DEACON FORMATION FIELD EDUCATION
SUPERVISED FIELD EXPERIENCE LEARNING AGREEMENT

Name _________________________________    Year _________    Semester _________

At the beginning of the academic year each student confers with the director of field education and his local field supervisor in determining the experiences that would benefit him in his formation. In developing the learning agreement students should assess themselves in a number of ways. They should take an honest look at their previous experience, their current skills and abilities, and their need for further development. Objectives are predictive behavioral statements. The students’ objectives should detail what they want to be able to do when they finish their field education experience. Objectives indicate what skills and behaviors students need to learn in order to achieve their goals. The learning agreement is to be turned in to the director of field education by the end of the academic semester.

Total number of hours ______ Log the hours spent during the assignment in the journal along with the location and activity

Ministry area (see Table): ________________________________

Assignment description: ______________________________________________

Agency or parish providing supervision: _________________________________

Location: ___________________________    Local supervisor: ___________________________

E-mail: ___________________________    Phone: ___________________________

Start date: ___________________________    End date: ___________________________

Learning Objectives1: ______________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Acknowledgments:

Student: ___________________________    Signature: ___________________________    Date: ______

Local Supervisor: ___________________________    Signature: ___________________________    Date: ______

Director of Field Education: ___________________________    Date: _____________

1 For example, WHAT: “This experience in [name of ministry/program], will be ministry in [Area of Ministry], in the [Scope/Location], to [Level of Involvement] by [name the activity]. This will involve [# times, # hours each, time period].” WHY: “I have a personal goal to [name it]. This experience is intended to develop my ministry of [name of area] by [this specific field activity] to [behavior/skill to develop]. At the end of this assignment, I will be able to [specific way of using this behavior/skill].