

2012-2013 CAMP Application

# College Assistance Migrant Program



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***Mendocino  
College***

Mendocino College  
1000 Hensley Creek Road  
Ukiah, CA 95482  
[www.mendocino.edu](http://www.mendocino.edu)  
707.467.1008  
[camp@mendocino.edu](mailto:camp@mendocino.edu)



## Application Process Check List College Assistance Migrant Program (CAMP)

Student Name: \_\_\_\_\_ High School: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Cell Number (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Applicant must complete all items before being selected:

Check off

- |     |   |       |
|-----|---|-------|
| 1.  | CAMP Application  | _____ |
| 2.  | Autobiographical Essay  | _____ |
| 3.  | Two CAMP Letters of Recommendation #1 <input type="radio"/> #2 <input type="radio"/>  | _____ |
| 4.  | High School Transcript <input type="radio"/> GED <input type="radio"/>  | _____ |
| 5.  | Eligibility Migrant Education <input type="radio"/> CHDC <input type="radio"/> Employment Verification <input type="radio"/>                                  | _____ |
| 6.  | Mendocino College <b>English and Math Placement Tests</b>   | _____ |
| 7.  | U.S Citizen Yes <input type="radio"/> No <input type="radio"/><br>Copy of Birth Certificate <input type="radio"/> If you answer (Yes) to item 9, skip item 10 | _____ |
| 8.  | <u>Signed copy of Student's Residency Card (Front &amp; Back)</u>   | _____ |
| 9.  | Copy of Student's Drivers' License or ID  | _____ |
| 10. | Signed copy of Student's Social Security Card   | _____ |



**Mendocino  
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**COLLEGE ASSISTANCE MIGRANT PROGRAM**

**Mendocino Community College**

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.

<b><i>Program Services</i></b>	<b><i>To Apply</i></b>
<p>In addition to first-year tuition, CAMP provides the following services:            Medical/Vision assistance            Transportation            Study skills courses            Tutoring            Academic advising            Personal counseling            Career counseling            Book Voucher            Monthly stipend</p>	<p>To begin the application process for CAMP, fill out the forms in this booklet and return it to the address listed below. Include with your application the following:</p> <p>Two (2) letters of recommendation from people who know you, your work, and your goals. You might ask a teacher, a pastor, a coach or an employer.</p> <p>A copy of your high school transcript or GED (either official or unofficial). If you will be enrolled in high school beyond the date you submit your CAMP application, please have a final copy of your transcript sent upon graduation.</p>
<p><b><i>To Qualify</i></b></p>	<p>Personal Statement (see page three).</p>
<p>To qualify for this program, a student must:            Be from a migrant/seasonal farmworker background. Either the student or his/her parents must have worked at least 75 days in the past 24 months, or have participated in a Chapter 1, Title 1, Migrant Education Program, High School Equivalency Program (HEP), or WIA of 1998            Enroll in at least 12 credit hours at Mendocino Community College and maintain a minimum 2.5 GPA.            Demonstrate financial need according to federal income guidelines            Not be beyond the first year in college.</p>	<p>A copy of your Mendocino College English and math assessment scores.</p> <p>For additional information you may call 707-467-1008.</p>

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El Programa de Asistencia para Migrantes (CAMP) es para individuos con historia en trabajo migrante o trabajo en agricultura estacional. CAMP provee asistencia financiera, y consejos académicos para personas que quieren eventualmente asistir a una Universidad de cuatro años.

<b>Servicios</b>	<b>Para Solicitar</b>
<p>CAMP proporciona a sus estudiantes los siguientes servicios:</p> <ul style="list-style-type: none"> <li>Asistencia médica/visión</li> <li>Transportación</li> <li>Cursos para desarrollar habilidades</li> <li>Tutoría</li> <li>Consejería Académica</li> <li>Consejería Personal</li> <li>Consejería en Carreras</li> <li>Dinero para la compra de libros por semestre</li> <li>Estipendio Mensual</li> </ul>	<p>Para empezar el proceso de aplicar para CAMP, llene la solicitud adjunta y regreséla a la dirección que aparece al fin de esta página:</p> <p>Dos (2) cartas de recomendación de personas que lo/la conocen a usted, y sus metas personales. Puede pedirle a un maestro(a), consejero(a), un pastor, o patrón que le escriba la carta.</p> <p>Una copia de sus transcripciones de secundaria o GED (oficial o no oficial). Si todavía se encuentra asistiendo la secundaria cuando aplique para CAMP, por favor envíenos una copia de Nuevo al completar sus estudios de la secundaria.</p> <p>Declaración personal (vea a pagina tres).</p> <p>Una copia de sus exámenes de aptitud (Inglés y matemáticas).</p> <p>Para recibir más información, puede hablar al (707) 467-1008.</p>
<p><b>Para Calificar</b></p>	
<p>Para calificar para este programa, el estudiante tiene que:</p> <ul style="list-style-type: none"> <li>Tener que haber trabajado en trabajos relacionados con agricultura migrante/temporal, haber participado en los programas de Capítulo 1, Equivalencia de Secundaria (HEP), o calificar bajo el programa WIA de 1998.</li> <li>Inscribirse en mínimo 12 créditos de colegio en Mendocino College y mantener un promedio de 2.5 para permanecer en el programa.</li> <li>Demostrar la necesidad financiera de acuerdo a las líneas de ingreso federal.</li> <li>No haber completado el primer año académico universitario.</li> </ul>	

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**Application**

NAME \_\_\_\_\_ SS# \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CELL PHONE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

Name of school attended \_\_\_\_\_

- 1. Have you or your parents been employed in agricultural-related work at least 75 days in the past 24 months? ..... Yes  No
- 2. Did you participate in the Migrant Education Program while in High School? ..... Yes  No
- 3. Have you ever been enrolled in college? ..... Yes  No
- 4. Are you the first in your family to attend college? ..... Yes  No

Have you obtained and completed the Financial Aid Form (FAFSA) to determine if you are eligible for money to assist you with your college education? ..... Yes  No

If no, indicate if you would like information on FAFSA. .... Yes  No

If yes, indicate whether you have been awarded any financial assistance for your education. .... Yes  No

6. Will you need to work while attending college? ..... Yes  No

7. How will you travel from home to class? \_\_\_\_\_

Date you received, or expect to receive, your high school diploma or GED: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Mail or drop off completed application and materials to:**

Mendocino College  
CAMP Program  
1000 Hensley Creek Road  
Ukiah, CA 95482



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**Financial Eligibility Form 2010**

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

**Step – 1.** Circle the correct number of people in your household.

**Step – 2.** Look at **Taxable Income** figure on the same line as the number you circled in Step 1.

**Step – 3.** If your family’s **Taxable Income** from last year’s taxes was less than the number in Step 2, circle less. If it was more, circle more.

**NOTE:** *Taxable Income* is not the same as your gross, or adjusted gross income. When looking at your taxes for 2009, look at the following lines on these forms:

Form 1040 – Line 39, Form 1040A – Line 25, Form 1040EZ – Line 6

<b>Step 1</b>	<b>Step 2</b>	<b>Step 3</b>
Number of People in Your Household	Taxable Income for 2010	Was Your Taxable Income Less or More?
1	\$15,600	Less or More
2	\$21,000	Less or More
3	\$26,400	Less or More
4	\$31,800	Less or More
5	\$37,200	Less or More
6	\$42,600	Less or More
7	\$48,000	Less or More
8	\$53,400	Less or More

(If there are more than 8 members in your family, please contact the CAMP office for assistance.)

**Dependant Students:** If you are a dependent student your parent must sign this form verifying the accuracy of the information on this form. Dependent students are anyone claimed as a dependent by either parent or considered to be dependent by federal financial aid guidelines. Generally, if you are less than 24 years old, single, and have not served in the military, you are considered to be dependant. **The income you report should be the combined income for the family.**

**Statement:** To the best of my knowledge, the information that I have provided on both sides of this form is accurate and I am willing to provide tax forms or other needed documentation in order to verify this information.

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

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



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**EMPLOYMENT VERIFICATION OF MIGRANT OR SEASONAL  
FARMWORKER**

In order to be eligible for services provided by College High School Equivalency Program (HEP) under the guidelines established by the U.S. Department of Education, a student or his/her parent(s), legal guardian(s) or 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, livestock, cultivation or harvesting of trees, ranching, fishery, nursery, and forest work.*

OR

Be eligible to participate, or have participated within the past two years, 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.

**SECTION A**

**This section is to be signed by the employer, home-school consultant, high school counselor, HEP recruiter or other agency representative.**

I, \_\_\_\_\_ am able to attest to the fact that  
(EMPLOYER, MIGRANT EDUCATION REP., ETC.)

\_\_\_\_\_ meets the conditions stated as a  
(STUDENT)

- Migrant/Seasonal Farmworker; Type: \_\_\_\_\_ (please state)  
Dates Worked: \_\_\_\_\_ to \_\_\_\_\_
- Chapter, 1, Title 1 Migrant Education Program participant
- WIA Program participant
- HEP participant

\_\_\_\_\_  
SIGNATURE TITLE

\_\_\_\_\_  
ADDRESS CITY STATE ZIP

\_\_\_\_\_  
PHONE NUMBER DATE

**SECTION B**

**This section is to be signed by the Student, or parent, who meets the requirements and is applying to the College Assistance Migrant Program at Mendocino College.**

I, \_\_\_\_\_, am eligible for CAMP support.

\_\_\_\_\_  
STUDENT SIGNATURE DATE

\_\_\_\_\_  
PARENT SIGNATURE (ONLY WHEN APPLICABLE ACCORDING TO THE REQUIREMENTS ABOVE) DATE



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## BACKGROUND QUESTIONNAIRE

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

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

1. List the names of siblings that have attended or are currently attending college/university:

\_\_\_\_\_

2. Explain how your family is supporting you to attend college

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Please share any experiences you have had living away from home:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What is the length of time you have lived away from home:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Explain possible family or health issues that may arise while you attend school or live away from home:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Briefly discuss your need for the support services offered by CAMP:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_