## **UNIVERSITY OF NORTH TEXAS Department of Information Science**

## NON-MEDICAL PRACTICUM/FIELD EXPERIENCE SITE EVALUATION

Date			
Student Last Name	First Name	Middle Name/Initial	
Student Phone		Student Email Address	
Student Phone		Student Email Address	
Site Supervisor		Site Name	
Site Address			
Description of the site	•		
•			
Overall experience of	the internship.		
Over an experience of	the miternship.		
Suggestions for future	internships at this sit	e (if any):	

## Send to:

Attn: Non-Medical Practicum/Field Experience Director University of North Texas College of Information Department of Information Science 1155 Union Circle #311068 Denton, TX 76203-5017

Or fax to: 940-565-3101. (Voice: 940-565-2445).