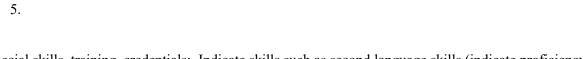
Student Application for Practicum in School Psychology

Name:		Year in Program:		
Email:		Practicum		
		Practicum Year:	/Semester:	
Practicum Level:				
Beginning Practicum (PSQF72	237)			
Advanced Practicum (PSQF73				
Goal areas for practicum: List are	as you would lik	e to develop through	gh practicum in order of	
preference, for example, top prior		1 (<i>-</i> 1	
	,			
Assessment	Intervention		Consultation	
Intelligence	Academic		Teacher	
Achievement	Behavioral		Parent	
Social/Emotional	Prevention		Community	
Functional/Behavioral	Social/Emotional		Other, explain:	
Curriculum-Based	Systems		_	
Setting/Population requested. Plea	ise note any addi	tional areas of inter	rests or constraints. Distance	
requests will be considered but cannot be guaranteed. It may be necessary for students to travel more				
than 45 miles to complete a practicum experience.)				
	•			
Age/grade level:				
Population:				
School, clinic, or community setting:				
Distance/Transportation needs:				
Other considerations:				
Days available: Monday (half-day; full day)*				
☐Tuesday (☐ half-day; ☐ full day)				
Wednesday (half-day; full day)				
Thursday (half-day; full day)				
Friday (half-day; full day)				
Availability must be one full		• /		
-	,	-		

Student Application for Practicum in School Psychology (page 2)

Specific Goals: Please list anticipated goals you have for practicum that may assist in identifying
potential sites and experiences.

ecific Goals: Please list anticipated goals you have for practicum that may assist in identifying tential sites and experiences.
1.
2.
3.
4.
5.
ior Experience: Indicate skills you will bring to the site in terms of previous practica, clinical work, ursework, employment, and or volunteer experiences.
1.



Special skills, training, credentials: Indicate skills such as second language skills (indicate proficiency level), special training (e.g., PREPaRE training, BCBA certificate, etc.)

1. 2.

2. 3. 4.

- 3.
- 4.
- 5.