



## Project HEALTH Application Process

### TIMELINE

- Applications are due: TBA
- All applicants will be notified of their application decision by: TBA
- All accepted volunteers are required to attend an all-Project HEALTH event on: TBA. In addition, all volunteers are required to attend specific training for their program.

### PROGRAM REQUIREMENTS:

- No volunteering experience or prior exposure to an urban hospital or community setting is required; however, **a deep commitment to serving others and a serious interest in social change is absolutely critical. All volunteers should be passionate about addressing the health disparities that afflict children living in Baltimore's low-income communities.**
- A commitment to all parts of the program listed under "time commitment" on page 5.
- Each student must volunteer for Project HEALTH for *at least two semesters*; most serve for the majority of their college career.
- A specific interest in medicine is **not** required.

### PURPOSES OF THE APPLICATION:

- First, it is a means for you to communicate what you envision contributing to Project HEALTH over the course of the next year, perhaps the next few years. Given the program descriptions and your own interests, consider what would be the most meaningful way for you to spend your time serving the Providence community.
- Second, the application is an opportunity for you to express why you would like to join Project HEALTH. Given the intimate nature of our reflection sessions and the limited number of mentors and projects, the size of our group is restricted and intense individual commitment is expected from all who participate.

### DROP-OFF/SEND-IN:

Please drop-off or mail applications to:  
Project HEALTH  
Baltimore HealthCare Access, Inc.  
201 E. Baltimore St. suite 950  
Baltimore, MD 21202  
- or -  
e-mail at [Baltimore@projecthealth.org](mailto:Baltimore@projecthealth.org)

**If you have any questions about Project HEALTH or this application, please contact our Site Director Mark Marino at 410-649-0524 or via email at [mmarino@bhca.org](mailto:mmarino@bhca.org)**