



Maryjane Rees Language, Speech and Hearing Center  
 Department of Communication Sciences and Disorders  
 7667 Folsom Blvd  
 Sacramento, CA 95826  
 Phone: (916) 278-6601  
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**Off-Campus Clinical Internship/Externship Preceptor and Site Intake Form**

Thank you for your interest in serving as an off-campus clinical internship/externship preceptor in audiology for students enrolled in the Doctor of Audiology program at Sacramento State. Please fill out the following information and return the form to the internship/externship coordinator at [XXX@csus.edu](mailto:XXX@csus.edu) along with a current resume/CV.

Preceptor Information			
Name		Work Phone	
Address		Cell Phone	
		Home Phone	
Email			

Preceptor Credential Information	
Highest Degree Completed & Year	
ASHA CCC No.	
State & License No.	
Years Practicing Post-Graduation	

Preceptor Employment Information	
Agency of Employment	
Address	
Position	

Thank you for your interest in serving as an off-campus clinical internship/externship site in audiology for students enrolled in the Doctor of Audiology program at Sacramento State. Please fill out the following information and return the form to the internship/externship coordinator at [XXX@csus.edu](mailto:XXX@csus.edu).

Organization Information			
Site Name		Point of Contact	
Setting Type		Position/Title	
Address		Phone	
		Email	

Description of Services and Populations Served	
Population Served	
Diagnostic Services Provided	
Rehabilitative Services Provided	
Specialty Services Provided	



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