

HEALTH CAREERS PROGRAM

Summer Opportunities

Lowcountry Area Health Education Center (AHEC) is a non-profit organization that works with high school and college students to promote diversity in healthcare. We offer summer enrichment programs to expose students to the many opportunities available in healthcare. The application for the summer internship program is now available! To familiarize you with the details of this experience, please review the information below. To find out more details about our organization (specifically our **Health Careers Programs**) visit www.lcahec.com.

Internship Program

The internship program is an experience offered to disadvantaged and underrepresented minority graduating high school seniors and college students interested in a health professions career. Once accepted, students are placed at a healthcare facility in the Lowcountry. Lowcountry counties include: Allendale, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Colleton, Dorchester, Hampton, Jasper, and Orangeburg. Interns will observe a healthcare provider over the course of four weeks and present a PowerPoint presentation about their experience. This program begins July 1st and ends July 31st. Students are required to attend mandatory meetings in Walterboro, SC throughout their experience. *Please be advised that some healthcare facilities may require that interns cover the cost of medical exams. background checks.* etc. before beginning their experience. At the completion of this program, students will receive a \$500 stipend if all requirements are fulfilled.

Program Coordinator Contact Information:

Please direct all questions to Katura Williams (williamsk@lcahec.com) or Tracey Wilson (wilsont@lcahec.com). Inquiries may be submitted by email or phone (843-782-5052).

APPLICATION DEADLINE: February 26, 2016 (Postmarked by)

Submit application, transcript, essay, and two recommendation forms along with non-refundable application fee of \$25 (Cashier's Check or Money Order) to:

Lowcountry AHEC c/o Katura Williams 87 Academy Road Walterboro, SC 29488

Lowcountry Area Health Education Center

2016 SUMMER INTERNSHIP PROGRAM APPLICATION July 1st –July 31st

Eliaibility:

Applicants are required to:

- A. Be in good academic standing.
- B. Demonstrate a sincere interest in a specified healthcare field.
- C. Understand that <u>ALL</u> internship sites will be located within counties included in the specified AHEC's region. (Lowcountry Region: Calhoun, Orangeburg, Bamberg, Charleston, Colleton, Jasper, Beaufort, Allendale, Berkeley, Hampton, Dorchester, Barnwell)
- D. Understand that the application process for the AHEC Summer Program is competitive. Submission of this application **does not** guarantee acceptance into the regional Internship Program.
- E. Understand that you may incur **additional fees** by a healthcare facility if accepted as an intern.
- F. Be a **graduating** high school senior or undergraduate student.
- G. Provide transportation to/from internship placement site and AHEC office in Walterboro, SC for mandatory meetings if accepted.

Directions:

- Applications must be <u>TYPED OR PRINTED IN BLUE OR BLACK INK.</u>
- A <u>non-refundable</u>, \$25 application fee must accompany the application.
- DEADLINE: ALL applications must be <u>postmarked</u> by <u>February 20, 2016</u>.
- Completed applications must include:
 - ^o An **OFFICIAL** copy of all undergraduate transcripts. This document must be **supplied by the** registrar of your academic institution.
 - ^o <u>TWO</u> completed recommendation forms (<u>one form</u> must be completed by a mentor/counselor/clergyman and the <u>second form</u> must be completed by an adult who is familiar with your academic work and character) Recommendations are <u>NOT</u> accepted from family members. <u>Each recommendation form</u> must be enclosed in a sealed envelope by the recommender.
- ALL SECTIONS OF THE APPLICATION MUST BE COMPLETED. INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED.

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2016 SUMMER INTERNSHIP PROGRAM APPLICATION July 1st –July 31st

A. **GENERAL INFORMATION**:

1.	Are you considering taking a sur	□ NO □ Possibly							
2.	Are you planning to maintain (or apply for) employment this summer? YES			□ NO □ Possibly					
3.	s. Placement Details:								
	 I will be able to provide daily tr Indicate your preference of Cor City: 	ınty:		□ NO					
	Oladicata vaur caraer interest. C	haina 4.							
	o Indicate your career interest: C	hoice 1:							
4.	Are you willing to serve as a role model for a high school student during the 2016-2017 academic term? VES NO								
5.	. Does AHEC have permission to use your quotes or photographs for its website, brochures, or other								
	publications? □ YES □ NO								
_									
В.	DEMOGRAPHIC INFORMATION	<u>ON</u> :							
1.	Name	F:4		Middle					
	Home Address			Middle					
~ .	110111C / (dd1C33	6N							
	Number	Street Name							
	Number City	Street Name State Zi	р	County					
		State Zi s your mailing address? [YES DNO	County					
	Is your home address the same a If no, please provide your corre	State Zi s your mailing address? [YES NO	·					
	ls your home address the same a If no, please provide your corre	state Zi s your mailing address? I ect mailing address belo	YES NO	·					
3.	Is your home address the same a If no, please provide your correct Mailing Address P.O. Box	State Zing s your mailing address? It is good to be seen to be see	YES NO	·					
 3. 4. 	Is your home address the same a If no, please provide your correct Mailing Address P.O. Box City	State Zing s your mailing address? It is good to be seen to be see	YES INO						
 4. 5. 	Is your home address the same a If no, please provide your correct Mailing Address P.O. Box City Age Date of Birth/	State Zing state State State State State State State Place of Birth	Zip City/County	State					
 4. 5. 	Is your home address the same a If no, please provide your correct Mailing Address P.O. Box City Age Date of Birth/	State Zing state State State State State State State Place of Birth	Zip City/County	State					
 4. 6. I 	Is your home address the same a If no, please provide your correct Mailing Address P.O. Box City Age Date of Birth / Day Sex: Male Female Home Telephone: ()	State Zing s your mailing address? It is good to be state State / Place of Birth / Yr. Cell ph	Zip City/County	State					
 4. 6. I Do	Is your home address the same a If no, please provide your correct. Mailing Address	State Zi s your mailing address? In ect mailing address below State Place of Birth Cell ph Email Address	Zip City/County Area Code	State					

APPLICATION FEE: \$25 (non-refundable)
SUBMISSION DEADLINE: February 26, 2016

C. ACADEMIC INFORMATION 1. School Name: School Mailing Address: City County State 3. Current High School (HS) Students Only-Classification: $\Box 12^{th}$ (accepting only graduating high school seniors) Guidance Counselor's Name: Are you currently receiving Free or Reduced lunch? 4. Current College Students Only-Classification: Freshman Sophomore Junior □ Senior High School Name HS Grad Year: Major:______Exp Grad Year: _____ Did you receive the Pell grant for the current school year? 5. First day of Class for 2016-2017 School Year: 6. List all educational institutions (most recent first) you have attended: Name of School Location **Graduation Date** Degree Earned 7. List any honors/distinctions received for scholastic achievements: 8. List any extracurricular and/or community service activities (EXCLUDING jobs held during your high school/college years). Please INCLUDE any AHEC activities.

D.	WORK EXPERIENCE:							
	List any jobs (including summer employment	List any jobs (including summer employment) you have held in the past two years.						
	<u>Position</u>	<u>Employer</u>	Dates of Employment	Hrs./week				
			to					
			to					
E.	E. <u>FAMILY</u> :							
	1. Number of immediate family members currently living in your household (INCLUDING SELF).							
	BrothersSistersPa	rents/Guardians	TOTAL (INCLUDE SELF)					
	2. Will you be the first family member to graduate from a college or university in your household							
	□ YES □ NO							
F	F. <u>ESSAY</u> :							
	Using a separate sheet of paper, type a brief essay (200-300 words) which addresses the writing prompt below:							
	-	Describe your plans for becoming a healthcare professional. Please include details on academic coursework, extracurricular activities, and enrichment opportunities (ex: internship, summer programs, etc.)						

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