

## Form A

### Pre-Internship Hour Record

The purpose of this form is to provide documentation that the student has completed 600 pre-internship hours, per COAPRT requirement. Please note: students only need to list 600 hours below. Fill out the following table and submit to your faculty advisor for their review prior to doing your internship.

## Student Information

Last Name: First Name: \_\_\_\_\_

Phone Number: CSUS Email: \_\_\_\_\_

[illegible]

<b>Total Number of pre-internship hours</b>					

Faculty Advisor Name: \_\_\_\_\_

Faculty Advisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_