



the **Gaining Options**  
for College Collaborative

**Gannon University – NWPACollegiate Academy High School**

**Student Application**

*This form must be **COMPLETED** in order to process your application for the GO College Program at Collegiate Academy High School.. All information is used strictly for the purpose of qualifying for TRiO/Talent Search (TS) and will be kept confidential. All students must be citizens or legal noncitizens (possess a “green card”) of the U.S. Two-thirds of all TS students must be first-generation college students and need financial assistance to attend college. **Front and back** of the application **MUST BE COMPLETED** and both the student and the parent (or legal guardian) **MUST SIGN** the application.*

**STUDENT INFORMATION**

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female Age: \_\_\_\_\_

Student’s Name: \_\_\_\_\_  
(first) (middle initial) (last)

Address: \_\_\_\_\_  
(Street or P.O. box) (city) (state) (zip)

Phone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_  
(name & relationship)

Ethnicity: \_\_\_\_\_ Number in household: adults \_\_\_\_\_ children \_\_\_\_\_

- \_\_\_\_\_ American Indian or Alaska Native
- \_\_\_\_\_ Asian
- \_\_\_\_\_ Black or African American
- \_\_\_\_\_ Hispanic or Latino
- \_\_\_\_\_ White
- \_\_\_\_\_ Native Hawaiian or other Pacific Islander
- \_\_\_\_\_ Other (please specify) \_\_\_\_\_

With whom do you currently live? (Check all that apply):

- \_\_\_\_\_ Parent (specify mother-M or father-F)
- \_\_\_\_\_ Parents
- \_\_\_\_\_ Step-Parent
- \_\_\_\_\_ Guardians \_\_\_\_\_ # of years in household
- \_\_\_\_\_ Grandparents \_\_\_\_\_ # of years in household

Are you limited in your use of the English language? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a U.S. Citizen? \_\_\_\_\_ Yes \_\_\_\_\_ No **If No**, please provide your registration number: \_\_\_\_\_  
(Failure to provide the number will result in an incomplete application.)

Current school: \_\_\_\_\_ Grade: 9 10 11 12 Average grades: A B C D F

Father/ Legal Guardian’s name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother/Legal Guardian’s name: \_\_\_\_\_ Occupation: \_\_\_\_\_

**Place a mark in the box that represents the highest level of education completed by the custodial parent(s), guardians, or adoptive parent(s) with whom you live.**

	N/A	Grade School	High School	2-year college degree	4-year college degree	Beyond 4- years
Mother	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive parent(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable	<input type="checkbox"/> Foster care			<input type="checkbox"/> Lived with non-adoptive guardians		

Continued on back



---

**INCOME INFORMATION – For Parent or Legal Guardian to Complete**

---

Please check one box and fill in the blanks.

1. Our family's taxable income for 2017 was \$ \_\_\_\_\_ **(Please answer 1 and 2)**  
*This information is found on your 2017 tax return (1040-line 43; 1040A-line 27; 1040EZ-line 6).*

2. Household size (# of people who live in your house) \_\_\_\_\_ (1040 & 1040A-line 6d; 1040EZ-line 5)

I attest that my family did not file a federal income tax return for 2017.  
My family's income was \$ \_\_\_\_\_ Household size \_\_\_\_\_

I attest that my family had no taxable income for 2017. Household size \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_

---

**AUTHORIZATION AND RELEASE**

---

I hereby certify that the information in this application is correct to the best of my knowledge.

I give permission to the GO College program Collegiate Academy High School to meet with my child and to have access or copies of any of my child's school records to determine eligibility for the program or to monitor his/her status and progress in middle, secondary, and post-secondary education as well as eligibility for financial aid.

I also give permission for my child to be transported to any activities planned for and supervised by the GO College staff at Erie High School that requires transportation. (Parents will always be given prior knowledge of any necessary travel.)

In addition, I hereby give my permission for my child's name, photograph, work and/or statements to be used by GO College for promotional, publicity, or academic purposes. This may include brochures, the GO College website & video, and the GO College Collegiate Academy High School Facebook page.

**I understand that if the student's grade point average drops below 2.5 or if he/she incurs 2 or more days of suspension, it may result in dismissal from GO College.**

Are there any special circumstances of which you would like for us to be aware? \_\_\_\_\_

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

The GO College/TS program at Collegiate Academy High School is funded by the U.S. Department of Education, Office of Postsecondary Education, with a 2018 budget of \$253,000. In addition, GO College receives funds from The Erie Community Foundation. For questions and other information, please contact: Mike Schwabenbauer – 814-701-2260 – [schwaben012@gannon.edu](mailto:schwaben012@gannon.edu), or Barbara Priestap – 814-882-6493 – [priestap004@gannon.edu](mailto:priestap004@gannon.edu).



