## **PRACTICUM APPLICATION**

## DEPARTMENT OF HEALTH AND HUMAN PERFORMANCE

APPLICATION/PROPOSAL FOR:	APHS 391 Applied Health Science Practicum HPED 391 Health & Physical Education Practicum SPMT 391 Sport Management Practicum
HHP Dept. Chair:Jodie L. Haak	Approved Disapproved
Name	<u>I</u> D#
Project Title	
Course	Term
Credit Hours (1-3)	_Project Hours (40/1)
Agency Title	
Address	
Phone	
Agency Email	
Project Dates: Begin	Completion
Final date for completion for <u>ALL</u> project activities	<u>.                                    </u>
Faculty Supervisor Signature	
Project Supervisor Signature(Must not be same person as Faculty Supervisor)	
Value of Practicum:	

<b>Project Objectives:</b>	
<b>Duties/Responsibilities:</b>	
<b>Method of Evaluation:</b>	
Weekly Log or Journal	
Summary/Reflective Paper	
Special Projects	
Portfolio	
On-Site Supervisor Evaluation	
Related Bibliographical Resources:	