

**BLUEGRASS COMMUNITY & TECHNICAL COLLEGE  
UPWARD BOUND  
FOLLOW-UP QUESTIONNAIRE**

DATE \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

NAME \_\_\_\_\_

Are You Married? \_\_\_\_Y \_\_\_\_N If yes, maiden name \_\_\_\_\_

**Current Home Address**

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

High School Attended \_\_\_\_\_

Graduation Date \_\_\_\_\_

Dates attended BCTC Upward Bound Program \_\_\_\_\_

**Your Current Activities** (*Check all that apply*)

\_\_\_\_ Working

\_\_\_\_ Serving in the Armed Forces

\_\_\_\_ Attending a postsecondary institution (*two-year, four-year or vocational-technical*)

***NAME OF SCHOOL*** \_\_\_\_\_

\_\_\_\_ Other, please specify \_\_\_\_\_

**Postsecondary Completion**

Have you completed a postsecondary program of study? \_\_\_\_Y \_\_\_\_N

If yes, what degree \_\_\_\_\_

Date of Graduation \_\_\_\_\_

Name of postsecondary institution \_\_\_\_\_

**Additional Contact Information**

In order for us to stay in contact with you, please provide the name, address and phone number of someone who will always know how to contact you (e.g. parent, grandparent, or friend).

Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

**If you are currently attending a postsecondary institution,  
please complete the following**

Name and location of college

\_\_\_\_\_

Date Enrolled \_\_\_\_\_

What is your enrollment status for the current school year?

Full time \_\_\_\_\_

Part time \_\_\_\_\_

**Current academic classification**

\_\_\_\_\_ Freshman (0-30 credit hours)

\_\_\_\_\_ Sophomore (31-60 credit hours)

\_\_\_\_\_ Junior (61-90 credit hours)

\_\_\_\_\_ Senior (91-120 credit hours)

\_\_\_\_\_ Graduate or Professional student (120+ credit hours)

Are you in good academic standing at your current institution  
(not on academic probation or suspension)? Yes \_\_\_\_\_ No \_\_\_\_\_

What is your major or course of study?

\_\_\_\_\_

What date do you expect to complete your degree/certificate?

\_\_\_\_\_

Are you receiving financial aid?    Yes\_\_\_\_\_    No\_\_\_\_\_

If yes, what type of aid are you receiving?

Please check all that apply:

\_\_\_\_\_ Pell Grant

\_\_\_\_\_ FFEL Loan (Stafford, PLUS Loans)

\_\_\_\_\_ Direct Loan (Perkins Loan)

\_\_\_\_\_ College Work-study

\_\_\_\_\_ Institutional Aid

\_\_\_\_\_ Other, please specify: \_\_\_\_\_

\_\_\_\_\_ Unknown

*Please return this completed form via email to [BL-UpwardBound@kctcs.edu](mailto:BL-UpwardBound@kctcs.edu)  
or mail to:*

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