

**Practicum Information Sheet**  
LIS 7640, 7650, 7660, 7670, 7680, 7685 and 7998

To be submitted at the First Seminar

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ ID # \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE (W) \_\_\_\_\_ (H) \_\_\_\_\_

EMAIL: \_\_\_\_\_

SEMESTER: (check)    FALL    WINTER    SPRING/SUMMER    YEAR \_\_\_\_\_

PRACTICUM INSTITUTION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

PRACTICUM SUPERVISOR \_\_\_\_\_

TENTATIVE SCHEDULE:

Time Period Covered: From: \_\_\_\_\_ To: \_\_\_\_\_  
Date Date

Indicate which days you will be typically working:

Sunday    Monday    Tuesday    Wednesday    Thursday    Friday    Saturday

**NOTE:** Please fill out form completely and return to the School of Library and Information Science office as soon as possible after your initial meeting with your practicum site supervisor or by the first seminar.