Interested in health professions? sHaPe your future!

What is **sHaPe?** Summer Health Activities and **P**rofessions Exploration (**sHaPe**) for boys and girls is a one-week day camp introduction to the health professions. Students participate in activities that provide hands-on exposure to a variety of health professions.

Students in sHaPe have the opportunity to study anatomy, physiology, and personal health and fitness. They explore the professions of medical lab science, occupational therapy, physical therapy, physician assistant, radiation therapy, sonography, speech pathology, sports medicine and therapeutic recreation.

JOIN US

At the Grand Valley State University Cook-DeVos Center for Health Sciences in downtown Grand Rapids, July 13 - 16, 2015. Camp is 8:30 am to 4:30 pm, Monday through Thursday.

Complete the Application and return to:

sHaPe Regional Math & Science Center
Grand Valley State University
C1-120 Mackinac Hall

One Campus Dr. Allendale, MI 49401





ELIGIBILITY - Participants must be between the ages of 12-15, currently in 7th or 8th grade, entering into 8th or 9th grade in the fall of 2015. Preference will be given to students attending Grand Rapids Public Schools.

Completed application forms must be received by April 30, 2015

SUPERVISION/MEALS - Counselors are assigned in a ratio of one for every 10 students. Lunch and snacks are provided each day of camp.

COST - The camp is FREE!

TRANSPORTATION - Transportation will be available based on need in the GRPS school district.

ACCEPTANCE - We will begin notifying students of acceptance or waiting list status beginning May 12, 2015.

If you have any questions or need more information, please contact:

Kathy Agee, **sHaPe** co-director (616)331-2267

Email: ageek@gvsu.edu www.gvsu.edu/rmsc

sHaPe - Application
Student Name
Student Address
City, State, ZIP
Student Date of Birth
School
Male Female Current Grade
Ethnic Background (optional)
African American
American Indian/Native Alaskan
Arab American
Caucasian
Asian/Pacific Islander
Hispanic
Multi Racial
Parent/Guardian Name
Work Phone Number
Home/Cell Phone Number
Parent/Guardian Signature
Name of teacher or counselor to contact if we have questions about your child.