



CAMP COLLEGE ASSISTANCE MIGRANT PROGRAM

CALIFORNIA STATE UNIVERSITY SAN MARCOS

College Assistance Migrant Program (CAMP)

333 S. Twin Oaks Valley Road • San Marcos, CA 92096-0001

Telephone: (760) 750-4280 • camp@csusm.edu

2024-2025 CAMP Student Application

Priority Deadline: March 8, 2024

Please complete the form to its entirety. Must be typed. Do not leave any blanks, if not applicable state "NA". To submit: Download this form and save it to your desktop, complete it and then send it as a file attachment to camp@csusm.edu.

Personal Information

Last Name: (Please print) First Name: (Please print) M.I.:

Address: City: State: Zip Code:

Home Phone: Cell Phone: E-mail:

Date of Birth: Gender: Male Female Other Social Security Number:

High School: GPA: High School Graduation Date:

1st Generation College Student: Yes No Citizenship: U.S. Citizen Permanent Resident #:

Disabilities: Yes No If "yes", please list here:

Health Insurance: Yes No Health Insurance Carrier: Policy #:

Vegetarian: Yes No Shirt Size: Small Medium Large X-Large Other:

Do you know any current or past CAMP students? Please list here:

In Case of Emergency

Name: Phone:

Address: City: State: Zip Code:

CAMP Eligibility

To qualify for CAMP, you must have participated in one of the following, please check all that apply:

- 1. A participant of the Migrant Education Program? Yes No
2. You or your parents worked as seasonal and/or migrant farm workers for at least 75 days as the primary means of employment in the past 24 months? Yes No

College Preparation

- 1. Have you submitted your Free Application for Federal Student Aid (FAFSA)? Yes No
2. What are your housing plans for your 1st year at CSUSM? Off Campus On Campus Other:
3. What other colleges/universities are you considering attending?

I certify that all information stated is true and correct to the best of my knowledge.

Student Signature: CSUSM Student ID #: Date: (if student is a minor, signature is required)

Parent/ Guardian Signature: Date:



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◀ 2022-2023 CAMP Student Application ▶

Priority Deadline: March 10, 2023

Please answer ALL the questions listed below. Your responses must be typed. You may use a separate piece of paper if needed.
To submit: Download this form and save it to your desktop, complete it and then send it as a file attachment to camp@csusm.edu.

Student Name: _____ **CSUSM Student I.D. #:** _____

1. Why would you like to attend CSUSM? Discuss your career and personal goals.
2. Are there any particular circumstances, school experiences, or people that influenced your preparation or motivation to attend college (e.g., cultural/financial background, family, teachers, schools you attended)? Please explain.
3. Please tell us more about yourself. Is there any additional information you would like CAMP to consider in determining your admission to the program?
4. Please explain how your family is supporting you to attend college.
5. Briefly discuss your need for the support services offered by CAMP.