

# SFA/JAMP Camp 2018 - Application

July 8-15, 2018

PLEASE PRINT OR TYPE

Name \_\_\_\_\_ Age \_\_\_\_\_ SS# \_\_\_\_\_

Address \_\_\_\_\_ Street \_\_\_\_\_  
City State Zip

Home phone \_\_\_\_\_ Cell/Mobile phone \_\_\_\_\_

High school \_\_\_\_\_ High School Phone \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ E-mail address \_\_\_\_\_

Parents/guardians \_\_\_\_\_ Phone \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone \_\_\_\_\_

\*\*High School GPA on a 4.0 scale \_\_\_\_\_ High School Grade Completed in May 2018 \_\_\_\_\_ List

all math and science classes you have taken in high school and the grade you earned in each.

<i>Class name</i>	<i>Grade</i>	<i>Class name</i>	<i>Grade</i>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Counselor's name(s) \_\_\_\_\_ Phone \_\_\_\_\_

### ***College Admissions Exam Scores (if taken):***

SAT Math \_\_\_\_\_ SAT Verbal \_\_\_\_\_ SAT Writing \_\_\_\_\_

ACT Math \_\_\_\_\_ ACT English \_\_\_\_\_ ACT Reading \_\_\_\_\_ ACT Science \_\_\_\_\_ ACT Composite \_\_\_\_\_

College courses : College GPA \_\_\_\_\_

<i>Course name</i>	<i>Course Grade</i>	<i>Course name</i>	<i>Course Grade</i>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List and explain any relevant activities or awards such as volunteer work, paid work or science fair awards.

\_\_\_\_\_

I am certified in: First Aid \_\_\_\_\_ CPR \_\_\_\_\_ Neither \_\_\_\_\_

My college plans are \_\_\_\_\_

Did your parents attend college? \_\_\_\_\_ If so, where? \_\_\_\_\_

Father's occupation \_\_\_\_\_ Mother's occupation \_\_\_\_\_

***JAMP (Joint Admission Medical Program) is designed to help economically disadvantaged students realize their dream of becoming a physician in the State of Texas. While economic status is not a consideration for admissions into our summer camp, preference will be given to those with an existing economic need.***

Size of household (Number of people living in household including all adults) \_\_\_\_\_

Were you required to contribute to the overall family income (as opposed to working primarily for your own discretionary spending money) while attending elementary and/or high school? \_\_\_ Yes \_\_\_ No

Estimated household income \_\_\_\_\_

Estimated value of the house in which you live (owned or rented)? \_\_\_\_\_

Did you or a member of your immediate family ever live in subsidized housing? \_\_\_ Yes \_\_\_ No

Did you have responsibilities in raising other children in your household while attending elementary and/or high school? \_\_\_ Yes \_\_\_ No

Did you or a member of your family ever receive benefits from the Federal Free and Reduced Meal program? \_\_\_ Yes \_\_\_ No

How did you hear about this camp? Teacher/counselor \_\_\_\_\_ Friend \_\_\_\_\_ Advertising \_\_\_\_\_  
Hospital \_\_\_\_\_ Other \_\_\_\_\_

\*\*\*\*\*

Parent/Guardian gives permission for the student to apply for the SFA/JAMP Summer Camp from July 9-16, 2018 at SFA. I certify that the information on this application is true and correct, and I agree to abide  
Send completed application to: J. Kevin Langford, Ph.D.

Pre-Health Professions Programs  
Box 13061, SFA Station

by the camp rules and policies provided upon acceptance.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

A complete application will include all of the following:

**- a letter of recommendation from a teacher or counselor - a 500 word essay about your motivation for a career in medicine - a completed application form (this form).**

**Application deadline:**

**April 1, 2018 or until all slots filled**