

COLLEGE UNDERGRADUATE CAREER OBSERVATION APPLICATION

Mayo Clinic– HR Workforce Development, Career Awareness

STUDENT APPLICANT

Name			
Last	First	Middle	
Address		City	State Zip
Phone Number		Email Address	
Emergency Contact Name		Contact's Phone Number	
School Name		City, State	
Major	Anticipated Graduation Date	Date of Birth (mm/dd/yy)	

Student confirmation: I completed Career Awareness online compliance training on (mm/dd/yy):

Mayo Foundation is an affirmative action and equal opportunity educator and employer. To assist in Mayo's affirmative action program, applicants have the option to indicate their self-description by checking the appropriate boxes.

Female Male Asian Black Hispanic American Indian or Alaskan Native
Other Pacific Islander White/Non-Hispanic

HIGH SCHOOL AND COLLEGE UNDERGRADUATE OBSERVATIONS

I confirm by signing this document that all above information is true and correct; I am confirming that I have read and agreed to the terms and conditions as mentioned on the website. By signing this form, the student confirms they have reviewed Compliance Training.

College Undergraduate Observation: I acknowledge the student *will not* have access to viewing surgeries with moderate sedation or above; this is not for school credit, class requirement or graduation. Nursing Administration does not currently support any observations.

STUDENT SIGNATURE:

STAFF HOST	First name	Last name
Signature	Email	Work phone
STAFF HOST'S SUPERVISOR	First name	Last name
Signature	Email	Work phone
OBSERVATION LOCATION	Building	Floor/Room
Mayo Clinic Site	Career title and area	
Observation Date(s):		

Please contact careerawareness@mayo.edu with any questions prior to signing.