*If the following information has changed, please make the appropriate corrections.*

**Personal Information:**

**Name:**

**Present Job Title:**

**Degree:**

**Agency:**

**Program**:

**Address:**

**Direct Telephone Number:**

**Best Time to Contact You:**

**Email Address:**

**Training:**

**Have you participated in any Field Instructor Training?**

 **BCWEP -** **SIFI -**

**Have you been a Field Instructor before?** Yes\_\_\_\_\_ No\_\_\_\_\_

 Years of experience\_\_\_\_\_

**Please provide details:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Field Instruction:**

Current student(s) you are supervising\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for your time.**

**Please fax to Doug Deane, Coordinator of Field Education, at 609-626-5559**