

# Health Science Distinction Requirements

## Flathead High School



Health Science Distinction acknowledges graduating seniors that complete a course of study emphasizing a health sciences focus. To be eligible for this distinction, the student must complete all requirements outlined below. Students earning this distinction are eligible to wear a teal color cord at graduation.

**To apply for Health Science Distinction, students must meet the following requirements:**

1. Successful completion of three credits of Biomedical Science and four credits of science including Organic Chemistry.
2. Cumulative GPA of 3.2.
3. Contribute to the Health Science Community by participating in one or a combination of the following:
  - HOSA club for a minimum of two years and compete in two state competitions
  - Science club for a minimum of two years and compete in two science fairs and/or regular attendance and presentations at club meetings
  - Health Science related internship with a minimum of 30 documented hours
  - Biomed 4- Biomedical Innovations plus 10 additional documented internship hours
4. Submit an application, including a transcript, which proves the student has met the requirements.

English	4.0
Social Science	2.5
Math	3.0
Science including Organic Chemistry	4.0
Fine Arts (Art, Drama, Music)	1.0
.5 credits Health / 1.0 credits PE	1.5
Career and Technical Education (Biomedical Science)	3.0
IT Essentials Course	.5
21st Centuries Literacies Course	.5
General Electives	2.0
<b>TOTAL</b>	<b>22.0</b>



# Health Science Distinction Application

Flathead High School



Student name: \_\_\_\_\_

List three Biomedical Science courses taken:

- 1.
- 2.
- 3.

List four Science courses taken including Organic Chemistry:

- 1.
- 2.
- 3.
- 4.

In addition please complete the participation log to outline club or internship activities. Be specific and detailed in logging your activities.

Science Department Leader Signature \_\_\_\_\_

Please attach a transcript and return to Mrs. Johnson in room 234 by the announced deadline. No late or incomplete applications will be accepted.





## Documented Participation in Health Science Community:

Date \_\_\_\_\_ Activity \_\_\_\_\_ Hours participated: \_\_\_\_\_

Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sponsor Signature: \_\_\_\_\_

Date \_\_\_\_\_ Activity \_\_\_\_\_ Hours participated: \_\_\_\_\_

Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sponsor Signature: \_\_\_\_\_

Date \_\_\_\_\_ Activity \_\_\_\_\_ Hours participated: \_\_\_\_\_

Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sponsor Signature: \_\_\_\_\_

Attach additional pages as needed.

