

Student Acceptance Form

This form is used to show dates and names of those agreeing to take part in fieldwork education

Student Name:	Dates of Fieldwork:	
Fieldwork Site Name:		
Student Coordinator:		
Fieldwork Educator:		
student evaluation tool, rotation i	ing a welcome packet that includes a thank your information, and any relevant course syllabus whom the Fieldwork Welcome Packet shoul	to this specific
☐ Student Coordinator		
Today's date:		
University Occupational Therapy	(fieldwork educator) am agreeing to take v student for the on I provided will be used by the academic fields.	_ semester. I am
Fieldwork educator's name:		
Preferred contact number:		
Preferred email:		
Student Name:		
(Print)	(Signature)	(Date)
Academic Fieldwork Coordinato	r:	
(Print)	(Signature)	(Date)