Global Health Program Field Work Experience Pre-Authorization & GLBL Credit Registration Form

Form Details & Deadlines



PURPOSE: This is your notice to the department of your plans for completing your Field Work Experience requirement for your Global Health minor. Included within this form is the ability to register for GLBL credit, *if you choose to register for GLBL credit.* (If you choose to register for credit in another department, like PSY, you may do so.)

GUIDANCE: This form should be reviewed and completed in conjunction with the <u>"Practical</u> <u>Experiences" page of the GH program website</u>. The form must be reviewed and signed by your supervising instructor (see section 7 of form), regardless of whether the faculty is supervising GLBL credit or other departmental credit.

SUBMISSION PROCESS & DEADLINES: Turn in completed form, with instructor and student signature, to <u>ociasundergrad@uoregon.edu</u> (with instructor on copy) by the term's deadline:

- a. Fall deadline: September 15th
- b. Winter deadline: December 15th
- c. Spring deadline: March 15th
- d. Summer deadline: June 15th

APPROVAL: The form will be reviewed and approved by the Global Health Program Director. Students will receive notice of this approval via email, and the approved form will be saved into your GH minor student file.

GLBL CREDIT REGISTRATION (if applicable): Once approved by the Global Health Program Director, the OCIAS Undergrad Support Team will process the form and communicate with the student so the student can register for the course (if registering for GLBL credit).

HOW DO I COMPLETE THE CREDIT SECTION IF NOT SEEKING GLBL CREDIT? Skip section 5, "GLBL Credit Registration Information" and instead complete section 6, "Non-GLBL Credit Information" to indicate which major's departmental experience you are seeking credit for in conjunction with your GH minor Field Work Experience requirement.

CONFIRM ONCE COMPLETE: Upon completion of the credit for the Global Health Minor Field Work Experience requirement, students must confirm with the program once they have completed their experience with a passing grade. To confirm completion, student must <u>visit the "Confirm Completed Experience" program page</u> and fill out the online form linked there.

HAVE QUESTIONS ABOUT FILLING OUT THIS FORM?: Contact the OCIAS Undergraduate Support team at <u>ociasundergrad@oregon.edu</u>.

Form begins on next page.

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Part 1: Field Work Experience Details

	,,,,,,,	First Name
UO ID:	UO EMAIL:	
MAJORS/MINORS:		
Have you applied and l	been accepted as a minor in the UO Global Health	n program? 🛛 Yes 🗆 Not yet
If "Not vet," what term	n are you planning to apply to the Global Health n	ninor?
1		
2. ORGANIZATION / S		
2. ORGANIZATION / S	SITE INFORMATION	
2. ORGANIZATION / S ORGANIZATION/SITE N ORGANIZATION/SITE A	SITE INFORMATION	

*Fill in information as applicable. If you do not have a site supervisor, write in: "Not applicable." If your faculty supervisor will be serving as your site supervisor as well, write in: "See Faculty Supervisor information below."

3. SUPERVISING FACULTY INFORMATION				
FACULTY SUPERVISOR NAME:				
	Last Name		First Name	
FACULTY SUPERVISOR PHONE	#:	EMAIL:		
FACULTY SUPERVISOR DEPAR				
Face-to-Face Supervision?	🗆 Yes 🗆 No	If yes, how often? _		

NOTE: Supervising faculty information is required and the supervising faculty should be the instructor of record for your independent study credits associated with the GH minor Field Work Experience requirement. The supervising faculty should sign as "Instructor" below (Section 7, "Independent Study Supervision") and should be copied on your submission of the completed form when you email it to <u>ociasundergrad@uoregon.edu</u>.

Form updated Fall 2021

4. EXPECTATIONS FOR FIELD WORK EXPERIENCE

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STUDENT POSITION:				
Is this a paid position? Yes No				
Start Date End Date				
Average Hours Per Week (x) Number of Weeks = Total planned Hours				
DETERMINING CREDIT HOURS: 1 Credit Hour = 30 hours worked 4 Credit Hours = 120 hours worked				
REMINDER: 4.00 Credit Hours total are required for the GH minor Field Work Experience requirement.				
Student's expectation of the experience and how it relates to the GH minor and their career goals:				
Organization's expectations of student:				
Faculty's expectations of student (requirements for pass/no pass):				

Part 2: Credit Registration Details

5. GLBL CREDIT REGISTRATION INFORMATION					
Are you seeki	Are you seeking to enroll in GLBL Credit for this Field Work Experience?				
If "Yes," complete the rest of Section 5 here. If "No," skip to Section 6.					
TERM:	🗆 Fall	□ Winter	□ Spring	Summer	YEAR:
FILL OUT GREEN BOX FOR "DOMESTIC" EXPERIENCES:					
GLBL DEPT Course Title:	PRAC GH Fie	409 course # eld Work Exp	CRN*	P/NP Grading Option	4.00** Credit Hours
FILL OUT PURPLE BOX FOR "INTERNATIONAL" EXPERIENCES:					
<u> </u>		406 COURSE #	CRN*	P/NP Grading Option	4.00* Credit Hours
Course Title: FLD GH Field Work Exp					

*Get the CRN for your term's course from the Class Schedule: <u>classes.uoregon.edu</u>

**30 hours/per credit; 120 hours worked = 4.00 Credit Hours. (4.00 Credit Hours required to satisfy GH Minor Field Work Experience requirement in full.)

6. NON-GLBL CREDIT INFORMATION

If you are not completing "GLBL" credit, what credit are you using for your Field Work Experience?

DEPT	COURSE #	Term/Year	Grading Option	Credit Hours
Course Title:				

NOTE: In order to register for non-GLBL credit, you must contact the department you are seeking credit from and comply with their registration requirements and deadlines. The Global Health program cannot register you for non-GLBL credit. See <u>Psychology's Practicum/Internship page</u>, <u>Biology's advising</u> <u>page</u> (click "Internships" to get info download), <u>Environmental Studies "Internships" page</u>, the Human Physiology program's "HPHY 409 Practicum Application" linked under their HPHY 409 course listing <u>on</u> <u>their "Courses" page</u>, etc. 7. INDEPENDENT STUDY SUPERVISION (GLBL or Non-GLBL)

STUDENT SIGNATURE

I understand that, by signing this form, I am indicating that what is outlined herein is representative of my plans to complete my Global Health minor Field Work Experience requirement.

STUDENT SIGNATURE: _____ DATE: _____

SUPERVISING FACULTY SIGNATURE

I understand that, by signing this form, I am indicating my support of this student's proposed Field Work Experience and my commitment to serve as instructor of record for the student's independent study credits as outlined in "Part 2: Credit Registration Details."

I also understand that all final approvals for the Global Health Field Work Experience requirement lie with the Global Health Program Director.

INSTRUCTOR NAME:	 DEPARTMENT:

INSTRUCTOR SIGNATURE: _____ DATE: _____

For administrative use only:

Experience approved by Global Health Program Director: Yes No

Date of Approval: