

FERPA \_\_\_\_\_

## Chemistry & Biochemistry

Added \_\_\_\_\_

### PRECEPTOR APPLICATION FOR CHEM 151/152

Students, please entirely complete this form in consultation with your Supervising Instructor. Please refer any questions to Dr. Amy Graham via email at [grahama@arizona.edu](mailto:grahama@arizona.edu). This form is for department records. All adjustments to the form will be made via email before any enrollment changes can be completed. You should have a specific course and instructor in mind when requesting a preceptorship. [Carefully read the CBC Undergraduate Preceptor Policies.](#)

**\*First-time preceptors will be required to attend a pre-semester orientation for new preceptors**

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_

Student Phone Number \_\_\_\_\_ Student UA Email \_\_\_\_\_

Major \_\_\_\_\_ Minor \_\_\_\_\_ UA GPA \_\_\_\_\_

Class (circle one)      Freshman      Sophomore      Junior      Senior

Attendance at a weekly content prep session is expected for first-time on-sequence preceptors in 151 and/or 152. Please select the weekly meeting time that fits in your schedule:

\_\_\_\_ Section 001 Monday 4:00pm (on Zoom)    \_\_\_\_ Section 002 Tuesday 4:00 pm (on Zoom)    \_\_\_\_ Section 003 no meeting

Participation in preceptor training is expected for all first-time preceptors.

#### Please indicate the Preceptor Course

291     291H     491     491H    required cumulative GPA 3.0

Number of Preceptor Units (1, 2, or 3) \_\_\_\_\_ Semester (FA/SP) \_\_\_\_\_ Year \_\_\_\_\_

Course number (e.g., CHEM151 or CHEM 152) \_\_\_\_\_ Course section (e.g., MWF 9:00) \_\_\_\_\_

Supervising Instructor (Circle one): Daly    Graham    Hidalgo    Perera    Talanquer    Other: \_\_\_\_\_

Supervising instructor UA email \_\_\_\_\_ Instructor phone number \_\_\_\_\_

This portion is to be completed in consultation with the Supervising Instructor and/or Dr. Amy Graham ([grahama@arizona.edu](mailto:grahama@arizona.edu)).

**Required Duties** (check all that apply; at least one box must be checked under each unit section, based on the number of units requested above):

#### One Unit requires:

- Attendance at all lectures and participation as arranged with the instructor.
- Participating in a weekly content prep session for first time preceptors (for on-sequence only)
- Attendance at weekly meetings with the instructor and/or TA
- Other \_\_\_\_\_

#### Two Units requires above responsibilities plus one option below:

- Holding office hours (minimum of 2 hours per week)
- Instructional Manager
- Other \_\_\_\_\_

#### Three Units requires above responsibilities plus:

- Select one additional option from the "Two Units."
- Completion of a Special Project or additional duties (specify on Special Project Application)
- Learning Researcher
- Other \_\_\_\_\_

## Guidelines for Preceptorship

<https://cbc.arizona.edu/education/cbc-undergraduate-studies/preceptor-program>

1. Notify the course instructor about your interest in becoming a preceptor and complete the preceptor contract together.
2. **FERPA training (for Instructors and Instructional Support Teams) must be completed online with a completion certificate emailed to Olivia Mendoza ([omendoza@arizona.edu](mailto:omendoza@arizona.edu)).** You will not be enrolled without the successful completion of this training. To access the training, click on Tutorial at the following website: <https://registrar.arizona.edu/privacy-ferpa/ferpa-training>
3. A student may not be a preceptor in more than one course per semester.
4. The enrollment fee for Preceptorship credit is calculated at the same rate as for other credit courses.
5. Students should enroll within a week after the term commences, (CBC department deadline).
6. Students must complete the required 45 hours of course work per credit unit before the last day of the term. The last day to register for Preceptorship in Fall, Spring and Summer Semesters without incurring a late charge is the same as for all other courses; see [University Fees](#) & [Bursars Information](#).
7. Honors students requesting Honors Preceptorship and the faculty who agree to supervise need to initial the contract form and can consult the [Guidelines for Honors Preceptorship](#).

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**REQUIRED SIGNATURES—Final confirmations will occur via email with typed name and date.**

Student \_\_\_\_\_

Date \_\_\_\_\_

Please "save as" with **Student last name\_First initial\_Instructor Last Name Chem 15X Preceptor FXX**  
**For example, Contreras\_D\_Graham Chem 15X Preceptor FXX**

Supervising Instructor \_\_\_\_\_

Date \_\_\_\_\_

Preceptor Coordinator \_\_\_\_\_

Date \_\_\_\_\_

### Questions? Contact:

Olivia Mendoza      [omendoza@arizona.edu](mailto:omendoza@arizona.edu)      520.621.3868

Amy Graham      [grahama@arizona.edu](mailto:grahama@arizona.edu)      520.621.3428



THE UNIVERSITY OF ARIZONA  
COLLEGE OF SCIENCE  
COLLEGE OF MEDICINE TUCSON

Chemistry  
& Biochemistry