



Alpha Kappa Alpha Sorority, Inc.
Marina del Rey Alumni Chapter
P.O. Box 9385
Marina Del Rey, CA 90295



Dear Prospective Participant:

Alpha Kappa Alpha Sorority, Inc., the first Greek lettered organization established by Black college women, was founded on January 15, 1908 at Howard University, and was incorporated on January 29, 1913 to ensure perpetuity. Alpha Kappa Alpha has grown from one undergraduate chapter to an international organization with a membership of more than 140,000 women.

Tau Beta Omega Chapter, established in 1991, is an alumni chapter of Alpha Kappa Alpha Sorority, Inc. As an alumni chapter, TBO strives to provide community outreach in local areas servicing both adults and youth. Our signature program, **ASCENDSM** is designed to motivate, engage, and assist high school students in reaching their maximum potential. **ASCENDSM** will focus on **A**chievement, **S**elf Awareness, **C**ommunication, **E**ngagement, **N**etworking, and **D**evelopmental Skills.

Students in the **ASCENDSM** program will have an opportunity to receive academic enrichment and life skills training to support their journey to college or vocational employment.

TBO's **ASCENDSM** Program will be held one Saturday of each month through June 2, 2018. The first session will be on **September 16, 2017 from 10 am to Noon at Los Angeles Fire Department Station No. 5 located at 8900 Emerson Ave., Los Angeles, CA 90045.** **ASCENDSM** students will participate in interactive workshops focusing on college/career readiness and civic engagement. Additionally, students will develop community service projects and participate in cultural outings. All future sessions will take place in the **College Center at St. Mary's Academy - 701 Grace Avenue, Inglewood, CA 90301** unless otherwise noted.

Applications can be submitted through email or US mail service by September 11, 2017. We will also be accepting applications in person at the first session on **September 16, 2017**. This initial session is open to parents as well.

Application packets include:

Student Application
Parent Consent/Waiver
Student Code of Conduct
Academic Transcripts
2 letters of recommendation

Mail applications to:

AKA-TBO
P.O. Box 9385
Marina del Rey, CA 90295

or email applications to:

tboascend@gmail.com

For more ASCEND program details, visit **www.taubetaomega.com**

Sincerely,

Nichelle D. Jones & Neikia Boguess
Tau Beta Omega Chapter



2017 – 2018

TAU BETA OMEGA ASCEND CALENDAR



September 16, 2017 (Location TBD)

Orientation/ASCEND Overview

October 21 – St. Mary's Academy

UN Module #1

Career Panel

November 18, 2017 – St. Mary's Academy

Tips for Test Taking Skills
Searching for Scholarships
FAFSA tips

December – OFF

January 20, 2018 – St. Mary's Academy

UN Module #2
Dress for Success
Highlight I.T., Public Safety,
Corrections & Security Careers

February 10, 2018 – Black College Expo

March 17, 2018 – St. Mary's Academy

Fiscal Fitness with Operation Hope
College Life Budgeting Game
Credit
Investing

April 21, 2018 – University of Southern California

College Module (Stacey Whitehead)
Cultural Outing TBD

May 19, 2018 – St. Mary's Academy

Job Interview Skills
Career Speed Dating
Summer School and Internship
Opportunities (Handout)
Cultural Outing

June 2, 2018 – 186th Street Elementary School – Gardena, CA

Community Service/STEM
Presentation
Commencement

ASCEND Application Packet



Parental Consent & Responsibility

As the parent or legal guardian of _____ (hereinafter to as “she” or “her” or “he” or “his”), I hereby certify and affirm the following:

1. I am legally entitled to give consent for her/his participation in the ASCEND program.
2. I acknowledge that she/he will be enrolled in 9th, 10th, 11th or 12th grade and a student in good academic standing with a cumulative minimum average of a “C” or its equivalent (new applicants must be matriculating in 9th-12th grade at the time of participation). Students with less than a “C” average will be placed on probation and must show improvement to remain in the program.
3. I am aware that upon application to the ASCEND program, I must provide a copy of her/his most recent grade report.
4. I understand that program membership may be revoked after three unexcused absences from meetings and activities within an academic year and I must notify the ASCEND program personnel of any absence.
5. I understand that her/his personal and private information will not be shared with any individuals, agencies or institutions without my written consent.
6. I understand that she/he will be involved with workshops and activities that seek to prepare her/him for career and/or college which will also include community service and cultural enrichment activities.
7. I understand that it is my responsibility to make sure that she/he is present at all program activities.
8. I authorize permission for her/him to attend all sanctioned enrichment and cultural excursions that are off-site from the regular meeting place.
9. I understand that guests (i.e., younger siblings, friends, un-enrolled students) should not be brought to the meeting or activities without prior consent or knowledge of the ASCEND program personnel.
10. I understand that her/his admission and participation in the program is voluntary and may be terminated by any party of this agreement at any time.
11. I authorize the ASCEND program personnel to transport her/him (or arrange transportation) to a hospital or medical facility in the event that I cannot be reached and authorize consent to examination, care and treatment as deemed necessary by a licensed physician or dentist.
12. I understand that she/he may be photographed or videotaped during the program meetings and activities and give my consent for use of such images by Alpha Kappa Alpha Sorority, Inc. and the ASCEND program personnel in print or electronic media used to promote the program.
13. I understand that as the parent or legal guardian, I may be called upon to attend a mandatory parental orientation, periodic meetings and program activities. In the event I cannot attend, I agree to send an adult representative in my place.
14. I relieve Alpha Kappa Alpha Sorority, Inc. and ASCEND program personnel from any liability that may arise during her/his involvement in the ASCEND program meetings and activities.
15. I understand that this form will be kept on file by Alpha Kappa Alpha Sorority, Inc. and the ASCEND program personnel.
16. Termination of a student’s involvement in ASCEND will be in writing.

By affixing my signature below, I certify that I have read all of the above information and agree with the provisions and my role and responsibilities.

Parent/Legal Guardian Printed Name

Relationship to Applicant/Participant

Date

Parent/Legal Guardian Signature

Contact Number

Email





Student Code of Conduct & Responsibility Contract

As a participant of the ASCEND program:

1. I agree to abide by the rules and regulations set forth by the ASCEND personnel and to conduct myself with respect.
2. I agree to be cooperative and follow instructions ensuring that I respect adults and all authorized authority.
3. I will not bully or participate in negatively speaking to or of anyone nor act in a violent manner.
4. I will provide a copy of my recent grade report with the application.
5. I will remain in good academic standing with a cumulative minimum average of a "C" or its equivalent.
6. I understand that my membership may be revoked after three unexcused absences from meetings and activities within an academic year and that I must notify the ASCEND program personnel of any absence.
7. I understand that my personal and private information will not be shared with any individuals, agencies or institutions without my parent's written consent.
8. I will participate in workshops and activities that seek to prepare me for a career and or college attendance.
9. I will be fully engaged in attending program meeting and activities that will include civic and cultural activities.
10. I understand that I cannot bring guests to meetings or activities without prior consent or knowledge of the ASCEND program personnel.
11. I understand my admission and participation in the program is voluntary and maybe terminated by any party of this agreement at any time.
12. I understand that I may be photographed or videotaped during the program meetings and activities for use of such images to be used by Alpha Kappa Alpha Sorority, Inc. and ASCEND program personnel in print or electronic media for promotion of the program.
13. I understand that this form will be kept on file by Alpha Kappa Alpha Sorority, Inc. and the ASCEND program personnel.
14. I will evaluate the ASCEND program when requested.

By affixing my signature below, I certify that I have read all of the above information and agree with code of conduct and responsibilities as a participant of the ASCEND program.

Student/Applicant Printed Name

Date

Student/Applicant Signature

Contact Number

Email



ASCEND Application Packet



ASCEND Program Student Application Form

Applicant Information

Name _____
(Last Name) (First Name) (Middle Initial)

Address _____
(Street) (City) (State) (Zip Code)

Phone _____ Email _____
(Home Number) (Cell Number)

Date of Birth (mm/dd/yy) _____ Gender _____ Male _____ Female _____

Grade Level : ____ 9th Grade (Freshman) ____ 10th Grade (Sophomore) ____ 11th Grade (Junior) ____ 12th Grade (Senior)

High School Name _____

High School Address _____
(Street) (City) (State) (Zip Code)

Current GPA (if applicable) _____ Cumulative GPA _____

Career Interest (check all that apply):

- | | |
|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Agriculture, Food & Natural Resources | <input type="checkbox"/> Human Services (e.g., Social Work, Counseling) |
| <input type="checkbox"/> Architecture & Construction | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> Arts | <input type="checkbox"/> Law, Public Safety, Corrections & Security |
| <input type="checkbox"/> Audio/Visual Technology | <input type="checkbox"/> Management & Administration |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Business | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Education & Training | <input type="checkbox"/> Military Services (e.g., Army, Marines, Navy, or Reserves) |
| <input type="checkbox"/> Finance Planning | <input type="checkbox"/> Science, Technology, Engineering & Math (STEM) |
| <input type="checkbox"/> Government & Public Administration Planning | <input type="checkbox"/> Transportation, Distribution & Logistics |
| <input type="checkbox"/> Health Science (Medicine, Dentistry, Nursing, Pharmacy) | <input type="checkbox"/> Vocational Trade (e.g., Automotive, Construction, Industrial, Technician) |
| <input type="checkbox"/> Hospitality & Tourism | <input type="checkbox"/> Other |

Parental/Legal Guardian Information

Name _____
(Last Name) (First Name) (Middle Initial)

Address _____
(Street) (City) (State) (Zip Code)

Phone _____ Email _____
(Home Number) (Cell Number)

Emergency Contacts

Name _____
(Last Name) (First Name)

Phone _____

Email _____

Name _____
(Last Name) (First Name)

Phone _____

Email _____





ASCEND Pre/Post-Assessment

Name: _____

Directions: Tell us what you think about the agricultural sciences as a career. Using the scale that follows, please choose the number that best describes your response to the items below.

1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree

Circle one

- | | | | | | |
|------------------------------------------------------------------------------------------------|---|---|---|---|---|
| 1. I know very little about courses I will need to take to be ready for college. | 1 | 2 | 3 | 4 | 5 |
| 2. I plan to study for the ACT or SAT to prepare for college. | 1 | 2 | 3 | 4 | 5 |
| 3. I enjoy math and science classes in school. | 1 | 2 | 3 | 4 | 5 |
| 4. I know about historically black colleges and universities. | 1 | 2 | 3 | 4 | 5 |
| 5. I know how and when to apply for financial aid. | 1 | 2 | 3 | 4 | 5 |
| 6. The cost of college is a factor in my plans to attend. | 1 | 2 | 3 | 4 | 5 |
| 7. I plan to work after high school. | 1 | 2 | 3 | 4 | 5 |
| 8. The military or community college are options for me. | 1 | 2 | 3 | 4 | 5 |
| 9. I am interested in learning about people from other countries. | 1 | 2 | 3 | 4 | 5 |
| 10. Understanding racial and cultural differences is necessary to be successful in any career. | 1 | 2 | 3 | 4 | 5 |

Please provide the following information.

- Gender: _____ 2. Race/Ethnicity: _____
- Are you from a: Rural area _____; Urban area _____; or Suburban area _____?
- Do you participate in other activities outside of school? If so, list those activities.
- What type of high school do you attend:

_____ Public	_____ Parochial	_____ Home school
_____ Private	_____ College preparatory	_____ Other
- What is the student population like at the high school you attend?

_____ Majority Hispanic	_____ Equal mix of all groups	_____ All female
_____ Majority African-American	_____ Majority White/Caucasian	_____ All male
_____ Majority Asian American	_____ Other (please specify) _____	
- Do you participate in a college preparatory program (e.g., magnet, honors, etc.)? _____ Yes _____ No
- Do you take courses outside of your regular high school classes (e.g., Saturday classes, college courses)?
If yes, please specify what types. _____

Thank you for completing this survey!

