FIELD EXPERIENCE PROPOSAL – Graduate Students

This proposal is to be completed by the student, approved by the instructor and Department Chair, and then returned to the Dance Office by the student. A proposal is required for each Field Experience course election.

STUDENT: ___________________________________________ UMID: ____________

Term: ___________ Year: 20_______ Track: ____________

Division: ___________ 3-Digit Course #: ___________ Credit Hrs: ___________

Learning objectives:
__________________________________________________________
–
__________________________________________________________
–
__________________________________________________________
–

Methods and resources to be used:
__________________________________________________________
–
__________________________________________________________
–
__________________________________________________________
–

Results to be evaluated (written work, performance, etc.):
__________________________________________________________
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__________________________________________________________
–
__________________________________________________________
–

Student signature/DATE _______________________________/__________

Instructor name (printed) _________________________________

Instructor signature/DATE _______________________________/__________

Dept Chair name (printed) ________________________________

Dept Chair signature/DATE _______________________________/__________

Updated 6/2018