



## **Fieldwork Preference Form**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Hometown: \_\_\_\_\_

Additional geographical locations to be considered:

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Preferred programs or facilities:

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Outpatient:

Home health

Community based:

Mental Health:

Content Area that you are MOST confident:

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Content Area that you are LEAST confident:

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1. What pace of a work environment do you find you work best/are most comfortable in?

|            |   |               |   |           |
|------------|---|---------------|---|-----------|
| 1          | 2 | 3             | 4 | 5         |
| Fast Paced |   | Moderate Pace |   | Slow Pace |

2. How much do you like to be challenged when you are learning something new?

|                         |   |                          |   |                                   |
|-------------------------|---|--------------------------|---|-----------------------------------|
| 1                       | 2 | 3                        | 4 | 5                                 |
| Complex and Challenging |   | Some level of complexity |   | Minimally challenging and complex |

3. Please indicate any particular facilities that should be avoided