WELCOME!

NOTE:
- Applications will be accepted via online submission only. You can request access to the online application submission website by submitting the online request form available at: education.alcoholstudies.rutgers.edu/jjshlp
- A valid email address is required.
- Team Application due date: **November 20, 2015**
- Individual Team Member Application due date: **November 20, 2015**

All accepted teams will be notified in **February 2016**.

A complete application includes:

- Completed Team Application (1 per team)
- Completed Individual Application (1 per person)
- Signed Evidence of Institutional Support (for team and individual)
- Two-Year Commitment Form (1 per person)

**I. PROGRAM OVERVIEW**

The mission of the Johnson & Johnson School Health Leadership Program is to empower and develop school nurses as leaders in community health services teams to improve practices that impact student health.

The program is available for teams of school nurses and their community/administrative partners and includes:

- **School Health Leadership Institute** Six-day residential institute during the months of July and August (July 17-22 OR July 31 - August 5) located in New Brunswick, NJ provides an opportunity for teams of school nurses and community/administrative partner(s) to develop their leadership and project management skills. Note: Teams will return for a two-day graduation and culminating event in the fall of the following year.
- **Enduring Change Plans** - These plans provide a framework and action plan for fellows to engage their communities in sustainable change.
- **Online Continuing Education Courses** - These courses offer fellows and other school health personnel state of the art health information.
- **Customized Mentoring, Coaching, and Support** - On-site coaching and support will be provided to each community team in the form of site visits and quarterly conference calls.
- **Alumni Network** - Exclusive offerings for alumni and special networking opportunities to meet fellows from across the United States and beyond.
II. APPLICATION AND PARTICIPATION NOTES

Sponsored by Johnson & Johnson, this FREE* professional development opportunity for school nurses and their colleagues utilizes a competitive application process. Once accepted to the fellowship program, individuals commit to completing online learning modules, attending the Leadership Institute, and engaging in a local community initiative. All applicants must commit to participating in the fellowship program in its entirety:

- Weeklong Institute (July 17-22 OR July 31- August 5)
- Monthly webinars and online content
- Community health coaching
- Fellowship Graduation and Culminating Event (Fall of 2017)

*Travel to the Institute is NOT included
*Teams will be assigned Institute training dates at random

The Johnson & Johnson School Health Leadership Institute will be held in the months of July and August (July 17-22 OR July 31- August 5). All team participants (the school nurses and the community/administrative partners) are responsible for completing the prerequisite on-line courses and for attending the entire program. By completing this application you are agreeing to participate in the program in its entirety.

This program requires online courses and interaction, while courses are not acceptance criteria, members of a team who do not demonstrate basic computer competency may be required to take a “computer crash course”.

III. DEVELOPING A TEAM

A team must consist of two to five school nurses and one or two partner(s). (NOTE: NJ teams MUST include one community partner and one administrative partner. See "Partner Qualifications")

The most successful teams are created thoughtfully. They include individuals with a range of experiences (from new nurses to those with some years of experience). School nurses on successful teams have demonstrated appreciation for community health models, ability to work collaboratively with colleagues and peers, leadership potential, and a commitment to remaining in the field of school nursing into the future. It is not expected that all applicants have served in leadership roles prior to entering the program, but rather they possess the willingness, motivation, and potential to serve as community and professional leaders in a variety of ways.

IV. PARTNER QUALIFICATIONS

Partners should be individuals in your school/community who inspire leadership and growth in professionals they supervise or serve. These individuals understand that a great team consists of forward thinkers who want to create change in their environment. Partners are likely to be community-wide (e.g. district) supervisors, community health partners, chairs of your wellness committees, or other individuals who are intimately involved in health matters for your school and community, and who are already in existing leadership roles.

We strongly encourage teams to include two partners, but one is permissible. Partners should be either school-based administrators or community-based health leaders. Teams with two partners MUST have a representative from each sector. If a team includes one partner it can be from either school administration or public health offices.
V. EVIDENCE OF INSTITUTIONAL SUPPORT AND COMMITMENT AGREEMENT

**Team Institutional Support:** One (1) Team Evidence of Institutional Support form for the entire team signed by a, e.g. Superintendent, Assistant Superintendent, Director of Student Support Service, must be submitted for the application to be considered.

**Individual Institutional Support:** All school nurses on a team must have documentation of support from their building principal or administrator (see attached Individual Evidence of Institutional Support form) to participate in the fellowship program.

**Individual Two-Year Commitment Agreement:** All school nurses must acknowledge that they understand the expectations of school nurse fellows. This includes being present for the entirety of the School Health Leadership Institute, contributing to the creation of Enduring Change Plans, participating in online continuing education courses, attending onsite mentoring appointments, and becoming an active member in the fellowship alumni network.

VI. CONCLUSION

In completing this application you are indicating that all team members have committed to participate in the Johnson & Johnson School Health Leadership Program in its entirety. You will also ensure that each team member completes and submits the Required Individual Application.

Thank you for applying to the 2016 Johnson & Johnson School Health Leadership Program. Your efforts are appreciated and we look forward to learning more about you.

*If you have any questions, please feel free to contact the program staff at: jjshlp@rutgers.edu*

The Johnson & Johnson School Health Leadership Program is designed and implemented by Rutgers, Center of Alcohol Studies with an educational partnership with National Association of School Nurses. This program would not be possible without the generous support of Johnson & Johnson. Support for New Jersey teams’ participation in this program was provided in part by a grant from the Robert Wood Johnson Foundation’s New Jersey Health Initiatives program.
2016

Please note: The information contained in this packet is to be used for preparation purposes only. Official applications for the 2016 School Health Leadership Program must be requested online at:

http://education.alcoholstudies.rutgers.edu/jjshlp
2016

TEAM APPLICATION

Please note: Applications are due no later than November 20, 2015. All applications MUST be submitted online via our website:

http://education.alcoholstudies.rutgers.edu/jjshlp
2016 School Health Leadership Program
Team Application

NOTE: Applications will be accepted via online submission only. You can request access to the online application submission website by submitting the online request form available at: education.alcoholstudies.rutgers.edu/jjshlp

Note:
- A valid email address is required.
- A COMPLETE Team Application includes: (1) Team Application and (2) Signed Team Evidence of Institutional support.
- All Team Members need to complete a competitive Individual Application.

Application due date: November 20, 2015.
All accepted teams will be notified in February 2016.

I. TEAM MEMBER INFORMATION

A. Person Completing Team Application

Name: ____________________________
- Community Partner
- Administrative Partner
- School Nurse

B. School Nurse

School Community/Region
Name
Degree(s)
Position/Placement
(please provide title and school(s) served)
Gender
Email
Alternate email
Work Phone #
Preferred Phone #

C. School Nurse

School Community/Region
Name
Degree(s)
Position/Placement
(please provide title and school(s) served)
Gender
Email
Alternate email
Work Phone #
Preferred Phone #
### D. School Nurse (Optional)

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<tr>
<th>School Community/Region</th>
<th>Name</th>
<th>Degree(s)</th>
<th>Position/Placemat (please provide title and school(s) served)</th>
<th>Gender</th>
<th>Email</th>
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### E. School Nurse (Optional)

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<th>Position/Placemat (please provide title and school(s) served)</th>
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### F. Community Partner

Community Partners should be individuals in your community who inspire leadership and growth in professionals they supervise or serve. These individuals understand that a great team consists of forward thinkers who want to create change in their environment. Partners are likely to be community-wide supervisors, community health partners, chairs of your wellness committees, or other individuals who are intimately involved in health matters for your community, and who are already in existing leadership roles.

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<th>Name</th>
<th>Degree(s)</th>
<th>Position/Placemat (please provide title and school(s) served)</th>
<th>Gender</th>
<th>Email</th>
<th>Alternate email</th>
<th>Work Phone #</th>
<th>Preferred Phone #</th>
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</table>
G. Administrative Partner (Optional)

Administrative Partners should be individuals in your school who inspire leadership and growth in professionals they supervise or serve. These individuals understand that a great team consists of forward thinkers who want to create change in their environment. Partners are likely to be community-wide (e.g. district) supervisors or other individuals who are intimately involved in health matters for your school, and who are already in existing leadership roles.

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<th>School Community/Region</th>
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<td>Preferred Phone #</td>
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II. INFORMATION FOR TEAM MEMBERS

Each team member is required to complete the individual application that will ask for more specific information such as date of birth, gender, degrees, occupational position, location of school, and county/community served.

III. COMMUNITY DEMOGRAPHICS

A. What ages are served by team members (choose all that apply)
   - [ ] Pre – K
   - [ ] K – 2nd Grade
   - [ ] 3rd – 5th Grade
   - [ ] 6th – 8th Grade
   - [ ] 9th – 12th Grade
   - [ ] Other (Please describe)

B. What percent of the students you serve are financially eligible for free or reduced lunches?
### IV. RACE/ETHNICITY

A. What is the race/ethnicity of youth in your community? Please write an estimate percentage each race/ethnicity makes up within the student body:

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>American Indian or Alaska Native</td>
<td>%</td>
</tr>
<tr>
<td><a href="#">Definition</a></td>
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<td>Asian</td>
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<td><a href="#">Definition</a></td>
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<tr>
<td>Black or African American</td>
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<td><a href="#">Definition</a></td>
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<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
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<td><a href="#">Definition</a></td>
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<td><a href="#">Definition</a></td>
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<td>Hispanic or Latino</td>
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<td><a href="#">Definition</a></td>
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<tr>
<td>Other</td>
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### Definitions:
- **American Indian or Alaska Native**
  A person having origins in any of the original peoples of North and South America including Central America, and who maintains a tribal affiliation or community attachment.
- **Asian**
  A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **Black or African American**
  A person having origins in any of the Black racial groups of Africa.
- **Native Hawaiian or Other Pacific Islander**
  A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **White**
  A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **Hispanic or Latino**
  A person of Cuban, Mexican, Puerto Rican, South American, or other Spanish culture or origin.
V. **TEAM QUESTIONS (250 maximum words per question)**

A. Describe any special populations represented by your community.  
   (250 maximum words)

B. Describe what your team hopes to gain by participating in the 
   Johnson & Johnson School Health Leadership Program.  
   (250 maximum words)

C. Describe, in detail, at least three community health challenges 
   your team is currently faced with.  
   (250 maximum words)

D. How best do you believe the educational and health outcomes 
   can be improved within your community?  
   (250 maximum words)

E. Please list relevant health programs your school community 
   participates in and any involvement of your individual team members in 
   these efforts.  
   (250 maximum words)

VI. **EVIDENCE OF INSTITUTIONAL SUPPORT**

Upload a letter from an administrator at the district level indicating the school’s support of your 
attendance at the Institute (Including the release time from school to attend the training in its 
entirety).

In completing this application you are indicating that all team members have committed to 
participate in the Johnson & Johnson School Health Leadership Institute in its entirety (July 17-22 
OR July 31- August 5).

VII. **CONCLUSION**

Thank you for applying to the 2016 Johnson & Johnson School Health Leadership Program 
through the team application. Your efforts are appreciated and we look forward to learning 
more about you.

*If you have any questions, please feel free to program staff at: jjshlp@rutgers.edu
2016

INDIVIDUAL APPLICATION

Please note: Applications are due no later than November 20, 2015. All applications MUST be submitted online via our website:

http://education.alcoholstudies.rutgers.edu/jjshlp
2016 School Health Leadership Program
Individual Application

NOTE: Applications will be accepted via online submission only. You can request access to the online application submission website by submitting the online request form available at: education.alcoholstudies.rutgers.edu/jjshlp

Note:

- A valid email address is required.
- A COMPLETE Team Application includes: (1) Team Application and (2) Signed Team Evidence of Institutional support.
- All Team Members need to complete a competitive Individual Application.

Application due date: **November 20, 2015**
All accepted teams will be notified in **February 2016**.

### I. SCHOOL COMMUNITY/REGION:

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<td>Your Title</td>
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<td>Work Address</td>
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<td>Zip Code</td>
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<td>Work Phone #</td>
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### II. ABOUT YOU

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<th>Name</th>
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<td>Degree(s)</td>
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<tr>
<td>Other Credentials</td>
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<td>Date of Birth</td>
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<td>Alternate Email Address</td>
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</table>
III. ROLE

- Community Partner
- Administrative Partner
- School Nurse

IV. WORK EXPERIENCE

Professional degrees completed (check all that apply)

- Registered Nurse
- Associates
- Bachelors (please specify)
- Bachelors of Science in Nursing (BSN)
- Masters (please specify)
- Doctorate
- National Certified School Nurse (NCSN)
- Other: (please specify)

V. WORK EXPERIENCE

A. Number of years as a school nurse: _____ (if none, enter 0)
B. Number of total years in the nursing field: _____ (if none, enter 0)
C. Number of years in your field, if not a school nurse: _____
D. What is your definition of Leadership?

E. Describe your “Leadership Role” as a school nurse/administrator within your community.
F. What are the things you always wish you had learned in your professional education but didn’t?


G. In what way(s) have you already fulfilled a role as your school/community ambassador for health issues? If you have not, in what ways do you hope to?


H. What groups/individuals or organizations have you currently collaborated to support health initiatives in your community?


I. List your professional 1-year and 5-year goals.
VI. CURRENT PROFESSIONAL MEMBERSHIPS (check all that apply)

- None
- National Association of School Nurses (NASN)
- School Nursing Association (State)
- American Nurse Association (ANA)
- Education Association (State)
- National Association of Pediatric Nurse Practitioners (NAPNAP)
- Parent Teacher Association (PTA)
- American Association of School Administrators (AASA)
- American Academy of Nurse Practitioners (AANP)
- American School Health Association (ASHA)
- American Public Health Association (APHA)
- Sigma Theta Tau National Honor Society

Other: Are you an “active volunteer” or leader in any of the above mentioned organizations?
   If so please indicate the organization and your role.
VII. DEMOGRAPHICS

A. Please indicate whether your school(s) are:

- [ ] Public
- [ ] Independent (Private/Parochial)
- [ ] Charter
- [ ] Other: (please list)

B. Describe any additional characteristics (please specify).

C. Please indicate all grade levels you serve (check all that apply)

- [ ] Preschool
- [ ] Elementary
- [ ] Middle
- [ ] Junior High
- [ ] High School
- [ ] Other: (please specify)

D. If you work in more than one school, please note how many schools you serve: _____

E. The approximate size of the student body you are responsible for is _____ students.
VIII. TELL US ABOUT YOURSELF

A. Please tell us about yourself and how you feel this program will empower you as a change agent within your school/community.

B. What are you looking to walk away with from this program? (check all that apply)

- Empowerment training
- Networking capabilities
- Strategies for designing programs
- Interpersonal dynamics within your community
- Resource development
- Ability to find evidence based strategies
- Public speaking/getting your voice heard
- Being able to conduct a needs assessment
- Developing a comprehensive evaluation plan
- Grant writing
- Presentation skills (new programs/initiatives to staff, parents, and students)
- Professional Writing
- Other: (please specify)

C. What health issues are of greatest concern to the community you serve?
IX. ONLINE COURSE WORK

There will be up to 20 hours of online instruction to be completed by all fellows. The following questions will help us gauge the group’s needs.

Some of the course work will be completed prior to arriving at the Institute; other content specific work will be required following participation.

Check one response for each of the following:

A. I feel I am proficient in MS office suite.
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree

B. I feel confident in completing a Google search.
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree

C. I would be able to independently complete a literature search using PubMed/CINHAL.
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree

D. I can create a basic PowerPoint presentation without assistance.
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree

X. BRIEF PHONE INTERVIEWS

The Johnson & Johnson School Health Leadership Program Faculty may contact you to review your answers and to provide you the opportunity to add any additional information that you felt could not be expressed through this application.

XI. CONCLUSION

Thank you for applying to the 2016 Johnson & Johnson School Health Leadership Program through the individual application. Your efforts are appreciated and we look forward to learning more about you.

*If you have any questions, please feel free to program staff at: jjshlp@rutgers.edu
SUPPORT DOCUMENTS

Included:
- Team Evidence of Institutional Support
- Individual Evidence of Institutional Support
- Individual Two-Year Commitment Letter

Reminder:
All paperwork MUST be submitted online via our website:

http://education.alcoholstudies.rutgers.edu/jjshlp
School Community/Region: _______________________________________________________

I understand that the team members listed below are applying to participate as fellows in the prestigious Johnson & Johnson School Health Leadership Program and I support their application.

I understand if accepted the team will develop leadership skills through online classes and in-person training. By signing this form, I am granting for Institutional support for their complete participation. This includes the release time from work, if necessary, to attend the training in its entirety from July 17-22 OR July 31- August 5.

Community Partner: _______________________________________________________
Administrative Partner: _______________________________________________________
Team Member: _______________________________________________________
Team Member: _______________________________________________________
Team Member: _______________________________________________________
Team Member: _______________________________________________________

_____________________________  _______________________________
Signature                     Name (Please Print)

_____________________________  _______________________________
Title                         Date
I understand that _____________________________ is applying to participate as a fellow in the prestigious Johnson & Johnson School Health Leadership Program.

I understand if accepted she/he will develop leadership skills through online classes and in-person training. By signing this I am endorsing the attached application and supporting participation in all program components. This includes the release time from work, if necessary, to attend the Institute in its entirety from July 17-22 OR July 31- August 5.
I understand if accepted to the Johnson & Johnson School Health Leadership Program, my intention will continue with my role as a school health fellow and complete the following:

- **School Health Leadership Institute** – Six-day residential Institute (July 17-22 OR July 31- August 5) located in New Brunswick, NJ provides an opportunity for teams of school nurses and a community partner to develop their leadership and project management skills.
- **Enduring Change Plans** – These plans provide a framework and action plan for fellows to engage their communities in sustainable change.
- **Online Continuing Education Courses** – These courses offer fellows and other school health personnel state of the art health information.
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- **Alumni Network** – exclusive offerings for alumni and special networking opportunities to meet fellows from across the United States and beyond.

Signature

Name (Please Print)

Title

Date