

Consulting Practicum Contract – EPID 890 OR BIOS 890 (3 credit hours)

Student: _____

Term/Year: _____ **Start Date:** _____

Faculty Advisor: _____ **Preceptor:** _____

Title of Practicum: _____

Brief Description:

**List of Specific Objectives (Goals) with description
(be sure to include everything that contributes to the final grade calculation)**

Objective	Description	Estimated Due Date	% of Final Grade
1			
2			
3			

Deliverables

- 1.
- 2.
- 3.

Evaluation

At the end of the practicum the preceptor, faculty advisor, and student will receive evaluation forms to complete. The student’s final grade will be determined by the faculty advisor using the weighted contributions of each task as listed in the above table. The grading scale is: (A = 90–100%; B+ = 85-89%; B = 80–84%; C+ = 75-79%; C = 70–74%; D+ = 65–69%; D = 60–64%; F = 0–59%).

Agreement and Signatures

I agree to the objectives and requirements outlined above. These goals are sufficient to successfully complete the consulting practicum requirement as set forth in the handbook for the Department of Epidemiology and Biostatistics.

Student: _____ **Date:** _____

Faculty Advisor: _____ **Date:** _____

Preceptor: _____ **Date:** _____