

# Practicum Placement Preceptor Interest

Thank you for your interest in hosting a professional Master of Health Informatics (MHI) student practicum placement. For more information please see our FAQ <http://ihpme.utoronto.ca/academics/pp/mhi/practicum/>

Please email the completed form to:  
Aileen O'Dowd, Program Assistant - [ihpme.mhi.program@utoronto.ca](mailto:ihpme.mhi.program@utoronto.ca)  
A job posting will be generated from this form for your final review and approval.

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## Contact Information

First Name / Last Name	
Position Title	
Email Address	
Telephone Number	

## Preceptor Contact Information

Same as contact

If other, please complete below.

First Name / Last Name	
Position Title	
Email Address	
Telephone Number	

## Organization Information

Organization Name	
Department Name	
Address	
City	
Province	
Postal Code	

## Placement Information

Placement Job Title	
Number of Positions	
Materials for Submission (resume/cover letter)	
Placement Duration (start/end dates)	
Submission Deadline	

Please indicate whether the placement is paid or unpaid. Payment is not a requirement of the practicum course, but since MHI professional students are not otherwise funded it may effect individual decisions to apply.

Paid      Unpaid

If the placement is paid, please indicate the amount. We recommend \$3000.00/month/student. If funding is intended but unknown or pending, please note.

How will the student be paid? If TA4 Income, a separate agreement will need to be completed.

T4 Income (contract/wages)  
T4A Income (stipend/honorarium)  
The student will not be paid

Brief description of the practicum project.

Brief description of the roles/functions you expect the student will be engaged in.

Pre-requisite skills, competencies or experiences you are looking for (please note whether mandatory or preferred).

Brief overview of your organization, department or project (vision, mission, goals).

How and where should applications be submitted? Please give email or online address for submission.

Thank you for your support of the Master of Health Informatics program.

**Cristina Tassone, MHI**  
Practicum Instructor  
Master of Health Informatics (MHI) Program  
Institute of Health Policy, Management and Evaluation  
University of Toronto  
155 College Street  
Toronto, ON M5T 3M6

E: [cristina.tassone@utoronto.ca](mailto:cristina.tassone@utoronto.ca)

## **Vaccination Requirements**

What are the vaccination requirements for this position?

What format will this placement be?

In person

Virtual

Hybrid

If the placement will be in person, what is the office location?