

# Memorandum

DATE: Date: \_\_\_\_\_  
 TO: Director of Recreation  
 FROM: Student: \_\_\_\_\_  
 SUBJECT: **Completion of Out-of-Class Requirements**

I have completed the out-of-class requirements for the Recreation and Park Management program. As required, I have completed the summary worksheet below and have attached all of the necessary forms and copies of receipts and certificates where applicable. Please review these materials and submit a grade for me for the course, RECR 497, Out-of-Class Experiences.

## SUMMARY WORK SHEET - OUT-OF-CLASS REQUIREMENTS

**CONFERENCE REQUIREMENT:** You are required to attend a state, regional or national professional conference during your Junior or Senior year. Attached is a completed Professional Conference Form (Form: OCPCF) along with copies of the required documentation.

Conference: _____
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**EXPERIENCES:** A minimum of three experiences are required. Attached is a completed Out-of-Class Experience (Agency) Forms (Form: OCAGENCY) for each experience completed along with copies of the required documentation.

Out-of-Class Experiences	Number Hours per Experience
Experience #1: _____	
Experience #2: _____	
Experience #3: _____	
Experience #4: _____	
Experience #5: _____	
Paracticum Experience Form: check here [ ] if attached	
TOTAL HOURS:	

**CPR AND FIRST AID REQUIREMENT.** Attached is the CPR and First Aid completion form (Form: OCCPR), including copies of certificates. Indicate below the dates you completed the courses and the expiration dates of your certificates.

<b>CPR:</b> Completion Date: _____; Expiration Date: _____ <b>First Aid:</b> Completion Date: _____; Expiration Date: _____
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