

# Poetry Concentration



## Practical Experience Approval Form

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Prior to each practical experience, please complete and discuss this form with the concentration director, Ellen Doré Watson, who will serve as your advisor.

Name:

Graduation Year:

Concentration Advisor:

Site for Proposed Internship, Volunteer, or Work Experience	Name of Site:  <u>Supervisor</u> Name and Title:  Phone:  Email Address: <b>Website URL:</b>
Description of Proposed Internship, Volunteer, or Work Experience, <b>including type of work and supervision you'll receive</b>	
Begin and end dates	
<b>Anticipated total work hours. For Praxis funding, must be 220 hours in a single summer; for PYX credit, must be at least 100 hours</b>	

*To be completed by Concentration Advisor:*  
Practical experience discussed with student

Approved

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_