

UNIVERSITY *of*
NORTHERN COLORADO



Practicum II Policy & Procedure Manual

APCE 619

Master's Degrees in Clinical Mental Health and School
Counseling

Fall 2018

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GRADUATE PRACTICUM II MANUAL

Clinical Mental Health and School Counseling Programs

INTRODUCTION

This manual includes requirements and procedures to be followed by those involved in working with Practicum II students on location in schools and community agencies. Its primary purpose is to formalize and enhance the arrangements among the professional counseling program faculty, faculty and doctoral student supervisors, practicum on-site supervisors, and graduate student counselors enrolled in practicum at the University of Northern Colorado. The practicum activities and requirements are based on the American Counseling Association (ACA), the American School Counseling Association (ASCA) and the guidelines of the Council for Accreditation of Counseling and Related Educational Programs (CACREP, a corporate affiliate of the American Counseling Association), Colorado licensure requirements, the National Board for Certified Counselors (NBCC) standards, and professional counseling program faculty recommendations.

We realize that a practicum site may not be able to provide access to all the activities desired by the student because of the differences that exist between individuals and institutions. The practicum agreement will document the activities that can be provided at that site and supervised by the signatory. The purpose of the practicum agreement is to provide a uniform practicum experience for students, as well as guidance for supervisors entrusted with providing clinical and administrative supervision.

TERMINOLOGY

This section provides the student and site supervisor a list of commonly used terms and phrases.

| | |
|--|--|
| Practicum Student | A student in good standing who is enrolled in APCE 619, possesses professional liability insurance, and has executed a practicum agreement with a site or sites. |
| Site Supervisor | A licensed mental health practitioner with at least 2 years of supervisory experience who has signed the practicum agreement and who will provide formal weekly (one-hour) face-to-face clinical supervision, oversight, evaluation, and mentoring to the practicum student. |
| University Practicum Supervisor | A UNC faculty member who is the primary contact for the student and for the site supervisor. This person conducts student site visits and supervises one hour of individual supervision and an average of 1.5 hours of group supervision weekly. Individual supervision may be with an advanced doctoral student, under faculty supervision. |

| | |
|--|---|
| Practicum Agreement | A formal, legal document that is executed between the University, the practicum student, and the practicum site. This document enumerates the duties and expectations of all parties and institutions. This document is the formal agreement for the services to be provided by the practicum student, the site and the University Practicum Supervisor. |
| Practicum Prerequisites and Co-Requisites | Identified courses within the students program that must be completed prior to, or concurrent with, engaging in the APCE 619 (Individual Practicum II) experience. |
| Direct Hours | Hours in face-to-face or direct contact with the client (may include therapeutic phone calls). These hours do not include client or case staffings where the client is absent. |
| Indirect Hours | Hours completed that contribute to the client's treatment (record keeping, case staffings, consultation with other providers, and paperwork) and to practicum student development (workshops, staff development, staff meetings, and readings related to client needs). This cannot include travel time or time with the University Practicum Supervisor. |
| Individual Clinical Supervision | The weekly one-on-one supervision with the site supervisor of record. Students must receive an hour a week of formal individual supervision by the site supervisor. Students may also engage in group or triadic supervision to add to, but to not replace individual supervision. Supervision is logged as an indirect hour or hours. |
| Group Supervision | Students are required by CACREP standards to attend group supervision with the University Practicum Supervisor (an average of 1 ½ hours per week). This supervision may be done in more intense formats (3 hours every other week) and must occur on a regular basis. Individual supervision with the University Site Supervisor cannot be substituted for group supervision. |
| Doctoral Student Supervisor | An advanced doctoral student who is supervised by the University Practicum Supervisor for provision of individual supervision of practicum students. |

PRACTICUM POLICIES

Sequence and Schedule Requirements

Practicum II is field-based. Practicum II is viewed as a scaffolded experience to be completed after the successful completion of Practicum I and prior to registering for, and the completion of Internship hours. See the catalog for specific pre-requisites. Practicum II on-campus is a *semester-long experience*, and a *semester-long* commitment to the practicum site. Practicum II in Denver and Colorado Springs is a *minimum of a 10 week experience*, and a *minimum of a 10 week* commitment to the practicum site. **For all students, the practicum experience consists of a minimum of 8 hours and a maximum of 12 hours per week.**

Qualifications

No Practicum II experience will be approved for which the student has not been academically prepared. Student readiness to enter 619 will also be considered.

Unsatisfactory Evaluations

In the event the on-site Practicum II supervisor gives a student a negative or unsatisfactory written evaluation, the Practicum II instructor will advise the Professional Counseling Program Faculty (PCPF) of the concern and request that there be a discussion during a faculty meeting. The PCPF, along with the Practicum II instructor, will arrange for a meeting with the student in order to review his or her specific situation. The PCPF, along with the Practicum II instructor, will determine if the student may continue in Practicum II, if the student should receive a grade of unsatisfactory, and if the student will be required to do additional practicum hours. Appropriate courses of action will be established.

Professional Counseling (PC) students who receive a grade of unsatisfactory or who withdraw must have written permission from their Practicum II instructor and the program academic coordinator to be permitted to enroll again for Practicum II. The Practicum II instructor and the program academic coordinator will determine when the student may retake the course. If the coordinator and the instructor are the same individual, the Professional Counseling Program Faculty will appoint a second faculty member.

Ethical Behavior

Students are expected to demonstrate the highest level of ethical behavior, as set forth by the American Counseling Association (ACA) and the American School Counselor Association (ASCA). Unethical behavior will not be tolerated and will be considered cause for dismissal at any time during the student's program. If students encounter ethical dilemmas or ethically questionable behaviors they are to address concerns with their site supervisor and university supervisor.

Concurrent Employment

The Professional Counseling Program Faculty has adopted a policy that prohibits the selection of a practicum site in which the student is currently or has been previously employed.

Student Liability Insurance

All students registered for practicum must provide documentation of professional liability insurance. This insurance may be obtained privately. However, the American Counseling Association (www.counseling.org) and the American School Counselor Association (www.schoolcounselor.org) provide student liability insurance as a benefit of student membership in the organization.

Distance Restriction for Practicum II Sites

Practicum II sites must be under 60 miles of your home campus. Students who wish to arrange a placement more than 60 miles from campus and / or out of state must submit a formal request, including justification to the faculty. Applicants are advised that (1) out of area internships are rarely authorized, (2) two-thirds of the faculty must approve these requests, and (3) that requests will be reviewed in conjunction with the timeline for new site approval requests.

Minimum Requirements for Practicum II

Practicum sites must be able to accommodate the following minimum requirements (**NOTE: Combined hours between Practicum I and Practicum II must equal, at a minimum, 40 hours of direct service and 60 hours of indirect service totaling 100 hours**):

- * **Minimum of 30 direct client contact hours** (i.e., counseling)

NOTE: Required numbers depend on the number of direct client hours accrued in Practicum I. The total combined direct hours between Practicum I and Practicum II must equal or exceed 40 hours. However, all Practicum II students will be required to accrue a minimum of 30 hours regardless of the number of hours accrued during Practicum I.

- **Minimum of 70 on-site hours** (i.e., counseling + indirect client activities)
- **Minimum of 8 hours per week onsite** and a maximum of **12 hours per week on site**.
- * **Minimum of one (1) hour per week of individual supervision**, throughout the practicum, performed by the on-site supervisor.
- * Opportunity for the student to become familiar with a variety of professional activities other than direct service.
- * Opportunity for the student to develop audio and/or videotapes of the student's interactions with clients, appropriate to the specialization, for use in supervision.
- * Opportunity for the student to gain supervised experience in the use of a variety of professional resources such as assessment instruments, computers, print and non-print media, professional literature, research, and information and referral to appropriate providers.

CLINICAL MENTAL HEALTH COUN. - Direct Services and Non-Counseling Activities

You may count the following experiences as direct counseling:

- _____ 1. Individual Counseling/Psychotherapy: Personal/Social/Occupational
- _____ 2. Group Counseling/Psychotherapy: Co-leading, Leading (Includes Psycho-ed.)
- _____ 3. Intake Counseling
- _____ 4. Testing: Administration and Interpretation
- _____ 5. Consultation (as the consultant)

You may count the following experiences as non-counseling activities (indirect service):

- _____ 1. Supervision: Individual and/or Group
- _____ 2. Program Administration/Org. Dev./Implementation/Evaluation
- _____ 3. Case Conferences & Staff Meetings
- _____ 4. Report Writing: Record Keeping, Treatment Plans, and Treatment Summaries
- _____ 5. Case management without the client present (DHS, school, probation contacts, etc.)

SCHOOL COUNSELING Direct Experiences, Indirect Experiences, and Non-Counselor Duties

You may count the following experiences as direct:

- _____ 1. Providing face to face individual counseling
- _____ 2. Conducting group counseling
- _____ 3. Conducting classroom activities
- _____ 4. Conducting workshops for parents, students, teachers, and community members
- _____ 5. Consulting with a parent, teacher, or member of the community

You may count the following experiences as indirect:

- _____ 1. Completing logs and other documentation
- _____ 2. Preparing a lesson or group activity
- _____ 3. Attending a professional conference
- _____ 4. Reading professional literature
- _____ 5. Observing
- _____ 6. Participating in supervision

KNOWLEDGE AND SKILL OUTCOMES:

Upon successful completion of Practicum I (APCE 612) and Practicum II (APCE 619) students will:

1. Complete supervised practicum experiences (Practicum I and Practicum II) that total a minimum of 100 clock hours (CACREP III.F).
2. Complete *at least* 40 hours of direct service (Practicum I and Practicum II) with actual clients that contribute to the development of counseling skills (CACREP III.F.1).
3. Participate in one hour per week of individual supervision throughout the practicum by the University Practicum Supervisor or by an advanced doctoral student supervisor, under the supervision of the University Practicum Supervisor.
4. Participate in one hour per week of individual supervision throughout the practicum by an approved site supervisor who is working in consultation with the University Practicum Supervisor in accordance with the supervision contract (CACREP III.F.2).
5. Participate in an average of 1 1/2 hours per week of group supervision that is provided on a regular schedule throughout the practicum by the University Practicum Supervisor (CACREP III.F.3).
6. Participate in program-appropriate audio/video recordings for use in supervision or live supervision of the student's interactions with clients (CACREP III.F.4).
7. Receive evaluation of his/her counseling performance throughout the practicum, including documentation of a formal evaluation after the student completes the practicum (CACREP III.F.5).

Student Learning Outcomes

Students are required to complete a bi-annual review as a component of a comprehensive evaluation process to assess student outcomes across three domains - knowledge, skills, and professional practice. The Professional Practice Forms are required prior to completing Practicum II. Paperwork and policies can be found on the Professional Counseling webpage under “Current Students” (<http://www.unco.edu/cebs/applied-psychology-counselor-education/professional-counseling/current-students.aspx>).

Site Supervisor Requirements

Practicum students are Clinical Mental Health Counseling majors or School Counseling majors engaged in counseling within specialty areas under the cooperative supervision of a licensed professional.

The supervisor for Clinical Mental Health Counseling students must have: **(a)** at least a Master’s degree in counseling or a closely related field (e.g., Licensed MSW or Licensed Psychologist) and appropriate certifications and/or licenses; **(b)** a minimum of 2 years of pertinent professional experience; **(c)** knowledge of the practicum expectations, requirements, and evaluation procedures for students; and **(d)** relevant training in supervision. Supervisors must agree to regularly review the students’ audio and/or videotapes.

The supervisor for School Counseling students must have: **(a)** at least a Master’s degree in school counseling and appropriate certifications and/or licenses; **(b)** a minimum of 2 years of pertinent professional experience; **(c)** knowledge of the practicum expectations, requirements, and evaluation procedures for students; and **(d)** relevant training in supervision. Supervisors must agree to regularly review the students’ audio and/or videotapes.

Group Supervision on Campus

Throughout the course of Practicum II, students will meet on campus for an average of 1½ hours of group supervision per week, provided by a University Practicum Supervisor. Expectations for group supervision will be provided at the beginning of each semester. In addition, each student will receive an hour of individual or triadic supervision from the practicum instructor, or an advanced doctoral student, under supervision of the practicum instructor.

Documentation

Students must submit one copy of each of the following documents to their practicum instructor:

- Practicum Agreement (Clinical Mental Health Counseling) (Appendix A) or Practicum Agreement (School Counseling) (Appendix B)
- One copy of the Practicum Log (Clinical Mental Health Counseling) (Appendix C) or One copy of the Practicum Log (School Counseling) (Appendix D)
- One copy of proof of liability insurance.
- Student Learning Outcome Documentation – Evaluation of Professional Practice (Appendix E)

- On-site supervisor evaluation of student (Clinical Mental Health Counseling) (Appendix F) or
On-site supervisor evaluation of student (School Counseling) (Appendix G)
- Student's evaluation of the site (Appendix H)

SELECTION OF PRACTICUM SITE

Procedures and Timelines:

Students must attend the Practicum II informational meeting the semester prior to beginning Practicum II.

On-campus students: This meeting will be held the **second Thursday of the fall and spring semesters at 12:00 pm**. There will not be a summer meeting, so please plan accordingly. *Note, you may attend an earlier meeting for informational purposes; however, you will still be required to attend the meeting the semester prior to your proposed start date for Practicum II.* **Eligibility verification forms and a copy of your liability insurance are due at this time.**

New Site Approval Forms (located in the internship manuals) can be turned into the main office. Faculty will review and make decisions on these once a month.

The deadline for practicum II/internship contracts is 3 weeks prior to the end of the semester proceeding the placement. For the fall semester, this would mean three weeks prior to the end of the second summer session. All contracts can be turned into the main office for final approval.

Off-campus students: Meetings will be scheduled and communicated via the listserv. *Note, you may attend an earlier meeting for informational purposes; however, you will still be required to attend the meeting the semester prior to your proposed start date for Practicum II.* **Eligibility verification forms and a copy of your liability insurance are due at this time.**

Placement Information (all students):

The first considerations in arranging placement are (a) your interests and career goals and (b) the University's requirements for practicum. A database is available of sites that have been approved for field placements (practica or internship) and includes supervisor contact information. Students are encouraged to use this database.

Once a student has submitted an eligibility verification form, and it has been signed by the university, then students may begin contacting sites. Students are reminded of the policy adopted by the University Professional Counseling Program Faculty that prohibits the selection of a practicum site in which the student is currently or has been previously employed. In addition, no practicum will be approved for which the student has not been academically prepared.

Students should make professional contacts with possible sites and request an interview. Students are encouraged to interview with more than one agency/school in order to select the placement that provides desirable experiences and appropriate supervision. Please see Interview

Procedures detailed below. ***Students cannot formally accept a placement without the knowledge of the University Practicum Supervisor.*** When a student determines they will not accept or pursue a site, they must notify personnel at the site to allow ample time for them to fill vacant positions. **A STUDENT CANNOT SIGN A CONTRACT WITH THE SITE UNTIL APPROVAL IS GIVEN FROM THE UNIVERSITY INTERNSHIP COORDINATOR OR PRACTICUM II INSTRUCTOR (OFF-CAMPUS) TO DO SO.**

The signed Practicum Agreement (Attachment A) **must** be turned in no later than three weeks prior to the last day of classes for the term prior to your placement. For fall placements, this would mean three weeks prior to the end of the second summer term.

When the Practicum Agreement has been signed and processed, an approved copy of the agreement will be sent to the student and the University Practicum Supervisor. The official date after which the graduate student counselor may begin his or her practicum will be noted on this copy of the agreement and will coincide with the start of UNC's semester. No practicum hours will be counted prior to the date the University Practicum Supervisor signs the contract.

New Sites or Supervisors (Not on the Approved Site List).

If you are interested in pursuing a new site that is not on the approved site list, **an additional step is required before completing the practicum agreement form.** You will need to submit the New Site Approval Request Form (Appendix I) and receive approval to accept a placement at this site.

Interview Procedures

With the approval of the University Internship Coordinator (on-campus) or Practicum II Instructor/Coordinator (off-campus), it is your responsibility to arrange interviews at potential practicum sites. Please attend to the following information regarding this important phase of your experience:

1. This is a professional interview. Present yourself and your documentation accordingly. Support your oral presentation with a well-prepared resume. Be thoroughly prepared to talk about your preparation for your practicum and the requirements you will need to complete during your practicum.
2. Ascertain that the prospective practicum site is capable of meeting your needs. During the interview, emphasize that you will need to obtain experiences that are consistent with your training and interests.
3. Carefully consider the "fit" between you, your professional goals, and the site. You are encouraged to interview with more than one agency, school, or site in order to select the best placement.

4. If the agency, school, or site accepts you for practicum placement, and you elect to accept the opportunity, request and obtain final approval of the site from the University Internship Coordinator. This can be done via email.
5. With approval from the University Internship Coordinator, you should prepare the agreement and obtain all necessary signatures.
6. Inform all potential supervisors you have contacted when you make a final decision.

Responsibilities during Practicum (APCE 619)

1. You can expect to have an on-site visit from the University Practicum Supervisor during your practicum experience. Prior to the sixth week of your practicum, you are responsible for contacting the University Practicum Supervisor to schedule a site visit between yourself, your on-site supervisor, and the University Practicum Supervisor. At that time, you will review your progress thus far during practicum.
2. During your practicum you are required to maintain logs (Attachment C). You will turn these into the University Practicum Supervisor as requested by the instructor.
3. You are required to attend the APCE 619 group supervision meetings and all individual supervision meetings with your University Supervisor.
4. You are required to complete all Student Learning Outcome (Evaluation of Professional Practice) paperwork and turn it into the practicum instructor.
5. If you are unable to complete your practicum, contact the University Practicum Supervisor immediately.

Evaluation of Practicum Students

Feedback from the practicum site supervisor is essential for the purpose of evaluating student effectiveness. A standardized evaluation form has been adopted by the University Professional Counseling Faculty (Attachment E or F). The rating form should be completed by the on-site supervisor, reviewed with the student, and returned to the University Practicum Supervisor at the completion of the practicum.

Engaging in your Practicum

Practicum site supervisors have supervisory and administrative responsibility for site activities. The University Practicum Supervisor will maintain regular contact with site supervisors.

The site supervisor will complete an evaluation form addressing your activities. Additionally, students will be asked to evaluate their work, the supervision students received at their site, the site itself, and the supervision provided on campus. Forms and guidelines are included in this handbook.

If problems or concerns (ethical, clinical, supervisory, interpersonal, etc.) develop during the students' practicum, students are asked to notify the University Practicum Supervisor immediately. **Failure to notify the University Supervisor in a timely manner of emerging problems or concerns may constitute an ethical breach on the part of the practicum student.** It is the responsibility of the University Practicum Supervisor to work with students and the site supervisor to properly handle and resolve problems or concerns.

Strategies for Enhancing the Experience and Success

Indeed, practicum students and the University Practicum Supervisor are guests of the agencies, schools, and clinics where practicum opportunities are authorized. Agency administrators are entrusted with the care and responsibility of clients, and site supervisors are responsible for all facets of services provided to clients by the practicum student. Principals are entrusted with the care and responsibility of students, and site supervisors are responsible for all facets of the school counseling program. Thus, practicum students are expected to maintain the highest level of professionalism. Practicum student's behaviors reflect on the student, the clinic, the school or the agency in which he or she is placed, the University, the Counseling Programs, and on future practicum students.

Attire: Dress appropriately and in accordance with existing dress codes within the site setting at all times.

Work Schedules: Because of the time demands, it is recommended that practicum students not try to maintain a full time job outside of the field placement.

Attendance and Promptness: Practicum students are expected to be at their clinical or school site according to the schedule designed with the site supervisor. Absences must be limited to medical emergencies, family emergencies, and professional development activities. Should practicum students need to be absent or arrive late, practicum students should notify both the site supervisor and the University Practicum Supervisor. Extensive absences, for whatever reason, will result in your practicum being postponed or terminated.

Students, site supervisors, and the university supervisors are responsible for adhering to the policies and procedures as outlined in this manual. All questions about the information in this manual should be directed to the internship coordinator or program coordinator.

APPENDIX A: Practicum Agreement

PRACTICUM AGREEMENT (CLINICAL MENTAL HEALTH COUNSELING)

This agreement is made on _____ by and between _____
(date) (agency)

and the Professional Counseling Program at the University of Northern Colorado. The agreement will be effective for a period from _____ to _____ for _____
date date (# hours)
per week for _____.
(Student Name)

Purpose: The purpose of this agreement is to provide a qualified graduate student with a field-based practicum experience in the field of counseling.

The Professional Counseling Program agrees:

1. To assign a University Practicum Supervisor to facilitate communication between the University and the practicum site;
2. To notify the practicum student that he/she must adhere to the administrative policies, rules, standards, schedules, and practices of the practicum site;
3. The University Practicum Supervisor will provide weekly group supervision (1.5 hours/week) to the practicum student;
4. The University Practicum Supervisor or an Advanced Doctoral Student under supervision by the University Practicum Supervisor will provide weekly individual supervision (1 hour/week);
5. That the University Practicum Supervisor shall be available for consultation with both the on-site supervisor and student, and shall be immediately contacted should any problem or change in relation to student, site, or University occur;
6. That the University Practicum Supervisor in consultation with the on-site supervisor, is responsible for the assignment of a final grade.

The Practicum Site agrees:

1. To assign a practicum on-site supervisor who is a licensed counselor or psychologist with appropriate credentials, has a minimum of two years experience in the current position, and has the time and interest in the supervision and training of the practicum student;
2. To provide opportunities for the student to engage in a variety of counseling activities under supervision and to be involved in the evaluation of the student performance (suggested counseling experiences included in the Practicum Activities);

3. To provide the student with adequate workspace, telephone access, office supplies, and staff to conduct professional activities;
4. To provide supervisory contact which involves some examination of student work using audio/visual tapes, observation, and supervision;
5. To provide written evaluation of the student based on criteria established by the Professional Counseling Program;

The Student agrees:

1. To act in a professional manner that is consistent with the ACA Code of Ethics and practice counseling in accordance with these standards. Any breach of these ethics or any unethical behavior on the student's part will result in removal from the practicum and a failing grade. Documentation of such behavior will become part of the student's permanent record;
2. To be responsible for being available to the on-site supervisor and to the University Practicum Supervisor for conferences, (i.e., consultation, staffings, etc.), and to keep the University Practicum Supervisor informed regarding the practicum experiences;
3. To comply with the rules, policies, and regulations of the site, (i.e., staff development, working hours, schedules, etc.); and
4. To complete all practicum course requirements as outlined, and demonstrate the specified minimal level of counseling skill, knowledge, and competence in the various practicum activities evaluated during the student's practicum experience.

PRACTICUM ACTIVITIES: The practicum requires that the graduate student counselor complete a minimum of 70 clock hours. At least 30 hours are to be spent in counseling activities (with a client), which include:

- _____ 1. Individual Counseling/Psychotherapy: Personal/Social/Occupational
- _____ 2. Group Counseling/Psychotherapy: Co-leading (Includes Psycho-educational)
- _____ 3. Intake Counseling
- _____ 4. Testing: Administration and Interpretation
- _____ 5. Consultation

A maximum of 40 hours may be spent on non-counseling activities, which include:

- _____ 1. Supervision: Individual and Group
- _____ 2. Program Administration/Org. Dev./Implementation/Evaluation
- _____ 3. Case Conferences & Staff Meetings
- _____ 4. Report Writing: Record Keeping, Treatment Plans, Treatment Summaries
- _____ 5. Case management without the client present (DHS, school, probation contacts, etc.)
- _____ 6. Other: Specify _____

* * * * *

TO BE COMPLETED BY GRADUATE STUDENT COUNSELOR:

Name

Student I.D./S.S.#

Address

City

State

Zip

Email address

Home Telephone (including area code)

Practicum Site Telephone

If you are also employed elsewhere, please state place and telephone number

Student Counselor Signature

Date

The University of Northern Colorado faculty member with whom the practicum student and site supervisor will communicate regarding progress, problems, and performance evaluations will be:

Name: _____

Phone Number: _____

E-Address: _____

Mailing Address: _____

TO BE COMPLETED BY PRACTICUM SITE:

Within the specified time frame, _____ will be the primary
(Site Supervisor)
practicum on-site supervisor. The **Practicum Training Activities (checked)** will be provided for the
student in sufficient amounts to allow an adequate evaluation of the student’s level of competence in
each activity. _____ will be the faculty member with whom the
(University Practicum Instructor)
student and practicum on-site supervisor will communicate regarding progress, problems, and
performance evaluations.

Agency Director or Administrator (name/title) Signature Date

On-site Supervisor (name/degree/license) Signature Date

Email address

Agency address City State Zip

TO BE COMPLETED BY UNIVERSITY PROGRAM COORDINATOR:

(Signature indicates approval of practicum site)

University Site Placement Coordinator (signature) Date

Signature: University Program Coordinator Date

EARLIEST DATE ON WHICH PRACTICUM MAY BEGIN: _____

APPENDIX B: Practicum Agreement (School Counseling)



PRACTICUM AGREEMENT (SCHOOL COUNSELING)

This agreement is made on _____ (date) by and between _____ (school)

and the Professional Counseling Program at the University of Northern

Colorado. The agreement will be effective for a period from _____ (date) to

_____ (date) for _____ (# hours per week) _____ (Student Name).

Purpose: The purpose of this agreement is to provide a qualified graduate student with a practicum experience in the field of school counseling and guidance.

The APCE counseling faculty and the University Practicum Supervisor agree:

1. To assign a University Practicum Supervisor to facilitate communication between the University and the practicum site;
2. To notify the practicum student that he/she must adhere to the administrative policies, rules, standards, schedules, and practices of the practicum site;
3. The University Practicum Supervisor will provide weekly group supervision (1.5 hours/week) to the practicum student;
4. The University Practicum Supervisor, or an Advanced Doctoral Student under supervision by the University Practicum Supervisor, will provide weekly individual supervision (1 hour/week);
5. That the University Practicum Supervisor shall be available for consultation with both the on-site supervisor and with the student, and shall be immediately contacted should any problem or change in relation to student, site, or University occur;
6. That the University Practicum Supervisor assigned as the practicum supervisor, in consultation with the on-site supervisor, is responsible for the assignment of a final grade.

The Internship Site Supervisor:

1. Is a licensed/certified school counselor with appropriate credentials, and with a minimum of two years experience.
2. Can devote the time necessary for training and supervision.
3. Will provide opportunities for the student to engage in a variety of counseling and guidance activities under supervision.

4. Will support the practicum student in obtaining experiences that approximate the *ASCA National Model* recommendations.
5. Will be involved in the evaluation of the practicum student's performance.
6. Will provide adequate workspace, telephone access, office supplies, and staff to conduct professional activities.
4. Will provide supervisory contact which involves the examination and observation of the practicum student as he or she enacts various school counseling roles for a minimum of one hour per week.
5. Will provide a written evaluation of the student based on the criteria established by the APCE counseling faculty.

The Practicum Student agrees:

1. To perform in a professional manner that is consistent with the ACA and ASCA Code of Ethics. He or she is aware that any breach of these ethics or any unethical behavior will result in removal from the practicum and a failing grade. Documentation of such behavior will become part of the practicum student's permanent record.
2. To be available to the on-site supervisor and the University Practicum Supervisor for conferences.
3. To keep the University Practicum Supervisor informed regarding the practicum experience.
4. To comply with the rules, policies, and regulations of the school (e.g., staff development, schedules, code of conduct, and attire).
5. To complete all practicum course requirements.
6. To demonstrate the required level of counseling skill, knowledge, and competence in the various practicum activities assigned.

TO BE COMPLETED BY PRACTICUM STUDENT:

| | | | | | |
|--|--------------------------|---------|------|-------|-----|
| Name | Bear Number | | | | |
| <table border="0" style="width: 100%;"> <tr> <td style="width: 33%;">Address</td> <td style="width: 20%;">City</td> <td style="width: 20%;">State</td> <td style="width: 27%;">Zip</td> </tr> </table> | | Address | City | State | Zip |
| Address | City | State | Zip | | |
| Email address | Cell phone | | | | |
| Home Telephone | Practicum Site Telephone | | | | |

If you are also employed elsewhere, please state place and telephone number

| | |
|-----------------------------|------|
| Student Counselor Signature | Date |
|-----------------------------|------|

The University of Northern Colorado faculty member with whom the practicum student and site supervisor will communicate regarding progress, problems, and performance evaluations will be:

Name: _____

Phone Number: _____

E-Address: _____

Mailing Address: _____

TO BE COMPLETED AT PRACTICUM SITE:

Within the specified time frame, _____ will be the primary internship site supervisor.
(Site Supervisor)

The Practicum Training Activities (checked) will be provided for the student in sufficient amounts to allow an adequate evaluation of the student level of competence in each activity.

The practicum student will have opportunities to gain experience in the following areas:

Curriculum

- _____ Observe school counselors as they conduct classroom activities
- _____ Conduct classroom activities with school counselors
- _____ Design and conduct classroom lessons that address competencies and indicators of *ASCA Model*
- _____ Provide curriculum activities for students in special education and 504 programs
- _____ Assess the efficacy of classroom lessons and units
- _____ Conduct needs assessments to prioritize ASCA Model objectives

Responsive Services

- _____ Observe counselors during individual counseling sessions
- _____ Observe counselors conducting group counseling activities
- _____ Observe counselors consulting with parents and teachers
- _____ Provide individual counseling for students of various ages and with various personal/social concerns
- _____ Co-facilitate counseling groups with a licensed school counselor
- _____ Conduct counseling groups addressing personal, social, and academic concerns
- _____ Consult with parents
- _____ Consult with teachers
- _____ Observe students in classrooms
- _____ Participate in student focused staff meetings
- _____ Assist in making referrals
- _____ Document responsive service activities
- _____ Collaborate with other mental health professionals within the school
- _____ Participate in the school's crisis response team
- _____ Participate in response to crises that occur during internship

Individual Student Planning

- _____ Provide career counseling

- _____ Conduct group activities addressing career and educational planning
- _____ Facilitate post secondary planning for students
- _____ Participate in appropriate assessment activities
- _____ Interpret results of standardized tests and inventories
- _____ Assist with technology based career materials and activities
- _____ Facilitate post secondary planning for students

System Support

- _____ Participate in school counseling program planning
- _____ Participate in program evaluation
- _____ Participate in faculty meetings
- _____ Participate in school improvement teams and activities
- _____ Collect and interpret data regarding student groups who are at risk of academic failure
- _____ Plan and/or present and/or assist with preparation of a parent education program
- _____ Contribute to the school counseling program by _____
(e.g., developing a brochure for school counseling program, designing orientation programs, or implementing career planning programs)

Professional Development Activities

- _____ Observe special education classrooms
- _____ Attend meetings addressing Section 504
- _____ Attend a school board meeting
- _____ Discuss ethical issues at the school and in the department
- _____ Participate in advocating for the profession or on behalf of the students
- _____ Attend school and district workshops and seminars

Other Activities Unique to this Site and to this Practicum

Authorized by:

| | | |
|-------------------------------|-----------|------|
| | | |
| School Principal (name/title) | Signature | Date |

| | | |
|--|-----------|------|
| | | |
| On-site Supervisor (name/degree/license) | Signature | Date |

Email address

| | | | |
|----------------|------|-------|-----|
| | | | |
| School address | City | State | Zip |

| | |
|---|------|
| | |
| PC Site Placement Coordinator (signature) | Date |

| | |
|------------------------------|------|
| | |
| Academic Program Coordinator | Date |

EARLIEST DATE ON WHICH PRACTICUM MAY BEGIN: _____

**APPENDIX C: Practicum Log – CLINICAL MENTAL HEALTH
COUNSELING**

APPENDIX D: Practicum Log – SCHOOL COUNSELING



Counselor-in-Training: _____ Course/Semester: _____

Faculty Supervisor: _____ Doctoral Supervisor: _____

| Week | Direct Service | | | | | Indirect Service (Paperwork, Phone Calls, Watching Tapes, Instruction, etc.) | Supervision | | | | Total |
|--------------------|----------------|-------|-------------------------|--------------------|-------|---|-------------|---------|-------|-------|-------|
| | Individual | Group | Consultation w/ Parents | Classroom Guidance | Total | | Individual | Triadic | Group | Total | |
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| | | | | | | | | | | | |
| Total Hours | | | | | | | | | | | |

Signatures: By signing this document you are indicating that the above information is true to your knowledge

Counselor in Training: _____

Date: _____

Faculty Supervisor: _____

Date: _____

Doctoral Supervisor: _____

Date: _____

Site Supervisor: _____

Date: _____

APPENDIX E: Student Learning Outcome Documentation
Evaluating Professional Practice



SELF-SUPERVISION FORM

(To Be Completed During Practicum I, Practicum II, Family Practicum, and Internship)

Name: _____

Date: _____

Number of Sessions: _____

Supervisor: _____

Please use this form to assess your counseling skills each week. You must complete this form on at least one client for three sessions and submit it to your instructor as part of your evaluation materials.

Identify Examples of Culturally Appropriate Attending Skills: (Include eye contact, posture, tone of voice, amount of movement in session, mirroring, facial expressions, or bodily expression)

Identify Examples of Empathy & Influencing Skills: (Include paraphrasing, reflection of feeling or meaning, summarization, clarifying and perception checking, pacing, focusing, staying with affect, counselor self disclosure, immediacy, or confrontation)

Identify & Evaluate Any Specific Techniques Used:

Identify Your Areas of Strength (Identify a minimum of 2)

Identify Your Growth Areas (Identify a minimum of 2)



**TREATMENT PLAN AND CASE CONCEPTUALIZATION
(To Be Completed During Practicum I, Practicum II, Family Practicum, and Internship)**

Completion of this form: Use accompanying rubric to understand expectations of each section in this form and use this rubric as a guideline for appropriate completion of this form. Your instructor may have specific information they request in each section.

Name: _____

Date: _____

Course Enrolled: _____

Supervisor: _____

Client Pseudonym: _____

Client Age: _____

Introduction:

Presenting Concern:

Background Information:

Client Strengths:

Hypotheses:

Counselor Observations (i.e., Larger System & Developmental Perspective):

Assessment Information (If Applicable):

Overall Conceptualization:

Multi-axial Diagnosis (DSM-V):

Status at the Beginning of Treatment:

Treatment Goals:

1)

2)

3)

Prognosis:

Suggested or Implemented Interventions:

Case Conceptualization & Treatment Plan Scoring Rubric Clinical Mental Health Counseling (To Be Completed During Practicum I, Practicum II, Family Practicum, and Internship)

Counselor-in-Training: _____

Date: _____

Evaluator: _____

Course Enrolled: _____

Rating Scale:

5 = Exceptional (skills and understanding significantly beyond counselor developmental level)

4 = Outstanding (strong mastery of skills and thorough understanding of concepts)

3 = Mastered Basic Skills (understanding of skills/competence evident)

2 = Developing (minor conceptual errors; in process of developing)

1 = Deficits (deficits in knowledge/skills; significant remediation needed)

| | 5 | 4 | 3 | 2 | 1 | N/A |
|---------------------------|---|---|--|--|---|------------|
| Introduction | Provides a clear, thorough introduction to the client that provides information regarding client diversity. Descriptions set the context for problem understanding. | Provides a clear introduction to the client that provides some information regarding client diversity. Descriptions are useful for problem understanding. | Provides basic identifying information about the client and some information regarding diversity. Descriptions lack sufficient detail for problem understanding. | Provides basic information about the client; however, there is insufficient detail regarding client diversity. | Missing, incorrect, or significant problems in describing the client and diversity. | |
| Presenting Concern | Provides a clear, comprehensive, and accurate description of the client's presenting concerns. This includes a description of the client's concern using language. | Provides a clear description of the client's presenting concerns using unbiased language. | Provides a clear description of the client's presenting concerns; however, this description lacks sufficient description. | The description of the client's presenting concerns contains minor conceptual problems and lacks clarity. Some use of biased language. | The description of the client's presenting concerns is lacking detail, inaccurate, or contains biased language. | |

| | 5 | 4 | 3 | 2 | 1 | N/A |
|-------------------------------|--|---|--|---|---|------------|
| Background Information | Provides a clear and comprehensive summary of recent and past events related to presenting concerns that provides insight into the client conceptualization. | Provides a detailed summary of recent and past events that provides a thoughtful conceptualization of client's presenting concerns. | Provides a clear summary of recent and past events; however, this summary lacks sufficient information and connection to the client's presenting concerns. | The summary provides minimal or insufficient background information and lacks a clear connection to conceptualization. | The summary does not contain significant information and did not identify significant events related to conceptualization. | |
| Client Strengths | A comprehensive overview of individual, relational, and spiritual strengths, resources and resiliency that have clinical relevance. | A detailed description that highlights individual, relational, and spiritual strengths and resources. | A clear description of individual, relational, and spiritual strengths, with some lacking clinical relevance. | A brief, underdeveloped description of client strengths. | A summary of strengths that contains significant problems with identifying relevant strengths (e.g., poor choice, insufficient number). | |
| Hypotheses | Provides a comprehensive, systemic set of hypotheses regarding relational patterns and/or presenting concerns incorporating a theoretical prospective for these hypotheses. Hypotheses are sufficiently supported. | Provides a detailed description of hypotheses regarding relational patters and/or presenting concerns incorporating a theoretical prospective for these hypotheses. Sufficient support is provided for most hypotheses. | Provides a clear description of basic hypotheses regarding presenting concerns that lacks detail and without a theoretical prospective for hypotheses. | Provides vague, unclear, or unsupported hypotheses regarding relational patterns, theoretical prospective or presenting concerns. | Provides a vague, unsupported, blaming, or one-sided description of hypotheses regarding presenting problems without theoretical prospective. | |

| | 5 | 4 | 3 | 2 | 1 | N/A |
|--|---|--|---|--|---|------------|
| Counselor Observations; Larger System & Developmental Perspective | A comprehensive overview of the client's system (e.g., school, community, family, peers, etc.) and a developmental perspective that demonstrates a sophisticated understanding of diversity issues and how they impact presenting concerns. | A detailed overview of the client's system (e.g., school, community, family, peers, etc.) and a developmental perspective that demonstrates a general understanding of diversity issues and how they impact presenting concerns. | A basic overview of the client's system (e.g., school, community, family, peers, etc.) and a developmental perspective that demonstrates a basic understanding of diversity issues. | A vague, unclear, or unsupported overview of the client's system and a developmental perspective that does not demonstrate a clear understanding of diversity issues. | An insufficient, unclear overview of the client's system and a developmental perspective and/or failure to recognize diversity issues. | |
| Assessment Information (Formal Assessments) | Provides a comprehensive overview of any formal assessments used with the client (i.e. Beck Depression Inventory) with a comprehensive explanation of the relevance to the client's presenting concerns. | Provides a clear, detailed overview of any formal assessments used with the client with some explanation of the relevance to the client's presenting concerns. | Provides a detailed overview of any formal assessments used with the client with minimal attention paid to the relevance of the information to the client's presenting concerns. | Provides a vague overview of any formal assessment information used with little to no attention paid to the relevance of the information to the client's presenting concern. | Provides an inaccurate or insufficient overview of any formal assessment information with no connection made to the presenting problem. | |
| Multi-axial Diagnosis (DSM-V) | Provides a) diagnosis with comprehensive support from presenting concerns and client behaviors. | Provides an appropriate diagnosis with some support from presenting concerns and client behaviors. | Provides a diagnosis with little support from presenting concerns and client behaviors. | Provides a diagnosis with little to no support from presenting concerns and client behaviors. | Provides an inaccurate or insufficient diagnosis that is unsupported. | |

| | 5 | 4 | 3 | 2 | 1 | N/A |
|---|--|--|---|---|--|-----|
| Prognosis | Provides a clear, detailed prognosis that aligns with diagnosis, presenting concerns, and treatment goals. | Provides an appropriate prognosis that aligns with diagnosis, presenting concerns, and treatment goals; lacks some detail. | Provides an appropriate prognosis that aligns with one or more of the following: diagnosis, presenting concerns, or treatment goals. | Provides a prognosis with little attention to detail or connection to diagnosis, presenting concerns, or treatment concerns. | Provides an inaccurate or insufficient prognosis with no connection made to the diagnosis, presenting concerns, or treatment goals. | |
| Interventions | Provides a clear, detailed explanation of appropriate interventions that aligns with diagnosis, presenting concerns, and treatment goals. | Provides an appropriate explanation of interventions that aligns with diagnosis, presenting concerns, and treatment goals; lacks some detail. | Provides an appropriate explanation of interventions that aligns with one or more of the following: diagnosis, presenting concerns, or treatment goals. | Provides an explanation or list of interventions with little attention to detail or connection to diagnosis, presenting concerns, or treatment concerns. | Provides an inaccurate or insufficient list of interventions with no connection made to the diagnosis, presenting concerns, or treatment goals. | |
| Overall Conceptualization: Quality of Assessment | The overall report integrates all available information into a sophisticated, consistent, and clinically relevant conceptualization. The focus and goals for treatment is clearly articulated. | The overall report integrates available information into a clinically relevant conceptualization. Most areas are clear and consistent. The conceptualization provides a clear focus and goals for treatment. | The overall report integrates information into a clinically relevant conceptualization. The conceptualization provides a general focus for treatment; however, it is lacking a clear, detailed focus and goals. | The overall report contains minor problems with integration and consistency across domains. The conceptualization does not provide a single, clear focus and goals for treatment. | The overall report contains significant problems with integration, clarity, and consistency. There is little to no clear focus or goals for treatment. | |

Additional Comments:

Case Conceptualization & Treatment Plan Scoring Rubric – School Counseling
(To Be Completed by During Practicum I, Practicum II, and Internship)

School Counselor-in-Training: _____

Date: _____

Evaluator: _____

Course Enrolled: _____

Rating Scale:

5 = Outstanding (skills and understanding significantly beyond counselor developmental level)

4 = Mastery (strong mastery of skills and thorough understanding of concepts)

3 = Expected Basic Skills (understanding of skills/competence evident)

2 = Developing (minor conceptual errors; in process of developing)

1 = Deficits (deficits in knowledge/skills; significant remediation needed)

| | 5 | 4 | 3 | 2 | 1 | N/A |
|----------------------------|--|--|--|---|--|------------|
| Introduction | Provides a clear, concise introduction to the student and the school environment. Descriptions set the context for understanding the problem. | Provides a clear introduction to the student and the school environment that is useful for understanding the problem. Descriptions lack some detail. | Provides basic identifying information about the student and some information regarding school environment. Descriptions lack sufficient detail for understanding the problem. | Provides basic information about the student. However, there is insufficient detail regarding the school environment. | Missing, incorrect, or significant problems in describing the student and the school environment. | |
| Presenting Concerns | Provides a clear, comprehensive, and accurate description of the student's presenting concerns using unbiased language. Connection to impact on optimal development is made. | Provides a clear description of the student's presenting concerns using unbiased language. Connection to optimal development lacks clarity. | Provides a description of the student's presenting concerns. However, this description lacks sufficient clarity. | The description of the student's presenting concerns contains minor conceptual problems and lacks clarity; some use of biased language. | The description of the student's presenting concerns is lacking detail, inaccurate, or contains biased language. | |

| | 5 | 4 | 3 | 2 | 1 | N/A |
|-------------------------------|---|--|--|--|---|-----|
| Background Information | Provides a clear and comprehensive summary of recent and past events related to presenting concerns that includes multiple data points and stakeholder perspectives. Diversity is also discussed. | Provides a detailed summary of recent and past events that provides a thoughtful conceptualization of student's presenting concerns and includes some data points. | Provides a clear summary of recent and past events. However, this summary lacks sufficient information and connection to the student's presenting concerns. | The summary provides minimal or insufficient background information and lacks a clear connection to conceptualization. | The summary does not contain significant information and did not identify significant events related to conceptualization. | |
| Student Strengths | A comprehensive overview of individual, academic, career, personal/social, and system-related strengths and resources that have relevance to the conceptualization. | A detailed description that highlights individual, academic, career, personal/social, and system-related strengths and resources. | A clear description of individual, academic, career, personal/social, and system-related strengths and resources that lacks some relevance to the conceptualization. | A brief, underdeveloped description of student strengths. | A summary of strengths that contains significant problems with identifying relevant strengths (e.g., poor choice, insufficient number). | |
| Hypotheses | Provides comprehensive, systemic hypotheses related to presenting concerns. Hypotheses incorporate a theoretical perspective and are sufficiently supported. | Provides a detailed description of hypotheses regarding presenting concerns and incorporates a theoretical perspective for these hypotheses. Sufficient support is provided for most hypotheses. | Provides a clear description of basic hypotheses regarding presenting concerns that lacks detail and does not incorporate a theoretical perspective for hypotheses. | Provides vague, unclear, or unsupported hypotheses regarding presenting concerns or theoretical perspective. | Provides a vague, unsupported, blaming, or one-sided description of hypotheses regarding presenting concerns without theoretical perspective. | |

| | 5 | 4 | 3 | 2 | 1 | N/A |
|--|--|---|--|---|---|-----|
| School Counselor Observations (i.e., Larger System & Developmental Perspective) | A comprehensive overview of the student's system (e.g., school, community, family, peers, community, legislative or policy issues.) and a developmental perspective that demonstrates a sophisticated understanding of diversity issues and how they impact presenting concerns. | A detailed overview of the student's system (e.g., school, community, family, peers, community, legislative or policy issues.) and a developmental perspective that demonstrates a general understanding of diversity issues and how they impact presenting concerns. | A basic overview of the student's system (e.g., school, community, family, peers, community, legislative or policy issues.) and a developmental perspective that demonstrates a basic understanding of diversity issues. | A vague, unclear, or unsupported overview of the student's system and a developmental perspective that does not demonstrate a clear understanding of diversity issues. | An insufficient, unclear overview of the student's system and a developmental perspective and/or failure to recognize diversity issues. | |
| "SMART" Treatment Goals | Provides clear, concise, and professionally worded "SMART" treatment goals that align with presenting concerns as well as models for school counseling practice. | Provides appropriate "SMART" treatment goals that align with presenting concerns as well as models for school counseling practice; lacks some detail. | Provides appropriate "SMART" treatment goals that align with at least one of the following: presenting concerns or models for school counseling practice. | Provides treatment goals that are not "SMART" or lack sufficient detail or connection to presenting concerns or models for school counseling practice. | Provides an inaccurate or insufficient list of "SMART" treatment goals; no connection made to presenting concerns or models for school counseling practice. | |
| Interventions (Already Implemented or Anticipated) | Provides a clear, detailed explanation of appropriate interventions that aligns with presenting concerns, treatment goals, and models | Provides appropriate explanation of interventions that aligns with presenting concerns, treatment goals, and models for school counseling practice; lacks some detail. | Provides appropriate explanation of interventions that aligns with at least one of the following: presenting concerns, | Provides an explanation or list of interventions with little attention to detail or connection to presenting concerns, treatment goals, or models for school counseling practice. | Provides an inaccurate or insufficient list of interventions with no connection made to presenting concerns, treatment goals, | |

| | 5 | 4 | 3 | 2 | 1 | N/A |
|---|---|--|---|---|--|-----|
| | for school counseling practice. | | treatment goals, or models for school counseling practice. | | or models for school counseling practice. | |
| Outcomes (Already Evidenced or Anticipated) | Provides a clear, detailed description of outcomes that align with presenting concerns, student strengths, treatment goals, and interventions. | Provides appropriate description of outcomes that aligns with presenting concerns, treatment goals, and interventions; lacks some detail. | Provides appropriate description of outcomes that aligns with at least one of the following: presenting concerns, treatment goals, or interventions. | Provides description of outcomes with little attention to detail or connection to presenting concerns, treatment goals, or interventions. | Provides an inaccurate or insufficient description of outcomes with no connection made to the presenting concerns, treatment goals, or interventions. | |
| Overall Conceptualization: Quality of Assessment | The overall report integrates all available information into a sophisticated, consistent, and professionally relevant conceptualization. The focus and goals for treatment is clearly articulated and appropriate for a school setting. | The overall report integrates available information into a professionally relevant conceptualization. Most areas are clear and consistent. The conceptualization provides a clear focus and goals for treatment. | The overall report integrates information into a professionally relevant conceptualization. The conceptualization provides a general focus for treatment. However, it is lacking a clear, detailed focus and goals. | The overall report contains minor problems with integration and consistency across domains. The conceptualization does not provide a single, clear focus and goals for treatment. | The overall report contains significant problems with integration, clarity, and consistency. There is little to no clear focus or goals for treatment. | |

ADDITIONAL COMMENTS (*continued on back*):

UNIVERSITY of
NORTHERN COLORADO



TREATMENT PLAN AND CASE CONCEPTUALIZATION
School Counseling Version
(To Be Completed During Practicum I, Practicum II, and Internship)

Completion of this form: Use accompanying rubric to understand the expectations of each section in this form and use this rubric as a guideline to appropriately complete this form. Your instructor may have specific information they request in each section.

Name: _____ Date: _____

Course Enrolled: _____ Supervisor: _____

Student Pseudonym: _____ Age: _____

Introduction:

Presenting Concerns:

Background Information:

Student Strengths:

Hypotheses:

School Counselor Observations (i.e., Larger System & Developmental Perspective):

Specific, Measurable, Attainable, Realistic, and Timely (SMART) Treatment Goals:

1)

2)

3)

Interventions (Already Implemented or Anticipated):

Outcomes (Already Evidenced or Anticipated):

**APPENDIX F: Student Evaluation – *Clinical Mental Health
Counseling***



PRACTICUM STUDENT EVALUATION
APCE 619 *Clinical Mental Health Counseling*
Applied Psychology and Counselor Education
Evaluation of Practicum Student

Completed by Practicum Supervisor

Name of Student: _____ Date: _____

Name of Supervisor: _____ Site: _____

Please indicate whether this is a mid-term or final evaluation: _____

This form was designed to help supervisors provide feedback about the performance of practicum students. The time you take to complete this form is very much appreciated. You are encouraged to review your assessment with the student prior to submitting it to the University Practicum Supervisor.

Your appraisal of the student's performance will be considered in assigning his or her grade for the practicum experience. Once completed, the form will become part of the student's record.

Please describe modalities of supervision you employed when working with this student (Please mark all that apply).

- _____ Observed student directly
- _____ Listened to or watched tapes of student counseling
- _____ Read session notes
- _____ Discussed cases with student
- _____ Other (please describe)

What number of overall Practicum hours did the student spend with:

- _____ Direct client activities (counseling)
- _____ Indirect client activities (i.e. case conferences, staff meetings, administrative duties, etc.)

In order to facilitate the development of the student's skills, please rate student's performance according to the following scale:

| | | | | | | |
|--------------|---|--------------|---|--------------|--|----------|
| Unacceptable | | Meets | | Above | | Not |
| | | Expectations | | Expectations | | Observed |
| 1 | 2 | 3 | 4 | 5 | | N/A |

Please write comments, when necessary, in the space provided under each question. Your feedback is greatly appreciated.

1) OPENING / RAPPORT

* Did counselor establish good rapport with client(s)?

| | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|

2) INTERACTION / INTERVIEW SKILLS

* How well did the counselor maintain the direction of the interview/intake? 1 2 3 4 5 N/A

* Was counselor accepting and encouraging of client's emotions, feelings, and expressed thoughts? 1 2 3 4 5 N/A

3) COUNSELOR RESPONSES

* Were counselor's responses appropriate in view of what client was expressing? 1 2 3 4 5 N/A

* Did counselor reflect and react to feelings? 1 2 3 4 5 N/A

* Did the counselor's values remain objective when working with the client? 1 2 3 4 5 N/A

* Were interventions used appropriately? 1 2 3 4 5 N/A

4) COUNSELING RELATIONSHIP

* Was relationship conducive to productive counseling? 1 2 3 4 5 N/A

* Did counselor talk at appropriate language level with clients? 1 2 3 4 5 N/A

* Did the counselor use language, tone of voice, and other behavior to convey interest in the client? 1 2 3 4 5 N/A

* Did counselor communicate his/her interests, feelings, and experiences to the client when appropriate? 1 2 3 4 5 N/A

5) CLIENT CONCEPTUALIZATION

* Did counselor understand/conceptualize client's problem in its full perspective (i.e. systems)? 1 2 3 4 5 N/A

* Can counselor report client behavior accurately and support observations with specific behavioral observations? 1 2 3 4 5 N/A

* Did interventions reflect a clear understanding of the client's problem? 1 2 3 4 5 N/A

* Was counselor able to demonstrate knowledge of principles and processes of theoretical framework underlying

| | | | | | | |
|---|---|---|---|---|---|-----|
| mode of treatment used? | 1 | 2 | 3 | 4 | 5 | N/A |
| * Were treatment goals and plans reflective of good case conceptualization? | 1 | 2 | 3 | 4 | 5 | N/A |

6) TERMINATION

| | | | | | | |
|--|---|---|---|---|---|-----|
| * Was termination initiated properly (was it a smooth transition during the counseling process)? | 1 | 2 | 3 | 4 | 5 | N/A |
| * Was follow up or termination discussed? | 1 | 2 | 3 | 4 | 5 | N/A |

7) CASE CONCEPTUALIZATION / SUPERVISION

| | | | | | | |
|---|---|---|---|---|---|-----|
| * Was counselor able to observe and discuss case objectively and insightfully with supervisor? | 1 | 2 | 3 | 4 | 5 | N/A |
| * Was counselor receptive to supervisor feedback? | 1 | 2 | 3 | 4 | 5 | N/A |
| * Was feedback reflected in future counseling sessions? | 1 | 2 | 3 | 4 | 5 | N/A |
| * Was counselor able to observe/understand his/her own personal influence on the counseling relationship? | 1 | 2 | 3 | 4 | 5 | N/A |

Additional Comments (please use back of sheet, if necessary): _____

Supervisor Signature: _____ Date: _____

Student Signature: _____ Date: _____

Univ. Sup. Signature: _____ Date: _____

APPENDIX G: Student Evaluation – *School Counseling*



PRACTICUM STUDENT EVALUATION
APCE 619 School Counseling
Applied Psychology and Counselor Education
Evaluation of Practicum Student

Completed by Practicum Supervisor

Student Name: _____ Date of Evaluation: _____

Supervisor: _____ Site: _____

Please indicate whether this is a mid-term or final evaluation: _____

This form was designed to help supervisors provide feedback about the performance of practicum students. The time you take to complete this form is very much appreciated. You are encouraged to review your assessment with the student prior to submitting it to the University Practicum Supervisor.

Your appraisal of the student's performance will be considered in assigning his or her grade for the practicum experience. Once completed, the form will become part of the student's record.

Please describe modalities of supervision you employed when working with this student (Please mark all that apply).

- Observed student directly
Listened to or watched tapes of student providing counseling and guidance services
Read notes of activities
Discussed activities with student
Other (please describe)

Which of the following activities did the student perform:

- Individual Counseling
Group Counseling
Consulting with Teachers
Consulting with Parents
Other (please list)
Career Counseling
Assessment
Student Conferences
Classroom Curriculum Activities

For the following items, please use the scale provided. Your additional comments will provide information that will contribute to the student's professional growth.

In order to facilitate the development of the student's skills, please rate student's performance according to the following scale:

Table with 5 columns: Unacceptable (1), Meets Expectations (2, 3), Above Expectations (4, 5), Not Observed (N/A)

The Student as a Professional

1. Basic Work Expectations

| | | | | | |
|--|---|---|---|---|---|
| Arrives on time consistently | 1 | 2 | 3 | 4 | 5 |
| Informs supervisor and makes arrangements for absences | 1 | 2 | 3 | 4 | 5 |
| Reliably completes requested or assigned tasks | 1 | 2 | 3 | 4 | 5 |
| Is responsive to norms about clothing, language, etc. | 1 | 2 | 3 | 4 | 5 |
| Demonstrates awareness of and response to school's culture | 1 | 2 | 3 | 4 | 5 |
| Demonstrates ability to work cooperatively and collaboratively with others | 1 | 2 | 3 | 4 | 5 |
| Reviewed material recommended by supervisor | 1 | 2 | 3 | 4 | 5 |

2. Ethical Awareness and Conduct

| | | | | | |
|---|---|---|---|---|---|
| Demonstrates clear understanding of ethical guidelines | 1 | 2 | 3 | 4 | 5 |
| Demonstrates commitment to following ethical guidelines | 1 | 2 | 3 | 4 | 5 |
| Consults with others about ethical issues as necessary | 1 | 2 | 3 | 4 | 5 |

3. Response to Supervision

| | | | | | |
|--|---|---|---|---|---|
| Actively seeks supervision when necessary | 1 | 2 | 3 | 4 | 5 |
| Demonstrates receptivity to feedback and suggestions | 1 | 2 | 3 | 4 | 5 |
| Understands information communicated by supervisor | 1 | 2 | 3 | 4 | 5 |
| Attends to areas inviting improvement and growth | 1 | 2 | 3 | 4 | 5 |
| Demonstrates understanding of personal limitations | 1 | 2 | 3 | 4 | 5 |

4. Work Products

| | | | | | |
|---|---|---|---|---|---|
| Maintains documentation reliably and accurately | 1 | 2 | 3 | 4 | 5 |
| Develops materials that are of a professional quality | 1 | 2 | 3 | 4 | 5 |

The Student as a Counselor

| | | | | | |
|--|---|---|---|---|---|
| Demonstrates knowledge of developmentally appropriate interventions | 1 | 2 | 3 | 4 | 5 |
| Demonstrates basic skills in individual counseling | 1 | 2 | 3 | 4 | 5 |
| Demonstrates ability to accurately assess/evaluate students' needs | 1 | 2 | 3 | 4 | 5 |
| Demonstrates basic skills in group counseling | 1 | 2 | 3 | 4 | 5 |
| Demonstrates basic skills in managing a case from start to finish | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of career development needs of students | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of academic development needs of students | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of students' personal and social needs | 1 | 2 | 3 | 4 | 5 |
| Demonstrates a sensitivity to cultural differences in counseling | 1 | 2 | 3 | 4 | 5 |
| Demonstrates an ability to refer appropriately | 1 | 2 | 3 | 4 | 5 |
| Demonstrates skills in using technology relative to counseling | 1 | 2 | 3 | 4 | 5 |
| Demonstrates skills regarding test administration and interpretation | 1 | 2 | 3 | 4 | 5 |

Comments: _____

Please recommend activities or goals for the student when he/she is in internship.

The Student as a Consultant

| | | | | | |
|--|---|---|---|---|---|
| Demonstrates basic consulting skills with parents | 1 | 2 | 3 | 4 | 5 |
| Demonstrates basic consulting skills with teachers | 1 | 2 | 3 | 4 | 5 |
| Demonstrates basic consulting skills with administrators | 1 | 2 | 3 | 4 | 5 |
| Demonstrates basic assessment skills in consultation matters | 1 | 2 | 3 | 4 | 5 |

| | | | | | |
|--|---|---|---|---|---|
| Demonstrates knowledge of student career development as it relates to consultation | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of human development as it relates to consultation | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of academic development as it relates to consultation | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of cultural issues of stakeholders | 1 | 2 | 3 | 4 | 5 |

Comments: _____

Please recommend activities or goals for the student when he/she is in internship.

The Student as a Program Coordinator

| | | | | | |
|--|---|---|---|---|---|
| Demonstrates knowledge of the school's overall functioning | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of the ASCA Model curriculum and how it interfaces with the school's curriculum | 1 | 2 | 3 | 4 | 5 |
| Demonstrates skills in assessing programmatic needs | 1 | 2 | 3 | 4 | 5 |
| Demonstrates organizational skills in coordinating programs | 1 | 2 | 3 | 4 | 5 |
| Demonstrates basic communication skills with stakeholders in coordinating programs | 1 | 2 | 3 | 4 | 5 |

Comments: _____

Please recommend activities or goals for the student when he/she is in internship.

The Student as Classroom Guidance Facilitator

| | | | | | |
|--|---|---|---|---|---|
| Demonstrates skills in preparing for classroom presentations | 1 | 2 | 3 | 4 | 5 |
| Demonstrates skills in classroom management | 1 | 2 | 3 | 4 | 5 |
| Demonstrates skills in conducting classroom presentations | 1 | 2 | 3 | 4 | 5 |
| Demonstrates skills in assessing classroom presentations | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of choosing developmentally appropriate classroom activities | 1 | 2 | 3 | 4 | 5 |
| Demonstrates knowledge of the school's counseling program as it relates to developing classroom activities | 1 | 2 | 3 | 4 | 5 |
| Responds to cultural diversity in designing classroom activities | 1 | 2 | 3 | 4 | 5 |
| Demonstrates skills in using technology relative to instruction | 1 | 2 | 3 | 4 | 5 |

Please comment on your evaluation of the strengths of the student in doing classroom presentations:

Please recommend activities or goals for the student when he/she is in internship.

Overall, what would you identify as this student's strengths?

What would you identify as the most important areas in which this student needs to improve?

Supervisor Signature: _____ Date: _____

Student Signature: _____ Date: _____

Univ. Sup. Signature: _____ Date: _____

APPENDIX H: Practicum Site Evaluation



Please complete this form at the end of your practicum experience. This will assist other students when seeking a site. This form is used for internal (APCE) use only.

Academic Semester: _____ Date: _____

Spring____ Fall____ Summer____ Academic Year: _____

Name of Student: _____

University Practicum Supervisor _____

Site: _____ On-Site Supervisor: _____

Address: _____

_____ Phone: _____

On-Site Practicum Contact Person: _____

Email Address: _____

Briefly describe your overall experience at this Practicum site.

Following your experience, would you recommend this site to other students?
Why?

Description of Client/Student Population: (i.e. students, chronic cases, families, children, etc.)

What type of supervision is provided (list number of supervision hours you received in the spaces provided)?

- | | |
|---|------------------------------------|
| _____ Supervisor observed student directly | _____ Supervisor read case notes |
| _____ Supervisor discussed cases with student | _____ Supervisor listened to tapes |
| _____ Supervisor watched videotapes | _____ Group supervision provided |
| _____ Individual Supervision | _____ Other (please describe) |

Describe the supervisor's style of supervision and theoretical orientation.

What are the responsibilities required of students at this site?

Check all counseling opportunities available to students at this site (*if clinical site*):

Individual Counseling:

- | | |
|--------------------------|-----------------------------------|
| Men _____ | _____ Report Writing |
| Women _____ | _____ Intake Interviewing |
| Adolescents _____ | _____ Psycho/Educational Training |
| Children _____ | _____ Case/Staff Conferencing |
| Career Counseling _____ | _____ Program Administration |
| Assessment/Testing _____ | _____ Consulting |
| Group Counseling _____ | _____ Special Populations |
| (please describe) | (please describe) |

Check all counseling opportunities available to students at this site (*if school site*):

- | | |
|--|-------|
| Individual Counseling | _____ |
| Personal/Social, Career, & Academic Counseling | _____ |
| Group Counseling | _____ |
| Classroom Guidance | _____ |
| Program Development | _____ |
| Program Evaluation | _____ |
| Consultation (parents) | _____ |
| Consultation (teachers) | _____ |
| Testing | _____ |
| Test Interpretation | _____ |
| Staff Meetings | _____ |

Please rate the following items:

| | Very Little | | | | Very Much |
|--|----------------|---|---|---|--------------|
| | 1 | 2 | 3 | 4 | 5 |
| 1) Degree to which your expectations for the Practicum were met. | 1 | 2 | 3 | 4 | 5 |
| 2) Opportunity you were given to participate in decisions that affected you. | 1 | 2 | 3 | 4 | 5 |
| 3) Degree to which your training needs were provided for. | 1 | 2 | 3 | 4 | 5 |
| 4) Degree to which you were satisfied with your practicum experience | 1 | 2 | 3 | 4 | 5 |

Please add any additional comments you feel would be helpful to students interested in this site.

APPENDIX I: NEW SITE REQUEST FORM



New Practicum II Site Approval Request Form

Counselor-in- Training Name:

Email:

SITE INFORMATION

Name: _____

Address: _____

Phone #: _____ Email: _____

SUPERVISOR INFORMATION (please attach a copy of supervisors resume/vita to this form)

Name: _____ Title: _____

Degree(s) [e.g., M.A. School Counseling, 2000, University of Northern Colorado]:

License/Credentials: _____

Years of experience as a School Counselor or Clinical Mental Health Counselor: _____

Number of Years at Current Position: _____ (If less than 2 years at current position,
briefly describe previous experience on the lines provided below)

APPENDIX J: ELIGIBILITY VERIFICATION FORM



Eligibility Verification for Practicum II Experience

Name: _____

Date: _____

Bear #: _____

Advisor: _____

Degree Program: _____

Semester Taking 619: _____

Bearmail Address (no other e-mail accepted): _____

To be eligible for enrollment in the Practicum II (APCE 619) the following criteria must be met and verified. Check each of the following requirements that have been met.

Required Prerequisite Courses All Students

Semester Taken

APCE 612 Practicum in Individual Counseling

APCE 657 Legal and Ethical Aspects of Counseling

APCE 607 Theories of Counseling

Required Co-requisite Courses All Students

Semester Taken/Scheduled

APCE 616 Career Theory Counseling and Assessment

APCE 673 Appraisal and Assessment in Counseling

Required Prerequisites Courses School Placements

Semester Taken/Scheduled

PSY 530 Lifespan Developmental Psychology

APCE 558 Diagnosis and Treatment Planning

APCE 602 Foundations of School Guidance

APCE 608 Organization, Administration, and Evaluation...

APCE 606 Theories and Practices in Group Guidance

APCE 603 Understanding Children, Adolescents, ...

Required Prerequisites for Clinical Mental Health Placements

Semester Taken/Scheduled

PSY 530 Lifespan Developmental Psychology

APCE 558 Diagnosis and Treatment Planning

APCE 650 Orientation to Clinical Mental Health Counseling

APCE 662 Group Dynamics and Facilitation _____

APCE 603 Understanding Children, Adolescents _____

*** 603 only if services will be provided to children or adolescents**

_____ I have obtained professional liability insurance.

I have met the eligibility requirements for practicum II or will have met them prior to the beginning of the _____ term.

Signed: _____ Date: _____

Received: _____ Date: _____
(University PC External Placement Coordinator)

Approval Conditions (e.g., no child adolescent sites):