

**COURSE OUTLINE**  
**HPER 3330**  
**EXERCISE SCIENCE/WELLNESS PRACTICUM**

PREREQUISITE

Permission of the Chairman of the Department of Health and Human Performance

I. PURPOSE

The intent of this course is to provide the beginning student in exercise science/wellness a practical field work experience under the supervision of a qualified exercise science professional in an approved exercise science or wellness setting.

II. COMPETENCIES

1. Work under a qualified exercise science professional in an approved agency.
2. Work a minimum of 125 clock hours during the semester.
3. Assist and/or observe exercise science agency supervisor in realistic situations.
4. Complete various work experiences as assigned by agency supervisor.
5. Submit required reports to faculty coordinator.

III. EVALUATION

To successfully complete HPER 3330 the student must:

1. Complete a minimum of 125 clock hours as approved by the cooperating agency and the faculty coordinator.
2. Submit the required initial report within 10 days of starting date.
3. Submit required biweekly reports (mailed every other Monday) to faculty coordinator.
4. Successfully pass evaluation/rating scale submitted by agency supervisor.
5. Final grading will be the University faculty coordinator after consultation with the agency supervisor.

Instructions: Must be completed and mailed to the Faculty Coordinator of Interns within TEN DAYS of starting date. You are responsible for all mailings.

**INITIAL REPORT  
HPER 3330 PRACTICUM**

Student Name \_\_\_\_\_ SS# \_\_\_\_\_

Present Address \_\_\_\_\_

Present Phone/Email \_\_\_\_\_

Practicum will be Initiated:                      Fall \_\_\_\_\_                      Spring \_\_\_\_\_                      Summer \_\_\_\_\_

Name/Address of Agency for Practicum \_\_\_\_\_

Agency Supervisor's Name/Title \_\_\_\_\_

Supervisor's Phone/Fax/Email \_\_\_\_\_

Type of Agency \_\_\_\_\_

Starting Date of Practicum \_\_\_\_\_ End Date \_\_\_\_\_

Place of operation (Hospital, Fitness Center, Corporate Wellness Facility, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Statement of duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Time schedule \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other Comments:

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Student's Signature

**GEORGIA SOUTHWESTERN STATE UNIVERSITY  
DEPARTMENT OF HEALTH AND HUMAN PERFORMANCE  
AMERICUS, GA 31709-4693**

**HPER 3330---EXERCISE SCIENCE/WELLNESS  
PRACTICUM EVALUATION**

Student \_\_\_\_\_ Agency \_\_\_\_\_

Agency Rater \_\_\_\_\_ Position \_\_\_\_\_

Agency Supervisor: Please rate the PRACTICUM student on the following traits based on your observation made during this student's PRACTICUM period.

**1 = Excellent, 2 = Very Good, 3 = Average, 4 = Below Average, 5 = Inferior**

Directions: Circle appropriate number beside each trait.

- |      |  |   |   |   |   |   |
|------|--|---|---|---|---|---|
| I.   | Professional Performance                           |   |   |   |   |   |
|      | 1. Plans work to be accomplished                   | 1 | 2 | 3 | 4 | 5 |
|      | 2. Completes assignments on or before due date     | 1 | 2 | 3 | 4 | 5 |
|      | 3. Conducts self well before others                | 1 | 2 | 3 | 4 | 5 |
| II.  | Professional Knowledge                             |   |   |   |   |   |
|      | 1. Displays ability to think independently         | 1 | 2 | 3 | 4 | 5 |
|      | 2. Possesses a wide variety of interests           | 1 | 2 | 3 | 4 | 5 |
| III. | Professional Personality                           |   |   |   |   |   |
|      | 1. Is enthusiastic                                 | 1 | 2 | 3 | 4 | 5 |
|      | 2. Exhibits pleasant, tasteful personal appearance | 1 | 2 | 3 | 4 | 5 |
|      | 3. Displays quality voice and speech               | 1 | 2 | 3 | 4 | 5 |
|      | 4. Displays concern for others                     | 1 | 2 | 3 | 4 | 5 |
| IV.  | Professional Attitude                              |   |   |   |   |   |
|      | 1. Displays initiative and imagination             | 1 | 2 | 3 | 4 | 5 |
|      | 2. Accepts assignments willingly                   | 1 | 2 | 3 | 4 | 5 |
|      | 3. Accepts suggestions, directions, evaluation     | 1 | 2 | 3 | 4 | 5 |

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Evaluator

Instructions: Must be completed and mailed to the Faculty Coordinator of Interns EVERY OTHER MONDAY (following the initial report) during the PRACTICUM. You are responsible for all mailings.

**WEEKLY REPORTS  
(HPER 3330 PRACTICUM)**

Student \_\_\_\_\_

Cooperating Agency \_\_\_\_\_

Week # \_\_\_\_\_ Week of \_\_\_\_\_, 20 \_\_\_\_\_

**NARRATIVE ACCOUNT OF ACTIVITIES:**

Monday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Tuesday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Wednesday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Thursday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Friday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Saturday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Sunday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

**BRIEF SYNOPSIS OF NEXT WEEK'S**

**PLANS** \_\_\_\_\_

\_\_\_\_\_

Total hours for the week \_\_\_\_\_

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Student's Signature

Instructions: Must be completed and mailed to the Faculty Coordinator of Interns EVERY OTHER MONDAY (following the initial report) during the PRACTICUM. You are responsible for all mailings.

**WEEKLY REPORTS  
(HPER 3330 PRACTICUM)**

Student \_\_\_\_\_

Cooperating Agency \_\_\_\_\_

Week # \_\_\_\_\_ Week of \_\_\_\_\_, 20 \_\_\_\_\_

**NARRATIVE ACCOUNT OF ACTIVITIES:**

Monday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Tuesday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Wednesday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Thursday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Friday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Saturday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

Sunday \_\_\_\_\_

\_\_\_\_\_ Hours \_\_\_\_\_

**BRIEF SYNOPSIS OF NEXT WEEK'S**

**PLANS** \_\_\_\_\_

\_\_\_\_\_

Total hours for the week \_\_\_\_\_

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Student's Signature

Instructions: Must be completed and mailed to the Faculty Coordinator of Interns EVERY OTHER MONDAY (following the initial report) during the PRACTICUM. You are responsible for all mailings.

**WEEKLY REPORTS  
(HPER 3330 PRACTICUM)**

Student\_\_\_\_\_

Cooperating Agency\_\_\_\_\_

Week #\_\_\_\_\_ Week of \_\_\_\_\_, 20\_\_\_\_\_

**NARRATIVE ACCOUNT OF ACTIVITIES:**

Monday\_\_\_\_\_

\_\_\_\_\_ Hours\_\_\_\_\_

Tuesday\_\_\_\_\_

\_\_\_\_\_ Hours\_\_\_\_\_

Wednesday\_\_\_\_\_

\_\_\_\_\_ Hours\_\_\_\_\_

Thursday\_\_\_\_\_

\_\_\_\_\_ Hours\_\_\_\_\_

Friday\_\_\_\_\_

\_\_\_\_\_ Hours\_\_\_\_\_

Saturday\_\_\_\_\_

\_\_\_\_\_ Hours\_\_\_\_\_

Sunday\_\_\_\_\_

\_\_\_\_\_ Hours\_\_\_\_\_

**BRIEF SYNOPSIS OF NEXT WEEK'S  
PLANS\_\_\_\_\_**

\_\_\_\_\_

Total hours for the week\_\_\_\_\_

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Student's Signature