

# Healthcare Center 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 onsite 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

\_\_\_\_ Newspaper Ad

\_\_\_\_ 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

# Healthcare Center BizPrep

## Business Cost Sheet

### SALARIES

Student Name (First and Last Name)	Account #	Break	Salary	Periods	Total Salary
CEO _____	<u>157</u>	Yellow	\$9.00	X 2 = _____	
CFO _____	<u>158</u>	Red	\$8.50	X 2 = _____	
Dietician 1 _____	<u>159</u>	Yellow	\$8.00	X 2 = _____	
EVS Technician 1 _____	<u>160</u>	Green	\$8.00	X 2 = _____	
EVS Technician 2 _____	<u>161</u>	Yellow	\$8.00	X 2 = _____	
Mental Health Professional _____	<u>162</u>	Yellow	\$8.00	X 2 = _____	
Patient Registrar 1 _____	<u>163</u>	Red	\$8.00	X 2 = _____	
Patient Registrar 2 _____	<u>164</u>	Green	\$8.00	X 2 = _____	
Registered Nurse 1 _____	<u>165</u>	Green	\$8.00	X 2 = _____	
Registered Nurse 2 _____	<u>167</u>	Red	\$8.00	X 2 = _____	

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

**Section A: Total of All Salaries \$** \_\_\_\_\_

### OPERATING COSTS

Advertising	(\$8 to Professional Office)	\$8.00
Attorney Services	(\$2 to City Hall)	\$2.00
Auto Lease	(\$8 to Auto Dealership)	\$8.00
CPA Services	(\$2 to Professional Office)	\$2.00
Equipment	(\$3 Aerospace Manufacturing)	\$3.00
Generator	(\$3 to Manufacturing & Engineering)	\$3.00
Insurance	(\$2 to Professional Office)	\$2.00
Logistics	(\$2 to Logistics Manufacturing)	\$2.00
Philanthropy	(\$2 to Utility Company)	\$2.00
Rent	(\$3 to Professional Office)	\$3.00
Supplies	(\$5 to Supply Center)	\$5.00
Taxes	(\$5 to City Hall) - <i>Personnel Taxes, Property Taxes</i>	\$5.00
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 CREDIT UNION CEO AT JA BIZTOWN

Circle One:    Approved    Denied

\_\_\_\_\_

(Credit Union CEO's Signature)

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## Newspaper Advertisement

Your business needs to create a business advertisement for the *JA BizTown* newspaper. On the day of the visit, the Ad Executive will collect this advertisement from your business. The newspaper editor may need to edit your ad to fit into the newspaper.

Using no more than **10-15 words**, write a descriptive advertisement for your business. Be creative!

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**Note:** You may not know what products/services you are providing until you arrive at *JA BizTown*. Take this opportunity to advertise the quality characteristics of your business. Let people know what a great staff/business you will be running so they know why they should visit your business.

**NEWSPAPER EDITOR:**

Type this advertisement on  
Layout Page 2.

\_\_\_\_\_ Completed

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## Radio Advertisement

Create a 30-second radio commercial for your business. On the day of the visit, the Ad Executive will collect this advertisement from your business so that it can be read on air by the DJ.

Time: 30 seconds (approximately 110 words)

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**Note:** You may not know what products/services you are providing until you arrive at *JA BizTown*. Take this opportunity to advertise the quality characteristics of your business. Let people know what a great staff/business you will be running so they know why they should visit your business.

**BROADCAST DJ:**

\_\_\_\_\_ Read On Air

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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 Non-Profit 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: \_\_\_\_\_

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\_\_\_\_\_

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# Healthcare Center BizPrep

## Business Overview



Indiana University Health

Offers citizens Wellness Exams to educate patients about their health. The clinic also performs healthy eating education, offers mental health resources, promotes disease control and shares public service announcements.

<p style="text-align: center;"><b>CEO</b></p> <ol style="list-style-type: none"> <li>1. Submits loan application.</li> <li>2. Signs all business payroll checks.</li> <li>3. Oversees business operations and makes business decisions.</li> <li>4. Prepares and sends health care invoices.</li> <li>5. Signs Insurance Policy and Rental Agreement.</li> <li>6. Completes the Business Improvement Plan.</li> <li>7. Prepares and gives speech at the Opening Town Meeting, if time permits.</li> </ol>	<p style="text-align: center;"><b>CFO</b></p> <ol style="list-style-type: none"> <li>1. Obtains bank loan.</li> <li>2. Inputs employee payroll information.</li> <li>3. Prints and distributes employee payroll checks.</li> <li>4. Makes business expense payments.</li> <li>5. Makes business deposits and tracks loan payoff progress.</li> </ol>
<p style="text-align: center;"><b>DIETICIAN</b></p> <ol style="list-style-type: none"> <li>1. Distributes supplies received from the Supply Center.</li> <li>2. Conducts nutrition survey.</li> <li>3. Promotes healthy eating by conducting nutrition education activity with citizens.</li> </ol>	<p style="text-align: center;"><b>EVS TECHNICIAN</b></p> <ol style="list-style-type: none"> <li>1. Ensures area is properly cleaned after every Wellness Exam.</li> <li>2. Writes a public service announcement promoting hand washing and decreasing communicable disease transfer.</li> <li>3. Surveys citizens on proper hand hygiene and works to educate good disease control tactics throughout the town.</li> </ol>
<p style="text-align: center;"><b>MENTAL HEALTH PROFESSIONAL</b></p> <ol style="list-style-type: none"> <li>1. Distributes supplies received from the Supply Center.</li> <li>2. Writes a public service announcement about mental health wellness.</li> <li>3. Promotes healthy mental health by conducting a mindfulness activity with citizens.</li> </ol>	<p style="text-align: center;"><b>PATIENT REGISTRAR</b></p> <ol style="list-style-type: none"> <li>1. Distributes health care vouchers.</li> <li>2. Informs businesses of financial benefits that result from healthy employees.</li> <li>3. Responsible for checking in citizens for the wellness exam.</li> <li>4. Delivers Healthcare Subsidy payment to businesses when 75% of their employees have completed wellness exams.</li> </ol>
<p style="text-align: center;"><b>REGISTERED NURSE</b></p> <ol style="list-style-type: none"> <li>1. Writes public service announcements (PSAs) about provided health care topics.</li> <li>2. Conducts Wellness Exams on <i>JA BizTown</i> citizens.</li> <li>3. Prepares and gives speech at the Closing Town Meeting, if time permits.</li> </ol>	