

Health Careers Camp ~ 2008 Application Materials Packet

Reid Hospital & Health Care Services, IU East, and Ivy Tech Community College are collaborating to offer a health careers camp for high school students residing in our service areas. Two one-week sessions will be offered; one for those interested in nursing (June 16-20) and one for those interested in allied health (June 23-27).

- Students may apply to attend both weeks.
- Sessions are from 8 a.m. to noon daily.
- Students who apply must agree to participate fully and attend the entire week.
- There is no cost to attend the Health Careers Camp for the selected participants.

Students interested in applying should have an interest in a health career, be entering their sophomore, junior or senior year in fall 2008 school year or be a 2008 graduating senior and have a GPA of 2.0 or higher on a 4.0 scale.

Attached is an application packet. Please note that all materials must be completed thoroughly and submitted by the application deadline of April 11, 2008. All completed materials must be legible and therefore should be typed or printed (with the exception of required signatures). Be sure to sign the release on the reference forms prior to giving them to the appropriate individuals to complete. Incomplete applications or those received after the application deadline will not be considered for participation.

Completed applications will include:

- The Application Form and short essay
- A reference from a high school principal or counselor (form to be returned to Reid Hospital & Health Care Services by this person).
- A reference from an adult who is not related to the student (form to be returned to Reid Hospital & Health Care Services by this person).
- A copy of the student's immunization record
- The Consent to Participate and Photography Release Form

All application materials are due April 11, 2008

**Mail completed application to:
Human Resources
Reid Hospital & Health Care Services
1401 Chester Blvd.
Richmond, Indiana 47374**

**Health Careers Camp 2008
Application Form**

Name _____ Age _____

Address _____

Home Phone _____ E-mail address _____

High School _____ Grade (2008-2009) _____

Parents'/Guardians' Name _____

In Case of Emergency Call _____
(Specify person and number)

Is this your first application to the camp? _____ Yes _____ No
If no, were you able to attend a previous camp? _____ Yes _____ No

Desired week of Participation in 2008(check all that apply):
_____ Nursing (June 16-20) _____ Allied Health (June 23-27)

Shirt size ___ Small ___ Medium ___ Large ___ XL ___ XXL ___ XXXL

Does the student have a latex allergy? _____ Yes _____ No

Immunization record is attached _____ Yes _____ No

Applicant Signature _____ Date _____

If selected, my child has permission to participate in the Health Careers Camp for the week(s) identified above.

Parent Signature _____ Date _____

All application materials are due by April 11, 2008

**Students should provide reference forms to the appropriate individuals.
Those persons completing the reference should return it to
Human Resources at Reid Hospital & Health Care Services**

Health Careers Camp 2008

Counselor/Principal Reference

You have been selected as a reference for a student making application to the Health Careers Camp. Your input is important to us as our space is limited. We are looking for students who are interested in pursuing a health career, will appreciate the experience, are respectful of others and are team players.

Student Name _____ School Name _____

Permission is granted to send the following information to the Health Careers Camp admission committee.

Student signature _____

Parent/Guardian signature _____

	5 Excellent	4 Above Average	3 Average	2 Fair	1 Poor
Group Participation/Team player					
Respectful to others					
Cooperation/Attitude					
Promptness/Attendance					
Character					
Leadership Ability					
Motivation					
Initiative					
Reliability					
Trustworthiness					
Ability to Understand Confidentiality					
Overall Rating					

Student's GPA is _____ on a 4.0 scale.

Student Strengths _____

Student Weaknesses _____

Comments _____

_____ I recommend this student for participation in the Health Careers Camp

_____ I do not recommend this student for participation in the Health Careers Camp

Name of Person Completing Form _____

School Position _____ Date _____

**Please return the reference form to:
Human Resources
Reid Hospital & Health Care Services
1401 Chester Blvd.
Richmond, Indiana 47374**

References must be returned by April 11, 2008, in order for the student to be considered for this program.

**Health Careers Camp 2008
Reference**

You have been selected as a reference for a student making application to the Health Careers Camp. Your input is important to us as our space is limited. We are looking for students who are interested in pursuing a health career, will appreciate the experience, are respectful of others and are team players.

Student Name _____ School Name _____

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Reliability					
Trustworthiness					
Ability to Understand Confidentiality					
Overall Rating					

Student Strengths _____

Student Weaknesses _____

Comments _____

_____ I recommend this student for participation in the Health Careers Camp.

_____ I do not recommend this student for participation in the Health Careers Camp.

Name of Person Completing Form _____

Relationship to Student _____

**Please return the reference form to:
Human Resources
Reid Hospital & Health Care Services
1401 Chester Blvd.
Richmond, Indiana 47374**

References must be returned by April 11, 2008 in order for the student to be considered for this program.

Health Careers Camp 2008
Consent to Participate and Photography Release Form

If selected to participate in the Health Careers Camp, I agree that:

- I will hold as absolutely confidential all information, whether oral or written, that I may obtain through my participation in the Health Careers Camp concerning Reid Hospital & Health Care Services' staff, patients, visitors, physicians, and other personnel. Additionally, I will not attempt to photograph or solicit an autograph from a patient or visitor.
- My participation in this program is for educational purposes. I realize that I am never required to perform any service which I am uncomfortable doing or for which I have not been properly trained.
- I understand that all of my immunizations must be up to date. I will submit proof of my immunizations, including MMR, with this application.
- If selected, my parent/guardian or I will attend the mandatory orientation session for the 2008 Health Careers Camp, which is scheduled for 7 p.m., June 9 or 4 p.m. June 10.
- I shall report on time and conduct myself with dignity, courtesy, and consideration of others. I understand that my personal appearance should be neat and clean. I shall wear the appropriate clothing designated by the Health Careers Camp personnel. I will wear my name badge at all times.
- I shall make my best effort to fulfill my commitment by attending each session in its entirety.
- I understand that the Health Careers Camp reserves the right to terminate my status if:
 - ❖ I fail to comply with policies, rules, and regulations of Reid Hospital & Health Care Services, Indiana University East, and Ivy Tech Community College.
 - ❖ I am absent without notice.
 - ❖ I am unsatisfactory in my appearance or attitude.

I have read and understand the contents of this form. If accepted as a participant in the Health Careers Camp, I agree to follow the above provisions. I also give permission to be photographed during my participation in the camp and acknowledge any photographs become the sole property of those agencies sponsoring the Health Careers Camp.

Student Applicant Signature

Date

Parent/Guardian Signature

Date