2018 HOSA ILC Competitor Evaluation - Round 1

Are you Postsecondary/Collegiate, Middle School Are you in a PLTW Biomedical Science Chapter?	ou Postsecondary/Collegiate, Middle School or Secondary? ou in a PLTW Biomedical Science Chapter?		С	OSS No	∪MS	
Evaluation Items		Extremely —			Very Little	
To what extent do you believe that participation was valuable in your career development?	on in this event	5	4	3	2	1
Please rate the level of professionalism exhibe event staff in conducting this event.	ited by the	5	4	3	2	1
To what extent was your HOSA Chapter Adving preparing for this event?	isor helpful in	5	4	3	2	1
4. To what extent were the guidelines in the HO value in participating in this event?	SA Handbook of	5	4	3	2	1
5. Please indicate your age? 10-13 14-15 16-17 18-19	<u>20-21</u> 22	and over				
6. How many year(s) have you been a HOSA m	ember (counting th	is year)?				
7. How many year(s) have you attended the Inte	ernational Leadersh) 5 and over	nip Confer	ence?			
8. Did your competitive event experience meet y Very Much Mostly	_	Not at all				
eer Goals: Fill in the bubble next to the one		-	-	ts your (career (goal.
Physician (all specialities)		Radiologic Technologist Surgical Tech				
Nursing (LPN, RN, Advanced specialities) Physician Assistant	Speech Pathologist/Audiologist					
Pharmacist or Pharm Tech	Optometrist/Optician					
Dentist (all specialities)	Health Care Administration					
Physical Therapist	Medical Lab Assistant/Technician					
Veterinary Careers	Health Information Technologist					
Forensic Science/Medicine	Public Health Service/Epidemiology					
	Podiatrist					
Athletic Training	Dietician					
Psychology/Psychiatry		٥,				
Dental Hygienist/Assistant	Chiropract					
Occupational Therapist MT/Paramedic	Respiratory Therapy					
	Massage Therapy Other Health Care					
ledical Laboratory Science/Biotechnology	Other Non-Healthcare					
iomedical Engineer	Other Non	-ı ı c alılıca	C			

Please use the back of this evaluation for additional comments.