**Marshall University Distance Dietetic Internship**

**Preceptor Commitment Letter (Format Example)**

**Intern Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I am willing to serve as a preceptor during your:**

**(Please circle or identify one of the following):**

* **Medical Nutrition Therapy Rotation**
* **Community Nutrition Rotation**
* **Foodservice Management Rotation**
* **School Nutrition Education Rotation**

**Please note that this commitment is contingent upon specific requirements of the facility being met.**

**Dates of your rotation your rotation will include:**

* **From: \_\_\_\_\_\_\_\_\_**
* **To: \_\_\_\_\_\_\_\_\_**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Facility: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**