Clarion University College of Education and Human Services
Office of Field Services
(814) 393-2144
Rehab Science Student Intern Data Form

Personal Data:

Name_____
Last First Middle

Present Address_____Phone_____

_____

Permanent Address_____Phone_____

_____

Hobbies, Interests, Travel_____

Civic and Community Activities_____

Major Areas(s) of Clinical
Concentration/Interest_____

I hope to accomplish the following during Student Teaching/Internship/Externship
1._____

2._____

Scholastic Distinctions/Honors_____

Offices held, Leadership Positions and_____

FIELD EXPERIENCES (Observations, interactions, teaching in a professional educational setting)

Semester/Year Organizations Subject(s) Grade Level(s)

_____

Additional Skills: Foreign Languages, computer proficiency (language, hardware, software), coaching experience, community/church experiences, publications.

EMPLOYMENT EXPERIENCES –Full-time, Part-time, Summer

Dates Organization Position/Duties

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