



**HEALTH CAREERS ACADEMY**  
**ANGELA HEFTER - COORDINATOR**  
**STUDENT INFORMATION SHEET**  
**2010 - 2011 Regional Occupational Program Application**  
**Medical Science I / Medical Clinical I**

**Information:** Angela Hefter, 273-3181 ext. 383, or e-mail ahefter@avhsd.org

**Required:** For students interested in ROP Medical Science I /Medical Clinical I: Student and parent/ guardian **must attend a Parent Information Night Meeting in Palmdale High School cafeteria on February 3, 2010, at 6:30p.m.**

**A. General Information**

- Eligibility:** High School students (from local high schools) who will be in 11<sup>th</sup> or 12<sup>th</sup> grade by 10-11 School Year (class starts 08/09/10)
- Credits:** 5 per semester for each course; Medical Science I and Medical Clinical I are both 1-year courses.
- Classes Meet:** - Monday, Wednesday, and Friday in classroom at Palmdale High School  
- Tuesday and Thursday with ROP Instructor at hospital and health care institutions
- Location:** Palmdale High School, 2137 E Ave R, Palmdale, Room 383  
Hospitals and health care institutions in Lancaster, Palmdale, and surrounding communities
- Time:** 9:48 to 11:54 a.m. (periods 3 & 4)  
or 1:39 to 4:00 p.m. (periods 6 and 7) } 

Classes meet in 2-period blocks
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- School:** For students not attending Palmdale High School, applying for this class does not imply admission into Palmdale High School; students will retain their enrollment at their original high school site, and be present on the PHS campus for the Health Academy classes ONLY.

**B. Student Requirements**

- Must have own transportation to hospitals or health care sites and, if coming from another school, must have transportation to Palmdale High School
- Must arrange class schedule at high school to be able to attend this program
- Medical Science I and Medical Clinical I are co-requisite classes. Students enrolled in Medical Science I 3<sup>rd</sup> period MUST enroll in Medical Clinical I 4<sup>th</sup> period. Students enrolled in Medical Science I 6<sup>th</sup> period MUST enroll in Medical Clinical I 7<sup>th</sup> period. No other class combinations are allowed.

After acceptance to the program:

- Must complete an extensive medical history and provide proof of a negative tuberculosis check;
- Must obtain additional vaccinations besides those required for high school attendance (Normal waiver provisions DO NOT apply, these vaccination requirements are hospital rules not ROP) ;
- Fee includes purchase of a Health Careers Academy approved uniform, HOSA membership. Parent Advisory Committee membership is also required.

### C. Student Application

- Complete the attached application - Print or Type the finished copy

**Attach to the application:** (If you have a problem getting these items, contact Mrs. Hefter)

- Attendance Record for past 3 semesters or 2 years--request from the attendance clerk at least 2 weeks in advance of submitting
- Unofficial copy of your transcript-- request from the Registrar at your school-- do this at least 2 weeks before submitting
- Two (2) completed Recommendation Forms (in sealed envelopes) – forms are in this document. Have a teacher; counselor, employer or other adult complete a recommendation form. Give form to adult early allowing time for person to complete and return form to you to attach to your application.
- This information form signed by parent/ guardian
- Submit the application and all attachments by March 1, 2010** to: Angela Hefter, Health Careers Academy, PHS, 2137 E Ave R, Palmdale, CA 93550  
( application must be received or postmarked by March 1, 2010.)

### D. Selection Process

**The selection committee will review:**

- A pattern of good attendance for the present year based on the attendance report from your school
- Completed essays indicating an expressed and demonstrated interest in the health care field.
- An unofficial transcript indicating a pattern of successful completion of classes.
- Minimum GPA of 2.0
- Two or more completed recommendation forms, sealed in envelopes and attached to the application.
- In addition, students currently in the PHS Health Careers Academy will have their **Behavior** and **Academics** reviewed by the Sophomore Core Teachers prior to selection for the class
- You will be notified if you are selected, by mail, before **May 7, 2010**. Approximately 120 students will be selected.

### E. Parental Permission

As a parent or guardian I have read the basic requirements and I agree to let my son/daughter attend this program if accepted.

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Signature of Parent/Guardian

Date



4. Experience - List any work experience you have had that demonstrates your ability to take on responsibility. This includes paid, unpaid, volunteer, community service or informal jobs such as babysitting, mowing lawns, working in a family business, etc.

5. Activities - List any clubs, sports, organizations that you are/have been involved with both in and out of school.

6. Interests - List three things that you like to do in your spare time. This could include sports, reading, writing, collecting or building something, etc.

7. What means of transportation will you use to get to hospitals and medical clinic sites (and Palmdale High School if you attend another school)?

8. What is your first choice of periods to take the class? (CHECK ONE)

\_\_\_\_\_ 9:48 to 11:54 a.m. (periods 3 & 4)

OR

\_\_\_\_\_ 1:39 to 4:00 p.m. (periods 6 and 7)

**HEALTH CAREERS ACADEMY**  
***Recommendation Form***  
**Medical Science I / Medical Clinical I**

**Student Name:** \_\_\_\_\_

(Please print)

**Current School:** \_\_\_\_\_

Dear Teacher/Counselor/Employer:

The above named student is applying for all or one of the Health Career Academy ROP Classes at Palmdale High School. Please complete the student ratings below and make comments in the space provided.

Please return this form **SEALED IN AN ENVELOPE** to the requesting student, or to Angela Hefter c/o PHS Health Careers Academy. The deadline for submitting a completed application is **March 1, 2010**.

1. Daily attendance is:

excellent_____	good_____	fair_____	poor_____
(0-2 absences)	(3-4 absences)	(5-8 absences)	(Frequent absence)

\*Any special circumstances for absences:

2. Arrival for class is generally on time:

always\_\_\_\_\_ most of the time\_\_\_\_\_ sometimes\_\_\_\_\_ seldom\_\_\_\_\_

3. Completion of class assignments, homework, special projects is generally completed and submitted on time:

always\_\_\_\_\_ most of the time\_\_\_\_\_ sometimes\_\_\_\_\_ seldom\_\_\_\_\_

4. Participation and demonstrated interest in activities is:

high\_\_\_\_\_ very good\_\_\_\_\_ good\_\_\_\_\_ fair\_\_\_\_\_

5. Because the spaces for these classes are limited, it is important that those selected will have a commitment to complete the course. This means that the student must be at school everyday, on-time, and with completed assignments. Based on your information, would you recommend this student.

highly\_\_\_\_\_ recommended\_\_\_\_\_ recommended with reservations\_\_\_\_\_  
would not recommend\_\_\_\_\_

6. Additional comments:

Reference Name (print) and Signature\_\_\_\_\_

Date\_\_\_\_\_ School/Organization\_\_\_\_\_

Phone/Ext\_\_\_\_\_ e-mail:\_\_\_\_\_

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