



SAN FRANCISCO BAY AREA CAMPUS
1005 Atlantic Avenue, Alameda, CA 94501
510-217-4700 Fax 510-217-4800
(1/2011)

PRACTICUM SITE SELECTION FORM

Student Name: _____ **Date:** _____

The sites listed below represent my commitment to choosing agencies that will provide me with the quality of clinical experience commensurate with my level of training as well as taking in consideration the breadth of clinical opportunities available.

Primary Selections:

1	
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Alternates:

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Student Signature: _____ Date: _____