

THURSDAY, MARCH 12th, 2020 @ Bishop James Mahoney High School

8:30 a.m. – 3:00 p.m.

HEALTH LINK is a one-day event exposing students in grades 10, 11 and 12 to the increasingly varied careers in the health care sector through hands-on activities and short presentations (should this event fill-up preference will be given to grade 10 students).

- *Students attend the entire day and must find transportation to and from the event***
- *Students are required to bring their lunch and refreshments***

All students will attend a discussion with a panel of physicians — represented by a wide range of medical experts from family physicians to specialists as well as medical students and medical residents. These professionals will share their educational journey and answer student questions.

*Students will also choose **one** session in the morning and **one** session in the afternoon:*

Morning Sessions:

- **Nursing** – which may include: Continuing Care Assistant, Licensed Practical Nurse and Registered Nurse
- **Therapies** – which may include: Occupational, Physical and Recreational Therapies along with Speech-Language Pathology

Afternoon Sessions:

- **Medical Diagnostics** - which may include: X-ray Technician, Radiation Therapy, Lab Technician and more
- **Social Work, Mental Health and Addictions** – which may include: Social Worker, Addictions Counsellor, Psychologist and more

8:30 am – 8:55 am	Registration – Bishop James Mahoney High School – 231 Primrose Drive
9:00 am – 10:00 am	Physicians Panel
10:00 am – 12:15 pm	Morning Session: Students Select ONE Session: <ul style="list-style-type: none">• Nursing• Therapies
12:15 pm – 12:45 pm	Lunch (Students bring their own)
12:45 pm – 2:30 pm	Afternoon Session: Students Select ONE Session: <ul style="list-style-type: none">• Medical Diagnostics/Lab and Imaging• Social Work, Mental Health and Addictions
2:30 pm – 3:00 pm	Closing Comments and Door Prizes



STUDENT APPLICATION FORM

Name: _____ Grade: _____

School/Band: _____

Email: _____ Cell Phone#: _____

Parent/Guardian Email: _____

Emergency Contact: _____ Cell Phone #: _____

Voluntary Self Declaration:

- Person with a Disability
 Visible Minority
 Treaty/Registered (Status) Indian
 Metis Person
 Non-Status Indian
 Inuit Person

*PLEASE SELECT **ONE** SESSION THAT YOU WOULD LIKE TO ATTEND IN THE **MORNING**:*

Nursing – Continuing Care Assistant, Licensed Practical Nurse and Registered Nurse
OR

Therapies - Speech-Language Pathology; Occupational, Physical and Recreational Therapies

*PLEASE SELECT **ONE** SESSION THAT YOU WOULD LIKE TO ATTEND IN THE **AFTERNOON**:*

Medical Diagnostics – X-ray Technician, Radiation Therapy, Lab Technician and more
OR

Social Work, Mental Health and Addictions - Social Worker, Addictions, Psychologist and more

*****Dependent on numbers, students may not be placed in their selected sessions*****

Please explain why you would like to attend **Health Link**.

APPLICATION DEADLINE – THURSDAY, FEBRUARY 27TH, 2020
PLEASE GIVE THIS FORM AND THE PARENT CONSENT FORM TO THE DESIGNATED PERSON IN YOUR SCHOOL FOR SUBMISSION BEFORE THE APPLICATION DEADLINE



Consent Form

Student Last Name	Student First name	School	Grade




Parent Support/Consent

I support the involvement in the SIEC Health Link event.

Mother/Guardian Signature

Father/Guardian Signature

Please check either "yes" or "no" in the applicable boxes below. "Yes" means the following information about your child can be shared. "No" means information cannot be shared.

Description	Visual Image
 <p>Media Participation Photographs, interviews and video taken on school property and at SIEC events for television, radio, newspapers, as well as websites and social media accounts operated by media outlets. Media coverage may include your child's name and/or school name.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
 <p>SIEC Publications (Use of Photos and Video) Informational items (eg: brochures, Report to the Partner Groups) and promotional materials that are shared with the general public and can be posted on our websites and social media accounts.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
 <p>SIEC Websites (Use of Photos and Video) Saskatoon Industry Education Council operates websites that promote the activities of our organization. Anyone with the Internet is able to access these pages from anywhere in the world.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Please Note: Photos of large groups, or action photos where individuals cannot be readily identified, may be posted without permission.

Parent/Guardian Consent(If applicable)

Parent/Guardian Signature	Date (MM/DD/YY)
Parent/Guardian Printed Name	