AMARILLO COLLEGE CENTER FOR CONTINUING HEALTHCARE EDUCATION/PANHANDLE AREA HEALTH EDUCATION CENTER (AHEC) REGISTRATION FORM

| EVENT: | Local Outreach to Suicide Survivors (LOSS) | | | | | LOCATION: | | Amarillo College West Campus, Lecture Hall Side A | | | | | | |
|--------------------|--|--------------|--------------|---------------------|----------------|----------------|--------------------|---|----------------|--------------------|-------------------|----------|-------------|------------------|
| DATE: | October 4 and 5, 2019 | | | | | ADDRESS: | | 6222 SW 9th Ave. | | | | | | |
| SPEAKERS: | Dr. Frank Campbell and Lezlie Culver | | | | | | Amarillo, TX 79106 | | | | | | | |
| TIME: | 8:00 am – 4:00 pm | | | | | Id and Rubric: | | 185256 SCWK 2002-1903 | | | | | | |
| NOTI | E: YOU CAN TYPE IN | | | | | | | | | | | e AHEC | , 806-651-3 | <mark>489</mark> |
| *Date | This data e of Birth AND 4 digi | | | intained. We apprec | | | | | | | | is confi | erence* | |
| Last Name | | | First Name | | | M. | | | Gender Age | | | <20 | □ 20-29 | □ 30-39 |
| | | | | | | | | □м | | | | | | |
| | | | | | | | | □ F | | | | 40-49 | □ 50-59 | □ >60 |
| | | | | | | | | | t Reported | | | | | |
| <u>s</u> | Date of Birth Prof. Co | | | of. Credenti | f. Credentials | | Job Title | | | Education Level | | evel | | |
| (must i | (RN, LVN, PA, I | | | /N, PA, NP, CN | NP, CNA, etc.) | | | | (BS, N | <u>IS, MSN, MI</u> | D, PA etc.) | | | |
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| Home Address | | | City | | | (| County | | | State | Zip Primary Phone | | Phone # | |
| | | | | | | | | | | | | | | |
| Employer | | Work Address | | | - | City | | | State | Zip | Work | Phone # | | |
| Linpioyei | | | Work Address | | | | Oity | | | State | Zip | VVOIK | HOHE # | |
| | | | | | | | | | | | | | | |
| E-Mail Address: | ☐ Home ☐ Work | | | | | | | | | | | | | |
| Ethnicity (| Ethnicity (select one) | | | | | Ethnic | | ty | ☐ Non-Hispanic | | | | | |
| | ☐ American Indian/Alaskan Native | | | | | | ☐ Hispanic | | | | | | | |
| | □ White | | | | | | | 1 | | | | | | |
| | □ Asian | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| □ Pacific Islander | | | | | | | | | | | | | | |
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Mail/fax form to:

West Texas A&M University Amarillo Center Fax Number: 806-651-3489

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