

|  |
| --- |
| **MPH Practicum Proposal Fillable Form** |
| Note 1: Your form will be posted on an internal online catalogue. Students review the catalogue mid/late January and apply to supervisors with a cover letter and CV. The Agency/ Supervisor decides on the manner with which they choose a successful candidate; interviews are recommended but not required.Note 2: Students complete a 16 week full –time practicum beginning late April/ early May. Note 3: The paperwork required of the supervisor includes a learning contract once the student is on site, a midterm evaluation, and a final evaluation. Note 4: Please expand boxes as necessary. |
|  |  |
| **Name of Agency** |   |
| **Agency Address** |   |
| **Type of Agency** (Include brief description of agency’s main goals and programs)**Include web site if available** |   |
| **Name and Title of Supervisor** |   |
| **Supervisor Experience and Education** (Provide your professional background and describe any experience working with students) |   |
| **Supervisor contact information** (email, phone) |   |
| **Preference for contact** | [ ]  Email [ ]  Phone |
| **Ideal start date** |   |
| **Ideal end date** |   |
| **Availability of funds** | [ ]  Yes [ ]  No |
| **Range of funding available** |  |
| **Description of the Proposed Practicum** (Describe the work experience and/or project: context, health problem, population)  |   |
| **Benefit to student** (How will this placement be of interest and benefit to a student?)  |   |
| **Preferred field** | [ ] Community Nutrition [ ] Epidemiology [ ] Health Promotion [ ] Occupational & Environmental Health [ ] Family & Community Medicine  |
| **NOTES** (Your opportunity to add anything else.) |   |

*Please return to Ellie Goldenberg, Practicum Placement and External Relations Officer*

*Email:* *practicum.dlsph@utoronto.ca* *Fax: 416-978-1883*