SPEECH-LANGUAGE PATHOLOGY
APPLICATION FOR PRACTICUM PLACEMENT

Name: ___________________________ Semester/Year Requesting: ____________________
Phone: ___________________________

Due Dates:  
- July 1st: Fall Term Placement
- Nov 1st: Spring Term Placement
- April 1st: Summer Term Placement (all 8 weeks)

Submit to: Director of Clinical Services. Application must be submitted by the indicated due dates to ensure a placement for the subsequent semester. Students failing to do such cannot be assured a placement.

Circle your clinical emphasis track and place a check mark by the components you have completed thus far. Please note, you can complete more than one component a semester.

Child Emphasis Track

- Early Intervention (0-2 yrs) *
- ASU SHS Clinic (Children)
- ASU SHS Clinic (Adults)
- Preschool Classroom-Based *
- Public School Internship (Elementary & Secondary Focus)
- Option

* NOTE: One of these will be completed at the ASU ICCP, the other will be in a community program

Generalist Emphasis Track

- ASU ICCP (Toddler or Preschool)
- ASU SHS Clinic (Children)
- ASU SHS Clinic (Adults)
- Public School Internship
- Adult Internship (Acute, Extended or Rehabilitation Facility)

ALL TRACKS

- Aural Rehabilitation
- Hearing Screening

Adult Emphasis Track

- ASU SHS Clinic or ICCP (Children)
- ASU SHS Clinic (Adolescents/Young Adults)
- ASU SHS Clinic (Geriatric)
- Public School Internship (Preschool & Elementary Focus)
- Adult Internship (Acute, Extended, or Rehabilitation Facility)
- Option

Please indicate the component requirement you would like to complete next:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

How many clock hours of clinical experience have you obtained to date: ____________________
Indicate your clock hours obtained as follows:

- Observation
- Speech Tx (Children)
- Speech Tx (Adults)
- Language Tx (Children)
- Language Tx (Adults)
- Hearing Screening
- Speech Dx (Children)
- Speech Dx (Adults)
- Language Dx (Children)
- Language Dx (Adults)
- Aural Rehabilitation
- Other (Explain: ________________________ )
Please list the graduate level coursework you have taken (or plan to take next term) in communication disorders:

1. 
2. 
3. 
4. 
5. 
6. 
7. 
8. 
9. 
10. 
11. 
12. 

Do not write below this line - for clinic staff use only

Assignment for this semester: ______________________________________

Please register for the following:

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<th>Line # (from Bulletin)</th>
<th>Credit Hrs.</th>
<th>Clinical Faculty (Initials)</th>
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