



IFDHE
AHA Institute for Diversity
and Health Equity



American College of
Healthcare Executives
for leaders who care®

Summer Enrichment Program Intern Commitment Form

ABOUT THE PROGRAM

The Summer Enrichment Program (SEP) is a 10-week, paid internship program for graduate students that are in the process of pursuing an advanced degree within health care or a related field. Students in the program are paired with a health care organization where they benefit from experiential learning, mentorship, networking and the opportunity to learn from experts in the field. Experienced administrators serve as preceptors and mentors, providing support and career advice as well as critical early-career connections. The Summer Enrichment Program seeks students from underrepresented backgrounds to strengthen the pipeline and build the next generation of diverse executives and leaders in health care. While students benefit from experiential learning, host sites gain the experience of mentoring, educating, and collaborating with new and upcoming leaders. Each year, more than 30 host sites commit to making a difference in the lives of graduate students from across the country.

Since its inception in 1994, more than 1,500 interns have successfully completed the Summer Enrichment Program. Former interns are the current CEOs and administrators of hospitals and health care organizations across the U.S

The following is an overview of what to expect from the SEP and what interns are responsible for. Please review, sign, and submit this document to communicate your interest and commitment to participate in the Summer Enrichment Program.

Contact Information

Name:

Email:

Phone:

Pre-SEP Checklist

- Application completed with all documents
 - Your Letter of Introduction (1-2 pages, telling us more about yourself)
 - A Current Academic Resume
 - Current College Transcript (You may upload an unofficial copy from your college website. Your name, college and major must be listed)
 - Proof of US Citizenship (Birth Certificate, US Passport or US Passport Card Only)
 - Two (2) Letters of Recommendation (Preferably from a current dean, professor or recent employer)
 - One current, professional digital photograph of yourself uploaded to your profile page
 - Completed, uploaded copy of the SEP Intern Commitment Form
- After being “matched” to a Host Site, research the facility prior to your phone interview

For questions or concerns about the SEP, please contact us at IFD-SEP@aha.org

- Identify housing options near the host site. **You are responsible for securing your own housing.**
- Research and secure reliable means of transportation to and from your host site. **You are responsible for securing your own transportation.**
- Download the SEP Intern Handbook

SEP Duration Checklist

- Attend SEP educational webinars
- Attend new employee orientation / Tour of the facility upon arrival
- Participation in the SEP Photo Project. (*Document your experiences with pictures*)
- Regularly scheduled weekly meeting between SEP intern and preceptor
- Completion of Special Project(s)
- Attend/participate in Department Meetings, Staff Meetings & Board Meetings
- Special Project presentation to appropriate senior leadership
- (2) Hospital visits at offsite healthcare locations (1 per month)

Post-SEP

- Attendance of the SEP graduation webinar
- Exit Interview / Resume Review
- Completion of the SEP Intern Feedback Survey

By signing this commitment form I understand:

- The SEP is a 10-week full-time (40 hours a week) commitment – NO EXCEPTIONS**
- I will be responsible for my own housing
- I will be responsible for my transportation to, from and during my internship
- I will conduct myself in a professional manner with the Institute and Health Care Organizations
- I will be paid at least the minimum wage of the state where my host site is located – Compensation is non-negotiable
- I will adhere to the Host Site's policies and procedures applicable to the interns for the duration of the internship (**i.e. termination, sick time, holiday pay, etc.**)
- If I am no longer interested in participating in the Summer Enrichment Program, I will notify the Institute for Diversity and Health Equity. If I do not notify the Institute, I will not be able to participate in future SEP and/or FEP.**

Image Use

By signing the document, below, you concede the right to the Institute for Diversity and Health Equity to use your digital imagery for promotional purposes for the SEP/FEP or educational programs.

Liability

By signing the document, below, you indemnify and hold harmless the Institute for Diversity and Health Equity and its officers, agents, and employees from all suits, actions, losses, damages, claims, or liability of any character, type, or description, including without limiting the generality of the foregoing all expenses of litigation, court costs, and attorney's fees for injury or death to any person, or injury to any property, received or sustained by any person or persons or property, arising out of, or occasioned by participation in the Summer Enrichment Program.

Signature

Type name as signature:

Date: