



Talent Search

TALENT SEARCH PROGRAM Request for Service

January 2026

School: _____

Section 1: To be completed by the STUDENT

| | | | | | |
|--|--|--|--|--|--------|
| Last Name: | | First Name: | | MI: | Grade: |
| DOB (MM/DD/YYYY): | | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | U.S. Citizen/Perm Res.: <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Address (street, city, zip): | | | | | |
| Student Phone: | | | Student Email: | | |
| Ethnicity/Race (complete a, b, and c): (72 Fed. Reg. 59266 (Oct. 19, 2007)) | | | | | |
| a. Are you Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No | | b. Check all other that apply: <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander | | c. Primary language spoken at home: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> French <input type="checkbox"/> Other: _____ | |
| Who do you live with? <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother Only <input type="checkbox"/> Father Only <input type="checkbox"/> Non-Parent Family Member <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Foster Family | | | | | |
| Are you currently in a dual enrollment program? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Do you currently participate in any of the following? <input type="checkbox"/> Upward Bound <input type="checkbox"/> Upward Bound Math Science <input type="checkbox"/> Gear Up <input type="checkbox"/> None | | | | | |
| Student Acknowledgement: | | | | | |
| As a participant of the Talent Search Program I understand that I must maintain a 2.0 GPA, work with my counselor to apply to postsecondary institutions, schedule college prep classes, and apply for financial aid. If I fail to meet these requirements, I may be dropped from the program. | | | | | |
| Student Signature: | | | | Date: | |

Section 2: To be completed by the PARENT(S)

| | | | |
|---|--|--|-------|
| Biological/Adoptive Mother (no step parents) Information: | | Biological/Adoptive Father (no step parents) Information: | |
| Name: | | Name: | |
| Phone: | | Phone: | |
| Email: | | Email: | |
| Lives with student? <input type="checkbox"/> Yes <input type="checkbox"/> No, but provides financial support <input type="checkbox"/> No, does NOT provide financial support <input type="checkbox"/> Deceased or Unknown Status | | Lives with student? <input type="checkbox"/> Yes <input type="checkbox"/> No, but provides financial support <input type="checkbox"/> No, does NOT provide financial support <input type="checkbox"/> Deceased or Unknown Status | |
| Have you received a 4-year degree beyond High School? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Have you received a 4-year degree beyond High School? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Foster Parent/Guardian/Other Relative (complete <i>only</i> if student does not reside with biological/adoptive parent) | | | |
| Name: | | Relationship to student: | |
| Income | What is the total number of persons in your household? _____ | | |
| (complete for the last calendar year): | | Please check the box where your household's taxable (not total) income from last calendar year falls between. | |
| <input type="checkbox"/> My household had no taxable income during the last calendar year. -OR- All taxable income was from non-taxable sources (i.e., TANF, Disability, SSI, Unemployment, SNAP, or Veteran benefits). Note: Taxable income can be found on line 15 on the federal tax return. | | <input type="checkbox"/> 0 - \$23,940 <input type="checkbox"/> \$40,981 - \$49,500 <input type="checkbox"/> \$66,541 - 75,060 <input type="checkbox"/> \$23,941 - \$32,460 <input type="checkbox"/> \$49,501 - \$58,020 <input type="checkbox"/> \$75,061 - \$83,580 <input type="checkbox"/> \$32,461 - \$40,980 <input type="checkbox"/> \$58,021 - \$66,540 <input type="checkbox"/> List if above \$83,580 | |
| Parent Acknowledgement/Consent: | | | |
| As parent/legal guardian, I certify that the above information is accurate to the best of my knowledge. The Penn State Talent Search Program personnel may have access to any school or agency records to determine eligibility for the program, eligibility for financial aid, and to monitor your student's progress in primary, secondary, and postsecondary education. Your student's name and/or image may appear in printed or online materials produced by the Talent Search programs. Please contact us at 814-863-7359 if you wish to have your child excluded from such publications. | | | |
| Parent Signature: | | | Date: |