

# Mission Trip Application

## Applicant Information

Student Name: \_\_\_\_\_ Trimester/CLI Course: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City/State) (Zip)

Cell Number: \_\_\_\_\_ CUKC Email: \_\_\_\_\_

Destination: \_\_\_\_\_ Mission Trip Dates: \_\_\_\_\_

## Eligibility Requirements

- ◇ In good standing with the institution both academically and clinically
- ◇ Current enrollment in CLI 714 or higher clinic course to participate in patient care.
- ◇ Students not enrolled in CLI 714 or above may participate in a mission trip but will do so in an observational/humanitarian way that does not involve providing patient treatment.

## Documents to Provide

- ◇ Letter of intent (1-2 pages explaining why you want to attend and what you will provide/expect to receive from this experience).
- ◇ For students with clinic privileges: Letter of recommendation from assigned clinicians including acknowledgment of appropriate care arrangements for all patient care during the student's absence.
- ◇ For students without clinic privileges: Letter of recommendation from a member of the CUKC faculty or administration.

As a representative of Cleveland University-Kansas City and the chiropractic profession, students agree to adhere to the highest professional standards while participating on mission trips.

## Applicant: Read the Following and Sign Below

I certify that I meet all eligibility requirements and am voluntarily applying for participation in the mission trip program at Cleveland University-Kansas City. I acknowledge that I have read and agree with the University's International Mission Trip Policy. I agree to comply with all established university policies including attendance and specialized training that may be required. I understand that I am personally responsible for all costs incurred during this mission trip. I also understand that by completing and signing this application, I agree to personally accept all liability of any kind including but not limited to medical, personal injury, and/or commercial loss liabilities that may arise as a result of my participation in a mission trip, thus agreeing to hold Cleveland University-Kansas City free of any such liability.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_