



Academic Talent Search

SANTA ANA COLLEGE
Academic Talent Search Program
Application PY: 2021-2022

Class of: _____

STUDENT INFORMATION

School Attending: [] Santa Ana H.S. [] Valley H.S. [] Century H.S. [] Saddleback H.S.
[] Willard Intermediate [] Sierra Preparatory Academy [] Lathrop Intermediate [] Heninger Elementary

Name (Last / First / Middle): _____ Student ID: _____ Grade: _____

Home Address: _____ Apt#: _____ City: _____ Zip Code: _____

Parent Cell/Home Phone: (____) _____ Student Cell Phone: (____) _____

Student Email: _____ Date of Birth: ____/____/____ Gender: ____ Age: ____

Student's Ethnicity (Check all that apply):

Hispanic or Latino: [] Yes [] No

[] Other: _____

Student's Race (Check only if applicable or all that apply):

[] American Indian or Alaska Native [] Black/African American

[] Hawaiian/Pacific Islander [] Asian [] White [] Other _____

Student's Legal Status (Check One): Student must be U.S. Citizen or Permanent Resident to participate in the program.

[] U.S. Citizen SS#: _____ [] Permanent Resident A# (required): _____

Are you enrolled in Upward Bound? [] Yes [] No Have you applied for Academic Talent Search before? [] Yes [] No

PARENT/GUARDIAN INFORMATION

Student lives with (check one): [] Both Parents [] Single Parent [] Parent & Stepparent [] Guardian(s)

Parent/Guardian 1 (Last / First / Middle): _____ Cell Phone: (____) _____

Parent/Guardian 2 (Last / First / Middle): _____ Cell Phone: (____) _____

Does Parent/Guardian 1 have a 4-year degree in the U.S.? [] Yes [] No

Does Parent/Guardian 2 have a 4-year degree in the U.S.? [] Yes [] No

Total Household Size: (including Student, Parent(s)/Guardian(s), Siblings and other Dependent(s): _____

Last Years Annual Income: \$ _____
(Located on 1040 line 43, 1040A line 27, or 1040EZ line 6)

Income From Other Sources: [] Social Security [] Child Support
[] Disability/Unemployment [] Other: _____

Are you eligible for or are you on the Free and Reduced Lunch Program? [] Yes [] No

STUDENT NEEDS ASSESMENT (please check all that apply)

- [] I need to learn what college core requirements are
[] I need to learn about education options after high school
[] I need help researching colleges and careers
[] I need to learn about financial aid and scholarships
[] I need to learn about college entrance exams (SAT/ACT)
[] I need to learn or develop better studying habits
[] I need help with time management
[] I struggle with math or science
[] I need help with reading, English, or writing subjects
[] I need to develop financial literacy skills
[] I need to develop my leadership skills
[] I need to visit college campuses
[] I need to get more involved in community service
[] My teacher/counselor recommended me for the program
Name: _____
[] I need tutoring in the following subject(s):

[] I would like to learn more about different learning styles

Application Certification and Authorization

I hereby certify that the information provided in this application is correct and to the best of my knowledge. I give my permission for my son/daughter to participate in the Santa Ana College Academic Talent Search Program.

Parent/Guardian Signature: _____ Date: _____ Revised 08/23/2021



Academic Talent Search

SANTA ANA COLLEGE
Academic Talent Search Program
Parent Consent

Field Trip Permission:

I hereby give permission to the Academic Talent Search Program staff to take my son/daughter on various field trips to colleges, cultural, educational and recreational centers. This permission is given for the Academic Talent Search approved activities and will be in effect as long as my son/daughter is in the program.

Permission to Access Records:

I hereby give the Academic Talent Search Program staff permission to have access to report cards, high school transcripts, and other pertinent information such as test results. I understand that this permission will be in effect throughout my son's/daughter's participation in the program and is used only as a tool to help my child with making sure he/she is taking all the A-G requirements and all necessary test to graduate from high school.

Picture Release Form:

I hereby give the Academic Talent Search Program permission for my son/daughter to be photographed during events and activities. I also give permission for these pictures to be used in brochures, presentations, and other Academic Talent Search materials.

Medical Consent:

Health Status:

Does your child have any past or present health problems or conditions we should know about?

If yes explain: _____

Is your child allergic to any medication? [] Yes [] No

If yes which: _____

Name of Family Physician: _____ Telephone: (_____) _____

Medical Emergency:

In case of emergency, please contact parent/guardian at: (_____) _____

If parent/guardian is not available, please contact: Name _____ at (_____) _____

Is the student covered by health insurance [] Yes [] No

If yes, please provide the Insurance Carrier: _____ Medical ID# _____

Medical Release:

I agree to indemnify and hold harmless SAC-Academic Talent Search, Santa Ana College, Rancho Santiago Community College District, Santa Ana Unified School District, and its officers, agents and employees from and against any and all claims and liabilities which may arise out of or result from or be in any way connected directly or indirectly with participating in the program. Also, I consent to emergency treatment of my son or daughter by the staff of SAC-Academic Talent Search and/or by the staff of an accredited hospital or clinic if this is deemed necessary by SAC-Academic Talent Search staff. I understand that I will be notified of illness as soon as possible.

I hereby give consent and permission to all the items listed above (Field Trips, Access to Records, Picture Release, and Medical Consent/Release)

Parent Signature: _____ Date: _____

For Office

Eligibility: _____ SA Entry Date: _____ Staff Initials: _____

Use Only:

Director Signature: _____ Date: _____