

Howard University  
School of Education  
Department of Educational Administration and Policy

**PRACTICUM AGREEMENT**

Candidate: \_\_\_\_\_ Semester: Spring Year: 2010  
(Please print or type)

Address: \_\_\_\_\_  
(Street, City, Zip Code)

Telephone: \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ - \_\_\_\_\_

Preferred email address: \_\_\_\_\_

This candidate is enrolled in a graduate program leading to a master's degree in the Howard University, School of Education. This document confirms a formal agreement between the field supervisor and the candidate for the candidate to engage in a mentored experience in accordance with requirements of the program. The candidate will be awarded three (3) graduate credit hours upon successful completion of the practicum.

Practicum Timeframe: Beginning \_\_\_\_\_ and ending  
\_\_\_\_\_.

Field Supervisor: \_\_\_\_\_ Position \_\_\_\_\_  
(Please print or type)

Practicum Site: \_\_\_\_\_  
(School or Organization)

Address: \_\_\_\_\_  
(Street, City, Zip Code)

Practicum Site Telephone ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ - \_\_\_\_\_

Email Address of Field Supervisor: \_\_\_\_\_

**SIGNED:** \_\_\_\_\_ **DATE** \_\_\_\_\_

(Candidate) \_\_\_\_\_

(Field Supervisor) \_\_\_\_\_

(Department Practicum Coordinator) \_\_\_\_\_