

ALCs, Boards and Committees: Practicum	n Form (page 1)
Section A: General Information Athlete Name: Phone:	Program: email:
Mentor Name:Phone:	Program:email:
Section B: ALU Practicum Information Instructor(s):	Due Date:

Practicum Goals Completed:

- 1. Submit your meeting minutes which include:
 - The key elements of meeting minutes discussed during the course.
 - A clear communication of what took place during the meeting, such as decisions made and tasks assigned and to whom.
- 2. Submit your self-reflection about yourself as a potential committee or board member.

But first, in the space below, describe what you learned about leadership during this practicum:



ALCs, Boards and Committees: Practicum Form (page 2)

Section C: Mentor Observation

Please have your mentor or county coordinator provide a brief summary about the work you did for your practicum.

Section D: Approval Must be signed below:			
Signature of ALU Athlete	Date	Signature of Mentor	Date
Signature of ALU County Coorc	linator Date	Signature of ALU Coordi	nator Date

Please submit completed application to:

1. ALU@soindiana.org

OR

 Special Olympics Indiana 6200 Technology Center Drive, Suite 105 Indianapolis, IN 46278 or fax (317) 328-2018



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Name/Title of the Meeting: Date of the meeting:	



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Use the space below to provide yor recall that brevity is good.	ur meeting minutes. Use a second page if necessary. But	
Name/Title of the Meeting: Date of the meeting:		



Self-Reflection: You as a Potential Committee/Board Member

Use the space below to provide your self-reflection. Limit your comments to one page.