



# Application and Pledge 2013-2014

A Washington Opportunity Pathway

**DEADLINE – JUNE 30, 2014**

- **Enroll online:** [www.collegebound.wa.gov](http://www.collegebound.wa.gov)
- Apply if you are in 7<sup>th</sup> or 8<sup>th</sup> grade and meet one of the income requirements.
- The **deadline** is June 30 at the end of your 8<sup>th</sup> grade year. Only apply once.
- You will receive a College Bound Scholarship certificate when your application is complete.

**Complete each section and please PRINT NEATLY using a black or blue pen.**

## STUDENT INFORMATION PLEASE PRINT your legal name.

First name: \_\_\_\_\_ Middle initial: \_\_\_\_\_ Last name: \_\_\_\_\_

State Student Identification Number: \_\_\_\_\_ Social Security number: \_\_\_\_\_  
(10 digit number found on Measure of Student Progress [MSP] score report) X X X - X X - X X X X

**A student is not required to have a SSN when applying for the Scholarship. However, to receive the Scholarship a student must be a U. S. citizen or eligible non-citizen. Providing the SSN now simplifies the process later. The Washington Student Achievement Council (the Council) is required by law to keep this number secure. No other agency has access to it.**

Email address for student: \_\_\_\_\_

May we text you? ☐ YES! ☐ No Cell phone number to text ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Grade in 2013-2014 school year: ☐ 7<sup>th</sup> ☐ 8<sup>th</sup>  
MM DD YYYY

School attending in 2013-2014 school year: \_\_\_\_\_ City: \_\_\_\_\_

## PARENT/LEGAL GUARDIAN INFORMATION PLEASE PRINT your legal name.

First name: \_\_\_\_\_ Middle initial: \_\_\_\_\_ Last name: \_\_\_\_\_

Highest educational level earned by either parent/legal guardian now living with the student:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Less than a high school diploma | <input type="checkbox"/> High school diploma/GED | <input type="checkbox"/> Some college       |
| <input type="checkbox"/> Certificate/Associate degree    | <input type="checkbox"/> Bachelor's degree       | <input type="checkbox"/> Master's/doctorate |

Home phone ( ) \_\_\_\_\_ Cell phone number to text ( ) \_\_\_\_\_

Email address for parent/legal guardian: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
House number, street name, apartment number **or** P.O. Box

City

State

Zip

**INCOME STANDARDS**

You must meet one of these income standards when you apply for the College Bound Scholarship.

Please check all that apply:

- ☐ Student is eligible for the federal free- or reduced-price lunch program.
- ☐ Student's family receives basic food/TANF benefits.
- ☐ Our 2012 family income from all sources (taxable and nontaxable) was less than or equal to the amounts in the chart.
- ☐ Student is currently in foster care or a dependent of the state.
- ☐ None of the above applies.

**NOTE:** Income eligibility will be verified by the required Free Application for Federal Student Aid (FAFSA) filed before entering college, and every year in college.

Household Size	2012 Income Guidelines*	Monthly Income	Weekly Income
2	\$28,694	\$2,392	\$552
3	\$36,131	\$3,011	\$695
4	\$43,568	\$3,631	\$838
5	\$51,005	\$4,251	\$981
6	\$58,442	\$4,871	\$1,124
7	\$65,879	\$5,490	\$1,267
8	\$73,316	\$6,110	\$1,410
Each additional household member	Add \$7,437	Add \$620	Add \$144

\*Household income must be less than or equal to this amount.

**RELEASE OF INFORMATION –Parent/legal guardian must read this section.****Required Sharing of Information with Educational Entities**

By signing this application, I authorize the Washington Student Achievement Council to receive and share my student's application information and Scholarship eligibility information with educational entities only for the purpose of providing College Bound Scholarship assistance, providing academic support services, and determining the College Bound Scholarship eligibility. Educational entities include the Office of Superintendent of Public Instruction (OSPI), the middle/high school my student attends, and colleges and universities that participate in the College Bound Scholarship program.

The application information shared may include my student's name, address, birth date, school, and ID numbers. The Scholarship eligibility information may include grade point average and high school graduation date. I understand my student cannot receive the College Bound Scholarship without sharing this important information.

**Sharing Information with Select Public and Non-Profit Agencies**

By signing this application, I also authorize the application information to be shared with select public and non-profit agencies that have been approved by the Council and have agreed to uphold the privacy of my student's information. These agencies will only use the information for the purpose of providing College Bound Scholarship assistance and academic support services. For a complete list of approved agencies go to: [www.collegebound.wa.gov](http://www.collegebound.wa.gov). I may decline the services of these public and non-profit agencies by checking the box below.

- ☐ No, I do not authorize the Council to share my student's application information with select public and non-profit agencies for the purpose of providing College Bound Scholarship assistance and academic support services. My student's information will only be shared with schools and other educational entities.

**STUDENT PLEDGE – Yes, I am College Bound! I pledge that I will:**

- Graduate with a cumulative high school grade point average of 2.0 or higher on a 4.0 scale.
- Be a good citizen in school and in my community, and not be convicted of a felony.
- Apply for financial aid by completing the FAFSA in a timely manner when I apply for college.

**AGREEMENT – The student and one parent/legal guardian must sign this before submitting to the Council.**

- I, the parent/legal guardian, declare that our family meets one of the four income standards listed above.
- I, the student, agree to meet the student pledge requirements as stated above.
- We understand that the student will receive the Scholarship if the student fulfills the pledge requirements, the family meets income eligibility, and the student is a U.S. citizen or eligible non-citizen when completing the FAFSA.
- We certify that the information contained in this application is true and correct to the best of our knowledge.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

**Mail to:** College Bound Scholarship  
P.O. Box 43430  
Olympia, WA 98504-3430

**Questions?**

Q&As at: [www.collegebound.wa.gov](http://www.collegebound.wa.gov)  
Email: [collegebound@wsac.wa.gov](mailto:collegebound@wsac.wa.gov)  
Phone: 1-888-535-0747  
FAX: (360) 704-6218