

FORM 9: CNPS PRACTICUM COMPLETION FORM

When you have reached the end of your placement, please ask your field supervisor to sign this form. Please submit the completed form to your CNPS 598 instructor.

- **NOTE: any activities at this placement beyond the termination date of the student's practicum will NOT be covered by the University's liability insurance.**
- Student name: _____
- I, _____, hereby certify that:
(field supervisor's name)

In my capacity as field supervisor, I confirm that the above-mentioned student has successfully completed their practicum placement at:

Placement name: _____

The above student is no longer considered a practicum student at this placement as of (date): _____

Field supervisor: _____ Date: _____

Practicum student: _____ Date: _____

Items to be checked by CNPS 598 course instructor:

- Date of receipt of this signed form: _____

If this is the final placement:

- The student has submitted a summary of hours logged through Time2Track and a summary sheet signed by the field supervisor, and thus documented all hours and met the course requirements.
- The final and positive evaluation report from the above field supervisor has been received.
- A "pass" grade has been entered into the system on: _____

Date