



## Masters in Higher Education Fieldwork Practicum Agreement Form

Please complete with student as you arrange placement details and send to [oss@redlands.edu](mailto:oss@redlands.edu)

Name of fieldwork student:	
Name of fieldwork practicum supervisor:	
Position of practicum supervisor:	
Contact number for practicum supervisor:	
Name of institution for fieldwork:	
Please indicate that you have read the fieldwork guidelines:	
How many hours will the student be working with you?	
Anticipated start date:	
Anticipated end date:	
Signature of supervisor and date:	
Signature of student and date:	