



GEAR UP Utah Application

Grant 4 School Year 2026/27



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: _____

Media License (Photo, Video, and Audio) (the "License")

I do hereby grant GEAR UP Utah and Utah Valley University including their trustees, employees, agents, representative, assignees, and transferees ("Grantees"), to take photographs, video, and/or audio recordings of myself, including my name, image, likeness, performance, and/or voice ("Media"). I grant Grantees an unlimited right to reproduce, use, exhibit, display, perform, broadcast, create derivative works from, distribute, and perform by means of a digital audio transmission the Media without compensation in any medium or format now existing or hereafter developed, in perpetuity, throughout the world. I agree that the Media may be used by the Grantees for any purpose including but not limited to marketing, advertising, publicity, or other promotional purposes. I agree that Grantees will have final editorial authority over their respective uses of the Media, and I waive any right to inspect or approve of any future use of the Media. I acknowledge that I will not receive compensation for participating in the Media or for any future use of the Media. I release and fully discharge Grantees from any claim, damages, or liability arising from or related to Grantee's exercise of the rights granted hereunder.

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

Student Signature: _____ Date: _____

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.

Parent/Guardian Signature: _____ Date: _____

Authorization for Release of Student Information

By signing below, I authorize representatives of GEAR UP Utah and Utah Valley University to obtain, use, and share student information for the following purposes:

-administering the GEAR UP Utah program	-verifying student participation	-FAFSA completers matching and reporting
-complying with federal grant reporting requirements	-evaluating program outcomes	

I authorize the student's school, school district, state education agencies, the Utah System of Higher Education (USHE), and YouScience, as applicable, to obtain and disclose to GEAR UP Utah and Utah Valley University the information needed for these purposes. This authorization covers, as applicable:

student name	State Student ID	date of birth	school	grade level
class schedule	IEP/LEP information	attendance	cumulative student record	free/reduced lunch status/eligibility
transcripts, grades, and test scores	college and career readiness information	aptitude information	program participation dates/status	graduation date

I, the parent/guardian, accept this agreement and the terms of the Authorization for Release of Information. Yes ☐ No ☐

Student Name: _____
Parent/Guardian Name: _____
Parent/Guardian Signature: _____
Date: _____

DATA PRIVACY NOTICE

GEAR UP Utah and Utah Valley University request personal data as defined by Utah Code § 63A-19-101(24) to review applications, determine eligibility, administer services, communicate with families, evaluate program outcomes, support grant reporting, and meet legal and grant requirements. If you do not provide the requested personal data or authorization, the student may be unable to participate fully in the GEAR UP program, and/or the program may be unable to complete required reporting and evaluation activities. Personal data provided is not sold, but may be shared with GEAR UP Utah, Utah Valley University, the student's school, school district, state education agencies, Utah System of Higher Education, U.S. Department of Education, contracted evaluator, and YouScience. Personal data collected by this form is included in Record Series #[GRS-1859](#).

Please return this form to your GEAR UP Counselor/Advisor