This document requires electronic submission by student learner to field contact person **after** review of Agency Roster - No interviews are scheduled at the time of form submission. This document is a tool to assist you in the intentional process of thinking & reflecting on who you are, your schedule, type of agency, and client population contributing to mutual growth.

[ ] **Akron campus** – All Undergraduate Learners |Naomi White

[ ] **Akron campus** - Graduate, Foundation (1st placement) Learners |Naomi White

[ ] **Akron campus** – Graduate, Concentration (2nd placement & Advanced Standing) Learners | Becky Thomas

[ ] **Lakewood Campus** – All Learners – Becky Thomas

[ ] **Wayne College Campus** – All Learners – Lisa Crites

**Date:** Click here to enter a date.

**Learner’s Name** |

**Semester to begin field education experience** | Choose an item.

**Year to begin field education experience** | Choose an item.

**Learner’s 1st Choice**Agency Name:

Agency Address:

City:

Zip code:

Contact Person:

Phone:

E-mail address:

**Learner’s 2nd Choice**

Agency Name:

Agency Address:

City:

Zip code:

Contact Person:

Phone:

E-mail address: