



Central Michigan District Health Department

Promoting Healthy Families, Healthy Communities



Jennifer Morse, MD, MPH, FAAFP
Medical Director

Steve Hall, RS, MS
Health Officer

Central Michigan District Health Department Public Health Experience Application

Name:

Address/city/zip:

Phone:

Email:

Emergency Contact Name and Phone Number:

I am interested in the following opportunity:

| | |
|---|---|
| <p><input type="checkbox"/> Volunteer</p> <p><input type="checkbox"/> For one day or one event</p> <p><input type="checkbox"/> Short-term (one week – one semester)</p> <p><input type="checkbox"/> Ongoing (indefinite period of time)</p> | <p><input type="checkbox"/> Job Shadow</p> <p><input type="checkbox"/> For one day or less</p> <p><input type="checkbox"/> Shadow _____ (name the position)</p> <p><input type="checkbox"/> Intermittent Shadowing (Date range: _____)</p> |
| <p><input type="checkbox"/> Interviewing someone at the health department for a class (one visit)</p> | <p><input type="checkbox"/> Internship</p> <p><input type="checkbox"/> One semester for _____ hours</p> |
| <p><input type="checkbox"/> Student Project</p> <p>Please specify school, program and number of hours required.</p> | <p><input type="checkbox"/> Clinical Rotation for _____ hours</p> <p><input type="checkbox"/> PA student</p> <p><input type="checkbox"/> Nurse Practitioner student</p> <p><input type="checkbox"/> College of Med student</p> <p><input type="checkbox"/> Nursing student</p> <p><input type="checkbox"/> Dietetic student</p> <p><input type="checkbox"/> Social worker student</p> <p><input type="checkbox"/> Office administration student</p> <p><input type="checkbox"/> High school/Career Tech student</p> <p><input type="checkbox"/> Medical Assistant student</p> |

I am interested in the applying for the following department(s):

_____ Administration (Human Resources, Information Technology, Accounting)

_____ Emergency Preparedness

_____ Environmental Health (Well, Septic, Food, Recreational Water)

_____ Health Promotion (Family Planning, Health Education, HIV/STD services, Hearing and Vision)

_____ Personal Health (WIC, Immunizations, Communicable Disease, Maternal/Infant Health)

_____ Other (please describe: _____) I

am interested in an opportunity in the following location(s):

| | |
|--------------------------------|---|
| _____ Arenac County (Standish) | _____ Isabella County (Mt. Pleasant) |
| _____ Clare County (Harrison) | _____ Osceola County (Reed City & Marion) |
| _____ Gladwin County (Gladwin) | _____ Roscommon County (Prudenville) |
| _____ No preference | |

If applicable:

Name of College/University/High School attending: _____

Name of Instructor: _____

Name of Course/Program of Study requiring volunteer/internship experience:

Dates/Semesters this experience must be done:

**Please include copies of class or project requirements with this application.

Please Note:

- This application will be forwarded to the appropriate Director for consideration.
- An interview may be required prior to consideration of placement.
- Additional materials (i.e. cover letter/resume, etc.) may be requested by Central Michigan District Health Department prior to consideration of placement.
- Upon approval, all applicants will be asked to sign a confidentiality agreement.
- Upon approval, applicants will be asked for immunization records.
- Upon approval, applicants may be asked to sign an agreement for a background check.
- Completion of this application does not mean automatic placement. Placement is determined by the appropriate Director at Central Michigan District Health Department.