

**PLACEMENT HISTORY FORM**

**Speech-Language Pathology**

|  |  |  |
| --- | --- | --- |
| **Name of the student** |  | |
| **Practicum Type (e.g. Winter Practicum 2nd year)** |  | |
| **Number of Days** |  | |
| **Name of Site** |  | |
| **Clientele (child/adult)** |  | |
| **Activities** |  | |
| **Student’s Strengths** |  | |
| **Skills/Attitudes to Work on** |  | |
| **Signature of Clinical Educator** |  | **Date:** |