

## 2025 Form for FUNDED Externs: **FUNDING** RECIPIENT ELIGIBILITY FORM

### THE HOSPITAL HIRES EXTERNS AND ASSIGNS FUNDING PER THE MOU RECEIVED FROM MHA (THE MOU STATES THE NUMBER OF FUNDED SLOTS RECEIVED):

- 1) The hospital point of contact (POC) gives the form to each extern that is assigned funding.
- 2) The funded extern will complete his/her section and ask the hospital representative to complete his/her section.

### THE STUDENT FOLLOWS THE DIRECTIONS OF THE PDD:

- 3) Each hospital staff will attend a ZOOM with the PDD representative to understand their requirements for enrollment. The staff will then share this information with the extern hire. The extern hire will complete the requirements on his/her own.

### THE STUDENT RETURNS THE SIGNED FORM TO THE HOSPITAL:

- 4) The extern will return the completed form to the hospital POC.

### THE HOSPITAL SENDS ROBIN THE COMPLETED FORM.

- 5) The hospital POC

emails a scan of the signed,

completed form

to [rpowell@mhanet.org](mailto:rpowell@mhanet.org)

## DID YOU KNOW



AT THE BEGINNING OF **FUNDING**, THIS FORM MUST TRAVEL FROM & BACK TO ROBIN AT [RPOWELL@MHANET.ORG](mailto:RPOWELL@MHANET.ORG) IN ORDER FOR YOUR HOSPITAL TO BE REIMBURSED AT THE END.

*#noformnoreimbursement*



## 2025 MS SUMMER STUDENT NURSE EXTERNSHIP PROGRAM PLANNING AND DEVELOPMENT **FUNDING** RECIPIENT ELIGIBILITY

1. Funding from the Planning and Development Districts across the state will be contracted with the MS Center for Quality and Workforce (MCQW).
2. MCQW will let each hospital POC know via MOU the # of funded slots given to each hospital.
3. The hospital will assign those funded slots to hired externs who meet funding criteria. The funding is assigned to an extern that **is an American citizen** and **lives and works within** the Planning and Development District.
4. Those assigned externs are now referred to as "funded." The "funded" extern will receive this form. *(Hospital: Choose hired externs that can easily and quickly carry out the WIOA registration.)*
5. Each "funded" extern will have this form completed and returned to the hospital HR representative.

**The following section is for the **Funded Extern** to complete: PLEASE PRINT LEGIBLY.**

FUNDED EXTERN  
NAME:

FUNDED EXTERN  
PHONE:

FUNDED EXTERN  
HOME ADDRESS:

ENROLLED AT THIS SON IN  
THE EXTERNSHIP COURSE:

FUNDED EXTERN  
EMAIL:

FUNDED EXTERN  
LIVES IN COUNTY:

FUNDED EXTERN  
LAST FOUR DIGITS OF SS#:

**The following section is for the **Hospital Representative** to complete:**

HOSPITAL NAME AND LOCATION:

HOSPITAL REP NAME AND PHONE:

*I verify that the above extern is hired by our hospital and is a candidate for the funding provided by the Planning and Development District in our area:*

*Hospital Representative Signature and Date*

**The following is for the **WIN Job Center Representative** to complete:**

*I verify that the above extern has been successfully enrolled in WIOA at the following WIN Job Center:*

WIN JOB CENTER NAME AND LOCATION:

WIOA REPRESENTATIVE NAME:

DATE FUNDED EXTERN MAY START WORK:

WIOA REPRESENTATIVE  
PHONE AND EMAIL:

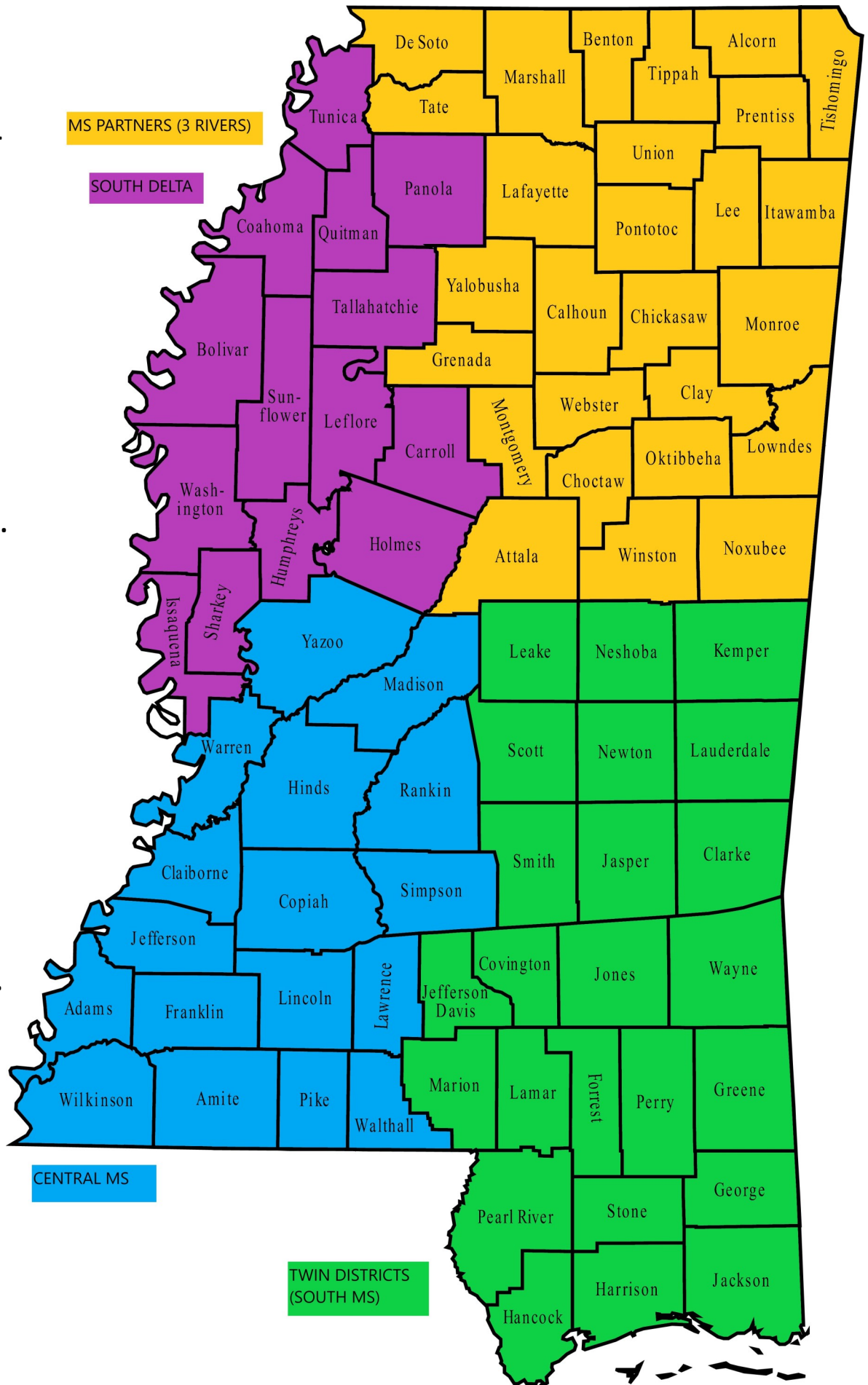
**FUNDED EXTERN RETURNS THIS COMPLETED FORM TO THE HOSPITAL POC.  
THE HOSPITAL POC EMAILS A COPY OF THIS FORM TO RPOWELL@MHANET.ORG**

**THE FOUR  
PLANNING  
AND  
DEVELOPMENT  
DISTRICTS  
(PDD) IN  
MISSISSIPPI.**

**THE FUNDED  
EXTERN MUST  
LIVE AND  
WORK WITHIN  
THE SAME PDD.**

**THE  
REGISTRATION  
FOR THE  
FUNDING  
TAKES PLACE  
AT ANY OF THE  
FOLLOWING  
WIN JOB  
CENTERS IN  
EACH DISTRICT.**

**SEE NEXT PAGE  
FOR  
LOCATIONS.**



SOUTH DELTA	CENTRAL MS	TW DISTRICTS (SOUTH MS)	
<p><b>BATESVILLE</b> 662 563 7318 103 WOODLAND RD #16 BATESVILLE 38606</p> <p><b>CLARKSDALE</b> 662 624 9001 236 SHARKEY AVE 3RD FL FEDERAL BLDG CLARKSDALE 38614</p> <p><b>CLEVELAND</b> 662 843 2704 119 N COMMERCE AVE CLEVELAND 38732</p> <p><b>GREENVILLE</b> 662 332 8101 DELTA PLAZA SHOPPING CTR 800 MARTIN L KING BLVD STE C54 GREENVILLE 38704</p> <p><b>GREENWOOD</b> 662 459 4600 812 W PARK AVE GREENWOOD 38935</p> <p><b>INDIANOLA</b> 662 887 2502 226 N MARTIN L KING DR INDIANOLA 38751</p>	<p>Call and make an appointment with LouSonya Horton CMPDD Registrar (601) 321-2175  lhorton@cmpdd.org</p>	<p><b>COLUMBIA</b> 601 736 2628 1111 HWY 98 COLUMBIA 39429</p> <p><b>FOREST</b> 601 469 2851 536 DEER FIELD DR FOREST 39074</p> <p><b>GULFPORT</b> 228 897 6900 10162 SOUTHPARK DR GULFPORT 39505</p> <p><b>HANCOCK COUNTY</b> 228 466 5425 856 HWY 90 STE D BAY ST LOUIS 39520</p>	<p><b>PHILADELPHIA</b> 601 389 3431 1016 SAXON AIRPORT RD PHILADELPHIA 39350</p> <p><b>PICAYUNE</b> 601 798 3472 2005 WILDWOOD RD PICAYUNE 39466</p> <p><b>CARTHAGE</b> 601 267 9282 202 C O BROOKS ST CARTHAGE 39051</p> <p><b>CHOCTAW MS</b> 601 663 7722 266 INDUSTRIAL RD CHOCTAW 39350</p>
		<p><b>HATTIESBURG</b> 601 584 1202 1911 ARCADIA ST HATTIESBURG 39401</p> <p><b>LAUREL</b> 601 399 4000 2139 HWY 15 N STE D LAUREL 39440</p> <p><b>MERIDIAN</b> 601 553 9511 2000 HWY 19 N MERIDIAN 39307</p> <p><b>NEWTON</b> 601 683 2021 107 ADAMS ST NEWTON 39345</p> <p><b>PASCAGOULA</b> 228 762 4713 1604 DENNY AVE PASCAGOULA 39568</p>	

**FIND THE MS PARTNER INFORMATION  
AND ADD IT BACK INTO THIS LAYOUT**