



## 2017 AHHE MENTORSHIP PROGRAM

### ACCEPTING APPLICATIONS

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AHHE is seeking undergraduate & graduate students interested in healthcare leadership for our program with duration from January to June 2017.

Promising students are matched with executive mentors dedicated to promoting access to healthcare for Hispanic and underrepresented communities.



Receive mentoring from an experienced healthcare leader in New York City



Gain access to exclusive AHHE events and workshops along with a free Student Membership



Learn about the current healthcare landscape including health management and policy



Develop your healthcare administration education & build pipeline for future students



Enhance your resume and leadership skills with completion of project



Maintain valuable networks and insightful industry communication with mentors

Resume and unofficial transcript required for application.

**Deadline:** Friday, December 16, 2016 5pm EST

For more information or questions, please email: [info@ahhe.org](mailto:info@ahhe.org)

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Association of Hispanic Healthcare Executives (AHHE) is a 501(c)(3) non-profit organization.



## 2017 AHHE Mentorship Program Application

### Instructions for Applying:

This application is open to current undergraduate or graduate students in the New York metropolitan area interested in healthcare leadership. Applicants must be available for the duration of the program of January – June 2017. Selected applicants will receive interviews during the week of December 19<sup>th</sup>, 2016 over the phone or in person.

Please complete the application by typing or printing legibly and refer to the checklist on this page to ensure that your application is complete. Only complete applications will be considered. The program seeks to promote diversity and inclusion in healthcare management by pairing students with executive mentors. Members of underrepresented racial and ethnic minority communities are strongly encouraged to apply.

### CHECKLIST

- Complete Application
- Current Resume/Curriculum Vitae
- Transcript (Unofficial is accepted)
- Essay (maximum one page, 12pt font of choice) answering the question:  
*How will the AHHE Mentorship Program help you fulfill your career goals?*
- Professional headshot and brief bio including plans after graduation

\*For any questions, contact [info@ahhe.org](mailto:info@ahhe.org) before the application deadline.

Please submit all items in one combined PDF file saved as "First Name\_Last Name\_2017" to [info@ahhe.org](mailto:info@ahhe.org) by the deadline of Friday, December 16, 2016 5pm EST.

## Applicant Information

Full Name: \_\_\_\_\_  
Last First M.I.

Current Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
\_\_\_\_\_  
City State ZIP Code

Best Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Alternate Email: \_\_\_\_\_

How did you hear about the program: \_\_\_\_\_

**Ethnicity/Race (optional):**

- |   |  |
|---|--|
| <input type="checkbox"/> American Indian or Alaskan Native              | <input type="checkbox"/> Hispanic/Latino               |
| <input type="checkbox"/> Asian or Pacific Islander                      | <input type="checkbox"/> White, not of Hispanic origin |
| <input type="checkbox"/> Black/African-American, not of Hispanic origin | <input type="checkbox"/> I prefer not to answer        |

**Parent(s) Country of Origin:**  
**(required)**

\_\_\_\_\_

**Sex:**

- Female  
 Male  
 I prefer not to answer

**Have you served in the military or are currently serving?**

- Yes  
 No

Do you plan to move out of state after graduation?  Yes  No  Possibly

Are you currently employed?  Yes  No

If yes, position title and name of employer: \_\_\_\_\_

## Education

Check Current Status (all that apply):  Undergraduate  Graduate  Full-Time  Part-Time

Current # of credits attempted:

\_\_\_\_\_

Name of **Undergraduate** School: \_\_\_\_\_

Address of Institution: \_\_\_\_\_

Years of Attendance (from - to): \_\_\_\_\_

Degree/Major: \_\_\_\_\_

Year of Graduation (expected): \_\_\_\_\_

Name of **Graduate** School: \_\_\_\_\_

Address of Institution: \_\_\_\_\_

Years of Attendance (from - to): \_\_\_\_\_

Degree/Major: \_\_\_\_\_

Year of Graduation (expected): \_\_\_\_\_

## References

*Please list a professional reference (employer or professor) AND a character reference (colleague, etc.)*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Affiliation: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Affiliation: \_\_\_\_\_ Phone: \_\_\_\_\_

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

## Disclaimer and Signature

I certify that the information given herein is true and complete to the best of my knowledge. I authorize verification of all information in this application as it relates to the selection process.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

-----END OF APPLICATION-----