UW School of Nursing
Diversity Awareness Group
UW Medical Center

JULY 15-19, 2013

Nurse Camp
University of Washington School of Nursing
Academic Services
Box 357260
Seattle, WA 98195-7260
E-mail: gwoodak@uw.edu or kwchu@uw.edu
Phone: 206-543-8736

The UW Nurse Camp 1-week summer program seeks to foster, affirm, and encourage high school sophomores and juniors interested in a career in nursing at no cost. Students will be exposed to clinical, academic, community service activities and much more! To learn more about the UW Nurse Camp, please visit http://nursing.uw.edu/nursecamp/

PLEASE NOTE:

- You **must** be 16 years of age to participate in Nurse Camp.
- **Nurse Camp is a DAY camp program.** Overnight accommodations are **NOT** provided.

Eligibility:

- Be a US Citizen or hold a permanent resident visa
- By summer have recently completed your sophomore or junior year of high school **and** reach 16 years of age by the first day of camp.
- Demonstrate an interest in nursing
- Come from a disadvantaged background (economic, geographic, education)
- And/or students who are underrepresented in nursing

Application Checklist:

- Apply by Monday, April 15, 2013 at http://nursing.uw.edu/nursecamp/. Download and e-mail the completed PDF to sonas@uw.edu.

Print one copy of your application to mail to the UW School of Nursing with your transcript and recommendation form.

- A current high school official sealed transcript (ask your counselor how to obtain yours)
- One (1) completed recommendation form **in a sealed envelope** from a Science Teacher, Academic Advisor, Employer, Volunteer Supervisor or Mentor who know your goals becoming a health professional
- Submit your printed application, sealed transcript(s), and recommendation form in **one** envelope and mail to the above address

APPLICATION FORM

PERSONAL INFORMATION

1. Last Name: _____ First Name: _____ M.I.: _____
2. Phone number: _____
3. E-mail address: _____
4. Address: _____
   City State Zip Code
5. County: _____ 6. Gender: ☐ Female ☐ Male ☐ _____
7. Birthdate: _____ 8. Birthplace: _____
9. Present Age: _____ 10. Citizenship: _____
11. If not a U.S. citizen, are you a permanent resident? ☐ No ☐ Yes
12. How do you describe yourself? (For Federal reporting purposes only)

☐ Black/African American ☐ Mainland Puerto Rican
☐ Asian/Pacific Islander ☐ Other Hispanic
☐ Native American/Tribe: _____ ☐ White/Caucasian
☐ Mexican-American ☐ Other (specify): _____

EDUCATIONAL BACKGROUND

14. High school presently attending: _____ City: _____

15. Current high school grade level: ☐ Sophomore ☐ Junior

16. Do you speak any languages other than English fluently? _____

17. Science and Math Education: List the titles and grades received for science and math courses taken in high school.

COURSE	GRADE	COURSE	GRADE

18. Do you plan to attend college? ☐ Yes ☐ No

☐ 2 yrs. ☐ 4 yrs. ☐ Other (specify): _____

19. Have you attended any other summer programs? ☐ Yes ☐ No

If yes, which one/s and when? _____

20. What are your career choices at the present time?

A. _____ B. _____ C. _____

ACTIVITIES

21. A. List extracurricular and sports activities in which you have been involved while attending high school.

B. List any honors you have received while attending high school.

22. List jobs (paying or volunteer) held during high school, noting dates and approximate hours per week (babysitting and yard work may be included).

COMPANY	YOUR TITLE/POSITION	DATES; HOURS/WK

23. How did you find out about the UW Nurse Camp program?

ESSAY QUESTIONS

24. We are interested in why you are seeking a career in nursing and how an experience such as the UW Nurse Camp summer program can be of benefit to you. Please provide detailed answers for the following questions.

    A. Why are you interested in nursing? What about your life experiences, your talents, your personality – the things that make you uniquely *you* – make this a good career choice? (150-250 words)

    B. Describe a health problem you've observed in your community. What are some strategies that could be used to combat this problem? (150-250 words)

    C. Choose one person you've known who has had a large impact on how you live your life. Describe your experience with that person and how it influenced you. (150-250 words)

    D. The UW Nurse Camp summer program is intended for students who are somehow disadvantaged. Describe, if any, what barriers or circumstances you face that would keep you from attending college or completing a college degree. (150-250 words)

FAMILY BACKGROUND *(To Be Completed by Parent or Guardian)*

25. Parental status (optional):

☐ Married/Partnered ☐ Divorced ☐ Legally Separated ☐ Single Parent ☐ Widowed

26.

PARENT/GUARDIAN	PARENT/GUARDIAN	PARENT/GUARDIAN
Name: _____	Name: _____	Name: _____
Date of Birth: _____	Date of Birth: _____	Date of Birth: _____
Occupation: _____	Occupation: _____	Occupation: _____
Education: _____ *(Level completed)*	Education: _____ *(Level completed)*	Education: _____ *(Level completed)*

27. Have you or your spouse/partner ever worked in a Health Care field? ☐ Yes ☐ No

28. How many people currently reside in family household? # of Adults: _____ # of Children: _____

29. Have any of your children ever gone to college or vocational school?

College: ☐ Yes yrs. _____ ☐ No Vocational School: ☐ Yes yrs. _____ ☐ No

30. How likely is it for your child who is applying to Nurse Camp to attend college?

☐ Very Likely ☐ Somewhat Likely ☐ Not Very Likely

31. What would prevent your children from attending college or vocational school?

☐ Financial Situation Other (specify): _____

32. Is your son or daughter eligible for the National Free/Reduced Price Lunch program?

☐ Yes – Free Lunch ☐ Yes – Reduced Price Lunch ☐ No

33. Total annual household income (please include ADC, Child Support, Alimony, Pensions, etc.)

☐ Less than $10,000 ☐ $10,001 - $15,000 ☐ $15,001 - $20,000 ☐ $20,001 - $25,000

☐ $25,001-$30,000 ☐ $30,001 - $35,000 ☐ $35,001 and above

Family size: _____

34. Do you have health insurance? Type of Coverage: _____

IMPORTANT:

PARTICIPATION IN THE UW NURSE CAMP SUMMER PROGRAM DEMANDS A COMMITMENT OF ATTENDANCE JULY 15-19, 2013 FROM 8:30AM-4:30PM. **OUTSIDE JOBS, SUMMER SCHOOL, OR SUMMER CAMP ARE NOT RECOMMENDED**.

UW NURSE CAMP IS A DAY CAMP AND DOES NOT OFFER OVERNIGHT ACCOMMODATIONS. TRANSPORTATION IS YOUR RESPONSIBILITY. METRO BUS TICKETS WILL BE MADE AVAILABLE TO CAMPERS WHO NEED TO USE THEM.

☐ **Check this box if you require Metro bus tickets to get to and from UW Nurse Camp.**

WHEN ACCEPTED INTO THE UW NURSE CAMP PROGRAM , PROOF OF IMMUNIZATIONS, HEALTH CARE INSURANCE, IF PERMANANT RESIDENT NEED A COPY OF ID CARD, AND OTHER ADMISSION FORMS ARE REQUIRED.

THE UNIVERSITY OF WASHINGTON SCHOOL OF NURSING AND UW MEDICAL CENTER NURSE CAMP PROGRAM RESERVES THE RIGHT TO REMOVE STUDENTS FROM THE SUMMER PROGRAM AT ANY TIME FOR MISCONDUCT OR NON-COMPLIANCE WITH POLICIES AND PROCEDURES.

I CERTIFY THAT I FULLY UNDERSTAND THE ABOVE GUIDELINES AND THAT THE INFORMATION GIVEN IN THIS APPLICATION IS TRUE AND CORRECT.

Signature of Applicant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

The University of Washington ensures equal opportunity in education regardless of race, color, creed, religion, national origin, sex, sexual orientation, age, marital status, disability, disabled veteran, or Vietnam era veteran status in accordance with University policy and applicable federal and state statutes and regulations.