



College Assistance Migrant Program Application 2018.19

Notice: We recommend that you **apply and complete your file as early as possible** to receive CAMP aid. If you have any questions, please contact the CAMP Office using the information at the bottom of the page. Please note you must also complete the steps to become a Mendocino College Student and to apply for financial aid listed on page 2. CAMP staff will follow up with you regarding those steps if you are accepted to the program.

CAMP Application Filing Date: OPEN. The sooner, the better!

Application Process Check List (Keep for your records)

Applicant must complete all items in this application before being selected:

- | | Check off |
|---|--------------------------|
| 1. Personal data form & background questionnaire (pages 3 & 4) | <input type="checkbox"/> |
| 2. Autobiographical Essay (instructions on page 5) | <input type="checkbox"/> |
| 3. CAMP Letters of Recommendation OR forms (pg. 7/8) #1 <input type="radio"/> #2 <input type="radio"/> | <input type="checkbox"/> |
| 4. High School Transcript <input type="radio"/> OR HSE Certificate <input type="radio"/> | <input type="checkbox"/> |
| 5. <u>Signed</u> CAMP Eligibility Form (page 6) | <input type="checkbox"/> |
| 6. <u>Copy of U.S. Birth Certificate</u> OR
<u>Signed copy of Student's Residency Card (Front & Back)</u> | <input type="checkbox"/> |
| 7. <u>Copy of School OR CA ID</u> | <input type="checkbox"/> |
| 8. <u>Signed copy of Student's Social Security Card</u> | <input type="checkbox"/> |

Please mail items to:

COLLEGE ASSISTANCE MIGRANT PROGRAM
Mendocino College
1000 Hensley Creek Rd
Ukiah, CA 95482

If you have any questions or need assistance, please contact the CAMP Program:

Phone: 707-467-1026
Email: camp@mendocino.edu
Text: 707-671-5862
Fax: 707-468-3212

How to Become A Mendocino College Student

To apply visit: <http://www.mendocino.edu/admissions>

Step 1 - Submit an Application for Admission

Step 2 - Complete a New Student Orientation

Step 3 - Take Assessment Tests & Submit Transcripts

Step 4 - Meet with a Counselor (*meet with the CAMP counselor if accepted to the program*)

Step 5 - Register for Classes and Pay Fees (*CAMP provides support if accepted to the program*)

Step 6 - Buy Books & Supplies (*CAMP provides support if accepted to the program*)

Step 7 - Check Out Additional Resources



How to Apply for Financial Aid

To apply visit:

<http://www.mendocino.edu/student-services/financial-aid/apply-financial-aid>

Step 1: Submit the Free Application for Federal Student Aid (FAFSA)

Students must file a FAFSA every year to determine their eligibility for financial aid. The application is available every October 31st. It is recommended that students file the FAFSA prior to the March 2nd priority date in order to be considered for Cal Grants. The FAFSA can be completed by visiting www.fafsa.ed.gov

(Mendocino College's school code is 011672)

Step 2: Submit Requested Documentation to the Financial Aid Office

Once the FAFSA has been submitted, Mendocino College will receive the student's information for processing. If additional information is needed to process the file, the Financial Aid Office will use Web Advisor to notify students.

Step 3: Review Financial Aid Awards

After a student's financial aid file is processed and completed, the awarding of eligible financial aid begins. Financial aid awards are based on the student's eligibility for each particular aid program. Financial aid awards can be reviewed by visiting Web Advisor.

Step 4: Apply for Scholarships

Students should visit www.mendocino.edu to review the information available on scholarships. An application needs to be completed to be considered. Close attention must be paid to application requirements and deadlines.

Step 5: Review Other Financial Aid Programs

Students are encouraged to visit www.mendocino.edu and review information on available financial aid programs. There are multiple programs to help students fund their education. (Ex: BOG Fee Waiver, EOPS, CAMP, Chafee Grant, etc.)

Step 6: Receive Financial Aid

Based on a student's eligibility, the first financial aid disbursements begin the first week of classes. A student must be enrolled, awarded and be meeting financial aid eligibility requirements to receive financial aid for the semester.

BACKGROUND QUESTIONNAIRE

Please do not leave any questions blank. Use black or blue ink.

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.

Mendocino College
College Assistance Migrant Program

PERSONAL RESPONSE

Your responses to the following prompts are an integral part in determining your admission to the program. Please follow the instructions listed below carefully.

Please type a 1 paragraph response to each of the following prompts:

- Please discuss your family background (How many family members? Where are they from? How your family supports you?). Include your or your parent (s)/immediate family member work history: what type of farm work you or your parent(s)/immediate family member have performed, how long, etc.

- Discuss what your high school educational experience has been like so far (obstacles, triumphs, etc.). How have these experiences influenced your academics and you as a student?

- What are your educational goals? What motivates you to pursue a higher education?

- How do you feel you would benefit from the CAMP program? Please add any other information about yourself or your family that you believe is important for the admissions committee to know.

(Please submit your typed responses on a separate page, OR if you are filling out an *online* application, please type your responses on the following 2 pages)

CAMP ELIGIBILITY

To be eligible to participate in the CAMP program at least one parent, self, or immediate family member must be a **seasonal or migrant farm worker OR the applicant must have participated in the Migrant Education Program**. “**Seasonal Farm Worker**” means a person who, currently or within the last 24 months, was employed for at least 75 days in farm work, and whose primary employment was in work on a temporary or seasonal basis (that is, not a constant year-round activity). “**Migrant Farm Worker**” means a person whose employment requires travel that prevents him or her from returning to his or her home within the same day. **In addition, you must have a high school diploma, show financial need, and enroll full-time at Mendocino College.**

To determine seasonal/migrant farm worker status, you must answer all of the following questions:

14. I qualify as (check one):

Seasonal Farm Worker: Migrant: Migrant Education Program Participant

15. I meet the eligibility requirement based on (*if Migrant Education Program Participant, indicate “Self”*):

Father: Mother: Self: Immediate Family member:

Relation of **Immediate Family member to applicant** : _____

Family member who meets seasonal/migrant farmworker criteria (*if not a Migrant Education Program Participant*):

Name: _____ Phone #: (____) _____

Address: _____
PO Box/Street City State Zip Code

16. Name of **employer** for qualifying member listed in #15; as stated in W-2: (*if Migrant Education Program participant, indicate N/A*): _____

Employer address: _____
PO Box/Street City State Zip Code

Number of months employed in **2015**: _____ Number of months employed in **2016/2017**: _____

Type of work he/she performs. (Explain):

17. Certificate of Eligibility (COE)# (*if Migrant Education Program Participant*) _____

18. In order for your application to be considered you will need to mail/fax the following documents: A) W-2 forms of qualifying family member showing the employer listed in #15 OR Copy of COE (Certificate of Eligibility)

● CERTIFICATION ●

I certify that the information reported above is accurate and that my family’s primary employment has been seasonal or migrant farm work in the last two years, or that I was a participant in the Migrant Education Program. I further understand that any false statement subjects me to immediate dismissal from the program.

Signature

Date

If you are under 18 years of age, parent signature is required.

Parent’s Signature

Date

CONFIDENTIAL RECOMMENDATION

Student's Name: _____ High School: _____

Address: _____ Ph. #: (_____) _____ Birth Date: ___/___/___

Please take this form to a teacher, counselor, school administrator, or employer who knows you. Ask this person to complete the form.

Name of Evaluator: _____ Position: _____

School/ Organization: _____ Ph. # (_____) _____

Address: _____

The above named student is applying to the College Assistance Migrant Program at Mendocino College. The College Assistance Migrant Program (CAMP) assists students who are migratory or seasonal farmworkers (or children of such workers) enrolled in their first year of undergraduate studies at a college. Services include counseling, tutoring, college skills workshops, financial aid stipends, health services, and housing assistance to eligible students during their first year of college. Please evaluate the applicant's potential for success in college relative to his/her peers, and please return to the applicant in a sealed envelope or mail/fax directly to the address below. Questions? Contact CAMP at 707-467-1026. Thank you !

**College Assistance Migrant Program
Mendocino College
1000 Hensley Creek Rd
Ukiah, CA 95482
Fax: 707-468-3212**

How long have you known this student? _____ In what capacity? _____

PERSONAL CHARACTERISTICS	STRONG	AVERAGE	WEAK
ACADEMIC DETERMINATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LEADERSHIP QUALITIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MOTIVATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MATURITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Highly recommend Recommend Do Not Recommend

Additional Comments: (please feel free to send an attachment)

Signature: _____ Date: _____

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