Veterans Upward Bound Program (VUB) at the University of New Mexico-Taos is the only veterans Federal TRiO Program funded by the United Stated Department of Education in New Mexico. VUB is designed to assist our veterans in the development of academic and other requisite skills necessary of acceptance and enrichment of basic skills through instructions, advising, and tutoring. The primary goal of the program is to increase the rate at which participants enroll and complete post-secondary education programs. All VUB services are free to eligible veterans.

We offer a unique range of services designed to prepare eligible veterans for success when they enter their chosen education program (not specific to UNM students), whether it is at a two-year community college, a four-year college/university, or a public or private vocational or technical school. All services, including instruction, textbooks, advising, and supplies are provided **FREE OF CHARGE**.

Veterans will work one-on-one with a staff member to discuss their needs, interests, and short-term/long-term goals. Participants will complete an academic assessment to determine their strengths and weaknesses. Next, a plan will be developed to help veterans reach their goal. **Academic weaknesses can be worked on by attending FREE, academic refresher courses and tutoring.** Finally, VUB staff will assist with college admissions and the financial aid process. We will also help make contacts with other agencies providing services to veterans, as well as college programs and personnel. **Upon completion of the VUB Program, we will continue to be a resource for ongoing educational success.**

Admission into the VUB will be given to those who meet at least three of the program guidelines to include:

- Meet the low-income eligibility criteria as established by the U.S. Government.
- Meet first-generation college status (i.e., parents do not have a bachelor’s degree).
- **Must** have served in the U.S. military for 181 days or more and possess a military discharge with characteristics other than dishonorable.
- Show a need for academic support to successfully pursue a post-secondary education.

**When to apply?**

As soon as possible!!! The main goal of this program is to prepare veterans for beginning, or returning to, post-secondary education, GED preparation, and short-term remedial and refresher classes. The ideal time to begin the program is at least one semester before you start college or vocational technical classes.

Thank you for taking the time to learn about the VUB program at the University of New Mexico-Taos. For further information regarding our services, please contact: Hank Hargis, Program Coordinator: toll free 855-357-3725, Business Cell 575-779-8494, or via email at hargis@unm.edu.
# Applicant Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First</th>
<th>M.I.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>Apartment/Unit #</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Phone</th>
<th>E-mail Address</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>DOB</th>
<th>Social Security #</th>
</tr>
</thead>
</table>

How did you hear of the VUB program:
- Community agency
- Veterans agency
- Advertisement
- Project's Web site
- Educational Institution
- Word of mouth/walk-in
- Other __________

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th>Ethnicity</th>
</tr>
</thead>
</table>
- African-American
- Asian American
- White
- Native American
- Pacific Islander
- Other __________
- Hispanic
- Non-Hispanic

# Household Income Information

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>Married</th>
<th>Separated</th>
<th>Divorced</th>
<th>Widowed</th>
<th>Single</th>
</tr>
</thead>
</table>

How many family members reside in your household? ______
How many family members can you claim as dependents? ______

Are you currently employed?  
- Yes
- No

If not employed, what is the date of last employment?  
(mm/yyyy)

Do you have a disability?  
- Yes
- No

Accommodations ______

Did you file a recent federal income tax return?  
- Yes
- No

If not, do you receive non-taxable benefits?  
- Yes
- No

# Citizenship

Are you a citizen of the United States?  
- Yes
- No

Are you a permanent resident of the United States?  
- Yes
- No

# Military Service

<table>
<thead>
<tr>
<th>Branch of Service</th>
<th>Rank at Discharge</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Dates of Service</th>
<th>From</th>
<th>To</th>
</tr>
</thead>
</table>

| Character of Discharge | |
|------------------------||

# Education Experience

<table>
<thead>
<tr>
<th>High School</th>
<th>City, State</th>
</tr>
</thead>
</table>
| Did you graduate? | Yes
- No |

| City, State | |
|-------------||

| GED? | Yes
- No |
|------|------|

<table>
<thead>
<tr>
<th>College</th>
<th>City, State</th>
</tr>
</thead>
</table>
| Did you graduate? | Yes
- No |

| Degree Earned | |
|---------------||

<table>
<thead>
<tr>
<th>GED</th>
<th>Vocational or Trade School</th>
<th>College</th>
</tr>
</thead>
</table>

Have you been out of school for five or more years? (high school or post-secondary)  
- Yes
- No
- if yes how long? ______

Revised: 9/24/15
INDIVIDUALIZED EDUCATION PLAN AND PARTICIPATION AGREEMENT

Name [print or type] ____________________________________________

VUB Program Objective       ____GED       ____College Prep

- I, agree to adhere to all policies stated in the VETERANS UPWARD BOUND information packet.
- I understand and agree that failure to satisfactorily participate according to the VUB attendance policy can and will result in administrative withdrawal from the VUB Program.
- I further understand and agree that the VUB Program cannot benefit me without my full participation and cooperation in all activities.
- I agree to achieve my VUB Program Objective according to the Individualized Education Plan reflected below.
- I affirm that all statements and information provided in these application materials are true and correct to the best of my knowledge.

Veteran Signature_________________________________________ Date ____________

Interviewer Signature ______________________________________ Date ____________

VUB Semester: ______________
Courses:
    English ____  Science ____
    Mathematics____  Foreign Language ____

VUB Semester: ______________
Courses:
    English ____  Science ____
    Mathematics____  Foreign Language ____

Veteran Signature_________________________________________ Date ____________

VUB Semester: ______________
Courses:
    English ____  Science ____

Revised: 9/24/15
In accordance with the Privacy Act of 1974 (Public Law No. 93-579, 5 U.S.C. 552A), you are hereby notified that the Department of Education is authorized to collect information to implement the Federal TRIO Veterans Upward Bound Program under Title IV of the Higher Education Act of 1965 as amended (Public Law 102–325, sec.402C). In accordance with this authority, the Department receives and maintains personal information on participants in the Veterans Upward Bound Program. The principle purpose for collecting this information is to administer the Program, including tracking and evaluating participants’ academic progress. Providing the information on these forms, including a social security number (SSN) is voluntary; failure to disclose a SSN will not result in denial of any right, benefit or privilege to which the participant is entitled. The information that is collected on these forms will be retained in Program files and may be released to other Department officials in the performance of official duties.

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C.§ 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under the applicable program of the U.S. Department of Education. In accordance with the authority and purpose identified in the above Privacy Act Notice, I hereby authorize The University of New Mexico - Taos Federal TRIO Veterans Upward Bound Program access to my personal information through student data systems maintained by the New Mexico Department of Higher Education (NMHE) to track my academic progress in postsecondary education.

Veteran Signature __________________________ Date ___________
ALTERNATE CONTACT INFORMATION

Please provide the name, address, and phone number of someone who will always know how to contact you.

Name

Address

City | State and zip | Relationship

Phone ( ) | Phone ( )

VA EDUCATION BENEFITS STATUS

(VETERAN MUST INITIAL APPROPRIATE LINES AND SIGN AND DATE)

___ I will be collecting VA Education Benefits while enrolled in the Veterans Upward Bound Program.

___ I will be collecting benefits through the VA Vocational Rehabilitation Program (Ch. 31) while enrolled in the Veterans Upward Bound Program.

___ I DO NOT wish to collect VA Education Benefits while enrolled in the Veterans Upward Bound Program. My reason for not collecting benefits is:

   ___ No longer eligible - Delimiting date expired (10 years after discharge).
   ___ Not eligible for VA Education Benefits (did not contribute to VEAP or Montgomery GI Bil).
   ___ Would like to save VA Education Benefits for future use.
   ___ OTHER (please explain)________________________________________________________

Veteran Signature __________________________ Date __________________

NOTE: For veterans who elect to receive VA Educational Benefits payments have them meet with the Project Director to complete a US Department of Veterans Affairs On-line Application (VONAPP).

STOP

The VUB staff will complete the remainder of this packet
LOW-INCOME ELIGIBILITY WORKSHEET

Date completed ____________________ By ________________________________ Tax Year ________

NOTE: Compute for STANDARD DEDUCTIONS* if the applicant did not itemize; use the ITEMIZED DEDUCTIONS* if the applicant filed a 1040 Form and Itemized Schedule A. Please record in the "COMMENTS" section below if additional exemptions for blindness or over age 65 were included in the number of exemptions.

<table>
<thead>
<tr>
<th>ADJUSTED GROSS INCOME</th>
<th>$ __________________ Line 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>( IRS Forms 1040, 1040A, 1040EZ )</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STANDARD DEDUCTIONS (2013)</th>
<th>$ __________________ Line 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Single $6,100</td>
<td></td>
</tr>
<tr>
<td>2. Head of Household $ 8,950</td>
<td></td>
</tr>
<tr>
<td>3. Married filing jointly $12,200</td>
<td></td>
</tr>
<tr>
<td>4. Married filing separately $6,100</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ITEMIZED DEDUCTIONS</th>
<th>$ __________________ Line 3</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NUMBER OF EXEMPTIONS CLAIMED.</th>
<th>$ __________________ Line 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>EXEMPTIONS</td>
<td></td>
</tr>
<tr>
<td>Multiply the number of exemptions claimed by the exemption allowance.</td>
<td></td>
</tr>
<tr>
<td>(NOTE: For tax year 2013 the allowance is $3,900)..........................</td>
<td></td>
</tr>
</tbody>
</table>

* Subtract line 2 or 3 from line 1 to determine Total Taxable Income (line 6).

<table>
<thead>
<tr>
<th>TOTAL TAXABLE INCOME</th>
<th>$ __________________ Line 6</th>
</tr>
</thead>
</table>

*******Check Federal TRIO Program Annual Low-Income Levels to determine low-income eligibility criteria*******

DOES VETERAN MEET LOW-INCOME ELIGIBILITY GUIDELINES? _____ YES _____ NO

Please comment on any unusual, income-related circumstances (i.e. Disability or prolonged unemployment). Please post a copy of IRS form 1040 in Packet A after the copy of Veteran's DD-214. If IRS Form 1040 is not available please post VUB Temporary Income Statement in place of the tax form. To determine low income eligibility based on income amount indicated on the VUB temporary income statement form, calculate the total taxable income according to the deduction/exemption amounts of the specified tax year.

COMMENTS:

__________________________________________________

__________________________________________________

__________________________________________________

__________________________________________________

Revised: 9/24/15