

SENIOR SUCCESS CAMP APPLICATION

Senior Success Camp at The Door is a summer program run by College Paths, The Door's college access program. This program is open to **rising high school seniors** who are on track to graduate in 2018 and need support applying to college.

Senior Success Camp consists of a series of workshops covering each part of the college application process.

By the end of this program you will: have a completed personal statement, a personalized college list, and a nuanced understanding of financial aid and scholarships. You'll work in groups and individually with an experienced college advisor to develop a personalized college application success plan for your senior year.

Enrollment in this program also gives you the option to participate in SAT prep classes to prepare to take the SAT in August or the fall, as well as attend optional community service projects to boost your college application/ resume and leadership skills.

Please make sure to complete *each* page of this application. Application is not complete without intake form and financial verification form.

Who is eligible?

Rising high school seniors on track to graduate in 2019. You must be a Door member to enroll. It is free to become a Door member!

When does this take place?

- July 9 - August 10, 2018
- Mondays--Thursdays | 10:30--1:00PM
- SAT Prep: Weds 9:00-10:30 AM/ Fridays 10:30-1:00 PM

Where does this take place?

The Door, 555 Broome Street
New York, NY 10013

When and how do I apply?

The deadline is MAY 18TH

Submit your application via email to Maria Monica Andia at mandia@door.org or drop it off in person with her at The Door, room 215.

SENIOR SUCCESS CAMP APPLICATION

STUDENT INFORMATION:

Name: _____
Date of Birth: _____
Door ID (leave blank if not yet a Door Member): _____
Phone: _____
Email: _____

High School: _____
Counselor Name: _____
Counselor Phone: _____
Counselor Email: _____

EDUCATIONAL HISTORY:

Have you taken the SAT? Yes No

If yes, what is your SAT score? _____

Are you planning on taking the SAT again? Yes No

When? August 2018 October 2018 November 2018

Are you interested in SAT prep at The Door this summer? Yes No

Have you completed your Regents? Yes No

If no, which Regents exams do you still have remaining?

High School Average: _____

What is your favorite subject?

What is the subject you need most help with? _____

Please describe your learning style:

POST SECONDARY GOALS:

I am interested in applying to colleges out of the city: YES NO

I am interested in applying to colleges in the city: YES NO

I am interested in majoring in _____

Colleges I am interested in are:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

SUMMER PLANS:

Will you be working this summer? YES NO

If yes, where? _____

Are you interested in attending a college trip with The Door? YES NO

EXTRACURRICULAR ACTIVITIES:

Are you involved in extracurricular activities outside of school? YES NO

Describe what clubs/ organizations/ programs you are involved in:

Why are extracurricular activities important to you?

RECOMMENDATION:

Please ask a teacher, guidance counselor, mentor, or other educator in your life to recommend you for this program. You may submit this as a separate attachment if you wish.

Recommender, why would this student benefit from the Summer Senior Success Camp?



College Paths – Student Intake Form

YOUNG PERSON INFORMATION

Today's

Date:

Door ID: _____

First Name: _____ MI: _____ Last Name: _____ Nickname: _____

Date of Birth: _____ SSN: _____

Address: _____ Apt. #: _____ City: _____ State _____ Zip: _____

Cell: _____ Email: _____

Communicate via text messages? Y N

Race/Ethnicity: American Indian or Alaska Native Native Hawaiian or Other Pacific Islander Asian Black/African American Hispanic/Latino White Middle Eastern More than one race Other:

Gender: Male Female _____ (Fill in the blank) **Age:** _____

LIVING SITUATION

With whom/where do you currently live: With 2 Parents With 1 Parent With Legal Guardian With Family/Friends (not parent)

Foster Care (Group Home or Private Residence) Independent/Alone Homeless on the street Homeless in Shelter

Are you currently in foster care? Y N Have you ever been in foster care? Y N

Household size: There are _____ (# including yourself) individuals living in my household.

EDUCATION

What is the last grade you completed?

No high school 9th 10th 11th High School Diploma High School Equivalency Some College Associate's Degree

Which best describes your current educational situation?

in 9th grade in 10th grade in 11th grade in 12th grade In a High School Equivalency program In college Not in school

Name of Current/Last School: _____

EMPLOYMENT

Are you currently working? Y N If YES, please list the type of employment you have (check all that apply).

Unpaid Internship Paid Internship Part-time Job Full-time Job Off the books

Have you ever been employed? Y N Are you interested in finding a job or internship? Y N

CITIZENSHIP

What is your country of birth? _____ Language spoken at home (if not English)? _____

Are you a citizen of the United States? Y N Are you a permanent resident? Y N

HOUSEHOLD INCOME AND FAMILY BACKGROUND

Do you receive public assistance? Y N I don't know

If YES, which types? Food Stamps Cash Assistance SSI/SSDI Medicaid I don't know

Does anyone else in your household receive public assistance? Y N I don't know



If YES, which types? Food Stamps Cash Assistance SSI/SSDI Medicaid I don't know

The highest level of education my birth or adoptive mother received is:

unknown less than high school completed high school completed 2 year college completed 4 year college
completed graduate school

The highest level of education my birth or adoptive father received is:

unknown less than high school completed high school completed 2 year college completed 4 year college
completed graduate school

HEALTH

Do you have health insurance? Y N I don't know

COURT INVOLVEMENT Have you ever been arrested? Y N

Student: Review the Statement Below & Sign

I consent that all the information is correct and that my transcript and high school record information be made available to College Paths staff to help provide me with academic counseling services to further my educational and professional growth and development.

I further consent to the release of information and financial documentation as needed to establish eligibility for me to participate in College Paths, University Settlement's Talent Search Program at The Door. I understand that any information provided to the Talent Search staff is to be kept confidential and will not be released to any other agency, organization or persons without my express permission.

Student Name (Print)

Student Signature

Today's Date

TALENT SEARCH - PARENT/GUARDIAN INCOME VERIFICATION STATEMENT

Updated 3/19/18



College Paths is University Settlement’s college access program hosted at our sister organization The Door. We help students get ready for, apply to and enroll in college. The program is funded by a Talent Search (TRiO) grant from the U.S. Department of Education. We are required to collect information about household income to verify eligibility.

This information will be kept confidential and not disclosed to any other individual or organization without your express permission. This form is to be completed by the parent/legal guardian of the student named below and returned to his/her college advisor at The Door.

Student Name: _____
Last First

1) How many people live in your household?

Adults (ages 18 and over) _____ Children (ages 0 - 17) _____

2) What was your household’s taxable income in 2017?

(Check one box)

- \$0 - \$18,210
- \$18,211 - \$24,690
- \$24,691- \$31,170
- \$31,171 - \$37,650
- \$37,651- \$44,130
- \$44,131- \$50,610
- \$50,611- \$57,090
- \$57,091 - \$63,570
- More than \$63,570

This information can be found on your 2017 Federal Income Tax Return, Form 1040-line 43; Form 1040A-line 27; or 1040EZ-line 6.

3) Sign below. By signing this form, you agree that all information is correct to the best of your knowledge.

 Print Parent/Guardian Name Parent/Guardian Signature Date

Consent and Release Agreement

I, _____, hereby give The Door – A Center of Alternatives, Inc. and each of its subsidiaries, divisions, related entities or assigns (collectively “The Door”), the right and permission to use my name, comments, artistic work or image and/or likeness (collectively “Materials”) in any manner, anywhere in the world, any number of times for any period of time for whatever purpose The Door may choose. I further give The Door the right and permission to publish, republish and/or copyright the Materials through any media or medium (whether known or unknown), including without limitation on the internet and any other digital, multi-media or electronic mediums. I waive any right to approve any use of the Materials.

Releases: I hereby release, discharge and agree to hold The Door and any person acting on The Door’s behalf or with The Door’s permission harmless from any liability whatsoever related in any way to use of the Materials.

Please check one box:

I warrant that I am not a minor and am competent to contract in my own name.

I am a minor and a parent and/or guardian will sign on my behalf below.

I have read the foregoing release, authorizations and agreement, before affixing my signature below, and warrant that I fully understand the contents thereof:

SIGNATURE

PRINT NAME

DATE

ADDRESS

CITY/STATE/ZIP

PHONE

For Parents and/or Guardians of Minors

I hereby certify that I am the parent and/or guardian of _____ who is a minor, and hereby consent that his/her image and likeness which has been or is about to be taken or recorded and any content provided by him/her through interviews or otherwise, may be



used by The Door for any purposes set forth in the release above, signed by the minor, with the same force and effect as if signed by me.

SIGNATURE	PRINT PARENT/GUARDIAN NAME	DATE
ADDRESS	CITY/STATE/ZIP	
PHONE		

*****IMPORTANT: IF YOU ARE A MINOR IN FOSTER CARE, PLEASE FILL OUT THE BACK OF THIS FORM.*****

I am a minor (under 18 years old) and currently in foster care.



By signing below I give you permission to contact my foster care case worker for information regarding consent for my image and likeness to be used for the purposes set forth in this release.

SIGNATURE

PRINT NAME

DATE

ADDRESS

CITY/STATE/ZIP

PHONE

FOSTER CARE AGENCY NAME

CASEWORKER'S NAME

CASEWORKER'S PHONE NUMBER