

EMU Distance-Online Coordinated Program in Dietetics  
**Preceptor Commitment Form**  
(ACEND Standard 7- Preceptor Qualifications)

**DIRECTIONS:** Read the following information and complete the form on the reverse-side of this document.

Thank-you for considering the role of Preceptor for Eastern Michigan University's fully distance-online Coordinated Program in Dietetics. The student you are considering is applying to or currently is in our distance education program. To provide this Experience at your site, please consider your ability to commit to and perform the following for the distance-online student's Supervised Practice Experiences:

- Be a Registered Dietitian (for at least one year) with proof of current registration for all Nutrition Therapy and Community experiences or a qualified Food Service Director/Manager/Supervisor for all Food Systems Management experiences.
- Be currently employed at the sponsoring facility and be present during the scheduled practice experience(s) or have another similarly qualified professional supervising the student in your absence.
- Assure the student will be able to accomplish all the learning experiences outlined in the curriculum materials provided. EMU instructor will provide evaluation forms and syllabus to the preceptor to guide the planning for this experience. Students must meet the 2017 ACEND Standards for this experience.
- Be responsible for the scheduling of activities for the student. Scheduling of the Supervised Practice Experiences is planned between student and preceptor, at the preceptor's convenience. The student contacts you to set this up. It must take place within the designated semester.
- Conduct an evaluation of the student (using the provided Learning Outcome Tool evaluation form) at the close of the Experience.
- Act as the point of contact in the facility for the course instructor, Clinical Coordinator and the Program Co-Directors.

If the student is admitted into or currently is in our Coordinated Program in Dietetics, Eastern Michigan University will provide an affiliation agreement we request be signed by both parties, before students begin their Supervised Practice Experience at your site. If your site is willing to consider it for signing, please check YES, we are willing to review the EMU affiliation agreement for signing below. If your site requires *only* their own affiliation agreement form be used, please indicate by checking NO, we will provide our own agreement form for EMU's consideration on the following page. If second option is checked, please email attached form (Word document is preferred) to Diane Reynolds at [dreynol2@emich.edu](mailto:dreynol2@emich.edu) and include your contact person's information. It will be reviewed by our program and sent to EMU Legal Affairs for consideration. *Thank-you!*

***Continued on Reverse Side***

EMU Distance-Online Coordinated Program in Dietetics

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Name of Applicant/Student:

Preceptor Name & Credentials:

Name of Employer/Facility (Include parent company if applicable):

Facility Address (Street, City, State, Zip):

Daytime Phone Number:  Email:

Highest Degree Achieved:  CDR Registration #:

Licensure/Certification required for your role as practitioner:

Have you previously supervised students/interns (check): Yes  No

Number of years employed at facility:  Hours worked/week:

EMU 3 digit course number(s) for this experience (REQUIRED):

Provide a very brief description of your facility (i.e. mission or population served):

Describe continued competency (CPEs or other professional development) that you have completed within the past seven years:

Contact Name for Affiliation Agreement:

Phone:

E-mail:

\_\_\_\_\_ YES, we are willing to review the EMU affiliation agreement for signing.

\_\_\_\_\_ NO, we will provide our own form for EMU's consideration.

Preceptor Signature: \_\_\_\_\_