

Practicum Site Visit Form

Date of Visit: _____
In person/Phone

Trainee: _____
Agency Name _____
Dept. _____
Primary
Supervisor _____
Secondary
Supervisor _____
Seminar Leader _____

Overview of Facility

Current Practicum Activities & Supervision

Concerns

Practicum Site Visit Form Addendum (Optional)

Student's performance at site (strengths/concerns)

Please note: Completion of this section is optional. Information gained at the site visit with regard to the student's performance should be discussed with the student, whether or not it is recorded here. If the Seminar Leader decides to complete this section, a copy of both pages of the site visit form will be filed in the student's file.