

Clinic Curriculum Outline

2009

Name of Clinic: _____
Clinic Instructor: _____ Date of Clinic: _____ Location: _____

I. YOUR GOALS (OUTCOMES) FOR THE CLINC

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

II. MATERIALS NEEDED: (List: Handouts, books, magazines, computer, projector, PowerPoint, etc)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

III. CURRICULUM CONTENT (What will be taught):

IV. PLANNED ACTIVITIES AND SCHEDULE

After the clinic, please make any revisions and turn this form with your other papers work, including handouts, evaluations and sign up sheet.