JBHS High School
Academy of Medical Science
Program Application

Personal Information: PLEASE PRINT CLEARLY

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<thead>
<tr>
<th>Name:</th>
<th>Graduation Year:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Address:</td>
<td>City:</td>
<td>Zip Code:</td>
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<tr>
<td>Phone Number (home):</td>
<td>Guardian's Full Name:</td>
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<td>Phone Number (parent cell):</td>
<td>Email address (parent):</td>
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<tr>
<td>Phone number (student cell):</td>
<td>Email address (student):</td>
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Are you zoned for a different high school in Martin County? If yes, what school are you zoned for?

Acknowledgements:

Please read and initial beside each statement below:

STUDENT INITIAL          PARENT/GUARDIAN INITIAL

Completion of this application does not guarantee admission to the Academy of Medical Science. Determinations will be based on academic success in core curricula, student conduct and thorough review of this application and forthcoming interview, and the number of available spots in the Academy.

Students enrolled in Academy of Medical Science will be offered the opportunity become a State of Florida Registered Certified Nursing Assistant. To successfully complete the academy and earn the Industry Certification, students must pass a State Certification exam. The first attempt at this examination is offered at no cost to students.

By completing the Academy of Medical Science (minimum of 3 courses), students may be eligible to earn a minimum of 12 college credits through articulation agreements with local colleges.

Students will be required to apply each year in order to continue in the program.

Answer the following questions:

Thoughtfully answer the following questions with as much information and detail as possible. Please write or type your responses on another sheet.

1. Why do you want to be in the JBHS Academy of Medical Science?
2. How will the JBHS Academy of Medical Science help you achieve your future life goals? Please be as specific as possible.
3. How will you use the knowledge and skills that you obtain in the JBHS Academy of medical Science to help others?
4. Why do you think it is important for JBHS Academy of Medical Science students to demonstrate the following characteristics: Excellent Grades, Minimal absences, Professional behavior at all times, a desire to volunteer in our community?
5. Please define caring and explain why you think a medical professional should be a caring individual?
6. Do you plan on working in the medical field upon completion of the JBHS Academy of Medical Science? Please describe where you would like to work and what job you hope to obtain.
The three-year course sequence for the Academy of Medical Science is as follows:

Health Science Anatomy & Physiology*
Health Science Foundations*
Certified Nursing Assistant

**Nursing Assistant is a 3 year program, courses begin in Grade 10.**

*Continuation in the Medical Science Academy is contingent on maintaining a C or higher in all Academy classes no serious discipline violations. Completion of HS Anatomy Physiology to take HS foundations, completion of HS Anatomy and Physiology as well as HS Foundations to take Nursing Assistant. Ability to meet all of the State of Florida requirements for CNA license including Physical Exam, completion of all necessary immunizations, fingerprint and background check, Transportation to and from clinical training. Student must be able to provide a State picture ID and Social Security Number. Student must also have a negative drug screen.

I have read the JBHS Career Academy information and understand the level of commitment required to achieve program completion. Upon completion, I may have the opportunity to receive college articulation credits, the Gold Seal Bright Futures scholarship, and become a State of Florida Registered Certified Nursing Assistant. I understand that I will be working in a clinical environment and participation, attendance and preparedness is vital to my success in this program. As a student in this program I am expected wear professional scrubs as directed by the instructor and I am to follow the safety procedures and class rules.

Please note: This application does not ensure acceptance into a Career Academy. If your child requires reading or math remediation, their schedule may not accommodate participation.

Participation in this program will require a lab fee.

Student Signature
Parent/Guardian Signature

Please submit this completed form to:
Guidance Department
Jensen Beach High School
2875 NW Goldenrod Road
Jensen Beach, FL 34957

You may contact Mr. Day if you have any questions: daya@martin.k12.fl.us

Your application will then be forwarded to Mr. Day for his review.

*The School Board shall admit students to Martin County District schools, programs, and classes without regard to race, religion, national origin, sex, age, marital status, or disability. The lack of English language skills will not be a barrier to admission and participation in CTE programs.*