



AtlantiCare Employee Nursing Fellowship Program

Designed to develop future nurses to meet the healthcare needs
of our community



2008 Application

To be used by:
Benefited Employees
Non-benefited employees
Employee dependants



TAKING YOU WELL INTO THE FUTURE

**AtlantiCare Employee
NURSING FELLOWSHIP APPLICATION
Fellowship Information**

AtlantiCare Regional Medical Center is proud to announce the availability of up to 10 paid fellowships for selected candidates seeking an AD or BS in Nursing degree. These fellowships are being offered in an effort to encourage a broad field of applicants that will reflect the diverse community served by AtlantiCare.

Benefited employees, who have been accepted or are waiting confirmation of acceptance into an AD or BSN nursing program, are eligible to apply. (If you are an employee and are currently enrolled in pre-nursing courses continue to use the tuition reimbursement benefit for those courses).

Non-benefited employees who have worked a minimum of 480 hours over the course of the previous year (January – December) and worked 2 Holidays during that time are eligible to apply for a nursing fellowship. You may apply during your pre-requisite coursework. Each year you will be required to provide evidence that you have worked a minimum of 480 hours and a minimum of 2 Holidays. You will also take a pre-evaluation Nurse Entrance Exam offered through AtlantiCare. Attendance in a Nursing Entrance Exam preparation program during the first year of your fellowship may be required based on the results. This process will provide an opportunity to begin establishing an individualized educational pathway to help you achieve your goal of acceptance and success in a Nursing Program.

Dependents of Employees, Dependents of employees who wish to pursue a career in nursing and are graduating in the Spring of 2007 are eligible to apply as well as an employee's spouse and children already graduated from high school.

All employees who apply for a fellowship must be in good standing with the organization. This will include compliance with EWR and a satisfactory employee evaluation.

During 2007, Fellowship recipients began meeting with fellowship staff prior to the beginning of each semester to design a personal professional development plan. This tool helps the student to monitor their educational progress and establish personal goals throughout their time as an AtlantiCare Nurse Fellow.

Fellowship participants will take part in a mentorship program through ARMC. We have highly dedicated nurses who will provide you with support during your nursing education and career journey.

In 2007, we began a Nursing Community Service program where nursing fellows have an opportunity to share their enthusiasm for nursing by participating in a community service program. An AtlantiCare nurse mentor will provide you with information about several ways you will be able to help promote the positive image of nursing and health literacy. You will also be invited to attend educational offerings and nursing celebrations held at AtlantiCare throughout the year.

Qualified fellowship participants must remain in good standing throughout their fellowship. Upon successful completion of the RN program you will be expected to apply for employment as a Registered Nurse with AtlantiCare Regional Medical Center and accept the offered position for the agreed time frame in exchange for the fellowship.

Application Period and Deadlines

The application filing period will begin April 14 and continue through May 29, 2008. Applications should be postmarked no later than May 26. Faxed applications will not be accepted. No exceptions or extensions will be made beyond the deadline. All applicants will be notified by July 14, 2008 regarding acceptance into the Fellowship program.

Instructions

It is the applicant's responsibility to make sure the application package is complete and all required materials are sent on time. ***Only completed application packages which include all of the following 5 components will be considered:***

1. Completed application form.
2. Personal Qualities Statement (why you should be chosen).
3. If the applicant is a graduating high school student or has graduated within the last 12 months they must include all of the following:
 - A. Official school transcript (grade point average must be 2.5 or higher on a 4 point scale or 3.1 or higher on a 5 point scale)
 - B. Letter of recommendation from a teacher or guidance counselor
 - C. Letter of recommendation from a personal source (not a relative)
4. If the applicant is an adult they must include:
 - A. Proof of successful completion of high school
 - B. Completed AtlantiCare Nursing Fellowship Application
 - C. Two (2) letters of recommendation from a personal source (not a relative)
5. ***IMPORTANT*** - Fellowship applicants who will be attending ACCC are required to complete the ACCC Placement Test (ACCUPLACER). Results must be received by AtlantiCare with this application on May 29, 2008. If you have already taken the exam you may submit those results with your application. You may also submit the following with your application instead of the (ACCUPLACER) test results.
 - Applicants who have taken the SAT test within the last four years are requested to submit a copy of those results with the application.
 - Applicants who have taken the ACT test within the last four years are requested to submit a copy of those results with the application.
 - Applicants who already have a degree (A.A., B.S., etc.) must submit a copy of your official transcript with the application.
 - Applicants who have completed or are in the process of completing college pre-requisites to the nursing program are required to submit a copy of their school transcript with this application.
 - If you do not fit into any of the above categories you must submit an entrance/placement test result such as the Accuplacer – (required at ACCC prior to beginning classes) with this application **or** you may submit proof of acceptance into a Nursing program.

Completed packages must be postmarked by **May 26, 2008** or delivered to the City Campus Administration Office by **May 29, 2008**.

IMPORTANT New for 2007 – Benefited AtlantiCare Employee Fellowship applicants must submit proof of acceptance (*or submit proof of application to a Nursing program by the spring of 2008*). You should continue with the fellowship application process as outlined below. Final fellowship award will be based on acceptance into a Nursing program).

The completed application package should be addressed to

**Robyn Begley, RN MSN
Vice President of Nursing
AtlantiCare Regional Medical Center
1925 Pacific Ave.
Atlantic City, NJ 08401**

Please direct questions to:

Mary Jean Burke, RN MS
Director of Nursing Innovation and Outcomes
mjburke@atlanticare.org or call (609) 407-2553

Description of Requirements

Application Form: The applicant must completely fill out the AtlantiCare Regional Medical Center Employee fellowship application. The application can be obtained from the Human Resources Department in both ARMC campuses or via the Nursing intranet website. Applications must be signed and dated in the space provided. *Incomplete applications will not be processed.*

Personal Qualities Statement/Community Involvement: The applicant must submit a one or two page legible (preferably typewritten) summary including the following:

All Applicants

1. Student/leadership activities
2. Honors and/or awards
3. Career goals
4. Community involvement
5. Why the applicant should be awarded this fellowship

Official Transcript/Academic Achievement: Remember to include evidence as outlined in requirement #5 (found on page 3 under the Information section) which is New for 2007.

Letters of Recommendation: The applicant must submit two letters of recommendation. Current AtlantiCare employees must submit a letter of recommendation from current Manager. Letters should address the applicant's qualities such as motivation, leadership, nursing attributes, ability to learn new things, and commitment to achieving goals. Letters should be submitted with the completed fellowship application form and must be postmarked no later than May 26, 2008.

***Application for the AtlantiCare Regional Medical Center Employee
Nursing Fellowship Program***

Name: _____

Mailing Address: _____

City/State/Zip: _____

Telephone #: _____

Social Security #: _____

Unit & Department you work in: _____

Parent or Guardian's name (and address if different from applicant)

Parent/Guardian Name: _____

Mailing Address: _____

City/State/Zip: _____

Telephone #: _____

Email: _____

If you are a high school student please state your grade point average (GPA): _____

Have you attached/sent the requirements listed on page 3 under #5
Yes ___ No ___

ALL OF THE INFORMATION ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I HEREBY GIVE ATLANTICARE REGIONAL MEDICAL CENTER PERMISSION TO USE MY NAME AND PHOTOGRAPH FOR THE PURPOSE OF PUBLIC RELATIONS AND PUBLICATIONS. NOTE: ALL INFORMATION SUBMITTED WILL BE HELD CONFIDENTIAL UNLESS OTHERWISE NOTED.

Applicant Signature: _____

Date: _____

If you are a minor your parent/guardian must sign here:

Signature _____ Date: _____

Personal Qualities Statement

Applicant's Name: _____