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 (Only submit ONLINE OR PAPER form)
   *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
Tuesday, February 28, 2017

**APPLICATION REVIEW**
March 1 – April 28, 2017

**NOTIFICATION OF DECISION**
Tuesday, May 2, 2017

**SUMMER PROGRAM DATES**
Sunday, June 18 – Friday, July 14, 2017

****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
Pomona College Academy for Youth Success
Essay Prompts 2017
Application Deadline: February 28, 2017
Program Dates: June 18–July 14, 2017

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?
Pomona College Academy for Youth Success
Personal Information Form 2017

Application Deadline: February 28, 2017
Program Dates: June 18 – July 14, 2017

First Name: ____________________ Middle Initial: _______ Last Name: ____________________

Gender: [ ] Girl [ ] Boy [ ] Transgender  
Birthdate: _______ / _______ / _______

Address: ___________________________________________  
City: ____________________________________________ Zip Code: ______

Home Phone: (_____) _______ - _______  Student Cell Phone: (_____) _______ - _______  
Student Email Address: ________________________________

RACE / ETHNICITY
Check all that apply: 
[ ] 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: ____________________________________________
If no counselor is present, state “No Counselor is present at my school.”

Phone: (_____) _______ - _______  Email: ________________________________

HOUSEHOLD INFORMATION
Applicant resides with Parent/Guardian 1 [ ] Yes [ ] No  
Applicant resides with Parent/Guardian 2 [ ] Yes [ ] No

Name of Parent/Legal Guardian 1 ________________________________

Name of Parent/Legal Guardian 2 ________________________________

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

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

City/State/Zip ____________________________________________

City/State/Zip ____________________________________________

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

Email: ________________________________  
Email: ________________________________
Household Information (cont.)

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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</thead>
<tbody>
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</tbody>
</table>


**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.

______________________________________________________________________________________________

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Why do you want to participate in PAYS?
______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

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What other summer opportunities/activities are you considering that might affect your ability to participate in PAYS?

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________
If you are in 10th or 11th grade, did you apply to PAYS last year?  ☐ Yes  ☐ No

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) for high school students offered by Pomona College. 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.

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.

<table>
<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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Please use the space below to expand on two or more of the aforementioned qualities.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
(Recommendation form cont.)

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.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
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