

# *Pre-College / TRIO Programs*

## • *Esperanza Educational Talent Search*

The Esperanza Educational Talent Search Program at The National Hispanic University is an outreach program designed to prepare low-income first generation middle school, high school, and re-entry students for college. Our goal is to expose students to different cultural and educational activities that focus on developing their academic and interpersonal skills, and heighten cultural awareness. We are confident that our program will provide added support for your student throughout their academic career.

Our programs are designed to facilitate academic achievement through the following:

- Academic Advising
- Tutoring
- Social and Cultural awareness
- Leadership
- Career exploration

Our Pre-College program services are offered free to students who meet the requirements. Students are selected to participate in the program if they exhibit and or possess the desire and commitment to succeed in college. Our goal is to help bridge the gap between students' potential and their actual level of achievement, thus increasing their opportunity to be eligible for college admission.

The National Hispanic University's Pre-College programs serve 6<sup>th</sup> – 12<sup>th</sup> graders from the following schools.

### **Middle Schools**

Castillero Middle School

Hoover Middle School

Steinbeck Middle School

Lee Mathson Middle School

Pala Middle School

### **High Schools**

Independence High School

James Lick High School

Latino College Preparatory Academy

Mt. Pleasant High School

W.C. Overfelt High School

Lincoln High School

Gunderson High School

San Jose High Academy

For more information about our pre-college programs, an application, or to make an appointment with one of our advisors, please contact our office **Middle Schools, English and Spanish** at (408) 273-2714  
**High Schools: English** (408) 273-2729 **Spanish** (408) 273-2682 Monday through Friday 9:00 am-5:00pm.



***! Si Se Puede !***  
The National Hispanic University  
Pre-College / TRIO Programs  
14271 Story Road  
San José, CA 95127  
(408) 254-6900 fax (408) 254-1369



**Keep this page for future reference**

# The National Hispanic University

## Pre-College/TRIO Programs

	Yes	No
1 <sup>st</sup> Gen		
Low & 1 <sup>st</sup>		
Low Income		

**Please print students' name**

**Office Use Only, Fiscal Year**  /

Last Name

First Name

Middle Name

Social Security Number:  -  -

U.S. Citizen:  Yes  No If no type of visa:

Alien #

Date of birth:  /  /  Age:

Place of birth:

Email address:

**Current Address**

Address:  Apartment #

City:  State:  Zip Code:  -

Phone Number:  -  -  Cell  -  -

Work:  -  -

Sex:  Male  Female Preferred Language  English  Spanish  Other: \_\_\_\_\_

Ethnic Group:  Native American  Hispanic\Latino  Asian\Pacific Islander

African American  Anglo-Saxon  Other

School: \_\_\_\_\_ Grade: \_\_\_\_\_ GPA: \_\_\_\_\_

**Parent/Guardian Section (Please fill out COMPLETELY)**

**Print Name:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_  
**Father/Guardian**

**Print Name:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_  
**Mother/Guardian**

Email address:

# The National Hispanic University

## *Pre-College/TRIO Programs*

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### Program Eligibility Questionnaire

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Does either of the student's parents have a 4-year college degree in the United States?  Yes  No

#### Income Information

Did you file a Federal Income Tax Form (1040) last year?  Yes  No

What is the family's income? (Please check one):

\_\_\_\_\_ Under \$12,075      \_\_\_\_\_ \$12,076 - \$16,275      \_\_\_\_\_ \$16,276 - \$20,475  
\_\_\_\_\_ \$20,476 - \$24,675      \_\_\_\_\_ \$24,676 - \$28,875      \_\_\_\_\_ \$28,876 - \$33,075  
\_\_\_\_\_ \$33,076 - \$37,275      \_\_\_\_\_ \$37,276 - \$41,475      \_\_\_\_\_ \$41,476 – and over.

**How many people are supported by this income (including parents)?** \_\_\_\_\_

Does the family receive any of the following benefits? (Please check all those that apply).

Free or reduced lunch at school	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Aid to families with dependent children (AFDC)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Social Security	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Veterans Benefits	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Food Stamps	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Unemployment compensation	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Your signature is required below. Without your signature, your application will not be complete and will not be processed.

I certify that all the information provided in my application is true and accurate. I understand that Pre-College/TRIO Programs can deny my admission or enrollment if any of the information is found to be incomplete or inaccurate.

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**Student's Signature**

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**Date**

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**Parent/Guardian Signature**

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**Date**

# *Pre-College/TRIO Programs*

## The National Hispanic University

### MEDICAL CONSENT FORM

Dear student:

Your parents or legal guardian signature on the Medical Release Form will authorize us to proceed with any medical attention, which you may require while participating in the National Hispanic University's Pre-College/TRIO Program's activities. Of course, in the event of a major medical problem, we will notify your parents or legal guardian as promptly as possible and be guided by their wishes. If in an emergency they cannot be reached, we will be able to act as quickly as medical judgement may dictate.

### **TO BE COMPLETED AND RETURNED BY THE PARENT OR LEGAL GUARDIAN OF STUDENT UNDER EIGHTEEN YEARS OF AGE**

Name of minor \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_-\_\_\_\_-\_\_\_\_\_

I hereby authorize and direct such physicians and surgeons recommended and requested by Pre-College/TRIO Programs at The National Hispanic University to perform such diagnostic, therapeutic, and/or surgical procedure for of upon (as deemed visible for the well being of) the minor above. This consent shall be in effect as long as the minor named above is under eighteen (18) years of age. If an emergency arises requiring a major surgical procedure, The National Hispanic University will attempt to reach me and to be guided by my wishes, but if I cannot be reached, I authorize the attending physician to proceed as deemed advisable.

In the event of minor ailments (i.e. upset stomach, headache, and motion sickness), I hereby authorize the Pre-College/TRIO program's staff to administer over the counter medication to my son/daughter.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_-\_\_\_\_-\_\_\_\_\_

Relationship to minor: (Father, Mother, Legal Guardian) \_\_\_\_\_

Address: \_\_\_\_\_  
Street

City State Zip Code

Telephone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Emergency # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relation \_\_\_\_\_

Has your child ever experienced any allergic reaction to medication or any other types of allergies?  
Please check one:  Yes  No

If yes, please describe: \_\_\_\_\_

Name of Physician \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Insurance Carrier \_\_\_\_\_ Policy # \_\_\_\_\_

# ***Pre-College/TRIO Programs***

## **The National Hispanic University**

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### **Personal Records Authorization Release Form**

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I hereby consent to the disclosure of information from the record of: \_\_\_\_\_  
that attends to \_\_\_\_\_ Student's Name.  
School Name.

Maintained by any school consistent with the **Federal Family Educational Rights and Privacy Act of 1974**, other laws, regulations, or policies; to designate representatives of other education institutions\* in order that they might determine my eligibility for a need of special services provided by their institution.

I understand that my written directions might withdraw this consent to the keeper of the student's records at any time.

\_\_\_\_\_  
**Student's Signature** \_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Parent / Legal Guardian** \_\_\_\_\_  
**Date**

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### **Media Consent Form**

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I hereby authorize E.E.T.S. to use my (child's) name and/or photograph for editorial, promotional, recruitment, or educational purposes; and the use of electronic devices or online programs to enhance my child's academic progress.

\_\_\_\_\_  
**Student's Signature** \_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Parent / Legal Guardian** \_\_\_\_\_  
**Date**

\*Instructions are required to keep and make available to the parents of the student, a record of disclosure made pursuant to this consent.

**The National Hispanic University**  
***Pre-College/TRIO Programs***

**Waiver Release Form**

The Board of Trustees of the National Hispanic University wishes to permit \_\_\_\_\_, an unmarried minor, to participate in the National Hispanic University's Pre-College/TRIO Programs. Participation in the program will include numerous fieldtrips, some which may be overnight. In addition, participants will receive counseling and guidance by employees of the Board of Trustees.

In consideration of the granting of permission by the Board of Trustees of the National Hispanic University for the participant to participate in the program described above, the participant's parents or legally appointed guardian hereby agrees to identify, hold harmless and forever discharge the Board of Trustees of the National Hispanic University and their employees and agents from all claims and demands which the participants, parents or legal guardian, the representatives, or the successors of them or any other person may have against the Board of Trustees and its employees and agents by reason of acts, illness or injury, or any time subsequent thereto.

The participant and the participant's parents or legal guardian moreover hereby give consent to the Board of Trustees and its employees and agents to render medical treatment and assistance to the participant if the rendition of such treatment should become necessary or desirable during the course of the program.

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

**Please verify that all sheets are signed are completed appropriately.**

## Directions to NHU/ Direcciones para llegar a la Universidad NHU

**From Highway 101:** Exit East onto Story Rd. Head East. Pass 12 traffic lights (2.4 miles) until reaching White Rd. Approximately 1/10 of a mile from this intersection you will find the university on the left-hand-side.

**From Highway 280 or 680:** Exit onto Capitol Expressway heading south. At Story Rd., turn left. 3 traffic lights down you will cross the Story Rd. and White Rd. intersection. Approximately 1/10 of a mile from this intersection the university will be on the left-hand-side.

**Si usa el Highway 101:** Tome la salida que va hacia el Este. Va Pasar 12 semáforos (luces) aproximadamente (2.4 Millas) hasta llegar a la Avenida White Road. La universidad se encuentra unos metros mas adelante en el lado izquierdo en la Avenida Story Road.

**Si usa el Highway 280 o 680:** Tome la salida que va a Capitol Ave. Dirección Sur, de vuelta a la izquierda. Cruce tres semáforos hasta encontrar la Avenida White Road. La universidad se encuentra unos metros mas adelante en el lado izquierdo en la Avenida Story Road.

