

**UNIVERSITY OF MINNESOTA
DEPARTMENT OF SPEECH-LANGUAGE-HEARING SCIENCES
TRANSFER OF CLINICAL PRACTICUM HOURS REPORT FORM**

Student's Name _____

SPEECH/LANGUAGE PATHOLOGY		PREVENTION HOURS	ASSESSMENT HOURS	INTERVENTION HOURS	STAFFING HOURS	OBSERVATION
ARTICULATION (including phonology, motor speech disorders, and speech intelligibility)	Child					
	Adult					
FLUENCY (including rate deviations)	Child					
	Adult					
VOICE AND RESONANCE (including respiration, phonation, and velopharyngeal closure)	Child					
	Adult					
RECEPTIVE & EXPRESSIVE LANGUAGE IN SPEAKING, LISTENING, READING, WRITING, & MANUAL MODALITIES (including phonemic awareness, morphology, syntax, and semantics)	Child					
	Adult					
SWALLOWING (including oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myofunction)	Child					
	Adult					
COGNITIVE ASPECTS OF COMMUNICATION (including attention, memory, sequencing, problem-solving, and executive functioning)	Child					
	Adult					
SOCIAL ASPECTS OF COMMUNICATION (including pragmatics, challenging behavior, ineffective social skills, and lack of communication opportunities)	Child					
	Adult					
COMMUNICATION MODALITIES (including oral, manual, augmentative and alternative communication techniques, and assistive technologies)	Child					
	Adult					
HEARING		PREVENTION HOURS	ASSESSMENT HOURS	INTERVENTION HOURS	STAFFING HOURS	
HEARING (including the impact on speech and language)	Child					
	Adult					

Student: Note: Please round hours to the nearest quarter hour.
 _____ Total number of hours.
OFFICE USE: Equivalent Credit Hours (21 Practicum Hours per Credit Hour with a Maximum of 2 Credits Transfer)
 (except for aud hours = 5-10 screening + aural rehab experience)
NOTE – UNDER PREVENTION AND STAFFING HOURS, CHILD AND ADULT HOURS DO NOT NEED TO BE SEPARATE.

Supervisor's/ChairPerson's Signature _____
 Supervisor's Name (please print) _____
 Supervisor's ASHA Certification # (must have) _____
 Practicum Location _____