

PRACTICUM PLACEMENT POSITION DESCRIPTION

The Ohio State University College of Public Health

This document will advertise the practicum to interested students. Specifics of the Field Practice Placement experience are to be negotiated between the agency, the student, and the faculty advisor from The OSU College of Public Health. Please include any literature that describes the work of your agency.

ORGANIZATION INFORMATION

Organization/Agency Name: The Research Institute at Nationwide Children's
Department: Pediatrics
Preceptor's Name: Peter J. Gamore Title: Associate Professor, Pediatrics
Preceptor's Address: 700 Children's Drive W310 Phone Number: (614) 722-4529
Columbus, OH 43205 Fax Number: (614) 722-4147
Preceptor's Email: Peter.Gamore@nationwidechildrens.org Contact Person: Mary Smith
(other than the Preceptor)

PRACTICUM DETAILS

Site/Location: _____
(if different than address above)
Practicum Dates: Flexible to _____ Hours of Work Per Week: Flexible
month/day/year month/day/year
Salary/Reimbursements/Expenses (If Available): None currently

POSITION DESCRIPTION

Project Title: Translation Research in Neonatology
Description of the Project: (Content/Tasks, and Skills, Knowledge and Experience Required)
Several opportunities to perform clinical, translational, or basic research as well as QI initiatives in the OSU MC NICU and NCH MAC + CICU'S.

(Feel free to enclose a more detailed statement regarding possible projects that a student may work on as well as any literature about your organization.)

Request student specializing in (Check all that apply)

<input checked="" type="checkbox"/> Biostatistics	<input checked="" type="checkbox"/> Epidemiology
<input checked="" type="checkbox"/> Clinical Investigation	<input type="checkbox"/> Health Behavior & Health Promotion
<input type="checkbox"/> Environmental Health Sciences	<input type="checkbox"/> Veterinary Public Health
<input type="checkbox"/> Health Services Management & Policy	

Special Requirements/Comments: _____

Preceptor's Signature: _____

Date: 8/21/09

PLEASE RETURN THIS FORM TO:
Practice Education and Career Services

Office of Academic Programs
Practice Education & Career Services
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