# REACH 4 Ghana Application – 2013 Team

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| Contact Information | |
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| Full Name (Last, First, MI) |  |
| Date of Birth (MM/DD/YY) |  |
| Email Address |  |
| Phone Number |  |
| SOM Class Year |  |
| Undergraduate Institution |  |
| Medical Field of Interest |  |

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| Why REACH 4 Ghana? |
| Why are you interested in joining the REACH 4 Ghana team? |

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| Previous Experience |
| Summarize your previous experience working among underserved populations AND/OR on international medical mission trips. |
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| About You |
| What qualities, abilities, and passions will you contribute to the REACH 4 Ghana team? If applicable, include any experience you have had in education, clinic work, fundraising/finance, research, and/or cross-cultural literacy. |
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| Interests |
| Everyone on the REACH 4 Ghana team will be serving in one of the following committees. Please rank the following areas from 1 to 5, based on your level of interest (1 indicates the area of highest interest to you, 5 indicates the area of lowest interest to you). |
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| \_\_\_ Finance |
| \_\_\_ Public Health Education |
| \_\_\_ Medical |
| \_\_\_ Research |
| \_\_\_ Cultural |
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| Leadership |
| Are you interested in a leadership role with REACH 4 Ghana?  Yes  No (skip the leadership section)  If yes, place an “X” beside the leadership roles are you interested in (you may select more than one)?  Team leader  Secretary  Finance Committee Chair  Public Health Education Committee Chair  Medical Committee Chair  Research Committee Chair  Cultural Committee Chair  Why are you interested in the leadership role(s) chosen above? Please explain. |
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| Use this box to continue from previous page, if needed. |

Please list your previous leadership experience.

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| Agreement and Signature | |
| By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements or other misrepresentations made by me on this application may result in my dismissal from the REACH 4 Ghana 2013 team. | |
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| Name |  |
| Signature |  |
| Date |  |