



## CAMP APPLICATION

PRIORITY CONSIDERATION FOR CAMP IS DECEMBER 31<sup>ST</sup>

### CAMP Applications are Accepted Year-Round

*The College Assistance Migrant Program (CAMP) is funded by the U.S. Department of Education to help migrant or seasonal farm workers and their children complete college. Financial support as well as counseling, tutoring, academic skills assessment, and mentoring help first year students succeed. After the first year, CAMP continues academic and personal support throughout college.*

## ELIGIBILITY REQUIREMENTS

### Student Must:

- ✓ Be a U.S. citizen or legal resident of the United States. (DACA) students are NOT eligible for CAMP.
- ✓ Be Pell eligible and/or demonstrate financial need.
- ✓ Be accepted to Boise State University as a first year student.

### And meet ONE of the following:

- ✓ Verification of at least 75 days of farm work in the last 2 years. (See Page 4).
- ✓ A copy of the migrant education **Certificate of Eligibility** (COE). COE forms can be obtained from the Migrant Education Coordinator of your school.
- ✓ Qualified or are eligible to qualify for the **Workforce Innovation and Opportunity Act Section 167 (WIOA-167)**. In Idaho the service provider for this program is Community Council of Idaho.

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## CHECKLIST

The following items must be completed and submitted to the CAMP Program before your application will be reviewed.

- |  |   |
|--|---|
| <input type="checkbox"/> Wallet size picture or Selfie                                 | <input type="checkbox"/> Certificate of Eligibility (COE) (If applicable) |
| <input type="checkbox"/> Personal/Education Information Form – <b>pg. 2</b>            | <input type="checkbox"/> WIOA-167 Letter (If applicable)                  |
| <input type="checkbox"/> Student Goals Form– <b>pg.3</b>                               | <input type="checkbox"/> Employment Verification Form (If applicable)     |
| <input type="checkbox"/> Eligibility Information Form – <b>pg. 4</b>                   | <input type="checkbox"/> High School Transcripts (If applicable)          |
| <input type="checkbox"/> Confidential Form – <b>pg.5</b>                               | <input type="checkbox"/> Medical Insurance Card (If covered)              |
| <input type="checkbox"/> Tax Return that was used to file your FAFSA (First Page Only) |   |

### Please mail your completed application to:

Boise State University  
College Assistance Migrant Program  
Mail Stop: 1765  
1910 University Drive  
Boise, ID 83725-1765

### For more information contact:

Guadalupe Rodriguez  
Recruiter  
Office: (208) 426-3926 / (208) 426-3203  
Mobile: (541) 922-8353  
Fax: (208) 426-5250  
Email: grodriguez@boisestate.edu

APPLICATION ALSO AVAILABLE ON THE WEB: <http://education.boisestate.edu/camp/>



Personal Information

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_
Street Address City, State Zip Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Boise State ID, if known \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ NOTE: DACA students are NOT eligible for CAMP

Citizenship: [ ] U.S. Citizen [ ] Legal Permanent Resident

Do you have health insurance? Yes [ ] No [ ] (If yes, provide a copy of your medical card)

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Contact Number: \_\_\_\_\_

My household size is \_\_\_\_\_ (If you have done your FAFSA this should match your FAFSA household size)

Educational Information

Name of High School: \_\_\_\_\_ Cum. G.P.A. \_\_\_\_\_

If you have not taken either the ACT or SAT what date do you plan to test? \_\_\_\_\_

Major(s) you interested in studying: \_\_\_\_\_

Are you taking or have taken AP classes? Yes [ ] No [ ]

Are you taking or have completed dual/concurrent enrollment classes? Yes [ ] No [ ] if yes, please fill out below.

Table with 5 columns: Colleges/Universities, Date(s) Attended, Credits Completed, Credits in Progress, Grades. Contains 3 empty rows.

Student - Parent Release Authorization

Please check boxes and initial.

[ ] \_\_\_\_\_ If I have one and it is needed, I give consent to the CAMP staff to obtain the Migrant Education Certificate of Eligibility (COE) to help me in my admission process to CAMP.

[ ] \_\_\_\_\_ I also certify that the information provided in this application is accurate to the best of my knowledge. If I am awarded CAMP assistance, I agree to do my best in class and follow the rules and regulations of the program and the university to successfully complete one academic year at Boise State University.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent if under 18 \_\_\_\_\_ Date \_\_\_\_\_





Eligibility Information Form

In order to qualify for CAMP the student needs to provide documentation for ONE of the following:

NOTE: If you are not able to provide any of the following items, please call recruiter to find out how you can qualify for CAMP.

- ☐ A copy of the Certificate of Eligibility (COE) for Migrant Education Program
☐ A Workforce Innovation and Opportunity Act Section 167 (WIOA-167) letter
☐ Verification of agricultural work showing that you (your parents or an immediate family member) worked a minimum of 75 days in farm work, dairy or forestry in the last 2 years. Please provide:

- 1) Work history for the past 2 years from the date of the application of the person who makes applicant eligible for CAMP, and
2) Documentation of the 75 days of agricultural work in the last 2 years with either a, b or c:
(a) copies of W-2s, or
(b) copies of check stubs, or
(c) Employer Verification Letter completed by the employer if you cannot provide W-2 or check stubs (ask the recruiter for the letter to give to employer)

Table with 5 columns: Farmworker (checkboxes for Applicant, Parent, Spouse, other), Employer Name, Describe Job Duties (irrigation, topping corn, etc.), Employment Dates (From/To), Total days worked.

For Office Use Only
Recruiter's Notes

The student qualifies for CAMP through:

- ☐ Workforce Innovation and Opportunity Act Section 167 (WIOA-167) Letter.
☐ Certificate of Eligibility (COE) for Migrant Education Program
☐ 75 days of work in agriculture, dairy, or forestry
\_\_\_ See attached copies of W-2 forms
\_\_\_ See attached copies of check stubs that show 75 days of work
\_\_\_ See attached Employer Verification Letter

NOTES:

Three horizontal lines for handwritten notes.



Confidential CAMP Award Recommendation

Name of Student: \_\_\_\_\_ Student's Phone number: \_\_\_\_\_

Name of High School: \_\_\_\_\_

\*To the Student: Please fill the top part of this form and give it to a teacher, counselor, or school administrator who knows you well academically, such as your English, Math, or Science teacher.

\*To the Evaluator: Complete form and mail it to the CAMP Program or scan it and e-mail to: GRODRIGUEZ@BOISESTATE.EDU Additional pages may be attached to this form.

Boise State University
CAMP; MS 1745
1910 University Dr.
Boise, Idaho 83725-1745

Name of Evaluator: \_\_\_\_\_ Telephone: \_\_\_\_\_
Position/Title

Subjects Taught: \_\_\_\_\_ Student's GPA: \_\_\_\_\_ Student's Attendance \_\_\_\_\_
(Excellent, Good, Fair, or Poor)

Are there any known mental health issues? Yes \_\_\_\_\_ No \_\_\_\_\_

Table with 6 columns: Very Weak, Weak, Average, Good, Strong. Rows include Academic Preparation (Mathematics, Reading, Oral/Written Skills, Science), Personal Qualities (Self-Discipline, Self-Motivation, Leadership, Enthusiasm, Cooperation, Relating to others), and Likelihood of success in college.

Other than financial resources, what would prevent this student from succeeding in college?

Identified weaknesses or areas to improve?

Signature \_\_\_\_\_

Date: \_\_\_\_\_