## Application for Attendance of a Field Experience

Name:	
Name of Experience:	
Date of Experience:	
Graduate program:	
Year in Graduate Program:	
Have you completed all required coursework? Yes No	
List remaining coursework:	
GPA:	
Have you completed your dissertation proposal? Yes No	
Date of last Dissertation advisory meeting.	
Date of last IDP mentoring meeting.	
To complete this experience you must agree to the following terms: (initial on the line prior to each item and sign at the end)	
I agree to completing the required surveys/evaluations both at the conclusion of this experience, the exit interview prior to graduation, and the post graduation surveys at one, five and ten years after graduation.	
I agree to inform the Research and Graduate Office of changes in my contact information.	
I realize the contact people I list on exit survey may be contacted if my contact information is not valid.	
I agree to conduct myself in a professional manner and with the upmost ethical standards while on this experience.	
I agree to present the results of my experience to the graduate students and faculty at the annual research day.	
Signature:Date:	
Checklist of attachments to this form:	

One page description of why you are interested in the experience and how it will inform your career plans.

Letter of endorsement from my dissertation advisor agreeing to my participation in this activity.