

Summer Health Academy 2017



Summer
Health
Academy

With the aging population, health professionals will continue to be in high demand. North Mississippi Medical Center has developed the Summer Health Academy to help promote an adequate supply of caregivers in our community in the years to come.

Summer Health Academy introduces students to various careers in health care while reinforcing positive lifestyle choices. Participants spend four hours each day with nurses and other health care professionals who are eager to share their expertise and enthusiasm.

Because enrollment is limited, students are able to interact one-on-one with nurses, radiologic technologists, pharmacists, physical therapists and other health care staff.

Who: Students who have completed the seventh or eighth grade

What: An opportunity to learn about various health careers and to reinforce positive lifestyle choices

When: 8 a.m.-noon • June 13-15, 2017

Where: HealthWorks! • 219 S. Industrial Road • Tupelo

Fee: \$40 (includes educational materials and snacks)

Students will learn more about:

- Cardiology • Emergency Services • Lifesaving Skills • Nursing as a Career
- Oncology • Orthopedics • Pharmacy • Radiology • Rehabilitation
- Respiratory Therapy • Surgery • Wellness

Summer Health Academy is limited to 25 students who will be selected on the basis of academic achievement, community service and desire to enter a health profession.

Application packets are due by April 7 and should include:

- A completed application with both student and parent signatures
- Your latest school transcript (usually available from the school counselor)
- Two of the attached reference forms completed by teachers who have taught you in the last two years. References must be enclosed in a sealed envelope with the reference's signature across the back flap.
- Incomplete packets will not be considered.

Students who are selected to participate will be notified by April 30.

For more information, call (662) 377-3131 or 1-800-THE DESK (1-800-843-3375).

2017



**NORTH MISSISSIPPI
MEDICAL CENTER**



NORTH MISSISSIPPI MEDICAL CENTER

Summer Health Academy Student Application

Name _____ Phone _____

Street Address _____

City, State, Zip _____

School _____

Last grade completed by 6/1/17 _____

Parent's Name _____

Parent's Daytime Phone _____ Parent's Email _____

Community Service _____

Student Signature _____

Parent Signature _____

Along with this completed application, include:

- Your latest school transcript
- Two of the attached reference forms completed by teachers who have taught you in the last two years. References must be enclosed in a sealed envelope with the reference's signature across the back flap.

Return by April 7 to: North Mississippi Medical Center
Volunteer Services Department
830 South Gloster Street
Tupelo, MS 38801

Do not send payment with this application.