

Turn in this completed application and required documents to Mr. Egbert by March 28, 2025.

It is the student's responsibility to have their completed application approved and signed by the appropriate teacher.

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dents ap uiremen		gnition cord for Hea	alth Sciences mus	st meet the following
•		e GPA of 3.0 or high		
•	•	ade point average in		courses duction to Health Science (o
•	Human Biology), I Some Tech Center	Medical Terminolog classes may apply,	gy, Anatomy and but will be dete	Physiology, Sports Medicine rmined by approving teacher
•	Student Name	cipant in HOSA (Future Health Prof Dates of HOSA membership		essionals) for at least one you
		mark	777773	
•		urs of Job Shadowing a HOSA Officer for on		or complete an Internship for
	Job Shadow □	Where:	Hours:	Signature of supervisor:
				Signature of supervisor: Signature of supervisor:
	Job Shadow □	Where:	Hours:	
•	Job Shadow □ Internship □ HOSA Officer □ Participate in two verify participation	Where: Where: Title: Skills competition: on)	Hours: Hours: Dates: s for HOSA (prov	Signature of supervisor: Signature of advisor:
•	Job Shadow □ Internship □ HOSA Officer □ Participate in two verify participation Participate in a Winformation.	Where: Where: Title: Skills competition: on) ork Based Learning	Hours: Hours: Dates: s for HOSA (prov	Signature of supervisor: Signature of advisor:
•	Job Shadow □ Internship □ HOSA Officer □ Participate in two verify participation Participate in a Winformation. Attach a transcrip	Where: Where: Title: Skills competition: on)	Hours: Hours: Dates: s for HOSA (provent of the control of the	Signature of supervisor: Signature of advisor: ride copies of documentation e Career Center for more
•	Job Shadow □ Internship □ HOSA Officer □ Participate in two verify participation Participate in a Winformation. Attach a transcrip	Where: Where: Title: Skills competitions on) ork Based Learning at to verify classes a	Hours: Hours: Dates: s for HOSA (provent of the control of the	Signature of supervisor: Signature of advisor: ride copies of documentation e Career Center for more

Note___

Award: approved_____/denied___