## Participant Selection Rubric 2019 - 2020

### Eligibility - 10 to 20 points

<table>
<thead>
<tr>
<th>Low - Income Only</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>First - Generation Only</td>
<td>10</td>
</tr>
<tr>
<td>Low - Income and First - Generation</td>
<td>20</td>
</tr>
</tbody>
</table>

### Need for Project Services - Up to 35 Points

| Identified as Foster Care or Homeless | 10 |
| Identifies 2 or more areas of need in application | 10 to 15 |
| Extenuating socio-economic issues | 10 |

### Ability to Succeed in Postsecondary Education - Up to 30 Points

| 2.0 to 2.9 GPA | 5 |
| 3.0 and above GPA | 10 |
| Enrolled (or plans to enroll in) Advanced Diploma | 10 |
| Enrolled (or plans to enroll in) Dual - Enrollment | 10 |

### Assessment Process - Up to 15 Points

| Teacher/Counselor Recommendation/Advisor Discretion | 5 |
| Motivation and success indicators | 0 to 10 |

### Advisor Comments:

---

**For Internal Use Only:**

| N: | ____ | SS: | ____ | PG: | ____ |
| A: | ____ | PEL: | ____ | SSG: | ____ |
| DB: | ____ | EG: | ____ | PSG: | ____ |
| CG: | ____ |

**Advisor Signature:**

---

**Entered MDL:**

---

**Director Signature:**

---
I would like to participate in the MECC Talent Search program.

One thing you want to accomplish:

_____________________________________________________

What do you want to be when you grow up?

_____________________________________________________

Educational Plans:

___ I am undecided about my educational goals.
___ I have no plans to continue my education after high school.
___ After high school, I plan to continue my education at:
    ____________________________ Community College
    ____________________________ College or University
    ____________________________ Technical or vocational
    ____________________________ Military school

What do you want to be when you grow up?

_____________________________________________________

NAME ___________________________________________

Mail Address: ______________________________________

City: ______________________________________________

State: ______ Zip: ______ Phone: ______________________

Social Security Number ________________________________

E-Mail: ____________________________________________

Birth date: _______________ Age: __________

Gender: F M U. S. Citizen? ____________

Ethnic Origin: (Check one)

_____ American Indian
_____ Hispanic
_____ Asian
_____ African American
_____ White
_____ Other

Name of your school: _______________________________________

What grade are you in? __________

Are you completing a regular ___ or an advanced ___ diploma?

Current GPA: ______ *If you do not know, ask guidance office

Please indicate T-shirt size: (Adult sizes)

___ S ______ M ______ L ______ XL ______ XXL ______ XXXL

FINANCIAL INFORMATION REQUEST FORM

To be completed by the student’s parent(s) or guardian(s):

Since you or your child has indicated an interest in participating in the Talent Search program, please complete the following information and return to our office as soon as possible. All information shared with the MECC Talent Search program is strictly confidential and is used only to determine eligibility for services for the Talent Search program.

1. How many people (including the student) are in the household? ______

   Use back of page if more room is needed.

   Name ____________________________ Relationship to Student

   ____________________________ _______________________________________

   ____________________________ _______________________________________

   ____________________________ _______________________________________

   ____________________________ _______________________________________  

2. Does either parent have a bachelor’s degree?

   ___ Yes   ___ No

SECTION A

1. From your most recent Federal Income Tax Return, fill in your taxable income. $ ____________________________

2. If any or all of your income was not taxed, please identify source(s) of income:

   ___ Unemployment      ___ Welfare benefits      ___ Child support
   ___ Social Security    ___ Other (specify) ____________________________

SECTION B

AUTHORIZATION FOR INFORMATION RELEASE

The information reported on this form is true, correct, and complete to the best of my (our) knowledge. The Talent Search program (TS) is authorized to make whatever contacts necessary for securing educational and financial information about my son/daughter, and my signature serves as consent for release of such information to TS. I understand that access to educational records is essential for TS to serve my son’s/daughter’s needs, and income information is necessary in order to determine my son’s/daughter’s eligibility for program services. My signature also gives permission to publish name and/or photographs of my son/daughter for TS promotional material. I understand that all personal information will be held in the strictest confidence according to federal and state guidelines.

Parent’s/Guardian’s Printed Name ____________________________

Parent’s/Guardian’s Signature ____________________________ Date __________

Parent/Guardian Email: ______________________________________

Parent/Guardian Phone: __________________________

All applications are accepted for review regardless of race, color, national origin, religion, gender, or disability.

US Department of Education—GEPA Section 427

REV 7-31-19