



# Rising Scholars Application

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

I am seeking to apply for the Rising Scholars Program for: ( ) Fall \_\_\_\_\_ ( ) Spring \_\_\_\_\_ ( ) Summer \_\_\_\_\_

### Rising Scholars Scholarship Guidelines:

- Students must be enrolled in a face-to-face class AND have completed a dual enrollment application form in order to receive the Rising Scholars Scholarship.
- A minimum cumulative GPA of 3.5 or better, completion of 14 core high school units (or have junior level status) or a sophomore who has earned a minimum ACT composite of 30 AND have a minimum GPA of 3.00 or better, as documented by an official high school transcript.
- A minimum ACT composite of 21 (documented and reported by designated high school guidance counselor or act.org) is required for participation.
- Students must have a sub-score 21 or better in English, a sub-score of 21 or better in Reading to take History or Literature, a sub-score of 21 or better in Science to take a Science course, and a sub-score of 21 or better in Math to take a Math course.
- Applying to the Rising Scholars Program does not grant automatic acceptance to the Rising Scholars Program. The applications will be reviewed and students will be notified of their status.
- Rising Scholars are protected under FERPA and must sign the Consent to Release Academic Information to grant access to educational records.

Full Name \_\_\_\_\_  
(Last) (First) (Middle) (Preferred Name)

Permanent Address \_\_\_\_\_  
(Street) (City) (County) (Zip)

Mailing Address \_\_\_\_\_  
(Street) (City) (County) (Zip)

Cell Phone (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you a legal US citizen? \_\_\_\_\_ Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(MM-DD-YY)

GPA \_\_\_\_\_ ACT Overall Score \_\_\_\_\_

ACT Sub-scores: \_\_\_\_\_ English Sub-score  
\_\_\_\_\_ Reading Sub-score  
\_\_\_\_\_ Math Sub-score  
\_\_\_\_\_ Science Sub-score

High School \_\_\_\_\_ Classification \_\_\_\_\_

I certify that none of the information on this form is false or has been withheld. I understand that giving false information or withholding information may make me ineligible for admission to participate in the dual enrollment program at Delta State University.

Principal/Guidance Counselor Signature \_\_\_\_\_

Date \_\_\_\_\_

**Checklist**

- Completed & submitted dual enrollment application form
- 1 letter of recommendation from either a principal or guidance counselor
- An official copy of ACT overall score and sub-scores from guidance counselor

Rank Interests in College Courses below from highest (1) to lowest (9) 1-9

\*Note: You may list and rank ANY face-to-face college course other than the courses listed below by browsing the course catalog at [deltastate.edu](http://deltastate.edu)

- English 101 \_\_\_\_\_
- Intro to Literature \_\_\_\_\_
- Algebra \_\_\_\_\_
- Trigonometry \_\_\_\_\_
- General Biology \_\_\_\_\_
- US History \_\_\_\_\_
- Sociology \_\_\_\_\_
- Computer Programming \_\_\_\_\_
- Other \_\_\_\_\_

I certify that none of the information on this form is false or has been withheld. I understand that giving false information or withholding information may make me ineligible for admission to participate in the dual enrollment program at Delta State University.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**WAIVER AND RELEASE**

I, do hereby release, waive, discharge, covenant not to sue and agree to hold harmless Delta State University, its officers, employees, representatives, agents, affiliates, and assigns (collectively "Releases"), from any and all claims, demands, and actions of any and every kind directly or indirectly arising out of, or relating in any aspect to my child's participation in the Rising Scholars Program.

My waiver and release of all claims, demands, actions, and liability shall include without limitation, any injury, illness, death, property damage or loss to my child which may be caused by any act, or failure to act, by the Releases, unless such injury, illness, death, property damage or loss is a direct result of the willful misconduct of any Releases.

I understand that, without limitation of the foregoing, neither Delta State University, nor the Rising Scholars Program, shall be liable and each is hereby released from all claims that may arise from loss or damage to my child or my child's personal property.

## **PHOTOGRAPH, MEDIA, AND VIDEO AUTHORIZATION RELEASE**

I give permission for Delta State University and the Rising Scholars Program to publish on the Internet or media still photographs or moving images, including, if applicable any sound recordings accompanying images ("Images") taken of my child during participation in Delta State University or Rising Scholar Program activities, without payment or any consideration and without notifying me in advance.

I also give permission to Delta State University to highlight my child's achievements and activities in efforts to promote the Rising Scholars Program through newspapers, radio, TV, the web, DVDs, displays, brochures, and other types of media without payment or consideration and without notifying me. I understand and agree that these images will become the property of Delta State University and the Rising Scholars Program, which shall have complete ownership of the Images. I hereby irrevocably authorized Delta State University and the Rising Scholars Program to publish or distribute these Images for the purpose of publicizing Delta State University and the Rising Scholars Program or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my child's likeness appears. Additionally, I waive any rights to royalties or other compensation arising out of or related to the use of the Images.

I hereby forever hold harmless and release and discharge Delta State University and the Rising Scholars Program, its officers, employees, representatives, and agents; and a sign from any and all claims, costs, suits, actions, judgments, and expenses which my child, his/her heirs, representatives, executors, administrators, or any other persons acting on his/her behalf have or may have by reason of the use of the Images. This release specifically includes, without limitation, a complete release and discharge of my liability by virtue of my editing, distortion, alteration, or optical illusion, whether intentional or otherwise, that may occur or be produced in the taking of or editing of said Images, unless it can be shown that such maliciously caused, produced and published solely for the purpose of subjecting my child to conspicuous ridicule, scandal, reproach, scorn, and indignity.

I am authorized legally to give consent, as my child's parent, and do hereby give my consent without reservation to the foregoing on behalf of my child.

## **PRIVACY RIGHTS**

All applicants have certain privacy rights defined by the Family Educational Rights and Privacy Act (FERPA). The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student educational records. The law applies to all school that receive funds under an applicable program of the U.S. Department of Education. You can get more information at <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

## **NOTICE REGARDING INTERACTION WITH ADULTS**

Your child may interact with adults as a participant at Delta State University and the Rising Scholars Program. The focus of this notice is on both personal and shared responsibility. Delta State University and the Rising Scholars Program both take every reasonable step to provide a safe campus environment and reduce the risk of unintentional exposure of Rising Scholar participants to undesirable and criminal activity. It is recognized that despite the best efforts of Delta State University and the Rising Scholars Program it is possible that your child may be susceptible to this inherent risk while interacting with adults. Your child should contact campus security or local law enforcement (911) if their safety is in jeopardy.

**PARENTAL CONSENT**

I have read all of the information noted above and hereby give my permission for my child to participate in the Rising Scholars Program. I hereby attest, under penalty of perjury, that I have the legal authority to authorize such participation.

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

\_\_\_\_\_  
Date

Delta State University is committed to a policy of equal employment and educational opportunity. Delta State University does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or veteran status. This policy extends to all programs and activities supported by the University.