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| **STUDENT’S NAME:** |  | **I.D. NO:** |  |
| **PRACTICUM PHASE:** | ◻ Reflective Practicum: Focused Observation ◻ Reflective Practicum In-School Immersion Part A ◻ Reflective Practicum: In-School Immersion Part B ◻ Industry-Based Practicum ◻ MED in Special Education ◻ MSc in Counselling and Social Work◻ MAT Practicum ◻ EMEM  ◻Reflective Practicum Action Learning  |
| **PROGRAM:** | ◻ Undergraduate ◻ Graduate  |
| **DEPARTMENT;** |  |
| **SPECIALIZATION:** |  |
| **PRACTICUM SITE ASSIGNED:** |  |
| **PRACTICUM SITE REQUESTED:** |  |
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| **REASON FOR REQUEST:** |  |
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| **SIGNATURES:** |  |  |  |
|  | *Student* |  | *Date* |
|  |  |  |  |
|  | *Department Practicum Coordinator* |  | *Date* |
| **APPROVAL:** | ◻ Granted ◻ Denied  |
| **REASON FOR DENIAL:** |  |
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| **SIGNATURE:** |  |  |  |
|  | *University College Practicum Coordinator* |  | *Date* |