



• Where mentoring meets hope •



BIG BROTHERS BIG SISTERS OF THE CHATTAHOOCHEE VALLEY

APPLICATION FOR COLUMBUS SCHOLARS PROJECT

“We primarily serve high-achieving children striving to be the first to attend college in their family. Our prototype scholar is from a single-parent, low-income household.”

Please use a pen – all signatures MUST be in ink.

Child's Full Name: _____

Birth date: _____ / _____ / _____ FIRST MIDDLE LAST Age: _____ Gender: M F

Address: _____ Apartment # _____

City: _____ State: _____ Zip: _____ Email Address: _____

Home Phone: _____ - _____ - _____ Work Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

Child's School: _____ Grade: _____

Where do you plan for child to go to middle school? _____

Information About The Family:

Custodial Adult: _____ Age: _____

Employer: _____ Job Title: _____

Please describe your household:

- Single-parent household Other (i.e. relative other than parent) Two-parent household

Please check all that apply: Child has...

- a parent or guardian currently employed a parent currently incarcerated

Marital Status: You are currently...

- Single Married Separated Divorced Widowed Living with someone

What is your relationship to the child?

- Mother Father Grandparent Foster parent Other: _____

List all members of your household: (include siblings and others living with you and your child)

Table with 4 columns: Name, Relationship to Child, Age, Occupation/School. Rows 1-4.

Emergency Contact: _____ Phone #: _____ (Other than yourself) NAME RELATIONSHIP TO CHILD

Have you or your child received (or are you and your child currently receiving) any professional help from other agencies, schools, psychiatrists, psychologists, social workers, etc? If yes, please indicate: Name, Address, Phone Number, and Dates.

- 1. _____ 2. _____

Information About The Absent Parent:

Name: _____ Age: _____

Where is he/she currently living? _____

Does he/she have contact with the child? Yes No If yes, how often? _____

When did the child last see the absent parent? _____ Does the absent parent have legal visiting rights? Yes No

To Be Completed By School Principal:

Please affirm that the Applicant is eligible for the National School Lunch Program, Federal Section 8 Housing Subsidy or Assistance, Aid to Families with Dependent Children or an equivalent indicator of financial need.

I affirm that _____ meets one or more of the above-listed criteria.

Student Name

School Principal's Printed Name Signature Date

Email Phone Number

Authorization and Waiver, Release and Covenant Not to Sue, Commitment and Responsibility, and Certification:

Authorization and Waiver

I hereby request that my child or ward named on this application, who is a student in Muscogee County School District (MCSD), be included in the Big Brothers Big Sisters of the Chattahoochee Valley (BBBSCV)/Columbus Scholars, Inc. (CS) program and consent to his/her participation in any activity offered by the program. I further agree that some information contained herein and other information gathered shall be shared with the prospective Big Brother/Big Sister, BBBSCV, CS and MCSD.

I understand that I am free to withdraw my child’s or ward’s application for service at any time and may also withdraw my child or ward from the program at any time I wish. I further understand that BBBSCV/CS may not be able to complete a match with a volunteer for my child or ward.

I do hereby waive any and all privacy rights, restrictions and interests in the student data, grades, materials or other information pertaining to my child or ward with MCSD applying only in as much as such waiver allows CS and its Board members and BBBSCV to obtain, analyze and discuss any school records of any MCSD school and related records with any and all employees of the MCSD.

I further agree to provide my grades and any other academic performance materials (including 'parent portal' access) requested by CS and/or BBBSCV.

I will allow Columbus Scholars or a BBBSCV representative to be the primary contact on the MCSD ‘parent portal’ site and the mentor to be the secondary contact.

Furthermore, the signature below indicates that I give permission to the BBBSCV/CS to photograph, videotape, and publicize the accomplishments of my child or ward for the limited purpose of publicizing and furthering the work of the BBBSCV/CS.

Release and Covenant Not to Sue

In additional consideration of my child’s or ward’s participation in the BBBSCV/CS or sponsored activities and submitting this application, I do covenant that I will not make claims or demands for myself or on behalf of my child or ward against BBBSCV/CS/MCSD, The Family Center, their professional staffs, or any Board member thereof which may occur during participation directly or indirectly in the activities of the program and this application process.

I also agree to release and hold harmless any school with the MCSD, CS, BBBSCV and their employees, Board members and agents from all claims, lawsuits or privacy rights of mine or those of my child or ward under any federal, state or local privacy or related statute.

Commitment and Responsibility

I understand that as guardian or parent I will be responsible to guarantee that my child or ward will be transported to and will attend CS's Academic Summer Camp as directed by the board of CS, school-year tutorial sessions as deemed necessary by CS and/or BBBSCV, all monthly enrichment sessions and any other CS required programs by either providing transportation or having someone else get my child or ward to the CS event.

I also understand that if my child or ward is selected, both of us will sign a commitment letter similar to the one posted on the CS website which requires my child or ward to have at least a B in all subjects, to not engage in any inappropriate behavior and to support CS.

I also understand that my child will be required to apply for *and attend* the Richards Middle School IB Program. Expulsion or voluntary exit from the Richards IB Program results in the automatic removal of my child from the CS program. I further understand that upon middle school graduation, my child will be required to apply for admission to the Columbus High School Magnet Program. In the event my child is not accepted at Columbus High, or declines admission, I understand and agree that my child and I will secure the cooperation of the Guidance Counselor or Principal at my chosen high school and that I, my child and the Guidance Counselor/Principal will sign a separate Academic Standards Contract requiring my child to meet the college preparatory standards outlined in the Academic Standards Contract.

Certification

I have read, understand, and agree to the above Authorization and Waiver, Release and Covenant Not to Sue, and Commitment and Responsibility for my child’s or ward’s eligibility and participation in the BBBSCV/CS program.

PARENT/GUARDIAN SIGNATURE

DATE

Please assure that this application includes the following:

- STATEMENT OF RECOMMENDATION: Attach separate sheet, telling us something about the student and why he/she would make a good Columbus Scholar. (For example: Student is resilient, coming from a single-parent family home. He/She has a B+ average, loves math, and always looks at the bright side of things.) Provide name, email and phone number of person making recommendation.
- GRADES: Attach a copy of transcript showing grades from previous years and current year.
- ACHIEVEMENT TEST SCORES: Attach a copy of Achievement Test Scores from previous year.
- ESSAY REQUIREMENT: Topic – “Why I Want to Go to College” (emphasizing hurdles the student has overcome). One standard 8.5 x 11 inch page, typewritten, double-spaced. The essay must solely be the student’s work. Thought and ideas are more important than grammar.

All materials should be received by April 10, 2018 at the office of Columbus Scholars, Inc., c/o Melanie Slaton, 1301 1st Avenue, Suite 100, Columbus, GA 31901. (No more than 3 applications per elementary school shall be submitted.)