Division of Student Services
College Student Personnel Practicum Application

Student Information
First Name: ______________________  Last Name: ___________________________
Mailing Address: __________________________________________________________
City: __________________________ State: __________________ Zip: ________________
Telephone Number: ______________ E-mail: ___________________________________

Application Term
Semester: _______________  Year: _______________
Name of your Program Advisor: _____________________________________________

Area of Interest
Please rank areas of interest in the order in which you would like to apply. Please only rank areas in which you
would be willing to work. All areas do not need to be ranked. Top choice should be ranked as “1”.

Dean of Students
_____ Student Conduct

Associate Dean for Student Wellness
_____ Alcohol and Other Drug Education
_____ Health and Wellness Center Programming
_____ Disability Services

Associate Dean for Student Success
_____ Career Services
_____ Bridge to Excellence Mentor Program (B2E)
_____ Tutoring Center
_____ Parent Relations

Associate Dean for Campus Life
_____ Spirit Squads
_____ Student Activities Board/Student Government Association
_____ Registered Student Organizations
_____ New Student Orientation
_____ Campus Recreation
_____ Leadership
_____ Greek Life
_____ Student Center Operations
_____ Civic Engagement

Associate Dean for Residence Life
_____ Residence Life

Public Safety
_____ Public Safety Programming
List your personal and professional goals as they pertain to the Practicum experience. Attach additional sheets if necessary.

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Why are you interested in working in the area(s) that you ranked?
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__________________________________________________________________________________________
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What are strengths you would bring to a Practicum position?
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__________________________________________________________________________________________
__________________________________________________________________________________________

What are areas in which you are looking to develop in a Practicum position?
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Please list curricular and extracurricular activities in which you are currently involved.
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Please provide an overview of your hours of availability to work in the Practicum position, i.e. Monday through Friday mornings, evenings, online only, etc.
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
Application Deadlines

Spring Semester       December 13
Summer I and II Sessions       April 1
Fall Semester       June 1

Submitting an application does not guarantee placement. Applications are competitive. Every effort will be made to match and meet as many requests as possible.

Please submit completed application, a current resume, a copy of your transcript and contact information for three references to Amy N. Pennington, Dean of Students, Office of Student Services, Doc Bryan Student Services Center, Suite 233.