HNF 445: FOODSERVICE MANAGEMENT
PRACTICUM
Fall Semester 2011 & Spring Semester 2012

All students planning to enroll in HNF 445 will need an override to enroll in the approved section of the course. After receiving the override, students may enroll in HNF 445 during the normal enrollment period.

Enrolling Steps:

1. HNF 445 is restricted to seniors in dietetics and to graduate students in human nutrition that are completing the didactic requirements for dietetics. HNF 440, Foodservice Operations, is a pre- or co-requisite course.

2. To obtain your form either pick it up in room 106 Trout FSHN or print from the FSHN web site (http://fshn.msu.edu/) and fill it out as accurately and thoroughly as possible. The form will be used for foodservice placement and to provide the foodservice manager and/or supervisor with background information about your experiences. The completed form is absolutely necessary for enrollment in HNF 445. **No exceptions!**

3. Return the completed form to Ms. Cherie Perkins in Room 106 Trout FSHN Bldg. Ms. Perkins will then give you the override into HNF 445 during normal April enrollment.

4. Students failing to enroll in HNF 445 during April for the following academic year risk being closed out of the course. This is a required course to graduate. Space is very limited.

5. If you are unable to enroll in advance due to financial aid/enrollment hold reasons, inform the instructor as soon as possible so that a place may be reserved for you before all of the practicum sites are filled.
HNF 445 FOODSERVICE MANAGEMENT PRACTICUM

NAME ___________________________ Student Number ___________ Phone # ___________________________

Local Address _______________________________ E-mail _________________________________

Anticipated Graduation Semester ___________________________

Please indicate which Semester you would like to take HNF 445:

Fall, 2nd half, section 301 ______

Spring, 2nd half, section 301 ______

Your First Name as you would like it to read on your class name tag: ____________________________

Practicum Site Preference: (Check [✓] all the sites that you would like to work in.

Note: You must have a car or reliable transportation to be placed off campus. Do you have a car? YES ____ or NO ____

Placement requests will be considered, so please indicate which neighborhood you prefer.

_____ 1. Brody Neighborhood

_____ 2. Kellogg Center

_____ 3. Off-Campus Sites

_____ 4. East and River Trail Neighborhoods (Akers, Holmes, Hubbard, McDonel, Owen)

_____ 5. Red Cedar, West Circle and Shaw Neighborhoods (Snyder/Phillips, Yakely Shaw)

_____ 6. South Neighborhood (Case, Holden, Wilson, Wonders)

Note: If you are a student supervisor in a MSU Residence Hall and are interested in completing the practicum requirement on your own and supervised by your manager, please indicate the name of the manager willing to work with you ______________________.

(Manager's Name)
**Reason for hall preference:** (e.g. currently living near chosen hall, easy to walk to that hall, on bus line, would like experience working with population):


**Current employment:** If you are currently working in a MSU foodservice, which hall employs you?


**FOODSERVICE EXPERIENCE**
List your restaurant and campus, hospital and/or nursing home foodservice experience. Please fill out accurately.

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<tr>
<th>LOCATION</th>
<th>JOB TITLE &amp; GENERAL RESPONSIBILITIES</th>
<th>LENGTH OF TIME WORKING IN THIS SETTING</th>
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List your supervisory and/or management experience in a foodservice setting.

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List your experience in planning, executing and evaluating a food event in a foodservice setting.

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List your experience in food and supply procurement in a foodservice setting.

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What has been your most meaningful foodservice experience (volunteer or paid employee)?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

What do you hope to gain from the MSU Residence Hall Foodservice Experience?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

After the course instructor has reviewed this form and the hall assignment has been made, the form will be forwarded to your assigned residence hall foodservice manager so he/she can review your foodservice.