



Center for Academic Support and Diversity  
**Summer Mathematics and Reading Talent Scholars (SMARTS) Program**  
**June 19 – July 1, 2011**

**ELIGIBILITY REQUIREMENTS**

Students must meet the following criteria to be eligible for the SMARTS Program at UW Oshkosh:

- Must be enrolled at one of the following targeted Milwaukee Public Middle Schools: Audubon Technology & Communication, Fritsche Middle School, La Causa Charter School, Lincoln Center of the Arts or Roosevelt Creative Arts.
- Must be a member of one of the following multicultural groups: African-American, American Indian or Alaskan Native, Hispanic/Latino American, Asian/Southeast Asian or non-multicultural students from economically and/or educationally-disadvantaged backgrounds who meet all other selection criteria.
- Must be performing slightly below grade level in math and/or reading, and must be recommended by a counselor or teacher at one of the target schools listed above.
- Have completed sixth grade by Monday, June 13, 2011.

Please take time to carefully read each page of the application, and submit all completed materials together.

**Required From Parents:**

- Summer Food Service Program (SFSP) application must be completed and signed by parent(s) or guardian(s).
- Both student and parent(s) or guardian(s) must sign the UW Oshkosh SMARTS application.
- Copy of transcripts or a copy of most recent report card.
- Recommendation forms from your Reading and Mathematics Teachers.

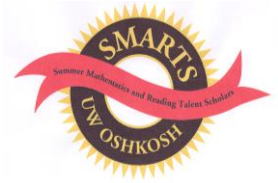
**Required From Students:**

- 1 page stating why you would like to participate in the SMARTS program, and how you think the program could help you improve your reading and math skills.

**Please return ALL APPLICATION MATERIALS in the self-addressed stamped envelope to: UW Oshkosh, PreCollege Programs, 800 Algoma Boulevard, CCED –Room 010, Oshkosh, WI 54901. A \$10.00 NON-REFUNDABLE application fee is also required. PLEASE USE A MONEY ORDER; WE DO NOT ACCEPT CHECKS.**



SMARTS Application
(STUDENT AND PARENT MUST SIGN APPLICATION)



Student's Name: last first middle Social Security Number: \_\_\_\_\_

Date of Birth: MM/DD/YYYY Gender: Male Female Grade Point Average: \_\_\_\_\_ (transcript required)

Current Middle School Attending: Audubon Fritsche Lincoln Roosevelt La Causa Charter

Ethnicity - Please read both A and B, and check ALL that apply:

A. Is the student applicant: Spanish/Hispanic/Latino/a? No, not Spanish/Hispanic/Latino/a Yes, Puerto Rican Yes, Mexican American, Chicano Yes, Cuban Yes, other Spanish/Hispanic/Latino/a

B. To which ethnic group does the student belong? Please check ALL that apply: American Indian/Alaska Native - please specify principal Wisconsin or Other Tribe & Reservation Asian-Indian Guamanian or Chamorro Native Hawaiian Black or African-American Hmong Samoan Cambodian Japanese Vietnamese Chinese Korean Caucasian Filipino Laotian Other ethnicity - please specify

Have you ever received a DPI PreCollege Scholarship? Yes No Are you a GEAR-UP student? Yes No

Student's Areas of Interest - Please check the careers which are most interesting to you (up to three):

- Agriculture Business English/Literature Languages Music Study Skills
Architecture Computers Environment Law Natural Science Social Science/ Culture
Arts/Humanities Education Health Care Math Nursing Culture
Athletics Engineering History Medicine Politics Other Areas

Contact Information:

Parent(s)/Guardian(s) Name: Parent(s)/Guardian(s) email:
Relationship to Student: Home Phone Number:
Street Address: Work Phone Number:
City/State/Zip: Cell Phone Number:
Occupation: Employer:

Table with 2 columns: HEAD OF HOUSEHOLD: Female, HEAD OF HOUSEHOLD: Male. Rows: Have you earned a bachelor's degree from a four-year college or university? Yes No

Does your family qualify for, or receive free or reduced lunch? Yes No
Does your family qualify for, or receive any other forms of state or federal support (SSI, TANF, DPIR, Food Stamps, etc.)? Yes No If yes, Case No. is \_\_\_\_\_

I certify that the above information is true and correct to the best of my knowledge.

Student's Signature Date
\_\_\_\_\_ Has my permission to participate in the PreCollege Programs sponsored by the University of Wisconsin Oshkosh and the University of Wisconsin System. I understand that the information provided will be used solely for program evaluation and program eligibility purposes, and will be kept confidential.

Parent's Signature Date
FOR OFFICE USE ONLY
Program Code for office use Campus Identification Number
(Assigned by University)
School ID Code: for office use DPI Student ID: if assigned

**HOUSEHOLD SIZE-INCOME STATEMENT FOR THE SUMMER FOOD SERVICE PROGRAM (SFSP)**  
**INSTRUCTIONS:** An adult household member must complete and return to sponsor. (Rev. 1/09)

**Part 1. List all children attending enrolled program or camp (Use a separate application for each foster child)**

Names of all children attending enrolled program or camp (First, Middle Initial, Last)	Provide FoodShare (Food Stamps), W-2 Cash Benefits (TANF) or Food Distribution Program on Indian Reservations (FDPIR) <b>case #</b> (if any). <b>Skip to Part 4 if you listed one of the above for each child.</b>
_____	<b>Case #</b> _____
_____	<b>Case #</b> _____
_____	<b>Case #</b> _____
_____	<b>Case #</b> _____
_____	<b>Case #</b> _____

*DO NOT LIST:* Forward or Quest Card numbers (IL residents do not list Link Card number) or Medicaid, SSI, W-2 Childcare case numbers. Please fill in Part 3 if you are *not* receiving FoodShare, W-2 cash benefits or Food Distribution Program on Indian Reservations (FDPIR) benefits at this time.

**Part 2. Foster Child**

If this application is for a child who is the legal responsibility of a welfare agency or court, check this box  and then list the amount of the child's personal use monthly income: \$\_\_\_\_\_. Skip to Part 4.

**Part 3. Total Household Gross Income—Tell us how much and how often**

1. Name List <b>everyone</b> in household, Including children listed in Part 1.	2. Gross income and how often it was received				3. Check if NO income <input type="checkbox"/>
	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, Social Security	All Other Income	
(Example) Jane Smith	\$200/weekly_____	\$150/weekly_____	\$100/monthly_____	\$_____/_____	<input type="checkbox"/>
_____	\$_____/_____	\$_____/_____	\$_____/_____	\$_____/_____	<input type="checkbox"/>
_____	\$_____/_____	\$_____/_____	\$_____/_____	\$_____/_____	<input type="checkbox"/>
_____	\$_____/_____	\$_____/_____	\$_____/_____	\$_____/_____	<input type="checkbox"/>
_____	\$_____/_____	\$_____/_____	\$_____/_____	\$_____/_____	<input type="checkbox"/>
_____	\$_____/_____	\$_____/_____	\$_____/_____	\$_____/_____	<input type="checkbox"/>
_____	\$_____/_____	\$_____/_____	\$_____/_____	\$_____/_____	<input type="checkbox"/>
_____	\$_____/_____	\$_____/_____	\$_____/_____	\$_____/_____	<input type="checkbox"/>

**Part 4. Signature and Social Security Number (Adult must sign)**

An adult household member must sign the application. **If Part 3 is completed, the adult signing the form must also list his or her Social Security Number or mark the "I do not have a Social Security Number" box** (See Privacy Act Statement on the parent letter).

*I CERTIFY that all of the above information is true and correct and that all income is reported unless eligibility is established by receiving food stamps, W-2 Cash Benefits and/or FDPIR. I understand that this information is being given so that the sponsoring agency may receive federal funds; that agency officials may verify the information on the application; and that deliberate misrepresentation of the information may subject me to prosecution under applicable federal laws. The signature on this application is that of an adult household member.*

Sign here: X \_\_\_\_\_ Print name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  I do not have a Social Security Number

**Part 5. Children's racial and ethnic identities (optional)**

<u>Mark one or more racial identities:</u>	<u>Mark one ethnic identity:</u>
<input type="checkbox"/> Asian	<input type="checkbox"/> Hispanic or Latino
<input type="checkbox"/> White	<input type="checkbox"/> Not Hispanic or Latino
<input type="checkbox"/> Black or African American	
<input type="checkbox"/> American Indian or Alaska Native	
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	
<input type="checkbox"/> Other	

**Don't fill out this part. This is for sponsor use only.**

Annual Income Conversion = Weekly x 52 or Every 2 Weeks x 26 or Twice A Month x 24 or Monthly x 12  
 Monthly Income Conversion = weekly x 4.33 or Every 2 weeks x 2.15

<b>Basis for Eligibility Determination</b>	<b>Eligibility Determination</b>	<b>Determining Official's Initials and Date</b>
<input type="checkbox"/> Total Household Size = _____ Total Monthly Income = _____	<input type="checkbox"/> Needy	
OR	OR	
<input type="checkbox"/> Food Stamp/W-2 Cash Benefits/FDPIR Recipient	<input type="checkbox"/> Non-Needy	



Dear Parent(s)/Guardian(s),

We are pleased to know that your son/daughter has expressed an interest in the Summer Mathematics and Reading Talent Scholars (*SMARTS*) Program. The *SMARTS* program provides academic and personal development courses and activities to help seventh grade students improve their skills in mathematics and reading. *SMARTS* is a two-week residential program, held on the University of Wisconsin Oshkosh campus, June 19 – July 1, 2011. During the school-year, students have the opportunity to participate in Quest Project activities that are sponsored by the TRIO & PreCollege Programs and held on the University of Wisconsin-Milwaukee (UWM) campus. Activities include tutoring, mentoring, parent workshops, teacher development seminars, self-esteem workshops and adventure projects in mathematics and reading.

If your son/daughter qualifies for the *SMARTS* program, the lodging, meals and activity fees associated with the program will not cost you anything. The *SMARTS* program is sponsored by the Office of Equity, Diversity and Inclusion, University of Wisconsin System and the Center for Academic Support and Diversity, University of Wisconsin Oshkosh.

Please complete the enclosed application and make sure it is signed by both parent(s)/guardian(s) and student where appropriate. Return all completed forms and the \$10.00 non-refundable money order (application processing fee) in the self-addressed envelope that we have enclosed for your convenience. The *SMARTS* application will need to be submitted to the UW Oshkosh PreCollege Programs no later than **Monday, May 2, 2011**. If you need an extension, please contact us immediately.

If you have further questions or concerns, please feel free to call me at (920) 424-2115 or send an email to [precollege@uwosh.edu](mailto:precollege@uwosh.edu). We look forward to having your son/daughter join us this summer.

Thank you.

Guadalupe M. Salinas  
PreCollege Coordinator

**PRECOLLEGE PROGRAMS ♦ CENTER FOR ACADEMIC SUPPORT AND DIVERSITY  
UNIVERSITY OF WISCONSIN OSHKOSH ♦ 800 ALGOMA BLVD ♦ OSHKOSH, WI 54901  
PHONE (920) 424-2115 ♦ FAX (920) 424-2454**