



Professional Practice Checklist

Name:

UID:

Host Organization:

Start Date:

Future Home/Cell Phone Number:

Future Home Mailing Address (if known):

Instructions: Please check each item as completed and sign when finished. If an item does not apply to you, leave it blank. Submit this checklist via email to Program Coordinator TWO WEEKS before your start date or by August 1 - whichever comes first. Timely and accurate completion of all documentation is part of the assessment for your professional practice. Please retain a copy for your own records.

- 1. Complete [Registration Request form](#).
You must complete other degree requirements by posted deadlines (e.g., approved capstone proposal and project OR approved thesis proposal and defense, BOTH including IRB protocol if applicable, PLUS Degree Audit form and Application to Complete Degree forms both due Spring of your second year).
You are required to submit a copy of your final capstone project or thesis to the [digital repository](#).
- 2. Record reporting deadlines received from Stevenson Center.
- 3. Create an account and enter your professional practice as an internship in [Hire-A-Redbird](#), using instructions from [our website](#).
- 4. Complete Fall Financial Responsibility Agreement on the to-do list in your student portal. **You must do this EVERY SEMESTER or your registration will be blocked. Please be diligent.**
- 5. Set up Direct Deposit with Student Accounts (different than Direct Deposit with HR). [Visit this link for Instructions](#)
- 6. Change mailing address with Office of the University Registrar (My Illinois State, Moulton 107 with photo ID, or call 309- 438-2188).
- 7. Return your keys to [Facilities](#) if you are moving out of town. If you keep your keys, it is your responsibility to return them at the end of your placement.
- 8. Complete the [Graduate School's Learning Plan](#).
- 9. Complete the [Graduate School's Tuition Waiver Application](#). **You must do this EVERY SEMESTER or your registration will be blocked. Please be diligent.**
- 10. Complete 1st Year feedback surveys of the [ACED Sequence](#) and of your [Academic Department](#).

FOR AMERICOPS MEMBERS ONLY -- See Assistant Director for Questions --

- A. Complete PERS 944 Form
- B. Complete AmeriCorps Criminal History Authorization Form.
- C. Complete ISU AmeriCorps Application Certification Form

Signature:

DATE: