



Con Mi **MADRE**  
Mothers And Daughters Raising Expectations

# **2015-2016 Application**

**Con Mi MADRE:**

1925 San Jacinto Blvd., STOP 3500

Austin, TX 78712

**Telephone:** (512) 475-6309

**Fax:** (512) 232-2165

**Email:** [info@conmimadre.org](mailto:info@conmimadre.org)



# PROGRAM APPLICATION

Application Deadlines:

Fall—July 31<sup>st</sup>

Spring—December 15<sup>th</sup>

All information is kept in strict confidence. Please provide information for ALL sections of the application and print in ink. Completed applications must include a copy of the student's most recent report card. Elementary school applicants, please include a completed teacher recommendation form.

## STUDENT INFORMATION – PLEASE PRINT

Student's Last Name:		First:	Middle:	Student Birth Date: ____ / ____ / ____ (month) (day) (year)	
Ethnicity? <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino	Race: <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Black/African American		<input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Other	Home Phone: _____ Student Cell: _____ Student Email: _____	
Student Social Security Number (Optional, not mandatory) _____	Student Home Address: _____ City State ZIP Code				
<input type="checkbox"/> I do not want to disclose.					
School Attending:	Student School ID#	Grade Level: <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> 6 <sup>th</sup> <input type="checkbox"/> 7 <sup>th</sup> <input type="checkbox"/> 8 <sup>th</sup> <input type="checkbox"/> 9 <sup>th</sup> <input type="checkbox"/> 10 <sup>th</sup> <input type="checkbox"/> 11 <sup>th</sup> <input type="checkbox"/> 12 <sup>th</sup>			
Middle School You Plan to Attend (for elementary school applicants only):		Middle School Grade You Plan to Start (for elementary school applicants only): <input type="checkbox"/> 6 <sup>th</sup> <input type="checkbox"/> 7 <sup>th</sup>			
Language(s) spoken at home: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Both <input type="checkbox"/> Other _____					

## FAMILY INFORMATION – PLEASE PRINT

Mother's/Guardian's Name:	Mother's/Guardian's Occupation:	Highest Grade Level Mother/Guardian Completed: _____
Mother's/Guardian's Cell #:	Mother's/Guardian's Email:	Mother's/Guardian's Work #:
Father's/Guardian's Name:	Father's/Guardian's Occupation:	Highest Grade Level Father / Guardian Completed: _____
Father's/Guardian's Cell #:	Father's/Guardian's Email:	Father's/Guardian's Work #:
Participating Parent/Guardian: What is your primary language? <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other _____		
Does the students' mother live at home? <input type="checkbox"/> Yes <input type="checkbox"/> No      Does the students' father live at home? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Mother, did you participate as a student in Junior League Hispanic Mother-Daughter Program, Austin, TX? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Does anyone in your household receive free or reduced lunch? <input type="checkbox"/> Yes <input type="checkbox"/> No	Does anyone in your household NOT have a social security card? <input type="checkbox"/> Yes <input type="checkbox"/> No (This question is optional, not mandatory and helps us know how we can serve you.)	
Number of immediate family members: _____	Number of family members living at home: _____	How many family members in college? _____

\*\*\*An Incomplete Application or Participation Agreement Will Not Be Processed\*\*\*



## QUESTIONS FOR STUDENT APPLICANT

Please answer the questions below. These answers do not affect your acceptance into the program.

I know what I want to do after high school. *(Please circle your answer)*

Strongly Agree      Agree      Disagree      Strongly Disagree      I don't know

Do you consider attending college a top priority? *(Please circle your answer)*

Strongly Agree      Agree      Disagree      Strongly Disagree      I don't know

After I graduate from high school, I want to: *(Please ✓ your answer)*

- I want to get a job.
- I want to attend a training school or community college
- I want to attend an In-State University.
- I want to attend an Out-of-State University.
- Other: \_\_\_\_\_

In a brief paragraph describe your academic and personal goals and how you think **Con Mi MADRE** may help you achieve them:

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# QUESTIONS FOR MOTHER/GUARDIAN APPLICANT

Please answer the questions below. These answers do not affect your acceptance into the program.

**Do you consider attending college a top priority?** *(Please circle your answer)*

Strongly Agree

Agree

Disagree

Strongly Disagree

I don't know

**If my daughter wants to go to college, I know how to help her reach that goal.** *(Please circle your answer)*

Strongly Agree

Agree

Disagree

Strongly Disagree

I don't know

**After my daughter graduates from high school, I want her to:** *(Please ✓ your answer)*

- Get a job.
- Attend a training school or community college
- Attend an In-State University.
- Attend an Out-of-State University.
- Other: \_\_\_\_\_

In a brief paragraph describe academic and personal goals you have for your daughter and how you think Con Mi MADRE may help you achieve them:

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# PARTICIPATION AGREEMENT

Con Mi MADRE is designed to provide support and information to students and parents who participate in the program. These services are intended to prepare students to enter a college or university upon graduation from high school.

## Student and Parent:

I, \_\_\_\_\_ and \_\_\_\_\_ must meet the following conditions annually  
Student Parent(s) or Guardian  
in exchange for the Con Mi MADRE services:

### Preparedness Program: (Grades 6<sup>th</sup>-10<sup>th</sup>)

- Attend program orientation
- Complete 15 hours of volunteer service
- Attend 3 conferences per year; at least 2 Con Mi MADRE Saturday conferences
- Attend bi-monthly campus meetings at school
- Maintain a 2.5 (85) grade point average or better

### Participation Program: (Grades 11<sup>th</sup> & 12<sup>th</sup>)

- Complete 20 hours of volunteer service
- Attend 3 conferences per year; at least 2 Con Mi MADRE Saturday conferences
- Attend at least 1 college and career fair
- Attend 4 college academies; at least 3 Con Mi MADRE college academies
- Attend 2 college visits, at least 1 Con Mi MADRE college visit.
- Be enrolled in at least 1 AP/Pre-AP/Dual credit course per year
- Take the SAT and ACT and turn in scores to Con Mi MADRE Staff
- Complete FAFSA/TAFSA application
- Complete 2 post-secondary applications or 1 TX/Common app
- Attend monthly campus meetings at school.
- Maintain a 2.5 (85) grade point average or better

***If I do not meet these conditions, I forfeit my membership in the Con Mi MADRE program.***

## Parent Approval of Student Participation

\_\_\_\_\_ is my child and/or is currently under my legal guardianship.

Student's Name (please print)

She may participate in any and all Con Mi MADRE programs, trips, and activities for which she is eligible. In consideration of my child being permitted to make trips and take part in Con Mi MADRE activities and the instruction my child will receive by reason thereof, I hereby relieve and release Con Mi MADRE, its sponsoring and participating universities, colleges, school districts, organizations, and their respective officers, employees, and agents, together with all those persons assisting with any phase of trips and all program activities (excluding paid certified carriers) from any and all liability, responsibilities for making trips and activities and hereby releases all of said parties from all liability by reason of any accident, injury or other harm that may be suffered by said child while on any trip or while participating in any program activities. I agree to indemnify and hold all of said parties harmless from all claims hereafter made by or asserted on behalf of the above named student.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

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# PARENT PERMISSION AND SHARING OF INFORMATION FORM

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_ whose student school  
(Parent (s) or Guardian's Name) (Student Name)  
identification number is \_\_\_\_\_ gives Con Mi MADRE permission for ongoing access to my daughter's student records, including her daily grades and assignments, through the districts database. I give permission for Con Mi MADRE to access and collect this information for the duration of my daughter's participation in the Con Mi MADRE program and throughout her high school career. I will notify Con Mi MADRE if my daughter transfers to another school or there is any other change in her schooling or our home address. If I choose to withdraw this permission, I will call the Con Mi MADRE office at (512) 475-6309.

### For AISD Students SAR Data:

Our agency will also use your student's ID # in order to evaluate the effectiveness of our programs and/or interventions. We will submit student ID numbers for participants, as a group, into the AISD Student Aggregate Report system to generate group reports on our participants' attendance, discipline and academic achievement. We will not receive back individual information about your student.

### My daughter currently attends the following school:

\_\_\_\_\_ in \_\_\_\_\_  
(School name) (School District)

### I understand that permission is being given so that:

Con Mi MADRE can obtain and/or provide the information below from the school, the Texas Education Agency, and partnering agencies for evaluation purposes and in order to provide services that will help my child. These services may include but are not limited to supportive guidance and counseling, mentoring, educational support, tutoring, and referral to other agencies.

### Information Obtained:

- Grades
- Attendance records
- TAKS, STAAR, or other evaluation
- Other \_\_\_\_\_
- Assignments
- Free/Reduced lunch status
- Class schedule
- Health Related Information
- Disciplinary Records

Additionally, Con Mi MADRE will use my daughter's ID number in order to evaluate the effectiveness of their programs and/or interventions.

**My signature below authorizes Con Mi MADRE to obtain student records from my daughter's school, to use my daughter's student ID number to evaluate their program's effectiveness, and to share information with referring agencies, as needed.**

Parent/Guardian Name: (Please Print) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Con Mi MADRE Staff Signature

\_\_\_\_\_  
Date

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## SAFETY OF MINORS

All staff, volunteers, and interns associated with Con Mi MADRE are required by state law to report any abuse towards a minor. If your daughter discloses information that indicates that she has been, or is currently being, abused as defined by state law, a report will be made to the proper authorities including the Department of Family and Protective Services (formerly CPS) or Austin Police Department. If your daughter discloses that she is in danger of harming herself or others, Con Mi MADRE will take the necessary steps to ensure her safety, which may include contacting parents or community resources.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

## NON-FEE/PHOTO RELEASE

I, \_\_\_\_\_ grant Con Mi MADRE permission to reprint my photograph and my  
(Parent (s) or Guardian's Name)  
daughter's photograph to be used for Con Mi MADRE publications, websites, electronic and digital media, educational projects or purposes, publicity or advertising. I understand that names may be used for picture captioning purposes when necessary. All photographs will remain the property of Con Mi MADRE.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

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