MLK Community Healthcare Career Fellows Program



High School Summer Internship 2024 Application Deadline: April 12, 2024

Application Material Checklist:	Student Information
Original application	Date:
Unofficial school transcript	Full Name:
Personal statement Type 350 word essay (max) answering the following questions:	Date of Birth (Month/Day/Year):Address:
What makes you interested in healthcare?	Phone Number:
What are your career goals?	Email Address:
 How will participating in this summer program be beneficial to you and your future career paths? 	Student Status Are you currently enrolled in school? Yes No High School:
Two letters of recommendation Recommendation options: science teacher, math teacher, school principal, school counselor, or a community leader (e.g., your pastor or work supervisor).	Current grade level: Grade point average (GPA): Employment (Please fill out if currently working) Are you currently employed? Yes No Name of employer:
	Address of employer:

Telephone number:_____

Make sure that your application and supporting materials are complete. Place a check in each of the 4 boxes when completed. Incomplete applications will not be reviewed.

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RETURN APPLICATION

Submit all application materials in one file by April 12, 2024. Email all application materials to the Career Fellows Program:

careerfellows@mlkch.org

Emergency Contact	
Name:	
	Phone Number:
Email:	
Letters of Recommendat	ion
Name, email address and tell (people that will write a rec behalf - letters from relati	
Reference 1	
Full Name:	
Email:	
Phone:	
Relation to Applicant:	
Years Known:	
Reference 2	
Full Name:	
Email:	
Phone:	
Relation to Applicant:	
Years Known:	
	checklist on the left column of oplications will not be reviewed.
Applicant Signature	Date
Parent/Guardian Signat	ure Date

Date