

**June 20-23, 2023**

Eligible students are rising 10<sup>th</sup> or 11<sup>th</sup> graders (fall 2023) with a strong interest in pursuing a **Health and Medical Sciences Career Pathway**. Selected students commit to the FOUR-day schedule:

<b>June 20</b>	<b>9:00A-3:15P Winchester Medical Center</b> Career exploration/experiential learning/tour
<b>June 21</b>	<b>9:00A-3:15P Shenandoah University Skills Labs</b> Hands on skills exploration Meet at John Handley High School – bused to SU campuses and switch midday.
<b>June 22</b>	<b>9:00A-3:15P Laurel Ridge Skills Labs</b> Hands on skills exploration
<b>June 23</b>	<b>9:00A-12:00 Laurel Ridge Skills Labs</b> <b>12:00-1:00P Laurel Ridge Corron Center</b> Celebration/recognition program and wrap-up

### Application Process

1. Applications/Announcement: **January 25<sup>th</sup>**
2. Completed applications to HS counselors office: **due March 1st**
3. HS counselors at each school
  - Select **3 students & 1 alternate** for **each high school**.
  - Exception: **Frederick County** selects **4 students & 1 alternate** for each high school.
4. Student notification of selections: **Announced March 24<sup>th</sup> by HS counselors**
5. Selected students AND alternates: **Complete registration by April 1st**
6. TOTAL COST invested in Each Student by the PUBLIC SCHOOLS.
  - **\$200.00 Total Investment**  
VH payment: \$155.85 / Laurel Ridge Community College: \$44.15  
SDV 100 Success Skills course - Dual enrollment process  
Obtain dual enrollment form from your counselor or career coach or counselor at your high school.  
Work with them to secure a copy of your high school transcript to submit with the form.  
If not already dual enrolled, apply to the college with help of your career coach.
  - **\*\*Scrubs (top & bottom), supplies and lunch x4 included in cost of registration fee. \*\***
  - Closed toe shoes responsibility of students.
7. Alternates notified of selection by April 7<sup>th</sup>



### Contacts for the Health Science Academy

**VALLEY HEALTH SYSTEM**  
**Heather A. Wilson, MHA, MSN, RN**  
Valley Health / Winchester Medical Center  
**Office** 220 Campus Blvd, Suite 400  
Winchester VA 22601  
**Email** hwilson@valleyhealthlink.com  
**Mobile** 540.974.3656

### School Counselors

Clarke County  
Frederick County  
Page County  
Page County  
Rappahannock County  
Shenandoah County  
Warren County  
Winchester City

In partnership with the  
Public Schools Consortium

**June 20-23, 2023**

Applicant Section (please print)	Personal Email
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Last Name	First Name	M.I.	Street Address	City/State/Zip
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Date of Birth	High School	Current Grade
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<input type="checkbox"/> Male	<input type="checkbox"/> Female	Math (enrolled)	Science (enrolled)
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Have you previously attended a local hospital/Valley Health youth education event?	Yes	No
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Your GPA	I will or will not ( <i>circle one</i> ) need transportation to and from the Health Sciences Academy portion of the program.
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Current Math course in which you are enrolled	Current Science OR health professions course in which you are enrolled
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Current Math teacher's signature supporting my application to the Health Sciences Academy	Current Science or health professions teacher's signature supporting my application to the Health Sciences Academy
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List any community service activities. Include employment, participation in student organizations, competitive events, and sports.

### Agreement/Memo of Understanding

1. Cost of the Health Sciences Academy includes: Laurel Ridge SDV101, Valley Health and Shenandoah University activities/labs, medical supplies, snacks, lunches, and transportation (if needed). Transportation each AM is the responsibility of the parent/ legal guardian or public school system, as applicable.
2. Daily on-time attendance for all four days of activities and Laurel Ridge course is required.
3. Students receive college credit for the Laurel Ridge SDV 101. This college-level course includes homework assignments and a final presentation. Each HSA student commits to attending and completing ALL course requirements in order to earn college level credit. Note: A letter grade is assigned based upon course assignment completion. The letter grade earned appears on the student's college transcript.
4. I understand the above conditions and agree to fully participate in all the requirements of the Health Sciences Academy.
5. IF SELECTED: I hereby grant permission for my child to drive to and from the HAS. My child will not be allowed to leave at any time without parent/guardian permission AND the permission of the HAS Coordinators.
6. IF SELECTED: I hereby give permission to obtain medical treatment at the closest VHS hospital for my child. I authorize necessary services by emergency medical personnel for the health and welfare of my child.
7. IF SELECTED: I hereby give permission for my child to have a finger stick by trained staff of Winchester Medical Center to determine blood type / blood sugar level.
8. IF SELECTED: I hereby grant WMC and VH permission to use any photos or video which may contain my child's image for publicity purposes.
9. I have read all of the information pertaining to the HSA. I certify that all of the information on the registration form is true, complete and correct.

Parent or Guardian Signature	Student Signature
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Page 2.....Please write a brief summary answering the following questions:

(Typewritten preferred. You may use the back of the paper if needed.)

- *What health profession(s) (e.g., nurse, physician, physical or occupational therapist, etc.) or related career(s) (e.g., biomedical engineering) is/are of most interest to you and why?*
- *What motivates you to seek a career in healthcare? (e.g., personal experience with healthcare; positive role models; movie or TV show)*
- *What personal qualities do you possess that would make you excel in a healthcare career?*
- *Why should you be selected for the Health Sciences Academy program?*

