



CONSIDERATION Request

The 2018 AIT Internship Mentoring Program



Consideration Candidate Information

Name _____

Title (if applicable) _____

Address _____

City/State/Zip _____

Work Phone number _____

Home Phone number _____

PERSONAL Cell Phone _____

PERSONAL E-mail _____

WORK E-mail _____

Check all of the following that are True

- I have attached my resume.
- I have signed and attached Pages 2.
- I understand that completing **this Consideration Form** does not guarantee acceptance into the AIT program.
- I understand this document is part of the consideration process and that I will next go through an application phase then to move to the Agreement phase if I am accepted into the program.
- I understand this is a fee based program and that payment will be due upon Agreement signing – if I am accepted into the program.
- I am able and willing to do my AIT anywhere within the state of Indiana.
- I am able and willing to do my AIT within – approximately – 60 to 90 miles of my home.
- I am able and willing to accept an unpaid AIT.
- I am willing to take a physical and drug test – if asked – and would be able to pass both tests.
- I will be able to pass a background check- as required by the State of Indiana.
- I have never been **accused of** or **abused** physically, verbally or para-verbally another person. (If this is false, please explain.)

- I have never been terminated from a job. (If this is false, please explain.)

- I have never been convicted of a felony. (If this is false, please explain.)

I certify, under the penalties or perjury, I have represented my identity truthfully and that I am requesting consideration to apply for an AIT position and am applying for the purpose(s) of completing an AIT Internship Mentoring Program to meet state requirements - to achieve my RCA or HFA license. I further certify that I am not participating to engage in an investigation of this program, its partners or sponsors and understand that application does not guarantee acceptance.

Applicant Signature: _____ Date of Signature _____

RCA OR HFA CANDIDATE ?

(SELECT Check or "X" only ONE)

RCA

HFA

NOTE: Completing a Consideration Form Does NOT Guarantee Acceptance into the program.

All consideration candidates must go through an application and multi-interview process, meet all eligibility requirements, and be available when and where a partnering Preceptor is available.

For more Inforamtion, contact:

Vivian Wright-Defrees
317-596-0707
vwd@successdevelopment.biz

To Submit Consideration Form,
send this Form **AND** Resume -- to:

Vivian Wright-Defrees
Success Development, inc.
9801 Fall Creek Rd. #417
Indianapolis, IN 46256

Note: Payment is NOT due UNTIL an candidate of consideration has completed an Application and it is processed, candidate is offered and opportunity to enter into the program, and an Agreement is signed.

Space Below - For SDI Office Use



SUCCESS DEVELOPMENT AIT
RESOURCE CENTER™

Success Development AIT Resource Center SDAITRC

CONSIDERATION FORM

The AIT Internship Mentoring Program



SUCCESS
DEVELOPMENT
INC.

If you are looking for an Administrator-in-Training opportunity, **Success Development** and one of their **Preceptor Organizations** could be your source to obtain that opportunity. **RCA/HFA AIT openings** are limited and sometimes inadequate, so we may be your solution.

After a multi-interview process and meeting all eligibility requirements, you may qualify to be accepted into the Success Development AIT Resource Center and an AIT internship mentoring program - with a state approved Preceptor.

Give yourself the chance to change your life and your situation. Find out whether you are eligible for a SDAITRC AIT placement.

If you are selected, your Agreement fee – includes- but may not be limited to:

- ✓ A one-year membership into the current Success Development AIT Resource Center. (When developed.)
- ✓ An assigned Mentor to assist you and a liaison relationship between you and your Preceptor.
- ✓ An assigned Preceptor (must be approved by the State) (NOTE: if the State denies you AIT status – based upon your eligibility - a processing fee will be withheld from any refund.)
- ✓ A discount on Exam Prep Sessions.
- ✓ A one-year student membership to the American College of Health Care Administrators – Indiana Chapter – if you are not already a member.

In as little as **eight-twelve months**, you could be starting a rewarding and profitable career that could afford you a lifestyle that you have only dreamed about.

The AIT Internship is required for those that do not otherwise meet the state's requirements. We may be able to assist you in finding a Preceptor, maximizing the AIT experience, and shortening your licensing process.

Benefits of the Program include but are not limited to:

- ✓ The potential to secure your career in a recession-proof industry and the potential of additional career options.
- ✓ The ongoing source to increase your skill sets.
- ✓ The highly qualified and caring Mentors that are practicing professionals in the industry.
- ✓ The collaboration between the program Mentors, Preceptor Organizations, Preceptors, Sponsors, and Providers is a true example of a Symbiotic Relationship.
- ✓ The program developed, owned, and provided by **Success Development, inc.** – an organization with 20+ years serving others.

The Healthcare Industry

This is one of the fastest growing industries in America. The healthcare industry will continue to grow as the majority of America's population continues to age. In fact, this will be the largest group of seniors the world has ever seen. There will be a great demand for healthcare. As a result, there will be a greater than ever demand for Residential Care and Health Facility Administrators. Without these administrators, the healthcare industry could virtually come to a standstill. They are critical to a functioning healthcare system.

NOTE:

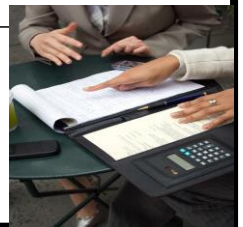
A request for CONSIDERATION does not guarantee acceptance.

All considered candidates must go through an application and multi-interview process, meet all eligibility requirements, sign an Agreement for Services, and be available when and where a partnering Preceptor is available.

Printed Name

Signature of Understanding

Date



For More Information, Contact:

Vivian Wright-Defrees
Success Development, inc.
9801 Fall Creek Rd. #417
Indianapolis, IN 46256
(317)596-0707
vwd@successdevelopment.biz