

DREAM BIG EDUCATIONAL SERVICES, INC.

CONNECTING YOU TO THE RESOURCES NECESSARY TO FULFILL YOUR DESTINY

College Clubs of America Program® – Student Application 2009-2010

Checklist of items that must be submitted:

- Completed application (with parent signatures)
- A copy of most recent report card or progress report
- \$50 Membership/College Tour Deposit (check or money order payable to DBESI)

Statement of Confidentiality: The application and any additional information provided will remain the confidential property of the College Club Program. PLEASE WRITE NEATLY AND LEGIBLY.

Section I: Student Information

A. Personal Information

Applicant's Last Name: _____ First _____ Middle _____

Applicant's Email Address: _____

Home Phone: () _____ Student's Cell Phone: () _____

Parents' Email Address (s): _____

Parents' Cell Phone(s): _____

Home Address: _____

City _____ State _____ Zip _____

Birth date: ____/____/____ Place of Birth: _____

Male _____ Female _____ U.S. Citizen ___ Permanent Resident ___ Neither _____

Ethnic Background:

- ___ African American / Black
- ___ Asian American
- ___ White / Caucasian
- ___ Latino / Hispanic
- ___ Pacific Islander
- ___ Indian American
- ___ Multiracial: Please Specify _____
- ___ Other: Please Specify _____

What language(s) do you speak at home? _____

Are you a ward of the court / orphan? ___ Yes ___ No

Are you disabled? ___ Yes ___ No If yes, please explain: _____

Who motivated you to apply to College Club? (Check all that apply)

- ___ Teacher
- ___ School Principal
- ___ School Counselor
- ___ College Club member
- ___ Church Member
- ___ Neighbor
- ___ Family Member
- ___ Friend/Classmate
- ___ Pastor/Youth Leader

___ Another organization I am part of: please specify _____

___ College Club Staff Member: (please name) _____

___ Other-please specify _____

B. Academic Information

Name of Your School: _____

School District: _____

Grade Level: _____ Overall G.P.A.: _____ (most recent report card required)

What extracurricular activities have you or do you currently participate in? (List clubs, sports, hobbies, church activities, etc.): _____

C. References: College Club requires one letter of recommendation. Please ask an adult who can speak highly of you, but is not a family member; for example a teacher, principal, counselor, pastor, coach, neighbor, or family friend. List your reference person here: _____ Ph: _____

June 2010 College Tour includes: Howard University, Hampton University, Georgetown University, the College of William & Mary, UNC Chapel Hill, North Carolina Central, NC A&T, and Duke University!

Certification, Parental Permission, and Records Waiver

I. **Participation:** I hereby give permission for my child to participate in the activities of College Club. I have read the information about College Club and I am in support of my child's participation. I will allow College Club to transport my child for college tours and other related activities. initial here _____

II. **Medical Attention:** I hereby give permission for Dream Big Educational Services, Inc., the College Club Program and its staff permission to administer first aid and/or transport my child to a certified hospital via emergency medical transit in the case of an emergency. initial here _____

Does your child have any illness, health conditions, mobility limitations, or communicable disease that we should be aware of? _____ If so, please list. _____

Does your child have an allergy to any foods or medications? _____ If so, please list. _____

Is your child required by a medical doctor to take any medications? _____ If so, please list. _____

Health Insurance Co _____ Policy Holder's Name _____
Group Number _____ Policy Number _____

Check here if you do not currently have health insurance coverage. _____

III. **Academic Records:** I hereby authorize College Club to have access to and make copies of my child's academic records (grades, test scores, attendance, discipline) through the completion of 12th grade. I understand that these records will be kept in confidence and will be used to follow my child's academic and personal progress. They may also be used to determine when extra scholastic activities are needed on his/her behalf. initial here _____

IV. **Photographic Image:** I hereby grant College Club and its legal representatives and assigns, the irrevocable and unrestricted right to use and publish photographs of my child which may be included for editorial, trade, advertising, Web site marketing and any other purpose and in any manner and medium; to alter the same without restriction; and to copyright the same. I hereby release College Club and its legal representatives and assigns from all claims and liability relating to said photographs. initial here _____

V. **Fundraising:** I hereby acknowledge that my child must actively engage in fundraising projects this year to raise \$650 to pay for his/her 2009-2010 college tour and the scholarship program. I agree to put forth my best effort and encourage my child to do the same. I agree to adhere to the established fundraising deadlines. initial here _____

VI. **Mishaps, Loss, and Discipline:** I certify that I will not hold Dream Big Educational Services, Inc., the College Club Program, or its officers or staff responsible for any mishaps or loss that may occur during any College Club event. I also understand that if my child is involved in any illegal activity (including, but not limited to possession of illegal substances, alcohol, cigarettes, tobacco, weapons, weapon look-alikes, or fake ID) or inappropriate conduct (including, but not limited to fighting, harassment, sexual misconduct, profanity, theft, failure to comply with curfew, or disrespect toward staff, guest speakers, volunteers, chaperones, or tour guides) I will be contacted immediately. In extreme circumstances, my child may be dismissed from the College Club program for a time period to be determined solely by the Program Coordinators. I understand that in extreme circumstances, I may be required to travel at my own expense to retrieve my child. initial here _____

VII. **Payments:** I understand that all payments to the College Club Program are non-refundable and non-transferrable. initial here _____

Parent/Guardian (Print): _____ (Signature) _____

Student (Print): _____ (Signature) _____

Emergency Information

Give the names and phone numbers of 2 responsible adults (relatives or family friends) who do not live with you but can be contacted in the event of an emergency. A telephone number is mandatory!

Name

Contact Numbers

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