

## Health Service Organization (HSO) Application for Membership

The HSO is a student organization open to any USI student who is majoring, minoring or interested in HEALTH SERVICES. The goals of the organization are 1) to promote health services as a major at the university, 2) help students to meet people in the health care field and 3) promote health improvement of the community through volunteer service projects. If you would be interested in being a member of the HSO, please answer the following questions and return the form to your instructor.

1. Are you a Health Services major? Yes \_\_\_\_\_ No \_\_\_\_\_  
minor? Yes \_\_\_\_\_ No \_\_\_\_\_  
interested in H.S.? Yes \_\_\_\_\_ No \_\_\_\_\_
2. If you are also a major in another field, what is it? \_\_\_\_\_
3. How did you learn about the Health Services program? \_\_\_\_\_  
\_\_\_\_\_
4. Why did you chose this major? \_\_\_\_\_  
\_\_\_\_\_
5. What are your career goals? \_\_\_\_\_  
\_\_\_\_\_
6. How many HP (Health Professions) courses have you taken? \_\_\_\_\_
7. What year are you in school? \_\_\_\_\_
8. Would you be interested in serving on a committee? Yes \_\_\_ No \_\_\_
9. Would you like to become an officer of the HSO? Yes \_\_\_ No \_\_\_
10. If Yes, which office?  
President \_\_\_\_\_ Vice President \_\_\_\_\_ Secretary \_\_\_\_\_ Treasurer \_\_\_\_\_
11. What would you like to see such an organization be involved with as far as projects, service work or educational programs? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. If you would like to become a member, please give us your name, phone number and local address. A current member of the HSO will contact you with additional information about membership dues and meeting times.  
  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
E-Mail Address \_\_\_\_\_

This document was created with Win2PDF available at <http://www.daneprairie.com>.  
The unregistered version of Win2PDF is for evaluation or non-commercial use only.