

# Central College Talent Search 2023-24 Application



Central College Talent Search  
812 University Street  
Campus Box 0181  
Pella, IA 50219  
1-800-527-4047  
[www.central.edu/talentsearch](http://www.central.edu/talentsearch)

Talent Search (TS) at Central College is a free educational program for students 11-27 years old who have completed fifth grade. TS is designed to assist participants in their preparation for enrollment into any college of their choice.





TRIO TALENT SEARCH

## Section 1: Student Information

Legal Name: _____ Last First MI	Date of Birth: _____ Age: _____
Preferred Name: _____ (if different)	Legal Gender: ___ Male ___ Female
Address: _____	Personal Pronouns: _____ (if different)
City: _____ State: <u>IOWA</u> Zip Code: _____	Student Cell: (____) ____ - _____
School Email: _____@student.dmschools.org	Social Security Number or A-number: ____ - ____ - ____
Ethnicity & Race: Please check all that apply. <input type="checkbox"/> North/South American Native or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White/Caucasian	Student is: <input type="checkbox"/> Citizen of U.S. <input type="checkbox"/> Permanent Resident of U.S. <input type="checkbox"/> Becoming a Citizen or Permanent Resident of the U.S.

## Section 2: Education & Needs Assessment

School: _____ Grade: _____ <u>HS STUDENTS ONLY:</u> Current Cumulative GPA: _____	Are you currently participating in any of the following programs? (Please check any that apply)  <input type="checkbox"/> AVID  <input type="checkbox"/> Upward Bound  <input type="checkbox"/> Science Bound  <input type="checkbox"/> Gear Up
Are you a current ELL participant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you want to go to college? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure	
Throughout the school year students can participate in workshops hosted by Talent Search. Below is a list of topics that Talent Search often covers. Please check all topics that you believe will be helpful to you:  <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Academic Planning  <input type="checkbox"/> College Information/Planning  <input type="checkbox"/> Noncognitive Skills (goal setting, time management, etc)             </div> <div> <input type="checkbox"/> ACT Preparation  <input type="checkbox"/> Career Planning  <input type="checkbox"/> Financial Literacy  <input type="checkbox"/> Financial Aid             </div> </div>	

**Sections 3 and 4 MUST be completed for the parent/guardian with whom the applicant lives with more than 50% of the time.**

### Section 3: Parent Information

1<sup>st</sup> Parent/Guardian Name: \_\_\_\_\_ Male\_\_\_\_ Female\_\_\_\_

Address: \_\_\_\_\_  
(if different from student)

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Student:

Biological/Adoptive Parent \_\_\_\_ Step Parent \_\_\_\_ Legal Guardian \_\_\_\_ Foster Parent \_\_\_\_ Other (Please Specify): \_\_\_\_\_

Did 1<sup>st</sup> Parent/Guardian graduate from a 4-year college? Yes \_\_\_\_ No \_\_\_\_

If yes, what college? \_\_\_\_\_

Occupation: \_\_\_\_\_

Native or Fluent English Speaker: Yes \_\_\_\_ No \_\_\_\_

Interpreter Required: Yes \_\_\_\_ No \_\_\_\_  
Language: \_\_\_\_\_

2<sup>nd</sup> Parent/Guardian Name: \_\_\_\_\_ Male\_\_\_\_ Female\_\_\_\_

Address: \_\_\_\_\_  
(if different from student)

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Student:

Biological/Adoptive Parent \_\_\_\_ Step Parent \_\_\_\_ Legal Guardian \_\_\_\_ Foster Parent \_\_\_\_ Other (Please Specify): \_\_\_\_\_

Did 2<sup>nd</sup> Parent/Guardian graduate from a 4-year college? Yes \_\_\_\_ No \_\_\_\_

If yes, what college? \_\_\_\_\_

Occupation: \_\_\_\_\_

Native or Fluent English Speaker: Yes \_\_\_\_ No \_\_\_\_

Interpreter Required: Yes \_\_\_\_ No \_\_\_\_  
Language: \_\_\_\_\_

**\*\* Note: If student resides in foster care or legal guardianship (not with a biological or adoptive parent), please skip Section 4, and continue with Section 5.**

## Section 4: Family Income Information

The United States Department of Education requires each Talent Search program to select two-thirds of program participants from families whose taxable income is at or below federal income guidelines that are set annually by the Department. The information requested in this form helps us assess the applicant's eligibility and will be kept strictly confidential.

**In order complete this section, you will need to review your 2022 federal tax form 1040.**

**Number of people in your household:** \_\_\_\_\_

(Include all individuals in the family unit who are provided for, completely or more than 50%, by the family taxable income. This includes college students 21 years of age or younger who may be living elsewhere while in school.)

Please complete **ONE** of the following options:

### NOTICE!

You MUST fully complete one of the 3 options to be considered for Talent Search!

#### Option A

Submit a copy of page 1 and 2 of your completed 2022 federal tax form 1040

#### Option B

##### Self-Reported:

Using your 2022 federal tax form please indicate your taxable income. You DO NOT need to submit a copy of your tax forms if you choose this option.

2022 Taxable Income: \$ \_\_\_\_\_  
(Can be found on line 15 of the 2022 federal tax form 1040)

#### Option C

##### Financial Assistance:

I receive SNAP benefits: \_\_\_\_\_

Case Number: \_\_\_\_\_

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

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

Your signature will certify as to the truth of the statements made on this form.

**Form 1040** Department of the Treasury—Internal Revenue Service **2022** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

**Filing Status** Check only one box.  
☐ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)  
If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: \_\_\_\_\_

Your first name and middle initial \_\_\_\_\_ Last name \_\_\_\_\_ Your social security number \_\_\_\_\_  
If joint return, spouse's first name and middle initial \_\_\_\_\_ Last name \_\_\_\_\_ Spouse's social security number \_\_\_\_\_

Home address (number and street). If you have a P.O. box, see instructions. \_\_\_\_\_ Apt. no. \_\_\_\_\_  
City, town, or post office. If you have a foreign address, also complete spaces below. \_\_\_\_\_ State \_\_\_\_\_ ZIP code \_\_\_\_\_  
Foreign country name \_\_\_\_\_ Foreign province/state/country \_\_\_\_\_ Foreign postal code \_\_\_\_\_

**Digital Assets** At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☐ No

**Standard Deduction** Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent  
☐ Spouse itemizes on a separate return or you were a dual-status alien

**Age/Blindness** You: ☐ Were born before January 2, 1958 ☐ Are blind Spouse: ☐ Was born before January 2, 1958 ☐ Is blind

**Dependents** (see instructions) (1) First name Last name (2) Social security number (3) Relationship to you (4) Check the box if qualifies for (see instructions):  
Child tax credit Credit for other dependents

**Income** Attach Form(s) W-2 here. Also attach Forms W-3 and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a
b	Household employee wages not reported on Form(s) W-2	1b
c	Tip income not reported on line 1a (see instructions)	1c
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d
e	Taxable dependent care benefits from Form 2441, line 26	1e
f	Employer-provided adoption benefits from Form 8839, line 29	1f
g	Wages from Form 8919, line 6	1g
h	Other earned income (see instructions)	1h
i	Nontaxable combat pay election (see instructions)	1i
z	Add lines 1a through 1h	1z
2a	Tax-exempt interest	2a
3a	Qualified dividends	3a
4a	IRA distributions	4a
5a	Pensions and annuities	5a
6a	Social security benefits	6a
b	Taxable interest	2b
c	Ordinary dividends	3b
d	Taxable amount	4b
e	Taxable amount	5b
f	Taxable amount	6b
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here	7
8	Other income from Schedule 1, line 10	8
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>	9
10	Adjustments to income from Schedule 1, line 26	10
11	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>	11
12	Standard deduction or itemized deductions (from Schedule A)	12
13	Qualified business income deduction from Form 8995 or Form 8995-A	13
14	Add lines 12 and 13	14
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your <b>taxable income</b>	15

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11320B Form **1040** (2022)

Use this graphic to help you find the taxable income on your federal tax form 1040. Or call 1-800-527-4047

**Line 15: Taxable Income**

## Section 5: Consent and Signatures

### Consent to Photograph or Videotape Participants Engaged in Program Activities:

Talent Search occasionally photographs or makes digital/video recordings of their participants while involved in program activities. These photos/videos may be used in the program's newsletters, publications, informational brochures and presentations, recruiting meetings, social media, and programs web pages.

Photographs and videos WILL NOT be sold or used in any for-profit publications or presentations. Identifying information (such as names or home or school addresses) WILL NOT be included without first gaining the expressed consent of the student or the student's parent/guardian if the student is under 18.

\_\_\_\_ **Yes, I give permission** for Central College Talent Search to photograph or videotape my student for the purposes described above and in accordance with the guidelines contained therein.

\_\_\_\_ **No, I do not give permission** for Central College Talent Search to photograph and videotape my student for the purposes described above and in accordance with the guidelines contained therein.

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

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

**Student Signature:** \_\_\_\_\_

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

### Release of Information: Academic Standing/Enrollment and Graduation Status

#### Student Permission

I recognize that Talent Search provides assistance to students preparing for and applying to postsecondary education programs and institutions. I understand the U.S. Department of Education and Central College has an interest in assessing the effectiveness of Talent Search in providing these services. I, therefore, consent to the release of information regarding my enrollment, financial aid, academic standing, and graduation status from my postsecondary institution, the National Student Clearinghouse, and/or state data system to Central College Talent Search. I understand my social security number will be used only to ensure Talent Search accurately identifies me when tracking my progress through the online data systems. I understand this information will be held in a confidential file and will be used only for the reporting purposes described above.

This release shall remain in effect for seven twelve-month periods (7 years) beyond the date of my planned graduation from high school. I understand that if I am not admitted to the program, this release shall be immediately null and void. I understand I may revoke this release at any time by submitting to Central College Talent Search a dated written statement denying the release of the above information.

**Student Name:** \_\_\_\_\_

**Planned Date H.S. Graduation: Month** \_\_\_\_\_ **Year** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

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

#### Parent Permission

I have reviewed and give my consent to the release of information as described above regarding the enrollment, financial aid, academic standing, and graduation status of my student's postsecondary institution, the National Student Clearinghouse, and/or state data system to Central College Talent Search. I understand this information will be maintained and used for the sole purposes described above.

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

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

## Permission to Release School Records:

### Student Permission

I consent to the release of my school records including, but not limited to, demographic data/contact information, enrollment/school transfer information, transcripts, grades and report cards, test scores, disciplinary records, and other information regarding my school performance to the Central College Talent Search program. I understand the information shared under the terms of this agreement shall be kept confidential and used for the following purposes:

1. Determining admission to the Talent Search program.
2. Developing an individualized plan and providing academic advising to support my growth, interpersonal development, and preparation for success in accessing and completing postsecondary education.
3. Providing data to the U.S. Department of Education and to Central College for the sole purpose of assessing the effectiveness of Talent Search in providing services to students.

I understand my records will be kept in a confidential file and will be used for the reporting purposes above. This release shall remain in effect from the date indicated below until 12 months following the date of my graduation from high school. I understand that if I am not admitted to the program, this release shall be immediately null and void. I understand I may revoke this release at any time by submitting to Central College Talent Search a dated, signed statement denying the release of secondary school records.

**Student Name:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

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

### Parent Permission

The school my student attends has my permission to release their school records to the Central College Talent Search program to be maintained and utilized as described above.

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

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