



# TRiO STEM Job Shadowing Form

**Instructions:** Please read and complete the following form and then submit it back to [triostem@tamiu.edu](mailto:triostem@tamiu.edu) and/or drop it off at the TAMIU **TRiO STEM office** well in advance.

Name: \_\_\_\_\_ ID: \_\_\_\_\_

Email: \_\_\_\_\_@dusty.tamiu.edu Phone: \_\_\_\_\_

### MAJOR/FIELD STUDY OF INTEREST

Please indicate your **major or field study** of interest (select all that apply):

Biology/Chemistry

Mathematics

Systems Engineering

Public Health/Nursing

Other (not listed above): \_\_\_\_\_

### SEMESTER(S) OF INTEREST

Please indicate **semester(s)** interested in doing job shadowing as well as expected **timeframe**.

Semester [YYYY]: Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Timeframe [ex. 1 month]: \_\_\_\_\_

### PLACES OF INTEREST

Please list your **job shadowing places** of interest, if any, as well as their contact info below:

### STATEMENT OF COMMITMENT

*Job Shadowing is a career growth opportunity and therefore requires serious commitment. By signing below, you acknowledge you have read and agree to this and are committed to participating in job shadowing during the times indicated above and further agreed upon with job shadowing site. Failure to do so will affect other future possibilities for job shadowing.*

\_\_\_\_\_  
Signature (non-print)

\_\_\_\_\_  
Date