

## **PSYD PROGRAM - PRACTICUM SUMMARY FORM**

Student's Name:					
Date:		Academic Term:	Year in PsyD Prog	ram:	
Practicum Course #: Practicum Location:			um Location:		
Practicum Supervisor:		Practicum Course Instructor:			
1.	Describe the o	clinical activities the stu	dent participated in durino	g this placement?	
2.		student's professional d kill development?	evelopment during this pl	acement, including	
3.	What were the	e areas of growth identi	fied for this student durinឲຸ	g this placement?	

4.	What strengths did the student bring	to this placement?		
5.	Identify the student's current needs we development experience	with respect to training and professional		
	Student's signature	Practicum Supervisor's signature		
	Date:	Date:		
	Practicum Course Instructor's signature			
	Date:			