What is Talent Search?
Talent Search is a federally funded TRiO program hosted by The College of St. Scholastica. It is designed to encourage students to complete high school, and assist them in entering and completing a postsecondary program of their choice. Talent Search (TS) is a FREE planning and resource service for students who are interested in continuing their education beyond high school, but who may need assistance in determining an appropriate school, program of study, or in maximizing their student aid.

What services are provided?
- Academic advising
- Career advising
- Assistance in identifying career skills/interests

- College visits to various state/regional institutions
- Application fee assistance
- Financial Aid advising

- Admissions assistance
- ACT workshops
- Scholarship resources
- ACT waivers.

Services are offered in both small group settings and on an individual basis as needed.

Who is eligible for services?
Two thirds of the participants served by TS must be both limited income and from a family in which neither parent has completed a four year degree.

What schools are served?
- Cromwell-Wright Public School
- Denfeld High School
- Floodwood School
- Lincoln Park Middle School
- McGregor School

When should I begin?
It’s never too early to begin making plans for education beyond high school. Our advisors use materials designed for working with students at appropriate grade level.

Program costs:
Services are provided FREE of charge to student, family, and school.

How to contact us:
Talent Search
The College of St. Scholastica
1200 Kenwood Avenue—Duluth, MN  55811
(218) 723-6186 or (800) 447-5444, ext. 6186
FAX: (218) 723-6283
WEBSITE:  www.css.edu/ts.xml
The information gathered in this document is confidential and used for the purpose of assessing eligibility and tracking student success. Please fill out this form **completely** and have your student return it to school.

### STUDENT INFORMATION

**Name:** ____________________________________________

**Street Address:** __________________________________

**City:** _____________  **State:** MN  **Zip:** ___________

**Social Security Number:** ____________________________  **Student E-mail:** ____________________________

**Student lives with (most of the time):**

- [ ] Both Parents
- [ ] Mother
- [ ] Father
- [ ] Guardian
- [ ] Self
- [ ] Foster
- [ ] Other

**Ethnicity/Culture:**

- [ ] Black or African American
- [ ] Asian
- [ ] White
- [ ] American Indian or Alaskan Native
- [ ] Native Hawaiian/Pacific Islander

**Do you identify yourself as Hispanic/Latino?**

- [ ] YES  **or**  [ ] NO

Which of the following best describes your ethnic/cultural background? Please check ALL that apply.

- [ ] Black or African American
- [ ] Asian
- [ ] White
- [ ] American Indian or Alaskan Native
- [ ] Native Hawaiian/Pacific Islander

**Birth Date:** ________________  **Age:** ______  **Gender:** Male  or  Female

- [ ] Are you a U.S. citizen?  YES  or  NO
- [ ] If no, are you a permanent resident?  YES  or  NO

**Current school:** ________________________________________________  **Current Grade:** ______

- [ ] I qualify for free/reduced lunch  YES  or  NO
- [ ] Have you applied to Talent Search before?  ___YES  ___NO
- [ ] Are you in an Upward Bound or Talent Search program?  ___YES  ___NO

### ACADEMIC INFORMATION  (to be completed by student)

- [ ] List three things you are doing to earn good grades.

- [ ] List three things that are keeping you from earning good grades.

- [ ] List school activities (sports, clubs, band, etc.) you are involved in.

- [ ] Why do you want to be in the Talent Search Program?
PARENT/FAMILY INFORMATION

Mother/Female Guardian Name: ___________________________ Home Phone: ___________________________
E-mail: ___________________________ Cell/Work Phone: ___________________________

Father/Male Guardian Name: ___________________________ Home Phone: ___________________________
E-mail: ___________________________ Cell/Work Phone: ___________________________

PLEASE LIST ANY OTHER SCHOOL AGE CHILDREN:

Name ___________________________ Age __________ School Attending ___________________________ Grade __________

______________________________________ _______ ___________________________ ________

______________________________________ _______ ___________________________ ________

______________________________________ _______ ___________________________ ________

PARENT EDUCATION:

Does mother have a 4 year college degree? ___ Yes ___ No

Does father have a 4 year college degree? ___ Yes ___ No

FAMILY INCOME INFORMATION: (Necessary for Federal Grant Regulations)

____ Our taxable family income was at or below the amount listed for the number of exemptions claimed.

____ Our taxable family income was above the amount listed for the number of exemptions claimed.

<table>
<thead>
<tr>
<th>Number of exemptions</th>
<th>Taxable income</th>
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<tbody>
<tr>
<td>Form 1040 EZ, line 5</td>
<td>2011 Federal Tax</td>
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<tr>
<td>Form 1040A, line 6d</td>
<td>Form 1040EZ, line 6</td>
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<td>Form 1040A, line 27</td>
</tr>
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<td></td>
<td>Form 1040, line 43</td>
</tr>
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</table>

1 $16,755
2 $22,695
3 $28,635
4 $34,575
5 $40,515
6 $46,455
7 $52,395
*8 $58,335

* For families with more than 8 exemptions, add $5,940 for each additional member.
RELEASE OF RECORDS/CERTIFICATION

PARENT AGREEMENT

In order to offer your child individualized advising for their academic success, we will need to have access to their school records. Please read the following statement:

I/We hereby authorize the release of information concerning the academic progress and success of my/our child, including grades, free and reduced lunch eligibility, class schedules, attendance, financial aid information, and available test scores to The College of St. Scholastica Talent Search Program (TS) as long as my/our child is in the TS program. It is my/our understanding that all information received from school personnel and representatives of other institutions will be kept confidential in compliance with The Family Education Rights and Privacy Act.

Further, I/we authorize TS representatives to communicate with representatives from postsecondary institutions on my/our child’s behalf for up to six years post high school graduation. This also authorizes the postsecondary institution in which my/our child is enrolled to release information about admissions, college academic enrollment and financial aid information including award letters. I/We also give permission to TS staff to take photos of my/our child to be used for TS purposes (i.e. TS Newsletters, TS Website, TS Facebook page).

I/We certify that I/we have read and understand the above consent and permission statement and verify that all listed information is true and complete to the best of my/our knowledge.

__________________________________________  ________________________
PARENT SIGNATURE                      DATE

STUDENT AGREEMENT

If accepted into the program, I agree to attend sessions, apply myself academically, and prepare to enter a college program. I also agree to treat myself, other Talent Search students and staff with respect, and be a positive representative of the TS program.

__________________________________________  ________________________
STUDENT SIGNATURE                      DATE

FOR OFFICE USE ONLY:

DATE OF ENTRY____________________     INITIALS_______________
LI____    FG____    A_____    WL_____