

**ELIGIBILITY FORM TO CHALLENGE**  
**NURS 43, POPULATION BASED HEALTH CARE: CF H<9 DFC: 9GG-CB5 @BI FG9.**  
**.....CLINICAL LABORATORY**

Student's Name \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

KU I.D. number \_\_\_\_\_

The student must show evidence of at least 2000 hours of employment in a public health/community health role in the last five years. The appropriateness of the employment experience will be evaluated on an individual basis. A public health/community health role will be defined as the role of an individual who is responsible for assessment, planning and management of community based aggregates, using aggregate data to influence the health status of a selected population, and collaborating with other health care providers to use resources that facilitate health care aggregates.

<u>Employment Dates</u>	<u>Agency Name and Location</u>	<u>#hrs per week</u>	<u>Position</u>
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**Additionally**

Provide up to three examples of experience with each of the following:

Assessment, planning and management of community based aggregates

<u>Example</u>	<u>Agency</u>	<u>Date</u>
1.		
2.		
3.		

Use of aggregate data to influence the health status of selected population

<u>Example</u>	<u>Agency</u>	<u>Date</u>
1.		
2.		
3.		

Collaboration with other health care providers to use resources that facilitate health care of aggregates.

<u>Example</u>	<u>Agency</u>	<u>Date</u>
1.		
2.		
3.		

Student's Signature \_\_\_\_\_

Date \_\_\_\_\_

Send information for approval and signature to:

Dr. [Name], Ass[ist]ant Dean/W[orking] [Title]  
 University of Kansas School of Nursing  
 3901 Rainbow Blvd  
 Kansas City, KS 66160

Signature of Ass[ist]ant Dean \_\_\_\_\_ Approved \_\_\_\_\_ Not Approved \_\_\_\_\_  
 Date \_\_\_\_\_