

2024.01.22~05.16

202311848 김민지

SFSU 2024-1



SAN FRANCISCO
STATE UNIVERSITY

San Francisco State University

어학연수

2024.01.22~05.16



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가게 된 계기

간호학과 입학 후, 미국 간호사에 대한 관심



가게 된 계기

간호학과 입학 후, 미국 간호사에 대한 관심

2024-1학년도 SFSU San Fransisco State University 어학연수 프로그램

작성일 : 2023.10.11 | 조회수 : 792

학생들의 어학능력과 견문을 넓힐 수 있도록 2024학년도 1학기 미국 자매대학 San Francisco State Univ.(SFSU)의 어학연수프로그램에 참여할 학생들을 모집합니다.

- 아래 -

1. 연수대학 : 미국 San Francisco State University

2. 연수종류 : 영어실력 향상을 목적으로 학점을 취득하는 어학연수 프로그램 (English Academic Preparation-EAP)

3. 연수기간

- 한학기: 2024년 1월 ~ 2024년 5월

- 현지 대학(기관)에 의해 프로그램 일정 변경될 수 있음

준비과정

비자, 기숙사(하우징), 학생증 신청 등



Apply for On-Campus Housing

[Why Live on Campus](#)

[Guaranteed Housing](#)

[Reduced-Rate Student Housing Program](#)

Steps to Apply for Housing

- 1 | [Explore](#)
- 2 | [Apply](#)
- 3 | [Receive](#)
- 4 | [Confirm](#)

Additional Resources

- [Housing FAQs](#)
- [Renters Insurance](#)

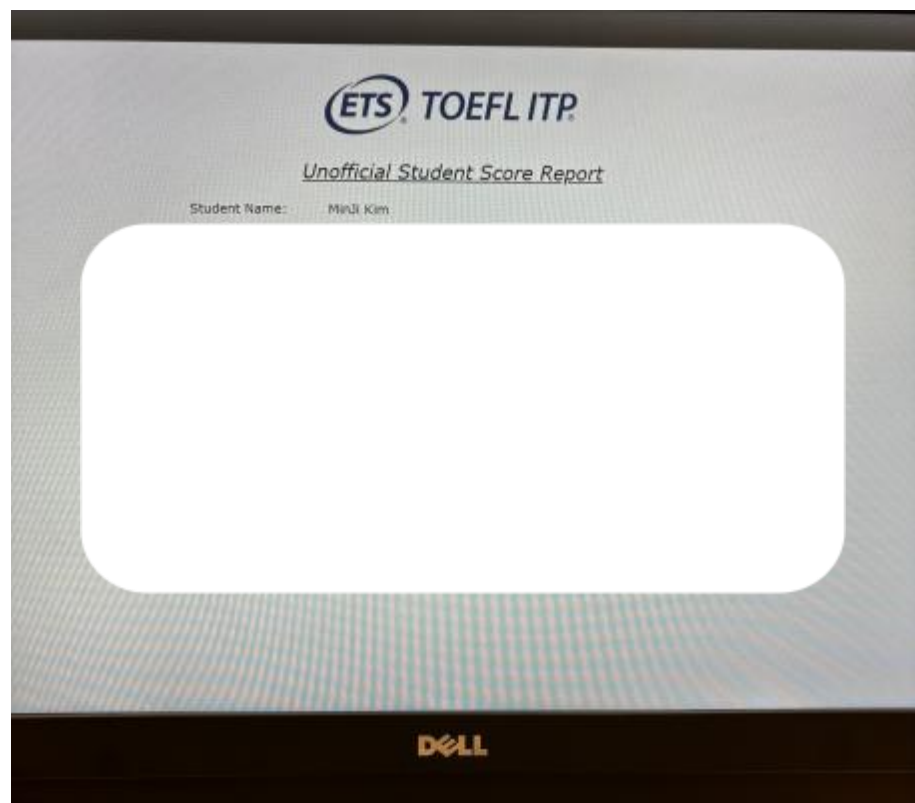


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학교수업

주 4회, 09:00~13:50 or 15:50
Reading, Writing, Speaking, Grammar



9:00 am - 10:50 am	Reading and Writing - Trang (HSS 304)	Reading and Writing - Trang (HSS 304)	Reading and Writing - Trang (HSS 304)	Reading and Writing - Trang (HSS 304)
LUNCH (1 hour)				

12:00 pm - 1:50 pm	Oral Communication: (with 10 min break)	Oral Communication: (with 10 min break)	Oral Communication: (with 10 min break)	Oral Communication: (with 10 min break)
BREAK (10 minutes)				

2:00 pm - 3:50 pm (with 10 min break)	Grammar - Greg (BH 37)	Grammar - Greg (BH 37)
---------------------------------------	------------------------	------------------------

HSS = Health and Social Sciences **19** on the map [here](#).
BH = Burk Hall **H6** on the map [here](#).

샌프란시스코 주립 대학교

San Francisco State University



학교시설

학생 건강 서비스(Student Health Service)





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미국에서의 경험들

1. 미국 간호사에 대한 인식 및 대우



미국에서의 경험들

2.HPV 무료접종



ID Card



FLIP CARD

GeoBlue

SAN FRANCISCO STATE UNIV-ALI

Minji Kim
QHS503152865

Group No. 99991760	In Network / Out of Network
BIN 610020	Copay \$10/\$0
Cover	Out of Pocket Max \$250/\$250
	Out of Pocket Max \$5,000/\$5,000



CVS pharmacy Immunization Type / Vaccine Name: HPV (9-valent)

Last Name: KM First Name: MINJI Date of Birth: 03/15/2004

CONSENT FOR SERVICES: I have received and read (or had read to me) the Patient Fact Sheets and/or Vaccine Information Statements regarding the vaccine. I understand the benefits and risks of vaccination. I voluntarily assume full responsibility for any reactions or consequences that may result. I understand that I should remain in the vaccine administration area for 15 minutes, or longer if directed, after the vaccination to be monitored for potential adverse reactions. In the event of side effects, I understand I should call the pharmacy, my doctor, or 911. I certify that the information provided regarding eligibility for the vaccine is accurate and request that the vaccine be given to me or to the person previously named for whom I am authorized to make this request. State of Georgia only. I verify a pharmacist asked for my health history and whether I have had a physical exam within the past year. Health care providers did not identify condition(s) that would mean I should not receive vaccine(s).

AUTHORIZATION TO REQUEST PAYMENT: I authorize CVS Pharmacy (a CVS®) to release medical information to Medicare, Medicaid or any other third party payer as needed and to request payment of authorized benefits to be made on my behalf to CVS. I certify that the information provided about my Medicare, Medicaid or other coverage is correct.

ACCEPTANCE OF FINANCIAL RESPONSIBILITY: Notwithstanding anything previously set forth, I agree that I am responsible for and will promptly pay on demand any and all obligations to CVS Pharmacy including all self-pay balances as well as those charges for services not covered or disallowed by my insurance carrier (for non-COVID-19 vaccines).

DISCLOSURE OF RECORDS: I understand that CVS® may be required to or may voluntarily disclose my health information with respect to this vaccine to my healthcare provider, my insurance plan, health systems and hospitals, and/or state or federal registries. I understand that CVS will use and disclose my health information as set forth in the CVS Notice of Privacy Practices (copy is available in-store, online or by requesting a paper copy from the pharmacy). State of California only. I agree to have the California Immunization Registry (CAIR) share my immunization data with health care providers, agencies or schools. State of FL only. Students 18-23 may opt out of the immunization registry by notifying pharmacy prior to administration.

Date: _____

Signature of patient to receive vaccine or person authorized to make the request (parent/guardian) _____

Vaccine Administration Information:

Administration Date: 03/01/2024	Vaccine: GARDASIL 9 SYRINJES	Manufacturer: MERCK SHARP & D
Lot #: 2032274	Exp. Date: 01/19/2026	Route: IM Site: Left Deltoid
Volume (ml): 0.5	VIS Version Date: 08/05/2021	Date VIS Given to Pt: 02/01/2024

Verifying Pharmacist: Cheng, Michael
 Cheng, Michael Pharmacist
 Administering Immunizer Name & Title: _____

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미국에서의 경험들

2.HPV 무료접종

Vaccine Administration Information:

Administration Date	Vaccine GARDASIL 9 SYRINGE		
	Exp. Date	Route IM	Site Left Deltoid
Volume (ml) 0.5	VIS Version Date	Date VIS Given to Pt	
Verifying Pharmacist			
	Pharmacist		
Administering Immunizer Name & Title			

미국에서의 경험들

3.기숙사 생활

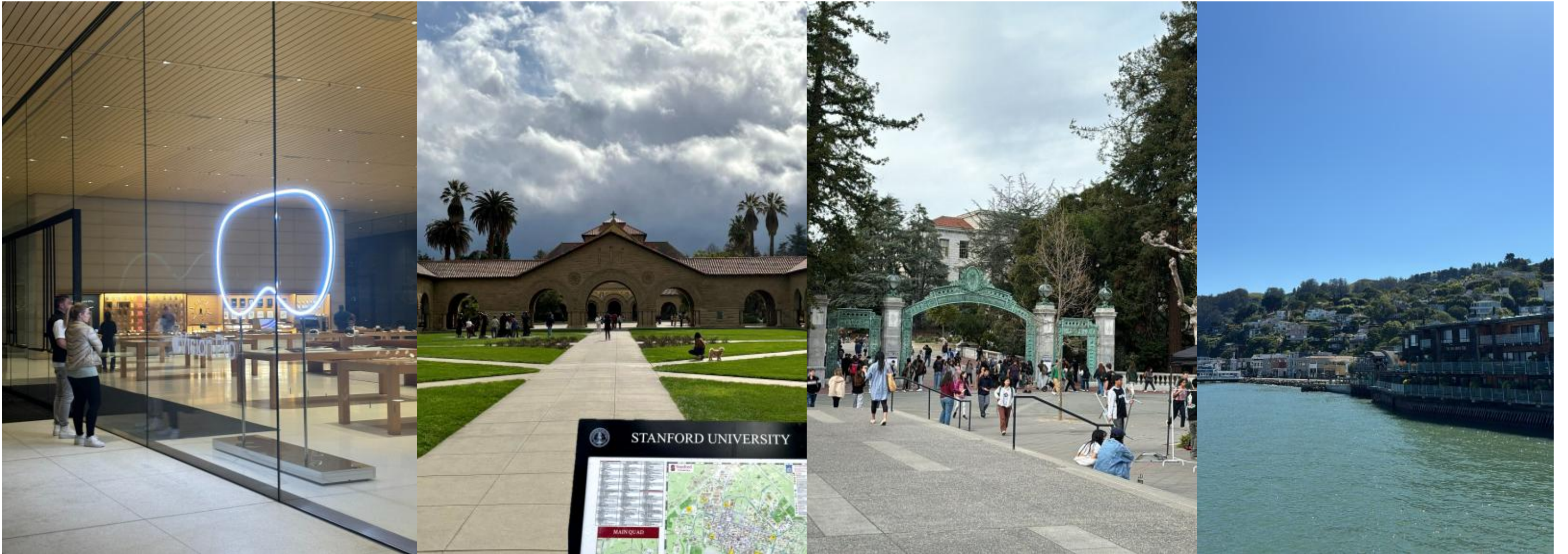


Game 1	1	2	3	4	5	6	7	8	9	10	Tot.
KRISTY	3	5	3	5	7	9	4	4	3	3	73
ALEX	9	7	24	33	40	49	57	63	65	73	79
JUNG	7	8	6	5	1	9	6	2	8	4	87
MINJI	8	8	3	5	4	7	7	7	8	3	100
MAGGIE	1	7	7	3	6	3	4	5	8	1	66

Player MAGGIE m.p.h. 12.77

미국에서의 경험들

4. 샌프란시스코 근교



느낀점

1.영어 공부, 문화적 차이



Do I know you?

2.미국 간호사 동기부여



3.감사함



4.자아 효능감



출처

<https://health.sfsu.edu/>

<https://rosemicalbuildings.com/gallery/interior-medical-building-photos/>

<https://www.indiegogo.com/projects/livetrans-the-live-human-translation-app#/>

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<https://www.pymnts.com/news/retail/2024/target-bolsters-store-experiences-through-strategic-collaborations/>

<https://blog.contactpigeon.com/trader-joes-marketing-strategy/>

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https://en.wikipedia.org/wiki/Muni_Metro

https://www.apartmenthomeliving.com/san-francisco-ca/stonestown/apartments-for-rent/low_income

<https://www.yelp.com/biz/student-health-services-san-francisco><https://www.yelp.com/biz/student-health-services-san-francisco>



Thank You!

경청해주셔서 감사합니다.