



Dear MEDQUEST Applicant:

Thank you for considering Marist High School's MEDQUEST program. The MEDQUEST admissions process is competitive and it is very important that you complete the application very carefully and accurately. The application will provide you with ample opportunity to describe your goals, ambitions, interests, and strengths.

Please mail completed application to:

**MEDQUEST Admissions
Marist High School
1241 Kennedy Blvd
Bayonne, NJ 07002**

The complete application process consists of:

- Student application
- Completed Essay
- Parent/Guardian Release
- Signature of the Applicant
- Possible Interview in early January

*All application materials must be submitted to the MEDQUEST Admissions Office no later than **December 15th**. The committee's decision regarding the applicant's admission to MEDQUEST will be communicated in February.*

Sincerely,

The MEDQUEST Admissions Committee

Part A - MEDQUEST Student Application

Student Information *(All Fields Required)*

Last Name	First Name	M.I.
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Current School

Address	City	Zip
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Home Phone	Email
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Parent/Guardian Name	Parent/Guardian Phone	Parent/Guardian Email
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Part B - Essay Questions

Please attach your responses to the following two questions. Both responses must be typed. Each response should be 100-200 words in length.

1. *What are your expectations from Marist High School's MEDQUEST Program and why do you feel it is right for you?*
2. *What are your plans after you complete MEDQUEST and how do you foresee this program contributing to your success?*

Part C – Parent/Guardian Release

Marist High School’s MEDQUEST program is a rigorous academic program that requires the commitment and dedication of all enrolled students. MEDQUEST combines theory and practical application with clinical experiences and volunteer work to afford students the knowledge, insight, and experience necessary to pursue various health careers.

In order to make an appropriate decision regarding admission, the MEDQUEST Admissions Committee requires certain information including your child’s academic, health, discipline, and special needs records.

By signing below,

1. I authorize my child’s school district to make available academic records, attendance records, health records, discipline records, and special needs records to Marist High School, located at 1241 Kennedy Blvd, Bayonne, NJ 07002.
2. I recognize that my child, if accepted into the MEDQUEST program at Marist High School, will be involved in a highly demanding academic program that will require his or her best effort and will involve a greater time commitment, an increased workload, and additional time outside the regular school day.

Parent/Guardian Signature

Date

Part D – Student Signature

I hereby state that all information contained within this application is true and correct to the best of my knowledge and all essays are my own work.

Student Signature

Date