A complete application will include all of the following materials scanned and emailed, mailed in one envelope, dropped off, OR faxed together:

1. **Personal Information Form** with required signatures.
   *Online submission is preferred.*

2. **Two essays** of max 500 words EACH

3. **Official transcript** of the current academic year

4. **Two Recommendation Forms** (One must be completed by a teacher in a core subject and the other may be completed by a teacher, counselor, or community leader.)

**SELECTION PROCESS**

Participants will be selected by a committee of Pomona College faculty, staff, and students. The selection committee will consider every part of the application and make recommendations based on academic potential. In some cases, the selection committee will request to interview an applicant. The following are the dates for the selection process:

**APPLICATION DEADLINE**
Postmarked, faxed, emailed, or dropped off by
Friday, February 22, 2019

**APPLICATION REVIEW**
March 1 – April 27, 2019

**NOTIFICATION OF DECISION**
Friday, May 3, 2019

**SUMMER PROGRAM DATES**
Sunday, June 16 – Friday, July 12, 2019

**Academic Year Calendar will be shared upon admission**

**NOTE:**
ALL NEW APPLICANTS MUST CURRENTLY BE ENROLLED IN 9th Grade and attend high school in LA County, Riverside County, or San Bernardino County.
Also, neither college nor high school credit is awarded for participation in PAYS. Incomplete and late applications will not be evaluated.

Questions and or applications can be submitted at: PAYS@pomona.edu

If you prefer to mail, fax, or drop-off your application, use the following contact information:

**Draper Center for Community Partnerships**
Pomona College
Attn: PAYS
735 N. Dartmouth Ave. Claremont, CA 91711
Phone: (909) 607-1810 Fax: (909) 607-8006
The two essay responses help us become acquainted with you in ways different from recommendations, courses, and grades. They are also an opportunity for you to demonstrate your ability to organize thoughts and express yourself. Help us get to know you better as both a person and as a student through your essays.

Please complete the questions below on a separate sheet of paper. No more than 500 words per essay. Double space if typed. Include your name on all sheets.

Please respond to the following two prompts: (Maximum 500 words for EACH essay)

1) Think about your educational experience so far; what are your thoughts about it? What would you change? Why? Is there anything you would keep the same? Why? You may choose to consider your educational experience in comparison to others in your school, your school district, and/or the country.

AND

2) Discuss a situation where you have faced a significant challenge. How did this experience affect you and what did you learn from this experience?
First Name: ___________________________ Middle Initial: _______ Last Name: ___________________________

Gender: ☐ Female ☐ Male ☐ Other: _______ Birthdate: _______ / _______ / _______

Address: ____________________________________________

City: __________________________________________ Zip Code: __________

Home Phone: (_____) _______ - _______ Student Cell Phone: (_____) _______ - _______

Student Email Address: ________________________________

RACE / ETHNICITY
Check all that apply: List the countries or regions that best describe your background: ____________________________

☐ Asian ☐ Black, African American ☐ Hispanic, Latino
☐ Native American, Native Alaskan ☐ Pacific Islander, Native Hawaiian
☐ White ☐ Other ____________________________

Language(s) Spoken at Home: __________________________

HIGH SCHOOL INFORMATION
School Name: ___________________________ Grade: ___________ Expected Year of HS Graduation: _______

School Address: ____________________________

Guidance Counselor: ____________________________

Phone: (_____) _______ - _______ Email: ____________________________

HOUSEHOLD INFORMATION
Applicant resides with Parent/Guardian 1 ☐ ☐ Applicant resides with Parent/Guardian 2 ☐ ☐

Yes No Yes No

Name of Parent/Legal Guardian 1 __________________________ Name of Parent/Legal Guardian 2 __________________________

Parent/Guardian 1 Address (if different from student’s address) __________________________

City/State/Zip __________________________

Cell Phone: (_____) _______ - _______ Email: __________________________

Parent/Guardian 2 Address (if different from student’s address) __________________________

City/State/Zip __________________________

Cell Phone: (_____) _______ - _______ Email: __________________________
Check the highest year of schooling completed by your parent(s) or guardian(s).

Parent/Guardian 1:

_ Less than high school
_ Some high school
_ High school diploma or equivalent
_ Some college
_ Vocational/Technical School
_ 2-year college diploma (AA, AS)
_ 4 year college diploma (BA, BS)
_ Graduate school (MA, MS, PhD, MD, etc.)

In what country did this parent/guardian receive their highest level of education: ________________

Job title(s): ____________________________________

Place(s) of employment: ____________________________

Total Annual Household Income: $ ________________ (per year)

How many people are in your household? __________

Is the applicant enrolled in the free or reduced lunch program?

☐ Yes  ☐ No

Parent/Guardian 2:

_ Less than high school
_ Some high school
_ High school diploma or equivalent
_ Some college
_ Vocational/Technical School
_ 2-year college diploma (AA, AS)
_ 4 year college diploma (BA, BS)
_ Graduate school (MA, MS, PhD, MD, etc.)

In what country did this parent/guardian receive their highest level of education: ________________

Job title(s): ____________________________________

Place(s) of employment: ____________________________

If Parent/Guardian 2 is part of a different household, please answer the following two questions:

Total Annual Household Income for 2nd household: $ ________________ (per year)

How many people are in 2nd household? __________

Please list the members of your household(s) by name, age, and relationship. If more room is needed, attach a separate page. If multiple households, please indicate to which household each member belongs. Do not list yourself.

**Example Melissa Perez-55-Mother, David Perez-12-Brother
Household Two: John Brown-58-Father, Josie -78-Grandmother**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Age</th>
<th>Relationship</th>
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Household Information (cont.)

Do you have siblings who are attending college?  □  Yes  □  No
If yes, list their name(s) and college(s):  

Do you have siblings who have graduated from college?  □  Yes  □  No
If yes, list their name(s) and college(s):  

Are you part of any of the following college preparatory programs? If so, check all that apply.

□ AVID  □ Bright Prospect  □ Cal-Soap  □ College Bound  □ College Track
□ Destination College  □ GEAR UP  □ MESA  □ Middle Years Program
□ Next Level  □ Pomona Partners  □ Project Grad  □ Puente Project
□ Talent Search  □ Uncommon Good  □ Upward Bound  □ Young Black Scholars
□ Young Scholars Network
□ Other  

All Applicants:

How did you hear about PAYS? If applicable, please list any people you know who are or have been connected to SSEP/PAYS, Pomona College, or the other Claremont Colleges. When listing people, include their relationship to SSEP/PAYS, Pomona College, or the other Claremont Colleges.  

Why do you want to participate in PAYS?

What other summer opportunities/activities are you considering that might affect your ability to participate in PAYS?
I understand that this is not the complete PAYS application. I still must submit two essays, two recommendation forms, and my official transcript.  ☐ Yes

If selected, will you be fully committed to PAYS?  ☐ Yes  ☐ No

SIGNATURES

I certify that the information provided is true to the best of my knowledge. I am also aware that by signing, I agree to be fully committed to PAYS.

Student’s Name (Print)  ____________________________  Student’s Signature  ____________________________  Date

Parent/Guardian’s Name (Print)  ____________________________  Date

Parent/Guardian’s Signature  ____________________________  Date
The student listed below is applying to the Pomona College Academy for Youth Success (PAYS). Please comment on the applicant’s overall ability in the following areas, taking into specific consideration academic qualifications, commitment, and maturity. This reference will remain confidential and will be used solely to assist in decisions regarding the admissibility of the student to PAYS. Please note that you should have received an email on behalf of PAYS regarding an online recommendation process, but if you choose to submit a paper version of the letter you may do so by using this form.

The Family Educational Rights and Privacy Act of 1974 gives students who are admitted to and enroll in PAYS the right to review their educational records. If you would like to waive this right so that your reference can be submitted on a confidential basis, please sign below.

“I waive any right of access I may have to this reference and wish that it may be submitted confidentially on my behalf.”

Applicant’s signature: ___________________________________ Date: ____________________

Please return this reference to the student in a sealed envelope bearing your signature across the sealed flap OR you can scan and email it to PAYS@pomona.edu from your school/work email.

Student’s Name: _______________________________________

Please rate this student as objectively as possible in comparison to ALL the students you have taught, mentored, or supervised.

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<thead>
<tr>
<th>Quality</th>
<th>Top 5%</th>
<th>Top 10%</th>
<th>Top 30%</th>
<th>Average</th>
<th>Below Average</th>
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<tr>
<td>Intellectual Curiosity</td>
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Please use the space below to expand on two or more of the aforementioned qualities.
Intellectual Qualities
Please use the space below to comment on the applicant's analytical ability and originality.

Rating/Recommendation
Of all the students you've taught, how would you rate the applicant?

For academic promise
☐ Top 5%    ☐ Top 10%    ☐ Top 30%    ☐ Average    ☐ Below average

For personal promise
☐ Top 5%    ☐ Top 10%    ☐ Top 30%    ☐ Average    ☐ Below average

Please use the space below to comment on the applicant's overall strengths and weaknesses.

Name of Reference (please print): __________________________________________
Signature: ____________________________ Date: ________________
Title/Department/Organization: ____________________ Years in field __________
Relationship to Student (include course, if teacher): __________________________
Telephone: ____________________________ Email: __________________________

*If you would like to receive more information about PAYS, please email us at PAYS@pomona.edu.
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Please use the space below to expand on two or more of the aforementioned qualities.

________________________________________________________________________________________________________________________________________
(Recommendation form cont.)

________________________________________________________________________

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________________________________________________________________________

Intellectual Qualities
Please use the space below to comment on the applicant's analytical ability and originality.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Rating/Recommendation
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For academic promise
☐ Top 5% ☐ Top 10% ☐ Top 30% ☐ Average ☐ Below average

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Telephone: ____________________________ Email: ____________________________

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