



# International Health Service

Participant Application – please print clearly

October 22 - November 1, 2017

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Date of birth (D/M/Y): \_\_\_\_\_  
 Zip: \_\_\_\_\_ Country: \_\_\_\_\_ Name to put on nametag: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Male Female

Specialty (check all that apply) **Send copies of license – Physicians and dentists must also send copies of diploma**

DDS (specialty) \_\_\_\_\_ Dental Ass't RDH RPh  
 MD (specialty) \_\_\_\_\_ NP PA Paramedic  
 RN (specialty) \_\_\_\_\_ LPN CRNA EMT  
 OD Interpreter Radio Operator Engineer General Helper

Other (please specify) \_\_\_\_\_

Where are you currently working? \_\_\_\_\_ If not, when did you last work in this field? \_\_\_\_\_

Name of current or past supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Briefly describe your work experience -

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

**October 2017 project** is smaller and teams go to one or two locations – contact Project Director for details.

Number of previous IHS projects you have been on \_\_\_\_\_ Would you be willing to be a team leader? \_\_\_\_\_

How well do you speak Spanish? None Words Phrases Conversational Proficient Fluent

## Application Deadlines & Project Fees

### October Trip

* Due July 15	Application/Deposit/Licenses	\$125
Due September 15	Project fee balance/Paperwork	\$475
	<b>Total October project fee</b>	<b>\$600</b>

\* Applications received before first due date for the project will receive priority in team assignments. Those received after will be considered only if their specialty is needed.

**For applications to be considered the following must be attached:**

- Completed application with signed waiver - Deposit
- Copy of professional licenses - Physicians & Dentists: copy of diploma also
- Copy of Amateur Radio license (Radio operators only)

**Note:**

\$125 deposit is non-refundable and due with the completed application. Upon request, deposit will be refunded if your application is not accepted.

**Make checks payable to:**  
International Health Service

**Mail application & forms to:**  
IHS - Attn: Project Director  
PO Box 16436  
St Paul, MN 55116-0436

How or from whom did you hear about IHS? \_\_\_\_\_

Please list any major surgeries or serious illnesses in the past 5 years \_\_\_\_\_

Mark **Yes** if you are able and **No** if not able and explain any limitations below:

\_\_\_\_ Lift and carry 25 pounds multiple times                      \_\_\_\_\_ Climb two or more flights of stairs  
\_\_\_\_ Work in extreme heat and humidity                              \_\_\_\_\_ Walk on uneven terrain  
\_\_\_\_ Travel by any type transportation                                \_\_\_\_\_ Bend or stoop multiple times

Explain any limitations \_\_\_\_\_

**INTERNATIONAL HEALTH SERVICE  
ACKNOWLEDGEMENT OF RISK AND WAIVER OF RESPONSIBILITY**

I, (*print name*) \_\_\_\_\_ along with all members of my family, in consideration of the benefits derived, if accepted for the International Health Service project, hereby voluntarily acknowledge the risk I am undertaking and waive any claim against the local and international organization, local officers, its sponsoring institutions and all leaders of International Health Service for any and all causes in connection with the activities of the above organization.

The use of illegal drugs is strictly prohibited by IHS and alcohol consumption by team members during the mission workdays is against IHS policy. In addition, team members should use alcohol with discretion, in moderation, and be sensitive to local customs regarding the use of alcohol. I understand that as a volunteer I represent IHS and agree to abide by this policy.

International Health Service does not provide any type insurance (medical, liability, travel, medical evacuation, life) for any participants. My signature on this form indicates my full understanding that I must provide my own insurance.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**PHOTO RELEASE**

International Health Service requests permission to use photographs and narrative descriptions of participants and the work they do on projects for the purpose of public relations, advertising promotions, and fund raising. These photos may be used in, but not limited to: Power point presentations, the IHS NewsBreak, and the IHS web site. This authorization is only for the IHS organization. IHS has no control over how teammates and other participants use photos for purposes of their own. This authorization will remain in effect for at least one year. IHS cannot guarantee that your image from this trip will not be used after that period of time.

Yes, you may use my photo !

Signed \_\_\_\_\_ Date \_\_\_\_\_

No, I prefer you not use my photo.

Signed \_\_\_\_\_ Date \_\_\_\_\_

*If you select NO, please make sure one team picture is taken excluding you, to submit to the annual Newsbreak staff.  
It is your responsibility to submit the correct picture to the Newsbreak editor.*

**T-SHIRTS & CAPS.....** T-shirts and caps are not included in the project fee and are a separate fee.

• **October Trip – Available caps and t-shirts sizes might be limited so order ASAP..**

(T-shirt sizes available are: S M L XL 2XL) T-shirts @ \$15 - how many                      size                      Ball Caps @ \$12 – how many

**Please include the cost for these items with your deposit and this application.**

## **INTERNATIONAL HEALTH SERVICE – Project Suitability Form** *( required of first time participants only )*

IHS projects are not for everyone as some locations are very remote and some people react differently when placed in a situation different from their normal life. To assist you in determining if this project is right for you and to assist us in placing you on the correct team, please complete this form and return with your application.

All IHS projects begin in La Ceiba, Honduras. Upon arrival participants will stay one or two nights in a hotel or with a local host family during our orientation programs. Teams will also return to La Ceiba at the end of the project, usually for one night, for debriefing, storing supplies and equipment plus a farewell dinner. Also, many repeat participants return to the same location as they get to know the local people.

The following questions are not meant to discourage you. Instead we hope they give you an understanding of the places we go and challenges that may happen.

Briefly describe any camping, hiking, or adventure trip experience you may have had. \_\_\_\_\_

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Remote areas of Honduras have limited electricity or modern transportation and few telephones. Many IHS participants return year after year so they understand this change of life and the experience of helping people in this environment. Can you honestly say you can handle 8 to 10 days in locations that have solar showers, outhouses, bugs, humidity and the possibility of sleeping in a screen tent? \_\_\_\_\_ Comments: \_\_\_\_\_

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For many, the time at the team site will be spent in a remote location away from telephones and TV with people who speak a different language, use different money, and have different habits, values and social norms. Can you handle being disconnected from friends and family for two weeks? \_\_\_\_\_ How do you plan to keep busy during quiet/slow hours? \_\_\_\_\_

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Most of Honduras experiences a hot and humid climate. Mountain teams may get chilly at night. Many participants will do a lot of walking on uneven ground, carrying their own bags, lifting, moving, loading, and unloading many boxes of supplies. Can you do your share of the work and are physically up to going on this trip? \_\_\_\_\_

Frustration can happen on the trip. You are in a foreign country where Murphy's law can happen. You may experience "hurry up and wait". You will be with a group of people you have never been with before and interacting with a different culture. All this can be challenging. How do you handle frustration? \_\_\_\_\_  
Does your temperament allow you to "not sweat the small stuff"? \_\_\_\_\_

IHS teams may see many patients, which can require long days. Some teams will be working in hot, humid locations. How is your temperament and physical stamina in times like this? \_\_\_\_\_

Teams that have the most enjoyable experience work together with each team member contributing their part to the group's overall function. This requires you to do your job well every day, trusting others to do their job, and always stepping up to help with the small tasks that need to be done every day. To what extent are you a team worker? \_\_\_\_\_

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There will be times when people work with patients in their own specialty. However, many tasks require the help of ALL team members working as a team. Group decisions are made when possible but the Team Leader has final say. Can you work within a group and be respectful of decisions made? \_\_\_\_\_