

**Northwestern Undergraduate Pre-Physical Therapy Scholars Program (NUPPT-SP)  
Doctor of Physical Therapy (DPT) Application**

**Physical Therapy Experience**

*(please complete a separate form for each PT experience)*

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_

STREET, CITY, STATE, ZIP, COUNTY

**Supervising Physical Therapist**

Name: \_\_\_\_\_ PT License #/State: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Experience**

Paid Date(s): \_\_\_\_\_

Volunteer Hours Completed: \_\_\_\_\_

**Setting** *(check all that apply)*

- Acute Care
- Rehab/Sub-Acute Rehab
- Extended Care/Nursing Home
- Outpatient Clinic
- School/Pre-School
- Wellness/Prevention/Fitness
- Industrial/Occupational Health
- Home Health
- Other: \_\_\_\_\_

**Specialty Area(s) Observed** *(check all that apply)*

- Cardiovascular & Pulmonary
- Clinical Electrophysiology
- Geriatrics
- Integumentary (wound management)
- Neurology
- Pediatrics
- Sports
- Women's Health
- Other: \_\_\_\_\_