



**KAAP463**

**Practicum in Exercise Science  
Handbook**

**University of Delaware  
Department of Kinesiology and Applied Physiology**

Fall 2016

## **Practicum Information**

Practicum Coordinator: Guy Scotolati, M.S., CPT  
Office: 201Z CHS STAR campus  
Phone: 831-7269  
Email: gscot@udel.edu

### **Course Description:**

Directed practical experiences in clinical aspects within a variety of health or exercise related fields. Clinical settings may include (but are not limited to) physical therapy clinics, schools, hospitals, private medical practices of various types, sports medicine clinics, chiropractic offices, or physical fitness settings such as health clubs or the YMCA.

**Credits:** 1-6. For each credit, the student must spend 45 hours total at the practicum site during the semester, which is approximately 3 hours per week for a fall or spring semester.

**Prerequisites:** Admission to Exercise Science program and sophomore status or higher (non-majors may enroll with permission from Mr. Scotolati)

### **Enrolling in KAAP 463**

Enrolling in KAAP 463 is a multi-step process. You should begin this process early in order to get supporting paperwork in during the registration period. Be sure to read this entire section so that you proceed correctly.

### ***Clinical sites outside of UDPT***

#### **STEP 1. Contact clinical sites**

1. Contact appropriate staff at a clinical site to set up practicum.

First, find a clinical site. You are encouraged to find a clinical site that best fills your professional interests. On page 5, there is a list of [clinical sites](#) used by students in the past, but do not feel limited to this list. Note that some sites may have additional requirements such as background checks or drug tests. This process can take several weeks, and is your responsibility to complete.

2. Complete a [letter of agreement](#) with your site supervisor.

You should discuss your future practicum experience with your site supervisor, including a start and stop date, numbers of hours and days per week, your responsibilities, and supervisor expectations. From this discussion, determine the appropriate number of credits to take (1 credit = 45 hours; 2 credits = 90 hours; 3 credits = 135 hours). With your supervisor, fill out and sign the letter of agreement ([see page 7](#)). Create a .pdf file by scanning the completed form.

#### **STEP 2: Pre-register for credits**

Email gscot@udel.edu with the information below. You will need the following information:

- A. Your name
- B. Your student ID #
- C. Practicum location information
- D. Practicum site supervisor information
- E. # of credits
- F. [Letter of Agreement](#) (scanned or in a .pdf file)

You will need all of this information in order to pre-register for the course. Once you have all of this information completed, you will be registered for practicum credits. If you do not have a signed Letter of Agreement, you will not be registered.

You may complete this form at any time **up until 3 days prior to the end of free drop/add**

### ***UDPT clinic***

There are a limited amount of spaces available to students interested in doing their practicum at the University of Delaware Physical Therapy Clinic (12 slots of 1 – 2 credits maximum). New practicum students are prioritized over those students who have taken credits there before.

#### **STEP 1. Pre-register for credits.**

Email [gscot@udel.edu](mailto:gscot@udel.edu) with the information below. **DO NOT** contact UDPT about practicum hours. You will not need a letter of agreement for this experience.

You will need to provide:

- A. Your name
- B. Your student ID #
- C. Practicum location information – **Fill in “UD PT”**
- D. Practicum site supervisor information – **leave this blank**
- E. # of credits – **1 or 2**

**You may complete this form at any time up until 3 days prior to the end of free drop/add**

## **STEP 2. Sign up for clinical hours.**

If you are preregistered and have confirmation from Mr. Scotolati, you may sign up for clinical hours at the UD PT clinic. Go to the clinic, where there will be a sign up sheet for both volunteers and practicum students. You must sign up in person. Sign up for the appropriate number of hours, and write “KAAP 463” after your name. Because both volunteers and practicum students sign up for clinic hours, you should plan on signing up as soon as possible.

NOTE: There is a high demand for practicum hours in the UDPT clinic. If you preregister for credits and then decide not to take them, or if you get credits and drop them, contact Mr. Scotolati so that someone else can use them.

## **Course requirements:**

**These will be submitted on the KAAP 463 Sakai site.**

**1. Practicum objectives and goals.** In several paragraphs, state your objectives with this practicum experience. Provide a list of the goals you want to accomplish during the course of the semester. Due within the first 6 hours of your practicum experience (e.g. week 1 – 2).

**2. Practicum e-journal:** You will complete a weekly Blog entry, which you will submit on-line via Sakai. This will serve as a record of your experiences, and should contain more than simply a log of hours and statement of tasks. You should reflect on your experiences and how they relate to your future profession. Due each week by 9:00 pm Sunday.

- A. **Activity Summary:** Summarize the activities you participated in each week. Be sure to maintain patient confidentiality. Describe the types of patient diagnoses, treatments, or case studies you were involved with. Reflect on your experiences and relate them to your academic experiences and professional aspirations. What did you learn? Also, reflect on your objectives – did you obtain your goals? If not, why not?
- B. **Log of Hours:** Maintain a log of your hours.
- C. **Additional materials.** Collect and file appropriate documents that may be beneficial to you in the future, such as patient instructions, exercise forms, website addresses, etc.

**3. Verify completion of practicum.** At the completion of your practicum experience, your site supervisor should provide documentation that you have completed your practicum hours. This may be in the form of a written letter or an email.

## **IMPORTANT COURSE NOTES:**

- You must complete your e-journal entry each week by 9:00 pm Sunday. Entries have a time stamp, so do not wait until the last day to fill them out or you will not receive credit for completing them.

- Full-time tuition limits students to a total of 17 credits per semester. If students register for more than 17cr, they are charged per credit for each additional credit at their appropriate rate (resident, non-resident). Any approvals for overloads (above 18cr for sophomore and higher) need to come through the student's assistant dean's office.
- If, for any reason, students need to drop KAAP 463 credits, they must do so on their own. Be aware of important deadlines on the academic calendar.

### **Potential Site List**

If you have no idea where to look for a practicum site, the following sites have been used by KAAP students in prior semesters. You are not limited to this list, and there is no guarantee that these sites are currently taking practicum students. BE AWARE that certain sites require additional paperwork to be completed, such as a [background check and/or drug test](#) (see page 8 for how to do this).

| <b>Potential Sites in PT/OT/PA/other</b>  |   |   |
|---|---|---|
| <a href="#"><u>NovaCare Rehabilitation</u></a>  | <a href="#"><u>AI Dupont Children's Hospital</u></a>          | <a href="#"><u>Union Hospital</u></a>                           |
| <a href="#"><u>Exceptional Care for Children</u></a>                                    | <a href="#"><u>First State Orthopedics</u></a>                |   |
| <b>Physical Therapy</b>   |   |   |
| <a href="#"><u>UD Physical Therapy</u></a><br>(see page 2 for details)                  | <a href="#"><u>Elite Physical Therapy</u></a>                 | <a href="#"><u>NovaCare Rehabilitation</u></a>                  |
| <a href="#"><u>Christiana Care Health System: Physical Therapy Plus</u></a>             | <a href="#"><u>Excel Physical Therapy and Fitness</u></a>     | <a href="#"><u>ATI Physical Therapy</u></a>                     |
| <a href="#"><u>Dynamic Physical Therapy</u></a>   | <a href="#"><u>Kinetic Physical Therapy</u></a>               |   |
| <b>Occupational Therapy</b>   |   |   |
| <b>Children's Hospital of Philadelphia</b><br>Julie Buxton (OT manager)<br>215-590-7651 | <b>Early Learning Center</b><br>Terri Pfeffley, OT            |   |
| <b>Other</b>  |   |   |
| <a href="#"><u>Corrective Chiropractic</u></a><br>Dr. Chad Laurence                     | <a href="#"><u>Christiana Care Cardiac Rehabilitation</u></a> | <a href="#"><u>Be Truly Well Chiropractic &amp; Day Spa</u></a> |



College of Health Sciences  
DEPARTMENT OF KINESIOLOGY  
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## Letter of Agreement

### KAAP 463 Practicum in Exercise Science – Fall 2016

#### Purpose

The purpose of this practicum is to provide students with experience in a clinical setting that will enhance their understanding of the allied health professions.

#### Responsibilities of Supervisor

As an onsite supervisor, you will oversee all student activities during the practicum time period indicated below. Discuss a start and finish date, days/hours per week, and associated academic credits (1 credit = 45 hours of practicum experience) with UD student. Also, provide a brief description of what the student will do while on the practicum site.

At the end of the semester, please provide a brief performance evaluation and documentation that the student fulfilled his or her hours and email to Mr. Guy Scotolati (gscot@udel.edu).

**Student Name:** \_\_\_\_\_

**Name of Site:** \_\_\_\_\_

**Supervisor (printed):** \_\_\_\_\_

**Supervisor (signature):** \_\_\_\_\_

**Title of Supervisor:** \_\_\_\_\_

| Start/end date | Hours per week | Academic credits | Description of experience |
|----------------|----------------|------------------|---------------------------|
|                |                |                  |                           |

Please keep a copy for your records. If you have questions, please contact Mr. Guy Scotolati at University of Delaware (gscot@udel.edu or 302-831-7269)



## University of Delaware Student Information

The University of Delaware has partnered with Verified Credentials to manage your program requirements including the following:

- Background Check
- Drug Screen

**To access Verified Credentials – Student go to:**

<http://student.verifiedcredentials.com/?organization=udel>

### How It Works:

1. **Enter code for the program you will be attending** located above the “Get Started!” button on the right side of the page

|                              |
|------------------------------|
| Background Check & Drug Test |
| TVPHH-87443                  |
| Background Check Only        |
| JKBMJ-62643                  |
| Drug Test Only               |
| BBVHV-28482                  |

2. Create an account
3. Enter all required information
4. Provide supporting documentation
5. Track your progress
6. Information will automatically be shared with your school

If you have any questions, our Client Services Team is ready to assist you. Please call us at 800.938.6090 or email us at [ClientServices@verifiedcredentials.com](mailto:ClientServices@verifiedcredentials.com).