College Assistance Migrant Program (CAMP)
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Program Description
The College Assistance Migrant Program (CAMP) assists students who are migratory or seasonal farm workers (or children of such workers) enrolled in their first year of undergraduate studies at an IHE. The funding supports completion of the first year studies. Competitive five-year grants for CAMP projects are made to IHEs or to nonprofit private agencies that cooperate with such institutions. The program serves approximately 2,400 CAMP participants annually.

Types of Projects
Services include outreach to persons who are eligible, counseling, tutoring, skills workshops, financial aid stipends, health services, and housing assistance to eligible students during their first year of college. Limited follow-up services are provided to participants after their first year.


Progress Report

Student: ____________________________________________
Class: ____________________________________________  Professor: ____________________________________________

Please complete this form according to the student’s performance during this period,

1. Classroom participation: Excellent □ Good □ Fair □ Poor □ N/A □
2. Written assignments: Excellent □ Good □ Fair □ Poor □ N/A □
3. Class attendance: Excellent □ Good □ Fair □ Poor □ N/A □
   Number of absences, if any: ____________
4. Ability to transfer information: Excellent □ Good □ Fair □ Poor □ N/A □
5. General attitude toward course: Excellent □ Good □ Fair □ Poor □ N/A □
6. Student’s ability to grasp ideas, concepts and the ability to apply principles: Excellent □ Good □ Fair □ Poor □ N/A □
7. Based on overall academic performance, student’s progress is: Excellent □ Good □ Fair □ Poor □ N/A □
8. Could the student benefit from academic tutoring? Yes □ No □
   If yes, please specify area need of development: ____________________________________________
9. What grade has the student earned? ____________________________________________
10. Comments: ____________________________________________________________________________

________________________________________________________________________

Professor’s Signature: ____________________________ Date: ____________________________
Student's Signature: ____________________________ Date: ____________________________

For questions or information please contact Alma Young at ayoung@abac.edu or 229-391-4883