


**Complete (BOTH SIDES) of application with REQUIRED signatures & dates noted by** 

**STUDENT INFORMATION**

First Name: \_\_\_\_\_ MI \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
 SSN (Preferred): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ School ID: \_\_\_\_\_  
 What is the primary language spoken in the home?  English  Spanish Other \_\_\_\_\_

**ETHNICITY**

Are you Hispanic/Latino \_\_\_ Y \_\_\_ N  
 \_\_\_ Black/African American  
 \_\_\_ White/Caucasian  
 \_\_\_ Asian  
 \_\_\_ Native Hawaiian/Pacific Islander  
 \_\_\_ Native American/Alaskan Asian  
 \_\_\_ Multi-Racial

**RESIDENCY**

\_\_\_ U.S Citizen  
 \_\_\_ Permanent Resident

**GENDER (check below)**

\_\_\_ Male  
 \_\_\_ Female

**CURRENT GRADE LEVEL (check below)**

\_\_\_ 6<sup>th</sup>  
 \_\_\_ 7<sup>th</sup>  
 \_\_\_ 8<sup>th</sup>  
 \_\_\_ 9<sup>th</sup>  
 \_\_\_ 10<sup>th</sup>  
 \_\_\_ 11<sup>th</sup>  
 \_\_\_ 12<sup>th</sup>

Current (GPA): \_\_\_\_\_

Do you have the ability and desire to continue education beyond high school: \_\_\_ Yes \_\_\_ No

Are you enrolled in any other TRIO programs? \_\_\_ Yes \_\_\_ No

What assistance can talent search provide to you? (check all that apply)

\_\_\_ Tutoring Services  
 \_\_\_ Class/Course Selection  
 \_\_\_ Financial Aid Application  
 \_\_\_ Financial Literacy/Empowerment  
 \_\_\_ College Admissions Process  
 \_\_\_ College Entrance Exams  
 \_\_\_ Career Exploration  
 \_\_\_ Secondary School Re-entry

**FAMILY INFORMATION**

\*\*Check one of the following:

\_\_\_ Single Parent Household  
 \_\_\_ Two Parent Household

Number of immediate family members living in household \_\_\_\_\_

\_\_\_ Live with mother/guardian  
 \_\_\_ Live with father/guardian  
 \_\_\_ Both

Mothers Name: \_\_\_\_\_

Mothers Email: \_\_\_\_\_

Fathers Name: \_\_\_\_\_

Fathers Email: \_\_\_\_\_

**PARENTS/GUARDIAN EDUCATION**

\*Mother

High School Grad: \_\_\_ Yes \_\_\_ No  
 Two Year College Grad: \_\_\_ Yes \_\_\_ No  
 Four Year College Grad: \_\_\_ Yes \_\_\_ No

\*Father

High School Grad: \_\_\_ Yes \_\_\_ No  
 Two Year College Grad: \_\_\_ Yes \_\_\_ No  
 Four Year College Grad: \_\_\_ Yes \_\_\_ No

**FAMILY INCOME**

Do you receive free/reduced Breakfast/Lunch \_\_\_ Yes \_\_\_ No

Did anyone in your household file federal income tax last year? (2023)  
 \_\_\_ Yes \_\_\_ No

If yes, what is your family taxable income? \_\_\_\_\_  
 (located on 2023 tax forms (1040–line 43; 1040A–line 27; 1040EZ–line 6)

If no, list other sources of Income:

\_\_\_ ADFC  
 \_\_\_ Food Stamps  
 \_\_\_ Social Security  
 \_\_\_ Disability (SSI)  
 \_\_\_ Child Support  
 \_\_\_ Retirement  
 \_\_\_ Unemployment  
 \_\_\_ Veteran Benefits

DDCC Talent Search  
 297 DCC Road  
 Thomasville, NC 27360 Office  
 (336) 249-8186 ext. 6302  
 Fax (336) 248-6714  
 Email:  
 talentsearch@davidsondavie.edu

**CHILD'S MEDICAL HISTORY**

Does your child have any allergies? \_\_\_ Yes \_\_\_ No

If yes, please list \_\_\_\_\_

Does your child have a physical impairment, medical condition or disability?


\_\_\_ Yes \_\_\_ No

If yes, please list \_\_\_\_\_

Is your child taking any type of prescription medication? \_\_\_ Yes \_\_\_ No

If yes, please list \_\_\_\_\_

I certify that all the information above is correct and true to the best of my knowledge. I understand the information is confidential and will only be used for verification for this program.

 Parent/Guardian Signature: \_\_\_\_\_

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

**Davidson-Davie Community College TRIO Talent Search Program**

**Release Form**

Student's Name: \_\_\_\_\_ School: \_\_\_\_\_

The information requested on this form will be utilized to assist us in providing free services for your child. To provide the most effective services, we may need to obtain information from several sources, such as high schools, colleges, testing agencies, counselors, admissions and financial aid officers, social workers, etc. All information received will be kept confidential in compliance with the Family Educational Rights and Privacy Act.

**I. School Records**

As the parent and/or legal guardian of \_\_\_\_\_, I grant TRIO Talent Search permission to obtain school records, progress reports, and test results from the secondary school my child is attending. I will also permit Talent Search staff to speak with teachers, counselors, and other administrators at my child's school in order to obtain and exchange information as part of the services my child will receive from the Talent Search Program. I authorize the TRIO Talent Search Program to access copies of my child's progress reports and/or test scores that are necessary to assist my son/daughter in achieving his/her educational goals.

**II. Waiver of Liability**

As parent and legal guardian of the above-mentioned student, I authorize and permit my child to participate in field trips, activities, and events offered by the TRIO Talent Search Program. I understand that my child may be leaving his/her school campus or Davidson-Davie Community College and may be transported by the TRIO Talent Search staff of Davidson-Davie Community College. I agree that the Lexington City Board of Education, the Thomasville City Board of Education, Davidson-Davie Community College, and Talent Search staff, or anyone associated with the Lexington City Board of Education, the Thomasville City Board of Education, and Davidson-Davie Community College will not be held liable for any loss, injury, or death related to any field trips or events. Further, I agree to hold the Lexington City Board of Education, the Thomasville City Board of Education, Davidson-Davie Community College, TRIO Talent Search staff, advisory committee members, officers, staff, and volunteers, harmless from any claims whatsoever occasioned in any of the situations that I have agreed, that TRIO Talent Search and Davidson-Davie Community College, the Lexington City Board of Education and the Thomasville City Board of Education shall not be held liable.

**III. Medical Release**

In the event that my child, \_\_\_\_\_, is involved in a medical emergency, I authorize the TRIO Talent Search staff to make decisions regarding immediate medical attention (hospitalization, administration of prescribed medications, doctor treatment, etc.) if they are unable to contact me for verbal authorization.

Insurance Name and Number: \_\_\_\_\_ Medicaid Card Number: \_\_\_\_\_

**IV. Emergency Contacts**

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

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

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_


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

**V. Media Release**

Periodically, students participating in the TRIO Talent Search Program events may be photographed, filmed, or interviewed. As the parent and/or legal guardian of \_\_\_\_\_, I grant permission for my child to participate in photographs, films, or interviews as they pertain to Talent Search and I understand that such pictures, film, or interviews may be used to promote or publicize the Talent Search events or demonstrate how federal funds are being used to assist students.

**VI. Communication Release**

I, \_\_\_\_\_, authorize TRIO Talent Search to send communication via email, text message, school (Parent/Guardian Name) messenger, REMIND App to my email, students email, cell phone, student cell phone, or home phone. I understand that text messaging rates may apply to any text messages received. I also understand that I or TRIO Talent Search may revoke this permission in writing at any time. I agree not to hold TRIO Talent Search liable for any electronic messaging charges or fees generated by this service. I further agree that in the event emails, cell phone and other information changes, that I will inform DDCC TRIO Talent Search.

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

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



Davidson-Davie Community College (DDCC)  
 Talent Search Program  
**STUDENT ASSESSMENT 2024-2025** (submit with application)

**STUDENT INFORMATION (print clearly):**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Grade \_\_\_\_\_ School: \_\_\_\_\_ Current Grade Point Average (GPA): \_\_\_\_\_

Check items you regularly use: \_\_\_ Home Computer \_\_\_ Cell Phone \_\_\_ Internet \_\_\_ Facebook  
 \_\_\_ Instagram \_\_\_ Twitter \_\_\_ Snapchat \_\_\_ Tiktok

An e-mail address that you or a parent check daily:  
 \_\_\_\_\_

**ACADEMIC INFORMATION:**

Are you taking any of the following type of classes?

\_\_\_ Accelerated or Honors

\_\_\_ AP-Advanced Placement (high school only)

\_\_\_ Dual Credit (Middle School/High School Credit Class or High School > College Credit Class)

	<b>English Language Arts</b>	<b>Mathematics</b>	<b>Science</b>	<b>Social Studies</b>	<b>Writing</b>
I excel in:					
I have trouble with:					
I would like to have a tutor for:					

My current HIGHEST class average is: A B C

My current LOWEST Class average is: A B C D F

**CURRENT CLASS SCHEDULE:**

Period/Block	1 <sup>st</sup>	2 <sup>nd</sup>	3rd	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>
Subject						
Teacher						
Room number						

**MY GOAL FOR AFTER HIGH SCHOOL:**

\_\_\_ Community College \_\_\_ 4-yr. College/University \_\_\_ Vocational/Technical College \_\_\_ Military  
 \_\_\_ Employment \_\_\_ I don't know yet

I am interested in the following career or field of study: \_\_\_\_\_

I am interested in the following schools/college: \_\_\_\_\_

**NEED FOR TALENT SEARCH SERVICES:**

DDCC Talent Search Program can provide assistance in various areas. Please check all that you would like help with.

Grade Improvement		Graduation requirements	
Better class notes		College planning	
Test taking strategies		College admissions requirements	
Improved study habits		ACT/SAT preparation	
Selecting classes/courses		ACT/SAT fee waiver	
Time management		Money management & budgeting	
Goal setting		Financial aid (FAFSA)	
Positive communication		Scholarship search & application	
Confidence in myself		Career interest & planning	
STEM Activities		Job search/Job shadowing	
Positive decision making		Interviewing skills	
Conflict resolution		College visits/tours	
Stress management		Summer camps	
Academic assistance & tutoring		Essay writing	
Positive relationships with others		Resume writing	
Personal counseling		Leadership opportunities	
Transportation		Cultural activities	
Credit recovery		Community involvement	
School re-enrollment		School involvement	
Calculating my grade point average (GPA)		Mentoring	

**STUDENT AGREEMENT:**

- ❖ I understand that in order for me to participate in the DDCC Talent Search program, I must maintain enrollment in Thomasville and Lexington City Schools through graduation. I must attend school and classes regularly. Excessive absences can jeopardize my participation with DDCC Talent Search.
- ❖ I understand I must display positive behavior in school and in the community. I understand I must work to be a respectful student at all times. I understand that I must avoid receiving an “Out of School Suspension (OSS) while participating in DDCC Talent Search Program. I understand an OSS can jeopardize my participation with DDCC Talent Search.
- ❖ I understand that I must meet with or check-in with the Talent Search Success Advisor at my school at least once a week, between classes or after-school. I understand my Success Advisor will provide me with information and resources needed to help me be successful.
- ❖ I understand I am making a commitment to the DDCC Talent Search Program and to myself to participate in as many program workshops, academies and activities as possible. I understand I must participate in a minimum of two DDCC Talent Search sponsored workshops, academies or activities each year, otherwise I will be withdrawn from the program to allow someone else the opportunities.
- ❖ I understand I must work toward obtaining at least a 2.50 grade point average (GPA) or higher in order to remain in DDCC Talent Search Good Standing. A 2.50 GPA is the minimum requirement to gain admission into the UNC System colleges. I understand that if my GPA is below 2.50, I will participate in academic services to help me improve my grades.



Student’s Signature \_\_\_\_\_ Date \_\_\_\_\_