

# **Health Careers Summer Camp 2009 June 22<sup>nd</sup> -26<sup>th</sup>**

Each year the Capital Area Health Education Center (AHEC) offers high school students the opportunity to participate in a five day summer camp devoted to educating participants about the different careers in healthcare. Through this camp, students are encouraged to consider a career in healthcare and what they need to do to start preparing for that future. Capital AHEC is engaging sponsors to cover the majority of the expenses however we ask all students pay \$50 towards the total cost which includes all meals, lodging, and activities. To register complete the form below and return it to Capital AHEC with a check for \$50 by March 27th. Checks should be made payable to Capital AHEC. Remember space is limited so register TODAY!

Mail your registration form and checks to:

**Capital AHEC  
2520 South IH-35  
Suite 205  
Austin, TX 78704**

## **Eligibility**

- High school student entering 10<sup>th</sup>, 11<sup>th</sup> or 12<sup>th</sup> grade
- Attend all five days of camp
- Submit your application and check by March 27, 2009
- Have a sincere desire to learn about healthcare professions

## **Activities Include**

- Hospital Tours
- Medical Procedures
- Shadowing Opportunities
- Simulation Labs
- Career Panel Discussions
- Field Trips
- And much more!

A selection committee will review applications and students will be notified of their acceptance status; students who will be attending the Health Careers Summer Camp will receive a detailed Camp packet April 17<sup>th</sup>. This packet will contain information about your shadowing experience, a detailed camp schedule and numerous forms to be completed and returned to Capital AHEC.

# Health Careers Summer Camp 2009

## Student Application Form

*Please print legibly.*

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Scrubs Size: (S) \_\_\_\_\_ (M) \_\_\_\_\_ (L) \_\_\_\_\_ (X-L) \_\_\_\_\_ Your cumulative GPA: \_\_\_\_\_

High School: \_\_\_\_\_

Grade: 10<sup>th</sup> \_\_\_\_\_ 11<sup>th</sup> \_\_\_\_\_ 12<sup>th</sup> \_\_\_\_\_ CPR Certified: Yes \_\_\_\_\_ No \_\_\_\_\_

Future plans after high school: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Healthcare Career Interest: \_\_\_\_\_

List your hobbies, interests and special skills: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Why are you interested in attending this summer camp? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Please attach check for \$50 to this application. Checks should be made payable to Capital AHEC.**

## Shadowing Opportunity

During the camp students will have the opportunity to shadow a healthcare professional in the Austin area. During this time students will work with mentors in their interested area in order to learn more about their chosen career. This day long activity is one of the highlights of the camp and gives students the chance to ask questions, participate in procedures, and live the daily life of a healthcare worker.

In order to match students career interests with healthcare professionals we would like to rank your top three choices below. Please place a “1” after the health profession that you are most interested in. Place a “2” after your second choice and a “3” after your third choice. Note: Not all health careers are available and able to volunteer for shadowing however we do our best to match you wishes. If you would like to shadow with a career that is not listed please select the “other” category and write in your career. If you are unsure which career would best suit you or you are unsure about what some of the careers do please visit [www.texashotjobs.org](http://www.texashotjobs.org).

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|--|--------------------------------|
| ___ Respiratory Therapist                | ___ Social Worker              |
| ___ Occupational Therapist               | ___ Gerontologist              |
| ___ Physical Therapist                   | ___ Registered Nurse           |
| ___ Speech/Language Pathologist          | ___ Pharmacist                 |
| ___ Veterinarian                         | ___ Physician Assistant        |
| ___ Chiropractor                         | ___ General Radiographer       |
| ___ Physician - Specialty: _____         | ___ Prosthetist / Orthotist    |
| ___ Dental Hygienist                     | ___ Research Scientist         |
| ___ Dentist                              | ___ Biotechnologist            |
| ___ Emergency Medical Services Personnel | ___ Electrocardiographic (EKG) |
| ___ Nutritionist                         | ___ Surgical Technologist      |
| ___ Health Care Services Administrator   | ___ Optometrist                |
| ___ Licensed Professional Counselor      | ___ Other: _____               |

For more information contact Ashley King at 512.472.8921 ext. 303 or email [aking@capitalahec.org](mailto:aking@capitalahec.org).