

# ASPIRE Student Participation Agreement

ASPIRE helped bring reality to my dreams  
by taking the steps to make it official



Being part of ASPIRE is  
something  
that I will never regret.



What is central to success is finding a  
solid basis for an open and active  
relationship.



ASPIRE helped me with  
understanding  
the college process.



Working with high  
school students is fun,  
energizing, frustrating  
and rewarding



ASPIRE let me see my options and  
opened doors to  
opportunity!

ASPIRE (Access to Student assistance Programs In Reach of Everyone) serves students by assisting students in finding the right education/training program and by educating students and families about options for paying for postsecondary education.

To participate in ASPIRE, both the student and parent or guardian must sign the Participation Agreement allowing program staff and the student's mentor to view his/her academic, attendance and disciplinary records to aid in achieving long-term success. The student should complete the Student Matching Form to help the ASPIRE Program Coordinator match the student with a mentor. Students meet one to four times per month with their Mentor on the high school campus. Meetings generally last about 30 minutes and are held at lunch, before or after school.

Participation in this beneficial program can help promote success. For further information, please access the ASPIRE website at <http://www.AspireOregon.org> or contact:

Lisa Johnson  
ASPIRE Program Coordinator  
MHS Career Center  
Email: [ljohnson@msd.k12.or.us](mailto:ljohnson@msd.k12.or.us)  
Phone: (503) 565-4270

**Please return all forms to the College & Career Center, Room 14.**



# ASPIRE Participation Agreement

Student Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

## PARTICIPATION AGREEMENT

ASPIRE is a volunteer mentoring program that assists high school students in the process of accessing training and education beyond high school. Working one-on-one, trained ASPIRE volunteer advisors help students with career and school research, applications and admissions processes, and provide information on financial aid. ASPIRE volunteer advisors must pass a criminal records check before meeting with students. Meetings take place at school, with staff present, throughout the school year. Participation does not guarantee that students will receive scholarships.

Each year students are asked to complete a confidential online survey about their experience and future plans. For students under the age of 18, participation in ASPIRE and the survey require a parent or guardian signature below.

**Participation in all ASPIRE programs and the program evaluation is voluntary and confidential. You are free to withdraw your consent and discontinue participation at any time.**

*I give permission for my student to participate in the ASPIRE program and survey.*

Parent/Guardian Name (printed):

Parent/Guardian Signature:

Date:

## MEASURING STUDENT SUCCESS

You can help ASPIRE determine if the program is making a difference by providing your student's Date of Birth (required), and the last four digits of the Social Security Number (optional). This information helps researchers measure if students attend and complete education beyond high school, a major goal of the program. The results will only be reported on groups of students and not on your individual student.

PLEASE know that ASPIRE will not share this information with any person or agency outside of the Oregon Student Assistance Commission (OSAC). OSAC has many security measures to safeguard private information.

Participation in the study is voluntary and confidential. You are free to withdraw your consent and discontinue participation at any time.

Student's Date of Birth-Required (mm/dd/yyyy):

Last four digits of the Student's Social Security Number-Optional:

XXX-XX-\_\_\_\_ \_

Parent/Guardian Name (Printed):

Parent/Guardian Signature:

## STUDENT CONTACT INFORMATION (Please Print)

Last Name:

Middle Initial:

First Name:

Home Phone:

Cell Phone:

E-mail:

How do you prefer to be contacted or receive messages? (Please check one)

Home Phone

Cell Phone

E-mail



## Student Matching Information

This information may be used to match you with an ASPIRE Mentor. You may continue your comments on the back of this sheet.

Your Name \_\_\_\_\_ Date \_\_\_\_\_

How did you learn about the program?

Is there an ASPIRE Mentor that you would like to be matched with? Who?

Do you or your family prefer a Spanish-speaking mentor?

Do you have an interest in a specific college or training program? If so, please describe it:

Please list any special skills, interests or hobbies:

Do you have a specific career interest area? If so, please describe:

Please check all items that you're interested in learning more about:

- |  |  |
|--|--|
| <input type="checkbox"/> PSAT/SAT and other test information         | <input type="checkbox"/> Assistance in selecting a college                             |
| <input type="checkbox"/> Help with selecting high school classes     | <input type="checkbox"/> College entrance requirements information                     |
| <input type="checkbox"/> College fairs                               | <input type="checkbox"/> Notification of scholarships and deadlines                    |
| <input type="checkbox"/> Career options                              | <input type="checkbox"/> Oregon Student Assistance Commission Scholarship applications |
| <input type="checkbox"/> Assistance with the FAFSA application       | <input type="checkbox"/> Essay writing   |
| <input type="checkbox"/> Scholarship search                          | <input type="checkbox"/> College visitations   |
| <input type="checkbox"/> Athletic scholarships                       | <input type="checkbox"/> Military options - ROTC vs. enlistment                        |
| <input type="checkbox"/> ASPIRE website and other Internet resources | <input type="checkbox"/> AmeriCorps and PeaceCorps                                     |



## Student Contact Information

Name \_\_\_\_\_ Date \_\_\_\_\_

Student ID# \_\_\_\_\_ Graduation Year \_\_\_\_\_

Best way to reach you (*check all that apply*)     Email     Phone     Note to class

Phone: (    ) \_\_\_\_\_ Is this a     home or     cell phone?

If cell, can you receive text messages?     Yes     No

Phone: (    ) \_\_\_\_\_ Is this a     home or     cell phone?

If cell, can you receive text messages?     Yes     No

Email address (please print) \_\_\_\_\_

### What is the Best Time for you to Meet with your Mentor?

Can you be available to meet (please check all that apply)

**Before School?**    **A Day** \_\_\_\_\_    **B Day** \_\_\_\_\_

**After School?**    **A Day** \_\_\_\_\_    **B Day** \_\_\_\_\_

**Lunch?**    **A Day** \_\_\_\_\_    **B Day** \_\_\_\_\_

**Open/aide Period** (please list periods) \_\_\_\_\_

This form may be sent to you at the beginning of each semester for updating.