



HOSA application for 2020-2021 King Middle School

Purpose

The purpose of the HOSA organization is to develop leadership and technical HOSA skill competencies through a program of motivation, awareness and recognition, which is an integral part of the Health Science Education instructional program.

Students will gain the skills and background knowledge leading them into medical academy classes in high school through independent study and practice, leadership conferences, and competition. For more information visit www.hosa.org.

Health 1(or equivalent at another school) is a prerequisite class for HOSA

First Name _____ **Last Name** _____

Grade you will be in next year (circle one) 7th 8th

GPA(grade point average) on your last report card _____

What interests you most about HOSA?

Do you have any other commitments on outside of the school day that would conflict with weekend fundraising or out of town conferences? If so, list here

There will be a **\$50 charge** to those who are **accepted** into this class. The fee will be charged at the beginning of NEXT YEAR for those accepted. The fee is used to pay for HOSA affiliation and a tshirt.

Parent signature: If approved by the advisor, I agree to allow my child to participate in HOSA, and understand this class is structured for my child to pursue leadership development skills necessary for an eventual career in the medical field.

Sign X _____ Date _____

Complete and return this page to Mr. Syre

Please give the 2 attached recommendation sheets to 2 of your teachers for comments. THEY will turn them into Mr. Syre's mailbox. Thank you

HOSA teacher recommendation form

Student Name _____

Teacher Name _____

HOSA is a leadership based class that requires professionalism, honesty, dedication, and creativity as students explore the medical field. Please explain below why this student does/does not possess these qualities based on observations in your class. (conduct AND academics)

**Please return this form to Mr. Syre's mailbox ASAP.
Thank you!!!**

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**Please return this form to Mr. Syre's mailbox ASAP.
Thank you!!!**