Senior Practicum Attachments

- Student Skills Form
- Senior Practicum Application Form
- Senior Practicum Contract
- Senior Practicum Log of Activities Form
- Mid-term Senior Practicum Evaluation Form
- Final Evaluation by HES Coordinator Form
- Student Site Evaluation Form
- Final Evaluation Form to be Submitted by Site Supervisor

Student Skills

Certifications	Related Course Work	Work Experience
First Aid		
Fitness Testing	Related Course Work	Proficiency 1 – None, 5 -Expert
Blood Pressure (resting	g and exercise)	
Resting HR		
Exercise HR		
Flexibility		

Health Knowledge Related Course Work

Proficiency
1-None, 2- Coursework only,
3 - Practical experience

AIDS
Back Injuries
Behavior Modification
Cardio Health
Consumer Health
Diabetes
Eating Disorders
Environmental Health
Fitness Programs
Human Sexuality
Hypertension_
Injury Prevention
Maternal and Child Health
Nutrition_
Smoking Cessation
Stress Management_
Substance Abuse
Weight Control
Other

Computer Skills	School/Work Experience	Proficiency 1-None, 5-Expert
E-mail		
	<u> </u>	
0.4		

La Sierra University Department of Health & Exercise Science

Application for Practicum

(A. Junior B. Senior)

Student's Name:	Date					
Student I.D. Number:	Student E-mail					
Local Address						
Permanent Address						
Term for which applying (circle): FALL	WINTERSPRINGSUMMER_					
List Practicum Sites of Interest:						
Student's Signature: Return to Practicum Coordinator	Date:					

NOTE: This is a template only. Official contract must be on La sierra University stationary.

Contract for HLED 475 -- Senior Practicum

SITE		
Contact person	1	Phone
minimum of 75-100 clock hou	irs developing professional com	side, California are required to spend a petence in health promotion internship at uided by an instructor they select and
actively participate in various	kinds of applied or field activiti elopment, international health or	es including community development, utreach, and established health services

- 1. Site visit to learn about the mission, organizational structure, funding sources, and community interventions of your organization.
- 2. Shadowing of yourself or another key individual in the organization for four-five hours to begin to get a sense of what a typical day in the life of your organization is like.
- 3. The greater part of the internship experience should be spent in active participation either as a volunteer or paid assistant in the assessment, planning, marketing, program development, program implementation, or program evaluation of community interventions. This should be of a practical nature that enables the student to begin to actively participate in health promotion/education activities and to put into practice the didactic knowledge and skills gained during his/her academic training. This should necessitate minimum training and supervision but be more skills oriented than just stuffing envelopes or answering phones.

Such activities may include but are not limited to:

- Observing and participating in patient/ client consultations
- Facilitating health promotion sessions
- Conducting surveys Door-to-door, telephone, intercept, etc.
- Assist in health screenings
- Developing marketing materials
- Developing health promotion materials
- Assisting in presentations at elementary, junior high, and high schools
- Engaging in program evaluation activities such as data collection, data entry, and discussions pertaining to data analysis
- Assisting in preparing materials for presentations at professional conferences
- Small group discussion leader

In the spaces below please briefly specify the types of activities you envision the above named student engaging in during the time he/she interfaces with your organization .Also give an estimate as to what percentage of the internship experience will be spent engaged in each activity.

Signed ______ (Student)
_____ (On-site supervisor) Date _____

• Being an active observer in a community wellness program such as weight management, smoking

cessation, stress management, nutrition education, etc.

At all times the student is expected to:

- 1. Follow the rules and regulations of the internship site.
- 2. Comply with rules of ethical conduct of La Sierra University and the internship site.
- 3. At all times conduct him/her self in a professional manner and respect the rights of all clients, staff, and other personnel with whom one interacts.
- 4. Students are expected to maintain the dress standards of La Sierra University and the internship site.
- 5. Students are expected to comply with the assignments given by the Internship-site director.
- 6. It is the student's responsibility to become familiar with the policies and procedures of the internship site.

HLSC 475 – **Senior Practicum** Log of Activities

Organization:		
Address:		

Contact Person:

Date	Time	Description of Activities	Signature

La Sierra University Department of Health & Exercise Science

Mid-Term Student Senior Practicum Evaluation By Site Supervisor

Student's name:					Date:	
Practicum Site:						
Practicum Site Supervi	sor:					
University Coordinator						
Please check the approintern.	priate box t	that best	represen	ts your evaluat	ion of the	student
	Excellent 5	Good 4	Average 3	Below Average	Poor 1	Not Applicable
Working relationship with On-site supervisor						
Working relationship with Employees						
Dependability						
Attitude towards work						
Trustworthy						
Judgment						
Professional appearance						
Acceptance of criticism						
Sets realistic goals						
Identifies new						
opportunities to contribute						
Follows instruction from						
supervisor						
Ability to learn						
Quality of work						

On the following page, evaluate the student intern's progress on the internship project.

What are the student's greatest strengths at this time? What are the areas the student should work on to improve their internship experien Other: Internship Site Supervisor Signature Date	Vhat are the student's greates	st weaknesses at this t	ime?
Other:	/hat are the student's greates	st strengths at this time	e?
	/hat are the areas the student	t should work on to in	nprove their internship experience?
Internship Site Supervisor Signature Date	ther:		
	nternship Site Supervisor Sig	gnature	Date
Student Intern Signature Date	tudent Intern Signature		Date

La Sierra University Department of Health and Exercise Science

Final Practicum Evaluation by HES Coordinator

Student's Name:	Date:	
Practicum Site:		
Practicum Site Supervisor:		
University Practicum Coordinator:		
Daily Journal: completed for overview during appointm	ents Yes N	No
Practicum Grade: _(Junior) (Senior)		
Practicum Site Supervisor Reports: Mid-Term	Final	
Intern Site Evaluation Completed:	Yes	No
Comments:		
Practicum Coordinator Signature	Date	
Student Intern Signature	Date	

Practicum Site Evaluation (sample page)

Briefly explain your regular internship duties and any projects completed.

Name	Major/Emphasis
Internship Site	Number of Credit Hours
Address	Internship Term
Site Supervisor	

Please rate the following:

Č						
5= Very highly adequate 4= Highly adequate	3= Ad	equate	2= Sli	ghtly ad	lequate	1= Unsatisfactory
Site orientation	5	4	3	2	1	NA
Formal training	5	4	3	2	1	NA
Supervision and performance feedback	5	4	3	2	1	NA
Level of responsibility assigned	5	4	3	2	1	NA
Opportunity to interact with co-workers/clients/customers	5	4	3	2	1	NA
Quality of work assigned	5	4	3	2	1	NA
Relevance of academic preparation to work position	5	4	3	2	1	NA
Career/professional knowledge gained	5	4	3	2	1	NA

Intern	rn Evaluation Continued:	
Is the	ere anything about this site that future LSU interns should know? Please explain.	
Woul	ald you recommend this site to other LSU students? Please explain.	
Were	e you offered a position after the internship/graduation? If yes, part-time, full-time; did yo	ou accept?
Other	er comments:	
I give studer	re my permission to place this evaluation on open file in the HES Office to provide informents considering internships (circle one):	nation to other
	YES NO (keep confidential)	
Stude	lent Signature Date	

EVALUATION OF STUDENT PERFORMANCE in SeniorPracticum

Supervisor Completing Evaluation	Phone
Name of Student	Student ID #
Term of Registration	
Senior Practicum Site	
Report Period to to	/Dav/YR

Please evaluate the student according to the categories listed on the back of this page. At the bottom space is given for additional comments. Keep in mind that some items may not be applicable. Please mail this completed form directly to:

Professor William C. Andress, DrPH
Associate Professor
Health and Exercise Science Department
La Sierra University
4500 Riverwalk Parkway
Riverside, CA 92515

EVALUATION OF STUDENT PERFORMANCE in Senior Practicum

For the following circle the appropriate number keeping in mind the following legend:

2 =	1 = Poor4 = Above av2 = Needs Improvement5 = Excellent3 = Satisfactoryna = non-app		C	
1.	Performed assigned tasks in a timely and accurat	te fashion.	1-2-3-4-5	
2.	Maintained professional rapport in communication handling of client data.	on and	1-2-3-4-5	
3.	Maintained professionalism in keeping appointra a timely fashion.	ments in	1-2-3-4-5	
4.	Conformed with the dress code of the establishment presented himself/herself in a professional mann		1-2-3-4-5	
5.	Gave evidence of eagerness to learn and carry re	sponsibility.	1-2-3-4-5	
6.	Worked harmoniously with staff and clients alike	e.	1-2-3-4-5	
7.	Adequately carried out the tasks agreed upon at to of the Senior Practicum.	the beginning	1-2-3-4-5	
8.	Overall rating of the student during his/her interforganization.	face with your	1-2-3-4-5	

Please add any additional comments regarding both strengths and weaknesses. Especially detail

