



Dear Prospective Youth Volunteer,

Thank you for your interest in the Mary A. Kelly Youth Volunteer Program at St. Joseph's/ Candler. The 2025 Youth Volunteer Program will run 7 weeks from June 8, 2025 until July 25, 2025.

Our program will be accepting students at Candler Hospital on Reynolds Street and at St. Joseph's Hospital on Mercy Boulevard. Program expectations include a minimum commitment of 6 of the 7 weeks. **Please review your summer plans to ensure that you will be able to complete at least 6 weeks prior to applying.** Our program is set up so that you will be working in the same area each week at the same time. For example, if you are scheduled in the Emergency Department on Tuesdays from 9am until 1pm – that is where you will be for the entire 8-week program. You can volunteer multiple days and/or shifts if you would like to experience several areas. 2025 volunteer areas will be determined later in the year and will be announced at the Volunteer Orientation in May.

Youth volunteers are required to be at least 14 years old by June 1, 2025 and at least entering the 9<sup>th</sup> grade in the Fall of 2025 with a minimum grade point average of 80.

Enclosed is an application, a form for your school counselor to complete, and a reference form. Completed application packets will include

- 1) application,
- 2) applicant's hand-written essay including answers to questions on the bottom of page 1 of the application,
- 3) recommendation letter (can be sperate letter or they can utilize our form),
- 4) counselor form, &
- 5) copy of shot records

Complete packets must be received by March 28<sup>th</sup>. **Please complete application in ink and keep in mind that applications are judged by neatness, qualifications, community involvement, future plans, and availability.** For accepted program participants, there will be a mandatory Orientation session held in May.

If you have any questions, please email Holly Weiss at [weissh@sjchs.org](mailto:weissh@sjchs.org).

Sincerely,

A handwritten signature in black ink that reads "Holly M. Weiss".

Holly M. Weiss, CDVS  
Director, Volunteer Services

St. Joseph's/Candler is an equal opportunity employer and does not discriminate on the basis of race, creed, color, age, sex, disability or national origin.

**Please complete application using a pdf editor or PRINT legibly in ink.**

LAST NAME	FIRST NAME	MIDDLE NAME
MAILING ADDRESS: STREET, CITY, STATE, ZIP CODE		MALE OR FEMALE
DATE OF BIRTH:	AGE AS OF 6/1/25	PHONE NUMBER
OK to TEXT?		
EMAIL: _____ @ _____		
PARENT/GUARDIAN 1	EMAIL	PHONE #
PARENT/GUARDIAN 2	EMAIL	PHONE #
HIGH SCHOOL	CURRENT GPA	GRADE ENTERING IN FALL 2025

1. How did you learn of the volunteer program at SJCHS? \_\_\_\_\_
2. Are you related to anyone that works or volunteers for St. Joseph's/Candler?  NO  YES If yes, please list:  
 \_\_\_\_\_  
 Name, Relationship, Campus, Department
3. Have you ever volunteered with SJCHS?  NO  YES If yes, when? \_\_\_\_\_
4. Have you ever committed a crime?  NO  YES If yes, please describe \_\_\_\_\_  
 \_\_\_\_\_
5. Last Day of School: \_\_\_\_\_
6. Location Preferred:  
 CANDLER HOSPITAL - 5353 Reynolds Street (Specialties - Oncology, Women's & Children Services)  
 ST. JOSEPH'S HOSPITAL - 11705 Mercy Boulevard (Specialties - Heart Hospital and Orthopedics)

Attach an application essay that covers the following points.

- Why do you want to volunteer at St. Joseph's/Candler?
- What do you hope to gain from your experience as a hospital youth volunteer?
- What qualities do you believe you will bring to your volunteer position?
- Why should we choose you to volunteer?

\*\* Essay must be hand-written in pen by applicant and content/neatness will be a major factor in selection of participants.



Special Skills/Talents:
Volunteer Experience:
Awards Received:
Work Experience:
Languages Spoken:
Sports Played:
Camps attending this summer:
What do you want to do when you graduate from high school?
Are you interested in pursuing a career in healthcare? <input type="checkbox"/> NO <input type="checkbox"/> YES

I certify that the statements made in this application are true and correct to the best of my knowledge, and I have given them voluntarily. I agree with the statements below and understand that by agreeing to participate in the Mary A. Kelly Youth Program, I am expected to follow all policies and procedures of the program. (initial beside each statement)

\_\_\_\_\_ I am not required by court order to perform volunteer or community service.

\_\_\_\_\_ I have reliable transportation to and from the hospital.

\_\_\_\_\_ I am available and agree to volunteer 6 of the 7 weeks of the program.

\_\_\_\_\_ I understand the hospital will not verify my volunteer service hours until I successfully fulfill my volunteer commitment.

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

**PARENT/GUARDIAN:** I give consent for the above-mentioned youth to participate in the SJ/C Youth Volunteer Program.

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

**Application, Essay, at least one Recommendation Form/Letter, the School Recommendation Form, and a copy of your Immunization Records must be received before your application will be considered complete.**

*Complete applications must be received by March 28, 2025.*



Student Name: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

The student listed above is applying to volunteer this summer in the Youth Volunteer Program at St. Joseph's/Candler. He/She will work with patients and staff in the hospital; therefore we need to be confident in their ability and maturity to do the job.

Please help us by evaluating the student in the following areas:

Ability to follow instructions    Excellent    Good    Fair    PoorDependability    Excellent    Good    Fair    PoorInitiative/Motivation    Excellent    Good    Fair    PoorNeatness/Personal Hygiene    Excellent    Good    Fair    PoorCommunication Skills    Excellent    Good    Fair    PoorAttitude/Conduct    Excellent    Good    Fair    Poor

Current Grade Point Average: \_\_\_\_\_

Do you know of any reason that would hinder this student from doing a good job as a Youth Volunteer?

Students are required to have a minimum GPA of 2.5/80 and a good conduct record to be accepted into the program.

Thank you for taking the time to help us with the evaluation of this student.  
Your assistance is invaluable to us.

Printed Name: \_\_\_\_\_ Phone \_\_\_\_\_

Job Title: \_\_\_\_\_

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

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

You can return this form directly to us by email at [weissh@sjchs.org](mailto:weissh@sjchs.org), by fax at (912) 819-5889, or it can be submitted by student with their application.