input type="checkbox"/> Multiracial | <input type="checkbox"/> White/Caucasian |
| <input type="checkbox"/> Asian-American | <input type="checkbox"/> Native American | <input type="checkbox"/> Other |
| <input type="checkbox"/> Latino / Chicano | <input type="checkbox"/> Pacific Islander | <input type="checkbox"/> Decline to state |

If you have selected "other", please write in your Ethnicity below.

*What language do you primarily speak at home?

- | | | |
|---|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> English - Fluent | <input type="checkbox"/> Cantonese | <input type="checkbox"/> Korean |
| <input type="checkbox"/> English - Basic | <input type="checkbox"/> Mandarin | <input type="checkbox"/> Taishanese |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Other |

If you have selected "Other", please write in your Primary Home Language below.

***Are you an English Language Learner (ELL)?**

Yes

No

***Do you have an Individualized Education Plan (IEP)?**

Yes

No

***Where is your Country of birth?** _____

***What is your Citizenship status?** *Your citizenship status will be kept confidential.*

U.S. Citizen

U Visa

Permanent Resident

Other

***Are you an Orphan or a Ward of the Court?**

Yes

No

***Do you have any allergies?**

Yes

No

If you have answered "Yes", please list your allergies below.

***Do you have any dietary Restrictions?**

Yes

No

If you have answered "Yes", please list your dietary restrictions below.

Part 2: Parent or Guardian, Emergency Contact, and College Track Relative Information

All information in Parent/Guardian and Emergency Contact Section must be completed by the Parent or Guardian of the College Track Applicant. We will use this information to contact you about your child's involvement in College Track. Please ensure all information is accurate.

Primary Parent or Guardian

Please enter information below for the primary Parent or Guardian who can provide information about the student and household.

***First Name:** _____

***Last Name:** _____

*What is the Primary Parent or Guardian's Relationship to the student?

- | | | |
|-------------------------------------|---|----------------------------------|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Legal Guardian | <input type="checkbox"/> Uncle |
| <input type="checkbox"/> Father | <input type="checkbox"/> Foster Parent | <input type="checkbox"/> Aunt |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> Grandmother | <input type="checkbox"/> Brother |
| <input type="checkbox"/> Stepfather | <input type="checkbox"/> Grandfather | <input type="checkbox"/> Sister |

Primary Parent or Guardian's Contact Information

***Mobile Phone:** _____ **Work Phone:** _____

Parent or Guardian's Email Address: _____

***Does the student live with this parent?** Yes No

If this parent or guardian does not live with the student, please enter their home address below.

Parent or Guardian Address: _____

Apartment / Building / Suite Number: _____

City: _____ **State:** _____ **Zip Code:** _____

***Do you receive your student's mail at your address?** Yes No

***Are you authorized to pick up the student?** Yes No

What language(s) does this Parent or Guardian speak?

- | | | |
|---|-------------------------------------|--|
| <input type="checkbox"/> English - Fluent | <input type="checkbox"/> Mandarin | <input type="checkbox"/> Other (please list):
_____ |
| <input type="checkbox"/> English - Basic | <input type="checkbox"/> Vietnamese | |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Korean | |
| <input type="checkbox"/> Cantonese | <input type="checkbox"/> Taishanese | |
| | | |

Second Parent or Guardian

Please enter information for a second Parent or Guardian

***First Name:** _____

***Last Name:** _____

*What is the Second Parent or Guardian's Relationship to the student?

- | | | |
|-------------------------------------|---|----------------------------------|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Legal Guardian | <input type="checkbox"/> Uncle |
| <input type="checkbox"/> Father | <input type="checkbox"/> Foster Parent | <input type="checkbox"/> Aunt |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> Grandmother | <input type="checkbox"/> Brother |
| <input type="checkbox"/> Stepfather | <input type="checkbox"/> Grandfather | <input type="checkbox"/> Sister |

Second Parent or Guardian's Contact Information

***Mobile Phone:** _____ **Work Phone:** _____

Parent or Guardian's Email Address: _____

***Does the student live with this parent?** Yes No

If this parent or guardian does not live with the student, please enter their home address below.

Parent or Guardian Address: _____

Apartment / Building / Suite Number: _____

City: _____ **State:** _____ **Zip Code:** _____

***Do you receive your student's mail at your address?** Yes No

***Are you authorized to pick up the student?** Yes No

What language(s) does this Parent or Guardian speak?

- | | | |
|---|-------------------------------------|--|
| <input type="checkbox"/> English - Fluent | <input type="checkbox"/> Mandarin | <input type="checkbox"/> Other (please list):
_____ |
| <input type="checkbox"/> English - Basic | <input type="checkbox"/> Vietnamese | |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Korean | |
| <input type="checkbox"/> Cantonese | <input type="checkbox"/> Taishanese | |

Your Household Income and Highest Level of Education Completed

College Track supports students whose parents did not obtain a Bachelor's degree in the United States OR students whose households are low-income. College Track is required to verify your household income for the student's primary household. All information reported on this application is confidential, and is only used in aggregate meaning no individual income is shared with an outside entity.

How many people live in your household? _____

What is your household's annual income? _____

What is the highest level of education completed by a Parent or Guardian in your household?

- | | | |
|--|---|--|
| <input type="checkbox"/> Did not start or finish high school | <input type="checkbox"/> Some college | <input type="checkbox"/> 4 year College Degree |
| <input type="checkbox"/> High school diploma | <input type="checkbox"/> Vocational School degree | <input type="checkbox"/> Graduate Degree |
| | <input type="checkbox"/> 2 year College Degree | |

Was this degree obtained in the United States?

- Yes No

How is this Parent or Guardian related to the student?

- | | | |
|-------------------------------------|---|----------------------------------|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Legal Guardian | <input type="checkbox"/> Uncle |
| <input type="checkbox"/> Father | <input type="checkbox"/> Foster Parent | <input type="checkbox"/> Aunt |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> Grandmother | <input type="checkbox"/> Brother |
| <input type="checkbox"/> Stepfather | <input type="checkbox"/> Grandfather | <input type="checkbox"/> Sister |

Emergency Contact Information

Please provide the contact information of an adult who does not live with the student who can be contact in the event of an emergency.

***Emergency Contact Name:** _____

***Emergency Contact's Relationship to Student**

- | | | | |
|-------------------------------------|---|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Legal Guardian | <input type="checkbox"/> Uncle | <input type="checkbox"/> Cousin |
| <input type="checkbox"/> Father | <input type="checkbox"/> Foster Parent | <input type="checkbox"/> Aunt | <input type="checkbox"/> Not Related |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> Grandmother | <input type="checkbox"/> Brother | |
| <input type="checkbox"/> Stepfather | <input type="checkbox"/> Grandfather | <input type="checkbox"/> Sister | |

***Emergency Contact Phone:** _____

***Emergency Contact Email Address:** _____

***Address:** _____ **Apartment Number:** _____

***City:** _____ ***State:** _____ ***Zip Code:** _____

College Track Relatives

Are you related to a current College Track Student or an Alumni?

Yes

No

***College Track Relative's Name:** _____

***College Track Relative's Site:** _____

***How is this College Track Student or Alumni related to you?**

Brother

Sibling

Aunt

Sister

Cousin

Uncle

Part 3: Teacher or Counselor Recommendation Request

To request a recommendation, please enter the contact information for at least one teacher or counselor.

Teacher or Counselor 1

***First Name:** _____ ***Last Name:** _____

***Teacher or Counselor Email Address:** _____

***Their Role**

Teacher

Counselor

Other

***Their Current School:** _____

Teacher or Counselor 2

***First Name:** _____ ***Last Name:** _____

***Teacher or Counselor Email Address:** _____

***Their Role**

Teacher

Counselor

Other

***Their Current School:** _____

Release of Confidential Information to Authorized Persons/Organizations

I. I hereby give permission for my child to participate in the activities of College Track. I have read the information about College Track and I am in support of my child's participation. I will allow College Track to transport my child to and from College Track sponsored activities and their office, located at the address listed below:

II. I hereby grant College Track and its legal representatives and assigns, the irrevocable and unrestricted right to use and public my child's first name and initial to last name, and all image and personality rights, including film, photograph, voice recording, written materials, tape or video reproduction (together, "Materials") in which my child may be included, for editorial trade, advertising, website marketing, and any other purpose and in any manner and medium (now existing or hereafter developed); to alter the same without restriction; and to copyright the same. I hereby release College Track and its legal representatives and assigns from all claims and liability relating to said Materials. **Parent or Guardian Initials:** _____

Even if my student is **not** accepted into the College Track program,

III. Pursuant to the Family Educational Rights and Privacy Act ("FERPA")(20 USC 1232g, 34 CFR 99), I hereby authorize College Track to access my child's educational data from schools, school districts and/or charter management organizations, including but not limited to educational data received from district owned data management systems, as well as have access to and make copies of my child's high school records (courses, grades, test scores, attendance, enrollment, and IEPs/504s if applicable) through the completion of high school and into post-secondary education.

IV. I further authorize College Track to request, share and use all information held by College Track and its partners relating to me, with all higher education institutions and program partners for the purposes of enhancing my chances of graduating from college. This includes, but is not limited to, personal information (such as my name, mailing address, email address and date of birth), high school and college academic information (such as my high school courses, grades, test scores, attendance, enrollment, college transcripts), financial information (such as any scholarships, financial aid and grants awarded to me), my recorded image and voice, and my applications, admissions, enrollment, attendance and academic status at higher education institutions (together, "My Information").

V. College Track monitors the progress of applicants and participants to better evaluate the effectiveness of its high school and college program in light of its charitable mission. As part of the monitoring process, College Track may share "My Information" with researchers and funders. I understand that College Track will take appropriate steps designed to secure and protect this information, to keep it confidential, and to prevent others from connecting it to me. To the extent possible, except as set forth in this form, any information that could identify me will be removed or changed before such information is shared with other researchers, organizations, or institutions and before any research results are made public in an aggregated form.

VI. Any waiver, modification or amendment of this form will be effective only if acknowledged and agreed to by College Track. Further, I understand that College Track will maintain a record of this form, that I am entitled to request and receive a copy, and that I may wish to make a copy of this form for my own records. This release shall be governed by the laws of the state in which College Track provides services to me or my children.

Student's Full Legal Name: _____ **Student's Date of Birth:** _____

Parent or Guardian's Full Legal Name: _____ **Today's Date:** _____

Informed Consent for College Track Wellness Services

Last updated by Nicol McGough, MA, LPC, BC-DMT, ACS 10/9/19

Welcome to College Track’s Wellness Program! We developed our Wellness Program in response to the difficulties our students sometimes have in persisting with their dream of attaining a college degree, not because of academics or capability, but because of life stressors. Our Wellness Program, Wellness Directors, Wellness Interns and Wellness Community Partners are here to support you to develop self-management skills to most effectively work with your feelings, relationships, stress, and decision-making so that you can succeed in making your college and life success dreams real.

It is the job of the Wellness Director and our Wellness Interns to support you to be your healthiest and most capable self. We will serve as mentors, coaches and educators to you to help you to become more internally resourced with your social emotional and wellbeing strengths. These assets are positively correlated with academic success, life satisfaction and healthy decision making ([CASEL](#)). Here at College Track, we are committed to ensuring your success and know that you can do whatever you put your mind to if we make sure that you’ve got the correct tools in your toolbox.

Our Wellness Directors are mental health professionals in the social work or counseling field and are either licensed or under clinical supervision and in the process of getting their license. Our Wellness Interns, who provide the bulk of our 1:1 wellbeing coaching, are graduate mental health students fulfilling their field placement requirements with us here at College Track. Relatedly, our Wellness Community Partners who support our Wellness Program also have licensed mental health staff supervising the wellbeing coaching that our College Track scholars receive.

Please know that if your needs for social emotional wellbeing growth and support exceeds what we can provide you with at College Track (i.e. if you need regular mental health counseling, diagnosis, psychotherapy, medication or are unable to keep yourself free from harm) we will schedule a family/caregiver meeting to discuss options for getting you the support that you need to succeed. **Our Wellness Program at College Track does not diagnose or treat mental illness.** We refer out all of our students who need those services out to our community mental health partners. Wellness at College Track utilizes a strengths-based, present-focused and educationally oriented coaching approach to develop wellbeing capacity and promote social/emotional learning for our scholars.

Please see your Site Director and/or the information boards at your site to learn more about the qualifications and background of your site’s Wellness staff, Wellness interns for the year and about your Wellness Community Partners.

College Track Wellness Program’s Core Components

- We provide 1:1 wellbeing coaching for our scholars that need and want to grow their social emotional and wellbeing skills and assets
- We ensure that our College Track staff are trauma informed and know how to create optimal environments at CT for learning and wellbeing
- We meet regularly, as a whole staff, to discuss scholar needs and interventions
- We provide an annual social emotional wellbeing strengths assessment called CoVitality to all of our scholars so that they know and we know where they are doing great in the wellness realm and where they could grow additional resource
- We support our College Completion Advisors with wellbeing coaching for their college students who are struggling
- We bring Wellness into all of our programming at College Track to improve what we do for our scholars

- We strive to embed Wellness in everything that we do at College Track and we provide evidence-based programming and interventions to you to help you become your healthiest and best self.

It is your right to know the following:

MEETINGS: Every site structures assignment to Wellness services a bit differently. At some sites, every student works regularly 1:1 with a Wellness intern while other sites are still building out their Wellness programs and intern capacity. You will be informed at your site about the breadth and depth of the College Track Wellness Program that currently exists at your site for 1:1 wellbeing coaching.

If you are assigned to 1:1 wellbeing coaching, you and your Wellness Director or Wellness Intern will work together to create a meeting schedule that works for you and suits your needs. We want you to know that the more that you meet with Wellness staff, the more that you will have the opportunity to learn about yourself and grow as well as improve your GPA. Wellness staff meet with students 1:1, in groups and through Student Life workshops to work on building Wellness capacity through conversations and coaching, expressive arts, psychoeducation, experiential activities and shared scholar opportunities.

Know that you are the driver of your growth in social emotional wellbeing areas. The more that you apply yourself, the more you will grow and the more success you will experience. We want you to be responsible for you and to make decisions that support your wellbeing, goals and dreams. You get to decide what you'd like to work on and talk about in your Wellness meetings. The things that you struggle with and that frustrate you are great places to start Wellness conversations.

It's important for you to know that the time to work with and talk to Wellness staff is during College Track's open hours. We don't have any kind of emergency facilities if you have a crisis. If you are having a particularly hard time outside of College Track's business hours, you will need to contact your trusted family members and/or other networks for support. We will help you develop a resource list if you anticipate having this need. Crisis resources are posted at College Track in all the bathrooms and we encourage you to take a picture of this list on your phone just in case you (or a friend or loved one) ever need it and put the phone numbers into your phone. Crises are generally not something that we plan for and it's a good idea to be prepared. The general national crisis hotline number is 800-273-8255.

WORKSHOPS: College Track has many well-being focused workshop opportunities offered through the Student Life Department and every site has a different selection of offerings. Stretch yourself and sign up for a wellbeing focused workshop when you're crafting your CT schedule. We offer things like yoga or mindfulness to decrease stress, expressive arts workshops for feelings and creativity explorations, and a classic Wellness Workshop designed to help you grow your wellbeing assets in all of the important areas all at once. These workshops are taught by CT Wellness staff, interns, community professionals or by our Wellness Community Partners.

CONFIDENTIALITY AND ITS LIMITS: You have a right to share what's going on in your life privately with Wellness Staff, but your parents/guardians still have a right to know about any safety concerns about you. Also, the Wellness Team works as one unit in terms of sharing confidential student information within the Wellness Team, as it is in your best interest to have them know exactly what is going on with you so that you can take full advantage of their expertise. The Wellness Team meets weekly to learn from each other and to discuss your specific needs. College Track program staff, from all departments, regularly work together to strategize how best to support you. They need to know what's going on with you too.

Site Directors, Organizational Performance and Wellness Staff all have access to your social emotional wellbeing records. We promise to hold what you share with us with the utmost respect and we discuss your growth and development with social emotional wellbeing skills so that we can best help you to gain mastery in

these areas. We all work together here at College Track to ensure your success and do not commit to keeping anything completely confidential within College Track.

Conversely, we don't voluntarily share any student Wellness information with anyone outside of College Track except our school partners, when there is a need for them to support you. If you need us to talk with someone else, (like a therapist or doctor) we'll need you to sign a release of information giving us permission to do so. The only reason we might need to break confidentiality in any way other than listed above would be if you are having a health or safety emergency or if there is a valid legal subpoena pending about you.

In order to make sure that you, as a College Track student, are fully resourced for college, the Wellness department will administer regular social/emotional learning and wellbeing assessments to ascertain your level of wellness, identify your growth areas and strengths, track your progress in SEL/Wellness skill acquisition. The assessment that we use is called [CoVitality](#) and is used in the California Healthy Kids Survey. We get a CoVitality baseline of all students in New Student Orientation, at the start of every academic year and again at the end of senior year in high school before going off to college.

In addition, College Track Organizational Performance staff prepare reports with general Wellness Data. These reports help us to improve the services that we provide to you, track student growth and development in key wellness areas and do not contain specific case notes or identifying student information in them.

MANDATED REPORTING: You need to know that all College Track staff are mandated reporters. This means that our primary concern is your safety and the safety of others. If a College Track staff hears that you or someone you know is in imminent danger, or may cause another to be in imminent danger, we are required by law to take action to keep you/another safe and report it to the appropriate authorities. Safety issues include but are not limited to: abuse or neglect of children or someone who can't make decisions for themselves (including minors witnessing abuse), and suicidal or homicidal intent.

SERVICES OFFERED AND NOT OFFERED: We are excited about engaging all of our scholars in Wellness and Student Life activities, programming and services. We provide appropriate resources and referrals for students in need of comprehensive mental health services outside of College Track. Just as we do not diagnose or treat mental illness, we cannot provide services for students in a mental health crisis. We will help you find appropriate services for your needs should a safety situation or need for comprehensive mental health support arise.

FEES: Wellness services are provided completely free of charge for College Track scholars and are part of our org wide College Track program offerings. We thoroughly believe in the value of Wellness work to help our scholars succeed.

WELLNESS STAFF QUALIFICATIONS: Wellness Directors are licensed or in the process of getting licensed as post graduate mental health professionals in the fields of either counseling, social work, or marriage and family therapy. They are not diagnosing or treating mental illness at College Track - they coach, educate, and provide tools which build student capacity in social/emotional learning and wellbeing best practices. All Wellness Interns and their work with College Track students are supervised by Wellness Directors or licensed Wellness Community Partners. At the beginning of each academic year, or if we have a change in our Wellness staff, we will make available through our Site Directors and/or informational boards at our College Track site the qualifications and credentials of our Wellness staff so that you know who's on the team.

By signing this form, you give us your permission to engage with our Wellness services as explained herein throughout the course of your College Track journey.

If you ever have any questions or concerns about College Track's Wellness Program, please see your Site Director or Wellness Director at your site. They can also direct you to the local Department of Regulatory Agencies should any need arise to share with them a concern.

I/We have carefully reviewed this form and understand my/our rights. I agree to these terms and understand that this Wellness Program Disclosure and Informed Consent is in effect as long as I am a College Track student. I also understand that I may rescind this agreement at any time by requesting to do so in writing.

Student's Full Legal Name: _____ **Student's Date of Birth:** _____

Parent or Guardian's Signature: _____ **Today's Date:** _____