

Jefferson College of Rehabilitation Sciences

# REACH Program

Readiness, Exploration, and Application for  
Careers in Health

July 28, 2025-August 5, 2025  
8:00 am - 12:30 pm\*  
Jefferson East Falls Campus

Please see the following pages for application  
instructions and application requirements.

**Application Deadline: June 27, 2025**

For more information, please contact:  
Nia Thomas, Project Coordinator at  
[Nia.Thomas@jefferson.edu](mailto:Nia.Thomas@jefferson.edu)

*\*Please note based on programming, one of the scheduled days  
will extend to approximately 1:30pm.*

**Dear Applicant:**

**Thank you for your interest in the REACH program at Thomas Jefferson University. We are very excited for the program this summer and can't wait to see so many interested students and future rehabilitation professionals!**

**Please follow the application instructions listed below in order for your application to be reviewed:**

- 1) Complete the application form, which begins on the next page, in its entirety.**
  - a. You may attach a separate typed document for the open answer questions if it is easier, but please do not submit handwritten text. It is often difficult to read, and we don't want to turn down an application because we can't get a clear picture of you. If you have difficulty accessing a computer, please contact Nia and we can arrange a different way for you to complete & submit your application.
  
- 2) Obtain an unofficial transcript/report card which details your academic record in high school. Please provide a transcript with at least 2 years of grades recorded.**
  
- 3) Email your completed application form, along with your transcript/report card to: **Nia Thomas at Nia.****  
**[Thomas@jefferson.edu](mailto:Thomas@jefferson.edu)**

***\*Please note. All students who participate in the program may be required to show proof of Covid 19 vaccination. \****

## CONTACT INFORMATION

<b>Name</b>	
<b>Preferred Name</b>	
<b>Pronouns - select all that apply</b>	<input type="checkbox"/> She/her/hers <input type="checkbox"/> He/him/his <input type="checkbox"/> Ze/zir/zers <input type="checkbox"/> They/them <input type="checkbox"/> <b>Other:</b> <a href="#">Click or tap here to enter text.</a>
<b>Street Address</b>	
<b>City, State, Zip</b>	
<b>Home Phone</b>	
<b>Cell Phone</b>	
<b>Email Address</b>	
<b>How did you hear about the program?</b>	
<b>How will you arrive to the program? (Public transportation, rideshare, driving, etc.)</b>	
<b>What is your T-Shirt size?</b>	
<b>Do you have any food allergies or dietary restrictions?</b>	

## DEMOGRAPHIC INFORMATION

<b>What is your racial/ethnic background?</b>	<input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Two or more races <input type="checkbox"/> <b>Other:</b> <a href="#">Click or tap here to enter text.</a> <input type="checkbox"/> Prefer not to answer
<b>What language do you use to describe your gender identity?</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> Transgender female/woman <input type="checkbox"/> Transgender male/man <input type="checkbox"/> <b>Other:</b> <a href="#">Click or tap here to enter text.</a> <input type="checkbox"/> Prefer not to answer
<b>Is English your first (native) language?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Are you the first generation in your family to apply/attend college (parents/ grandparents do not have a college degree)?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Please share any additional information you would like us to know that you feel is important related to your personal circumstances and/or how you could benefit from this program?**

[Click or tap here to enter text.](#)

## HIGH SCHOOL INFORMATION

<b>Name of High School</b>	
<b>Street Address</b>	
<b>City, State, Zip</b>	
<b>In September of 2025, I will be a:</b>	<input type="checkbox"/> Junior <input type="checkbox"/> Senior

**Please share any academic honors you have earned.**  
Click or tap here to enter text.

**Please share any extracurricular activities (student clubs, athletics, student government, etc.) you have been involved in during high school.**  
Click or tap here to enter text.

**Please share any community service, employment, or volunteering you have done during high school.**  
Click or tap here to enter text.

## PARENT/GUARDIAN INFORMATION

<b>Name</b>	
<b>Relationship to Student</b>	
<b>Street Address</b>	
<b>City, State, Zip</b>	
<b>Home Phone</b>	
<b>Cell Phone</b>	
<b>Email Address</b>	

## PROGRAM INTEREST

<b>Which of the health/rehabilitation sciences careers do you have an interest in? (check all that apply)</b>
<input type="checkbox"/> <b>Athletic Training</b> <input type="checkbox"/> <b>Exercise Science</b> <input type="checkbox"/> <b>Occupational Therapy</b> <input type="checkbox"/> <b>Physical Therapy</b> <input type="checkbox"/> <b>Speech-Language Pathology</b>

## PERSONAL STATEMENT

<b>Please share with us why you are interested in a potential career in any of the rehabilitation sciences areas listed above. If you aren't sure which specific area you want to work in (example, physical therapy vs athletic training), explain what you hope to achieve in a future career...what motivates you to work on a health care/rehabilitation team? (Approximately 250-500 words)</b>
<a href="#">Click or tap here to enter text.</a>



**Don't forget to send your unofficial transcript/report card along with this complete application to:**  
**[Nia.Thomas@jefferson.edu](mailto:Nia.Thomas@jefferson.edu)**

**Please note: We are unable to accept documents in Google Docs or Google Drive formats. Kindly submit all documents as PDFs.**