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

Application Deadline: Saturday, April 1, 2017

Date Received: ________________

020208
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 (6-8th grade)
___ Senior High (9-12th 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 (6-8th grade)
___ Senior High (9-12th 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: ____________________________

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
University of Scranton

UNIVERSITY OF SUCCESS PROGRAM

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.

Application Deadline:    Saturday, April 1, 2017
The University of Scranton

UNIVERSITY OF SUCCESS PROGRAM

Application

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.

Application Deadline: Saturday, April 1, 2017
The University of Scranton
UNIVERSITY OF SUCCESS PROGRAM
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

Application Deadline: Saturday, April 1, 2017