

4) Do you need transportation to and from the program? _____

5) Imagine you are on a game show and the host asks you “tell us a little something about yourself”. What would you say? (Examples include what hobbies you enjoy doing and/or what personal strengths you have.)

Medical Information (All information will be kept strictly confidential)

6) Chronic Illness (asthma, seizures, diabetes, etc...)

7) Prescription Medication

8) Allergies

9) Dietary Restrictions

10) Any other health or social related issue(s) that could affect ability to participate (Ex. Restricted mobility). This information is used to help with program planning and does not affect applicant selection.

Signature of Student _____ Date _____

<p>Please send to: Amy Poupart</p> <p>Great Lakes Inter-Tribal Council Native American Research Center for Health (NARCH) PO Box 9 Lac du Flambeau, WI 54538</p> <p>Or send via email to: apoupart@glitc.org</p> <p>Phone: 800- 472-7207 ext. 177</p> <p>Fax: 715-588-3607</p>	<p>**Student should be an entering sophomore or higher and maintain a 2.5 GPA or higher. We will make exceptions to those guidelines, as space allows. Applications are accepted on a first come, first serve basis due to the limited number of slots for students.</p> <p>Application review begins <u>June 1st, 2019.</u> Notification of selection begins <u>June 15th.</u></p>
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