This form should be completed whenever there is a change in the number of credits and therefore in the number of hours to be worked at the practicum site. This form can also be used when there is a significant change in the activities occurring at the practicum site. It ensures that the student, supervisor, and instructor are all in agreement and are aware of the changes to be made. Clear expectations allow for accurate feedback at the end of the practicum experience. Signatures are required of all parties. All parties will be given a copy of this document as it will be used to evaluate the student at the end of the semester.

Student Name _____________________________________________________________

Supervisor Name _________________________________________________________

Practicum Site ____________________________________________________________

Instructor Name ______ Jennifer Luboski, Ph.D.

☐ Change in Credits:  From _____ credits  To _____ credits
          From _____ hours  To _____ hours

Minimums:  15 hrs/semester = 1 credit  60 hrs/semester = 2 credit  105 hrs/semester = 3 credits
The student also needs to complete a WSU Student Enrollment Change form that the Instructor needs to sign.

☐ Change in Duties and Learning Experiences:
Duties/experiences to be removed from agreement ________________________________

Duties/experiences to be added to agreement ________________________________

☐ Change in Supervision (type, frequency) ________________________________

☐ Change in Training ________________________________

SIGNATURES

Student________________________________________________________________________ Date___________

Agency Supervisor__________________________________________________________ Date___________

Psych 445 Instructor________________________________________________________ Date___________

(last to sign)