

**LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER
SCHOOL OF PUBLIC HEALTH**

Practice Experience Proposal

Student's Name	Academic Program (BCHS, BIOS, ENHS, EPID, HPSM)	Practice Experience Organization/Agency
Mission of Organization/Agency		
Preceptor's Name	Job Title	
Phone	Email	
Project Title		
Brief Description of the Proposed Project		
List of Competencies (w/ Related Learning Objectives and Work Activities) – Minimum of 3 required		
Competency 1:		
Learning Objective(s)*		
Work Activities**		
Competency 2:		
Learning Objective(s)*		
Work Activities**		

Competency 3:	
Learning Objective(s)*	
Work Activities**	
Competency 4:	
Learning Objective(s)*	
Work Activities**	
Start Date	Finish Date
Work Schedule (Student's work schedule)	

* Learning Objectives can focus on 1) application of public health theory, knowledge and skills, 2) demonstration of proficiency in a public health practice area, or 3) demonstration of leadership, teamwork, communication skills and creativity in the development of a public health practice activity.

**Work activities are 1) an entire project in an area of public health practice (fulfilling one of the core functions of public health: assessment, policy development, or assurance) or 2) Individual activities as components of a large project.

 Student's Name Student's Signature Date

 Preceptor's Name Preceptor's Signature Date

 Course Director's Signature Date