CSULB College Assistance Migrant Program (CAMP) Application

*Keep this page for your records*

CSULB CAMP Eligibility:

1. A first-year college undergraduate
2. Enrolled in at least 12 units per semester (full-time status)
3. Must be a U.S. Citizen or Permanent Resident
4. Meet **ONE** of three options:
   a. Student must be a participant or have participated in a Migrant Education Program (MEP)
   b. A student and/or an “immediate family member” who has spent a minimum of 75 days during the past 24 months as a migrant or seasonal farmworker
   c. Participation in the National Farmworker Jobs Program (NFJP) and/or other services and activities established under Sec. 167 of the Workforce Investment Act (WIA)

Important Senior Year Deadlines:

1. CSULB Application Deadline
2. SAT/ACT Test Deadline
3. EOP Application Deadline
4. FAFSA Application Deadline
5. **CAMP Application Deadline**
6. ELM/EPT Placement Test Deadline
7. Attend CSULB Required “SOAR” Orientation

<table>
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<tr>
<th>Completed Documents</th>
<th>Date Submitted</th>
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<tbody>
<tr>
<td><strong>CAMP Application</strong> (Please include personal statement and most high school transcript, unofficial is acceptable)</td>
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<tr>
<td><strong>CSULB Application:</strong> Online at CSUMENTOR.EDU</td>
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<td><strong>EOP Application:</strong> Fill out the EOP Application on CSU Mentor to be considered for EOP. Your EOP file will be complete once you have submitted the completed Applicant Information Form along with two Recommendation Forms.</td>
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<tr>
<td><strong>Supporting Eligibility Documents:</strong> Certificate of Eligibility (COE); copy of Check Stubs, W-2 Tax Form(s) or Letter From Employer; or Eligibility Contract from Section 167 of the Workforce Investment Act</td>
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<tr>
<td><strong>Financial Aid FAFSA Application:</strong> Online at FAFSA.ED.GOV</td>
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Personal Information: (Please Print Legible)

First Name: ___________________________ Middle Initial _________ Last Name: _______________________________

Address: ______________________________ City: __________________________ State: ______ Zip Code: ______

Primary Number: ________________ Secondary Number: __________________ Date of Birth: __/__/__

Sex (Female/Male): _______ E-Mail Address: ____________________________ CSULB ID Number: __________

Citizenship Information: (Please check either U.S. Citizen or Permanent Resident)

Residency: Are you a U.S. Citizen? [ Y ] [ N ]

Permanent Resident? [ Y ] [ N ] If Yes, please provide, A#: A __________________________

Eligibility Information

☐ Participated in or be eligible to participate in the Migrant Education Program.
   - Provide Certificate Of Eligibility # __________________________

☐ You or one of your immediate family members has spent a minimum of 75 days during the past 24 months as
   a migrant or seasonal farmworker.
   - Provide copy of Check Stubs, W-2 Tax Form(s), or Letter From Employer

☐ Qualified or are eligible to qualify for National Farmworker Jobs Program (NFJP).
   - Provide a copy of the Eligibility Contract from Section 167 of the Workforce Investment Act

Other Information

Current High School: ___________________________ Anticipated graduation year: __________

Expected Major at CSULB: ________________ ACT Score (If Applicable): _____ SAT Score (If Applicable): ______

Are you a 1st generation college student?: [ Y ] [ N ] How did you learn about CAMP?: __________________________
(Neither parent received a college degree)

Personal Statement

On a separate page, in essay format, please type (no more than 500 words) your response to the following question:

What two people would you most like to invite to dinner? Why?
(Past, Present, Real or Fictitious)

Please remember to include your name on personal statement.

Signature Certification

I certify that I am eligible for the CSU-Long Beach CAMP and that the above information is complete and accurate according to our records. I further understand that any false statement will subject me to immediate dismissal from the program (Note: If this document is e-mailed, please sign the copy to be filed in the CAMP office).

Print Name ___________________________ Applicant Signature (Required for all applicants.) ___________________________ Date __________

Print Name ___________________________ Parent Signature (If Participant under 18 years of age, a parent/legal guardian signature is required) ___________________________ Date __________

____________________ Date received