## West Chester University of Pennsylvania

## Undergraduate Social Work Department

## REQUEST TO MAKE UP DAYS OF MISSED FIELD PRACTICUM

**OR ATTEND FIELD DURING BREAKS/AFTER THE END OF THE SEMESTER**

**Instructions:**

Please type in fillable fields and print. **All signatures must be originals.**

Student’s Name: First and Last Name Date: Date

Field Placement Name/Site: Enter Name of Field Placement/Site Name of Field Instructor: First and Last Name of Field Instructor

Dates Absent from Field Practicum: Enter All Dates Absent from Field Practicum

□ Requesting Approval of Following Dates to Make-up Time **(Specify days and hours to be worked)**: Enter All Dates Days, and Time Requested for Make-up

☐Requesting to Attend Field Practicum During Breaks or Extend Time at the End of the Semester **(Specify days and hours to be worked):** Enter All Dates Days, and Time Requested for Make-up

Reason for Request: Enter Reasons for Request

APPROVED BY:

\*Field Instructor’s Signature

\*Faculty Field Liaison Signature

**\*Signatures must be original**

Rev. 6/19 jb