



Dear Junior Volunteer Applicant:

Thank you for your interest in West Houston Medical Center's 2016 Junior Volunteer Summer Program. Our Program is scheduled to begin on Monday, June 13 and end on Friday, August 5, 2016 – eight weeks. To be accepted as a junior volunteer, you must be able to:

- start the first week of the Program
- attend all day hospital orientation on Monday, June 13th (there will be no other opportunity to make up this class)
- volunteer a minimum of 60 hours and complete at least 6 weeks of the Program

Volunteer hours will not be certified if these conditions of participation are not met.

I have enclosed the application packet for you to complete and return to the hospital. It is very important that you provide up-to-date and complete information so we have everything we need for processing. If an area does not apply to you, please write N/A in the space – do not leave it blank. **Your parent/guardian must give permission for you to participate in our Program and sign all forms. All applicants must be 16 years old on or before June 13, 2016 – no exceptions.**

Application packets must be returned either to the concierge desk in the main lobby of the hospital, by mail or to the volunteer office in the West Houston Doctor's Center – Suite 302, no later than Friday, April 15, 2016. Final selections for the Program will be made the week of May 16.

Because of the safety and confidentiality issues associated with the healthcare business, we conduct criminal background checks on our applicants. Please make sure that a parent/guardian co-signs the disclosure and release form. **Applicants will be responsible for the \$25 charge for this process and payment must be submitted with the application – check preferred made payable to: WHMC Volunteer Services Dept; memo: *insert applicant first and last name* Background – Jr. Vol (e.g. John Doe Background – Jr. Vol).** *If you are not selected for the Program – your \$25 will be returned to you.*

Your application must contain all the required information and documents before we will begin processing it:

1. Completed application
2. Signed release form for background check and payment of \$25 to cover the charge for the background check (Checks payable to: WHMC Volunteer Services Dept; memo: *insert applicant first and last name* Background – Jr. Vol (e.g. John Doe Background – Jr. Vol))
3. Reference letter from your school guidance counselor or a teacher

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4. Personal reference letter from someone other than a relative
5. Essay stating why you want to be a volunteer and what it means to you

Enclosed is a list of information that you might want to address in the essay. Please consider the content of your essay carefully. Once all the applications have been screened for eligibility, the final decision on which eligible candidates are accepted will be determined from the essays. All essays will be reviewed by a committee and scored with set criteria to make sure that this process is fair to all applicants.

Completion of the application does not indicate you will be accepted into the Program.

Our volunteer opportunities are limited. We receive numerous requests from students needing community service hours and we will not be able to accept all applicants into our program. Our goal is to meet the needs of both the hospital and the applicant when assigning volunteers. We will review all applications carefully to determine the most appropriate candidates for the available positions. Please understand that English is our primary language. All applicants must be able to clearly speak and understand the English language.

If you are accepted into our summer program, you will be required to complete a TB test, a TDAP vaccination and attend orientation. We will share more information about these steps at the appropriate time. All steps must be completed before you will be allowed to volunteer.

You will be required to buy a junior volunteer uniform shirt at a cost of \$25 to be worn with khaki colored pants and closed toe or athletic shoes. Payment for shirts are to be submitted with the completed application– if applicant is not accepted to Program then check will be returned. Checks for uniform should be made payable to: WHMC Volunteer Services Dept; memo: *Insert applicant first and last name* Uniform – Jr. Vol (e.g. John Doe Uniform – Jr. Vol).

The deadline for submitting your completed application is, Monday, April 15, 2016.

If you have any questions, please email me at Selena.Mejia@hcahealthcare.com. Email is the best way to reach me.

Sincerely,

Selena Mejia
Community and Public Relations Director
West Houston Medical Center
12141 Richmond Avenue
Houston, TX 77082
Selena.Mejia@hcahealthcare.com