Advisory Group Information Sheet

Name JULIE BOREN

Name I prefer to go by JULIE

Tell me about your family/support system: BOYFRIEND

Hospital Experience Y (N) Job: SHOP FOREMAN FT / PT / OC

What do you do for self-care? SLEEP

What are your study habits? I LISTEN TO LECTURE DURING WORK.

What are your goals for this module? A BETTER UNDERSTANDING OF INTERPRETATION & HOW PSYCH MEDS ACTUALLY WORK.

What do I need to know to help you be successful in this module? I WORK 40-50 HOUR WEEKS & CAN SOMETIMES TAKE A MINUTE TO PROCESS INFORMATION & RESPOND.

What past experiences may trigger you, related to our content, that you would like me to be aware of? MENTAL HEALTH ISSUES