

EXS 401 – PRACTICUM HANDBOOK

**B. S. in Health Sciences
EXERCISE SCIENCE CONCENTRATION**

**SCHOOL OF HEALTH SCIENCES
OAKLAND UNIVERSITY
2016-2018**

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GENERAL EDUCATION CAPSTONE LEARNING OUTCOMES

EXS 401 is designated as a course that satisfies the General Education Capstone learning outcomes.

The Capstone course prepares students to demonstrate:

- *appropriate uses of a variety of methods of inquiry and a recognition of ethical considerations that arise*
- *the ability to integrate the knowledge learned in general education and its relevance to the student's life and career*

OAKLAND UNIVERSITY
School of Health Sciences
EXERCISE SCIENCE PROGRAM

Bachelor of Science in Health Science - Exercise Science Concentration

GENERAL INFORMATION ON PRACTICUM REQUIREMENTS

Every student pursuing the BS in Health Science degree with an Exercise Science Academic focus is required to complete a practicum. It is expected that, during this practicum, the student will become competent in applying exercise science principles in fitness, wellness and/or disease prevention settings. The minimum number of contact hours associated with the practicum is 280 hours. This may be completed in one semester through participation at an internship site for twenty hours per week for fourteen weeks, or it may be spread over several semesters with a reduced number of hours per week. The scheduling of internship time at a facility will be at the discretion of the facility. If you do not finish your practicum during the semester you registered for EXS 401, a "P" (Progress) grade will be assigned. You have up to two years to complete the practicum and change the grade from "P" to your final grade. The grade from the Practicum is not included in your Grade Point Average as it is not numerically graded. The Practicum is graded either "S" (Satisfactory) or "U" (Unsatisfactory).

Students must be pre-authorized to register for an Exercise Science practicum course. This involves notifying the EXS Program Director in writing of intent to register for EXS 401 a minimum of three months prior to registration. This communication must include the desired internship site. The prerequisite for enrolling in the EXS 401 is completion of EXS 304, 306, and 350, and Program Director permission. The student should insure that they have a thorough working knowledge of blood pressure measurement, and normal anatomy and physiology of the cardiovascular system.

You will need to secure a place to do your Practicum at one of the approved Practicum sites listed in the Practicum Handbook (go to <http://www.oakland.edu/shs/es/>, click on Undergraduate study, then click on the link to the EXS 401 Practicum Handbook). All of the details regarding the undergraduate Practicum are spelled out in this Handbook. It is recommended that you start looking for a Practicum site between 3 and 6 months before you would like to start so that you are assured of a spot to do your Practicum during the semester of your choice. Practicum placement is highly competitive and getting a placement is up to you. Practicum site staff typically do not return phone calls or respond to email inquiries. Thus, it is recommend that you go to several potential Practicum sites all dressed up as if you were going to a job interview, with your resume, your Oakland Grades (SAIL copy is fine), and a copy of the Practicum Handbook. If you can interview for the Practicum right then and there, great! If not, you can set up an appointment to come back later to talk to the intern supervisor. It is best to go to several possible sites to maximize your chances of getting offered a Practicum.

DOCUMENTS REQUIRED - In order to register for the Practicum or start your hours at a Practicum site you must provide the EXS Program Director copies of:

- 1) Evidence of health insurance coverage;
- 2) A note from your doctor, based on a recent (last 6 months) medical exam, indicating you are healthy and ready to start your practicum. Do not supply all the details of your examination. All that is needed is a single sentence on the doctor's letterhead paper, or Rx pad indicating you are medically cleared to start the Practicum. If there are any medical limitations, however, please have your Doctor provide details;

3) Your current Basic Life Support CPR certification card (front and back). If you are in the process of completing CPR certification or re-certification, let the EXS Program Director know, and provide a copy of your certification card as soon as it is available ; and,

4) Evidence of vaccination against Hepatitis B or a statement declining Hepatitis B vaccination. Evidence of vaccination would include the laboratory report, or a doctor's note. If you choose to decline the vaccination, please supply a signed and dated statement which includes the following: "Knowing that it is possible that I may expose myself to Hepatitis B through contact with bodily fluids (including sweat) in exercise or health care settings, I decline vaccination against Hepatitis B."

REGISTERING FOR EXS 401 - The EXS Program Director will provide an "Override" to enable you to register for the Practicum once copies of the above four items are submitted. In order for the Program Director to provide the override place copies of the above four items in a sealed envelope and either hand it to the Program Director or slide the envelope under the EXS Program Director's Office door along with the following:

1. Your name.
2. The course you want to register for: EXS 401
3. The semester you want to register for this course: Fall (Year)? Winter (Year)? Summer I (Year)? Summer II (Year)?
4. Your Grizzly Number (Student Number): G00XXXXXX
5. Your email address

The EXS Program Director will email you to let you know when the Override has been submitted, and you are able to use SAIL to register for EXS 401. Please note that you can start your Practicum hours at any time convenient to you and the personnel at the Practicum site as long as you have submitted the above four REQUIRED DOCUMENTS to the EXS Program Director. Generally you should be registered in EXS 401 to start your Practicum hours. However, if you are offered a Practicum that requires that you start your hours before registration, accept it, and get started. You do not need to be registered in EXS 401 to start your hours. Likewise, you can carry on completing your Practicum hours after the end of the semester of registration, if you have not finished your hours or Competencies. A "P" (Progress) grade will be submitted at the end of the semester of registration. You will have up to two years from that time to finish your Practicum.

PLEASE NOTE:

Students of the University shall not be deemed to be employees of the practicum site for purposes of compensation, fringe benefits, workers' compensation, unemployment compensation, minimum wage laws, income tax withholding, social security or any other purpose, because of their participation in the educational program. Each student is placed with the site to receive practicum experience as a part of his or her academic curriculum; those duties performed by a student are not performed as an employee, but in fulfillment of these academic requirements and are performed under supervision. At no time shall students replace or substitute for any employee of the Agency. This provision shall not be deemed to prohibit the employment of any such student by the Practicum site under a separate employment agreement.

**SPECIFIC REQUIREMENTS FOR COMPLETION
of the EXERCISE SCIENCE CONCENTRATION PRACTICUM**

Completion of the practicum component of the BS in Health Science degree with an Exercise Science Focus requires all of the following:

- 1) Satisfactory completion ("S" grade) of at least 280 hours of practicum in EXS 401. This is completed at one of the approved Practicum sites listed in this handbook.

PLEASE NOTE: The grade for EXS 401 will not be assigned until the Exercise Science Program Director has received two evaluation forms: "Evaluation of Student Performance" completed by the Practicum site supervisor; and "Evaluation of Practicum Site" completed by the student.

- 2) Submission of a detailed daily diary of activities completed during the practicum. This does not have to be typed, as long as your handwriting is legible. It would be best if you bring a ring-bound notebook to your Practicum site each day of attendance, and devote 1/2 page to 1 page to each day's activities. You should record, on a daily basis, your hours at the practicum site and keep a running total of hours completed, the nature of your activities and the number of clients assisted, tests conducted, and programs and procedures completed. Include any of your thoughts regarding concepts or applications you have been learning. Your diary is to be submitted to the Exercise Science Program Director as a part of your final report for the practicum.
- 3) Submission, to the Exercise Science Program Director, of a **Final Report** for the Practicum experience. The final report should list and describe observations, learning activities and acquired technical skills associated with your practicum. It should also include your thoughtful introspection concerning the nature of the learning that occurred, the aspects of the practicum experience that were beneficial, any of those aspects that were not beneficial, and constructive suggestions for improvements at the practicum site. The competency checklist is one of the components of the final report.
- 4) Complete only one of the two Competency Checklists. Students may complete **EITHER** the Standard (Fitness & Wellness) Practicum Competency Checklist **OR** the Alternate (Strength & Conditioning) Practicum Competency Checklist. Check with the Program Director if you have questions about which Checklist you should use. Submit to the Exercise Science Program Director a completed **Competency Checklist**. The checklist is not considered complete until **all items** in the Essential Competencies, and at least **5 items** from the Optional Competencies have been initialed by an authorized Evaluator. You should be aware that you may need to put in time, beyond the minimum 280 hours, to acquire these competencies. An authorized Evaluator must initial each item when it is determined that the competence has been demonstrated. Authorized Evaluators are the practicum site supervisors (or designees) and Exercise Science faculty. Students should always keep a photocopy of the initialed checklist in case it is lost.

STUDENT RESPONSIBILITIES FOR EXERCISE SCIENCE PRACTICUM

- I. Health Insurance - Students are required to have proof of personal health insurance prior to commencing EXS practicum. Such proof should be presented to the EXS Program Director.
- II. CPR Certification - Students are required to have proof of CPR certification at the time of enrollment in EXS 401. Such proof should be presented to the EXS Program Director.
- III. Physical Exam - Students must obtain a physical exam prior to commencing EXS practicum. Proof of satisfactory completion of the exam should be presented to the EXS Program Director.
- IV. Hepatitis B (HBV) Vaccination - Oakland University requires students entering an EXS practicum in its Exercise Science program to furnish evidence of Hepatitis B (HBV) vaccinations, or, in the alternative, evidence that they waive and decline HBV vaccination. You should realize that receiving the Hepatitis B vaccine is highly recommended, but not required, for persons who have contact with blood and body secretions, such as health care workers and designated clinical students. If you choose to have the Hepatitis B vaccine, it is your responsibility to pay for the vaccine. Insure that you provide the EXS Program Director evidence of Hepatitis B vaccination **OR** evidence of declination of immunization before beginning your practicum.
- V. Complete the Practicum at an Approved Site - See the list of approved Practicum sites in this Handbook. See the Exercise Science Program Director should you wish to have a new Practicum site approved and added to this list.
- VI. Rules for Students while at Practicum Sites
 - A. Prior to beginning the Practicum, students should contact the Practicum Site Director if they are unsure of any of the details of the rotation.
 - B. Professional Conduct - At all times the student is expected to:
 1. Follow the rules and regulations of the practicum site (e.g., working hours, billing procedures, dress code, preparation of exercise area, etc.).
 2. Comply with the ethical standards of both Oakland University and the practicum site.
 3. Conduct him/herself in a professional manner with both clients and staff.
 4. Respect the integrity and rights of all persons.

Noncompliance with any of the proceeding will be taken into account in the student's evaluation. Noncompliance can result in dismissal from the affiliation and/or an unsatisfactory grade.

- C. Students are expected to be well groomed and in appropriate uniform. Each facility will specify what is, and is not appropriate dress.
- D. Students must provide their own transportation to/from chosen Practicum sites.
- E. While at the Practicum site, it is the student's responsibility to complete all assignments as requested by the Practicum Site Director, including, but not limited to, readings, in-service presentations, client notes, home programs, etc.
- F. While at the Practicum site, the student is responsible for familiarizing himself/herself with and following all policies and procedures of the facility. This includes, but is not

limited to, those policies and procedures dealing with scheduling, billing, note-writing, use of medical terminology, referrals to other disciplines within and outside of the facility, client evaluation, exercise prescription and exercise supervision.

- G. Students are expected to attend all practicum sessions and absences are to be considered the exception rather than the rule.
 - 1. Excused Absences - Illness and emergencies (such as a death in the family) fall in this category. In order to be excused, the student must call the Practicum Site Director. When participating in practicum experiences, students must consider the health of those with whom they come in contact. If (and only if) the student feels he/she has an illness that may be harmful to clients, he/she should not participate in the practicum experience for that day. A limited number of excused absences will be allowed during a practicum rotation, after which make-up time will have to be scheduled.
 - 2. Unexcused Absences - Any absence of which the Practicum Site Director has not been notified is considered unexcused. Such absences require make-up time.
 - 3. Under no circumstances are students to be absent from academic classes to make up time missed from practicum.
 - 4. Tardiness is not an acceptable practice in Practicum. If a student is habitually tardy, make-up time will be required. In extreme cases, failure may result.

VII. EVALUATION OF STUDENTS

- A. Students will be evaluated by their Practicum Site Director using the Evaluation of Student Practicum Performance form (pages 17-20).
- B. In the event that a student is experiencing problems during his/her affiliation, the student should first discuss them with the Practicum Site Director. If the problems remain unresolved, the student should then discuss them with the EXS Program Director. The EXS Program Director will take them up with the Practicum Site Director.
- C. Site visits may be made by the exercise science program to the Practicum sites. Telephone contact between the EXS Program Director and the Practicum Site Director will also be routinely initiated to check on the progress of students.

VIII. STUDENT EVALUATION OF PRACTICUM SITES

- A. Students will formally evaluate the practicum site immediately prior to the completion of the affiliation using the Student's Evaluation of Practicum Site form (pages 21-22).
- B. Student evaluations will be shared with the Exercise Science Program Director following completion of the affiliation and may, at the discretion of the Program Director, be shared with the Practicum Site staff.

OAKLAND UNIVERSITY
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EXERCISE SCIENCE PROGRAM

PROGRAM DIRECTOR'S PRACTICUM CHECK LIST

STUDENT'S NAME: _____

Give this form to the Exercise Science Program Director before starting your practicum (EXS 401).

*Before approval is given to begin a practicum
the student should present evidence of:*

EXS 401

Current Health Insurance coverage _____

Current CPR Certification _____

Recent Medical Examination _____

Hepatitis B Vaccination (or declination) _____

After completion of the practicum:

Duration (at least 280 hrs) _____

Received evaluation of student performance
from practicum site _____

Received evaluation of practicum site
from student _____

Submission of detailed daily diary _____

Submission of final report _____

Submission of competency checklist _____

Satisfactory completion of practicum _____

Exercise Science Program Director exit interview with
student upon completion (for review of performance) _____

OAKLAND UNIVERSITY
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EXS 401 STANDARD (FITNESS & WELLNESS) COMPETENCY CHECKLIST (p.1)

Student's name: _____ Semester: _____ Year: _____

Each student is required to complete **ALL** of the competencies listed in the essential competencies section, and at least **5 items** from the optional competencies section by the end the practicum. An approved evaluator (practicum site director or designee) must initial each item when it is determined that the competency has been satisfied. The initialed competency checklist must be presented to the Exercise Science Program Director at the conclusion of the internship as part of the exit interview.

A. ESSENTIAL COMPETENCIES (ALL ARE TO BE COMPLETED)

Professionalism and Ethics

- 1 _____ **Demonstrate Professional, ethical and legal competence.** This includes: demonstrate professional behavior; maintain client confidentiality; recognize and accept personal/professional limitations; engage in constructive self-change; serve as a health role model for clients; demonstrate concern for client privacy, modesty and anxiety; maintain confidentiality of client information; accept personal, cultural and professional diversity in working for positive change; follow legal and ethical guidelines for client management and referral.
- 2 _____ **Use appropriate interpersonal and communication skills** including: interact appropriately with health care professionals and with the client; demonstrate effective counseling and communication skills to facilitate behavior change

Teaching

- 3 _____ **Participate in client exercise, health promotion, and lifestyle change briefings/consultations** with increasing responsibility (minimum 5x)
- 4 _____ **Lead group exercise**, including guiding, assisting, correcting, and adjusting exercise activities, and demonstration of various techniques for clients with various fitness levels. (minimum 10x)
- 5 _____ **Conduct individual exercise sessions**, including guiding, assisting, correcting, and adjusting exercise activities. (minimum 10x)
- 6 _____ **Instruct clients in the use of exercise equipment** including effective postures, adjusting equipment, safety precautions, self-monitoring, and record keeping. (minimum 10x)
- 7 _____ **Instruct clients in fitness test procedure.** (minimum 10x)
- 8 _____ **Contribute to, or conduct special intervention programs** (such as rehabilitation, obesity management, seniors exercise, diabetes management, stress management, smoking cessation, sport specific training, children's exercise, health maintenance/improvement, or similar). (minimum 10 hrs.)

Evaluation Procedures

- 9 _____ **Perform client evaluation procedures:** routine screening, contraindications, explain test protocol, informed consent, summarize information for physician/wellness professional. (minimum 15x)
- 10 _____ **Assess muscular strength and/or muscular endurance** using field, clinical, or laboratory procedures. (minimum 20x)
- 11 _____ **Assess aerobic fitness** using sub-maximal or maximal field, clinical, or laboratory procedures. (minimum 20x)
- 12 _____ **Assess flexibility** using field tests, flexometer, or goniometer. (minimum 10x)
- 13 _____ **Assess body composition:** skinfolds, BodPod or underwater weighing preferred. Bioelectric Impedance, BMI, or girth measurements are acceptable if the preferred methods are unavailable. (minimum 10x)

EXS 401 STANDARD (FITNESS & WELLNESS) COMPETENCY CHECKLIST (p.2)

14. **Assess blood pressure at rest and during exercise.** Insure that you demonstrate competence in measuring blood pressure on a variety of people (young and old, large and small), and that you can accurately measure blood pressure during a variety of exercise situations (treadmill, cycle, stepper, etc.). (minimum 20x each, rest and exercise)
15. **Assess heart rate at rest and during exercise.** Insure that you demonstrate competence in palpating radial and carotid pulse manually, and in the use of various electronic devices to measure heart rate. (minimum 20x each resting and exercising)
16. **Demonstrate ability to evaluate and appropriately stop an individual from exercising** based on American College of Sports Medicine criteria.
 - during fitness tests under supervision (minimum 10x)
 - during fitness tests as supervisor (minimum 10x)
 - during exercise sessions as supervisor (minimum 20x)
17. **Explain and monitor the use of the Borg Rating of Perceived Exertion (RPE) scale** during fitness tests and exercise sessions. (minimum 10x)

Exercise Prescription/Supervision

18. **Summarize and interpret fitness test data and prescribe an aerobic exercise program** for healthy individuals (minimum 20x)
19. **Summarize and interpret fitness test data and prescribe a resistance exercise program** for strength, endurance and/or power for healthy individuals (minimum 20x)
20. **Modify client exercise program.** Demonstrate ability to modify a client's exercise program according to changes in their health status, fitness level, or limitations. Should take into consideration ongoing monitoring of, and adjustment for, increases and decreases in flexibility, and aerobic and muscular capacity. (minimum 20x)
21. **Individual client exercise supervision.** Work one-on-one with clients to teach, assist, adjust, encourage, and motivate. (minimum 20x)

Emergency Procedures

22. **Know first aid and emergency procedures** during exercise testing, evaluation, and exercise sessions

B. OPTIONAL COMPETENCIES (A MINIMUM OF 5 ITEMS ARE TO BE COMPLETED)

1. Present 30 minute exercise-related topic at practicum site or in an OU course.
2. Counseling at-risk clients about exercise (minimum 10 hrs)
3. Small group discussion leader - exercise-related topic
4. Develop and administer educational programs or materials.
5. Attend nutritional counseling and exercise planning sessions for clients (minimum 5x)
6. Develop and supervise an exercise program for obese clients (minimum 5x)
7. Develop and supervise an exercise program for runners (minimum 5x)
8. Develop and supervise an exercise program for athletes in a sport (minimum 5x)
9. Modify exercise programs for: elderly, differing fitness levels, etc. (minimum 5x)
10. Testing and prescribing exercise for children. (minimum 5x)
11. Calibrate exercise testing equipment. (minimum 3x)
12. Counsel/refer clients regarding overuse injuries. (minimum 10x)
13. Conduct stress test protocols under supervision. (minimum 10x)
14. Measure oxygen consumption during exercise test. (minimum 5x)
15. Arm ergometry testing & exercise prescription. (minimum 5x)
16. Attend supplementary lecture or professional conference. (minimum 3 lectures or sessions)
17. Participation in programs for at least 10 hours beyond those in item 8 of the Essential Competencies
18. Develop and carry out an approved objective for a competency not listed above.

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EXS 401 ALTERNATE (STRENGTH & CONDITIONING) COMPETENCY CHECKLIST (p. 1)

Student's name: _____ Semester: _____ Year: _____

Students in a strength and conditioning internship must complete all items in section A – Essential Competencies and at least 5 items in section B – Optional Competencies. The internship supervisor should initial beside each competency when it is satisfactorily completed. The initialed competency checklist must be presented to the Exercise Science Program Director at the end of the internship during the exit interview.

A. ESSENTIAL COMPETENCIES (ALL ARE TO BE COMPLETED)

Professionalism and Ethics

- 1 _____ **Demonstrate Professional, ethical and legal competence.** This includes: demonstrate professional behavior; maintain client confidentiality; recognize and accept personal/professional limitations; engage in constructive self-change; serve as a health role model for clients; demonstrate concern for client privacy, modesty and anxiety; maintain confidentiality of client information; accept personal, cultural and professional diversity in working for positive change; follow legal and ethical guidelines for client management and referral.
- 2 _____ **Use appropriate interpersonal and communication skills** including: interact appropriately with health care professionals and with the client; demonstrate effective counseling and communication skills to facilitate behavior change

Teaching

- 3 _____ **Participate in client exercise, fitness, sport performance briefings/consultations with increasing responsibility** (minimum 5x)
- 4 _____ **Instruction in power lifts**, including guiding, assisting, correcting, and adjusting exercise activities, and demonstration of correct techniques for clients of various fitness levels. (min. 20x)
- 5 _____ **Conduct individual exercise sessions**, including guiding, assisting, correcting, and adjusting exercise activities. (minimum 20x)
- 6 _____ **Instruction in the use of exercise equipment**, addressing safety and effectiveness issues, spotting, and equipment adjustment for proper fit and load. (minimum 20x)
- 7 _____ **Instruction in Olympic lifts**, including guiding, assisting, correcting, and adjusting exercise activities, and demonstration of correct techniques for clients of various fitness levels. (min. 20x)
- 8 _____ **Equipment, test procedure instruction.** 1RM, anaerobic power, agility, etc. (prefer min. 5x)
- 9 _____ **Contribute to, or conduct special intervention programs** (such as plyometric, agility, power, children's exercise, senior's exercise, sport specific training, etc.). (minimum 10 hrs)

Evaluation Procedures

- 10 _____ **Perform client evaluation procedures:** routine screening, contraindications, explain test protocol, informed consent, summarize information for strength and conditioning professional. (min. 25x)
- 11 _____ **Assess muscular strength and/or endurance**, by field, or laboratory procedures. (prefer min. 10x)
- 12 _____ **Assess cardiorespiratory fitness**, by sub-maximal or maximal field procedures. (prefer min. 5x)
- 13 _____ **Assess flexibility**, using field tests, flexometer, or goniometer. (prefer minimum 5x)
- 14 _____ **Assess power.** (prefer minimum 10x)
- 15 _____ **Assess agility.** (prefer minimum 10x)
- 16 _____ **Assess heart rate at rest and during exercise.** Insure that you demonstrate competence in palpating radial and carotid pulse manually, and in the use of various electronic devices to measure heart rate. (minimum 10x each resting and exercising)

EXS 401 ALTERNATE (STRENGTH & CONDITIONING) COMPETENCY CHECKLIST (p. 2)

- 17 _____ **Demonstrate ability to evaluate and appropriately stop an individual from exercising** based on American College of Sports Medicine or National Strength and Conditioning Association criteria.
- during fitness tests under supervision (minimum 5x)
 - during fitness tests as supervisor (minimum 5x)
 - during exercise sessions as supervisor (minimum 10x)

Exercise Programming

- 18 _____ **Summarize and interpret fitness test data and prescribe a strength and conditioning exercise program** for healthy individuals (minimum 20x)
- 19 _____ **Summarize and interpret fitness test data and prescribe a resistance exercise program for strength, endurance and/or power** for healthy individuals (minimum 20x)
- 20 _____ **Implement/Guide training for clients.** Observe first, and progressively increase responsibility under supervision. (minimum 20x)
- 21 _____ **Modify client exercise program.** Observe first, and progressively increase responsibility under supervision. (minimum 20x)
- 22 _____ **Incorporate sport-specific elements into the training** (minimum 40x)

Emergency Procedures

- 23 _____ **Know first aid and emergency procedures** during exercise testing, evaluation, and exercise sessions

B. OPTIONAL COMPETENCIES (A MINIMUM OF 5 ITEMS ARE TO BE COMPLETED)

- 1 _____ Present 30 minute exercise-related topic at practicum site or in an OU course.
- 2 _____ Counseling at-risk clients about exercise (minimum 10 hrs)
- 3 _____ Small group discussion leader - exercise-related topic
- 4 _____ Develop and administer educational programs or materials.
- 5 _____ Lead group exercise (for example: boot camp) (10x)
- 6 _____ Diet and exercise planning, attend nutritional counseling (minimum 5x)
- 7 _____ Exercise programs for female athletes to prevent ACL problems (minimum 10x)
- 8 _____ Conduct specialized exercise test protocols under supervision. (minimum 3x)
- 9 _____ Adjust exercise program based on injury or medical history. (minimum 5x)
- 10 _____ Modify exercise programs for: elderly, differing fitness levels, etc. (minimum 5x)
- 11 _____ Testing and prescribing exercise for children. (minimum 5x)
- 12 _____ Calibrate exercise testing equipment. (minimum 3x)
- 13 _____ Counsel/refer clients regarding overuse injuries. (minimum 10x)
- 14 _____ Instruct in use of special exercise apparatus (eg. Smith machine, stability balls, Bosu balls, suspension training, etc.) (minimum 5x)
- 15 _____ Measure oxygen consumption during exercise test. (minimum 5x)
- 16 _____ Arm ergometry testing & exercise prescription. (minimum 5x)
- 17 _____ Attend supplementary lecture or professional conference. (minimum 3x)

Participation in programs not included in item 9 of the Essential Competencies:

- 18 _____ Participate in a football training program. (minimum 10 hrs)
- 19 _____ Participate in a basketball training program. (minimum 10 hrs)
- 20 _____ Participate in a track training program. (minimum 10 hrs)
- 21 _____ Participate in a swimming training program. (minimum 10 hrs)
- 22 _____ Participate in a volleyball training program. (minimum 10 hrs)
- 23 _____ Participate in a baseball training program. (minimum 10 hrs)
- 24 _____ Participate in a soccer training program. (minimum 10 hrs)
- 25 _____ Participate in a tennis training program (minimum 10 hrs)
- 26 _____ Student's own objective(s) (must be attached) approved by supervisor _____

APPROVED PRACTICUM SITES

Athletic Republic Midland (989) 923-1952

2205 Jefferson St.

Midland, MI 48640

Type: strength and conditioning, sport specific training

Cooper Institute (800) 635-7050

12330 Preston Rd., Dallas, TX 75230

Type: Preventive medicine center, corporate fitness, wellness

D1 Detroit (248) 333-1910

799 Denison Ct.

Bloomfield Township, MI 48302

Type: strength and conditioning, sport specific training

Detroit Skating Club (248) 332-3000

888 Denison Court

Bloomfield Hills, MI 48302

Type: Strength and conditioning, sport specific training

DMC Fitness Center (313) 745-9748

261 Mack Avenue

Detroit, MI 48201

Type: Health promotion/wellness, corporate fitness, personal training

FitnessQuest Training and Fitness Center (248) 625-6022

32 South Main Street

Clarkston MI 48346

Type: Fitness, personal training, orthopedic rehabilitation, sport-specific training

Franklin Fitness & Racquet Club (248) 352-8000

29350 Northwestern Hwy.

Southfield, MI 48034

Type: Health promotion/wellness, corporate fitness, personal training

Genesys Athletic Club (810) 606-7300

801 Health Park Blvd.

Grand Blanc, MI 48439

Type: Health promotion/wellness and fitness, personal training

Gotham Premier Personal Training (248) 731-7208

60 West Big Beaver Road, Ste. 100

Bloomfield Hills, MI 48302

Contact: Mike Micene, www.gothampremiertraining.com/,

batman13ny@gothampremiertraining.com,

Type: Health promotion/wellness and fitness, personal training

Great Lakes Athletic Club (248) 393-3085

3800 Baldwin Road

Orion, MI 48359

Type: Personal training, sport-specific training, fitness.

Health Fitness Corporation (Regional Sites)

Chrysler CTC Health Activity Center (248) 576-4321 or (248) 576-2803

800 Chrysler Drive, Auburn Hills, MI 48326

Type: Corporate Fitness, Wellness

GM SPO Fitness Center (810) 606-2348

Mail Code 484-394-028

6200 Grand Point Drive

Grand Blanc, MI 48334

Type: Corporate Fitness, Wellness

UAW-Ford Ernest Lofton Fitness Center (313) 323-1852 Fax (313) 845-3080

3001 Miller Road

Dearborn, MI 48121

Hills & Dales General Hospital (969) 912-6337

6190 Hospital Drive, #101,

Cass City, MI 48726

Type: Community health and wellness; Corporate wellness; Fitness and exercise

Hurley Health & Fitness Center (810) 262-7898 Website: <http://www.hurleymc.com/wellness>

411 E. 3rd Street

Flint, MI 48503

Type: Community health and wellness; Corporate wellness; Fitness and exercise; Health education; Nutrition; Special Populations.

In Motion Anytime (248) 627-7020

4 N. Ortonville Rd., Ortonville, MI 48462

Type: health club, personal training

Johnson & Johnson Health Management, Inc. (Regional Sites) (989) 636-3256

Dow Chemical Company Fitness Center

EDC Building, Room 21

Midland, MI 48674

Type: Corporate Fitness/Wellness

Level Fitness (586) 677-6500

55148 Van Dyke, Shelby Township, MI 48316

Type: health club, personal training

Life Center Plus (330) 655-2377

5133 Darrow Rd., Hudson, OH 44236

Type: Fitness club

MoveStrong (248) 601-6683

1135 West University Drive, Suite 450, Rochester Hills, MI 48307

Type: Medically-based health and fitness

New Species Athletics (248) 425-8706
2675 Nakota Street, Royal Oak, MI 48073
Type: health club, personal training

North Oakland Family YMCA (248) 370-9622
3378 E. Walton Blvd.
Auburn Hills, MI 48236
Type: Health promotion, personal training, fitness, wellness

Oakland University – Campus Recreation (248) 370-4910
Campus Recreation Center, Wellness/fitness Programs
Intern Director: Becky Lewis, M.S.
Type: Health promotion/wellness, personal training, fitness assessment, exercise programming

Oakland University – Strength and Conditioning (248) 370-2643
Department of Athletics, Strength and Conditioning Programs
Intern Director: Terry Sauerbry, Director of Strength and Conditioning
Type: Athletic training (it is preferred that you take EXS 503 – Human Performance Enhancement before starting this internship)

Pointe Fitness and Training (313) 417-9666
19556 Harper Ave., Harper Woods, MI 48225
Type: health club, personal training

Presbyterian Villages of Michigan (248) 334-4379
The Village of Oakland Woods
420 South Opdyke Road
Pontiac, MI 48341-3145
Type: Fitness/Wellness in Seniors facility

Pulse Fitness (248) 579-0363
616 N. Main Street
Royal Oak, MI 48067
Type: health club, personal training

Snap Fitness (586) 601-5335
26110 Crocker Blvd.
Harrison Township, MI 48045
Type: health club, personal training

SOLA Life & Fitness (Beaumont) (248) 267-5624 <http://www.solafitness.com>
1555 South Blvd.,
Rochester Hills, MI 48307
Type: Highly varied fitness/wellness; corporate; specialized individual and group programs; nutrition; rehabilitation.

South Oakland Family YMCA (248)547-0030
1016 W. Eleven Mile Rd
Royal Oak, MI 48067
Type: Health promotion, personal training, fitness, wellness

Sparrow Michigan Athletic Club (517) 364-8888

Sparrow Health Science Pavilion,
2900 Hannah Boulevard, East Lansing, MI 48823

Type: Health promotion/wellness, corporate fitness, personal training, sports medicine,
biomechanical analysis

Spectrum Health (989) 352-7211 Ext. 1745

Lakeview Community Wellness Center
423 N. Lincoln Ave., Lakeview, MI 48850

Type: Health promotion/wellness, primary prevention,
fitness, weight control, substance abuse, corporate programs.

Starting Line Health and Fitness (586) 770-6987

1771 W. Hamlin Road
Rochester Hills, MI 48309

Type: Personal training, strength and conditioning, sport-specific training

Strength Training and Recovery (810) 247-2102

859 Health Park Blvd.
Grand Blanc, MI 48439

Type: Strength/conditioning and adaptive sports for those with neurological disorders

2 SP Sports Performance (248)397-8945

29310 Stevenson Highway, Madison Heights, MI 48071

Type: Strength/conditioning, training for athletes, athletic performance enhancement

Total Performance Training Center (248) 608-0030

1136 South Rochester Road,
Rochester Hills, MI 48307

Type: Strength/conditioning, training for athletes, athletic performance enhancement

Tweak: The Athletic Edge (248) 593-1033

2135 Cole Street
Birmingham, MI 48009

Type: Training for athletes, biomechanics, athletic performance enhancement

The National Institute for Fitness and Sport (317) 274-3432 Ext. 238 <www.nifs.org>

250 University Boulevard, Indianapolis, IN 46202-5192

Type: Fitness assessment, health/wellness promotion, athletic performance enhancement,
corporate fitness.

University of Detroit Mercy - Strength & Conditioning (313) 912-2206

4001 W McNichols Road
Detroit, MI 48221-3038

Type: strength and conditioning, sport-specific training

University of Michigan Medical Center (734) 647-7888

Health Promotion Division, **M-Health**
3003 S. State Street, 2060 Wolverine Tower
Ann Arbor, MI 48109-1281.

Type: Corporate fitness, health promotion, wellness, personal training, fitness testing. **(NOTE:**
The Health Promotion Division of M-Health operates numerous corporate fitness and health
promotion sites in the metropolitan Detroit area.)

Verizon Wireless (248) 915-3427 FAX (248) 915-3431

26935 Northwestern Hwy
Southfield, MI 48033

Type: Corporate fitness, personal training, wellness and health promotion

Waltonwood Communities (5 sites in Metropolitan Detroit area) (248) 865-7773

Activities/Fitness Department (800) 250-7597
3250 Walton Blvd.
Rochester Hills, MI 48309

Type: Seniors exercise, program planning, facility management, wellness
counseling, program marketing.

Wellness Institute, Health and Fitness Center (231) 526-7773

Boyne Highlands Resort
600 Highlands Dr.,
Harbor Springs, MI 49740
Type: Corporate wellness

Xceleration (586) 855-1929

3951 Joslyn Road
Auburn Hills, MI 48326

Type: Personal training, strength and conditioning, sport-specific training

This form is to be Completed by the Practicum Site Supervisor at the End of the Practicum and Submitted Directly to:

Charles R. C. Marks, Ph.D.
DIRECTOR, EXERCISE SCIENCE PROGRAM
SCHOOL OF HEALTH SCIENCES
OAKLAND UNIVERSITY
ROCHESTER, MICHIGAN 48309-4401

EVALUATION FORM
SUPERVISOR'S EVALUATION OF STUDENT PRACTICUM PERFORMANCE

Name of Student _____

Program Director Dr. Brian Goslin

Practicum Site _____

Supervisor Completing Evaluation _____

Report Period _____ to _____
MO/DAY/YR MO/DAY/YR

Please evaluate the student according to the following categories. Space is also provided for written comments. Please cite specific examples that might clarify excellent or poor performance.

** Circle the Appropriate Number**

KNOWLEDGE OF FIELD

1. **Knowledge of Basic Sciences** (Integrates prior knowledge of basic science concepts and principles in a manner that is logical and consistent with sound professional judgement).

1	2	3	4	5	N/A
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Poor

Excellent

Comments _____

2. **Exercise Knowledge** (Demonstrates prerequisite exercise skills required for this practicum).

1	2	3	4	5	N/A
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Poor

Excellent

Comments _____

3. **Ability in Evaluating Client Exercise Program** (Prescribes proper course or action consistent with medical orders or with client fitness level).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

4. **Technical Ability** (Possesses and demonstrates proficiency in manual skills necessary to perform all procedures required for this practicum).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

PERSONAL QUALITIES

1. **Acceptance of Administrative Responsibilities** (Maintains legible records, performs other routine administrative duties in a timely fashion).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

2. **Relations with Clients** (Maintains professional rapport, protects confidence, communicates effectively).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

3. **Relations with Practicum Site Staff** (Works efficiently with staff and uses their skills appropriately).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

4. **Professional Attitude and Demeanor** (Gains and holds respect of clients and colleagues alike - maintains positive attitude towards both learning new material and the delivery of services).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

5. **Response to Constructive Criticism** (Willingly accepts and applies corrective comments, admits mistakes and learns from them, doesn't repeat mistakes).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

6. **Leadership Capabilities** (Willingly accepts responsibility for client care).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

7. **Grooming and Appearance** (Conforms with dress code, looks and presents him/herself in a professional manner at all times).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

OTHER

1. **Progress in the Program** (Progressed satisfactorily at a rate consistent with others at his/her level).

1	2	3	4	5	N/A
Poor			Excellent		

Comments _____

OVERALL ASSESSMENT (Taking Everything Into Account)

1	2	3	4	5	N/A
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OVERALL COMMENTS (Please provide any other information that may not have been specifically asked for but is helpful in evaluating this student).

 (Date)

 (Supervisor's Signature)

This form is to be Completed by the Student and Submitted Directly to:

**Charles R. C. Marks, Ph.D.
DIRECTOR, EXERCISE SCIENCE PROGRAM
SCHOOL OF HEALTH SCIENCES
OAKLAND UNIVERSITY
ROCHESTER, MICHIGAN 48309-4401**

STUDENT'S EVALUATION OF THE PRACTICUM SITE

Student Name: _____

Program Director: Dr. Brian Goslin _____

Practicum Site: _____

Semester of Enrollment in this course: _____

Please rate the statements below on a scale of 1 through 5, using the following criteria:

- 1 = Strongly disagree
- 2 = Disagree
- 3 = Neither agree nor disagree
- 4 = Agree
- 5 = Strongly agree

1. _____ I received an adequate orientation to the facility.
2. _____ My supervisor possessed qualities I expected him/her to have as a health professional and student supervisor.
3. _____ I was given an appropriate amount of supervision.
4. _____ My objectives for this affiliation were met.
5. _____ I felt expectations of me were at my level.
6. _____ I was able to integrate the knowledge I gained in the classroom into the practicum environment.
7. _____ My academic preparation was adequate.
8. _____ I feel this was a valuable learning experience.
9. _____ I would recommend that students use this facility again.

OVER - Complete the opposite side of this form

Please provide a brief written evaluation of this practicum site, including the things you like most about it, the things you liked least about it, and how you feel it could be improved.

EXS Practicum Handbook 1608.doc