

**Eastern Illinois University**  
**Department of Educational Leadership**  
**EDA 5890 Practicum in Educational Administration**  
**Information Sheet**

DATE \_\_\_\_\_ SEMESTER/YEAR FOR PRACTICUM \_\_\_\_\_

**PERSONAL INFORMATION**

STUDENT'S NAME \_\_\_\_\_ E# \_\_\_\_\_

EIU E-MAIL ADDRESS \_\_\_\_\_

POSITION \_\_\_\_\_ SCHOOL \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CITY AND STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CITY AND STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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**PRACTICUM SITE INFORMATION**

SUPERVISOR'S NAME \_\_\_\_\_ TITLE \_\_\_\_\_

SUPERVISOR'S E-MAIL ADDRESS \_\_\_\_\_

SCHOOL OR DISTRICT NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

CITY AND STATE \_\_\_\_\_

DIRECTIONS TO BUILDING: \_\_\_\_\_

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PREPARATION TIME or BEST TIME TO VISIT: \_\_\_\_\_

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OTHER IMPORTANT INFORMATION: \_\_\_\_\_

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