CAMP CARILION CLINIC



Carilion Clinic, Radford University School of Nursing and Virginia Tech Carilion School of Medicine are offering Camp Carilion Clinic for rising ninth and tenth-graders or above who may be interested in a future career in healthcare.

Throughout the four-day camp, students will have an opportunity to learn life-saving information through hands-on exercises and interactive demonstrations.

Students will learn more about:

- · What to do in the event of an accident or life-threatening situation
- Trauma-related injuries and ways to prevent them
- Nursing skills
- CPR training
- Respiratory therapy
- Operating Room procedures, techniques, and instruments
- Many different professions within the healthcare industry

Camp Carilion Clinic will be held June 20-23, 2023. Only ten students will be blindly selected based on application details.

For an application or more information, please contact Lynn Cowart at Lmfreeman@carilionclinic.org or Karri Proctor at Krproctor@carilionclinic.org

Applications must be received by Friday, April 14, 2023.



CAMP CARILION CLINIC 2023 INFORMATION

Camp Carilion Clinic will be held Tuesday, June 20th - Friday, June 23rd.

Ten students will be accepted into the camp. To be eligible, the following are required:

- 1. Applicant must be a rising 9th &10th grade student or above.
- 2. Applicant must have a strong desire to learn about healthcare careers.
- 3. Applicant must have his/her own transportation.
- 4. Applicant must submit a completed application by Friday, April 14th, 2023.
- 5. Applicant must have one recommendation from a school official.
- 6. Applicant must write a paragraph titled, "Why I Am Interested in this Camp."

Blinded applications will be reviewed by the Camp Carilion Clinic Committee and notice of decisions will be emailed by Friday, April 28th, 2023. If your child is accepted to Camp Carilion Clinic, a fee of \$75 payable to Carilion Clinic is due by Friday, May 12th, 2023. Incomplete applications will not be reviewed.

**Students <u>accepted</u> to Camp Carilion Clinic will be required to complete additional documentation. Additional information on these requirements will be provided to students with their acceptance notification.

Carilion Clinic
Visiting Student Affairs
1 Riverside Circle, 4th floor
Roanoke, VA 24016

Camp Directors

Karri Proctor (540) 581-0303 krproctor@carilionclinic.org

Lynn Cowart (540) 581-0304 Lmfreeman@carilionclinic.org

CAMP CARILION CLINIC APPLICATION 2023 (To be completed by parent or guardian) Please PRINT clearly

CHILD'S NAME	(FIRST)	(MIDDLE)	(LAST)
CHILD'S DATE OF BIRTH _			
□ MALE □ FEMALE			
SCHOOL NAME			
PARENT/GUARDIAN(S) NA	ME		
COMPLETE ADDRESS			
(CITY)	(STATE)		(ZIP)
HOME PHONE	_ CELL PHONE	WOR	K PHONE
EMAIL(s) (parent and child)		
HOW WILL THIS CAMP HE	LP SUPPORT YOUR	CHILD'S FUTURI	E CAREER GOALS?
			
I certify that all information of knowledge. If my child is acc my child to and from Camp C scheduled locations and time become subject to the regula	epted to Camp Carilio Carilion Clinic. I agree es. I understand that u	n Clinic, I agree to to pick up and dro upon applying for	provide transportation for pp off my child at the
PARENT/GUARDIAN SIGNA	ATURE	DATE	<u> </u>

CAMP CARILION CLINIC APPLICATION 2023 (To be completed by camper)

WHY I AM INTERESTED IN THIS SUMMER CAMP					
		·			
Applicant Name:		D	ate:		

CAMP CARILION CLINIC RECOMMENDATION FORM 2023 (To be completed by school official)

Student Name:											
School:	GRADE FOR FALL 2023										
The above applicant has applied for participation in the Camp Carilion Clinic. This form must be received by Visiting Student Affairs no later than Friday, April 14, 2023, and returned via e-mail to Lmfreeman@carilionclinic.org											
Academic Performance	1	2	3	4	N/A						
Attendance/punctuality	1	2	3	4	N/A						
Class participation	1	2	3	4	N/A						
Ambition	1	2	3	4	N/A						
Dependability/reliability	1	2	3	4	N/A						
Attitude	1	2	3	4	N/A						
Ability to work with others	1	2	3	4	N/A						
Communication skills	1	2	3	4	N/A						
Leadership skills	1	2	3	4	N/A						
Additional Comments:											
Name:											
Title:				_							
* Signature on form is rec	uired.										
Signature:			Date	··							