FIELD EXPERIENCE VERIFICATION FORM

This portion to be completed by the Student:

Student: It is your responsibility to submit this form. Prior to your senior practicum, you are required to obtain and verify 150 hours of professional experiences in leisure services. At least 100 hours must be earned at one agency. One form must be completed for each different agency/position. Completed forms should be returned to your advisor via email or in person. This form is also available online: http://ahn.mnsu.edu/rpls/fieldexperience



Date _____

Student Name	Student Email
Tech ID	Anticipated Graduation (Semester/Year)
Emphasis Area(s): LPM F	RM TR Academic Advisor/Email:
Agency Supervisor	Supervisor Job Title
Agency Name	
Agency Street Address	
Agency Phone ()	Email
Dates of work: Started:	Ended:
employment dates and hours lis Upon receipt of this form, we me Thank you for being a vital part	buting to the professional development of our students, we ask that you verify the sted below and provide us with a brief evaluation of the student's performance. ay contact you to follow up on your experience with this student. of our students' professional development.
Approx. Hours Per Week	Total Hours
Student Position Type: Volur	nteer Intern Employee Other (please specify)
Nature of work with the ager	ncy (please summarize or attach job description)
Evaluation of Student Perfor	mance (please explain)
<u>Acceptable</u> – Performan	ce was consistent with professional expectations of volunteers, interns, or trainees.
<u>Unacceptable</u> – Perform	nance was inadequate or inconsistent and must improve. (please provide examples)

Agency Supervisor Signature