



UNIVERSITY OF TEXAS  
 OUTREACH CENTER-AUSTIN  
 505 E. Huntland Ave, 78752  
 Suite 270  
 512-232-4600



**STUDENT INFORMATION**

Student ID #: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_  
                     LAST                    FIRST                    MI

Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_  
                     CITY                    STATE                    ZIP

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Date of Birth: Month \_\_\_\_/Day \_\_\_\_/Year \_\_\_\_

Gender:  Female  Male

Ethnicity:

- African-American       Hispanic
- Asian-American         Caucasian
- Other \_\_\_\_\_

Citizenship:

- U.S.       Permanent Resident       Other

Indicate the total number of immediate family members  
 How many siblings do you have? \_\_\_\_\_

How many siblings are high school graduates? \_\_\_\_\_

How many siblings attend college? \_\_\_\_\_

How many siblings are college graduates? \_\_\_\_\_

Were you in Neighborhood Longhorns

Program? \_\_\_\_\_

Do you qualify for free and/or reduced lunch?

- Yes  No

Parent/Guardian Name: \_\_\_\_\_

Job: \_\_\_\_\_

Highest Grade Completed: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work/Cell#: \_\_\_\_\_

E-mail: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Job: \_\_\_\_\_

Highest Grade Completed: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work/Cell#: \_\_\_\_\_

E-mail: \_\_\_\_\_

Name: \_\_\_\_\_  
School: \_\_\_\_\_

Date: \_\_\_\_\_

### Attitude and Motivational Questions

1. What kind of job or career would you like to have when you grow up? \_\_\_\_\_  
\_\_\_\_\_
2. What steps must you take to achieve this goal? \_\_\_\_\_  
\_\_\_\_\_
3. What kind of education do you think this goal will require? (check all that apply)  
 high school  2-yr. college degree  4-yr. college degree  Graduate or Professional degree
4. Have you discussed the goal with your parents; and are they supportive of it? \_\_\_\_\_  
\_\_\_\_\_
5. Do you like school?  Yes  No Are you satisfied with your grades in school?  Yes  No  
If not satisfied with your grades, what would you like to change and why?  
\_\_\_\_\_
6. What is your favorite class? \_\_\_\_\_ Why? \_\_\_\_\_
7. What is your least favorite class? \_\_\_\_\_ Why? \_\_\_\_\_
8. What AP or dual enrollment courses have you taken? \_\_\_\_\_  
\_\_\_\_\_
9. What do you do after school on a typical day? \_\_\_\_\_  
\_\_\_\_\_
10. Do you have a job for which you receive pay, and if so what is it? \_\_\_\_\_  
\_\_\_\_\_
11. Do you have assigned jobs or chores to perform at home on a daily basis? \_\_\_\_\_  
\_\_\_\_\_
12. Do you feel you know what you need to do to apply to college?  
 Definitely  Somewhat  Not really
13. Who are individuals in your life who can help you apply? \_\_\_\_\_
14. Are you already in any college-related programs, and if so what are they? \_\_\_\_\_  
\_\_\_\_\_
15. Are you interested in participating in UT Outreach-Austin?  Yes  No  
How interested are you?  A little  Somewhat  Very  
What would you like UT Outreach-Austin to do for you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# UT OUTREACH CENTER AUSTIN PARENT AGREEMENTS

## PARENT APPROVAL OF STUDENT PARTICIPATION

\_\_\_\_\_ is my child and is now under my control and in my custody. I want my child to  
(Print Student Name)  
go on any and all trips and participate in any and all UT Outreach Program activities for which he/she is eligible. In consideration of my child being permitted to make trips and take part in UT Outreach Program activities and the instruction my child will receive by reason thereof, I hereby relieve and release the UT Outreach Program, its sponsoring and participating universities, colleges, school districts, and their officers, employees, and agents, together with all those persons assisting with any phase of trips and all program activities (excluding paid certified carriers) from any and all liability, responsibilities for making trips and activities, and hereby release all of said parties from all liability by reason of any accident, injury or other harm that may be suffered by said child while on any trip or while participating in any program activities. I agree to indemnify and hold all of said parties harmless from all claims hereafter made by or asserted on behalf of the student named above.

DATE: \_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE  
\_\_\_\_\_  
PRINTED NAME OF PARENT/GUARDIAN

## PARENT PARTICIPATION

I, \_\_\_\_\_ will make every effort to attend each Parent Meeting of the  
(Parent/Guardian Name)  
UT Outreach Program.

DATE: \_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

## PARENT AUTHORIZATION FOR STUDENT ACADEMIC RECORDS

I, \_\_\_\_\_, authorize the Austin Independent School District to release  
(Parent/Guardian)  
records to UT Outreach staff. I permit UT Outreach staff to have access to my daughter's/son's,  
(Parent/Guardian)  
academic records (grade reports, school transcripts, test scores, etc.). The above records will be used for evaluation purposes, participation in field trips or events, etc.

DATE \_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

DATE \_\_\_\_\_  
UT OUTREACH STAFF SIGNATURE

# UT OUTREACH CENTER AUSTIN ACUERDOS DE PADRES

## APROBACION DE PADRES PARA LA PARTICIPACION DEL ALUMNO

\_\_\_\_\_ es mi hija/hijo y esta bajo de mi/nuestro mando y custodia. Quiero/queremos que  
(Nombre de estudiante)  
mi/nuestra(o) hija/hijo atienda a salidas de estudio y participe en cualquier y todos eventos del programa *UT Outreach* por el cual el/ella tenga derecho. En cambio de que mi hija/hijo se le permita atender en salidas del estudio y de tomar parte en actividades del *UT Outreach* y la instrucción que mi hija/hijo recibirá y por razón de esto, yo/nosotros libro/libramos y absuelvo/absolvemos al programa de *UT Outreach*, a las universidades patrocinadoras y participantes, escuelas superiores, distritos escolares, y sus directores, empleados, y agentes, conjunto con todas personas que asistan con cualquier fase de salidas de estudio y todas actividades programadas (exclusive de empresas de transporte por paga) de cualquier y todos compromisos y responsabilidades de hacer los viajes actividades y por este medio libro/libramos a todos aquellos interesados de todos compromisos y consecuencias de cualquier accidente, lesión u otro perjuicio que sufra mi hija/hijo durante el viaje o mientras participe en actividades programadas. Yo/nosotros acuerdo/acordamos de indemnizar y reconocer sin ofensa a aquellos interesados contra quien en el futuro se hagan reclamos por el alumno, o se declaren por parte del alumno, antedicho.

FECHA: \_\_\_\_\_

\_\_\_\_\_  
FIRMA DEL MADRE/PADRE O GUARDIÁN

\_\_\_\_\_  
NOMBRE DEL MADRE/PADRE O GUARDIÁN

## PARTICIPACION DE PADRES

Yo, \_\_\_\_\_ me esforzare para asistir a cada junta de padres del programa  
(Nombre del madre/padre o guardian)  
de *UT Outreach*.

FECHA: \_\_\_\_\_

\_\_\_\_\_  
FIRMA DEL MADRE/PADRE O GUARDIÁN

## AUTORIZACION DE PADRES PARA ARCHIVOS ACADEMICOS

Yo, \_\_\_\_\_, autorizo al Distrito Escolar Independiente de Austin que  
(Nombre del madre/padre o guardian)  
de acceso de los archivos de mi hija/hijo \_\_\_\_\_ al personal de *UT*  
(Nombre de estudiante)

*Outreach*. Yo permito que el *UT Outreach* tenga acceso a los archivos académicos (reporte de grados, reportes de la escuela, resultados de los exámenes, etc.) de mi hija/hijo. Los archivos susodichos serán utilizados con el propósito de evaluaciones, participación en los viajes o eventos, etc.

FECHA \_\_\_\_\_

\_\_\_\_\_  
FIRMA DEL MADRE/PADRE O GUARDIÁN

FECHA \_\_\_\_\_

\_\_\_\_\_  
FIRMA DEL PERSONAL DE UT OUTREACH

# UT OUTREACH AUSTIN

## CONSENT, WAIVER OF LIABILITY AND RELEASE FOR INTERVIEW, PHOTOGRAPHING, VIDEOTAPING AND/OR WEBSITE USE

I consent to interview(s), photography, videotaping and its/their release, publication, exhibition, or reproduction to be used for public relations, news articles or telecasts, education, advertising, research, inclusion on Web sites, fundraising, or any other purpose by UT Outreach and The University of Texas at Austin (hereafter UT) and/or its affiliates. I release UT, their officers and employees, and each and all persons involved from any liability connected with the taking, recording, or publication of said interviews, photographs, slides, computer images, videotapes, or sound recordings.

I waive all rights I may have to any claims for payment or royalties in connection with any exhibition, televising, or other publication of these materials, regardless of the purpose or sponsoring of such exhibiting, broadcasting, or other publication irrespective of whether a free for admission or film rental is charges. I also waive any right to inspect or approve any photo, video, or film taken by UT or the person or entity designated it by it. I release and discharge UT and their affiliate(s) from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form whether intentional or otherwise, that may occur or be produced in the taking of the pictures, or in any processing toward the completion of the finished product. All negatives and positives, whether prints, video, film, or sound recordings are the property of UT or the person or entity designated by it, solely and completely.

I have fully informed myself of this consent, waiver of liability, and release before signing it.

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
SIGNATURE OF WITNESS

\_\_\_\_\_  
PRINTED NAME OF PARENT/GUARDIAN

\_\_\_\_\_  
PRINTED NAME OF WITNESS

\_\_\_\_\_  
ADDRESS OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE

# UT OUTREACH AUSTIN

**CONSENTIMIENTO, AUTORIZACION, Y RENUNCIA A TODO DERECHO  
LEGAL EN LA TOMA DE FOTOGRAFIAS, VIDEOGRABACION, Y/O SU USO  
EN LA PAGINA DE INTERNET**

Doy mi consentimiento para la distribución, publicación, exhibición, y reproducción de entrevistas, fotografías, y video grabaciones; y para que estas sean usadas en relaciones publicas, en artículos informativos y televisivos, en la educación publica, publicidad, para investigación educacional, y en paginas de Internet; incluyendo para recaudación de fondos y cualquier otro propósito por los *UT Outreach* y por la *University of Texas at Austin* (de ahora y adelante nombrado *UT*) y/o sus afiliados. Libero a *UT*; sus oficiales y empleados, de cualquier responsabilidad legal, al igual que a todas las personas involucradas y en conexión con las platicas, grabaciones, y publicaciones de dichas entrevistas, fotografías, presentaciones e imágenes computarizadas , video grabaciones y audio.

Renuncio a todo derecho en la participación de dividendos por ingresos monetarios en relación con la exhibición , producciones televisivos o cualquier otro medio de publicación de dichos materiales. Sin importar el propósito o productores de dichas exhibiciones o producciones; también, sin importar la existencia de ingresos monetarios producidos por la admisión a/o renta de dichas filmaciones. Renuncio cualquier derechos de inspeccionar y aprobar cualquier pieza fotográfica, grabación, o filiación tomada por *UT*, y personas o entidades designadas por *UT*. Renuncio y libero *UT* y a sus afiliados de cualquier responsabilidad legal en virtud de cualquier distorsión, alteración, o ilusión óptica, intencional o no, que pudiera ocurrir o producirse en la toma de fotografías, o en el proceso y producción del producto final. Todas la impresiones negativos, grabaciones, filmaciones y audio, son completamente propiedad de *UT*, y personas o entidades designadas por *UT*.

Yo me he informado completamente de este consentimiento, la renuncia de obligación, y de la liberación antes de firmarlo.

\_\_\_\_\_  
FIRMA DEL PADRE/GUARDIAN

\_\_\_\_\_  
FIRMA DEL TESTIGO

\_\_\_\_\_  
IMPRIMA EL NOMBRE DEL PADRE/GUARDIAN

\_\_\_\_\_  
IMPRIMA EL NOMBRE DEL TESTIGO

\_\_\_\_\_  
DIRECCION DEL PADRE/GUARDIAN

\_\_\_\_\_  
FECHA

UNIVERSITY OF TEXAS OUTREACH CENTER  
AUSTIN  
STUDENT PARTICIPATION AGREEMENT

The *UT Outreach Center* is designed to provide a variety of educational and motivational services to students who participate in the program.

These services are intended to prepare students to enter a college or university upon graduation from high school.

Continued participation in the program depends on the student's commitment to the general goals and objectives of the *UT Outreach Center*.

STUDENT

I, \_\_\_\_\_, must meet the following conditions in exchange for  
(Print Student Name)

*UT Outreach* services:

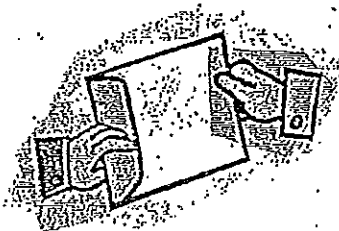
Maintain no less than an 3.2 grade point average in overall coursework in grades 10-12.

1. Attend school on a regular basis.
2. Enroll in college preparatory classes.
3. Exhibit appropriate behavior and a cooperative attitude.
4. Attend *UT Outreach* meetings and functions.
5. Take the ACT or SAT prior to my senior year.

If I do not meet these conditions, I forfeit my membership in *UT Outreach*.

\_\_\_\_\_  
STUDENT'S SIGNATURE

\_\_\_\_\_  
DATE



Please submit to your school counselor  
Or  
The UT Outreach Center Austin

as soon as it is complete.  
Thank You!