



University of South Dakota - Rapid City

COYOTE SCRUBS CAMP APPLICATION

June 8-10, 2021 for high schoolers and June 15-17, 2021 for 7th and 8th graders

Deadline: May 21, 2021 but space is limited to the first 20 applicants • Cost: FREE

INFORMATION ABOUT YOU

Last Name: _____ First Name: _____ Middle Name: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (if different from above): _____ City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Birthdate: _____ Present Age: _____ Sex: Male Female

INFORMATION ABOUT YOUR PARENTS OR GUARDIANS

Name(s) of Parent(s) or Guardian: (1) _____ (2) _____

Daytime Phone Number(s): (1) _____ (2) _____

Evening Phone Number(s): (1) _____ (2) _____

EDUCATIONAL INFORMATION

Name of School Currently Attending: _____ City: _____ State: _____ Zip: _____

GPA: _____ Grade you will enter in Fall 2021: 7th 8th 9th 10th 11th 12th Graduation Year: _____

YOUR INTERESTS

Why are you interested in a healthcare career? (Check all that apply)

- Family member is nurse
 Someone I admire is a nurse
 Inspired by a TV program, movie or book (please name _____)
 Inspired by a particular class (please name class _____)
 Inspired by a personal experience with healthcare or illness
 Inspired by teacher or guidance counselor
 Other

What do you plan to do after High School?

- Get a job (do not check this if you are just planning to work for the summer)
 Go to a 2 Year College
 Go to a 4 Year College or University
 Undecided, need help figuring out how to make my career interests a reality
 Enlist in the Armed Forces

Check the healthcare careers you would especially like to know more about (your information will be sent to the correct department):

- Audiologist Physical Therapist
 Dental Hygienist Physician
 Dentist Physician Assistant
 Dietician Radiology Technician
 Health Administrator Speech Therapist
 Lab Tech/Med Technologist Respiratory Therapist
 Nurse Social Worker
 Nurse Practitioner Public Health Worker
 Occupational Therapist Research Scientist
 Psychologist/Mental Health Worker Other
 Pharmacist

What do you want to get out of USD's Healthcare Careers Summer Camp?

- More info about a specific career (please name) _____
 Info about different types of Health careers
 How to prepare for pursuing a healthcare field
 Help deciding what I want to do
 Chance to meet people with similar interests
 Chance to make contacts for the future
 Experience a college environment
 An "edge" when applying for jobs, schools, or volunteer activities
 Hands on experience
 Exposure to the hospital environment
 FUN!
 Other _____

OTHER INFORMATION

Have you participated in any of the following activities?

- Job shadowing in a healthcare setting
- Worked in a hospital, clinic, or nursing home (paid or unpaid)
- Interviewed a healthcare professional
- Attended a healthcare careers presentation
- Attended another healthcare careers camp
- Attended a Scrubs Camp in South Dakota
If yes, where? _____

- Other (Please describe) _____

Briefly describe above experience: _____

Race/ Ethnicity:

- American Indian
- Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Pacific Islander
- White
- Mixed Race

How did you hear about the USD Coyote Scrubs Camp?

- Friend
- Teacher or Guidance Counselor
- Parent
- Newspaper
- Health Professional
- Online
- Other _____

PERSONAL STATEMENT

This personal statement will help us get to know you better and demonstrate your ability to organize your thoughts and express yourself. Please attach an essay of no more than 350 words total addressing the following questions:

- 1) Why do you want to pursue a career in a healthcare profession?
- 2) Why do you want to attend the USD Coyote Scrubs Camp?
- 3) Tell us about a person who has had a significant influence on you and your career plans and describe that influence.
- 4) Discuss some issue of personal, local, national, or international concern and its importance to you.

Please return your application to:

Tony Long
University of South Dakota
1011 11th St
Rapid City, SD 57701

You may also scan and send the documents via email to

Tony.Long@usd.edu

Questions?

Contact Tony Long
605-791-6346

To be completed by APPLICANT:

I certify that the information given in this application is true and correct. I have proofread for accuracy and completeness, for I realize that applications are accepted only when complete.

Printed Name of Applicant

Signature of Applicant

Date

To be completed by PARENT or GUARDIAN:

I give permission for _____
I understand that I am responsible for transportation to and from the camp.

to participate in the USD Coyote Scrubs Camp to be held June 8-10 or 15-17, 2021.

Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date