

The University of Scranton  
**UNIVERSITY OF SUCCESS PROGRAM**  
**Cover Sheet**

Student Name: \_\_\_\_\_

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](mailto:margaret.loughney@scranton.edu)**

**Application Deadline: Saturday, April 1, 2017**

**Date Received:** \_\_\_\_\_

University of Scranton  
**UNIVERSITY OF SUCCESS PROGRAM**

**PERMISSION FOR GRADE RELEASE**

(This form must be signed by a parent/guardian)

I give permission for you to release grade reports and/or information regarding my child to the University of Scranton, University of Success Program for application purposes. If my child is accepted in the program I agree to give permission for you to release this information for continued academic purposes throughout his/her remaining junior high and senior high school years.

Student Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTE TO GUIDANCE COUNSELOR:**

PLEASE ENCLOSE THIS FORM WITH THE STUDENT'S MOST  
**RECENT REPORT CARD**  
IN THE FILE OF THIS STUDENT.

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 (6-8<sup>th</sup> grade)

\_\_\_ Senior High (9-12<sup>h</sup> 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 (6-8<sup>th</sup> grade)

\_\_\_ Senior High (9-12<sup>h</sup> grade)

\_\_\_ College (List degree/Major \_\_\_\_\_)

\_\_\_ Other education/training \_\_\_\_\_

## Financial Information

List all income received during the 1/1/16-12/31/16 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: \_\_\_\_\_

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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: Saturday, April 1, 2017**

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**Letter of Recommendation**

Please ask a Teacher, Guidance Counselor, Clergy, or any community leader who knows you well to submit a letter of recommendation on your behalf. 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.

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**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.

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The University of Scranton  
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**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

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