

MEDQUEST 2019

Keep this page for your reference

Dear Southern Vermont Students and Parents,

Thank you for your interest in MedQuest 2019. MedQuest students spend six days on a college campus exploring health careers through job shadows with health care professionals, learning basic medical skills, becoming certified in CPR, making new friends and much more!

Eligibility: This program is open to students currently enrolled in Grades 10, 11 and 12 who are residents of Addison, Bennington, Rutland, Windham, and Windsor Counties or live in neighboring states and attend a Vermont regional technical/career center, or a public or private southern Vermont high school.

Application Information: Each program is limited to 20 students. Admission is competitive. Selection is based on application and two references. Only complete applications (application and two references) that are received by our office by the deadline (March 1) will be considered for admission.

Cost: The cost of the program is \$500 all-inclusive. Upon acceptance, a \$150 non-refundable deposit is due April 30th. The remaining program costs will be due by May 31st. Scholarships are available. A parent or guardian should complete the scholarship application at the end of this application to apply.

MedQuest is a highly structured program. Students are expected to participate in **all** program components.

Southern Vermont AHEC will hold two sessions of MedQuest.

Session 1: MedQuest West will be held at Southern Vermont College in Bennington, VT with shadow experiences taking place in Bennington and Rutland. The program will focus on careers in Primary Care. Careers explored may include such careers as physician, nurse, physician assistant, nurse practitioner and others as well as in specialized areas such as pediatrics, orthopedics, radiology, rehab, geriatrics, etc.

Session 2: MedQuest East will be held at Landmark College in Putney, VT with shadows taking place in several health care communities in Southern Vermont. The program will focus on careers in Emergency Medicine. Careers and skills will be highlighted in pre-hospital emergency care (EMT and paramedic) and hospital-level emergency care.

Download and complete the application and 2 reference forms (to be completed by non-family adults), sign (student and a parent) and mail to:

Joan Devine
Southern Vermont AHEC
368 River Street, Suite 145
Springfield, Vermont 05156

Or apply online at:

<https://form.jotform.com/SouthernVermont/medquest-2019>

Deadline: Friday, March 1, 2019

2019 MEDQUEST APPLICATION

Please Use Ink

To be completed by the student

PLEASE SELECT PROGRAM YOU ARE APPLYING FOR:

- _____ **MedQuest West: June 23 - 28, 2019 at Southern Vermont College in Bennington**
with a concentration in Primary Care
- _____ **MedQuest East: August 4 - 9, 2019 at Landmark College in Putney** with a
concentration in Emergency Medicine

If you are not selected for the session of your choice, would you like to be considered for admission to the other session?

- _____ Yes, I am available for both sessions
- _____ No, only consider my application for the session I selected

Name: _____

High School: _____ **Planned High School Graduation Year:** 20_____

Current Grade (circle one): 10 11 12 **Birth Date:** ____/____/____ **Gender:** Female____ Male____

Mailing Address _____
Street City/State Zip Code

Phone #: _____ **Cell:** _____

Student E-Mail (email that you have access to in the summer): _____

Parent E-mail: _____

VSAC Student: Yes__ No__ **If Yes, VSAC Counselor's Name:** _____

Will you be a first-generation college student: (neither of your parents has a 4-year degree) Yes_____ No_____

Circle the statement that best applies:

- My parents expect me to go to college
- My parents will support me in whatever I decide to do after high school
- My parents do not want me to go to college

How did you hear about MedQuest? _____

What courses are you currently enrolled in?

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

What is your overall GPA (all forms are acceptable: ex. A-, 94%, 3.67): _____

What extracurricular, community, and vocational activities do you participate in?

(Examples: volunteer work, job, caring for siblings or elders, scouting, church, sports, etc.)

JOB SHADOWING

Job Shadowing is the cornerstone of MedQuest. You will participate in several different three-hour shadowing experiences with healthcare professionals during the MedQuest week.

Please keep in mind: This is a Health Careers EXPLORATION program. You will have the opportunity to see a wide variety of health careers, including ones that you might not have had any exposure to yet, not just ones you think you might be interested in. We will do our best to connect you with shadows related to fields that you are interested in; however, this may not always be possible.

Please describe four (4) interests that you have within the healthcare field. You will likely not get shadows in all 4 of these areas.

Please note: there are no Neonatal (NICU) Units in Southern Vermont. Shadows in surgical units (including anesthesiology and/or surgery) and the emergency department are in high demand and can be difficult to secure. Please keep this in mind when making your choices.

- | | |
|----|----|
| 1) | 2) |
| 3) | 4) |

We may not be able to get shadows in all the areas you indicated an interest, please check other areas that you might be interested in shadowing in (choose all that apply):

- | | | | |
|--------------------------------------|--|---|--|
| <input type="checkbox"/> Dentistry | <input type="checkbox"/> Respiratory Therapy | <input type="checkbox"/> Geriatrics (Elderly) | <input type="checkbox"/> Emergency Services (Rescue Squad) |
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Pharmacy | <input type="checkbox"/> Family Medicine | <input type="checkbox"/> Radiology (Diagnostic Imaging) |
| <input type="checkbox"/> Medical Lab | <input type="checkbox"/> Optometry | <input type="checkbox"/> Veterinary Medicine | <input type="checkbox"/> Rehab (Physical/Occupational Therapy) |

ESSAY: Why are you interested in a career in health care? (Approximate 200-word response)



REFERENCES

Your application requires two (2) reference forms from your high school teachers, guidance counselor, VSAC counselor, volunteer coordinator or other non-family reference. One reference must be from a school faculty/staff. References can be mailed in separately.

Your application will not be considered for admission without your 2 references.

Reference 1: _____

Reference 2: _____

COST

The cost of attending this program is \$500. Upon acceptance into MedQuest, a \$150 **nonrefundable deposit is due on April 30th**. The remaining \$350 will be due by May 31, 2019. Scholarships are available upon request. If you would like to donate to the scholarship fund to help support deserving students with limited funds, please contact me or include donation with your payment.

Students will be provided with scrubs to wear for certain portions of the MedQuest program. The scrubs order needs to be placed before additional paperwork is received back from accepted students. This information has no impact on your acceptance into the program.

Please refer to the sizing chart below and circle your clothing size.

Circle one:	XXS	XS	S	M	L	XL	XXL
	XXS	XSM	SML	MED	LGE	XLG	2XL
Bust	31-34	35-36	37-39	40-43	44-47	48-50	51-53
Waist	24-26	26-27	28-31	32-34	35-38	39-41	42-45
Hip	35-37	37-38	39-41	42-45	46-48	49-52	53-56
Inseam	28.5	29	29.5	30	30.5	31	31.5

This application and two (2) references are due March 1, 2019.

Your application will not be accepted unless your application and both references are received by the deadline. Acceptance letters will be mailed out the week of March 25th.

SIGNATURES

I understand my file is complete when this completed application are received by Southern Vermont AHEC by March 1, 2019.

Student Signature _____ Date _____

TO BE COMPLETED BY PARENT/GUARDIAN

I give permission for my student to attend MedQuest 2019.

Parent/Guardian Signature _____ Date _____

MEDQUEST 2019 REFERENCE FORM

DUE: Friday, March 1, 2019

This student is applying to MedQuest, a six-day, residential Health Careers Exploration Program. A high level of professionalism is required in this program. Your candid assessment is important. We need your feedback regarding this student's ability to live, learn and play in a structured group setting, and to contribute in a respectful manner.

Note: Two non-family references are required, **one must be from a school faculty/staff**. The student's application to MedQuest will not be considered unless this completed form is received by our office by March 1.

Student's Name: _____ High School: _____

Your Name: _____

Relationship with student: _____

Student's strengths as you see them:

Student's challenges as you see them:

Please rate the student in the following areas and provide comments:

Social Skills:	poor				excellent
Respect for teachers or adults	1	2	3	4	5
Appropriate interaction with peers	1	2	3	4	5
Interacts with many groups of people	1	2	3	4	5
Adapts to new settings easily	1	2	3	4	5
Communicates clearly and effectively	1	2	3	4	5

Please comment on your overall impression of the student's social skills:

Motivation:	poor				excellent
Works hard to achieve his/her full potential	1	2	3	4	5
Gets excited about learning new things	1	2	3	4	5
Sets challenging goals for himself/herself	1	2	3	4	5

Please comment your overall impression of on the student's level of motivation:

Personality & Skills:	poor					excellent				
Leadership ability	1	2	3	4	5	1	2	3	4	5
Identifies and makes good choices	1	2	3	4	5	1	2	3	4	5
Ability to sit through presentations that may not be of interest	1	2	3	4	5	1	2	3	4	5
Maintains a positive attitude	1	2	3	4	5	1	2	3	4	5
Is a responsible, considerate, mature adolescent	1	2	3	4	5	1	2	3	4	5
Will interact professionally with patients and professionals	1	2	3	4	5	1	2	3	4	5

Please comment on your overall impression of the student's personality, maturity and skills:

Academic ability/interests:	poor					excellent				
Strong interest in healthcare careers	1	2	3	4	5	1	2	3	4	5
Interest in career education	1	2	3	4	5	1	2	3	4	5
Turns in work on time (if applicable)	1	2	3	4	5	1	2	3	4	5
Takes assignments seriously and does a thorough job	1	2	3	4	5	1	2	3	4	5
Asks questions/is eager to learn	1	2	3	4	5	1	2	3	4	5

Please comment on your overall impression of the student's academic ability and interests:

Check any/all that apply:

- Student is struggling with some difficulties in life right now
- Student has struggled but has been working hard to make improvements
- Student requires frequent behavioral redirection
- Student is shy but is able to act in a professional manner

Additional Comments:

Signature: _____ Date: _____

Mail/Fax To: Joan Devine
Southern Vermont AHEC
368 River Street, Suite 145
Springfield, VT 05156
Fax: 802-885-2128

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Southern Vermont AHEC
368 River Street, Suite 145
Springfield, VT 05156
Fax: 802-885-2128



2019 MEDQUEST SCHOLARSHIP APPLICATION

To be completed by student and parent

The MedQuest fee is \$500. If your student is accepted into the program, you will be asked to pay a non-refundable deposit by April 30th. The amount of this deposit will vary based on the amount of scholarship you are awarded. You will be notified of your scholarship amount and payment schedule in your acceptance letter. Please contact Joan Devine with any questions.

Student Name: _____

Father's Name: _____ Occupation: _____

Place of Employment: _____

Mother's Name: _____ Occupation: _____

Place of Employment: _____

Number and ages of siblings: _____

To be completed by the student:

Are you employed during the school year? _____ If yes, where? _____

Will you be employed during the summer? _____ If yes, where? _____

Please give a brief description of why you would like to be considered for a scholarship: _____

To be completed by a parent:

How much do you feel you can contribute towards the MedQuest tuition? \$ _____
(We ask every family to contribute something towards the cost of this program.)

If your student is not awarded a scholarship, will they be able to attend? _____

Please give any additional details about your need for a scholarship that will be helpful for us to know. _____

Signature of Parent

Date

Please complete and return this form with your child's application.