

# Student Preceptorship Prospectus Form

1. **Student Name:** \_\_\_\_\_

2. **Session of Preceptorship:** \_\_\_\_\_ **Faculty Preceptor:**  
\_\_\_\_\_

3. **Date of Preceptorship (Specify the start and end dates of the project):**  
\_\_\_\_\_

4. **Description of Preceptorship activities** with estimated dates of completion when applicable.  
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5. Estimate of **amount of time** to be devoted each week to activity (minimum of 30 hrs total activity per each hour of credit sought). \_\_\_\_\_

6. What will be **produced upon completion** of Preceptorship (e.g. paper, presentation)?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Please circle **desired grading system:** S/U or traditional letter grade (e.g. A,B,C)

8. \_\_\_\_\_  
**Student signature** **date**

9. \_\_\_\_\_  
**Preceptor signature** **date**