Center for Pre-Collegiate and Academic Outreach Programs

Pre-Collegiate Development Program
Campus Box 147
P.O. Box 173364
Denver, Colorado 80217-3364
Location: Administration Building, Suite 360
TEL: (303) 556-2322
FAX: (303) 556-2054
EMAIL: pcdp@cudenver.edu

PROGRAM DESCRIPTION:
The Pre-Collegiate Development Program (PCDP) at the University of Colorado Denver, Downtown Campus is an academic enrichment and support program designed to motivate potential first-generation (neither of whose natural or adoptive parent(s) received a baccalaureate degree), and/or underrepresented students in higher education to graduate from high school successfully, complete a college preparatory curriculum, and pursue a college education.

The Program will offer students, in grades 9 through 11, the opportunity to engage in a wide range of Pre-College activities throughout the academic year. The academic year component will offer students’ monthly Saturday Academies consisting of college entrance examination preparation, study skills workshops, career orientation workshops, class selection, tutoring and a variety of cultural enrichment experiences.

In addition, a five-week summer session for juniors will be held on the UC Denver, Downtown Campus, June 14 through July 16, 2010. This session will consist of accelerated high school classes, a three-credit college course, cultural, social, and recreational activities. Sophomores will participate in a two-week introductory academic program on campus June 14 through June 25, 2010. This session will consist of college preparation seminar, ACT math prep, creative writing, ethnic literature, and computer skills. Note: Summer session consists of all-day activities, 8:00 a.m. to 4:00 p.m., five days per week, for five and two weeks respectively.

The Pre-Collegiate Program has been established to provide assistance to students throughout their high school years, so that they will be adequately prepared to enter the college of their choice when they graduate. Therefore, students selected to participate in the Program will be expected to remain active participants throughout their high school years.

SERVICES AND ACTIVITIES:

1. Monthly Saturday Academies:
   On one Saturday of each month (usually the second Saturday), students will participate in academies on the UC Denver, Downtown Campus. These academies will be held from 8:00 a.m. to 1:00 p.m., and all students in the PCDP will be required to attend. Round trip RTD bus fare and lunch will be provided to participants by the Program. The Academy schedule for the 2010 Spring Semester is as follows:

   December 12th    "NEW STUDENT ORIENTATION"
   January 16th    "INTERPERSONAL SKILLS DEVELOPMENT"
   February 6th    "COLLEGE ENTRANCE EXAMINATION"
   March 13th      "STUDY SKILLS"
   April 10th      "CAREER DAY"
   April 17th      "CAREER EXPLORATION"

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PROGRAM PARTICIPANTS:

A. Eligibility - The student selection criteria are as follows:

Students MUST:
1) Attend a Target High School;
2) Be a potential first-generation (neither of whose natural or adoptive parent(s) received a baccalaureate degree) college student; and
3) Have a minimum of a 2.5 Cumulative GPA (Grade Point Average.) Freshman students not yet acquired GPA, but meet the other criteria are encouraged to apply.

In addition, the student MUST also meet one or more of the following requirements:
1) Be a member of a one-parent family;
2) Be the eldest in the family;
3) Have a desire to continue her/his education beyond high school after graduation.

B. Participant Responsibilities – The Pre-Collegiate Program is committed to providing its students every opportunity to develop their academic skills, succeed in high school, and gain entrance into an institution of higher education. However, students will derive full benefit from their experiences and fulfill their educational potential only to the extent that they commit themselves to the goals of the Program and actively participate in its activities. Therefore, the Program will expect its participants to:

1) Commit themselves to active participation in the Program for the duration of their high school years;
2) Attend and involve themselves fully in all program-sponsored activities (11th and 10th graders, this includes the five-week and two-week summer program on the UC Denver Downtown Denver Campus);
3) Follow a college preparatory curriculum as prescribed by the program staff and high school counselor;
4) Cooperate with the Program's staff in all program-related matters;
5) Attend tutorial and other help sessions as recommended by program staff, high school counselors, and/or teachers.

C. Application Procedures – Students desiring to participate in the Pre-Collegiate Program are asked to apply through their high school counselor. The high school counselor must submit the following materials/credentials for each student applicant:

1) UC Pre-Collegiate Development Program Application Form;
2) UC Pre-Collegiate Development Program Counselor Recommendation Form;
3) Two recommendations from two of the student's teachers (at least one must be from a math, science, Social Studies or English teacher);
4) An unofficial copy of the student's high school transcript.

ADDITIONAL INFORMATION CAN BE OBTAINED BY CONTACTING:

Center for Pre-Collegiate and Academic Outreach Programs
University of Colorado Denver, Downtown Campus
Attention: Greg Lee, Associate Director
Campus Box 147, P.O. Box 173364
Denver, CO 80217-3364
Phone: (303) 556-2322

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APPLICATION FOR PROGRAM PARTICIPATION

STUDENT GENERAL INFORMATION

NAME: __________________________
LAST NAME: _______ FIRST NAME: _______ MIDDLE NAME: _______
MAILING ADDRESS: _______________________________________________
STREET OR P.O. BOX: ___________________ CITY: _______ STATE: _______ ZIP: _______
PHONE: ___________ EMAIL ADDRESS: __________________________
BIRTH DATE: _______ SOCIAL SECURITY NUMBER: _______________________
GENDER: ( ) MALE ( ) FEMALE
ETHNICITY: ( ) AFRICAN AMERICAN ( ) ASIAN ( ) LATINO ( ) NATIVE AMERICAN
( ) WHITE ( ) OTHER
CITIZENSHIP: ( ) U.S. CITIZEN ( ) PERMANENT RESIDENT ( ) OTHER ________________
# OF SIBLINGS (BROTHERS/SISTERS): _______ # OF SIBLINGS IN COLLEGE: _______
ARE YOU THE ELDEST CHILD IN YOUR FAMILY? ( ) YES ( ) NO
INFORMATION OF PARENT(S) OR GUARDIAN(S) STUDENT RESIDES WITH
FATHER OR MALE GUARDIAN: ___________________________________________
MOTHER OR FEMALE GUARDIAN: _______________________________________
WHOM DO YOU LIVE WITH? ___________________________________________
ARE THE MAILING ADDRESS AND PHONE NUMBER THE SAME AS THE STUDENT'S?
( ) YES ( ) NO
IF NOT, WHAT IS THE PARENT(S) OR GUARDIAN(S) ADDRESS AND PHONE NUMBER?
STREET OR P.O. BOX: __________________________ CITY: _______ STATE: _______ ZIP: _______ PHONE NUMBER: _______
TOTAL # IN THE FAMILY: _____ # IN HOUSEHOLD: _____ # OF CHILDREN IN COLLEGE: _____
ARE YOUR PARENTS DIVORCED OR SEPARATED? ( ) YES ( ) NO
HIGHEST GRADE COMPLETED BY FATHER _____ BY MOTHER _____

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HAS EITHER PARENT RECEIVED A BACHELOR'S DEGREE FROM A U.S. COLLEGE OR UNIVERSITY?  
FATHER ( ) YES ( ) NO  
MOTHER ( ) YES ( ) NO

OCCUPATION: FATHER  
MOTHER

STUDENT'S SCHOOL INFORMATION

NAME OF THE HIGH SCHOOL PRESENTLY ATTENDING: __________________________________________
YEAR IN SCHOOL:  ( ) FRESHMAN  ( ) SOPHOMORE  ( ) JUNIOR
YEAR EXPECTED TO GRADUATE: ______  CURRENT GRADE POINT AVERAGE: ______
YOUR HIGH SCHOOL COUNSELOR'S NAME: __________________________________________

<table>
<thead>
<tr>
<th>COURSES CURRENTLY ENROLLED IN</th>
<th>TEACHER</th>
<th>GRADE EARNING</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ___________________________</td>
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<td>2. ___________________________</td>
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<td>3. ___________________________</td>
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<td>6. ___________________________</td>
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<td>7. ___________________________</td>
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</table>

FIELDS OF INTEREST

WHAT SUBJECT DO YOU PERFORM WELL IN? __________________________________________
WHY? __________________________________________________________________________

WHAT SUBJECTS DO YOU HAVE DIFFICULTY IN? ______________________________________
WHY? __________________________________________________________________________

WHAT EXTRA CURRICULAR ACTIVITIES DO YOU PARTICIPATE IN? ______________________

ARE YOU APPLYING TO OR HAVE BEEN ACCEPTED TO ANOTHER PRE-COLLEGIATE TYPE PROGRAM? ( ) YES ( ) NO. IF YES WHICH PROGRAM: __________________________

ARE YOU CURRENTLY EMPLOYED? ( ) YES ( ) NO. IF YES, WHERE: ______________________

WHERE ARE YOU PLANNING TO APPLY TO COLLEGE AFTER YOUR GRADUATION?

1. ____________________________  2. ____________________________
3. ____________________________  4. ____________________________

WHAT WILL BE YOUR PLANNED MAJOR? ____________________________________________
(i.e. medicine, accounting, teaching, law, biology, etc.)

THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE

STUDENT’S SIGNATURE  DATE SIGNED

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University of Colorado Denver Pre-Collegiate Development Program
Teacher Recommendation Form
(Recommendation from an academic teacher)

Student_______________________ School_________________________ Grade Level______________ Teacher __________________________
Subject/Level_________________________________________ Grade Currently Earning ___________

TO THE TEACHER: The above student is applying to the Pre-Collegiate Development Program at the University of Colorado Denver. This program is designed to ensure that more first-generation students are provided with opportunities to pursue higher education. Please complete this questionnaire and add any additional comments that you feel would benefit this student in his/her application process. We appreciate your time and effort in completing this form.

<table>
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<tr>
<th>LEARNING CHARACTERISTICS</th>
<th>CHECK THE COLUMN WHICH BEST DESCRIBES THE STUDENT</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the student complete homework or other outside assignments on time?</td>
<td>Always</td>
<td>Usually</td>
</tr>
<tr>
<td>2. Does the student stay on task even if the assignment is difficult?</td>
<td>Always</td>
<td>Usually</td>
</tr>
<tr>
<td>3. Does the student take the initiative for his/her own learning?</td>
<td>Always</td>
<td>Usually</td>
</tr>
<tr>
<td>4. Is the student’s oral and written communication mature and grammatically correct?</td>
<td>Always</td>
<td>Usually</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MOTIVATIONAL QUALITIES</th>
<th>Always</th>
<th>Usually</th>
<th>Seldom</th>
<th>Never</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the student enthusiastic about learning?</td>
<td>Always</td>
<td>Usually</td>
<td>Seldom</td>
<td>Never</td>
<td>N/A</td>
</tr>
<tr>
<td>2. Does the student handle outside responsibilities as well as school demands?</td>
<td>Always</td>
<td>Usually</td>
<td>Seldom</td>
<td>Never</td>
<td>N/A</td>
</tr>
<tr>
<td>3. Is the student self-confident, emotionally secure and self-assertive?</td>
<td>Always</td>
<td>Usually</td>
<td>Seldom</td>
<td>Never</td>
<td>N/A</td>
</tr>
<tr>
<td>4. Does this student receive reinforcement from family in respect to his/her education?</td>
<td>Always</td>
<td>Usually</td>
<td>Seldom</td>
<td>Never</td>
<td>N/A</td>
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<tr>
<td>5. Does the student have good time management and study skills?</td>
<td>Always</td>
<td>Usually</td>
<td>Seldom</td>
<td>Never</td>
<td>N/A</td>
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TEACHER RECOMMENDATION:
Highly recommend (______)  Recommend (______)  Recommend with reservations (______)  Cannot Recommend (______)

____________________________
Teacher Signature

________________
Date

For additional comments please use reverse side.
University of Colorado Denver Pre-Collegiate Development Program  
Teacher Recommendation Form  
(Recommendation from an academic teacher)  

Student_______________________ School_________________________ Grade Level______________ Teacher __________________________

Subject/Level_________________________________________ Grade Currently Earning ___________

TO THE TEACHER:  The above student is applying to the Pre-Collegiate Development Program at the University of Colorado Denver. This program is designed to ensure that more first-generation students are provided with opportunities to pursue higher education. Please complete this questionnaire and add any additional comments that you feel would benefit this student in his/her application process. We appreciate your time and effort in completing this form.

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### TEACHER RECOMMENDATION:

Highly recommend (_____ )  Recommend (______)  Recommend with reservations (______)  Cannot Recommend (_______)

____________________________  ______________________
Teacher Signature            Date

For additional comments please use reverse side.
University of Colorado Denver Pre-Collegiate Development Program
Counselor Recommendation Form

Student: ___________________________ School: ___________________________ Counselor: ___________________________
Grade Level: ___________ Cumulative G.P.A.: ___________________________

TO THE COUNSELOR: The above student is applying to the Pre-Collegiate Development Program at the University of Colorado Denver. This program is designed to ensure that more first-generation students are provided with opportunities to pursue higher education. Please complete this questionnaire and add any additional comments that you feel would benefit this student in his/her application process. We appreciate your time and effort in completing this form.

Check or list outstanding achievement in Academic area(s) and extra-curricular activities
Math (__) Science (__) Social Science (__) English (__) Other (__) ____________________

Extra-curricular area (1) _________________ (2) _________________ (3) _________________

Report number of credit hours completed for the following academic areas:
Math __________ Science __________ Social Science __________ English __________ Other __________

Attendance
Good – 0-3 (__) Fair – 4-7 (__) Poor – 7+ (__)

### Career/Higher Education Aspirations

<table>
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<td>Usually</td>
</tr>
<tr>
<td>1. Does the student demonstrate an interest in pursuing higher education opportunities?</td>
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<tr>
<td>2. Does the student receive positive reinforcement from family regarding his/her education?</td>
<td></td>
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<tr>
<td>3. Does the student respond well to pressure, tight schedules, and heavy pressure demands?</td>
<td></td>
</tr>
</tbody>
</table>

### Interpersonal Relationships

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<tr>
<th>Always</th>
<th>Usually</th>
<th>Seldom</th>
<th>Never</th>
<th>N/A</th>
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<tbody>
<tr>
<td>1. Does the student relate to his/her peers in a social situation?</td>
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<tr>
<td>2. Does the student communicate his/her needs effectively?</td>
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<td>3. Does the student demonstrate leadership abilities?</td>
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**COUNSELOR RECOMMENDATION:** Highly recommend (__) Recommend (__) Recommend with reservations (__) Cannot Recommend (__)

(Please include an unofficial transcript with this form)

Counselor Signature ___________________________ Date ___________________________