

For more information, please contact ghpadvising@ucsd.edu or visit globalhealthprogram.ucsd.edu

Global Health Program Field Experience Verification

Upon completion of each Global Health field experience you are required to provide the Global Health Office with verification. Complete Option A or B Below. *Show your supervisor this log so that they can verify the amount of hours you have completed.

Option A: Have supervising faculty or mentor complete this section. Submit along with this log to ghpadvising@ucsd.edu or bring to the GHP Office.

Organization: _____

Supervisors Name: _____

Title: _____

Email: _____

Phone: _____

Beginning Date of Field Experience: _____

End Date of Field Experience: _____

Hours Completed: _____

Short description of activities and responsibilities (use back if necessary):

I verify that the following student has completed a component of their field experience under my supervision.

X _____ / _____
DATE

Option B: Submit Alternative Documentation

Submit a letter on official letterhead or official email from your direct supervisor in the program. You are not required to submit this log for verification. Please have your supervisor send to ghpadvising@ucsd.edu

The letter or email must include:

- 1) a short description of your activities and responsibilities
- 2) the number of hours you completed,
- 3) the begin/end dates of the activity
- 4) the supervisor's signature, title, and contact information.