

Upward Bound Program Kilgore College
2020-2021 Updated Student Information



Date: _____ High School: _____ Grade Level: _____

Student Name:

First Middle Initial Last

Mailing Address: _____
Street Address Apt. #, if applicable

City: _____ State: _____ Zip code: _____

Home Phone: _____ Student Cell: _____

Student E-mail: _____ T-Shirt Size: _____

Skyward Log-In: _____ Skyward Password: _____

PARENT/GUARDIAN CONTACT INFORMATION: Please list two contact names if possible.

Name: _____ Relationship to Student: _____
First Last

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Employed by: _____

Mailing address same as student? _____ YES _____ if NO → please update below: _____

Name: _____ Relationship to Student: _____
First Last

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Employed by: _____

Mailing address same as student? _____ YES _____ if NO → please update below: _____

For Parents: Which days/times are typically best for you to attend any parent meetings throughout the academic year?

Day(s) of the week: _____ Times (circle): Before noon Before 5pm Between 5pm-7pm After 7pm

*If times available differ by day, please explain: _____