

SUMMER CAMP PROGRAM TUITION WAIVER ADJUNCT FACULTY LOCAL 2222 EMPLOYMENT VERIFICATION

Complete the form in its entirety and submit to the office of Human Resources for employment verification. Please submit to the Camp College Office once signed by Human Resources. Employee Name_____PID____ Camper's Name Camper ID Camper's Address_____ Year Enrolling _____ 1. I hereby certify that the student named above is my child. 2. The College as per Article IX (E) will offer the following: Effective summer 2022, and thereafter pursuant to the contract, the children of unit members will be permitted to attend summer camps offered by the College at no cost to the Unit member, provided there is space available and provided there is no additional cost to the college. The children of Unit members will be permitted to attend Camp College Specialty Camps at a 50% reduced rate, provided there is space available and provided there is no additional cost to the College. Unit members will be required to pay for any before or after care fees, is such services are desired, as well as any hard costs associated with the class, ie, textbooks, necessary equipment, etc. Employee Signature____ Date Office of Human Resources______Date____ Director Summer Camp ______ Date____

HR-April 2024