



# GEAR UP Utah Application

Grant 4 School Year 2025/26



## Student Information

First and Last Name: \_\_\_\_\_  
School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_ Graduation Year: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Student Phone # \_\_\_\_\_ Student Personal Email Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_  
Ethnicity (select one) Hispanic/Latino: \_\_\_\_\_ Non-Hispanic/Non-Latino: \_\_\_\_\_  
Race (select one) American Indian or Alaskan Native: \_\_\_\_\_ Black or African American: \_\_\_\_\_  
Asian: \_\_\_\_\_ Native Hawaiian or Pacific Islander: \_\_\_\_\_ Two or More Races: \_\_\_\_\_ White: \_\_\_\_\_  
Are you in TRIO's Upward Bound and/or Educational Talent Search? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Are you currently, or have you been in Foster Care in the past year? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Are you currently, or have you been, Homeless in the past year? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Does one or both of your parent(s) have a bachelor's degree? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
What language is spoken at home? \_\_\_\_\_

## Parent/Guardian Information

Name of Parent/Guardian 1: \_\_\_\_\_ Relationship to student: \_\_\_\_\_  
Name of Parent/Guardian 2: \_\_\_\_\_ Relationship to student: \_\_\_\_\_  
Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred method of contact (select one): Phone Call: \_\_\_\_\_ Text: \_\_\_\_\_ Email: \_\_\_\_\_

## Financial Eligibility

Is the student in foster/proctor care or Homeless? Yes \_\_\_\_\_ No \_\_\_\_\_ *If yes, then you do not need to complete this portion*

For your student to qualify to be enrolled in GEAR UP Utah, they need to be eligible under the Free and Reduced-Price School Meals Guidelines. Based on the guidelines below, does your student qualify for Free/ Reduced Lunch?  
Yes \_\_\_\_\_ No \_\_\_\_\_

To start, view how many are in your household, and next, see where your gross income falls on how often you are paid. If your income is below the amount your student qualifies for Free/Reduced Lunch and you may select Yes. Military personnel do not need to include housing allowance when viewing income.

Household Size	Yearly	Monthly	Twice Per Month	Every Two weeks	Weekly
1	28,953	2,413	1,207	1,114	557
2	39,128	3,261	1,631	1,505	753
3	49,303	4,109	2,055	1,897	949
4	59,478	4,957	2,479	2,288	1,144
5	69,653	5,805	2,903	2,679	1,340
6	79,828	6,653	3,327	3,071	1,536
7	90,003	7,501	3,751	3,462	1,731
8	100,178	8,349	4,175	3,853	1,927
Each additional person	10,175	848	424	392	196

This table is valid from July 1, 2025 to June 30, 2026. Source <https://www.govinfo.gov/content/pkg/FR-2025-03-13/pdf/2025-03821.pdf>

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### GEAR UP Utah Authorization for Release of Information

I, \_\_\_\_\_, (Parent/Guardian Name) do hereby grant the representative of GEAR UP Utah, including their external evaluators, authorization to contact parents/guardians and students, and to release and/or to obtain information from school, district, state data sources, and YouScience regarding the following individual:

Student printed name: \_\_\_\_\_

**Reason for release of information:** To track students' success in school and help facilitate their preparation for and success in continuing their education beyond middle school and high school. Specific types of information to be released (this information may be provided by the school, district, or State Office of Education):

Student State ID	Class Schedule	Cumulative Student Record	Transcripts, Grades, and Test Scores
IEP/LEP Information	Attendance	Free/Reduced Lunch Status/Eligibility	College & Career Readiness Information Aptitude Information

This program requires parent/guardian authorization.

- I the parent/guardian accept this agreement and the terms of the Authorization for Release of Information.  
Yes \_\_\_\_\_ No \_\_\_\_\_
- For the Media License. I represent and warrant that I am the parent or legal guardian of the minor named above and that I have the legal right, power, and authority to consent to this License on behalf of the minor and myself; I hereby consent to and approve in all respects the terms and conditions of this License and the minor's execution of this License.  
Yes \_\_\_\_\_ No \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

As a student, I consent to the Media License. Yes \_\_\_\_\_ No \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please return this form to your GEAR UP Counselor/Advisor**