Default Question Block



Region V Public Health Training Center - Student Placement Stipend Application

The Region V Public Health Training Center (RVPHTC) supports projects between students, faculty, and community partners that seek to improve public health in medically underserved communities. Thank you for your interest in the awards for student placement experiences being offered by the RVPHTC. Funds for these awards have been made available by a grant from the Health Resources and Services Administration (HRSA).

Awards are available for students completing individual placements with community partners **or** students

participating in projects that involve both faculty and community partners.

To qualify for this award, the following criteria must be met.

Project eligibility criteria:

- Students must have accepted an unpaid or underpaid placement. We define underpaid as an hourly wage of \$15/hour or less or a stipend of \$3500 or less.
- Placement sites must be focused on providing services in a medically underserved community in Illinois, Indiana, Michigan, Minnesota, Ohio, or Wisconsin
- Project meets student's departmental requirements for experiential hours and content.
 At a minimum, undergraduate students will complete at least 100 hours and graduate students will complete at least 150 hours.
- Project supports population health improvement and addressing the social determinants of health
- Preference will be given to placements with governmental public health sites (state, local, or tribal health departments)

Student eligibility criteria:

- Graduate or undergraduate student
 (junior/senior) is enrolled full-time or part-time
 at their institution, where they are pursuing a
 degree in a health profession (public health,
 social work, psychology, or sociology)
- Students must be US citizens, non-citizen US nationals, or foreign nationals possessing a visa permitting permanent residence in the US (Note: DACA recipients and international students with work/research/student visas are not eligible for this particular federal funding.)
- Tribal Community College students enrolled in a health professions degree program (e.g., allied health, community health worker) are eligible

If your application is accepted, a stipend of \$3500 will be provided in a single lump-sum payment of \$3500 during your field experience. If you do not complete your field placement, you will be expected to return a prorated portion of the total stipend.

Please complete the following application by 11:59pm ET on Sun., March 30, 2025. Along with this complete application form, please also upload a letter from the placement site preceptor confirming the internship is

unpaid or underpaid (\$15/hour or less or a stipend of \$3500 or less).

Students who receive this stipend will be expected to participate in a monthly community of practice for professional development with students from across the region, and will need to produce a deliverable that can be shared with HRSA such as a scientific poster or brief report.

If you have questions about this application, please contact us at rvphtc@umich.edu.

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Personal contact information:

First Name:	
Last Name:	
Email:	
Address:	
Phone Number:	
Academic institution inform	nation:
Name of University/College:	
Name of Department:	
Estimated Graduation Date:	

Degree program enrollment status:

O Full Time	
O Part Time	
Current degree	program:
O Associate's	
O Bachelor's	
O Master's	
O Doctoral	
Field of study:	
☐ Public Health	
☐ Social Work	
Psychology	
Sociology	
	Other health profession (please specify)
	Other (please specify)

Project & placement site information:

Project Site Name:	
Project Site Address (street, city, state, zip code):	
Project Site County:	
Preceptor First & Last Name:	
Preceptor Email:	
Start Date:	
Anticipated End Date:	
Expected Number of Hours Total:	

Beyond your academic advisor, will a faculty member be involved throughout the planning and implementation of your project?

This could be the same faculty person who is your

faculty person will have	e a hands-on role in your project.
Yes	
O No	
Unsure	
Faculty information:	
Faculty First & Last Name	
Faculty Email	
Faculty Institution	

academic advisor, but we are interested in knowing if a

HRSA Requirements

Are you a US citizen, non-citizen US national, or foreign national possessing a visa permitting permanent residence in the US? Note: Verification of status will be required to process your stipend payment.

O Yes

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Have you accepted an unpaid or underpaid placement in Illinois, Indiana, Michigan, Minnesota, Ohio, or Wisconsin? (Underpaid is defined as \$15/hour or less or a stipend of \$3500 or less.)

If yes, please submit a letter from your site preceptor confirming this.

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- Yes, I have accepted an underpaid placement
- O No

What compensation will you receive from your placement site?

\bigcirc	An hourly wage (please specify,
0	A stipend (please specify)
0	Other (please specify)

Please describe any addition have secured or are pursuing	
if any. Include the source, amo	• ,
notification date.	

Is your placement site located in a medically underserved community in Illinois, Indiana, Michigan, Minnesota, Ohio, or Wisconsin?

Please use this link to verify if your site is in a HRSA-designated Health Professions Shortage Area and/or Medically Underserved

Area/Population: https://data.hrsa.gov/tools/shortage-area/by-address

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	YES

O No

Have you talked with your preceptor about a contingency plan for completing your placement should any internal or external factors impact your placement site (e.g., disease outbreak, change in organization's needs or capacity, etc.)?

Yes, we have discussed a contingency plan for completing my placement	
No, we have not discussed this yet	
If yes, please briefly describe your plans:	
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Please provide a two-paragraph description of your field placement project, including:

- a) a discussion of your deliverables
- b) how your deliverables will contribute to the capacity of the organization to address the social determinants of health
- c) the competencies you expect to develop from this project.

Some activities that are considered capacity-building include but are not limited to data collection and analysis, grant writing, development of a health education curriculum, program implementation, or program evaluation.

Personal Demographics (Optional)

The following questions are optional and will <u>not</u> be used for applicant review and selection. The information will be used in the aggregate for statistical and reporting purposes and to help us understand our applicant pool as a whole.

Do you describe yourself as a man, a woman, or in some other way?

O Man
O Woman
Some Other Way (if you wish, you may elaborate)
Are you Hispanic, Latino/a/x, or of Spanish origin?
O No
O Yes
Please select the racial category or categories with which you most identify.
American Indian or Alaska Native
Asian
☐ Black or African American
☐ Middle Eastern or North African
☐ Native Hawaiian or Other Pacific Islander
☐ White
Other (please specify)

THIS IS THE FINAL QUESTION IN THE APPLICATION. Clicking the next arrow will submit the application.

Required: Upload letter from placement site preceptor confirming you have accepted a placement that is unpaid or underpaid.

