



UNC

NEUROLOGY & NEUROSURGERY
N.C. NEUROSCIENCES HOSPITAL

**UNC Medical Center Neurology & Neurosurgery
Patient and Family Advisory Council**

MEMBERSHIP APPLICATION

Please return to:

Caroline Kegerreis

caroline_kegerreis@med.unc.edu

UNC Medical Center
170 Manning Drive, Campus Box #7060
Chapel Hill, NC 27599
Phone: (540) 400-2648
FAX: (919) 843-6520

Full Name:		Email:	
Street Address:		Phone:	
City, State, Zip Code:			
Why would you like to become a member of the Patient and Family Advisory Council?			
What other ways have you volunteered in your community?			



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Can you tell us about your experience at UNC?

How can we improve the care we provide to you and/or your family member?

Check if you are:

- Current patient
- Former patient
- Caretaker of a current or former patient
- Had a family member that passed away within the last 6months/year?
- Other _____

What day and time of the week works best for you to attend Council meetings?

Will you be able to attend meetings every three months?



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What is the best time to call you about joining this Council?

Any questions?