

Uejqqn qh Uqekcn Yqtm Wpkxgtukv{" qh Pgxcfc. Ncu Xgicu"

Hkgnf"Rtcevkew o Rgvkvkqp"Hqt o "

Rgvkvkqp"Tgswguv<"Tgswgukpi"vq"eqpvkpwg"hwvwtg"rtcevkew o "cv"ewttgpv"ukvg()

Rtqitc o "

Ug o guvgt"

[gct"

Neuv"Pc og

Hktuv"Pc og"

PUJG"%"

Cfftguu

Uvcvg

\kr"Eqfg"

Rjqpg"Pw o dgt

WPNX"G o ckn Cfftguu"

Lwuvkhkecvkqp<"

Please list your current and future practicum activities:

Current Activities:

Future Activities:

Qvjgt<

DIRECTIONS:

Note: If you need additional space, please attach a separate document

Agency Name

Agency Street Address

State

Zip

Telephone Number

AFI Name

For Field Education Department Use Only

Approve Disapproved

Comments:

Director of Field Education Signature

Date

Practicum I /Work Activities	New Practicum Activities