Practicum Information Packet

Three Rivers Community College
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GENERAL INFORMATION

Purpose:

To provide students with an opportunity to earn academic credit for learning gained through fieldwork experiences.

Definition:

A practicum/fieldwork experience is defined as direct involvement in a non-classroom setting, sponsored by an institution of higher education, and jointly and cooperatively supervised by agency and college personnel. Academic credit is earned by documenting the achievement of selected learning goals and objectives.

Guidelines for Student Eligibility and Participation:

A. The student must be in good academic standing. The student must verify the completion of a minimum of 30 credits with an overall QPA of at least 2.5.

B. The student must request permission from the instructor to take the practicum and the two must agree on a suitable placement area. The student is responsible for obtaining a position although the school will pass along all leads it has. Once permission is obtained and a placement area is approved, the learning contract can be completed. The two signatures (student and instructor) at the bottom of this document indicate permission to take the practicum and the approval of the placement area.

C. The learning contract states the written expectations of the practicum in terms of learning outcomes. These outcomes will be used as part of the student’s evaluation. The contract must be signed by the student, the mandatory site-supervisor, the instructor, and the Academic Dean. You cannot register for the practicum until your contract is completed and signed.
D. The student must work a minimum of 80 hours in an approved work situation to earn 3 credits (1 credit per 30 hours worked). However, college policy does allow for up to 6 credits to be earned (180 hours worked) for a single practicum. The work can be on a paid or volunteer basis. Credit is not awarded to students who are simply continuing in their same job. The placement area can remain the same, but the learning experience must be different.

E. Ethics is the process that individuals use to evaluate their conduct in light of moral principles and values. Most professions and many businesses have adopted codes of ethics. These codes generally address competence, confidentiality, integrity, and objectivity. The student is bound by the same code(s) of ethics their placement area follows.

F. Depending on the specific site and/or site-supervisor, the instructor will visit the site a minimum of once a semester. This may not occur if the instructor has frequent contact with the supervisor or the site has been used repeatedly.

G. The student must attend all regularly scheduled classes. The student should individually meet with the instructor during the semester to discuss the practicum. If the student does not request a meeting with the instructor, the instructor may request a meeting to discuss learning objectives and review the student journal to ascertain that everything is going as planned. Although the instructor may request a conference with the student, it is ultimately the student’s responsibility to seek out the needed assistance.

H. The student must maintain journals as follows:

   Daily:   Time in/out and total hours worked

   Weekly: Readings started and/or completed; assignments/jobs started and/or completed; and objectives met.

I. The site-supervisor will provide the instructor with a written evaluation of the student’s performance two weeks prior to the close of the semester. This evaluation will be shared with the student by the instructor.

J. The student’s evaluation will be on letter grade basis unless the student makes arrangement, prior to the start of the practicum, for the pass/fail option. The final grade for the practicum will be determined by the site-supervisor evaluation, the student journal, and the instructor.

Student’s Name: ______________________________________   Phone No. _____________

Placement Area: ______________________________________   Phone No. _____________
STUDENT: I have read the General Information document above and fully understand the eligibility and participation guidelines as explained therein. I have received approval from the above acceptable placement area (company) to complete my practicum with them. If appropriate, I have a copy of an approved eligibility waiver attached to this document.

Signature: ____________________________________________ Date ____________________

INSTRUCTOR: I have verified by the examination of appropriate document that the student has met the eligibility and participation requirements, as outlined in the General Information document above, and understands the requirements thereof. I approve of the placement area selected by the student.

Signature: ____________________________________________ Date ____________________

Original: Instructor
Copy: Student
Three Rivers Community College  
Norwich, CT 06360

ELIGIBILITY WAIVER

Student: ____________________________________________

Please indicate the eligibility waiver(s) requested by checking one of the following categories:

☐ Credits/QPA (Complete Section 1)
☐ Course(s) / Grade(s) (Complete Section 2)
☐ Both (Complete Sections 1 and 2)

Section 1 – Credits /QPA
Credits Earned _____ Current QPA _____

Please indicate why a waiver should be granted:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Section 2 – Course(s) / Grade(s)

Please check the course(s) that apply to this waiver:

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<th>Course</th>
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<tr>
<td>BOT 111</td>
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<td>BOT 131</td>
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<td>BOT 251</td>
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Please indicate why a waiver should be granted (be specific):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signatures:

Student: ____________________________________________ Date ___________________

Program Coordinator: _________________________________ Date ___________________

Original: Instructor
Copies: Student; Business Office Technology Program Coordinator
PRACTICUM LEARNING CONTRACT

Respond in detail to each of the following. Prior to signing this contract, have it reviewed by your instructor for accuracy.

Student’s Name: _______________________________________________________________

Student/Banner ID #: ___________________________ Phone No. __________

Address: _____________________________________________________________________

Semester: _______________________ Hours/Credits Requested: _______ / _______

1. Practicum Placement:

   Company Name: ______________________________________________________________

   Company Address: ____________________________________________________________

   Supervisor: __________________________ Phone No. __________

   Work Hours (Days/Times): _____________________________________________________

2. Learning Objectives:

   ___________________________________________________________________________

   ___________________________________________________________________________

   ___________________________________________________________________________

   ___________________________________________________________________________

3. Activities designed to meet objectives (Job Description):

   ___________________________________________________________________________

   ___________________________________________________________________________

   ___________________________________________________________________________
4. Required Readings (Software Manuals, etc.):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5. Required Written Work:

The student will maintain a journal, in good form, specifying the days and hours worked, assignments/jobs started and or completed, readings started and/or completed, and learning objectives met. Forms are provided for this purpose.

6. Meeting Dates and Places:

The student must attend all regularly scheduled classes. If the student needs assistance, it is the student’s responsibility to meet with their instructor during the semester. It would be wise to have your journal reviewed periodically for accuracy.

7. Evaluation:

The site-supervisor will provide a written evaluation of the student’s performance two weeks prior to the close of the semester. The final grade will be based on this evaluation, the journal, and the instructor’s judgment.

Signatures:

Student: ____________________________ Date ______________

Supervisor: ____________________________ Date ______________

Instructor: ____________________________ Date ______________

Dean of Instruction: ____________________________ Date ______________

Original: Dean of Instruction
Copies: Student; Instructor; Registrar; Site Supervisor
Three Rivers Community College  
Norwich, CT 06360  

DAILY JOURNAL/SUMMARY  

Student: ___________________________________________ Page ____ of ____

<table>
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Total of hours worked: This Page _____  All pages _____

To the best of my knowledge and belief, I have completed the minimum numbers of hours required by the Learning Contract.

Student’s Signature: __________________________ Date: _________

Original: Instructor
### DAILY JOURNAL

Student: ___________________________________________ Page ____ of ____

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Total of hours worked:  This Page _____         Student’s Initials _________
WEEKLY JOURNAL SUMMARY

Student: ____________________________________________________________

Weekly Journals Attached:

Week Ending: __/__/____ | Week Ending: __/__/____
Week Ending: __/__/____ | Week Ending: __/__/____
Week Ending: __/__/____ | Week Ending: __/__/____
Week Ending: __/__/____ | Week Ending: __/__/____
Week Ending: __/__/____ | Week Ending: __/__/____
Week Ending: __/__/____ | Week Ending: __/__/____
Week Ending: __/__/____ | Week Ending: __/__/____

Summarize Your Journals Below:

Readings:
______________________________________________________________
______________________________________________________________

Assignments:
______________________________________________________________
______________________________________________________________
______________________________________________________________
______________________________________________________________
______________________________________________________________

Objectives:
______________________________________________________________
______________________________________________________________
______________________________________________________________
______________________________________________________________
______________________________________________________________

To the best of my knowledge and belief, I have mastered (satisfactorily completed at least 70% of) the objectives outlined in the Learning Contract.

Student’s Signature: __________________________ Date: _________________

Original: Instructor
Three Rivers Community College
Norwich, CT 06360

EVALUATION BY SITE-SUPERVISOR

Student’s Name: _______________________________________________________________

Supervisor: ____________________________________________________________________

Company: _____________________________________________________________________

Please evaluate the student in each of the following areas. Please read each statement carefully and select the response which in your judgment best describes the student. If you would like to make any comments, suggestions, or statement, you may do so in the area provided at the end of this evaluation form. This evaluation will be shared with the student. Please use ink.

Use the following scale when responding to the statements:

5 = Always       4 = Usually       3 = Sometimes       2 = Rarely       1 = Never

Part I – Cognitive

_____ 1. Was the student able to process information, analyze it and respond appropriately?

_____ 2. Did the student ask relevant questions at appropriate times?

_____ 3. Did the student complete assigned work within the time allotted and at the level expected by the supervisor?

_____ 4. Upon completion of an assignment/job, if time remained, did the student look for other work?

_____ 5. Was the student able to take a theoretical foundation and make the appropriate practical application?

_____ 6. Was the student able to comprehend and work within the organizational structures present in your company?
Part II – Communication

_____ 1. In written work, does the student use a clear and concise style, sound sentence structure, proper grammar, punctuation and spelling?

_____ 2. Does the student exhibit good technical writing skills?

_____ 3. Is the student able to locate necessary forms and complete them neatly and accurately?

_____ 4. While speaking, does the student use correct grammar and appropriate language?

_____ 5. Does the student articulate ideas or questions clearly, confidently, and in a concise manner?

_____ 6. Does the student project and use proper intonations?

_____ 7. Is the student able to evaluate attitudes, moods, or meaning from the way others speak?

_____ 8. Does the student handle telephone calls in a professional manner?

Part III – Demeanor

_____ 1. Was the student dependable?

_____ 2. Was the student punctual; such as arriving on time for work, from lunch and/or breaks?

_____ 3. Was the student dressed appropriately, groomed, neat and clean, and personal hygiene at an acceptable level?

_____ 4. Was the student receptive to ideas and able to handle directions courteously?

_____ 5. Was the student respectful of all personnel within the organization and to visitors?

_____ 6. Did the student’s attitude and demeanor reflect a level of maturity adequate for employment with a business setting?
Part IV – Comments

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Part V – General

Yes ☐ No ☐

To the best of your knowledge, has the student met the minimum hours required in the Practicum Learning Contract?

To the best of your knowledge, has the student mastered (satisfactorily completed at least 70% of) the objectives outlined in the Learning Contract?

Additional comments of the student’s abilities and/or weaknesses:

Supervisor’s Signature: ___________________________ Date _______________

Original: Instructor
Copies: Site-Supervisor; Student