



**Peru State College
Southeast Nebraska Area Health Education Center
Rural Health Career Fair**

Career Fair Location	Start Date	Registration Deadline
Peru State College Peru, NE	March 23, 2010	March 9, 2010

Peru College and Southeast Nebraska Area Health Education Center (SE-AHEC) are offering a rural health career fair for high school students in grades 9 -12. This career fair will provide an introduction to a wide array of career choices in the health field. Students will interact with various health professionals and learn about career options.

Enclosed is the application packet for the Rural Health Career Fair. A complete application includes:

- Student Information
- Releases, Agreements, and Medical Information

All application materials are due March 9, 2010

Please Mail or Fax Completed Application to:

Rural Health Career Fair - Peru
Southeast Nebraska Area Health Education Center
5109 West Scott Street, # 408
Beatrice, NE 68310
(402) 228-9093, Fax (402) 228-9095

Peru State College
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STUDENT INFORMATION

Date: _____ **Date of Birth:** _____

Name: _____
Last Name First Name Middle Initial

Address: _____
Street City County Zip Code

Gender: Male Female

Email Address (To receive career fair updates): _____

Racial/Ethnic Heritage (Check One):

- | | |
|---|---|
| <input type="checkbox"/> Caucasian | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Native American/Alaska Native |
| <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Other |
| <input type="checkbox"/> More than one race | |
| <input type="checkbox"/> Hispanic/Latino & Amer. Indian/Alaska Native | <input type="checkbox"/> Hispanic/Latino & Black/African American |
| <input type="checkbox"/> Hispanic/Latino & Asian | <input type="checkbox"/> Hispanic/Latino & Native Hawaiian |
| <input type="checkbox"/> Hispanic/Latino & White | <input type="checkbox"/> Hispanic/Latino & Unknown |

Parent(s) Name: _____

Home Phone: _____ **Work Phone:** _____ **Cell Phone:** _____

Name of High School: _____

Grade in School entering spring of 2010: 9th 10th 11th 12th

School Address: _____
Street City Zip Code

Counselor's Name: _____

Phone: _____ **Email:** _____

Check the box if you're interested in participating in a job shadowing program.

WAIVER RELEASE AND COVENANT NOT TO SUE - Parental Consent

I, for and in consideration of my minor child participating in the Rural Health Career Fair conducted by Peru State College and Southeast Nebraska AHEC and their affiliates, do hereby waive, release, forever discharge and forever covenant not to sue Peru State College and Southeast Nebraska AHEC or their affiliates or any directors, employees, or agents, or Board of Trustees or any employees, based upon any claims, rights, liabilities or whether on or off the property of said Peru State College and Southeast Nebraska AHEC, or affiliates whether resulting from my own negligence, the negligence of my own child or that of another child, that of any party released herein, or that of a third party.

I give my child permission to apply for participation in the Rural Health Career Fair - Peru.

Signature of Parent/Guardian: _____

PHOTOGRAPHY/VIDEO/MEDIA RELEASE

I give permission to Peru State College and Southeast Nebraska AHEC to use my child's picture for other health career promotional materials.

Signature of Parent/Guardian: _____ Date: _____

MEDICAL INFORMATION

In the event that your child should need medical attention while attending the Rural Health Career Fair, we will attempt to contact you first. However, if you cannot be reached, we would appreciate your permission to treat your child at the nearest Emergency Care Facility.

Signature of Parent/Guardian: _____ Date: _____

Father's Name: _____

Daytime Phone: _____ Cell Phone: _____

Mother's Name: _____

Daytime Phone: _____ Cell Phone: _____

Family Physician: _____

Physician Phone: _____

Is student taking any medication? **Yes** __ **No** __ **If yes, please list:**

Does the student have any physical disabilities or restrictions (such as wheel chair use, or meal restrictions) that would need consideration when planning the Rural Health Career Fair? **Yes** __ **No** __.

If yes, please indicate below: _____

