

# MEMBERSHIP APPLICATION

Educational Talent Search - Mineral Area College - P.O. Box 1000 – Park Hills, MO 63601 – Phone: (573) 518-2380 – Fax: (573) 518-2168

Last Name:		First Name:		MI:
School:		Grade:	Social Security No:	
Home Address:		City:	State:	Zip:
Home Phone:		Other Phone:	Parent or Guardian Email:	
Birth Date: ____/____/____	Are you a United States Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		* Do you have a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please attach explanation)	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Ethnicity: Are you Hispanic or Latino Yes <input type="checkbox"/> No <input type="checkbox"/> Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander			

With whom do you live? Please check all that apply and give full names: \_\_\_\_\_ Does this person have a four-year Bachelor's degree? \_\_\_\_\_

<input type="checkbox"/> Natural Mother	Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Natural Father	Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Stepmother	Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Stepfather	Name: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Female Guardian	Name: _____ Relationship to you: _____	
<input type="checkbox"/> Male Guardian	Name: _____ Relationship to you: _____	
<input type="checkbox"/> Other	Name: _____ Relationship to you: _____	

Do you have a sister/brother in ETS?  Yes  No  
If yes, their name(s): \_\_\_\_\_

How many people live in your home including you? \_\_\_\_\_

**TOTAL TAXABLE FAMILY INCOME: \$** \_\_\_\_\_

**ANY INFORMATION PROVIDED IS HELD IN THE STRICTEST CONFIDENCE BUT IS NECESSARY FOR DETERMINING ELIGIBILITY FOR THIS PROGRAM.**

**TO DETERMINE TAXABLE INCOME:** Refer to **Form 1040** (line 43), **Form 1040A** (line 27) or **Form 1040EZ** (line 6) of your most recent federal income tax form (or forms if parents or guardians file separate returns)

**PERMISSION TO RELEASE ACADEMIC INFORMATION AND CERTIFICATION OF ACCURACY:**

I authorize the release of secondary and post secondary transcripts, test scores, enrollment status and other information that can assist Educational Talent Search in determining the applicant's needs, academic potential, and interests. The signature below certifies the above information:

**Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

X \_\_\_\_\_



Your child may be photographed in conjunction with ETS events. ETS may use the photographs along with your child's name in publicity articles such as the ETS newsletter, local newspapers, or web site.

I do **NOT** grant permission for my child to be photographed in conjunction with ETS events.



In consideration of being allowed to participate in Educational Talent Search and its activities sanctioned by Mineral Area College, I, \_\_\_\_\_ (please print), the parent or guardian of \_\_\_\_\_ (please print), do hereby release, waive, and discharge Mineral Area College and Educational Talent Search of and from all liability, claims, or demands arising out of my child's participation in said program and its activities, including any accident or injury that may occur in route to or from Mineral Area College or to or from any of the activities/field trips sponsored by Educational Talent Search. I recognize that by signing this waiver I am waiving important substantive rights on behalf of the above named student and do so voluntarily and assume all responsibility and risk from their Educational Talent Search participation. I further understand I will assume responsibility for any medical costs that may directly or indirectly result from my student's participation in Educational Talent Search and will indemnify and hold Mineral Area College and Educational Talent Search harmless.

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

(\*information optional)

# Needs Survey

Please check all that apply.

## I need help with the following:

- |   |   |
|---|---|
| <input type="checkbox"/> Improving grades in the following courses:<br>_____<br>_____ | <input type="checkbox"/> Finding a way to pay for college                             |
| <input type="checkbox"/> Study skills   | <input type="checkbox"/> Choosing a college or tech school                            |
| <input type="checkbox"/> Test taking skills   | <input type="checkbox"/> Preparing for college entrance exams                         |
| <input type="checkbox"/> Choosing a career  | <input type="checkbox"/> Completing college or tech school applications               |
| <input type="checkbox"/> Selecting the right courses                                  | <input type="checkbox"/> Admissions information and college tours                     |
| <input type="checkbox"/> Finding a computer to use                                    | <input type="checkbox"/> Returning to school to get my high school or college diploma |
| <input type="checkbox"/> I have the ability to accomplish my goals.                   |   |

Additional Comments \_\_\_\_\_  
\_\_\_\_\_

How did you hear about ETS? \_\_\_\_\_

Do you have a friend who might be interested in ETS? We will send them information.

Name \_\_\_\_\_ Address \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

*“There isn’t a person anywhere that isn’t capable of doing more than he thinks he can.”  
-Henry Ford*



# EDUCATIONAL TALENT SEARCH

MINERAL AREA COLLEGE - PARK HILLS, MISSOURI

# Application Packet

Name \_\_\_\_\_

Date \_\_\_\_\_

School \_\_\_\_\_

Grade \_\_\_\_\_