



Double Discovery Center | COLUMBIA UNIVERSITY

Lerner Hall, Room 306 | Mail Code 2604 | 2920 Broadway (W. 115th St.) NY, NY 10027
(p) 212-854-3897 | (f) 212-854-7457 | doublediscovery.org

STUDENT ADMISSION APPLICATION

DDC helps low-income and first-generation community youth achieve college and career success by providing them with a comprehensive and coherent system of support across three key areas: *Academic Enrichment*; *College & Career Success*; and *Healthy Minds & Bodies*. Our 2018-2019 target schools include: A Philip Randolph, Frederick Douglass Academy, Frederick Douglass Academy II, Global Learning Collaborative, High School for Media & Communications, Maxine Greene HS for Arts Imagination & Inquiry, Wadleigh Secondary School for the Performing & Visual Arts, and Washington Heights Expeditionary Learning School.

We host U.S. Department of Education **TRIO** programs Upward Bound and Talent Search. **APPLICATION MUST INCLUDE RECENT TRANSCRIPT, ATTENDANCE RECORD, AND FAMILY INCOME VERIFICATION.**

Student's First Name

Middle Initial

Last Name

Address

Apartment #

City

State

Zip Code

Home Phone: (____) _____ Student Cell Phone: (____) _____

Student Email Address: _____

Social Security # ____ / ____ / ____ School I.D. (OSIS) # _____

Date of Birth: ____ / ____ / ____
Month Day Year

Gender: Female Male

Citizenship Status: American Citizen Permanent Resident Other: _____

Alien Registration # (if any): _____

Are you in the U.S. for more than a temporary purpose? Yes No

If yes, is it your intent to become a permanent resident? Yes No

OPTIONAL: Ethnicity and race answers are optional. Nothing provided will be used in a discriminatory manner.

Ethnic Origin: Are you Hispanic/Latino? Yes No **Race:** (Check all that apply to you below.)

Asian American Indian or Alaskan Native Black or African American White

Native Hawaiian or Other Pacific Islander Describe your background: _____

Current Grade: 6 7 8 9 10 11 12 Other: _____

If applying during the summer what grade will you be in at the start of September? _____

What is your cumulative average/GPA? _____ What is your attendance rate? _____

School Name: _____ **School Borough:** _____

Student Signature: _____ **Date:** _____

OFFICIAL USE (Do not mark): ____LI/FG____I____F____Other ____UB____TS____TS/EII ____Target School/Area
Year Admitted: _____ Notes: _____ Initials: _____

Parent/Guardian 1: (check one) Mother Father Legal Guardian Other _____

First Name: _____ Last Name: _____

Home/Cell Phone: _____ Email: _____

Education: Did you (this parent) receive a four-year college degree in the U.S.? (check one) Yes No

Parent/Guardian 2: (check one) Mother Father Legal Guardian Other _____

First Name: _____ Last Name: _____

Home/Cell Phone: _____ Email: _____

Education: Did you (this parent) receive a four-year college degree in the U.S.? (check one) Yes No

Emergency Contact: Provide the name and contact number of one adult other than the one(s) listed above.

Name: _____ Telephone Number: _____

Relationship to Student: _____

Family/Household Income: How many people (include applicant and all others) live in the household? _____

As best you can, check the most appropriate taxable household income: _____ \$16,755 or below

_____ between \$16,755-\$22,695 _____ between \$22,695-\$28,635 _____ between \$28,635-\$34,575

_____ between \$34,575-\$40,515 _____ between \$40,515-\$46,455 _____ above \$46,455 (indicate income): \$ _____

My child (the DDC applicant) currently receives free or reduced cost lunch at school: Yes No

Please check one of the following and submit a copy of recent documentation if available:

Source of Income:

Documentation Required:

- Employment ----- Copy of custodial parent(s) most recent Income Tax Form 1040
- Non-Employment/Public Support ---- Public Assistance Budget Letter, SSI Award, Veterans Benefits,
- Public Assistance ----- Copy of Human Resources Administration Budget Sheet/Letter
- Signed Statement ----- Signed DDC Family Income Statement (see below)

Income Statement: The following statement may be used in place of income documentation should it be unavailable, including the 1040 tax form or benefit award letters received by the applicant or family.

I _____ hereby state that for the most recent tax year, Jan. 1 – Dec. 31, 2018:

(Parent/Guardian Name)

My family's taxable income was: \$ _____ The total number of household dependents was: _____

Check Source(s) of Income: Employment Public Assistance Social Security Other: _____

By signing below, I certify that all of the information and any attached documents are true and complete to the best of my knowledge. I also give permission to Columbia University's Double Discovery Center to access my child's school academic and FAFSA records for the purpose of college preparation and program reporting; to use my child's name, image, likeness, actions and statements in any live, recorded, video, print, online, or photographic display for promotion; for my child to participate in on-campus and local field trips with DDC; and, as needed, to seek emergency medical treatment and/or refer my child to a professional counselor when such assistance is deemed appropriate.

Parent Signature: _____ **Date:** _____

**YOU MUST ATTACH COPY OF RECENT TRANSCRIPT, ATTENDANCE RECORD
and FAMILY INCOME VERIFICATION. Thank you.**