

# HEALTHCARE THEATRE:

Transforming *Interprofessional* Education

## HLTH/THEA 215-010 – Fall 2022 | Student Information Sheet

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

Cell Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

ID#: \_\_\_\_\_

Hometown: \_\_\_\_\_

Freshman

Sophomore

Junior

Senior

CEND

Anticipated Graduation Term \_\_\_\_\_

Major(s): \_\_\_\_\_ Minors(s): \_\_\_\_\_

What language besides English do you speak? \_\_\_\_\_

What other obligations besides classes will you have during the upcoming fall semester? Jobs, sports, clubs, etc. **Please list all:**

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Any experience in the Health Care field?

Yes

No

If so, where and when?

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Any experience in the theatre?

Yes

No

If so, where and when?

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Have you taken any courses related to the Health Care Industry?

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Have you taken any courses related to theatre?

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How did you hear about us?

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