

Criminal Justice Summer Camp 2025

Entry Deadline for all camps: April 15, 2025
(Applications MUST be Postmarked by this date.)

Session I:
June 8-12

Session II:
June 22-26

Session III:
July 6-10

Session IV:
July 13-17

Please number 1st, 2nd, 3rd, and 4th camp session choice.

Application Check List

Your application packet should include the following items when sent in:

Check:

- ‘ Camper Application (1 page and checklist)
 - ‘ Education Information (1 page and high school transcript)
 - ‘ Camper Personal Statement (1 page)
 - ‘ Medical Release Form (2 pages and copy of insurance card)
 - ‘ Release of Liability, Indemnification and Assumption of the Risk Agreement Form (2 pages)
 - ‘ Mature Content & Behavior Release Form (1 page with notarization)
 - ‘ Photograph
- recommendation, an attached copy of your insurance card, high school transcript and scholarship application applicable.

Mail or email this application to:

cjprograms@shsu.edu OR

College of Criminal Justice
ATTN: Criminal Justice Summer Camp
Sam Houston State University
P.O. Box 2296
Hunts

ville, TX 77341

Sam Houston State University Criminal Justice Summer Camp

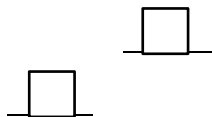
EDUCATION INFORMATION

What is your current GPA (on 4.0 scale)? _____

List the courses taken since beginning high school (indicate Honors, AP, etc.): _____

List your extracurricular activities:

***PLEASE ENCLOSE AN OFFICIAL COPY OF YOUR _____



CAMPER'S PERSONAL STATEMENT

This is a one-page explanation by the camper stating why they wish to attend the camp and what they hope to gain from the experience. Please TYPE or PRINT your answer on this sheet only.

SamHoustonStateUniversity
Criminal Justice SummerCamp 2025

You MUST submit a copy of your current insurance card with your application.

MEDICAL RELEASE FORM

Camper's Name

General Health Questions –2025

Please explain any yes answers in the space provided.

Please state if none apply.

DOES YOUR CAMPER HAVE:	Current	History of Problem
A. Asthma	_____	_____
B. Diabetes	_____	_____
C. Frequent Colds	_____	_____
D. Pneumonia	_____	_____
E. Lung / Breathing Problems	_____	_____
F. Seasonal Allergies / Other	_____	_____
G. Ear Infections	_____	_____
H. Frequent Headaches	_____	_____
I. Serious Skin Problems	_____	_____
J. Gum Problems	_____	_____
K. Dental Problems	_____	_____
L. Hypertension	_____	_____
M. Heart / Circulatory Problems	_____	_____
N. Stomach / Digestive Problems	_____	_____
O. Kidney / Urinary Problem	_____	_____
P. Hepatitis B Carrier	_____	_____
Q. Seizure Disorder***	_____	_____

IF MEDICATION IS REQUIRED, IT MUST COME IN THE ORIGINAL CONTAINER WITH USAGE/DOSAGE/INSTRUCTIONS CLEARLY PRINTED ON LABEL. A DOCTOR'S NOTE AND PARENTS NOTE MUST ALSO BE SENT.

I, the undersigned, as the parent or legal guardian of the minor child, hereby acknowledge that the forenamed minor is covered by medical and prescription drug coverage as follows:

MEDICAL INSURANCE

Name of Insured _____
 Insurance Company _____
 Phone _____
 Employer/Group name _____
 Group number _____
 ID # _____

PRESCRIPTION INSURANCE

Name of Insured _____
 Insurance Company _____
 Phone _____
 Employer/Group name _____
 Group number _____
 ID # _____

It is further understood that Sam Houston State University does not provide medical insurance covering injuries of any nature incurred at the 2025 Criminal Justice Camp. The undersigned hereby releases Sam Houston State University, its successors, assignees, officers, agents, and employees from any and all claims, demands and causes whatsoever in any way growing out of or resulting from participation of the Released Parties in the 2025 Criminal Justice Camp, except for claims caused by the gross negligence of the Released Parties. We understand and agree that the Released Parties shall not be liable for any accidents, medical charges, emergency room charges, or medication/pharmaceutical charges incurred during the 2025 Criminal Justice Camp. WE HEREBY INTEND THAT THE RELEASED PARTIES SHALL NOT BE LIABLE FOR THEIR OWN NEGLIGENCE BUT ONLY FOR ACTS OF GROSS NEGLIGENCE.

Parent/legal guardian Signature _____ Date _____

Please include a copy of your insurance card with this form and be certain that the medical release is submitted with the application. Failure to supply this information will result in being declined for the camp.

SamHoustonStateUniversity
Criminal Justice SummerCamp 2025
RELEASE OF LIABILITY, INDEMNIFICATION AND

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Criminal Justice Summer Camp 2025
MATURE CONTENT & BEHAVIOR RELEASE

Information for Parents and Campers

(Please get this form notarized and signed and return to camp administration)

The Criminal Justice Camp will be attempting to introduce interested youth in a variety of fields involved in the Criminal Justice System. Campers will be attending lectures on a variety of subjects at the University as well as traveling to secure facilities for supervised tours. These tours may include the Montgomery County Morgue, The Southeast Texas Forensic Center, a county jail tour, and a local municipal court. A certain level of maturity and decorum is required in these venues since campers will be interacting with professional instructors, police, doctors, lawyers, judges, and possibly clients of the system. Please ensure that your son or daughter realizes the importance of these interactions in terms of behavior and dress.

We would like to take this opportunity to advise you that we are attempting to maintain content that is suitable for campers of this age group while still exposing them to the multifaceted field of Criminal Justice. Facility tours may expose them to material to which they have not yet been exposed. An example would be our tour of the Medical Examiner's Office which may involve a walkthrough of the morgue section and analysis theater. We will attempt to prepare campers for these events and will make modifications for those campers who wish to be removed for brief periods during such situations. We appreciate you verifying that you still wish your camper to be involved in such venues for their learning opportunities.

Camper Signature

Camper's Printed Name

Camper's Signature

Date

Parent or Guardian Signatures

Parent or Guardian Printed Name

Signature

Date

Parent or Guardian Printed Name

Signature

Date

Notary Signature

Notary's Printed Name

Notary's Signature

Date

SamHoustonStateUniversity
Criminal Justice Summer Camp 2025
PHOTOGRAPH RELEASE AND INDEMNITY

ReleaseesTheTexasStateUniversitySystemBoardofRegentsSamHoustonStateUniversity(hereafterreferredtoas
"Institution"), their administrators, employees, representatives agents (collectively referred to as "Releasees").

Consent: For good and valuable consideration, I hereby grant to Releasees full and complete rights to the use of my
image(still photographor video),with or withouttheuseof my name,in print andelectronicpublicationsor productions
promoting Institution, Texas State University System, its colleges and/or programs. This release is given without charge
to or any remuneration from Institution.

I authorize Institution to (a) recordmy likeness andvoice on a video, audiophotographic, digitalelectronicor anyother
medium; and (b) Use my name in connection with these recordings. I hereby irrevocably assign, transfer, release and
conveyto Institution,in perpetuity,throughouttheuniverse,a nonexclusiveandroyalty-free licenseto use the recordings
above, as well as all intellectual property rights embodied in or pertaining to any of the foregoing and the complete right
to exploit or otherwise use those recordings, in any form of medium, expression or technology now known or hereafter
known or developedbu a n 538 0- p.693(e)-radiu rep50(e)-eu70lb T4 24t

LETTERS OF RECOMMENDATION

Each camper is required to obtain TWO letters of recommendation to attend camp. The letters of recommendation **MUST** come from a Principal, Vice-Principal, Counselor, Criminal Justice Instructor or Teacher.

The letters can be attached to the application or be completed on this page.

Brief Statement indicating why
T0 Td 1 2.4.4.4.0 Td [(a)6 (p)2 (p)2 (lic)6 (a)2j -0.004 T0 Td [(f)-13e6Tw [(c)-10 (

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Sam Houston State

LETTER OF RECOMMENDATION DETAILING FINANCIAL NEED

Camper Name: _____

Sam Houston State University Criminal Justice Summer Camp 2025
Scholarship Application

Session I: _____ June 8-12 Session II: _____ June 22-26 Session III: _____ July 6-10 Session IV: _____ July 13-17

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To be considered for a scholarship, each camper is required to obtain an additional letter of recommendation by a school administrator detailing financial need. This can be provided by a principal, vice principal, or counselor

Administrator's Name _____ Title _____

Brief Statement indicating why/how this student would benefit from attending the camp.