UBMS OFFICE ADDRESS:

Upward Bound Math-Science
Upward Bound
Wesleyan University
41 Lawn Avenue
Middletown, CT 06459

860-685-2970 phone
860-685-3115 fax
ubms@wesleyan.edu

SOCIAL MEDIA

Like us on Facebook (facebook.com/wesleyan ubms)

Follow us on Instagram @wesubms

Follow us on Instagram @wesubms

Subscribe to us on Youtube @WesUBMS
**PROGRAM DETAILS**

**Summer component runs from** June 20th to August 2nd

**WHO WE ARE**

- Federally Funded TRiO Programs
- Serve low-income, first-generation students to support them in going to college
- Wesleyan has had UB/UBMS programs since 1960s!

Upward Bound Math Science grant – Middletown
  Upward Bound grant – Meriden

Serving over 120 students per year – currently in the recruiting process to add more students to the program

FREE for participants

**PROGRAM GOALS**

For each student to:

- **SUCCEED ACADEMICALLY**
- **INTRODUCE STUDENTS TO COLLEGES AND UNIVERSITIES IN THE AREA**
- **GIVE STUDENTS THE UPPER HAND ON PEERS DURING THE SCHOOL YEAR**
- **STRENGTHEN STUDENT'S SKILLSET THROUGH ENRICHING ACTIVITIES**
- **EXPOSE STUDENTS TO NEW AREAS OF INTEREST**
- **HELP STUDENTS IN AREAS OF STRUGGLE**
STAFF DIRECTORY

MIGUEL PERALTA – PROGRAM DIRECTOR
860-685-3186 (office)
mperalta@wesleyan.edu

NINA VAZQUEZ – PROGRAM COORDINATOR
(MERIDEN)
860-685-2435 (office)
vazquezrosa@wesleyan.edu

JORDAN ROMINE– PROGRAM COORDINATOR
(MIDDLETOWN)
860-685-3194 (office)
jromine@wesleyan.edu

TEACHERS

- MATH CLASS
  Mikayla Wells
  Zack Tsahalis

- ENGLISH CLASS
  Heather Glazweski
  Hellena Rodriguez

- SCIENCE
  TBD

FACILITATORS

- Daniela Santiago
- Aisha Spears
- Libby Nuñez
- Gage Rovell
- Caroline Czuprynski
- Nyemah West
Classes:
Monday through Thursday from 8:30 am to 2:30 pm
Each student will take the following classes:
  ○ Math
  ○ English
  ○ Science
  ○ Foreign Language
Grade Level Seminars
  • Student’s will be split up by grade and partake in lessons pertaining to their grade level which covers subjects such as college applications, time management, SAT skills, social/emotional learning, and resume building.

Excursions/Activities
  • Every Friday students will participate in an on/off-campus excursion or activity as a group.

*You are expected to arrive on time for every class.*

Students MUST fill out all required forms and return to UBMS. Forms can be submitted on the first day of the program or sent to the UBMS office.
*all contact details can be found on page 4*
  • Wesleyan Activity Waiver
  • Med Forms
  • Wide Angle Vision Waiver (team building)
  • Photo Release
### A DAY

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<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tr>
<td>8:30-8:55</td>
<td>Morning Meeting - ESC 58</td>
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<tr>
<td>9:00-10:25</td>
<td>Period 1</td>
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<td>10:30-11:55</td>
<td>Period 2</td>
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<td>12:00-12:45</td>
<td>Lunch</td>
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<td>1:00-2:30</td>
<td>GLS/Activities</td>
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### B DAY

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<th>Time</th>
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<tr>
<td>8:30-8:55</td>
<td>Morning Meeting - ESC 58</td>
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<td>9:00-10:25</td>
<td>Period 3</td>
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<td>10:30-11:55</td>
<td>Period 4</td>
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<td>12:00-12:45</td>
<td>Lunch</td>
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<tr>
<td>1:00-2:30</td>
<td>GLS/Activities</td>
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Attire
The Upward Bound Math-Science/Upward Bound Classic summer program is an intensive, intellectual, and leadership development experience. We all have a part in creating and maintaining that environment. Action and attitude are two areas that contribute to the environment; dress is another. Individual expression and comfort are important. Many rooms are airconditioned and some are not. Classrooms and facilities are spread throughout the campus. Dress should not distract anyone from the primary purpose: the development of intellect, leadership, and good communication skills.

Dress do's
- Dress appropriately for academic activities,
- Dress appropriately for the weather (rain, etc),
- Bring extra clothes for athletic and non-academic activities.

Dress don'ts
- No clothes revealing stomachs, chests, backs, buttocks, and undergarments,
- Undergarments must be concealed and worn as undergarments,
- No clothes with offensive language or pictures,
- No skin-tight attire
Attendance & Tardiness

- If missing more than 1 week of program, must speak with program staff.
- Students who are absent due to sickness will need to submit a confirmation note from parents or a doctor. Letter must state:
  - Reason for absence
  - Date of absence
- School pictures, driver's tests, sleeping late, missed rides and excuses will not be accepted.
- Parent(s)/guardian(s) call the office at (860)685-2970 or email ubms@wesleyan.edu if your child is going to be late or absent, and submit a note of explanation for the student's file.
- It is the student's responsibility to get any work that has been missed and catch up in their classes.

Code of Conduct

- The program expects all UBMS/UB students to conduct themselves in a manner that reflects respect for self and others. While at Wesleyan University, we expect all students to conduct themselves as young adults in keeping with high professional and personal standards.
- The program expects all students to complete academic assignments, present research and projects, participate in class, and fully engage in all activities to the best of their ability.
- Transportation is a privilege of UBMS/UB and proper behavior to and from the program is expected at all times.
- Students are not permitted to leave campus for any reason during the program day.
Cellphones
- During classes and other program activities, **cellphones must be off and away**, unless they are being used for class. We expect you to give your full, undivided attention to your instructors/activity leaders. Minimize distractions as much as possible.

Students caught using cellphones inappropriately will be given a warning. If further cellphones usage follows, UBMS staff will have no issue confiscating cellphones and contacting parents.

Computer Usage
During program hours, your computer is ONLY to be used for class/activity participation. Personal entertainment, games, and social networking sites (Twitter, Instagram, Roblox, Chatrooms, etc.) are not permitted.

If you are experiencing connectivity issues, get in touch with a UBMS staff member.

**Staff will be paying extra close attention to inappropriate use of technology this summer.**
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<tr>
<th>Process Criteria</th>
<th>Product Criteria</th>
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<tr>
<td>Learning Behaviors</td>
<td>Evidence of achievement</td>
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<tr>
<td>Engagement, Attention, Initiative</td>
<td>Overall Grade</td>
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**Teacher Ratings are as follows:**

- **Science Teacher:**
  - Comment:
  - 1 2 3

- **Math Teacher:**
  - Comment:
  - 1 2 3

- **English Teacher:**
  - Comment:
  - 1 2 3

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3 - Exceeds Expectations
2 - Meets Expectations
1 - Needs Improvement

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Students use a virtual program called Doulings to study their chosen foreign language. They are required to complete a specified number of online learning hours in their selected language. The class meets 1.5 times each session lasting 1.5 hours, providing a total of 16.5 hours of instructional time.
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<td>On-Campus Activity Day</td>
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<td>First Day of Program</td>
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<td>Building Day</td>
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<td>On-Campus Team</td>
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<td>Juneteenth</td>
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<td>Meriden First Day of School</td>
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<td>Middlesex First Day of School</td>
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**AUGUST 2023**

- **Monday**: 29
- **Tuesday**: 30
- **Wednesday**: 31
- **Thursday**: 1
- **Friday**: 2

**Important Dates**

- Last Day of Program
- B Day Classes
- Meriden First Day of School
- Middlesex First Day of School
STAY CONNECTED WITH THE BAND APP

Sign up to receive announcements, get reminders, RSVP to events, and share photos.

MALONEY

PLATT

MIDDLETOWN
Wesleyan University
Upward Bound/Upward Bound Math-Science

PERMISSION, WAIVER, RELEASE AND INDEMNITY AGREEMENT

In consideration of permitting __________________________ to enroll or participate in certain activities, conferences, trips, etc. described as:

**Upward Bound/Upward Bound Math-Science 2024 Summer Program**
All program activities, including, but not exclusive to:
- 2024 Summer Program on Wesleyan’s campus
- Educational, enrichment trips, and College visits
- All UB/UBMS activities throughout the summer program (6/20/24 – 8/2/24)
  (Including transportation to and from activities)

offered by Wesleyan University beginning on dates above, the undersigned, on behalf of his or herself and for his or her heirs, executors, administrators and all of the assigns of any of them, hereby knowingly and voluntarily RELEASES, WAIVES, FOREVER RELINQUISHES and DISCHARGES Wesleyan University, its trustees, officers, agents, servants and employees (the “Released Parties”) from any and all claims, causes of action, liability of any type whatsoever including but not limited to liability for personal injury, property damage or wrongful death occurring to him or her arising as a result of, incidental to or related to engaging in the Activity, whether the same shall arise by the negligence of any of the Released Parties or otherwise.

**BY SIGNING THIS AGREEMENT, IT IS THE INTENTION OF THE UNDERSIGNED TO EXPRESSLY ASSUME ALL RISK OF PROPERTY DAMAGE, PERSONAL INJURY OR DEATH TO THE EXCLUSION OF WESLEYAN UNIVERSITY AND TO EXEMPT AND RELIEVE WESLEYAN UNIVERSITY FROM LIABILITY FOR PROPERTY DAMAGE, PERSONAL INJURY OR DEATH, INCLUDING WHERE CAUSED BY NEGLIGENCE.**

The undersigned for him/herself, his/her heirs, executors, administrators and/or assigns of any of them agrees that, in the event any claim for property damage, personal injury or wrongful death shall be prosecuted against Wesleyan University arising out of, incidental to or related to him/her and the Activity, he/she shall indemnify and hold harmless Wesleyan University from any and all claims, causes of action, liability, damage, cost or expense by whomever or wherever made or presented arising as a result thereof.

The undersigned acknowledges that he/she has read this Agreement, has been fully and completely advised of the potential dangers incidental to engaging in the Activity and is fully aware of the legal consequences of signing this Agreement.

FOR: Upward Bound/Upward Bound Math Science participants

_________________________  ___________________________  ________________  ________________
Printed Name  Signature  Date  Date of Birth

For Minors

_________________________  ___________________________  ________________
Parent/Guardian Printed Name  Parent/Guardian Signature  Date
UBMS Emergency Contact/Medical Information

Student Name: ____________________________________________

Emergency Contact #1 – Name: ____________________________ Phone #: ____________________

Emergency Contact #2 – Name: ____________________________ Phone #: ____________________

Please list any Allergies/Medications:

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<tr>
<th>Allergic to:</th>
<th>Medications Prescribed:</th>
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Special Health or Dietary Considerations:

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

The following non-prescription medications that are checked off may be administered to my child in the event that a first aider, director, program coordinator, summer staff member deems it necessary:

1. Ibuprofen (Advil) Yes ☐ No ☐
2. Antacid (Pepto Bismol) Yes ☐ No ☐
3. Antihistamine (Benadryl) Yes ☐ No ☐
4. Acetaminophen (Tylenol) Yes ☐ No ☐
5. Aspirin (Bayer) Yes ☐ No ☐

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

Parent’s/Guardian’s Signature ____________________________ Date ____________
PUBLICITY AND PHOTO RELEASE FORM

The Wesleyan Upward Bound Math Science Program is making a concentrated effort to promote the positive activities, honors, and work of our staff and students. This includes working with local newspapers, radio, and television stations and developing our own publications. These publications include information, likenesses, and images, which may appear on the University website and social media accounts, as well as in other publications.

As we go about this project, there will be opportunities for various students to be interviewed and/or photographed and identified by name and grade or school. However, we understand that some parents may request that we do not identify their child(ren). Please fill out the form below to inform us of your wishes regarding publicity. Please note, however, that your child’s image or likeness may appear in occasional candid photos without any type of name identification and the use of these candid photos of your child is permissible.

(Please print. Use a separate form for each child)

Student Name ___________________________ Grade __________

Parent/Guardian Name _____________________

☐ I give permission for my child to be interviewed, identified, and/or photographed/filmed for use in program publications, including, but not limited to, publication via website or other technological publications, videos, newspapers, radio, or television.

☐ I request that you do not interview or photograph my child.

Parent/Guardian Signature ___________________________

Date __________________________

This form will be kept on file at our office. If a situation arises that may change your child’s status regarding publicity, please notify us in writing as soon as possible. New photo release forms will not be required each school year.
PROGRAM WAIVER 2024

I have been informed of and understand the nature of the activities offered by WIDE ANGLE VISION LLC. These activities may include but are not limited to large group games and mobile team-building initiatives.

These activities will be facilitated according to the objectives of the program and a schedule, subject to modification by weather and other considerations. I acknowledge that reasonable safeguards have been employed to render the aforementioned activities as safe as possible, but I do understand the risks of the program as involving some strenuous physical activity.

By signing this form, I hereby agree that my participation includes an understanding and assumption of the risks, and waives any claim against WIDE ANGLE VISION LLC and any of their staff for liability for any injuries or illness that may occur that are not the direct result of intentional misconduct or gross negligence on their part. I also waive any claim against WIDE ANGLE VISION LLC and any of their staff for liability for any injuries that may occur in transporting the below-named participant to and from The WIDE ANGLE VISION LLC program for the purpose of visiting or participating in a program. I understand that photographs of participants in WIDE ANGLE VISION LLC activities may be taken and used for the promotion of WIDE ANGLE VISION LLC in newspapers, magazines, or other printed or published material unless I notify WIDE ANGLE VISION LLC in writing prior to participation.

Program(s): Wesleyan University Upward Bound/Upward Bound Math-Science

Program Date(s): June 20, 2024

Print Participant’s Name

Print Parent/Guardian’s Name: _______________________________ (if under age 18)

List any medical condition, physical limitation or other relevant information that would restrict your participation in these activities in any way.

______________________________
Signature of Participant

Date

______________________________
Signature of Parent or Guardian (if participant under age 18)

Date
This summer we are returning to New England Science & Sailing for a day of Kayaking & Creek Exploration. All students MUST have a signed waiver.

Scan the QR Code below to complete.