



March 2023

Dear Student and Parent,

Now that the pandemic is nearly over, we are returning to our original program format. We will have a Mini Medical Summer Experience on July 8th from 9:30 AM to 5:30 PM on Saturday July 8th and we will repeat an identical program on Sunday July 9th. Our only requirement is that students continue to wear masks during the entire program. The program is returning to the Edward Hospital Education Center 3rd floor auditorium and conference rooms located at 720 Brom Ct, Naperville, IL 6054. Students will have 3 hours of lecture, followed by ½ hour of lunch break, then 3 hours of hands on experiences, followed by a ½ hour talk on healthcare careers. Upon exiting students will receive a certificate of completion.

Students register for this program and are accepted on a first come first served basis. All you need do is complete the online google form, print and complete the attached consent, and mail it in with your program fee of \$300. There are no requirements, no essay, no teacher recommendation, and no interview.

Once received, we will email you and either confirm your acceptance or put you on a waiting list. Participation in this program has no bearing on acceptance to our winter Mini Medical School for High School Students program.

Your spot in the program is non-transferable. Any student unable to attend the program will be refunded \$250 as long as we are notified by June 1, 2023. We will provide a complete refund to every student if we are unable to run the program due changes in the pandemic.

Through this program, I hope to encourage you to study medicine.

Sincerely,

Ira S. Rubin, M.D., Ph.D.
Dr. Rubin's Mini Medical School
Attending Pediatrician, Naperville Pediatric Associates
1012 95th St, Suite
Naperville, IL 60564

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**Dr Rubin's Mini Medical School
Summer Experience Program
c/o Ira S. Rubin, M.D., Ph.D.
1012 95th St. Suite 7
Naperville IL 60564**

Student Name _____ Email _____

Student Phone Number _____

When do you want to attend? Check the appropriate circle below. (Students with no preference typically have a greater chance of being accepted since we can fit you in where we have space).

No preference Saturday July 8, 2023 Sunday July 9, 2023

Permission to Participate with Hands on Projects

I, the undersigned **parent/ legal guardian** of the student named above, hereby give my consent for my student to participate in the Mini-Medical Experience Program. I understand that my student will be participating in several hands-on projects including taking a blood pressure, examination of the ears and eyes, lungs, heart, injections and learning surgical knots and suturing. I understand that my student will be given the opportunity to perform these tasks as well as be a subject for examination by other students learning these tasks.

I do not hold Dr. Rubin's Mini Medical School liable for any injury arising from my student's participation in the hands on projects.

Parent Signature _____ Date _____

Parental Photographic Release

I, the undersigned **parent/ legal guardian** of the student named above, hereby consent and authorize any lawful use and reproduction by Dr. Ira Rubin, of all photographs taken of my student during the Edward Mini-Medical School for High School Students Program. I understand that I, nor my student, will not be paid for such photographs, and I agree not to make any claims against Dr. Rubin relating to or arising out of the taking of the photographs or any authorized use of such photographs.

By signing here, I give permission to Dr. Rubin to take and use photographs of my student.

Parent Signature _____ Date _____

WHEN COMPLETED

Attach your check for \$300.00 payable to Dr. Rubin's Mini Medical School. Mail it or drop it off to us in a sealed envelope. If upon arrival the front door is locked, place the envelope in the office mailbox down the hall on the right side.

**Dr Rubin's Mini Medical School
C/O Naperville Pediatric Associates
1012 95th St. Suite 7
Naperville IL 60564**