

**2009 NORTH CAROLINA AREA HEALTH PROFESSIONS
RECRUITMENT SEMINAR
June 26-27, 2009**

Response Questionnaire

Directions: Please return this form to the address indicated below no later than **May 29, 2009** to indicate your plans.

**Georgia B. Njagu – Business Services Coordinator
University of North Carolina at Chapel Hill
School of Medicine
322 MacNider Building, CB# 7530
Chapel Hill, North Carolina 27599-7530
[919] 966-7673
Fax: [919] 966-7734**

REGISTRATION FEE

\$150.00

**Please make checks payable to
University of North Carolina at Chapel Hill School of Medicine
And return with this registration form**

Representative(s) attending: (Please give name, title, address & telephone)

Name: _____

Name: _____

Title: _____

Title: _____

Degree: _____

Degree: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

Email: _____

Email: _____

Hotel Accommodation

Reservations made at _____

Circle Date(s)

Night(s) of: June 26th only

 June 27th only

 June 26th & 27th

Participation:

Indicate your general availability to be a panelist (Yes/No) below.

_____ Friday, June 26, 2009 - 12:00 p.m. – 6:00 p.m.
_____ Saturday, June 27, 2009 - 8:00 a.m. – 12:00 p.m.

YES NO Available for any assignments?