

**U.C. UPWARD BOUND
VERIFICATION OF ATHLETIC / EXTRACURRICULAR PARTICIPATION**

Student: _____ Date: _____

School: _____ Grade: _____

The above named student is enrolled in the Upward Bound Program at the University of Cincinnati. The program is designed to help students improve their academic skills and ultimately go to college and earn a degree. Since the activity in which the student is engaged in conflicts with his/her Upward Bound schedule, we are requesting that you complete this form so that his/her status in Upward bound is not jeopardized. Thank you for your cooperation.

Please feel free to contact Mr. Joel Santos (513-556-1627) or Mrs. Cynthia Partridge (513-556-1629) if you have any questions or need further clarification.

Name of Sport or Extracurricular Activity: _____

Beginning date of activity: _____ Ending date of activity: _____

Please indicate the time of day when the sport/activity is in session. Example: Monday 4-6 PM

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday _____

***Please attach a copy of sport/activity schedule if available.**

****Coach, Teacher, or Employer Comments:** Please use this space to make comments relative to any unique circumstances. Use back of form if additional space is needed.

Signature of Parent: _____ Phone: _____

Signature of Coach, Teacher, or Employer: _____ Phone: _____