Thank you for your interest in applying at Minnesota Community Care. We are excited about the opportunity to partner with you by providing an educational experience that will aid in developing the workforce of the future. We look forward to learning more about you and hope that you will be able to gain hands-on experience to advance your healthcare skills!

OUR MISSION:
Strengthening the well-being of our community through health care for all.

OUR VISION:
We envision a community in which all people have access to exceptional, comprehensive health care and are living healthy lives. Minnesota Community Care is the leader in delivering affordable health care by being the provider of choice, driven by compassion and respect for all.

OUR VALUES:
At Minnesota Community Care, we put the patient first.
We partner with and care for our patients by seeking to understand the world through their eyes and empowering all employees to put our patients first.

At Minnesota Community Care, we champion equity.
We value diversity, equity, and inclusion, through our advocacy, workplace practices, policies, and efforts towards equitable access to health-related services.

At Minnesota Community Care, we uplift people.
Through a culture of respect, collaboration, and creativity we empower the best in each other. We uplift each other, our patients, and community members. We value all people, honoring each individual’s dignity, unique strengths, and challenges with a mutual respect for all.
Student Applicant: ____________________________

Email Address: ______________________________

Phone Number: ______________________________

School Name: ________________________________

What year in school will you be during the next academic year? __________

Major/Minor/Program: __________________________

How many clinical hours needed to complete this rotation? __________

Semester that hours must be completed, along with date range:

________________________________________________________________________

Specific requests for placement type (ie pediatrics, women’s health, adult health, etc):

________________________________________________________________________

Specific requests for clinic location (e.g. La Clinica, Downtown, etc):

________________________________________________________________________

Are you new to Minnesota Community Care or reapplying?

How does our mission and values align with your career and personal goals?

Why are you interested in working with Minnesota Community Care?

Describe what skills you hope to gain and what you anticipate learning from Minnesota Community Care.
What experience, talents, and skills will you bring to our organization that aligns with our mission and values?

What does equity mean for you?

How will you serve as a bridge between our patient population and meeting the needs of the communities we serve?

How will you contribute to equity building and systems change from the lens of trauma informed care?

Optional Questions

Ethnicity: ________________________________

Gender Identity: ________________________________

Veteran: ________________________________

Disability: ________________________________