

A foster youth college enrichment program by:





# We are delighted to invite you to recommend a talented youth in foster care to participate in the First Star Arizona State University Academy.

The First Star – Arizona State University Academy is a free, comprehensive four-year college access program for youth in foster care. The Academy offers a 4-week residential summer academy where youth receive academic support, enrichment, and encouragement needed to assist them in becoming competitive college applicants. The program engages a cohort of 30 students in a variety of fun and active learning opportunities that include academic courses for college credit, independent studies, social and cultural activities, field trips, service learning and recreational activities. In addition to the summer immersion program, students and their families will receive individual support throughout the academic year through monthly Saturday Academies, education advocacy, and caregiver workshops.

# To recommend a student, please follow these steps:

- 1. Ensure your student meets the following eligibility requirements:
  - a. Currently in foster care or group home;
  - **b.** Able and willing to participate in the 4-week residential component at the university, and monthly Saturday sessions;
  - **c.** At least a 2.0 GPA and good attendance in current and previous school year, unless there is a reasonable explanation for participation; and
  - **d.** Demonstrates maturity and potential to thrive in a college-prep setting.
- 2. Ask your student to complete and return to you the background form and student responses of the application.
- 3. Complete the Adult Recommendation portion of the application.
- 4. Obtain student's most recent transcript, attendance record, and discipline log from current school.
- Mail, fax, or email the entire application packet (student application, adult recommendation, school records) to: Todd Ziehm, Program Director Arizona State University
  522 N. Central Avenue, Suite 243 Phoenix, AZ 85004 Phone: 602-496-1204 Fax: 602-496-1299 tziehm@asu.edu

**Selection process:** Once all applications are received, students selected for the program will be contacted for an interview before final selections are made.







# **Background Form**

CONTACT INFORMATION					
Student Name:		Current Gra	de Level:		
Caregiver Name:	Phone #:				
	E-mail:				
Mailing Address: Street Address:			Apartment #:		
City:	State:		Zip Code:		
BACKGROUND INFORMATION					
Gender:	Date of Birt	h: /	/		
Male Female Transgender					
Ethnicity:					
African-American/BlackAmerican IndianAsian/Pacific IslanderLatino/aWhite/CaucasianOther					
Name of Social Worker:	P	hone #:			
	E	mail:			
Name of Attorney:		Phone #:			
	E	mail:			
Placement:					
Relative Foster HomeNon-relative Foster HomeLegal GuardianAdoptive Parents		Home	Group Home		
EDUCATION INFORMATION					
Middle School Name/District: High School Name/District:					

Middle School Name/District: /	High School Name/District:	
Cumulative Middle School GPA:	Most Recent GPA:	
Is Student Receiving Special Education Services?	Most Recent Attendance Rate:	
Yes No Don't Know	# of Suspensions/Expulsions in Last 2 School Years:	
(If yes, submit most recent IEP)		







## **STUDENT'S RESPONSES**

EXTRA-CURRICULAR ACTIVITIES					
5	Number of Years of Participation	Required Summer Participation?			

#### ESSAY RESPONSES (1-2 Paragraphs)

Imagine you are turning 100 years of age and your friends and family want to throw you a birthday celebration! You have accomplished everything you wanted in life and everything you tried was AWESOME! As a tribute to you on this special day, several of your admirers want to say a few words about your accomplishments. What is it that they are going to say in celebration of you? (Feel free to have fun with your answer!)





Share what will be the biggest challenge (if any) that you will face in trying to get into college? Provide one suggestion on how you might overcome that challenge.

#### Signature

The information I have presented in my application is accurate, honest, and has been solely written by me.

Student's Signature

Date







### **Adult Recommendation Form**

This section should be completed in confidence by any adult involved in the student's life (e.g., teacher, counselor, social worker, mentor, pastor, or attorney).

Student's Name	Date of Birth:

#### To the Recommender:

Thank you for taking the time to provide your confidential insight and thoughts regarding this student who is applying for the First Star – Arizona State University Academy. The Academy is an intense, highly supportive and personalized college access program designed to provide youth in foster care with the academic support, encouragement and enrichment needed to assist them in becoming competitive college applicants. Your insight will help us ensure the program is the right fit for your student.

#### Once you have completed the recommendation, please email or fax your recommendation directly to:

Todd Ziehm, Program Director Arizona State University 522 N. Central Avenue, Suite 243 Phoenix, AZ 85004 Phone: 602-496-1204 Fax: 602-496-1299 tziehm@asu.edu

Name:		Phone #: E-mail:			
School/Organization:		Title:			
Relationship to student:		How long have you known the student?			
I recommend this student for the First Star Academy:					
	Do no	-	Recommend with	Enthusiastically	
	recomme	end	reservations	recommend	
Academic potential					
Character and maturity					
Ability to work well with others					
Overall recommendation					







#### Please answer the following questions (attach extra pages if necessary):

Why do you believe this student is a good candidate for the First Star Academy? What behavior has this student demonstrated to you that show he/she will benefit from this opportunity?



