

Healthcare BizPrep

Welcome Letter

Business CEO:

We are looking forward to your school's visit to *JA BizTown* and hope that you and your team are as well. We know you are learning a lot about operating your own business and handling your own finances. Before long, you will be able to put your knowledge to work and, hopefully, see success for both yourself and your business.

You will find many important papers in this BizPrep Packet. All pages must be completed before coming to *JA BizTown* and must be brought with you on the day of your on-site visit. There are also several tasks to be completed in preparation for your visit. **Please use the checklist below to assure that all paperwork and tasks are completed and checked for accuracy.**

____ Business Cost Sheet

____ Loan Application

____ Radio Ad

____ Philanthropy Pledge Sheet

____ Employee Checkbooks*

____ Employee Name Tags (optional)

**Checkbooks are not used by every school. Check with your teacher and include the completed checkbooks in your BizPrep envelope, if instructed.*

Your signature at the bottom of this page indicates that your business team is ready for business. Thank you for handling this responsibility!

We look forward to seeing you soon,



Lena Yarian
President, JA of Northern Indiana

Our business has prepared each of the above items:

CEO'S Signature

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Business Cost Sheet

SALARIES

Student Name (First and Last Name)	Account #	Break	Salary	Periods	Total Salary
CEO _____	<u>164</u>	Yellow	\$9.00	X 2 = _____	
CFO _____	<u>165</u>	Red	\$8.50	X 2 = _____	
Doctor 1 _____	<u>166</u>	Green	\$8.00	X 2 = _____	
Doctor 2 _____	<u>167</u>	Red	\$8.00	X 2 = _____	
Mental Health Professional _____	<u>168</u>	Red	\$8.00	X 2 = _____	
Nurse 1 _____	<u>169</u>	Yellow	\$8.00	X 2 = _____	
Nurse 2 _____	<u>170</u>	Red	\$8.00	X 2 = _____	
Patient Registrar 1 _____	<u>171</u>	Green	\$8.00	X 2 = _____	
Patient Registrar 2 _____	<u>172</u>	Yellow	\$8.00	X 2 = _____	
Pharmacist 1 _____	<u>173</u>	Red	\$8.00	X 2 = _____	
Pharmacist 2 _____	<u>174</u>	Green	\$8.00	X 2 = _____	

NOTE: IF using checkbooks, the above assigned account number **MUST** be the same account number written on the front of the citizen checkbook.

Section A: Total Salaries \$ _____

OPERATING COSTS

Commercial Leasing	(\$4 to Realty Office)	\$4.00
Philanthropy	(\$2 to Community Foundation)	\$2.00
Professional Services	(\$8 to Professional Office)	\$8.00
	- Insurance, Accounting Services	
Radio Advertising	(\$4 to City Hall)	\$4.00
RV	(\$6 to RV Manufacturing)	\$6.00
Supplies	(\$7 to Supply Center)	\$7.00
	- First Supply Order \$5, Supply Reorders up to \$2	
Taxes	(\$5 to City Hall)	\$5.00
	- Personnel Taxes, Property Taxes	
Utilities	(\$5 to Utility Company)	\$5.00

Section B: Total Operating Costs \$ _____

TOTAL BUSINESS COSTS:
(Salaries plus Operating Costs)

\$ A + B

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Loan Application

BUSINESS INFORMATION

Business name: _____

Do you provide a good or a service? _____

Use the information on the **Business Cost Sheet** to complete this application.

EMPLOYEE INFORMATION

Number of employees: _____

Total of All Salaries: \$ _____ Line 1

Transfer from Business Cost Sheet: Section A

OPERATING COSTS INFORMATION

Total Operating Costs: \$ _____ Line 2

Transfer from Business Cost Sheet: Section B

TOTAL BUSINESS COSTS

Total Business Costs: \$ _____ Line 3
Line 1 + Line 2

TOTAL INTEREST AMOUNT
 (Multiply 5% times the **Total Business Costs**)

\$ _____ Line 4
Line 3 x .05

TOTAL AMOUNT DUE
 (Total Business Cost + Total Interest Amount)

\$ _____ Line 5
Line 3 + Line 4

As a representative of the above named business, I agree to repay the Total Amount Due, which includes both the loan amount requested plus interest. I certify that the above information is correct to the best of my knowledge.

 (CEO's Signature)

TO BE SIGNED BY BANK CEO AT JA BIZTOWN

Circle One: Approved Denied _____
(Bank CEO's Signature)

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Philanthropy Pledge

Good citizens are people who accept their share of responsibility for making their community a better place. Citizens can help by donating their time (volunteering), talent (skills), and treasure (money) to charitable organizations.

JA BizTown citizens have the opportunity to give back as individuals and as a business group to a worthy JA BizTown non-profit organization. On the day of the visit, the Community Foundation Development Director will collect this pledge sheet and invoice your business for \$2.00 in financial support.

PHILANTHROPY PLEDGE

(Business Name)

***My employees are aware of the mission of
non-profit organizations and their role in the community.
Our business pledges \$2.00 to support a non-profit organization.***

CEO's Signature: _____

Employees' Signatures: _____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Healthcare BizPrep

Business Overview

Offers citizens healthcare exams and promotes a healthy lifestyle through health and nutrition education.

<p style="text-align: center;">CEO</p> <ol style="list-style-type: none"> 1. Submits Loan Application to bank. 2. Oversees business operations and makes business decisions. 3. Opens Utility account. 4. Distributes business supplies. 5. Prepares and sends Healthcare invoices. 6. Signs Insurance Policy and Lease Agreement. 7. Completes the Business Improvement Plan. 8. Prepares and gives speech at the Opening Town Meeting, if time permits. 	<p style="text-align: center;">CFO</p> <ol style="list-style-type: none"> 1. Places supply order. 2. Submits online request for business loan. 3. Inputs employee payroll information. 4. Processes business payroll. 5. Prepares direct deposit enrollment paperwork. 6. Completes Loan Promissory Note. 7. Makes business expense payments. 8. Submits business deposits. 9. Makes business loan payments and tracks loan payoff progress.
<p style="text-align: center;">DOCTOR</p> <ol style="list-style-type: none"> 1. Becomes familiar with the provided tools for the job. 2. Conducts citizen healthcare exams. 3. Diagnoses patient symptoms and prescribes treatment options. 4. If no pharmacist, educates patients on responsible handling of prescription drugs. 5. Completes medical charting. 	<p style="text-align: center;">MENTAL HEALTH PROFESSIONAL</p> <ol style="list-style-type: none"> 1. Distributes supplies received from the Supply Center. 2. Writes a public service announcement about mental health wellness. 3. Promotes healthy mental health by conducting a mindfulness activity with citizens.
<p style="text-align: center;">PATIENT REGISTRAR</p> <ol style="list-style-type: none"> 1. Distributes healthcare vouchers. 2. Registers citizens for healthcare exam and tracks participation by business. 3. Delivers incentive checks to businesses when award criteria has been met. 	<p style="text-align: center;">PHARMACIST</p> <ol style="list-style-type: none"> 1. Writes public service announcements (PSAs) about responsible prescription drug topics. 2. Prepares doctor's prescription orders for patients. 3. Educates citizens on safe handling of prescription drugs.
<p style="text-align: center;">NURSE</p> <ol style="list-style-type: none"> 1. Writes public service announcements (PSAs) about provided healthcare topics. 2. Becomes familiar with health assessment tools. 3. Assists Doctor by taking patient health vitals. 4. Conducts wellness exams. 	