A Pathway to Careers in Healthcare and Social Assistance

**Camp dates: June 15th-19th, 2020**

**Location: BC3 campus Brockway, PA. Time: 9:00 am to 3:30 pm**

Send completed application form (attached) to:

Send completed application form to:

Workforce Solutions for North Central PA

Attn: Camp Exploration

425 Old Kersey Road

Kersey, PA 15846

**Application Deadline: April 30, 2020**

**Program Information**: The camp is designed for student currently entering 8th through 12th grades who are interested in learning about opportunities in various careers in healthcare and social assistance.

Students MUST reside in one of the following counties: Cameron, Clearfield, Elk, Jefferson, McKean and Potter. Transportation assistance is available.

Students will meet and talk to practicing healthcare and social assistance professionals, engage in health career activities, become CPR certified, learn to monitor vital signs, engage in hands on medical procedures, learn basic medical terminology, and receive training in leadership skills. The program brings 20 students together to learn about health careers.

**Application Information:**

**There is no cost to participate in this program however seats are limited.** All information provided in the application is taken into account and is kept confidential.

2020 Camp Exploration Academy Application

**Please print neatly:**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s/Guardian’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School District \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grade entering (circle one) 8 9 10 11 12 Gender \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Shirt size \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**List any relevant activities (volunteer work, church activities, music, sports) or accomplishments (awards).**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Please list your top three interests in the health career field.

1st choice \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2nd choice \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3rd choice \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (pg. 2)**

**Please write a brief explanation on why you would like to attend Camp Exploration, what interests you about health or social service careers, goals for the future:**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (pg. 3)**

**Parental Consent**

**I understand that if my child is selected, I approve of their participation and give consent for student’s name and pictures to be used with media associated to this event.**

**Parent or Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Does your child need transportation assistance: Yes \_\_\_ No\_\_\_\_\_\_?**

**If yes is selected a representative will contact, you to see how we may assist.**

**This camp is free of charge to students Thanks to Grants from Workforce Solutions and the generosity of local sponsors.**

**Does your child have any medical conditions the camp should be aware of?**

**Does your child take medications? If yes, please explain:**

**Does your child have allergies? If so, please explain:**

**Please provide one contact and number other than Parent/Guardian that can be contacted in case of emergency if Parent/Guardian is unavailable.**

**Disclaimer**

**The number of applicants accepted will be limited to 20 students based in order of applications received.**

**Questions? Call 814-594-0134**