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MPH Practicum Handbook

Administrative Documents: Practicum Checklist II & Associated Forms (Practicum Timesheet Executive Summary Cover Page, Site Supervisor Evaluation, MPH Practicum Student Evaluation, ................................................................. 24

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Introduction

Congratulations on beginning your journey towards the Public Health Practicum experience! The purpose of the Practicum is to give students an opportunity to apply core competencies in the field of public health in a supervised setting. The Practicum follows a classic internship model, where students secure a placement with an agency that performs public health work.

The practicum handbook has been created to guide you through the process of your practicum experience; however, it is suggested that you refer to your MPH Program Handbook to review the competencies as you are planning.

Please note: At each registration, students agree to abide by the rules of the Honor Code and the Code of Conduct. The Honor Code and Code of Conduct are printed in the Armstrong Graduate Catalog and on the Armstrong University Website, as listed below:
http://www.armstrong.edu/Departments/office_student_affairs/student_affairs_honor_code

If you have any additional questions, please do not hesitate to contact the MPH Practicum Coordinator:

Nandi A. Marshall, DrPH, MPH, CHES
Assistant Professor of Health Sciences/Public Health
MPH Practicum Coordinator
Armstrong State University
University Hall 154
11935 Abercorn Street
Savannah, Georgia 31419
Phone: 912-344-3307
Fax: 912-344-3490
nandi.marshall@armstrong.edu
MPH Practicum Guidelines
Practicum Step-by-Step Checklist

1. **About the Practicum** Review this handbook and make a practicum appointment with the practicum coordinator, Dr. Marshall, no later than midterm of the prior semester.
   - **FIRST STEP:** Make a practicum appointment with Dr. Marshall
   - **SECOND STEP:** Begin to identify potential site locations

2. **Selecting a Practicum** If you already have a practicum site selected, skip to item three on this checklist and begin preparing for your practicum. If you do not have a site selected, or are having difficulty identifying a practicum site, please inform Dr. Marshall as soon as possible and she will work with you to identify an appropriate preceptor. In the selection process, it is imperative that you choose a practicum site and site supervisor that will provide you with hands-on public health experience in your area of interest.

3. **Preparing for the Practicum** You should begin preparing for your practicum no later than midterm of the prior semester. Complete the following and obtain the appropriate signatures:
   - Liability Insurance
   - Health Insurance or Waiver
   - Background Check/Drug Screening (if required)
   - NIH “Protecting Human Research Participants” Training Certificate
   - Medical Report
   - Protocol, Forms, and Orientation for Hospital Practica (if applicable)
   - IRB Application Information (if applicable)
   - Memorandum of Understanding (MOU) Status
   - Practicum Student, Site Supervisor, and Faculty Adviser Responsibilities
   - Practicum Site and Site Supervisor Information
   - Practicum Objectives and Work Schedule
   - Ethical Guidelines Contract

4. **Recording Hours** Only once ALL of the above administrative documents listed above are completed, turned in, and approved by the MPH Practicum Coordinator, may you begin the practicum and logging official hours. Any work and hours undertaken before this time will not count toward the practicum.
   - See Administrative Documents: Practicum Checklist I

5. **Beginning the Practicum** After you have received approval to begin your practicum, log your contact hours on the included timesheet to efficiently document 225 contact hours by the end of your practicum.
   - Practicum Timesheet

6. **Preparing to Conclude the Practicum** Near the end of your practicum, discuss the conclusion of your work and your accomplishments with the practicum coordinator and send letters of appreciation to your site supervisor and the site.
7. Near the end of your practicum, provide your site supervisor with a copy of the **Site Supervisor Evaluation of the Practicum Student Form**, along with a stamped envelope addressed to:

    MPH Practicum Coordinator  
    Department of Health Sciences  
    Armstrong State University  
    11935 Abercorn Street  
    Savannah, GA 31419-1997

8. **Concluding the Practicum** Complete all practicum requirements and turn in all paperwork via hard-copy to the MPH Practicum Coordinator on the day of presentations. To be considered for full credit, the executive summary should be four pages in length and include the following information:

   - Title Page (not included in four page limit)
   - Approval Page (not included in four page limit)
   - Introduction (one short paragraph stating why you chose this practicum)
   - List of Objectives & Competencies
   - Results for each objective
   - Discussion/Conclusion
   - References if applicable (not included in four page limit)
   - Appendix (optional) (not included in four page limit)

9. Complete the letters of appreciation and the following evaluation and turn them in on the day of the MPH practicum presentation session to the MPH Practicum Coordinator.

   - Copies of Letters of Appreciation
   - MPH Practicum Student Evaluation of the Site/Site Supervisor

10. **Presenting the Practicum** Present your practicum experience during the MPH Oral Practicum Presentation Session. This presentation session will be held only once during the semester. It is your responsibility to ensure you can attend this presentation session.

11. The entire MPH faculty will grade the oral presentation & the MPH Practicum Coordinator will grade all other final practicum materials using the following grading rubrics:

    - MPH Practicum Executive Summary
    - MPH Practicum Oral Presentation
    - MPH Practicum Site Supervisor Evaluation
    - MPH Practicum Final Grade
MPH Practicum Instructions and Forms

What Is a Practicum?
The MPH practicum follows a classic internship model which allows the student to work for a public health-related organization to gain and/or perfect the student’s public health skills. Students will be under the direction of a site supervisor and the MPH Practicum Coordinator. However, students may also involve their MPH faculty mentor in the site selection process and writing of objectives to ensure a dynamic experience. This is hands-on experience. The practicum should be directed by the site supervisor and consist of learning PUBLIC HEALTH-RELATED SKILLS that reinforce the MPH program competencies. The overall expectation is for the student to retain these skills and implement them in their chosen field after graduation. Students must, as applicable, submit and get approved an IRB application prior to beginning practicum work.

How Many Hours Is a Practicum and When Should It Begin?
The MPH practicum student must complete a total of 225 HOURS ON-SITE (or, if off-site, in conjunction with the site and site supervisor). This is completed during one academic semester, although the overall work schedule is up to the student and site. If the practicum cannot be completed in one semester, the student must enroll in at least one hour of practicum each term until the practicum is completed. At minimum, students MUST complete all administrative paperwork and have the permission of the MPH practicum coordinator (see above Step-by-Step Checklist) BEFORE beginning any practicum hours.

Selecting a Practicum Site
Where to begin? Think about what sub-fields of public health interest you the most and/or the areas in which you will pursue a public health career after graduation. This—not convenience—should dictate your practicum selection. The practicum coordinator may help you locate potential sites and site supervisors, but it is up to you to arrange your practicum experience. You will contact organizations directly (with the exception of Memorial, St. Joseph’s/Candler, and most other hospitals). Make sure you seek a practicum site and site supervisor that is best for you. Additionally, the MPH practicum coordinator receives information on potential practicum opportunities throughout the year and the MPH program coordinator posts opportunities on the Armstrong MPH LinkedIn page.

But I already work in public health … Students who already work in the public health arena often want to use their current job sites and employers as their practicum sites and site supervisors. This is allowed ONLY IF the practicum job duties and practicum hours are above and beyond the student’s current job expectations. Also, please note that, while convenient, this is not the most beneficial setup for the practicum student. It is best to gain skills, experience, and contacts in sub-fields and with organizations beyond your current arena.

Make sure to meet deadlines! It is the responsibility of each individual student to identify, secure, and progress through an appropriate practicum by the deadline arranged in relation to the semester you register for the practicum.
MEETING WITH A POTENTIAL SITE SUPERVISOR

The practicum experience requires that the student identify a practicum site and site supervisor (who also must be approved by the MPH Practicum Coordinator prior to the start of the practicum).

What the practicum student should discuss with a potential site supervisor:

- The MPH Student Practicum Handbook. (The practicum student should supply the site supervisor with a copy of the MPH Practicum Handbook.)
- The practicum student’s long-term goals in this sub-field of public health.
  - For example, why have you chosen this organization as a potential practicum site? Why have you chosen this particular professional as a potential site supervisor?
  - It is a very good idea to have done your background research on your topic, the organization, and this professional and demonstrate that you come to them with some knowledge of what they do.
  - Also, provide the site supervisor with a current copy of your résumé.
- The site supervisor’s expectations.
- The organization’s policies regarding technical standards and professional and ethical conduct.
  - Students should understand that during the MPH practicum experience, the site supervisor is, for all intents and purposes, akin to an “employer” and the student is an “employee,” with the understanding that the
    - practicum student usually does not receive monetary compensation or other benefits as would an employee;
    - practicum sites and site supervisors are hosting the practicum student intern voluntarily;
    - practicum sites and site supervisors are under no obligations beyond the scope of this handbook;
    - practicum sites and site supervisors may “fire” or “terminate” the practicum student anytime during the practicum experience if the student fails to meet the organization’s technical, professional, and/or ethical standards.
- The primary and secondary means of contact (e.g., in-person, office phone, cell phone, e-mail, etc.) the practicum student will have with the site supervisor.
- The “Practicum Objectives” (including tasks, methods, goals, deadlines, etc.) and the “Work Schedule.”
**Memorandum of Understanding (MOU) Status**

A Memorandum of Understanding (MOU) **must** be in place between the student’s selected practicum site and Armstrong State University (and, specifically, the Department of Health Sciences in the College of Health Professions) **before any MPH student can register for practicum (effective Spring 2017 registration).** This is a mandatory legal document.

To determine whether your selected site currently has an MOU with Armstrong’s Health Sciences Department, please view the current MOU list. The MPH Practicum Coordinator has an updated version of the MOU list associated with the MPH program.

If there is no MOU between your selected site and ASU-COHP-Department of Health Sciences, you must fill out an “MOU Request Form” (page 19) and submit it to the MPH Practicum Coordinator who will then forward it to the College of Health Professions. **Please note that establishing a new MOU can take two (2) months or longer to complete.** Please plan your practicum accordingly.

**Criminal Background Check and Drug Testing**

Clinical agencies, as well as practicum and internship sites utilized by the Department of Health Sciences, may require criminal background checks and/or drug testing prior to acceptance of the student into the practicum/internship site.

The use of criminal background checks and/or drug testing is up to the individual sites. Armstrong’s Department of Health Sciences does not conduct background checks and/or drug testing. Moreover, if an agency requires criminal background checks and/or drug testing, complete this paperwork with the agency. **DO NOT** provide the Department of Health Sciences copies of or any information related to the criminal background check and/or drug testing.

Students who do not pass the criminal background check and/or drug test may be unable to access the practicum/internship site and, therefore, may be unable to complete their program of study. All fees or costs associated with required background checks and/or drug testing are the responsibility of the student. To initiate a background check, go to the following website: [http://www.psibackgroundcheck.com/](http://www.psibackgroundcheck.com/)

**Practicum Objectives**

**Discuss Objectives with Site Supervisor**

Meet with the practicum site supervisor to discuss the proposed practicum and formulate learning and experiential objectives for the practicum. All MPH students should provide their site supervisor with an updated copy of their professional résumé as well as a listing of ideas or areas of professional interest that could potentially be explored as part of a proposed practicum experience.

The practicum experience is, for the most part, **SELF-DIRECTED.** Thus, it is the practicum student’s responsibility to work with the site supervisor to outline the student’s “Practicum Objectives” and “Work Schedule” for the duration of the practicum experience.
Example of an acceptable written objective:
By the completion of the practicum, “Student’s Name” will have earned certification as a smoking cessation program director and directed three smoking cessation programs.

**Develop Practicum Objectives, Work Schedule & Identify Related MPH Program Competencies**

Develop a list of Practicum Objectives and a Work Schedule with the help of the practicum site supervisor. The objectives, schedule and related MPH program competencies (see MPH Student Handbook) must be approved by the MPH Practicum Coordinator before the student may begin logging practicum hours. However, students are permitted to discuss their objectives with their faculty mentor prior to final approval by the MPH Practicum Coordinator.

- Students are expected to complete all 225 practicum hours during the academic semester, although the overall work schedule is up to the student and site supervisor. If the practicum cannot be completed in one semester, the student will receive a grade of “IP” and must register for one hour of practicum each following semester until the practicum is completed.

**NIH “Protecting Human Participants” Training Certificate**

It is mandatory for **ALL** practicum students to complete the NIH “Protecting Human Participants” Training and provide a copy of the certificate as proof of completion. The training must have been completed within three years of the practicum start date. To complete the training or print a copy of your existing training certificate, please visit [https://phrp.nihtraining.com/users/login.php](https://phrp.nihtraining.com/users/login.php).

**IRB Application Information**

As applicable (i.e., if you will be conducting research and/or publishing data, findings, or other results beyond the practicum executive summary and presentation), submit an IRB application—including a copy of your NIH “Protecting Human Research Participants” certificate and a signed letter on letterhead from the site where you will conduct this work—to your **SITE SUPERVISOR** and then **MPH PRACTICUM COORDINATOR** (page 18). The practicum coordinator will send your application, once approved, to the chair of Health Sciences, who will forward it to the dean of the College of Health Professions and, finally, Armstrong’s IRB committee. The IRB committee will notify both you and the practicum coordinator once it has reached a decision.

Make sure to submit this application far enough in advance to complete all practicum hours. Practicum hours **CANNOT** be logged until IRB approval is obtained. Information about Armstrong’s IRB, its meeting schedule, and application forms may be located at: [http://www.armstrong.edu/Departments/graduate_studies/graduate_institutional_review_board](http://www.armstrong.edu/Departments/graduate_studies/graduate_institutional_review_board)

*Please note: The IRB does not meet during summer session.

**LIABILITY INSURANCE**

It is mandatory for **ALL** practicum students to provide a proof of purchase for liability insurance. To purchase liability insurance, students should visit Armstrong’s Bursars Office.
**Proof of Health Insurance or Waiver**

All Institutions of The University of System of Georgia are required to participate in the Student Health Insurance Program (USG SHIP). Rates are set by the University System of Georgia.

The USG SHIP for mandatory (with hard waiver) participation includes the following USG recognized student categories:

- All graduate students receiving a Full Tuition Waiver as part of their graduate assistantship toward as determined by Armstrong.
- All graduate and ESL international students holding F or J visas.
- All practicum students enrolled in programs that require proof of health insurance as determined by Armstrong.
- All graduate students receiving fellowships that fully fund their tuition as determined by Armstrong.

MPH Practicum students must show proof of health insurance coverage (waiver) or purchase University of Georgia Sponsored Health Insurance.

To access the United Health Care (UHC) - Armstrong portal to enroll, verify enrollment, or to execute a waiver option, please go to the following website:
http://www.armstrong.edu/Departments/office_student_affairs/student_affairs_student_insurance

**Medical report(s)**

All students must provide medical clearance to begin their practicum. The medical forms can be found on pages 15-17.

**Being Fired/Terminated**

Please note the following related to termination of the practicum student:

1. Site Supervisors are allowed to terminate practicum students during the course of the practicum.
   a. Site supervisors who wish to do so should follow their organization’s firing procedures.
2. Students who are fired **MAY NOT** count hours logged at the firing site toward the practicum.
3. Fired students may or may not be allowed to continue at a second site depending upon the infraction(s).

**Switching Sites**

Switching practicum sites is not encouraged, but allowed in cases involving good cause. Please note the following related to switching practicum sites:

1. Switching practicum sites will be approved only in cases involving **GOOD CAUSE**.
a. What is good cause? E.g., the site closes down, the site supervisor leaves his/her position, the site becomes dangerous to the student.

b. The evaluation of good cause will be left up to the discretion of the MPH Practicum Coordinator in conjunction with the MPH Coordinator and MPH Faculty.

2. Hours will carry over from the first to the second practicum site only if the switch was not the student’s fault.

3. Students may switch sites only once during the MPH practicum sequence.

**END OF PRACTICUM PROTOCOL**

After you have completed your required minimum of **225 hours**, students are responsible for sending thank you letters and completing their site evaluation, executive summary, and practicum presentation. Below you will find descriptions for each of the aforementioned requirements.

**PRACTICUM SITE/SITE SUPERVISOR LETTERS OF APPRECIATION**

It is mandatory to send your site supervisor and the site separate letters of appreciation. In the event that your site supervisor is also responsible for the running the organization, one letter will suffice.

**WHAT TO INCLUDE**

There is no set form for these letters. The intent is for you to send a concluding letter to your site and your site supervisor, thanking him or her for the opportunity to work at his/her facility.

**LETTER TO SITE SUPERVISOR**

You should point out how working with him or her increased your professional knowledge and enabled you to acquire and/or refine your public health skills. It is best to discuss these in as much detail as possible.

You also should use this letter to “keep the door open” so you may maintain professional contact with your site supervisor. Your site supervisor may not only continue to be a mentor but also a reference as you apply for jobs, fellowships, doctoral programs, etc.

**LETTER TO SITE**

In addition, send a letter of appreciation to the site itself (addressed to the site’s CEO or director, if different from your site supervisor, or the office manager). Thank the organization/facility and its employees for enabling your hands-on, practical experience in public health.

Describe, in as much detail as possible, how the organization/facility and its employees increased your professional knowledge and enabled you to acquire and/or refine your public health skills.

You also might want to mention any positive aspects of the organization/facility and how these have influenced you as a public health professional.
**Final Letters**

Send final drafts of these letters via **both** U.S. mail and e-mail upon completion of your practicum.

**Copies of Letters**

Submit copies of your letters of appreciation to the MPH Practicum Coordinator with your final practicum materials.

**Evaluations**

It is mandatory that both the site supervisor and practicum student complete and submit the corresponding evaluation prior to the practicum presentation date. This date will be provided by the MPH practicum coordinator at the beginning of the semester. Site supervisor evaluation can be found on page 27 and the student evaluation of the site can be found on page 29.

*Please note: Students and site supervisors will be contacted mid-semester, by the MPH Practicum Coordinator, to assess student progress.*

**Executive Summary**

The executive summary is an opportunity for students to document their practicum experience. To be considered for full credit, students must include the following:

- Title Page (*not included in four page limit*)
- Signed Approval Page (*not included in four page limit*)
- Introduction (*one short paragraph stating why you chose this practicum*)
- List of Objectives & related competencies
- Results for each objective
- Discussion (*including challenges*)
- Conclusion
- References if applicable (*not included in four page limit*)
- Appendix (optional) (*not included in four page limit*)

Students are to submit the executive summary to the MPH practicum coordinator on the day of their practicum presentation. The grading rubric can be found on page 35.

**Practicum Presentation**

All students must participate in the MPH Oral Practicum Presentation Session. This presentation session will be held only once during the semester. It is your responsibility to ensure you can attend this presentation session. During this presentation, students will provide a ten minute presentation describing their experience by reviewing their objectives, related competencies and other related information. Please review the grading rubric on page 36.
ADMINISTRATIVE DOCUMENTS: PRACTICUM CHECKLIST I

☐ **FIRST STEP:** Make a practicum appointment with Dr. Marshall (no later than mid-term) the prior semester to complete this administrative checklist.

☐ **SELECT YOUR PRACTICUM SITE AND SITE SUPERVISOR**

**Student:**

**Site Supervisor:**

**Practicum Site:**

☐ Proof of Liability Insurance (Receipt from Bursar’s Office)
☐ Proof of Health Insurance or Waiver (Copy of insurance card or waiver)
☐ Background Check/Drug Screening (if required)
☐ NIH “Protecting Human Research Participants” Training Certificate
☐ Medical Report Forms
☐ Protocol, Forms, and Orientation for Hospital Practica (if applicable)
☐ IRB Application Information (if applicable)
☐ Current Memorandum of Understanding (MOU)
☐ Student, Site Supervisor and MPH Practicum Coordinator Responsibilities
☐ Practicum Site and Site Supervisor Information
☐ Practicum Objectives and Work Schedule
☐ Ethical Guidelines Contract
☐ Other: ___________________________________________

Please remember to make and keep COPIES of all materials for your files and sign below.

__________________________  ____________________________
Practicum Student               Date

__________________________  ____________________________
**MPH Practicum Coordinator**               Date
<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Student’s ASU ID #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student's Street Address:</td>
<td>Student’s City, State, Zip</td>
</tr>
<tr>
<td>Name of Examiner</td>
<td>Date of Physical Exam</td>
</tr>
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<td><em><strong><strong><strong>/</strong></strong></strong></em>/______</td>
</tr>
<tr>
<td>Examiner’s Street Address</td>
<td>Examiner’s City, State, Zip</td>
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I have examined __________________________ and find that he/she has:

1. [ ] No evident health problems which could interfere with his/her performance of required clinical activities.

2. * [ ] The following health problem(s)/restriction(s) which may/may not interfere with his/her performance of required clinical activities. (*If checked, please explain and attach additional pages, if necessary.)

3. * [ ] Significant health problem(s) which would interfere with his/her performance of required clinical activities. (*If checked, please explain and attach additional pages, if necessary.)

Signature of Health Care Provider

RETURN TO THE REQUESTING STUDENT, WHO WILL DIRECT ALL MEDICAL FORMS TO:

Armstrong State University
Department of Health Sciences
MPH Practicum Coordinator
11935 Abercorn Street
Savannah, Georgia 31419-1997
# Medical Report for Faculty and Students

## Immunizations and Screening Tests

<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Student's ASU ID #</th>
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**PPD Date**  
**Result**

If PPD is positive, chest radiograph may be needed. (Attach Physician's Evaluation.) PPD must be done yearly.

**Radiograph Date**  
**Result**  
**Size**

Was there prophylaxis?  
[ ] YES  
[ ] NO

If YES, indicate what he prophylaxis was or is:

**Tetanus Vaccination Date** (within the last 10 years)  
_____ / _____ / ______

**Hepatitis B Series (Optional)**  
Attach waiver is no vaccine has been received.

<table>
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<tr>
<th>Date</th>
<th>Date</th>
<th>Date</th>
<th>Date</th>
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<tr>
<td>1st Vaccine</td>
<td>2nd Vaccine</td>
<td>3rd Vaccine</td>
<td>Titer</td>
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**Meningitis**

Advised of meningitis incidences and availability of immunization at the Health Department  
[ ] YES  
[ ] NO

[ ] Agrees to get immunization  
[ ] Does not agree to get immunization

**Pregnancy**

Advised of risks of exposure to high risk diseases during pregnancy (Hepatitis B, Rubella, Cytomegalovirus, etc.)  
[ ] YES  
[ ] NO

**Rubella**

<table>
<thead>
<tr>
<th>Date of Disease</th>
<th>Date of Titer (if available)</th>
<th>Date of MMR</th>
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<td>_____ / _____ / ______</td>
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**Chickenpox**

Has he/she had chickenpox?  
[ ] YES  
[ ] NO

Has he/she been exposed to chickenpox?  
[ ] YES (when? _____ / _____ / ______)  
[ ] NO

Attach copies of verifications of immunizations. (Please attach additional pages, if necessary.)

Health Care Provider’s Signature  
______________________________  
Date  
______________________________

Version Date: 06/15/2017  
Effective June 15, 2017
ARMSTRONG STATE UNIVERSITY
COLLEGE OF HEALTH PROFESSIONS

MEDICAL REPORT FOR FACULTY AND STUDENTS
Hepatitis B Declaration Form

<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Student's ASU ID #</th>
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(1) □ I have already received the Hepatitis B vaccine.

I understand that Hepatitis B is a severe and potentially life-threatening illness. I have already received the Hepatitis B vaccine and this has been noted on my “Immunizations and Screening Tests” medical report form.

<table>
<thead>
<tr>
<th>Student's Signature</th>
<th>Date</th>
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<td><em><strong><strong><strong><strong>/</strong></strong>____/</strong></strong></em>___</td>
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(2) □ I agree to take the prescribed Hepatitis B series of inoculations.

I understand that Hepatitis B is a severe and potentially life-threatening illness. Hepatitis B vaccination significantly decreases my risk of being infected by the Hepatitis B Virus (HBV). Therefore, I agree to take the prescribed series of inoculations, the follow-up titer to assess antibody levels, and a second series, if necessary. I assume responsibility for all arrangements, costs, and complications arising from this vaccination procedure.

<table>
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<th>Student's Signature</th>
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<td><em><strong><strong><strong><strong>/</strong></strong>____/</strong></strong></em>___</td>
</tr>
</tbody>
</table>

(3) □ I elect NOT to take the prescribed Hepatitis B series of inoculations.

I understand that Hepatitis B is a severe and potentially life-threatening illness. Hepatitis B vaccination significantly decreases my risk of being infected by the Hepatitis B Virus (HBV). I also understand that not taking the vaccination may significantly increase my risk of being infected by the Hepatitis B Virus. Nevertheless, I elect NOT to take the prescribed vaccination procedure, and I assume responsibility for all arrangements, costs, and complications arising from not taking these vaccinations.

<table>
<thead>
<tr>
<th>Student's Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><em><strong><strong><strong><strong>/</strong></strong>____/</strong></strong></em>___</td>
</tr>
</tbody>
</table>
IRB Application Cover Page *(if applicable)*

COMPLETE THIS PAGE AND INCLUDE IT WITH YOUR IRB APPLICATION.

Make sure also to include consent/assent procedures, copies of instruments and recruiting materials as applicable, an additional copy of your NIH “Protecting Human Research Participants” certificate for the IRB committee’s files, and a signed letter on letterhead from the site where you will conduct your work. Once the practicum site supervisor has approved the IRB application, turn in these documents to your practicum faculty adviser. Once approved at this level, the faculty adviser will forward the application to the chair of Health Sciences, who will forward it to the dean of the College of Health Professions and, finally, ASU’s IRB committee.

Please allow one (1) to two (2) months (and possibly longer) to complete this process.

Registered for PUBH 7675

| □ Spring | □ Summer | □ Fall | Year: |

Practicum Student's Name

Practicum Project Title

Practicum Site

Practicum Site Supervisor

*(print name)*

I have reviewed the student’s IRB application and find it acceptable to be forwarded to the student’s practicum faculty adviser.

*(signature) (date)*

MPH Practicum Coordinator

*(print name)*

I have reviewed the student’s IRB application and find it acceptable to be forwarded to the chair of the Health Sciences Department.

*(signature) (date)*

Chair, Health Sciences Dept.

*(print name)*

I have reviewed the student’s IRB application and find it acceptable to be forwarded to the dean of the College of Health Professions.

*(signature) (date)*
COLLEGE OF HEALTH PROFESSIONS
MEMORANDUM OF UNDERSTANDING

REQUEST/RENEWAL FORM

PROGRAM(s) REQUESTING (check all that apply):  ☐ Communication Science  ☐ Health Sciences  ☐ Nursing
☐ Physical Therapy  ☐ Respiratory Therapy  ☐ Medical Laboratory Science  ☐ Radiologic Science

Date of Request: ____________________________  ____________________________
Faculty member’s signature

Date contract should start? ____________________________

Department Head’s signature

Faculty member requesting MOU and phone #: ______________________________________________________

Facility’s Name: __________________________________________________________

Has the facility’s name changed? yes____ no____
If yes, previous name____________________________________________________________________________

Please provide this information

Facility street address: __________________________________________________________________________

Contact person at facility: _______________________________________________________________________

Contact email address: _________________________ Contact phone number: ____________________________

The name and title of individual authorized to sign MOU at facility:

Name: ___________________________________________ Title: _______________________________________
(if address is different from the facility address, please write address below.)

Return completed form to:

Dr. James “Sandy” Streater
College of Health Professions
Armstrong Center, Room 122

Date Request Received: ______________________________
MPH Practicum Responsibilities

MPH Practicum Coordinator, Site Supervisor and Student

The purpose of this form is to guide and direct the parties involved in the practicum by respecting their affiliation and working relationship with each other. Please obtain the appropriate signatures and make sure your site supervisor and MPH Practicum Coordinator have copies of your Practicum Objectives and proposed Weekly Work Schedule.

1) The **MPH Practicum Coordinator** has the responsibility to assure that:
   a) The proposed practicum meets MPH criteria for practica.
   b) Communication is maintained with the faculty on an as-needed basis to discuss the student’s progress.
   c) The practicum, in its final form, meets the appropriate format, content mastery, and standards set by the MPH program.

2) The **site supervisor** of the practicum committee has the responsibility to:
   a) Assist the student in writing practicum objectives and details regarding practicum expectations, duties, and responsibilities.
   b) Assist the student in creating a weekly work schedule for the student that enables the student to log a total of 225 contact hours during the practicum semester.
   c) Sign timesheets for the student to document contact hours.
   d) Provide oversight and guidance during the practicum, helping the student carry out his/her duties as assigned.
   e) Determine whether a drug screening of the student is required.
   f) Contact the faculty adviser if any concerns regarding the student’s performance should arise.
   g) Submit student evaluations at the end of the semester.

3) The **practicum student**, in addition to doing the work and producing the practicum documents, is responsible for:
   a) Becoming thoroughly familiar with and adhering to practicum requirements and duties/objectives.
   b) Performing all duties as agreed upon by the student and site supervisor.
   c) Conducting himself/herself in a professional manner at all times during the practicum.
   d) Maintaining and submitting all practicum documents.
   e) Completing and presenting all assignments and final presentation of the practicum experience.

<table>
<thead>
<tr>
<th>Practicum Student</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practicum Site supervisor</td>
<td>Date</td>
</tr>
<tr>
<td>MPH Practicum Coordinator</td>
<td>Date</td>
</tr>
</tbody>
</table>

**NOTE:**
*A copy of this must be given to the site supervisor.*
**Student and Site Supervisor signatures must be present PRIOR to submission.*
## Practicum Site and Site Supervisor Information

### Student Information

<table>
<thead>
<tr>
<th>Student’s Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Student’s ASU ID #</td>
<td></td>
</tr>
<tr>
<td>Student’s Street Address</td>
<td></td>
</tr>
<tr>
<td>Student’s City, State, Zip</td>
<td></td>
</tr>
<tr>
<td>Student’s Telephone Number</td>
<td>(   )  -</td>
</tr>
<tr>
<td>Student’s E-mail Address</td>
<td></td>
</tr>
</tbody>
</table>

### Site Information

<table>
<thead>
<tr>
<th>Practicum Site Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Practicum Site Street Address</td>
<td></td>
</tr>
<tr>
<td>Practicum Site City, State, Zip</td>
<td></td>
</tr>
<tr>
<td>Brief Description of the Site</td>
<td></td>
</tr>
<tr>
<td>▪ What is the site’s mission?</td>
<td></td>
</tr>
<tr>
<td>▪ What are its primary areas of focus?</td>
<td></td>
</tr>
<tr>
<td>▪ What populations or communities does it serve?</td>
<td></td>
</tr>
<tr>
<td>▪ How is its mission related to public health?</td>
<td></td>
</tr>
</tbody>
</table>

### Site Supervisor Information

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Title</td>
<td></td>
</tr>
<tr>
<td>Telephone Number</td>
<td>(  )  -</td>
</tr>
<tr>
<td>E-mail Address</td>
<td></td>
</tr>
</tbody>
</table>

Approved by: ___________________________  Date: ______________________

MPH Practicum Coordinator
**Practicum Objectives & Activities**

Write clear objectives for your practicum, as agreed upon by you and your site supervisor. Include detailed information about the project(s) you will work on as well as your tasks, methods, goals, deadlines, etc. Be sure to specify which competencies (core and additional) will be incorporated into your practicum activities (Use additional sheets as necessary.)

<table>
<thead>
<tr>
<th>Objectives and Activities</th>
<th>Competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Work Schedule:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
</tr>
</tbody>
</table>

Approved by: _______________________________ Date: _______________________________

*Practicum Student*

Approved by: _______________________________ Date: _______________________________

*Practicum Site supervisor*

Approved by: _______________________________ Date: _______________________________

*MPH Practicum Coordinator*
Ethical Guidelines Contract

Everyone taking part in a practicum (aka, internship) opportunity is expected to adhere to certain guidelines for ethical, responsible conduct and to adhere to federal and state laws and regulations. This is necessary for your own benefit and protection, as well as for the clients, the placement agency, your faculty instructor/adviser, your site, and your academic institution. Certain basic guidelines are described here, but these are not exhaustive. As a practicum intern, you also are expected to learn and adhere to the broader ethical guidelines dictated by the relevant helping professions (e.g., APHA, SOPHE, APA, NASW, ACA) as well as the guidelines specific to your placement agency. In addition, you must familiarize yourself with and follow federal and state laws and regulations (e.g., HIPAA). If you ever have questions about ethics or responsible conduct, contact your instructor or the placement site. At a minimum, practicum interns agree to adhere to the following principles:

1. **Confidentiality.** The identity of clients, or information that would reveal the identity of clients, cannot be revealed without the specific permission of the client and only according to HIPAA guidelines where they apply. The only exceptions are cases in which the client may be dangerous to him- or herself or others and in cases of abuse. In such situations, there may be a legal requirement to inform responsible agencies. There are also certain legal proceedings in which case notes and other records can be ordered to be released by the courts. Practicum students/interns must familiarize themselves with and adhere to confidentiality procedures of their placements and the laws of the state and federal government. Personal notes pertaining to specific patients and any case material discussed in class must be prepared in such a way that confidentiality is maintained. Any records or communications involving electronic technologies (e.g., computers, e-mail, PDA) must be protected by passwords, encryption, and any other means prescribed by your placement site, academic institution, HIPAA regulations, or other laws. Practicum interns do not discuss cases in public settings outside of class or their internship, nor do they discuss their cases with persons who are not specifically authorized.

2. **Recognition of qualifications and limitations.** Practicum interns must recognize the limitations to their training and abilities and must not exceed these in work with clients. It is incumbent for practicum students/interns to recognize when situations, clinical or otherwise, are beyond their knowledge or ability. When such situations arise, practicum interns will seek assistance from their site and instructor.

3. **Identification as interns.** Practicum interns will explicitly identify themselves as interns to their clients, in reports, and in other professional activities. They will not misrepresent their training, qualifications, or status. Practicum interns who will be at a placement for a limited time will inform clients of that limitation at the outset of therapy and will consider it in their work with clients.

4. **Record keeping.** Practicum interns will accurately and reliably maintain written and other records as required by their placement agency and by state and federal laws.

5. **Dual relationships.** Practicum interns will strictly follow ethical guidelines regarding multiple relationships and will refrain from clinical work with persons with whom the intern is involved in other types of relationships. Such dual relationships may inhibit the effectiveness of the intern’s clinical work and may jeopardize both the client and the trainee. For example, it would not be ethical for a trainee to take as a client someone who was a fellow student in class. Similarly, coworkers, friends, and others should not be seen as clients.

6. **Prohibition regarding sexual conduct or harassment.** Under no circumstances shall practicum interns become involved in sexual or romantic relationships of any sort with clients or their family members, agency staff, or other persons in a professional role. Practicum interns also will refrain from sexual harassment and will respect the sensitivity of others regarding sexual matters.

7. **Self-awareness and monitoring.** Practicum interns will monitor their own emotional and physical status and should be aware of any conditions that might adversely impact their ability to serve their clients or placement agencies. If such conditions arise, practicum interns should inform their placement and instructor.

8. **Ethics discussion.** Each practicum intern must discuss the ethical standards of his or her placement with the site supervisor before performing any clinical work or patient contact. Space is provided at the bottom of this form to indicate that such discussions have taken place and the intern has been informed of ethical expectations, state and federal laws and regulations, and any other specific guidelines of the agency.

By signing below, the practicum student/intern agrees to adhere to the guidelines listed above as well as those of the professional discipline, state and federal laws and, the specific placement agency.

<table>
<thead>
<tr>
<th>Practicum Student</th>
<th>Date</th>
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<tbody>
<tr>
<td>MPH Practicum Coordinator</td>
<td>Date</td>
</tr>
</tbody>
</table>

Version Date: 06/15/2017

Effective June 15, 2017

23
Administrative Documents: Practicum Checklist II

Student:

Site Supervisor:

Practicum Site:

- Approved Timesheet
- Letters of Appreciation (Copies)
- Executive Summary & Approval Page
- Site Supervisor Evaluation of the Practicum
- MPH Practicum Student Evaluation of the Site and Site Supervisor
- Other: _______________________________

Please remember to make and keep copies of all materials for your files.

Practicum Student __________________________ Date __________________________

MPH Practicum Coordinator __________________________ Date __________________________
Practicum Timesheet

Students must complete a total of 225 hours by the end of the practicum. Hours should be noted on this timesheet (Xerox extras, if needed) and must be certified by the site supervisor.

<table>
<thead>
<tr>
<th>Practicum Student’s Name</th>
<th>WEEK</th>
<th>DATE &amp; HOURS</th>
<th>DATE &amp; HOURS</th>
<th>DATE &amp; HOURS</th>
<th>DATE &amp; HOURS</th>
<th>DATE &amp; HOURS</th>
<th>TOTAL</th>
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<td>15</td>
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<td></td>
<td>Hours</td>
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</tbody>
</table>

**Total On-Site Practicum Hours Completed**

Approved by: _______________________________________  Date: ______________________

*Practicum Site Supervisor*
MPH PRACTICUM EXECUTIVE SUMMARY
APPROVAL PAGE

PRACTICUM TITLE

BY

[STUDENT NAME]

__________________________________________  ____________________________
[Name], Site Supervisor                    Date

[Practicum Site Location]

__________________________________________  ____________________________
[Faculty Name], MPH Practicum Coordinator  Date

Master of Public Health Program
Armstrong Atlantic State University

Remove this note before submission:

*Must be signed by the site supervisor before submission to the MPH Practicum Coordinator*

Header for final approval page should include the following information: Executive Summary; PUBH 7675; Semester and Year of practicum completion.
**SITE SUPERVISOR EVALUATION OF THE PRACTICUM STUDENT**

This form should be completed by the MPH practicum student’s site supervisor, evaluating the student’s performance objectively by comparing him or her with: (a) other students of comparable academic level, (b) other personnel assigned the same tasks, and/or (c) individual standards based on your professional expertise. Please circle only one response per category and feel free to include comments. If the score on an item is unsatisfactory or marginal, a comment is required.

Please send the completed evaluation via U.S. mail or student (in a sealed, signed envelope) to:

**MPH Practicum Coordinator**  
Department of Health Sciences  
Armstrong State University  
11935 Abercorn Street  
Savannah, GA 31419-1997

<table>
<thead>
<tr>
<th>Practicum Student’s Name</th>
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</table>

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>NOT APPLICABLE</th>
<th>UNSATISFACTORY</th>
<th>MARGINAL</th>
<th>AVERAGE</th>
<th>VERY GOOD</th>
<th>OUTSTANDING</th>
</tr>
</thead>
</table>

**A. WORK ETHIC**

1. Appearance            N/A  0  1  2  3  4
2. Attendance            N/A  0  1  2  3  4
3. Punctuality           N/A  0  1  2  3  4
4. Dependability         N/A  0  1  2  3  4
5. Attitude Toward Work  N/A  0  1  2  3  4
6. Ability/Willingness to Learn N/A  0  1  2  3  4

**B. PROFESSIONALISM**

1. Self-Confidence        N/A  0  1  2  3  4
2. Judgment               N/A  0  1  2  3  4
3. Emotional Maturity     N/A  0  1  2  3  4
4. Relations with Others  N/A  0  1  2  3  4
5. Overall                N/A  0  1  2  3  4

Comments (continue on back or add sheets as necessary)
### CRITERIA

<table>
<thead>
<tr>
<th></th>
<th>NOT APPLICABLE</th>
<th>UNSATISFACTORY</th>
<th>MARGINAL</th>
<th>AVERAGE</th>
<th>VERY GOOD</th>
<th>OUTSTANDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

#### C. COMMUNICATION SKILLS

1. Effective Communication
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

2. Rapport with Clients
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

3. Rapport with Employees
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

4. Rapport with Site
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

5. Ability to Work as Part of a Team
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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</thead>
</table>

#### D. QUALITY OF WORK AND PERFORMANCE

1. Writing Skills
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

2. Analytical Skills
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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</thead>
</table>

3. Progress Toward Objectives
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

4. Knowledge of Relevant Content
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

5. Quality of Work (accurate, neat, etc.)
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

6. Overall Performance
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

7. What grade would you recommend for this student?
   - A □
   - B □
   - C □
   - D □
   - F □

#### E. OVERALL EVALUATION

1. Professional Potential
   
<table>
<thead>
<tr>
<th>N/A</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
</table>

2. Would you recommend your site/organization host more MPH practicum students? (If no, why not?)
   - Yes □ No □

3. Would you act as a practicum site supervisor for another MPH student? (If no, why not?)
   - Yes □ No □

4. What areas of instruction or skills would you like to see in future MPH practicum students?

5. List anything the University should provide to enable students to be more valuable practicum interns.

Approved by: ________________________________ (Practicum Site Supervisor) Date: ______________

Version Date: 06/15/2017
Effective June 15, 2017
MPH Practicum Student Evaluation of the Site and Site Supervisor

Student: ___________________ Practicum Site: ___________________

Date: ______/_____/_______ Site Supervisor: ___________________

Using the scale provided please circle the appropriate descriptor for each item. Feel free to comment on any evaluation criterion; however, if the evaluation score on any particular item is either unacceptable or weak, a comment is required. Additionally, we would appreciate your comments on the overall evaluation. Please submit this form to your Practicum Faculty Adviser.

I. Availability of Site Supervisor:
   unacceptable weak acceptable good excellent

   Comments:

II. Quality of Supervision by Site Supervisor:
   unacceptable weak acceptable good excellent

   Comments:

III. Professional Relationship with Site supervisor:
   unacceptable weak acceptable good excellent

   Comments:

IV. I Would Recommend this Site Supervisor for Other MPH Students:
   Strongly Do Not Recommend Do Not Recommend Recommend With Reservation Recommend Strongly Recommend

   Comments:

V. I Would Recommend this Site for Other MPH Students:
   Strongly Do Not Recommend Do Not Recommend Recommend With Reservation Recommend Strongly Recommend

   Comments:
VI. Practicum Site’s Contribution to Attainment of Practicum Objectives:

unacceptable  weak  acceptable  good  excellent

Comments:

VII. Practicum Site’s Contribution to Your Professional Potential:

unacceptable  weak  acceptable  good  excellent

Comments:

VIII. Overall Practicum Experience

unacceptable  weak  acceptable  good  excellent

Comments:

Time Spent on Site: Unless otherwise agreed upon, the student should spend approximately a total of 225 hours on site. In your estimation, did you meet this requirement?

☐ YES  ☐ NO

Comments:

Is there anything else you think we should know about your practicum experience?
APPENDIX
**MPH Student’s Name:** __________________________________________________________

## MPH Practicum Grading Rubric: Executive Summary

NB: Content and professionalism of your practicum materials matter! Final MPH Practicum Papers will be retained for posterity as part of the ASU Master of Public Health program. Make sure to remove any personal identifying information (i.e., 907 number, address, etc.) as applicable from any page or form in this paper before turning it in.

<table>
<thead>
<tr>
<th>Grading Rubric</th>
<th>1.25 Poor</th>
<th>Unsatisfactory: poor effort, disorganization, missing information, misinformation.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1.50 Fair</td>
<td>Minimum effort, in need of significant improvement.</td>
</tr>
<tr>
<td></td>
<td>1.75 Average</td>
<td>Satisfactory, but in need of improvement.</td>
</tr>
<tr>
<td></td>
<td>2.00 Good</td>
<td>Expected minimum quality of college/graduate students.</td>
</tr>
<tr>
<td></td>
<td>2.25 Very Good</td>
<td>Satisfactory quality of college/graduate students.</td>
</tr>
<tr>
<td></td>
<td>2.50 Excellent</td>
<td>Exceeds expected quality of college/graduate students.</td>
</tr>
</tbody>
</table>

### Rubric Item

<table>
<thead>
<tr>
<th>Rubric Item</th>
<th>50</th>
<th>60</th>
<th>70</th>
<th>80</th>
<th>90</th>
<th>100</th>
<th>x</th>
<th>Points</th>
<th>Total Pts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Comprehensiveness/Overall Quality</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completeness and professionalism of the overall executive summary (e.g., all items are included, all items are in order, demonstrates graduate-level effort by student, overall effectiveness, free from grammatical and spelling errors, etc.).</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>(x \ 2) =</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td><strong>2. Introduction</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of the introduction and stated purpose of practicum</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>(x \ 1) =</td>
<td>2.5</td>
<td></td>
</tr>
<tr>
<td><strong>3. Objectives</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality and appropriateness of the practicum objectives and competencies</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>(x \ 1) =</td>
<td>2.5</td>
<td></td>
</tr>
<tr>
<td><strong>4. Competencies</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appropriateness of the selected competencies. Do they properly align with the objectives?</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>(x \ 1) =</td>
<td>2.5</td>
<td></td>
</tr>
<tr>
<td><strong>5. Findings and Discussion/Conclusion</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of the presentation of findings. Also, are findings logical?</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>(x \ 2) =</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td><strong>6. Professional Letters</strong> (letters mailed and copies submitted in addition to executive summary)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of letters of appreciation (e.g., specific and detailed, written in a professional manner, demonstrates honesty and integrity, etc.).</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>(x \ 1) =</td>
<td>2.5</td>
<td></td>
</tr>
</tbody>
</table>

**Total Score (out of 20)**
**MPH Practicum Handbook**

**MPH Student’s Name:** __________________________________________________________

**Faculty Evaluator:** __________________________________________________________

## MPH Practicum Grading Rubric: Oral Presentation

NB: Content and professionalism of your practicum materials matter! MPH Practicum Presentations will be graded by all MPH faculty members. Make sure to leave sufficient time near the end of the practicum semester to finalize the presentation and edit it for content and appearance.

<table>
<thead>
<tr>
<th>Grading Rubric</th>
<th>1.25 Poor</th>
<th>1.50 Fair</th>
<th>1.75 Average</th>
<th>2.00 Good</th>
<th>2.25 Very Good</th>
<th>2.50 Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Unsatisfactory: poor effort, disorganization, missing information, misinformation.</td>
<td>Minimum effort, in need of significant improvement.</td>
<td>Satisfactory, but in need of improvement.</td>
<td>Expected minimum quality of college/graduate students.</td>
<td>Satisfactory quality of college/graduate students.</td>
<td>Exceeds expected quality of college/graduate students.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Rubric Item</th>
<th>50</th>
<th>60</th>
<th>70</th>
<th>80</th>
<th>90</th>
<th>100</th>
<th>x</th>
<th>Points</th>
<th>Total Pts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Introduction and Objectives</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was the practicum topic/project appropriately introduced? Was an overview of the practicum site (if applicable) provided? Were the objectives clearly stated? Were related competencies mentioned?</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>x 1</td>
<td>= 2.5</td>
<td></td>
</tr>
<tr>
<td>2. <strong>Content and Knowledge</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Was a sufficient academic background of the practicum topic discussed? Was there a thorough but succinct presentation of data and/or duties? Were references used when appropriate?</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>x 4</td>
<td>= 10.0</td>
<td></td>
</tr>
<tr>
<td>3. <strong>Results or Conclusions</strong></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Was logical analysis of findings, results, and/or conclusions offered? Were strengths/successes, obstacles, weaknesses, and/or areas of improvement discussed?</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>x 3</td>
<td>= 7.5</td>
<td></td>
</tr>
<tr>
<td>4. <strong>Visuals – Quality, clarity, attractiveness</strong></td>
<td></td>
<td></td>
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<tr>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td></td>
<td></td>
<td>x 2</td>
<td>= 5.0</td>
</tr>
<tr>
<td>5. <strong>Presentation Organization</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Did the presentation flow in a logical, easy-to-follow manner?</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>x 1</td>
<td>= 2.5</td>
<td></td>
</tr>
<tr>
<td>6. <strong>Presentation Skills</strong></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Was the presenter engaging, clear, and audible? Did the presenter simply read the slides? Did the presenter sufficiently answer questions?</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>x 1</td>
<td>= 2.5</td>
<td></td>
</tr>
<tr>
<td>7. <strong>Overall Quality</strong></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>Did it employ an appropriate design for scholarly presentations of scientific/public health information?</td>
<td>1.25</td>
<td>1.5</td>
<td>1.75</td>
<td>2.0</td>
<td>2.25</td>
<td>2.5</td>
<td>x 4</td>
<td>= 10.0</td>
<td></td>
</tr>
</tbody>
</table>

**Total Score (out of 40)**
MPH Practicum Handbook

**MPH Student’s Name:** ______________________________________________________

# MPH Practicum Grading Rubric: Final Grade

MPH Public Health Practicum Students must pass PUBH 7675 Public Health Practicum with an overall minimum of 80% to receive a passing grade. Students also must submit a final MPH Executive Summary (on hard-copy and via e-mail) and provide an oral MPH Practicum Presentation. The final site supervisor evaluation as well as any other practicum documents also will be calculated as part of the final MPH practicum grade.

<table>
<thead>
<tr>
<th>Rubric Item</th>
<th>Actual Grade</th>
<th>x</th>
<th>Points</th>
<th>Max Pts.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Public Health Practicum Documents</td>
<td></td>
<td></td>
<td>.10</td>
<td>10</td>
</tr>
<tr>
<td>All practicum documents were completed appropriately and turned in by related deadlines.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. Final MPH Executive Summary</td>
<td></td>
<td></td>
<td>.20</td>
<td>20</td>
</tr>
<tr>
<td>See related rubric outlining weights for specific components of the final MPH Practicum Paper.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. MPH Oral Practicum Presentation</td>
<td></td>
<td></td>
<td>.40</td>
<td>40</td>
</tr>
<tr>
<td>See related rubric outlining weights for specific components of the final Oral MPH Practicum Presentation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Site Supervisor Evaluation of Practicum Student</td>
<td></td>
<td></td>
<td>.30</td>
<td>30</td>
</tr>
<tr>
<td>Students must earn a minimum grade of 70% or a recommended “C” on all evaluations.</td>
<td></td>
<td></td>
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<tr>
<td>5. Penalty Points</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Late 5 points per day</td>
<td>- ___</td>
<td></td>
<td></td>
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<tr>
<td>No evaluation 5 points</td>
<td>- ___</td>
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<td></td>
<td></td>
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<tr>
<td>No student site evaluation 5 points</td>
<td>- ___</td>
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<tr>
<td>&lt;225 Completed Hours 10 Points</td>
<td>- ___</td>
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</tr>
<tr>
<td>6. Total Points (out of 100)</td>
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</table>