



Heart of Appalachia Talent Search Program  
One John Marshall Drive  
Huntington, WV 25755-2195-104

## Are you interested in joining the Heart of Appalachia Talent Search Program?

The HATS program is a federally funded program that provides academic support to students between the ages of 12 and 18 who demonstrate the ability to succeed in postsecondary education. The HATS Program serves 600 students in middle and high school in Wayne and Mason Counties. We meet at the school to assist and encourage students by using creative activities to teach students the skills necessary to not only attend post-secondary education, but also to excel in their personal lives.

### By enrolling in the Heart of Appalachia Talent Search Program your student will have access to:

- Academic Advising
- Career Guidance
- College Campus Visits
- Cultural Enrichment
- Skills for Success
- Fee Waivers for ACT, SAT and Admissions
- ACT/SAT Prep
- College Camps

### Use the following check list to make sure that your application is processed as quickly as possible:

#### Parents/Guardians

- Student Residency
- All Parent/Guardian Information
- Financial Statement with Signature
- List of people in household
- Student Record Release & Permission to Participate with Signature
- Student Photo/Likeness Release with Signature

#### Student

- Student Information
- Student Educational Information
- Student Contract
- Student Recommendation

Please complete the entire application for faster admission into the program. Incomplete applications will be held until all information is received. Please be advised this may prolong your application status or could result in being placed on a waitlist. If you have any questions about our program or if you need assistance with this application, please feel free to contact us at any time.

*Angela L. Holley*

Angela L. Holley, Director  
Heart of Appalachia Talent Search Program

[Holley1@Marshall.edu](mailto:Holley1@Marshall.edu)

304-696-2201

<http://www.facebook.com/HATSPprogram>

<http://www.marshall.edu/wpmu/trio/talent-search/hats-program/>



# Heart of Appalachia Talent Search Program



## FAMILY INFORMATION

(This section to be completed by the student's parent or guardian)

Please answer all questions completely. If a question does not apply to you complete the question by marking "N/A".  
**All information you supply will be held in strict confidence according to privacy laws.**

Parent/Guardian Name(s) : \_\_\_\_\_

Home Phone: \_\_\_\_\_ (Cell): \_\_\_\_\_

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

Do you have a four year college degree:  Yes  No If so, what was your major: \_\_\_\_\_

Employment Status:  Employed  Unemployed  Disabled-Permanent  Disabled-Temporary  Self-Employed

Place of employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Phone: \_\_\_\_\_ (Cell): \_\_\_\_\_

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

Do you have a four year college degree:  Yes  No If so, what was your major: \_\_\_\_\_

Employment Status:  Employed  Unemployed  Disabled-Permanent  Disabled-Temporary  Self-Employed

Place of employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Would you like to receive texts from the HATS Program about upcoming events?  Yes  No Cell: (\_\_\_\_) \_\_\_\_\_

Student lives with:

- Mother
- Father
- Both Parents
- Parent/ Stepparent
- Grandparent(s)
- Foster Parent(s)
- Self
- Homeless
- Other: \_\_\_\_\_

### FINANCIAL STATEMENT

The financial information requested below is needed to determine the eligibility of this application for the Heart of Appalachia Talent Search Program.  
**Please submit a copy of your most recent tax return for verification of income.**

Did you file an income tax return last year?  Yes  No Our **Taxable Income** for last year was: \$ \_\_\_\_\_

Your **Taxable Income** can be found on **Line 43** if you filed a **1040** or on **Line 27** if you filed a **1040A**.

Total number of people in the household (including student): \_\_\_\_\_

Source(s) of family income:  Employment  Unemployment  Social Security  Public Assistance  Self-Employed

\_\_\_\_\_  
Parent/Guardian Signature (Required)

\_\_\_\_\_  
Date

DOES ANYONE ELSE RESIDE IN YOUR HOUSEHOLD BETWEEN THE AGES OF 12-18? PLEASE LIST THEM BELOW:

Name	Age	Relationship to Student
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### STUDENT RECORD RELEASE & PARTICIPATION AGREEMENT

I hereby authorize any school, college, or university to release any academic and financial aid information from my files requested by the Heart of Appalachia Talent Search Program (HATS). I understand that these records and grades are to be held in the strictest confidence. These records will be used to determine areas of academic need. I will give full cooperation to the HATS staff and encourage my child to abide by the rules of participation and to remain an active participant in the program in order to gain full benefit of all services.

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

\_\_\_\_\_  
Date

### STUDENT PHOTO/LIKENESS RELEASE

I hereby authorize the Heart of Appalachia Talent Search Program to photograph or film my child and consent to the use of his or her likeness in any publication, educational materials, advertising, news media, video or World Wide Web materials; and I acknowledge the programs right to crop or treat the photograph at it's discretion.

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

\_\_\_\_\_  
Date



**PROFESSIONAL RECOMMENDATION**

Student Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

**TO THE STUDENT:** After filling in your name, school, and grade, give this form to a teacher, guidance counselor, or other school administrator who knows you well and can assess your academic achievement and potential for success in completing high school and a post-secondary educational program.

**TO THE TEACHER/COUNSELOR/COMMUNITY MEMBER:** This student has filed/will file an application with the Heart of Appalachia Talent Search Program at Marshall University. This college preparatory program is designed for students with academic potential who need additional support in order to complete high school and enroll in a post-secondary educational program. Your valuable comments will assist the selection committee in making an informed decision. You can return this form to the student or if you would like this information to remain confidential please mail the completed form directly to:

Marshall University  
 HATS Program  
 One John Marshall Drive  
 Huntington, WV 25755-2195-104  
 304-696-2941

**Need for Services**

*Candidates for the HATS Program must demonstrate academic need. Several factors that pose a significant threat to academic success are listed below. Please check all factors applicable to this student.*

- Academic:** Although the student clearly demonstrates the ability to succeed in post-secondary education, he/she demonstrates a need for support in a limited subject area.
- Financial:** The family's financial situation is extreme and long term and has limited the student's ability to set realistic academic, personal, or career goals.
- Cultural:** Lack of cultural exposure has had a limiting effect on the student's ability to assimilate successfully to other environments, including post-secondary settings.
- Motivation:** The student's background has severely limited his/her perception of the benefits and rewards of educational pursuits.
- Personal Issues:** The student exhibits self-esteem well outside the normal range or has experienced personal issues that have severely limited the student's goal-setting range.

**Additional Information**

<b>School Attendance:</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>
<b>Class Participation:</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>
<b>Completion of Assignments:</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>

How can the HATS Program benefit this student? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Additional Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signed: \_\_\_\_\_ Position in School/Community: \_\_\_\_\_ Date: \_\_\_\_\_



**STUDENT INFORMATION**  
*(This section to be completed by the student)*

Talent Search is a Federal TRIO Program funded through the US Department of Education. Your child's acceptance into the program is dependent upon meeting eligibility criteria and space availability. Please answer all questions completely. If a question does not apply to you, complete the question by marking "N/A."  
**All information you supply will be held in strict confidence according to privacy laws.**

Name: _____			Ethnic Background: <i>(Optional)</i>
<i>Last</i>	<i>First</i>	<i>MI</i>	<input type="checkbox"/> African American
Address: _____			<input type="checkbox"/> American Indian/Alaskan Native
<i>City</i>	<i>State</i>	<i>Zip</i>	<i>County</i>
Phone (Home): _____ (Cell): _____			<input type="checkbox"/> Asian/Pacific Islander
Email Address: _____			<input type="checkbox"/> Hispanic
Birth Date: _____ Social Security Number : _____			<input type="checkbox"/> White
Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Other: _____
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male			

**EDUCATIONAL INFORMATION**

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Do you receive FREE lunch at school?  Yes  No

What grades do you usually earn?  A's  B's  C's  Below C's Are you satisfied with your grades?  Yes  No

Have you repeated a grade?  Yes  No If yes, which grade? \_\_\_\_\_

After high school, I plan to continue my education at:  Community College  College/University  Military  
 Technical or Vocational School  I don't know

Have you decided on a career?  Yes  No If yes, what is your career choice? \_\_\_\_\_

Do you know the facts about this career or major?  Yes  No If no, would you like more information?  Yes  No

Please check the areas you would like help with:  Career Exploration  Study Skills  Decision Making  College Tours  
 Financial Aid  College Application(s)  Cultural Enrichment  SAT/ACT

How did you hear about the HATS Program? \_\_\_\_\_

**STUDENT CONTRACT**

As a participant of the Heart of Appalachia Talent Search Program, I understand that:

1. I must be present and on time for all workshops, field trips, and individual appointments scheduled by my Talent Search Counselor.
2. In the event that I fail to regularly attend scheduled HATS school meetings (**more than 2 unexcused absences**) I will be ineligible for scheduled HATS camps and/or trips.
3. If I stop attending scheduled HATS school meetings, I may be dropped from the HATS Program.
4. I am expected to have a positive attitude and behave in a respectful manner that is neither disruptive nor rude during all meetings, workshops or field trips.
5. I am expected to participate in meetings and selected workshops and/or field trips.
6. I should inform my parent(s) and/or guardian(s) of all Heart of Appalachia Talent Search Program activities.

I hereby agree to participate in the Heart of Appalachia Talent Search Program at Marshall University and accept the duties and responsibilities outlined above.

\_\_\_\_\_

*Students Signature (Required)*

\_\_\_\_\_

*Date*