**Journal of Experiences in Occupational Therapy**

**Saint Louis University Department of Occupational Science and Occupational Therapy**

**Applicant Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Facility** | **Location**  **(city)** | **Description of Facility** | **Date and**  **Number of Hours** | **Summary of Experience** |
|  |  | * Hospital * School * Nursing Facility * Outpatient Clinic * Home Health * Mental Health * Community | **/ /**  **\_\_\_\_\_ hours** |  |
|  |  | * Hospital * School * Nursing Facility * Outpatient Clinic * Home Health * Mental Health * Community | **/ /**  **\_\_\_\_\_ hours** |  |
|  |  | * Hospital * School * Nursing Facility * Outpatient Clinic * Home Health * Mental Health * Community | **/ /**  **\_\_\_\_\_ hours** |  |