

Dear Students,

We are excited to announce Henry Ford Jackson in partnership with the Jackson Area Career Center will be offering a free summer health care camp to thirty Jackson Area Middle School students, grade 5<sup>th</sup> – 8<sup>th</sup>. Our day camp will take place **Monday June 17<sup>th</sup> – Friday June 21<sup>st</sup>, 2024**. Our camp will provide students with an opportunity to learn about health care related careers, learn directly from our team of diverse professionals, participate in hands on activities, and much more! We are currently in search of eight Jackson Area Career Center Seniors, College students, or current GME Residents to volunteer as camp counselors during the week of camp.

Below are some of the health care careers you and the campers will have the opportunity to learn about:

- Emergency Care / First Responders
- Physical Therapy
- Sports Medicine
- Nursing
- Imaging
- Surgery
- Respiratory Therapy
- Lab and Diagnostics

Those interested in volunteering must be available for the Camp Counselor Orientation **Friday June 14<sup>th</sup>, 2024, 9:00am - 11:00am**, as well as the entire week of camp **Monday June 17<sup>th</sup> - Friday June 21<sup>st</sup>, 2024, 7:00am - 4:00pm**. Each camp counselor will be assigned approximately three campers for the duration of the camp. The 2024 Health Care Camp will be held at Henry Ford Jackson Hospital, Monday, Tuesday and Friday, and the Jackson area Career Center Wednesday, and Thursday. Parents will have the option to drop their students off at the specified camp location, or at one of the three designated bus stops. Camp counselors will be assigned a bus stop location where they will be required to check campers in/out, ride the bus with the campers to and from Henry Ford Jackson Hospital, or the Jackson Area Career Center, then verify the camper's parent/legal guardians valid photo I.D. before releasing them at the end of the day. HFJH will provide campers and camp counselors with a t-shirt, goodie bag, lunch, and snacks throughout the day.

**Please Note:** All camp counselors will be required to receive all vaccinations and testing required by Henry Ford Health's compliance standards. After you have completed the below application, please email your completed application to Cierra Sylvester via email ([csylves4@hfhs.org](mailto:csylves4@hfhs.org)), no later than **Monday May 13<sup>th</sup>, 2024**.

Background checks are completed on all volunteer applicants. A background check authorization form will be provided following your interview. Additionally, volunteers are required to follow all hospital protocol and complete a health screening prior to participation. Once your application is received you will receive a confirmation email informing you of the next steps in the interview process.

If you have any questions, please feel free to contact me via email ([csylves4@hfhs.org](mailto:csylves4@hfhs.org)).

Sincerely,

Cierra Sylvester  
Workforce Planning Coordinator  
Henry Ford Jackson Hospital / Central Market  
Email: [csylves4@hfhs.org](mailto:csylves4@hfhs.org)



**Emergency Contact:**

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

Cell Phone: \_\_\_\_\_ Home or Work Phone: \_\_\_\_\_

**Employment History:**

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Employment Dates: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Employment Dates: \_\_\_\_\_

**Volunteer History:**

Organization: \_\_\_\_\_ Volunteer Role: \_\_\_\_\_

Dates: \_\_\_\_\_

**References:**

Name: \_\_\_\_\_ Organization/Relationship: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home or Work Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Organization/Relationship: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home or Work Phone: \_\_\_\_\_

**Additional Information:**

Known Allergies: \_\_\_\_\_

Do you speak a language fluently other than English?  Yes  No

If yes, please list: \_\_\_\_\_



## Application Consent

I have completed the above information to the best of my ability and understand that any falsification of the information provided above may prohibit my participation in Henry Ford Jacksons Summer Health Care Camp. If selected to participate, I agree to abide by all the hospital rules, regulations, and expectations. I also understand that requirements may be changed at any time in accordance with best practice and/or organizational improvements for patient/staff safety and guest experience.

I understand I will be required to complete the Henry Ford Health's student immunization compliance standards. This includes the TB skin test, and current TDAP, and MMR vaccines. Please see the attached Camp Vaccination Timeline to ensure all vaccinations are administered within the correct timeframe.

I understand failure to ensure I receive all vaccinations and tests by the specified timeframes in the attached Camp Vaccination Timeline will prohibit me from participating in Henry Ford Jacksons Summer Health Care Camp.

I understand failure to send all required information, and documents to Cierra Sylvester via email ([csylves4@hfhs.org](mailto:csylves4@hfhs.org)) by **Monday May 13<sup>th</sup>, 2024**. will prohibit me from participating in Henry Ford Jacksons Summer Health Care Camp.

I understand I will be responsible for coordinating transportation to and from the assigned student pick up/drop off location.

By Checking each box above, I, \_\_\_\_\_, confirm I have read and understood all information provided.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_