

TEMPLE UNIVERSITY
DEPARTMENT OF COMMUNICATION SCIENCES
STUDENT SUMMARY

NAME: _____ DATE: _____

UNDERGRADUATE DEGREE

DEGREE: _____ YEAR: _____

SCHOOL: _____

MAJOR: _____

I. Speech and hearing coursework to date: (include relevant undergraduate and graduate courses by course title)

II. Clinical Education Experiences to date: (include all settings and brief description of clinical activities)

III. Employment History:

IV. Current Schedule: (list academic courses and times, other practicum assignments and schedules, and work commitments)