

**SIU**  
CARBONDALE

SOUTHERN ILLINOIS UNIVERSITY  
**SCHOOL OF  
ACCOUNTANCY**



**SOAR**

**Saluki Opportunities in Accounting Residency**

**2023 SUMMER PROGRAM**

**Southern Illinois University  
Carbondale, IL  
June 18 - June 24, 2023**



## What is SIU SOAR?

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The **Saluki Opportunities in Accounting Residency program** at Southern Illinois University in Carbondale (**SIU SOAR**) is an innovative career development program designed specifically for minority students who are entering their sophomore, junior and senior years in high school. Its primary objective is to increase the number of high school students from under-represented ethnic groups to attend college and major in accounting.

SOAR is a week-long summer camp that informs, and introduces, minority high school students about the expectations of college life and opportunities in accounting, finance and business-related fields while providing the foundation of financial literacy and the development of interpersonal skills. In addition, the program serves as a motivational tool to inspire students to increase their fundamental competence in the skill sets related to employment in those fields, even while in high school.

A summer residency program, SOAR gives students the opportunity to reside in a college setting for seven (7) days and six (6) nights and attend classes on accounting and college preparation. Classroom topics are enhanced through team building activities, professional office tours, field trips, as well as other activities. Prominent business leaders share their knowledge, provide tips for success and discuss educational opportunities. Students experience accounting first-hand through tours of local certified public accounting firms and companies in the private sector. The program concludes with a recognition luncheon for students, parents, speakers, and corporate partners. At the end of the week, students should have developed a clear understanding of the career opportunities in the accounting profession, while developing a personalized, actionable college and career plan.

Each student is assigned a counselor during the program. The counselor-to-student ratio is 1:5 in order to provide students with the best possible supervision. SOAR alumni will be left with a life altering experience giving them greater self-esteem and a sense of responsibility for others. SOAR alumni are then challenged to continue their career preparation and leadership skills by serving as Ambassadors for future SOAR programs. Ambassadors will serve as volunteers and guides for first-year SOAR participants.

Nationally, SOAR has served as a turning point in the academic lives of thousands of high school students, motivating them to pursue a higher education while influencing them to major in accounting, finance, and business concentrations. SIU SOAR offers a unique pipeline from high school to college that allows students to become prepared and informed about the expectations of college life. The program is fully supervised and all-expenses-paid. Students selected will receive free tuition, room and board, books, materials, tools, and mentoring opportunities. The Program will accommodate up to forty (40) students who, the academic year following the SOAR program, will be sophomores, juniors, or seniors in high school and have an interest in accounting, finance or business. Travel assistance may be available upon request.

## How Can I Participate?

Applications for the **Summer 2023 SIU SOAR Program** will be accepted until **Friday, June 9, 2023**. Applicants will be notified no later than **June 12, 2023**. The summer program will run from **June 18 -24, 2023**.

Please submit the following application materials:

- ❖ **Completed Application**
- ❖ **One (1) Personal Statement Essay (minimum 150 words, 500 words max)**
- ❖ **Two (2) Recommendation Forms OR Letters of Recommendation (one from a teacher and one from a guidance counselor, coach, club/group advisor, employer etc.)**
- ❖ **List of High School Awards, Honors, and Extracurricular Activities**
- ❖ **Current copy of academic transcript (showing cumulative GPA),**
- ❖ **\$20.00 Non-refundable Application Deposit**

### ONLINE SUBMISSION

Please complete the online application and/or submit payment by visiting the 2023 SIU SOAR e-Application Link:

<https://conferenceservices.siu.edu/camps-youth-programs/saluki-opportunities-in-accounting-residency-program.php>

### EMAIL, FAX OR US MAIL SUBMISSION

Please complete the attached application and return to us at:

**Email to:**     soar@siu.edu

**FAX to:**       618-453-7961     Attn: Nija Harvey

OR

**Mail to:**   School of Accountancy   **\*\*Please allow 2-5 business days for delivery\*\***  
Southern Illinois University  
ATTN: SIU SOAR  
Rehn Hall, RM 232 - MC 4631  
1025 Lincoln Drive  
Carbondale, IL 62901

For more information or if you have any questions about the SOAR program, please contact Nija Harvey at [nija@siu.edu](mailto:nija@siu.edu) with the subject: SOAR QUESTIONS, or call 618-453-1400.

# 2023 SIU SOAR Program

## STUDENT APPLICATION

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PLEASE COMPLETE THE APPLICATION BELOW (Please type or print legibly).

Are you a returning SOAR student?     Yes    No                      **Gender:**  Female     Male

**Student Name:** \_\_\_\_\_  
(Last, First, Middle Initial)

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Type:**     Cell    Home

**T-Shirt Size:**  S    M    La    XL    XXL                      **Polo Size:**  S    M    L    XL    XXL

**Ethnic Background (choose all that apply):**

African American    Hispanic    Caucasian    Native American    Asian    Other: \_\_\_\_\_

**High School Name:** \_\_\_\_\_

**School Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**School Phone:** \_\_\_\_\_

**Current Grade Level:** \_\_\_\_\_ **Grade Point Average (GPA):** \_\_\_\_\_ (Minimum of 2.5)

**School Counselor or Accounting/Business Teacher:** \_\_\_\_\_

**Phone#:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_  
 Mother    Father    Grandmother    Grandfather    Aunt    Uncle    Other

**Parent/Guardian Address:** \_\_\_\_\_

**Parent/Guardian Phone Number:** \_\_\_\_\_ **Type:**    Cell    Home

**Parent/Guardian Work Number:** \_\_\_\_\_

**Parent/Guardian Email Address:** \_\_\_\_\_

# 2023 SIU SOAR Program

## STUDENT APPLICATION

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### STUDENT STATEMENT OF INTEREST

Please type an essay (minimum 150 words) explaining why you think you will benefit from the Saluki Opportunities in Accounting Residency. (Please attach or upload essay).

### AWARDS AND ACTIVITIES

#### SCHOLASTIC AWARDS

Academic Awards

Number of Years

_____	_____
_____	_____
_____	_____
_____	_____

#### EXTRACURRICULAR ACTIVITIES

(i.e. Student Clubs, Athletics, Volunteer Experience)

Number of Years

_____	_____
_____	_____
_____	_____
_____	_____

**REFERENCES.** Two letters of recommendation are required (one from a teacher and one from a counselor, coach, club/group advisor, employer etc.). Please provide contact information for each of your references.

Name(s)

Phone Number

Relationship to Student

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

# 2023 SIU SOAR Program

## STUDENT APPLICATION

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### DEMOGRAPHIC INFORMATION

The SIU SOAR program would not be made possible without the sponsorship and contributions from Corporate Sponsors and grants received from other Charitable Foundations.

Several of these organizations are interested in and/or require the demographics of the students and families that participate in the SOAR program. These details provide them with a better and more detailed understanding of the families and communities that benefit from and are impacted by their support of the program.

As such, please complete the following sections to help us obtain more detailed demographic information:

Are the parents/guardians of the applicant legally married?  Yes  No

If you answered no to the question above, does the applicant live in a single-parent household?  Yes  No

If a single-parent household, what is the gender of the single parent?  Male  Female

How many people are in the household, including parent(s)/guardian(s) and children?

Two  Three  Four  Five  Six  Seven or more

What is your gross annual household income?

\$0 - \$15,000  \$40,001 - \$60,000  \$80,001 - \$100,000

\$15,001 - \$40,000  \$60,001 - \$80,000  \$100,001 or more

### Parent/Guardian A Education Level

No High School Diploma or GED  High School Diploma or GED

Some College (Not Graduated)  Bachelor's Degree

Master's Degree or Greater  Other Certification

### Parent/Guardian B Education Level

No High School Diploma or GED  High School Diploma or GED

Some College (Not Graduated)  Bachelor's Degree

Master's Degree or Greater  Other Certification

# 2023 SIU SOAR Program

## STUDENT APPLICATION

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### TERMS & CONDITIONS FOR PARTICIPATION (Student should initial by each section):

- \_\_\_\_\_ It is the understanding that the students are guests of Southern Illinois University and agree that, at no time, will they leave the campus during their stay. (This does not include the visits scheduled as group activities during the program or in case of an emergency.)
- \_\_\_\_\_ In addition, students agree to eat all meals on campus, as they are provided by the program; and students will obey the lights out policy of 11:00PM, which will be enforced at all times.
- \_\_\_\_\_ There is no smoking or alcohol, or any form of drugs permitted on university property and students agree to refrain from the use of such.
- \_\_\_\_\_ It is understood that not all students who complete the application will be selected to participate in this program and agree to the decisions made by Southern Illinois University and the SIU SOAR Board.
- \_\_\_\_\_ It is understood that this is an educational opportunity and with it comes certain responsibilities. Students will conduct themselves in accordance with the terms outlined.

### STUDENT CONSENT

I do hereby agree to the terms and conditions associated with participating in the SIU SOAR program and understand that if, for any reason, Southern Illinois University deems it necessary to send me home for being unable to fulfill my agreement, I understand that my parent/guardian will be notified and I will comply with this action.

( ) I, the below signed student, AGREE to the SIU SOAR terms and conditions listed above.

( ) I, the below signed student, DO NOT AGREE to the SIU SOAR terms and conditions listed above.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PARENT/GUARDIAN CONSENT

I do hereby give my permission for the above signed student to participate in the SIU SOAR Program to be held in Carbondale, IL for the period of June 18 - June 24, 2023. I understand should my child be asked to leave the program prior to completion, I agree to provide transportation should it be necessary.

( ) I, the below signed parent/guardian, AGREE to the SIU SOAR terms and conditions listed above.

( ) I, the below signed parent/guardian, DO NOT AGREE to the SIU SOAR terms and conditions listed above.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# 2023 SIU SOAR Program

## STUDENT APPLICATION

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### SOAR MEDIA RELEASE FORM

**PROGRAM DATES:**      **June 18 - June 24, 2023**

\_\_\_\_\_ I, the undersigned, hereby authorized Southern Illinois University to photograph me, take motion pictures of me, take video footage of me, and/or make electronic sound recording of me (herein referred to as photographic or electronic reproductions), during the above program dates.

\_\_\_\_\_ I authorize the use of any such photographic or electronic reproductions of me for any purpose, including but not limited to, educational and other public media as may be deemed appropriate by Southern Illinois University during the above program dates.

\_\_\_\_\_ I understand that I may be identifiable from such photographic or electronic reproductions produced during the course of the above program dates.

### STUDENT CONSENT

I do hereby agree to the media release terms and conditions, outlined above, associated with participating in the SIU SOAR program during the program period outlined above.

( ) I, the below signed student, AGREE to the SIU SOAR media release terms and conditions listed above.

( ) I, the below signed student, DO NOT AGREE to the SIU SOAR media release terms and conditions listed above.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PARENT/GUARDIAN CONSENT

I certify that I am the parent or guardian of \_\_\_\_\_  
(Please print student's name)

the student applicant above, a minor under the age of eighteen (18) years. I hereby agree to assume legal responsibility for his/her authorizations referred to in this General Media Release.

( ) I the below signed parent/guardian, AGREE to the SIU SOAR media release terms and conditions listed above.

( ) I, the below signed parent/guardian, DO NOT AGREE to the SIU SOAR media release terms and conditions listed above.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# 2023 SIU SOAR Program

## STUDENT APPLICATION

### 2023 RECOMMENDATION FORM

\*The applicant is required to submit two (2) letters of recommendation; one from a teacher and one from a counselor, coach, club/group advisor, employer, etc. The purpose of this form is to replace or supplement a written letter for each of our applicants to determine those students who will be best served by the program.

Applicant's Name \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

#### How much contact have you had with this student?

Frequent       Some       Minimal       None (If none, please sign & return to SOAR)

#### How would you describe the applicant's motivation?

Strong       Fair       Weak

#### How would you describe the applicant?

*(Please check all that Apply, and provide a brief explanation of Unacceptable marks.)*

	EXCELLENT	GOOD	NEEDS IMPROV.	UNACCEPTABLE	UNSURE
Goal Setting/Follow Through					
Respect for Others					
Initiative					
Stays on Task					
Works well with Others					
Promptness					
Creativity					

Please check **skills and/or aptitudes**, which apply to applicant:

\_\_\_ Outgoing involvement

\_\_\_ Exhibits Leadership

\_\_\_ Strong community

\_\_\_ Responsible

\_\_\_ Overcomes obstacles

\_\_\_ Involved in school activities

\_\_\_ Bilingual

\_\_\_ Balances work and school well

\_\_\_ Strong willed

\_\_\_ Positive influence

\_\_\_ Role model

\_\_\_ Humility

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## STUDENT APPLICATION

**In your opinion, is this student motivated toward studying accounting and/or business, and exploring a business career? (Attach additional pages if necessary)**

Other (Please list) \_\_\_\_\_

Please include any other comments that would help in the evaluation of this applicant for acceptance in the SOAR Program (attach additional pages if necessary).

Please Print Name \_\_\_\_\_ Title \_\_\_\_\_

Please Sign Name \_\_\_\_\_ Date \_\_\_\_\_

We appreciate your assistance in completing this form. Please return the form as soon as possible to the student or the SOAR program by any of the methods listed below. **The student's application will not be complete until this recommendation form or letter of recommendation is received.** Thank you for your assistance.

**Email to:** soar@siu.edu

**FAX to:** 618-453-7961      Attn: Nija Harvey

OR

**Mail to:** School of Accountancy  
Southern Illinois University  
ATTN: SIU SOAR  
Rehn Hall, RM 232 - MC 4631  
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Carbondale, IL 62901

**\*\*Please allow 2-5 business days for delivery\*\***