



## 2019 Project H.E.A.R.T. (HIV/AIDS Education and Research Training) Program Application

### Program Summary:

The HSCC and HIV/AIDS Working Group is seeking teens that are aspiring leaders to participate in an educational summer program! This program provides HIV/AIDS education and workforce and job readiness skills in a fun and supportive environment.

### Responsibilities:

- Learn information on HIV/AIDS and STI (sexually transmitted infections) prevention.
- Participate in training to become a peer educator. A peer educator is someone who shares information with their friends and classmates.
- Work on a group project to raise awareness on HIV/AIDS.
- Attend all Program sessions.

### Criteria to Apply:

- Teens between the **ages of 13 and 17**
- Complete this entire application, including the essay, with signatures for each page
- **Never** have participated in any prior HIV/AIDS Working Group Summer Youth Stipend Programs
- Able to commit 8 weeks every Tuesday, Wednesday and Thursday from 9am-12pm, (except on the 4<sup>th</sup> of July), June 25<sup>th</sup> – August 15<sup>th</sup>
- Able to provide their own transportation to and from the program
- Able to obtain parent/guardian permission

### Important Information:

- All applicants are required to interview for the program. Not all applicants will be offered a spot in the program. Interviews will begin in early June.
- Upon successful completion of the program, **participants will receive a \$400 stipend**, and formal recognition from community and program leaders.
- This is a competitive Program that fills quickly, so please return your application ASAP!

### Location:

TBD

### Date:

Tuesday, Wednesday and Thursday  
June 25<sup>th</sup> – August 15<sup>th</sup>

### Times:

9am-12pm

***All applications are due no later than Monday, June 3, 2019!***

*Applications received after this date may not be considered!*

**Human Services Center Corporation  
(HSCC)**  
519 Penn Ave  
Turtle Creek, PA 15145



**HIV/AIDS Working Group**  
(412) 829-7112  
mclark@hsc-mvpc.org

## Application Submission Information

### By mail:

Mallory Clark  
Human Services Center Corporation  
519 Penn Avenue  
Turtle Creek, PA 15145

### By email:

To Mallory Clark at [mclark@hsc-mvpc.org](mailto:mclark@hsc-mvpc.org)

**\*\*If sending application by email, be sure that ALL parts of the application including essay and release forms are included.\*\***

### By fax:

Human Services Center – 412-829-4363 Attn: Mallory

**All applications are due no later than Monday, June 3, 2019!**

*Contact Mallory at 412-829-7112 or by email at [mclark@hsc-mvpc.org](mailto:mclark@hsc-mvpc.org) with any questions.*

Funded By:  
The McKeesport Hospital Foundation  
Implemented by:  
The Human Services Center Corporation's HIV/AIDS Working Group

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# 2019 Project H.E.A.R.T. Program Application

Teen's Name: \_\_\_\_\_ Parent/Guardian's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Teen's Cell Phone: \_\_\_\_\_ Parent/Guardian's Cell Phone: \_\_\_\_\_

\*If we are unable to get a hold of a working phone number you will not be considered for the position.

Teens' Email: \_\_\_\_\_ Parent's Email: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Grade Entering Fall 2019: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Referred By (If Applicable): \_\_\_\_\_

Do you have any other programs or vacations planned that would conflict with the Program dates? \_\_\_\_\_

If yes, please describe the conflict and what dates may be missed: \*\*You are only allowed to miss a maximum of THREE sessions\*\*

\_\_\_\_\_  
\_\_\_\_\_



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## 2019 Project H.E.A.R.T. *Emergency Contact Form*

Student's Name: \_\_\_\_\_

Contact #1 Name: \_\_\_\_\_

Contact #1 Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Contact #2 Name: \_\_\_\_\_

Contact #2 Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

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## Project H.E.A.R.T. Program Description and Responsibilities

- Learn information on HIV/AIDS and STI (sexually transmitted infections) prevention.
- Participate in training to become a peer educator. A peer educator is someone who shares information with their friends and classmates.
- Work on a group project to raise awareness on HIV/AIDS.
- Learn and practice communication skills for becoming a peer educator.
- Participate in job readiness activities.
- Be respectful to all other participants and group leaders.
- Maintain a positive and open-minded attitude to the group leaders and the other participants.
- Remain drug-free and crime-free (no violations) throughout the project.
- Attend all program sessions as scheduled (participants may miss up to 3 days.)
  - Sessions take place every Tuesday, Wednesday, and Thursday from 9am to 12pm, from June 25<sup>th</sup> – August 15<sup>th</sup> (except on the 4<sup>th</sup> of July)
- Follow protocol when unable to attend a session.
- Be on time and actively participate in every session
- Participate in Annual HIV/AIDS Walk on Saturday, October 5, 2019.
- Upon successful completion of this program, I will be awarded a \$400 stipend.

I have read and understand the program description and responsibilities, and realize my failure to follow any of its contents and conditions could result in termination of my participation in Project H.E.A.R.T.

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Applicant Signature

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Date

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Parent/Guardian Signature

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Date

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## 2019 Project H.E.A.R.T. *PARENTAL CONSENT FORM*

I grant permission for my son/daughter \_\_\_\_\_ to participate in all scheduled activities of Project H.E.A.R.T. I release the Human Services Center Corporation and its insurers from any and all liability, claims, causes of action, damages, cost expenses or demands of any kind which may arise in connection with his or her participation in the activities of this program.

I understand he/she will be learning facts about HIV and other sexually transmitted infections, skills for protecting him/herself including condom education, and that he/she will participate in a job readiness program. I also understand he/she may be involved in activities off-site which include being transported to another location. I am aware the group will meet every Tuesday, Wednesday, and Thursday from 9:00am until 12:00pm starting June 25<sup>th</sup> and continuing to August 15<sup>th</sup>. The 4<sup>th</sup> of July is an exception.

I further grant permission for the Human Services Center Corporation to provide local media and foundations with information about my child. I give permission for the Human Services Center Corporation to secure medical treatment for my child in the event that such treatment is required during my child's participation in the program. I will be financially responsible for the cost of such treatment. I release the Human Services Center Corporation and its insurers from any and all liability, claims, causes of action, damages, cost expenses, or demands of any kind which may arise in connection with his or her participation in the activities of this program.

I hereby give permission for my child to be photographed, videotaped, or otherwise have their image or voice recorded, in connection with Project H.E.A.R.T. I allow the Human Services Center Corporation to use the photographed, videotaped, and/or recorded materials in any publications, promotional materials, reports, websites, CD's, DVD's, social media, other media for publicity, reporting purposes, or in any other non-commercial manner that it chooses. I hereby waive and release any rights that I may have to the said videotaped, recorded, and/or photographed materials.

I further grant permission for the Human Services Center Corporation to provide local media and foundations with information about my child. Moreover, I release the Human Services Center Corporation and its insurers from any and all liability, claims, causes of action, damages, cost expenses or demands of any kind which may arise in connection with his or her participation in the activities of this Program.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_