



### **EXPLORE THE REASONS**

## Littleton STEM-Health Summer Camp July 15-19th, 2013

#### **Student Application:**

Student's Name:					
Date of Birth:	Grade:	School:	:		
Shirt-Top Size (Adults): Small_	_ Medium	_Large X	-Large		
Parent/Guardian Name (Please Print):  Parent Signature, allowing your child to participate:					
Home Phone:					
Email address:					
Emergency contact:					
Home Phone:**OVER**OVER**OVER	Wo R**OVER**O	ork Phone: VER**OVER	**OVER**OVE	R**OVER**OVER->	
How did you hear about the Ho	ealth Career	s Camp? (ci	rcle all that ap	oply)	
Flyer Teacher o	r guidance co	unselor N	ewspaper ad	Friend	
Health Careers Presentation	Career Fair	NCHC We	ebsite Othe	÷r	

Please provide two references (one must be	a teacher, guidance counselor, or employer):
Reference 1:	
Name:	Phone:
Relationship to Applicant:	
Reference 2:	
Name:	Phone:
Relationship to Applicant:	

#### Personal essay:

Please attach a personal essay stating, in your own words, why you are interested in exploring health careers.

# Space is limited, Register Today! Please send your application by mail, email, or fax to: Diana Gibbs, NCHC Program Manager

If mailing, please send to:
North Country Health Consortium
262 Cottage St., Suite 230
Littleton, NH 03561

If emailing, please scan and email the signed application to: dgibbs@nchcnh.org

If faxing, please fax signed application to: (603) 444-0945

Selection will occur and we will notify you by phone and email of your application status.

Cost: Scholarships are Available!

The cost of the Health Career Summer Camp is \$75 for the week. Cost includes: lunch daily, field trip transportation, and educational materials. The camp fees are due upon receipt of additional paperwork, which will be provided upon acceptance. Scholarships are available. For more information, contact Diana Gibbs at (603) 259-3700 ext 222.

Thank you for your interest in our STEM-Health Summer Camp! I hope to see you there.

Diana Gibbs, BA, CPS NCHC Program Manager