



College Applying To

Precollege Program Name

**INSTRUCTIONS FOR COLLEGE USE ONLY**

*Enter name and address of college or institution in space above.*

**You may receive a maximum of three DPI Precollege Scholarships per year.**

**STUDENT / PARENT INSTRUCTIONS:** Student must be eligible for Free or Reduced Price School Meals, and must have finished fifth grade, but not have graduated from high school to receive a DPI Precollege Scholarship.

Fill out **Section I—Student Information completely**. Parent/guardian must sign in the space provided. Give this form to your principal or food services authorized representative at **your** school for completion of **Section II**. Once the signature is acquired through your middle or high school, mail the completed scholarship application **to the college or university** that is offering the precollege program.

**I. STUDENT INFORMATION**

Name <i>Last</i>		Name <i>First</i>		Name <i>Middle Initial</i>	
Street Address			City	State	Zip
Phone Number <i>Area Code/No.</i>	Email		Date of Birth <i>Mo./Day/Yr.</i>	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	

Check **only one** (For Statistical Purposes Only)

Hispanic or Latino     Not Hispanic or Latino

American Indian or Alaska Native     Asian     Black or African-American     Native Hawaiian/Other Pacific Islander     White

Current Grade Level <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Anticipated Year of High School Graduation
---	--

School Presently Attending	School District Name	No. of Prior Precollege Scholarships Received This Year
----------------------------	----------------------	---

**I HEREBY AUTHORIZE** release of my child's verification of Free or Reduced Price School Meals eligibility to the Precollege Campus and DPI.

Signature of Parent/Guardian  ➤	Date Signed <i>Mo./Day/Yr.</i>
---------------------------------------	--------------------------------

**II. VERIFICATION AND RECOMMENDATION**

**Instructions to the Principal, Food Services Authorized Representative, or DPI/WEOP Staff Member**

Verify that this student is eligible for Free or Reduced Price School Meals and forward this application form to the college or university where the student has applied for admission to a DPI Precollege Program.

Is this student eligible for Free or Reduced Price School Meals?     Yes     No

**I HAVE VERIFIED that this student is eligible for Free or Reduced Price School Meals and I recommend this student for a DPI Precollege Scholarship.**

Name of Authorized Representative	Title	Telephone <i>Area/No.</i>
Verification Signature  ➤		Date Signed <i>Mo./Day/Yr.</i>

# UWM COLLEGE FOR KIDS & TEENS

## DPI Scholarship Information Sheet

Applications will be accepted beginning January 2 each year. Only those individuals chosen as recipients will be notified **by email** within three weeks of turning in a **completed** form.

\*\*\*\*\*

*The UWM College for Kids & Teens program has a limited number of **State Department of Public Instruction (DPI)** scholarships available to students entering **6th-12th** grades in the next school year. Applicants must have a grade point average of **2.5** or above in their core classes and are **eligible to receive free or reduced lunch**.*

**TO APPLY:**

1. Complete the DPI application. **Please note, SECTION II must be completed by school personnel.**
2. Attach a transcript of the student's most recent grades.
3. Complete the parental consent form which can be found at [uwm.edu/sce/kids](http://uwm.edu/sce/kids), under "Related Areas."
4. Return the **original completed forms** with a copy of the student's grades to:

College for Kids & Teens  
UWM School of Continuing Education  
161 W. Wisconsin Avenue, Suite 6000  
Milwaukee, WI 53203

---

**Please read and initial where necessary.**

I understand that DPI funds are limited and that scholarships are awarded to state-approved students on a first-come, first-served basis. \_\_\_\_\_

I understand that if I am an individual chosen as a recipient I will be notified by email within three weeks of turning in a completed form. \_\_\_\_\_

I understand that incorrect and/or missing signatures on the DPI Scholarship Application form can postpone my student's acceptance into the program and result in him/her not being accepted. \_\_\_\_\_

I understand that if I am awarded a scholarship, I will have **seven (7)** calendar days to respond to any communication from the College for Kids/Teens program. If I do not respond during those **seven (7)** days, my scholarship will be awarded to another student. \_\_\_\_\_

I understand that attendance is expected for each class in which my student is enrolled. I understand that if my student does not attend classes, he/she will be ineligible for a scholarship in the future. \_\_\_\_\_

Parent/Guardian Name (**please print**): \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

Primary email address: \_\_\_\_\_

Primary phone number: \_\_\_\_\_