

Pre-Health Career Corps Agreement for Adults



Please complete, sign, and return to the PHCC Director as soon as possible.

Expectations

- Attend the event(s) the individual has registered for.
- Arrive on time for the event (virtual or in-person).
- Conduct in a professional manner.
- Be respectful towards others and workshop presenter.

Cancellation/No-Show Policy

AHEC strives to fulfill our promise in finding opportunities to assist and foster the career and professional paths of our participants and professional members through our partners, community groups, and presenters. In return, we expect a strong commitment and expectation from our members.

More so, AHEC has financial accountability to provide a service. When an individual registers for an event (i.e. workshop, volunteer, social, etc.), member must be in attendance.

Registered individuals who fail to attend an event impacts our finances and professional relationships negatively. AHEC loses professional credibility and grant funding may be forfeited due to the lack of commitment of AHEC members.

Effective as of June 28, 2018, PHCC and AHEC Members must cancel within 24 hours before the scheduled event. Failure to follow the student expectations and the no show policy will have the following results (See Next Page):

First Violation: Written and/or Verbal Warning

Second Violation: Placed on 3-Month Probation

- Temporary revoked PHCC membership.
- During the probation period, the individual will have no access to program services, benefits, and opportunities.

Third Violation: Permanent dismissal from AHEC

Should you have any questions or need any additional support, please do not hesitate to contact us!

Checklist – Must be fulfilled before services are provided.

- Read and understood the expectations and consequences above.
- Signed two-page “07 Consent Waiver Release and Indemnity Agreement” Form
- Submitted a copy of my health insurance card.
- Have attended an AHEC Information Session or plan to meet with the PHCC Director (email phcc@hawaii.edu to schedule a time)

By signing below, I acknowledge that I read and understand the expectations of a member in AHEC’s program, including the Cancellation/No-Show Policy and violations.

I understand that I am responsible for reimbursing AHEC for issued textbooks, online codes, travel expenses, etc., and will also forfeit from AHEC’s program benefits should I be dismissed from the program due to non-compliance.

Signature

Date

Name (Printed)