

Healthcare Internship Program Application Process Overview

This is a program sponsored by The Oxford Rotary Club (<u>www.oxfordrotaryclub</u>.org) and District 6670 of Rotary International.

Rotary International (<u>www.rotary.org</u>) is a worldwide organization of 1.2 million members, whose principal goal is the advancement of international understanding, goodwill, and peace through a world fellowship of business and professional persons united in the ideal of service.

The Oxford Rotary Club is a local organization, made up of community members from all sectors of the community, serving the needs of Oxford, and participates in the International Rotary programs. Funds for THS scholarships and community projects servicing the THS District are raised through the "Stars and Stripes Flag" project (www.oxfordflags.org).

Zoom Information Session February 7th 2024 at 4:00 pm

Interested candidates are encouraged to attend the session. Sign up and receive log-in information at oxfordrotary1965@gmail.com.

How to Apply:

- Fill out each part of the following application.
- Typed applications are preferred using the Form that follows.
- A letter of recommendation should be included with your submission that addresses your work ethic, promptness and your responsiveness to direction.
- A cover letter from you may be attached at your option.
- Please submit the completed application to <u>oxfordrotary1965@gmail.com</u> no later than midnight March 18, 2024.

• Eligible candidates are students who are the equivalent of a Junior or Senior, have their primary residence in the Talawanda School District (TSD) and may attend a nonTSD school.

• Applications will be reviewed by a committee composed of Rotarians and hospital executives. Candidates of interest will be contacted for a personal interview and a final selection of two candidates will be made and notified.

All information submitted will be held in strict confidence.

Applicants will be notified in writing whether or not they receive an internship.

Application Deadline: March 18, 2024



Healthcare Internship Program Application

Personal Information	
Full Name:	Nickname:
Address:	
Email:	Mobile Phone:
Junior or Senior?	School Attending:
Prior Work Experience	
(Please list Employer, Position, Dates of Employment, Supervisor Name and Phone)	
Explain Your Interest in this Internship opportunity	

Do you have an interest in a particular health care area (e.g. pediatrics, oncology, radiology, pharmacy etc.) Or would you be interested in a broad exposure to the various areas within the hospital?	
Are you able to work 40 hours per week during the Summer of 2024 for 8 weeks? Explain any exceptions.	
What are your plans following Graduation?	
All information submitted will be held in strict confidence.	
For questions, please email oxfordrotary1965@gmail.com	

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