

# FORM A Practicum Registration Request Form

- Ensure that you have fulfilled all practicum prerequisites.
- Permission to register for Practicum will **not** be granted if the student has not met the prerequisites of practicum registration. Fulfillment of **all** requirements will be verified prior to approval.
- Meet with your practicum supervisor to discuss and solidify your practicum project for the semester. Students should provide **Form A** and **Form B** at each practicum site interview.
- E-mail signed Form A to Professor Charles Doarn, [doarnc@ucmail.uc.edu](mailto:doarnc@ucmail.uc.edu).
- Register for correct course after practicum proposal is approved. Students are responsible for adding their approved practicum course in [Catalyst](#) and following the [UC Office of the Registrar Dates & Deadlines Calendar](#).

### Choose Practicum Course:

- PH9010 (Start Term: Fall 2019 – Present)  
 PH8090 (Start Term: Fall 2017 – Summer 2019)

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

UC E-mail: \_\_\_\_\_ UC M#: \_\_\_\_\_

Concentration: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Practicum Site Name: \_\_\_\_\_

Site Supervisor Name: \_\_\_\_\_

Site Supervisor Title/Position: \_\_\_\_\_

Site Supervisor Phone #: \_\_\_\_\_

Site Supervisor E-mail: \_\_\_\_\_

Practicum Site Address: \_\_\_\_\_

Briefly describe your practicum plan:

List your practicum objectives:

State what your deliverables will be:

*I approve the practicum project described above and agree to serve as the student's practicum supervisor during the course of his/her practicum project.*

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date