STUDENT APPLICATION

Priority Application Deadline: February 1, 2016

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:
- 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.
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: __________________________________ ___________________________ ___________________ ______

Address: ___________________________________________________________________________ _________

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: _____________________ __________________________________________________________ _______

Address: ___________________________________________________________________________ _________

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)

<table>
<thead>
<tr>
<th>1. EWU admissions fee waiver</th>
<th>2. Academic Advising</th>
<th>3. Tutoring</th>
<th>4. Study skills workshops</th>
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</table>

**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!
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>
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<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
_________________________________________________________________ ___________________

Address     City  State  Zip  Phone Number

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

Name of Supervisor/Employer representative: ____________________________________ ___________

Phone Number: ____________________________

_________________________________________  Date

Signature of Supervisor/Employer representative
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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| PERSONAL QUALITIES    |        |      |         |      |           |      |
| Self-Motivation       |        |      |         |      |           |      |
| Self-Discipline       |        |      |         |      |           |      |
| Initiative            |        |      |         |      |           |      |
| Consistency           |        |      |         |      |           |      |
| Enthusiasm            |        |      |         |      |           |      |
| Cooperation           |        |      |         |      |           |      |
| Relates to Others     |        |      |         |      |           |      |

| POTENTIAL TO SUCCEED IN COLLEGE |        |      |         |      |           |      |

*No basis for judgment

Name: ____________________________ Title: ____________________________

Mailing Address: ______________________________________________________

Phone: (_____) ____________________ Email: ____________________________

College Assistance Migrant Program
Eastern Washington University
start something big
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Name: ________________________________________ Title: _____________________________________

Mailing Address: _________________________________________________________________________

Phone: (_____) __________________________________ Email: ________________________________