

## Lakeshore Camp 2017

Welcome to the online student application for the Lakeshore Health Careers Summer Camp. The student application contains 24 items, including one essay.

Your application must be completed AND submitted at the same time. You cannot save your application or submit a partially completed application! You are encouraged to first complete the application offline. A complete PDF version is available on the NEWAHEC website ([www.newahec.org](http://www.newahec.org)) and the AHEC system website ([www.ahec.wisc.edu](http://www.ahec.wisc.edu)). You may cut and paste your essay into the application from a word processing program.

The two teacher reference forms are available online and must be completed by the due date! You will be notified by the Camp Director when a teacher recommendation is received. To access the teacher reference forms go to [www.newahec.org](http://www.newahec.org) or [www.ahec.wisc.edu](http://www.ahec.wisc.edu)

Please contact Brenda Birringer with questions at [brendab@newahec.org](mailto:brendab@newahec.org) by phone at 920-652-0238.

## Lakeshore Camp July 16 - July 20, 2017

### LS Camp 2017

Northeastern Wisconsin Area Health Education Center (NEWAHEC) and the Lakeshore Health Care Alliance (LSHCA) sponsor a health careers camp for high school students residing in the NEWAHEC and LSHCA service area and who are interested in pursuing a health career. The Northeastern WI Area Health Education Center and LSHCA service area by county includes:  
Brown, Calumet, Door, Fond du Lac, Kewaunee, Manitowoc, Outagamie, Ozaukee, Sheboygan, Washington, and Winnebago.

Camp activities will be held around the Lakeshore area. Students will stay at Silver Lake College campus. A \$100.00 camp reservation fee is due upon acceptance to this camp. (Financial assistance is available if needed.) The student must complete the student application below. In addition, two teacher reference forms must be completed by two of the student's high school teachers, one must be a Math or Science teacher, the other an English or Fine Arts teacher.

Due to limited space at the camp, the Application Review Committee will process only complete applications. Complete application includes:

- Student Information Page (Online)
- Student Personal Statement (Essay)
- Teacher Reference Math **or** Science Teacher (Online)
- Teacher Reference English **or** Fine Arts (Online)

**All application materials are due  
FRIDAY, May 5, 2017**

First Name

Last Name

Gender

Male

Female

Date of Birth:

mm/dd/year

Street Address:

City:

Zip Code:

Parents Name (s)

Parent's Occupational Background (write "Unknown" if you prefer not to answer or do not know)

Father's Occupation:

Mother's Occupation:

Phone Numbers: (with Area Codes)

Day Time Phone Number:

Home Phone Number:

Parents Cell Phone Number:

Students Cell Phone Number

Email Address:

will be used for camp updates:

Student Email Address:

Parent Email Address:

Current Grade:

- 10th grade
- 11th grade
- 12th grade
- College Freshman

Graduation Year:

mm/dd/year

Name of High School/ College:

High School/College Address:

Street:

City:

Zip Code:

Racial/Ethnic Heritage:

African American/Black

Hispanic

American Indian

Caucasian/ White

Southeast Asian

Other, please specify

Counselor or Health Occupation Teacher:

Counselor/Teacher Name:

Email Address:

Phone Number:

List extracurricular activities:

Career Interest: Which of the following careers would you like to learn more about?

Select at least 3 responses and no more than 3 response's.

For more information about a profession please go to [www.wihealthcareers.org](http://www.wihealthcareers.org)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Athletic Trainer               | <input type="checkbox"/> Medical Transcription                  | <input type="checkbox"/> Registered Nurse - Clinic                     |
| <input type="checkbox"/> Audiologist                    | <input type="checkbox"/> Medical Technologist                   | <input type="checkbox"/> Registered Nurse - Community Education        |
| <input type="checkbox"/> Biomedical Engineer            | <input type="checkbox"/> Nuclear Medical Technologist (NMT)     | <input type="checkbox"/> Registered Nurse - Emergency Services         |
| <input type="checkbox"/> Chiropractor                   | <input type="checkbox"/> Nurse Practitioner - Family Practice   | <input type="checkbox"/> Registered Nurse- ICU                         |
| <input type="checkbox"/> Dentist                        | <input type="checkbox"/> Nurse Practitioner - Internal Medicine | <input type="checkbox"/> Registered Nurse - Medical/Surgical           |
| <input type="checkbox"/> Dental Assistant               | <input type="checkbox"/> Occupational Therapist                 | <input type="checkbox"/> Registered Nurse - Nurse Anesthetist          |
| <input type="checkbox"/> Dental Hygienist               | <input type="checkbox"/> Pharmacist                             | <input type="checkbox"/> Registered Nurse - Obstetrics                 |
| <input type="checkbox"/> Dietitian                      | <input type="checkbox"/> Pharmacy Technician                    | <input type="checkbox"/> Registered Nurse - Oncology                   |
| <input type="checkbox"/> Health Care Administrator      | <input type="checkbox"/> Phlebotmist                            | <input type="checkbox"/> Registered Nurse - Operating Room             |
| <input type="checkbox"/> Health Educator                | <input type="checkbox"/> Physical Therapist                     | <input type="checkbox"/> Registered Nurse - Pediatrics                 |
| <input type="checkbox"/> Human Resource                 | <input type="checkbox"/> Physician - Family Practice            | <input type="checkbox"/> Registered Nurse - Urgent Care                |
| <input type="checkbox"/> Licensed Practical Nurse (LPN) | <input type="checkbox"/> Physician - Internal Medicine          | <input type="checkbox"/> Respiratory Therapist                         |
| <input type="checkbox"/> Medical Assistant              | <input type="checkbox"/> Physician - Pediatric                  | <input type="checkbox"/> Social Worker                                 |
| <input type="checkbox"/> Medical Billing                | <input type="checkbox"/> Physician - Surgical                   | <input type="checkbox"/> Speech Language Pathologist                   |
| <input type="checkbox"/> Medical Coding                 | <input type="checkbox"/> Physician Assistant                    | <input type="checkbox"/> Surgical Technologist                         |
| <input type="checkbox"/> Medical Lab Technician         | <input type="checkbox"/> Radiology Technician (X-ray Tech)      | <input type="checkbox"/> Ultrasound Technician                         |
| <input type="checkbox"/> Medical Records                | <input type="checkbox"/> Recreational Therapist                 | <input type="checkbox"/> Volunteer Coordinator/Services                |
| <input type="checkbox"/> Medical Secretary              | <input type="checkbox"/> Registered Nurse (RN)                  | <input type="checkbox"/> Other. Please specify<br><input type="text"/> |

Would you be the first in your immediate family to graduate from a College or University?

Yes

No

Will you need financial assistance to attend camp?

Yes

No

In order for your application to be accepted you will need to have **two reference forms submitted**. These online forms can be found on the NEWAHEC website [www.newahec.org](http://www.newahec.org) or the AHEC system website [www.ahec.wisc.edu](http://www.ahec.wisc.edu). You must instruct each teacher to go to the website and complete the online teacher reference form. The form automatically gets send to the camp director.

One teacher reference must be from an English/Fine Arts teacher and the other from a Math/Science teacher.

Please list both of the teachers names that will be completing online references for you.

Teacher Name:

Teacher Name:

Have you attended or participated in other health career exploration activities?

Health Career Experiences (Fox Valley or Lakeshore area students.)

- Individual Job Shadow
- Extracurricular Activity/School Organization:
- Volunteer at healthcare facility or related experience
- Certified Nursing Assistant (CNA)
- Other:
- None, this camp would be my first.

In approximately 300 words, please explain why you should be selected to attend the Health Careers Camp. Include your interest in pursuing a health care profession, aspirations, work experience and other activities or information you would like the Application Review Committee to know.

**Congratulations!** You have successfully finished the online student application for the 2017 Lakeshore Health Careers Summer Camp Application. However, your application will not be considered complete until the Northeastern AHEC office has received your two teacher reference forms (see item above).

Online teacher reference forms will automatically get sent to the Camp Director.

If you have any questions or concerns contact:

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**APPLICATIONS ARE DUE FRIDAY, MAY 5, 2017!**