



**Southwest Pennsylvania Area Health Education Center (AHEC)**  
**2024 Summer Health Career Academy Application**  
**July 15-19, 2024**

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**Application Deadlines and Notification Dates:**

**Receipt Deadline: Must be received by Friday, May 3, 2024**

**Notification: All applicants will be notified of admission decisions via email by May 31, 2024**

**Student Eligibility:**

- Student must be a current ninth or tenth grade student attending a secondary school or homeschooled.
- **Student MUST reside in one of the following counties: Allegheny, Armstrong, Beaver, Fayette, Greene, Washington or Westmoreland**
- The applicant who accepts the invitation into the Summer Health Career Academy must commit to attending all 5 days of the program.
- Completed applications must be received by May 3, 2024

**Program Information:**

The Health Career Academy will take place for five days, **July 15-19, 2024** on the main campus of the University of Pittsburgh. The academy is designed for current ninth and tenth grade students who are interested in learning more about opportunities in various health careers and the academic preparation necessary for these careers. Students will meet and talk to practicing health care professionals, engage in health career activities, learn to monitor vital signs, engage in hands on medical procedures, learn basic medical terminology, and receive training in leadership skills. The program brings 50 students together to learn about health careers.

**Application Information:**

Application to the AHEC 2024 Summer Health Career Academy is a competitive process. Not all applicants will be accepted. An Advisory Board comprised of academic and health care professionals from counties in the Southwest AHEC region will make the final student selections. All information provided in the application is considered and is kept confidential.

**Fees and expenses:**

Cost for the 2024 program is \$250.00 for those **accepted**. **DO NOT SEND MONEY WITH YOUR APPLICATION.** This fee includes all tuition, course materials, field trips and lunch during the week of the Academy.

**Scholarships** are available for applicants who are **accepted** into the program and demonstrate the need for financial assistance. Attendees are responsible for transportation to and from the Academy.

**Specified Items – ALL THREE ARE NEEDED TO HAVE A COMPLETE APPLICATION!**

1. **Must include a letter from a teacher, guidance counselor, or administrator who is recommending the student.**
2. **Must include a one-page letter, indicating student's interest in the Health Career Academy.**
3. **A parent or guardian must acknowledge the student's application by signing the application.**



[www.southwestahec.org](http://www.southwestahec.org)

# 2024 Summer Health Career Academy Application Form

*This form may be duplicated.*

## STUDENT INFORMATION:

*(Type or clearly PRINT all information)*

Name: \_\_\_\_\_ Applicant's Current Grade Level \_\_\_\_\_

Address: \_\_\_\_\_  
Street

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

Home Phone: \_\_\_\_\_

School: \_\_\_\_\_ County: \_\_\_\_\_

Student Email: \_\_\_\_\_ Parent Email: \_\_\_\_\_  
(it is best to use an email not associated with your school)

I applied last year  yes  no

### Specified Items – ALL THREE ARE NEEDED TO HAVE A COMPLETE APPLICATION!

1. **Recommendation Letter:** Each applicant to the AHEC Health Career Academy must include a letter from a teacher, guidance counselor, or administrator who is recommending the student. The letter must include an indication from this school entity that the student is pursuing academic courses in preparation for future health professions. Please list the name, address, phone and/or email for the person recommending this candidate.

Name: \_\_\_\_\_

School Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_ Check here if the letter of recommendation is attached to this application.

2. **Student Essay:** Each student applicant must include a full one-page letter indicating reasons for interest in the Health Career Academy. This letter should also list any information regarding health career activities, volunteer work, or school/ extra-curricular activities which relate to the student's career exploration. **Please also explain any experiences you have already had in the health career field.**

\_\_\_\_\_ Check here if the student letter is attached to this application.

3. **A parent or guardian must acknowledge the student's application by signing below.**

Parent's Signature: \_\_\_\_\_

Where did you hear about the academy? \_\_\_\_\_

All applications must be received by Friday, May 3, 2024  
Please send completed applications to:  
Dr. Lynne Williams  
Southwest Pennsylvania AHEC, Inc.  
545 Allegheny Ave. Suite 200  
Oakmont, PA 15139