Support Services:
- CAMP scholarship
- Academic advising
- Tutoring
- Academic/enrichment workshops
- Cultural educational events
- CAMP computer lab/printing

Eligibility
To qualify for the College Assistance Migrant Program, student must meet the following requirements:
- Be a citizen or legal permanent resident of the U.S.
- Submit a FAFSA and/or demonstrate financial need
- Be accepted to Idaho State University and enroll in the Pocatello campus
- Be a first-year student (no previous college enrollment), excluding dual enrollment
- Be pursuing a four-year degree (College of Technology programs do not qualify)

In addition, student must meet one of the following:
- A student who has participated, or is currently participating in the Migrant Education Program (MEP) K - 12.
- Qualified or are eligible to qualify for the Workforce Innovation and Opportunity Act, Section 167 (WIOA-167)
- Students who themselves, or someone in their immediate family has worked as a migrant or seasonal farm worker in the areas of agriculture,

Application Checklist
Program has limited availability. To complete the application process make sure to have completed the following:
- Complete the attached application in its entirety
- Complete the personal essay
- Parent signature
- High school transcript
- Teacher evaluation form
- Proof of eligibility
- FASFA Completion page

contact@isu.edu | (208) 269-5523 | isu.edu/camp
Student Information

Legal First Name ________________________________________ M.I. _____ Legal Last Name ________________________________

Preferred Name ___________________________ Date of Birth (mm/dd/yyyy) _______/_____/______

Gender Identity (select one)       ☐ Male       ☐ Female       ☐ Other (Please Specify) ________________________________

Contact Information

Permanent Mailing Address __________________________________________________________

Apt ________ City __________________________ State ___________ Zip ______________

Student Primary Email ___________________________ Student Secondary Email ___________________________

Student Cell Phone ___________________________ Student Home Phone ___________________________

Citizenship Information (select one)

☐ U.S Citizen

☐ Permanent Resident

If born outside the U.S., please specify which country __________________________________

Ethnicity/Race

Please select ethnicity/race

☐ American Indian/Alaskan Native       ☐ Black/African American       ☐ Asian

☐ Native Hawaiian/Pacific Islander      ☐ White/Caucasian       ☐ Hispanic/Latino

High School Information

Graduating High School __________________________________________________________

When will/did you graduate from high school or complete your GED? __________________________________

What is your current GPA? ______________

College Information

Have you been accepted into ISU to study on the Pocatello campus?       ☐ Yes       ☐ No

Have you taken college credit courses elsewhere?       ☐ Yes       ☐ No

If yes, how many credit have you earned? _____________________________

Note: If you have received credit with a college or university, you will need to provide an official transcript to ISU.

What is your intended major? _____________________________________________

Are you interested in entering ISU Bengal Bridge Program?       ☐ Yes       ☐ No       ☐ More information please

Do you plan to live on campus?       ☐ Yes       ☐ No

Are you eligible to receive federal financial aid (FAFSA) or pell grant?       ☐ Yes       ☐ No

Will you be pursuing a four year degree?       ☐ Yes       ☐ No

This page is to be filled out accurately by the student applying for the College Assistance Migrant Program. Please use black or blue ink to fill out the form. If you have any questions please do not hesitate to reach out to Lilian Fonesca via email at lilianfonesca@isu.edu or by phone or via text at 208-269-5523.
Family Information  Use only Blue or Black ink, no pencil.

Guardian/Parent #1 First Name ___________________________________________ M.I. _______ Last Name ________________________________

Guardian/Parent #1 Cell/Home phone ___________________________ Guardian/Parent #1 Email ________________________________

Guardian/Parent #2 First Name ___________________________________________ M.I. _______ Last Name ________________________________

Guardian/Parent #2 Cell/Home phone ___________________________ Guardian/Parent #2 Email ________________________________

Guardian Mailing Address ___________________________________________________________________________________________________________________________________________

Apt _________ City ___________________________ State ________________ Zip ___________________________

Personal Essay

In your own words, please type a one page essay telling us about your academic and career goals, yourself, your family background (including work history) and your experiences. Include information you think might help us to get to know you better. Please attach this essay to the application.

Application Certification

If you (the student) is under 24 years of age, a parent/guardian signature is required.

• I certify that all of the information contained in this application is true and complete to the best of our knowledge.
• I certify that the information provided concerning citizenship and eligibility is accurate.
• I understand that the completion of this application does not guarantee acceptance into ISU CAMP.
• I agree to observe all the rules and regulations of ISU and its CAMP program.
• I understand that failure to do so may result in my being terminated from the CAMP program.

Student Signature: __________________________________________________________________________________________ Date: ________________

Parent/Guardian Signature: __________________________________________________________________________ Date: ________________

Program Release Certification

This release form enables ISU CAMP to obtain necessary academic and personal information and records, including grade reports and transcripts, admission and enrollment, financial aid eligibility and awards, US residency status, demographic and contact information, for the purpose of determining eligibility, developing education plans, and recording and collecting program statistics. I authorize ISU CAMP to use information and images related to my program participation in newsletters, web pages, and other program-related publications. This information may be shared with the US Department of Education and Idaho State University and CAMP personnel in accordance with federal regulations and university policy. My signature below indicates that I hereby authorize the release of my academic and personal records to the College Assistance Migrant Program at Idaho State University for the purpose of serving my needs and meeting its federal regulations.

Student Signature: __________________________________________________________________________________________ Date: ________________

Office use only.

☐ Personal Essay  ☐ HS Transcript  ☐ Parent Signature  ☐ Teacher Recommendation  ☐ Eligibility Documentation
☐ Employment Verification Form  ☐ COE  ☐ W10A-167  ☐ 4 year degree

GPA (Transcript) _________  Major ___________________________

CAMP Advisor Initial ______________________ Date ________________