

## FIELDWORK PLACEMENT INFORMATION – FW #4

### Instructions for Fieldwork Students:

Please make two copies of the completed form. At the first class meeting of your on-campus fieldwork course, give one of the copies and your original to your fieldwork professor. Keep a copy for yourself.

Your name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Current Date: \_\_\_\_\_ Your E-mail Address: \_\_\_\_\_

Address : \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Name of University Fieldwork Instructor: Merril A. Simon, Ph.D. Fieldwork Course Number: EPC 659JK

Your M.S., Credential, &/or Certificate Specialization: \_\_\_\_\_

Your Liability Insurance: \_\_\_\_\_  
Company name Policy # Good through

Name of Fieldwork Site: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

Name and Title of Director of Agency/School: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Supervisor's Educational Background/Degrees: \_\_\_\_\_

Phone number : (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

EPC 659A Instructor: \_\_\_\_\_ EPC 659B Instructor: \_\_\_\_\_

EPC 655 Instructor: \_\_\_\_\_ EPC 643 Instructor: \_\_\_\_\_

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### For Instructor Use Only (Date of each receipt is noted below)

First semester: \_\_\_\_\_ Student résumé received \_\_\_\_\_ Workshop Attendance form(s) received

Fall: \_\_\_\_\_ Fieldwork Agreement received \_\_\_\_\_ Student release form received  
\_\_\_\_\_ Evaluation of site received \_\_\_\_\_ Evaluation of student received

Spring: \_\_\_\_\_ Fieldwork Agreement received (if applicable)  
\_\_\_\_\_ Evaluation of site received \_\_\_\_\_ Evaluation of student received