Idaho State University
Community and Public Health

Community Health Worker Academic Certificate Program

Admission Criteria and How to Apply

Applications are accepted on a rolling basis. Because program applications cannot be reviewed until you are admitted to ISU, we encourage you to start early, at least several weeks before the semester you plan to begin. Semester start dates are listed on the ISU academic calendar.

If you are not currently an ISU student	If you are already an ISU student
1. Apply for admission to ISU at **apply.isu.edu**. Apply as a **degree-seeking student** and select **Community Health Worker Certificate** as your major. Submit your ISU application well before the semester you plan to begin so the admissions process can be completed in time. **2.** Submit the Community Health Worker Academic Certificate Application (page 2), your letter of intent, and your letter of support to **dcph@isu.edu**, or mail them to: Idaho State University – Department of Community and Public Health 921 S. 8th Ave., Stop 8109 Pocatello, ID 83209-8109 Your program application can be reviewed only after you have been accepted to ISU.	**1.** Submit the Community Health Worker Academic Certificate Application (page 2), your letter of intent, and your letter of support to **dcph@isu.edu**, or mail them to: Idaho State University – Department of Community and Public Health 921 S. 8th Ave., Stop 8109 Pocatello, ID 83209-8109 Submit your materials well before the semester you plan to begin to allow time for processing.

Required documents

1. **Community Health Worker Academic Certificate Application** (page 2).
2. **Letter of intent.** In 1–2 pages, describe why you want to earn the Community Health Worker Academic Certificate and how it will help you reach your career goals.
3. **Letter of support.** This letter may come from a clinic or community agency you work or volunteer with, a community leader or engaged community member, or someone who knows your work, such as an employer, instructor, or advisor.

New to community health work?

You do not need prior experience as a community health worker to apply. If you have none, answer **No** in the experience section and leave that table blank. Use your letter of intent to explain your interest in community health and what you hope to do with the certificate.

Questions?

Contact the Department of Community and Public Health at **dcph@isu.edu**.

Idaho State University
Community and Public Health

Community Health Worker Academic Certificate

Application for Admission

Type directly into this form or print it and write neatly.

PERSONAL INFORMATION

Full name _____ Bengal ID # _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____

Permanent address (if different) _____

Semester you plan to begin: ☐ Fall ☐ Spring ☐ Summer Year _____

Are you currently admitted to ISU as a student? ☐ Yes ☐ No (If no, see Step 1 on page 1.)

ACADEMIC INFORMATION

List any college, university, or training program you have attended. Leave blank if none.

College / university or training program	Year(s) attended	Credits	GPA	Certificate / degree awarded

COMMUNITY HEALTH WORKER EXPERIENCE

Are you currently working or volunteering as a community health worker (including Promotores de Salud, Community Health Representatives, Community Health Advisors, and related titles)? ☐ Yes ☐ No

Prior CHW experience is not required to apply. If you answered No, skip the table below.

Agency name	Dates of service	Supervisor name	Supervisor phone	Supervisor email

AGREEMENT AND SIGNATURE

By submitting this application, I affirm that the information in it is true and complete. I understand that if I am accepted to the Community Health Worker Academic Certificate Program, any false statements, omissions, or other misrepresentations on this form may result in my immediate dismissal from the program.

_____ _____

Student signature Date

Submit this application with your letter of intent and letter of support to dcph@isu.edu, or mail to the address on page 1.