

## Premed Healthcare Immersion Experience Application

**Program Dates: May 11 – May 22, 2026**

**Stipend: \$1,000 (\$500 per week)**

**Location: Grand Lake Health System, St. Marys, Ohio**

**Application Deadline: 3/27/2026**

**Selected participants will be announced on 4/3/2026**

### Applicant Information

#### Demographic

##### Full Name:

Date of Birth: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Are you from a rural area?  Yes  No

Are you a first-generation college student?  Yes  No

College/University: \_\_\_\_\_

Year in College:  Sophomore  Junior  Senior

Major: \_\_\_\_\_

GPA: \_\_\_\_\_ (Attach transcript or unofficial grade report)

Are you currently enrolled/accepted in a post graduate program?  Yes  No

Are you currently CPR certified?  Yes  No

#### 750 (or less) Word Personal Statement

Please provide a 750 (or less) word statement addressing:

- Why are you interested in this program?
- What type of healthcare or medical specialty are you interested in?
- What inspired you to go into healthcare?
- How will this experience help you achieve your healthcare career goals?
- What qualities make you a strong candidate for selection?

*(Attach as a separate document or type below.)*



**Submit your completed application by *3/27/2026* to: [jhoward@jtdmh.org](mailto:jhoward@jtdmh.org)**