

**Classroom in the Hospital  
Berwick Hospital Center  
Scheduled for January 5, 2012**

**Student Registration Form**

*Please complete the following information and fax this form to the Foundation of the Columbia Montour Chamber of Commerce **by Friday, December 16, 2011. Our fax # is 784-2661. Thank you!!***

Student Name: \_\_\_\_\_

High School: \_\_\_\_\_

Grade: \_\_\_\_\_

What hospital careers are you most interested in learning about?

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your post-high school goals?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What have you done so far to help you reach these goals? (You may include any high school courses taken, volunteering experiences, work experiences, job shadowing, etc.)

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Why do you want to participate in Classroom in the Hospital?

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What do you wish to learn from your Classroom in the Hospital experience?

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