

**PRACTICUM/INTERNSHIP
ON-SITE INFORMATION FORM**

Please provide comments on the agency in which you are about to complete a practicum or internship. The information you provide will be beneficial in placing other students at this site.

Please **DO NOT** identify yourself on this form.

Contact Information for Site (name and number)_____

Term/Year: Fall 20 ____ Spring 20____ Summer 20____

Hours of Operation:

Types of clients and their presenting problems:

Numbers/frequencies of clients:

Types of activities available to students:

Nature of agency's expectations for students:

Benefits of being placed at this site:

Sources of concern related to being placed at this site:

On the back of this form, please address your perceptions of the overall quality of the site for a practicum or internship placement.