

2020 MedStart Application



MedStart Summer Camp is a 5-day summer camp program sponsored by the Montana AHEC (Area Health Education Center) system. The aim of MedStart is to provide students a chance to further explore healthcare careers, learn about college life, and realize it is possible to pursue higher education.

WHO: Current sophomores or juniors from a Montana high school. Homeschooled or GED students are eligible as well. Students may be no older than 18. Students may apply for a second year of MedStart, but may not attend camp at the same campus two years in a row.

WHERE: 5 Camp Locations Available:

- Missoula; University of Montana (June 7-11)
- Great Falls; Providence and Great Falls College (June 14-18)
- Miles City; Miles City Community College (July 12-16)
- Butte/Helena; Montana Tech & Carroll College (July 19-24)
- Billings; Montana State University Billings (July 26-30)

COST: Cost to attend MedStart is \$500/student. MedStart tuition fees cover room & board, meals, transportation to events, all included activities, scrubs, and student materials.

SCHOLARSHIPS: Multiple scholarships are available based on need and/or merit; see page 5. Scholarship priority will be given to first year MedStart applicants.

COLLEGE CREDIT: Students completing the MedStart Camp at any of the five camps are eligible for one college credit through Montana Tech, and is transferable to all schools in the Montana University System. More information will be available upon acceptance.

IMMUNIZATION NOTE: Students accepted into the MedStart Camps are required to provide proof of health insurance and up-to-date vaccinations as well as a tuberculosis test in order to be allowed to participate in the activities at healthcare facilities. Montana AHEC is not an affiliate of the Montana Office of Public Instruction, and therefore, does not recognize Montana Immunization Exemption Form 20-5-401. In order for your child to participate in activities at MedStart, current immunization records and negative results of a TB test (within the last year) are required.

DUE DATE: Applications must be submitted by March 6 to be considered.

ACCEPTANCE & PAYMENT: Notification of camp acceptance will be announced April 3, 2020. Students will receive a packet to complete and submit with payment in full by May 15, 2020.

Applications must be postmarked by March 6, 2020 to be considered.

Notification of camp acceptance and scholarship awards will be announced April 3, 2019. Students will receive a packet to complete and submit with payment in full by May 15, 2019. Please direct questions to and mail application to:

2020 MedStart Camp – Attn: Grace Ulven
 2625 Winne Ave.
 Helena, MT 59601
 (406) 457-8024

PERSONAL INFORMATION

Attach additional pages as needed, and include your name on each page

1. Last name: _____ First: _____ M. initial: _____

2. Mailing address: _____ Town _____ State ____ Zip code _____

3. Home Phone: _____ Student Cell Phone: _____

Parent Signature: _____

"I give permission for a MedStart Program Coordinator to send my child texts."

4. Student E-mail: _____

(Please provide valid, legible, email addresses that are checked regularly. This will be the method of communication from the MedStart staff.)

5. Student Summer e-mail (if different from above):

7. Gender: [] Male [] Female 8. Birth date: ____ / ____ / _____ 9. Current age: ____ 10. Current grade [] 10th [] 11th

11. Do you describe yourself as?

- Hispanic/Latino
- American Indian/Alaskan Native {Please list Tribe(s)}: _____
- Asian
- White/Caucasian
- Black/African American
- Native Hawaiian/Pacific Islander
- Other (Please specify): _____

12. Demographics – (Check all that apply):

Information used for grant reporting and scholarship need only

- Have you or your family ever used federal or state assistance programs (such as: free or reduced school lunch, subsidized housing, food stamps, Medicaid, special loan/scholarship for disadvantaged students, etc.)
- Do you live in a rural MT community with a population of 10,000 or less? (*Missoula, Billings, Great Falls, Butte, Bozeman, Helena and Kalispell are considered urban cities*)
- Are you the first generation in your family to attend college?

Parent or Guardian #1 Education Level:

(Check highest level completed)

- Grade School
- High School
- College
- Other _____

Parent or Guardian #2 Education Level:

(Check highest level completed)

- Grade School
- High School
- College
- Other _____



PARENTAL CONTACT INFORMATION

Please respond according to the parent(s)/guardian(s) with whom you live with most

13. Parent or Guardian Name: _____

Phone: _____ Email: _____

14. (Optional) #2 Parent or Guardian Name: _____

Phone: _____ Email: _____

HIGH SCHOOL INFORMATION

Attach additional pages as needed

15. Current High School: _____ City: _____

16. Who is your high school guidance counselor?

First Name _____ Last Name _____ Email _____

School's Phone: _____

17. Please list community service and/or volunteer activities you have participated in during high school.

18. Please list extracurricular activities (music, church, sports, etc.) in which you have been involved.

19. Please list any honors you have received while attending high school.

20. Please list any job experience while attending high school.

COLLEGE AND CAREER PLANS

21. Do you plan to attend college?

YES: [] 2 yrs. [] 4 yrs. [] Other: _____

NO: Other post-graduation plans: _____

22. How interested in a healthcare career are you? (Circle one) **Not at all** **Somewhat** **Very**

23. How likely are you to pursue education in a healthcare field? (Circle one) **Not at all** **Somewhat** **Very**

24. Please list, in order of preference, your top areas of career interest. (i.e.: physician, radiologic technician, nurse, etc....)

1) _____

2) _____

3) _____

4) _____

5) _____

ESSAY QUESTIONS

*Applicants MUST provide complete and detailed answers to be considered. *Attach additional sheets if necessary*

25. What interests you about the healthcare field? Have you had any personal experiences with the healthcare field?

26. Why are you interested in attending MedStart and how do you feel it could contribute to your career plans?

27. What opportunities have you had to learn about health professions? What barriers to learning about health professions have you experienced?

28. Do you believe there are interesting healthcare careers available in your community? If so, would you consider pursuing a healthcare career in your home town/region?

2020 MEDSTART CAMPS

29. Have you applied to MedStart before? (Circle one) **Yes** **No**
30. Have you attended MedStart before? **Yes** **No** If Yes, what location: _____

31. In which of the following have you participated:
- Expand Your Horizons: STEM for Girls Conference (Kalispell, Bozeman, Missoula)
 - STEM Saturday (Billings)
 - Heads Up Camp: Behavioral Health Careers Camp. What location? _____
 - REACH (Research & Explore Awesome Careers in Healthcare) at local hospital. What location? _____
 - Hospital internship program (credit or non-credit). What program/location? _____
 - Montana HOSA: Future Health Professionals. What chapter? _____

32. How did you hear about MedStart? (Please check all that apply)
- School (counselor, teacher, etc.)
 - Online (where?): _____
 - Social Media (platform?): _____
 - Hospital: _____
 - Flyer/Poster
 - AHEC
 - Other: _____

33. Five MedStart programs will be offered in the summer of 2020
Based on your availability, interests, and preference, please rank the following five camp locations 1-5, with #1 being your first choice. Each MedStart runs until at least noon on Thursday. Students will be supervised until that designated time.

- _____ Missoula @ University of Montana - June 7-11
- _____ Great Falls @ Providence & Great Falls College - June 14-18
- _____ Miles City @ Miles City Community College - July 12-16
- _____ Butte/Helena @ Montana Tech & Carroll College - July 19-24
- _____ Billings @ Montana State University Billings - July 26-30

34. Are you committed to other summer programs that may overlap or conflict with MedStart Camp? **YES NO**
 If yes, what dates conflict? _____

35. "By signing below, I _____ (parent/guardian) of _____ (student applicant) am aware that my student is applying to MedStart Camp for the 2020 summer session."

 Parent/Guardian Signature

 Date



MEDSTART RECOMMENDATION

Please list the information of a teacher or trusted adult (no family members) who would be willing to give you a positive reference for MedStart Camp. We will contact your reference once the application is submitted.

35. Reference's Contact Information

First Name: _____ Last Name: _____

Phone: _____ Email: _____

36. What is your relationship to your reference (i.e. counselor, pastor, teacher, boss, etc.)?

37. Have you notified this person that you're listing them as a reference? **YES** **NO**

**Note: There IS a correct answer to this question... Let this person know that you're applying for MedStart, and have listed them as a reference!*

Financial Aid Information & Scholarship Application

Please note: Cost to attend MedStart Camp is \$500. Please complete items 1-4 to be considered for a scholarship. Montana AHECs & sponsors do not discriminate based on information provided. However, preference for scholarships is given to underrepresented students, including those from: rural communities; low-income; racial, ethnic, or cultural minorities; first generation college students.

I will pay the full tuition amount of \$500 and will remit payment upon acceptance to MedStart.
(No need to complete the rest of page)

I have check-marked the opportunities below and would like to be considered for a scholarship

1. _____ GEAR-UP SCHOLARSHIP

Check here if you are a student from one of these GEAR-UP high schools and wish to be considered for a scholarship:

- | | | |
|----------------|---------------|-------------------|
| • St. Regis | • Heart Butte | • Lame Deer |
| • St. Ignatius | • Libby | • Lodge Grass |
| • Arlee | • Box Elder | • Thompson Falls |
| • Hardin | • Rocky Boy | • Hays Lodge-Pole |
| • Troy | • Harlem | • Superior |
| • Browning | • Pryor | |

2. _____ CVS WORKFORCE INITIATIVES HOSA SCHOLARSHIP Scholarship Amount: Full Tuition (4 available)

Check here if you are an affiliated MT HOSA Member and would like to be considered for 1 of 4 scholarships.

3. _____ JOBS FOR MONTANA (JMG) MERIT SCHOLARSHIP Scholarship Amount: Full Tuition (3 available)

Check here if you are a current JMG student and would like to be considered for 1 of 3 scholarships.

4. _____ AHEC SCHOLARSHIP Scholarship Amounts: varies from 25% - 100% tuition

Eligibility: Students who meet any of the following criteria may be eligible for **one or more partial** scholarships. A scholarship equal to one quarter of the full tuition may be awarded for **each** of the following criteria. Please place a check beside **ALL** criteria that you meet and wish to receive a scholarship for:

A. _____ Have you or your family ever used federal or state assistance programs (such as: free or reduced school lunch, subsidized housing, food stamps, Medicaid, special loan/scholarship for disadvantaged students, etc.)

B. _____ Do you identify as one of the following; Hispanic/Latino, American Indian/Alaskan Native, Asian, Black/African American, Native/Pacific Islander

C. _____ Do you live in a rural MT community with a population of 10,000 or less?
(Missoula, Billings, Great Falls, Butte, Bozeman, Helena and Kalispell are considered urban cities)

D. _____ Will you be the first generation in your family to attend college?