

**Fieldwork Approval Form
CASE Program**



Name _____ Date _____

Program Information

Requested Program Name _____

Site _____ City _____

Website (or attach marketing material) _____

Contact Information

Program or Site Director Name: _____

Email _____ Phone: _____

Program Description

Grade levels served: ___Elementary ___Middle School ___High School

Days/hours of operation: _____

Types of activities the program offers:

- | | | |
|---|--|------------------------------------|
| <input type="checkbox"/> Reading/Literacy | <input type="checkbox"/> Physical Fitness | <input type="checkbox"/> Fine Arts |
| <input type="checkbox"/> Math | <input type="checkbox"/> Leadership | <input type="checkbox"/> Dance |
| <input type="checkbox"/> Science | <input type="checkbox"/> Health & Wellness | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Tutoring | <input type="checkbox"/> Mentoring |
| <input type="checkbox"/> Technology | <input type="checkbox"/> Character Development | <input type="checkbox"/> Other |

“Other” Explanation: _____

Return this form to instructor for final approval before starting your fieldwork:

Course Instructor Signature/Date: _____