STUDENT APPLICATION

Priority Application Deadline: February 1, 2012

*NOTE: The current CAMP grant is funded through 6/30/2012 and has a history of prior successful grant renewal. EWU CAMP is in the process of re-applying for federal funding, but cannot guarantee services for the 2012-2013 academic year. A final decision will be made by July 1, 2012.

Return Application to:

College Assistance Migrant Program (CAMP)
203 Monroe Hall
Cheney, WA 99004
Phone: 509-359-6899
Fax: 509-359-2310
www.ewu.edu/camp
What is CAMP?
The College Assistance Migrant Program, referred to as CAMP, is a federally-funded program designed to support students from migrant and seasonal farmworker backgrounds during their first year in college. The program provides students with both financial assistance and support services, with the goal of preparing them to continue their education at a four-year college or university.

CAMP Services
In addition to financial assistance, CAMP provides the following services:
- Study skill courses
- Tutoring
- Academic advising
- Academic skills assessment
- Personal counseling
- Career counseling
- Mentoring
- Financial aid advising
- Scholarship
- Application assistance
- Social and Cultural Activities
- Student leadership training

To Qualify:
To qualify for CAMP, a student must:
- Be permanent resident or citizen.
- Either the student or his/her immediate family member must have worked at least 75 days in the past 24 months in agriculture as a migrant or seasonal farmworker; OR have participated or been eligible to participate in the Chapter 1, Title 1 Migrant Education Program; OR High School Equivalency Program (HEP); OR WIA of 1998 program
- Eligible students must be first year students at EWU.

To Apply:
To begin the application process for CAMP, fill out the application form and return to the address listed below.

Include the following with your application:
- Copy of social security card or permanent resident card
- Personal Statement
- Two recommendation forms (Forms are at the back of the application)
- Copy of your high school transcript or GED
- Copy of your SAT or ACT test scores
- Copy of you and/or your parents previous year Federal Income Tax report.
Please print in ink or type. Answer all questions on the form or indicate “N/A” if not applicable. All information will be kept confidential and used only in determining eligibility and admission to the program.

PERSONAL INFORMATION:

Today’s Date: ____/____/____

Name: __________________________

Last First Middle

Address: __________________________________________________________

PO BOX Number/ Street City State Zip Code

Phone: (____)_____________(____)_____________ Sex: M__ F__ Date of birth: _____/_____/____

Home Cell Month Day Year

E-Mail Address: __________________________________________________________

Have you applied for Financial Aid? ____ Yes ____ No When? _____/_____/____

Residency: ___ US Citizen SSN#: ______-____-____ (attach copy of Soc. sec card)

____ Legal Permanent Resident (attach copy of card)

How did you learn about CAMP? _____________________________________________________________

EDUCATION:

High School: ___________________________ Graduation Date: _________ HS Cum. GPA: _________

Did you earn a GED? If so, when and where completed: _________________________________________

Have you been accepted to EWU? ____Yes ____ No Beginning what quarter? ______________

List previously attended colleges: ___________________________ How many credits earned? _________

What Major(s) are you interested in studying at EWU? ______________________________________________

FOR OFFICE USE ONLY

Eligible and accepted to CAMP: ____ Yes ____ No Date of decision: _____/_____/____

If eligible, verification used: _____COE #______________ _____WIA 167 Program

_____Employer Verification Form _____W2’s

Comments: ________________________________________________________________________________

__________________________________________________________________________________________

CAMP Director/Coordinator Signature: ___________________________ Date: ___________________
FAMILY INFORMATION:

Father’s Information:
Name: ____________________________________
Last       First       Middle
___________________________________________________________________________
PO BOX Number/ Street       City       State       Zip Code       Phone
Place of Employment: __________________________________________________________
Company name       Position
Educational background: Highest grade completed: __________ Degree earned: ____________________

Mother’s Information:
Name: ____________________________________
Last       First       Middle
___________________________________________________________________________
PO BOX Number/ Street       City       State       Zip Code       Phone
Place of employment: __________________________________________________________
Company name       Position
Educational background: Highest grade completed: __________ Degree earned: ____________________

Family Size: ____________ Family Income: ____________________ Family Members in College: ____________

SERVICES OF INTEREST: (check all that apply)

__ EWU admissions fee waiver   __ Academic Advising   __ Tutoring   __ Study skills workshops
__ Placement test waivers   __ Peer Mentoring   __ Career Counseling   __ Financial Aid advising
__ Financial Assistance   __ Leadership opportunities   __ Academic skills assessment   __ College Orientation course
__ Laptop loan   __ Social/cultural activities   __ Textbook loan   __ Other (explain)

PERSONAL STATEMENT:
On a separate page, type an essay of no less than 500 words. Use the following structure as a guideline.

- First paragraph: Introduce yourself, who you are, where you are from, etc.
- Second paragraph: discuss your family background, including work history (what type of farm work have you or your parents performed, and for how long)
- Third paragraph: discuss your educational goals and what motivates you to pursue a higher education.
- Fourth paragraph, include any activities/community service/leadership that you participated in, adverse circumstances/challenges that you have faced, or any information about yourself or your family that you believe is important for the review committee to know.
- Last paragraph: Conclusion…and sign your personal statement!
VERIFICATION OF MIGRANT OR SEASONAL FARMWORKER STATUS

In order to be eligible for services provided by the College Assistance Migrant Program (CAMP) under the guidelines established by the U.S. Department of Education, the applicant or his/her immediate family member must have worked at least 75 days within the last two years in agriculture as a migrant or seasonal farmworker. This includes any activity directly related to the production of crops, dairy products, poultry, or livestock, the cultivation or harvesting of trees, or fish farms. OR Be eligible to participate, or have participated in programs under Subpart 1 of Chapter 1 of Title 1 of the Elementary and Secondary Education Act of 1965, or WIA of 1998 program.

Please check and provide one of the following:

___ Migrant Education Program Identification # (COE): ___________________
   (Obtain from your counselor or migrant home visitor, please attach copy)

___ Letter from employer verifying 75 days of employment within the last 2 years
   (Use attached Employer Verification form)

___ Letter verifying participation in the Washington Farmworker Investment 167 Program

___ W2’s and History of Employment form (attach copy of W2’s and complete information below)

<table>
<thead>
<tr>
<th>Start Date</th>
<th>End date</th>
<th>Name of Company</th>
<th>Type of work performed by employee (picking cherries, apples, etc)</th>
<th>Was the work performed migrant or seasonal?</th>
<th>How many days worked?</th>
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AUTHORIZED STUDENT SIGNATURE:

I understand that in order to be accepted and receive services from College Assistance Migrant Program (CAMP,) the program must have access to student records. I therefore authorize the College Assistance Migrant Program (CAMP) to have access to my records at Eastern Washington University. Records include:

- Grades, transcripts and enrollment documents
- Financial aid information
- Government and State documents
- Test scores

I certify to the best of my knowledge that the information I have provided on this application are complete and true. Failure to disclose and submit complete and accurate information may result in the denial of acceptance to the Eastern Washington University CAMP Program.

Signature___________________________________________ Date ______________________
Dear employer:
The following student, ______________________________________________, has applied to participate in the College Assistance Migrant Program at Eastern Washington University. In order to be eligible for services provided by the College Assistance Migrant Program (CAMP) under the guidelines established by the U.S. Department of Education, the applicant or his/her immediate family member must have worked at least 75 days within the last two years in agriculture as a migrant or seasonal farmworker. This includes any activity directly related to the production of crops, dairy products, poultry, or livestock, the cultivation or harvesting of trees, or fish farms.

Name of employee: _____________________________________________

Last  First  Middle

Name of Company

Name of Supervisor/Employer representative: ________________________________

Phone Number: ____________________________

Type of work performed by employee (picking cherries, apples, etc) | Was the work performed migrant or seasonal? | Start Date | End date | How many days worked?
---|---|---|---|---

I certify that the information provided is complete and accurate according to our records.

Name of Supervisor/Employer representative: ________________________________

Phone Number: ____________________________

Signature of Supervisor/Employer representative          Date
Eastern Washington University CAMP Student Recommendation Form

TO: School Counselor/Principal/Teacher/Advisor

______________________________________________ School: ____________________________
Applicant’s Name

This student has applied to participate in Eastern Washington University’s CAMP. A counselor or other appropriate high school staff must complete the information requested below before the application will be considered.

Return to the applicant in a sealed envelope or mail directly to:
College Assistance Migrant Program
Eastern Washington University
203 Monroe Hall
Cheney, WA 99004

Applicant’s GPA: ____________________________ Applicant’s Attendance Record: ____________________________

Excellent / Good / Fair / Poor

Applicant’s primary areas of interest/aptitude and any additional comments:

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<th>ACADEMIC PREPARATION</th>
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| POTENTIAL TO SUCCEED IN COLLEGE |        |      |         |      |           |      |
*No basis for judgment

Name: __________________________________________ Title: ____________________________

Mailing Address: ________________________________________________________________

Phone: (_____) ______________________ Email: ________________________________

[College Assistance Migrant Program logo]
Eastern Washington University
start something big
Eastern Washington University CAMP Student Recommendation Form

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Mailing Address: ____________________________________________________________________________

Phone: (_____) _______________________________ Email: ______________________________

[Logo of College Assistance Migrant Program]

Eastern Washington University

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