



COLLEGE OF EDUCATION
 Education Advising Center
 w144 Furcolo Hall
 education@umas.edu
 University of Massachusetts

INDIVIDUALIZED PRACTICUM (NON-LICENSE) CONTRACT

<hr/> Last Name	<hr/> First Name	<hr/> Middle Initial	<hr/> Spire #
<hr/> E-mail Address		<hr/> Semester & Year (e.g., Fall 2007)	
<hr/> Telephone Number		<hr/>	
<hr/> Major/Program			
STATUS (Check) <input type="checkbox"/> Undergraduate (UG) <input type="checkbox"/> Doctoral (GD) <input type="checkbox"/> Master's (GM, GA, GT) <input type="checkbox"/> Continuing Education (CPE) <input type="checkbox"/> Master's/Doctoral (GY) <input type="checkbox"/> Non-Degree (GN) <input type="checkbox"/> Other _____			NUMBER OF CREDITS <div style="border: 1px solid black; width: 80px; height: 40px; margin: 0 auto;"></div>
<hr/>			
Title of Individualized Practicum: _____			

STEPS FOR ENROLLMENT INDIVIDUALIZED PRACTICUM

1. Please complete this title page of your individualized Practicum
2. On a separate document, please detail the following
 - a. Statement of objectives of your independent study project – A concise, clearly worded description of the scope of the project
 - b. Planned activities – Academic component that will be addressed
 - c. Criteria for evaluation and form(s) of assessment – How the academic performance on the project will be elevated
 - d. Time line for the project – a specific outline of progression of the project
3. If the practicum involves a field placement, please complete the field placement registration form
4. Have sponsoring faculty sign off the project
5. Send completed title page and project scope to Academic Affairs (W144 Furcolo Hall) for approval and enrollment

<table style="width:100%;"> <tr> <td style="width:50%;"><hr/>* Printed Faculty / Instructor's Name</td> <td style="width:50%;"><hr/>Concentration</td> </tr> <tr> <td><hr/>Student</td> <td><hr/>Date</td> </tr> <tr> <td><hr/>Instructor</td> <td><hr/>Date</td> </tr> <tr> <td><hr/>Faculty Sponsor</td> <td><hr/>Date</td> </tr> <tr> <td><hr/></td> <td><hr/></td> </tr> </table>	<hr/> * Printed Faculty / Instructor's Name	<hr/> Concentration	<hr/> Student	<hr/> Date	<hr/> Instructor	<hr/> Date	<hr/> Faculty Sponsor	<hr/> Date	<hr/>	<hr/>	<p>FOR OFFICE USE ONLY</p> <p>Course # EDUC _____</p> <p>Class # (5 digits) _____</p> <p>Abbreviated Title (Max 25 characters w/spaces): _____</p> <p>Approved: _____</p>
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