

RETURN COMPLETED APPLICATIONS TO KELLY REA AT CBC ADDRESS LISTED BELOW.



WHERE YOUR FUTURE BEGINS!
3800 Charco Road, Beeville, TX 78102
OFFICE: (361) 354-2529
FAX: (361) 354-2242
TOLL FREE: 1-866-722-2838 ext. 2529

Alice Camp
Beeville Camp
Kingsville Camp
Pleasanton Camp

FOR OFFICE USE ONLY
Date Received
Taxable Income
Non Taxable Income
Eligible
L.I.
L.I./F.G.
F.G. Only
Accept/Reject Date
Elig. Year
Comments



COUGAR CAMP APPLICATION

APPLICANT INFORMATION

Name: Last First M.I.

SS #: Gender: Male Female Date of Birth:

Physical Address: Street Name and No. Apt. City & State Zip

Mailing Address (if different): Street Name and No. Apt. City & State Zip

Phone Number: Home Phone Cell Phone Email:

U.S. Citizen? Yes No Ethnic Group: Hispanic Native American-Alaskan Native African American White Asian-Pacific Islanders Others

High School & Date of Graduation:

Are you employed? Yes No If yes, where and how many hours per week?

If you are selected for Cougar Camp, will you need transportation to the CBC Beeville campus? Yes No

EDUCATION INFORMATION

What high school academic track are you pursuing?

Minimum Plan Distinguished/Honors Plan Recommended Plan

GPA Average:

Have you taken the TAKS test? Yes No

Check any or all portions of the TAKS exam you have passed: (indicate your scores):

Table with columns: Section, Passed, Not Passed, Not Taken, Scores, Test Date. Rows: Reading, Writing, Math.

Check your goal after high school?

2-year college 4-year college Work Military Undecided Other

Have you chosen any particular college(s) or vocational school(s)? Yes No

If yes, please list:

Do you know what type of major/career you want to pursue? Yes No

If Yes, what?

List extra-curricular activities you are involved with in high school and/or through community involvement:

List any honors or awards you have received in high school and/or through community involvement:

Why do you wish to join Cougar Camp?

FINANCIAL INFORMATION

(To be completed by Parent/Legal Guardian)

Did you (Parent/Legal Guardian) file a tax return last year? Yes No

Taxable income (as reported on last year's tax form) \$ _____
Parent's/Legal Guardian

If you (Parent/Legal Guardian) did not file a tax return, do you receive non-taxable income? Yes No

If yes, which of the following do you (Parent/Legal Guardian) receive?

Social Security TANF Veteran's Benefits Child Support JTPA/WIA Benefits Other Assistance

Non Taxable income \$ _____
Parent's/Legal Guardian

Number of persons living in same household including applicant: _____

Parent's/Legal Guardian's highest education level:

Father: Less than high school graduate Some college or an Associate Degree
 High School graduate Bachelor's Degree
 GED Other

Mother: Less than high school graduate Some college or an Associate Degree
 High School graduate Bachelor's Degree
 GED Other

HOUSEHOLD INFORMATION

Father or Male Guardian's Name: _____ Marital status: _____

Mailing Address: _____

Contact Number: _____

Mother or Female Guardian's Name: _____ Marital status: _____

Mailing Address: _____

Contact Number: _____

APPLICANT'S AND PARENT'S STATEMENT

I certify that I read this application and that it is accurate and complete to the best of my knowledge. I also release the following information to the Cougar Camp Staff: school transcripts, SAT/ACT scores, financial aid award notices, and any other information from my academic records pertaining to my enrollment in the Cougar Camp Program.

Student's Signature

Date of application

Parent's/Legal Guardian's Signature

Date of application

AUTHORIZATION

I (We) hereby grant permission for my son/daughter _____ to participate in the Cougar Camp Program at Coastal Bend College.

I (We) also give consent to _____ High School to make available to members of the Cougar Camp Staff any and all information pertaining to my child's academic progress in school.

I (We) also fully realize that injury or illness to my son/daughter could result from or during participation in the program. In case of such accident or illness, I give permission for my son/daughter to be given medical treatment as deemed appropriate.

In consideration of the permission extended to my son/daughter by Coastal Bend College to participate in Cougar Camp activities, I hereby release and hold harmless the Cougar Camp Program and Coastal Bend College from any liability.

The undersigned hereby declares that the terms of the herein release and information disclosed have been completely read and are fully understood and voluntarily accepted.

Since field trips and/or outings are an integral part of a well-rounded education and of the Cougar Camp Program, I give my permission for my son/daughter to go on field trips sponsored by and chaperoned by faculty and staff of the Cougar Camp Program. I hereby release the Coastal Bend College and Cougar Camp Program from any and all claims against the school authorities individually or collectively from any injuries which might be received during a Cougar Camp field trip or outing, either at the destination or in traveling to or from said destination. I also release the teacher/counselor/administrator/chauffer from any claims or liabilities.

Signature of Parent/Guardian

Date



This publication was developed with the support of the U.S. Department of Education, through a Title V Developing Hispanic Serving Institutions grant. Coastal Bend College does not discriminate on the basis of race, creed, color, national origin, gender, age, or disability.