Practicum Agreement Form

is proposing to conduct research in the form of a practicum
(Graduate Student Full Name)
that supports the completion of a Master of Science degree in with a with a
concentration in The student understands that this practicum is in
lieu of a Thesis option or the Non-thesis option with comprehensive exam. The graduate student has requested
that serve as their Practicum Committee Chair for this practicum. (Graduate Faculty Member's Full Name)
The graduate student is proposing the following project for their practicum:
Proposed Practicum Title:
Brief Description of Proposed Practicum:
It is anticipated that the proposed practicum will require approximately hours of on-site
activities and will be conducted at the following location:
(Company name and location)
The timeframe for these onsite activities will begin and the onsite activities
(expected beginning date)
should conclude on or about
(expected end date)

This practicum will be performed as a requirement for degree listed above and under the supervision of the Practicum Committee Chair and the onsite supervisor.

Page 1 of 2

The Student Agrees to:

- □ Complete all planned project activities as approved by both the Practicum Committee Chair and the On-site Supervisor and will do so in the proscribed manner following the standards of professional practice set by the on-site supervisor.
- □ Once all on-site activities are complete, the student will contact both the Practicum Committee Chair and the On-site Supervisor that all activities are complete.

Signature:		Date:
(Graduate Student's Signature)		(date)
Graduate Student's Phone:	Email:	
(Graduate Stude		(Graduate Student's Email)
As the Onsite Supervisor,		agrees to:
(On-S	te Supervisors full name)	
□ Provide on-site supervision for the propose	ed practicum.	
 Provide appropriate space and acc proposed practicum. 	ess to the graduate studen	t for the purpose of completing the
 Make clear to the graduate studen access while on-site. 	t what the expectations are	e regarding their conduct and resource
□ When appropriate, advise the Practicum C	ommittee Chair on the gra	duate student progress on-site.
On-site Supervisor's Signature:		Date:
(Onsi	te Supervisor's Signature)	(date)
On-Site Supervisor's Phone:	Email:	
	pervisor's Phone)	(On-Site Supervisors Email)
As the Practicum Committee Chair,		agrees to:
(Pract	cum Chair's full name)	
 Evaluate proposed practicum onsi student and on-site supervisor to 		ropriate recommends to the graduate ccessful practicum experience.
 Provide liaison between the on-sit where appropriate. 	e supervisor, the graduate	student, and the practicum committee
Practicum Chair's Signature:		Date:
(Prac	icum Chair's Signature)	(date)
Practicum Chair's Phone:	Email:	
(Practicum	Chair's Phone)	(Practicum Chair's Email)

NOTE: This practicum may be terminated at any time by the on-site supervisor or the University upon written notification to all parties involved.