

# Recommendation Form

## College Assistance Migrant Program (CAMP)



**This form should be completed by school counselor, teacher, coach, or supervisor. A minimum of two recommendation forms are required. Please provide each recommender adequate time to complete the form and return it to our office.**

***At least one recommendation form must be completed by a teacher.* Recommendation forms must be sealed in an envelope by the recommender or directly emailed to: [camp@columbiabasin.edu](mailto:camp@columbiabasin.edu) or mailed to: College Assistance Migrant Program, 2600 N. 20th Avenue, MS-H9, Pasco, WA 99301**

Recommender

Applicant's Name

In what capacity have you known the student? (Check all that apply)

☐ Teacher   ☐ Counselor   ☐ Mentor   ☐ Coach   ☐ Supervisor   ☐ Other (Please specify)

How long have you known the student?

What is this student's greatest accomplishment?

In your opinion, how will this student adapt to a college setting? Will he/she be successful?

What barriers could stop the student from completing his/her first year of college?

Why would the student benefit from participating in the CAMP program?

**Only 40** students will be accepted into the program.

Applications will be accepted until all 40 spots have been filled but early submissions will have priority.

## Student Evaluation College Assistance Migrant Program (CAMP)

For each section below, please choose a numbered category that best describes the applicant. Each box should have a single number.

**Personal Qualities: (5) Excellent (4) Above Average (3) Average (2) Below Average (1) Unsatisfactory (0) N/A**

Motivation to attend college	<input style="width: 50px; height: 25px;" type="text"/>	Ability to handle adversity	<input style="width: 50px; height: 25px;" type="text"/>
Time management	<input style="width: 50px; height: 25px;" type="text"/>	Consistency	<input style="width: 50px; height: 25px;" type="text"/>
Self-Initiative	<input style="width: 50px; height: 25px;" type="text"/>	Determination/Perseverance	<input style="width: 50px; height: 25px;" type="text"/>
Willingness to ask questions	<input style="width: 50px; height: 25px;" type="text"/>	Respect for others	<input style="width: 50px; height: 25px;" type="text"/>
Work Ethic	<input style="width: 50px; height: 25px;" type="text"/>	Honesty	<input style="width: 50px; height: 25px;" type="text"/>

**Need for CAMP Services: (5) High Need (3) Average (1) Low (0) No Need**

Academic & Career Advising	<input style="width: 50px; height: 25px;" type="text"/>	Personal Support/Mentoring	<input style="width: 50px; height: 25px;" type="text"/>
Financial Assistance	<input style="width: 50px; height: 25px;" type="text"/>	Other	<input style="width: 400px; height: 25px;" type="text"/>

### Recommendation:

CAMP's success is measured in two specific ways. We appreciate your utmost attention to the following before making a recommendation. 1. A student enrolling full-time (12 credits or more) each quarter (fall, winter, spring) and completing at least 36 credits for the academic year. 2. A student returning for their second year the subsequent fall quarter.

1. Do you believe the student will stay enrolled **full-time** and return for their second year in the fall?

☐ Yes   ☐ No   Explain: \_\_\_\_\_

2. Please indicate the strength of your recommendation:

☐ Recommend with certainty   ☐ Recommend   ☐ Recommend with reservation

Signature \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**For further questions or inquiries, please contact:**

(509) 542-4602  
camp@columbiabasin.edu

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