GRADUATE INTERNSHIP MANUAL
School of Applied Psychology and Counselor Education

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INTRODUCTION

This Internship Manual includes requirements and procedures to be followed by those involved in working with Graduate Student Interns on location in community agencies. Its primary purpose is to formalize and enhance the arrangements among the professional counseling program faculty, internship on-site supervisors, and graduate student interns enrolled in internship courses at the University of Northern Colorado. The internship activities and requirements have been based on the American Counseling Association (ACA) 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, National Board for Certified Counselors (NBCC) standards, and professional counseling program faculty recommendations.

Internship experiences at UNC are intentionally and carefully designed to provide opportunities for students to acquire greater understanding of concepts they learn through coursework and practicum, acquire new information, and integrate diverse learning and practical experiences. We realize that an internship 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 internship agreement for each internship experience (or site) will document the activities that can be provided at that site and supervised by the signatory. The purpose of the internship agreement is to provide a uniform internship 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.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Hours</td>
<td>According to 2016 CACREP standards, direct services are supervised uses of counseling, consultation, or related professional skills with actual clients (can be individuals, couples, families or groups). These activities must involve interactions with clients and may include: (a) assessment, (b) counseling (can include therapeutic phone calls), (c) psycho-educational activities, and (d) consultation (serving as a consultant to clients). These hours do not include any activity where the client is not present.</td>
</tr>
<tr>
<td>Graduate Student Intern</td>
<td>A student in good standing who is enrolled in an internship course, possesses professional liability insurance and has executed an internship agreement with a site(s).</td>
</tr>
<tr>
<td>Group Supervision</td>
<td>Students are required by 2016 CACREP standards to participate in group supervision with a University Internship Supervisor or student supervisor under the supervision of a University Internship Instructor, for an average of 1 ½ hours per week. This supervision may be done in more intense formats (3 hours every other week or 6 hours once a month) and needs to occur on a regular basis. <strong>Attendance at group supervision is mandatory and must be made up if</strong></td>
</tr>
</tbody>
</table>


**Indirect Hours**

Hours completed that **contribute** to the client’s treatment (record keeping, case staffing, consultation with other providers, paperwork) and to Graduate Student Intern development (workshops, staff development, staff meetings, readings related to client needs). This cannot include travel time.

**Individual/Triadic Supervision**

Weekly individual or triadic supervision (supervision with two counseling students) with the Site Supervisor of record. According to 2016 CACREP standards, students must receive, on average, 1 hour per week of formal individual or triadic supervision with the Site Supervisor. Students may also engage in group supervision but that does not replace the individual or triadic supervision requirement.

**Internship Agreement**

A formal, legal document that is executed between the University, the Graduate Student Intern and the internship 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 Graduate Student Intern, the site and University Internship Supervisor(s).

**Internship Prerequisites**

Identified courses within the student’s program that must be completed prior to engaging in the internship experience.

**Internship Program Coordinator**

A UNC faculty member who is responsible for oversight of the internship program. Among other administrative responsibilities, this person addresses remediation issues including but not limited to problematic Graduate Student Intern performance or problems that occur with the internship site.

**Site Placement Coordinator**

A UNC faculty member who coordinates the administrative and mentoring tasks related to internship site placement. This individual is also responsible for facilitating new site approvals and Exception Requests.

**Site Supervisor**

A site supervisor must be (a) a licensed mental health professional (LPC, LP, LCSW, LAC, LMFT, etc.); (b) have a minimum of 2 years of pertinent professional experience; (c) have knowledge of the program’s expectations, requirements, and evaluation procedures for students; (d) have relevant training in supervision; (e) have signed the internship agreement; and (f) be able to provide formal weekly clinical supervision, oversight, evaluation and mentoring to the Graduate Student Intern.

**University Internship Supervisor**

A UNC Counselor Education program faculty member who is the primary contact for the Graduate Student Intern and Site Supervisor. This person conducts each student’s site visits and provides 6 hours a month of group supervision to all students enrolled in the internship experience.

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**INTERNERNSHIP POLICIES**

**Student Qualifications**

No internship will be approved for which the student has not been academically prepared.

Only individuals who have completed the MCFC/T coursework may provide services for marriage/couples/family (beyond parent consultation when child is the client). See pg. 9 for MCFC/T prerequisites.

**Ethical Behavior**
Students are expected to demonstrate the highest level of ethical behavior, as set forth by the American Counseling Association (ACA). Unethical behavior will not be tolerated and will be considered cause for dismissal at any time during the student's program.

**Concurrent Employment**

The Professional Counseling faculty has adopted a policy that prohibits the selection of an internship site in which the student is currently or has been previously employed and/or volunteered.

**Student Liability Insurance**

All students registered for internship must provide documentation of professional liability insurance. This insurance may be obtained privately. However, the American Counseling Association provides free student liability insurance for members. We recommend that you obtain your insurance from the ACA Insurance Trust, although you reserve the right to choose your insurance company. You may get further information from the ACA Insurance Trust by contacting ACA at [www.counseling.org](http://www.counseling.org). (We recommend 1 million 3 million coverage.)

**Distance Restrictions for Internship Sites**

Internship sites must be within 60 miles of the Greeley campus. Students who wish to arrange a placement more than 60 miles from campus must submit an Exception Request to the Site Placement Coordinator, 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 requests, (3) enough notice must be given for thorough faculty consideration.

**Continuous Registration Policy for Graduate Students** *(Graduate School Policy)*

All master’s students must register for at least 1 semester hour during the semester when they graduate (including the Summer term) unless they have already completed all required credits for their degree prior to the semester when they graduate. Students who have already completed all required credits will be automatically assessed the $150 continuous registration fee for the semester when they graduate.

Master’s students holding an academic-year graduate assistantship must enroll in a minimum of 3 credit hour (Fall and Spring); those holding a fiscal-year assistantship must enroll in a minimum of 3 credit hour (Fall, Spring and Summer) to be in compliance with the terms of their assistantship agreements and this policy. Graduate assistants are not eligible for the $150 continuous registration fee.

**Response to Site Supervisor’s Report of Unsatisfactory Performance**

In the event a Site Supervisor gives a Graduate Student Intern a negative written evaluation, the University Internship Supervisor will inform the Professional Counseling faculty who will discuss the concerns during a regularly scheduled faculty meeting. The Professional Counseling faculty, along with the University Internship Supervisor, will arrange for a meeting with the student in order to review his or her specific situation. The Professional Counseling faculty will determine whether the student (a) may continue the internship, (b) should receive a grade of unsatisfactory, (c) should engage in a remediation plan, or (d) should obtain additional internship hours. The Professional Counseling faculty may identify strategies for remediation or request the establishment of a Review and Retention Committee.
**Unsatisfactory Grades**

Graduate Student Interns who receive a grade of unsatisfactory or who withdraw must have written permission from their University Internship Supervisor and the Internship Program Coordinator to be permitted to enroll again for internship. The Professional Counseling faculty will determine when the student may retake the internship.

**Registering for Internship Hours**

*Clinical Mental Health Counseling students:* Students must register for six (6) semester hours of APCE 692 through the University of Northern Colorado. Student may register for up to 18 credits according to program and financial aid requirements.

*Marriage, Couples and Family Counseling/Therapy students:* Students must register for two (2) semester hours of APCE 691 through the University of Northern Colorado. Students may register for up to 18 credits according to program and financial aid requirements.

Internships are viewed as culminating field-based experiences that should be completed just prior to the completion of a graduate degree program, and upon successful completion of all prerequisites as outlined in the Internship Manual. The internship must be completed in a maximum of three consecutive semesters (not counting winter/interim session), or one full calendar year. Although some internships can be completed in one semester, most students take two or three semesters to complete the requirements. Because students often spend the first month becoming oriented to the internship site and building a client base, one semester is often not long enough, regardless of the number of hours spent on site each week.

Internship experiences start and stop with the academic terms defined by the University calendar. Students wishing to continue internship between fall and spring semesters must enroll in the winter/interim supervision class. Students may not “volunteer” at their site and/or accrue hours between semesters. Students may, however, continue their internship experience during breaks that are within the semester (e.g., spring break).

Additionally, students cannot complete a contract that extends beyond one semester. If a student anticipates interning at a site for more than one semester, they will need to complete a contract for each semester of their internship experience.

All students must be registered for an internship course to count hours toward completion of the internship requirements, therefore, students who have not completed their hours by the end of an academic term (as defined by the University calendar) must register for the next semester to complete hours for this course and to maintain their insurance coverage. Once a student is enrolled in an internship class, they must remain at the site for their contracted dates and attend all required supervision (individual, triadic and/or group) for the full-semester, regardless of when the required hours toward graduation are met.

**On-Site Supervision and Providing In-home services**

A UNC Graduate Student Intern cannot perform any direct client service without a licensed mental health provider present and on-site. This includes but is not limited to providing after-hours services and/or in-home services. A Graduate Student Intern is not permitted do home visits as part of their internship experience unless a licensed mental health provider (LPC, LP, LCSW, LAC, LMFT, etc.) is present.
Exception Requests

Any internship placement or activities falling outside of program policy must receive formal approval by means of an Exception Request. Exception Requests can be made by sending an email detailing the request to the Site Placement Coordinator who will then facilitate the approval process. Exception Requests are considered on an as-needed, irregular basis, so it is recommended that students requesting an exception turn in the request as soon as possible and expect, at minimum, a two-week waiting period.

PREREQUISITES FOR INTERNSHIP

To be eligible for enrollment in the Clinical Mental Health Counseling Internship (APCE 692) and/or the MCFC/T emphasis Internship (APCE 691) the following criteria must be met.

APCE 607  Theories of Counseling
APCE 612  Practicum in Individual Counseling
          APCE 619  Practicum II in Individual Counseling (Clinical Mental Health Counseling only)
APCE 558  Diagnosis and Treatment Planning
APCE 657  Legal and Ethical Aspects of Counseling and Psychology
APCE 605  Group Lab Experience
APCE 662  Group Dynamics and Facilitation
APCE 661  Psychological Trauma and Intervention for Individuals, Families and Communities
          (NOTE: May be taken concurrently with first semester of Internship, but must be successfully completed by the end of the first semester).
APCE 603  Understanding Children, Adolescents and Their Systems (if working with children or adolescents)
APCE 673  Appraisal & Assessment in Counseling

Students completing Marriage, Couples and Family Counseling/Therapy emphasis must have also completed:

APCE 665 Family Systems
APCE 669 Advanced Methods: Couples and Family Therapy
APCE 694 Practicum in Couples and Family Therapy

MINIMUM REQUIREMENTS FOR INTERNSHIP

Internship sites must be able to accommodate the following minimum requirements:

- For MCFC/T: Minimum of 300 direct client contact hours (as defined on pg. 5).
- For Clinical Mental Health: Minimum of 240 direct client contact hours (as defined on pg. 5)
- Minimum of 600 on-site hours (i.e., counseling + indirect client activities).
- Minimum of one (1) hour per week of individual or triadic supervision, throughout the internship, performed by the Site Supervisor.
- Opportunity for students to lead or co-lead a counseling or psychoeducational group.
- Opportunity for the student to become familiar with a variety of professional activities other than direct service.
- Opportunity for the student to obtain audio and/or video recordings of their 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.

MCFC/T Emphasis: APCE 691

Students must meet the prerequisites listed above as well as successfully complete APCE 665 Family Systems, APCE 669 Advanced Methods and APCE 694 Practicum in Family Counseling/Therapy.

Of the required 300 direct client contact hours, the following requirements must be met:

**A minimum of 125 direct client contact hours:** systemic approaches to counseling with couples and families (more than 1 family member in the room as clients).

**A minimum of 115 hours:** systemic approaches with 1 or more clients in the room, (The remaining hours may reflect any approach with direct client contact.)

**Site Supervisor Requirements**

A site supervisor must be a licensed mental health professional (LPC, LP, LCSW, LAC, LMFT, etc.); have a minimum of 2 years of pertinent professional experience; have knowledge of the program expectations, requirements, and evaluation procedures for students; and have relevant training in supervision. Supervisors must agree to regularly review the students’ audio and/or videotapes and provide a minimum of 1 hour per week of individual or triadic supervision throughout the internship experience.

**Group Supervision on Campus**

Throughout the course of APCE 691 and 692, interns will meet on campus at least three hours every two weeks for group interaction and supervision, which is provided by the University Internship Supervisor. Expectations for group supervision will be provided at the beginning of each semester.

**Internship Attendance Policy**

Students are required to attend every class schedule for sections of APCE 614, 619, 691, and 692. Group supervision is a requirement of internship and necessary for ethical training practices. If a student experiences an emergency causing them to miss a class session, they must communicate their absence to the instructor of the courses in a timely manner, preferable prior to missing the class. Following an absence from group supervision, the student will be required to make up the missed class by attending another section of group supervision at any program location (Greeley, Denver, or Loveland). The student must inform the instructor of the section they plan to attend for the make-up class prior to attending. The student can attend any section of APCE 619, 614, 692, or 691 to make up the missed class, regardless of which course they are enrolled. To verify attendance, the student is required to obtain written or e-mail verification of attendance and attendance to the whole class is required. If students are unable to make up the group supervision course time during the same semester they missed the class, they will be required to register for and attend another semester of the course.

**Documentation**

Upon completion of internship, students must submit the following documents to the University Internship Supervisor.
One copy of the Internship Log (Attachment C)
Student’s evaluation of the internship site (Attachment E)
Site evaluation of the graduate student interns (Attachment D)

Additionally, one copy of the Internship Log should be given to the Site Supervisor.

PREPARING FOR YOUR INTERNSHIP EXPERIENCE

Procedures and Timelines

Students should initiate the following internship procedures at the beginning of the semester before they wish to begin internship. They should find an appropriate site and finalize all procedures, including completing the Internship Agreement and obtaining proof of insurance a minimum of 3 weeks prior to the last day of classes in the semester before they begin internship. (For fall semester, this would mean three weeks prior to the end of the second summer session.)

1. **Attend the Mandatory Practicum II / Internship Information Meeting.** Students must attend the Mandatory Practicum II/Internship Information Meeting the semester prior to searching for an internship site. This meeting will be held the **second Thursday of the fall and spring semesters at 12:00.** 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 internship. Eligibility Verification Form (Attachment B) and proof of liability insurance are due at this time.** See the Mandatory Information Meeting Decision Tree (Attachment G) to determine if you need to attend the meeting.

2. **Get approval from the Site Placement Coordinator.** Following the Mandatory Practicum II/Internship Information Meeting, the Site Placement Coordinator will determine a student’s eligibility to start contacting possible Internship sites. In order to be considered eligible, a student must have completed and turned in the following:
   - Attended Mandatory Practicum II/Internship Information Meeting
   - Completed all of the required pre-requisite courses (see pg. 9) and turned in a completed Eligibility Verification Form (Attachment B) to the Site Placement Coordinator or APCE Main Office
   - Turned in proof of liability insurance to the Site Placement Coordinator or APCE Main Office.

   When these requirements have been met, students will be notified via email, that they have been approved to start searching for an internship site. In this email notification, students will receive the approved site list from which they may choose an internship site.

3. **Explore Potential Internship Sites.** Once students have found a site they might be interested in, they then contact the prospective internship site (see selecting an internship site pg. 11) and arrange for an in-person interview (see interviews pg. 11). During this exploratory meeting, the agency representative and student should clearly delineate their expectations for the internship experience. As a student, you should determine if a prospective internship site is capable of meeting your needs. Following that interview, if the agency representative thinks that you and the agency experiences or expectations are mismatched, then the internship placement may be refused and another placement sought. If the agency accepts you for internship placement, an Internship Agreement should be
negotiated specifying the expectations (e.g., internship activities) and responsibilities of all parties involved.

4. **New Site Approvals.** Sites that are not on the approved site list must be approved by the Site Placement Coordinator prior to completing an Internship Agreement. Students should use the New Site Approval Form (Attachment F).

5. **Prepare an Internship Agreement.** The student brings a completed Internship Site Agreement (Attachment A) that has been signed by the Graduate Student Intern and the Site Supervisor to the APCE Main Office. The Site Placement Coordinator reviews the contract and, if approved, will obtain the remaining signatures needed for contract completion.

6. **Finalize an Internship Agreement.** Once all of the appropriate signatures have been obtained an electronic copy of the completed Internship Agreement will be emailed to the student and the original will be kept in the students UNC file. The student is responsible for disseminating the completed contract to the appropriate persons at their site and maintaining a copy for their records.

**Selecting an Internship Site**

The first considerations in arranging placement are (a) the intern’s interests and career goals and (b) the University’s requirements for internship. Each potential internship student is asked to indicate the type of client population with which the student would like to be involved. Lists of recommended and approved internship sites are then surveyed to identify potential sites that offer a match between the student’s interests with the available agency.

Students should make professional contacts with possible sites and request an interview. Students are encouraged to interview with more than one agency in order to select the placement that provides desirable experiences and appropriate supervision. When students determine that 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.

Although you may complete your internship at two different sites, in no case will three sites be approved for internship for one student.

**Students are reminded of the policy adopted by the University Professional Counseling faculty that prohibits the selection of an internship site in which the student is currently or has been previously employed. In addition, no internship will be approved for which the student has not been academically prepared.**

**Interviews**

It is your responsibility to arrange interviews at potential internship 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 internship and the requirements you will need to complete during your internship.

2. Prior to the interview, ascertain that the site and supervisor meet requirements (see pg. 10).
3. Ascertain that the prospective internship 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.

4. Carefully consider "fit" between you, your professional goals, and the site. You are encouraged to interview with more than one agency or site in order to select the best placement.

5. If the agency or site accepts you for internship placement, and you elect to accept the opportunity, you can prepare an Internship Agreement (Attachment A) with your Site Supervisor.

ENGAGING IN YOUR INTERNSHIP

Internship Site Supervisors have supervisory and administrative responsibility for site activities. The University Internship Supervisor will maintain contact with Site Supervisors throughout the semester.

The Site Supervisor will complete an evaluation form (Attachment D) addressing the student’s activities and performance. Additionally, students will be asked to evaluate their work, the supervision students received at their site, and overall experience at the site (Attachment E). Forms and guidelines are included in this handbook.

If problems or concerns (ethical, clinical, supervisory, and interpersonal, etc.) develop during students’ internship, students are asked to notify the University Internship Supervisor immediately. Failure to notify the University Internship Supervisor in a timely manner of emerging problems or concerns may constitute an ethical breech on the part of the Graduate Student Intern. It is the responsibility of the University Internship Supervisor to work with students and Site Supervisors to properly handle and resolve problems or concerns.

If for some reason students are unable to complete their internship (personal or professional conflicts), contact the University Internship Supervisor immediately. Failure to report at one’s internship site on a regular basis is unacceptable, unethical and may lead to disciplinary actions (review and retention).

Graduate Student Interns and the University Internship Supervisor are guests of the agencies and clinics where internship 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 Graduate Student Intern. Thus, interns are expected to maintain the highest level of professionalism. Intern’s behaviors reflect on the intern, the clinic or agency in which the student is placed, the University, the Counseling Programs, and future interns.

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

Work Schedules: Work schedules are established with the site and should not interfere with other courses. Because of the time demands it is recommended that interns not try to maintain a full-time job outside of the field placement.

Attendance and Promptness: Graduate Student Interns are expected to be at their clinical site according to the schedule designed with the site supervisor. Absences must be limited to medical emergencies, family emergencies, and professional development activities. Should interns need to be absent or arrive late, interns are to notify the site supervisor and the University Internship Supervisor. Extensive absences, for whatever reason, will result in one’s internship being postponed or ended.
**Expectation of Ethical Conduct:** Graduate Student Interns are expected to know and follow the *American Counseling Association Code of Ethics*. This includes the standards of informed consent, recordkeeping, mandated reporting, confidentiality and its exceptions. Graduate Student Interns are also expected to adhere to district policy and the Colorado Revised Statutes related to the mental health. If/when students encounter ethical dilemmas or ethically concerning/conflicting behaviors or practices they are expected to utilize the ethical decision-making model and inform their Site Supervisor first, then their University Internship Supervisor. Graduate Student Interns are expected to practice at or above the standards of practice for school counseling professional counselor’s failure to do so may result in disciplinary actions by the Professional Counseling faculty (review and retention)

**Responsibilities During Internship**

1. You can expect to have an on-site visit from the University Internship Supervisor each semester of your internship. Prior to the sixth week of your internship, you are responsible for contacting the University Internship Supervisor to schedule a site visit between yourself, your on-site supervisor, and the internship instructor. At that time, you will review your progress thus far during internship.

2. During your internship you are required to maintain logs on a regular basis (Attachment C). After your Site Supervisor has signed the log, send a **copy** of the log to the University Internship Supervisor. Maintain the original in a file until prior to your exit interview when the original logs will be turned in to the University Internship Supervisor. Those students with more than one internship placement are required to keep separate logs for each site.

3. You are required to attend ALL internship meetings scheduled by the University Internship Supervisor.

4. If you are unable to complete your internship, contact the University Internship Supervisor immediately.

**Evaluation of Interns**

Feedback from the internship 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 D). You should provide a copy to the on-site internship supervisor with your resume or vita and internship agreement. The rating form should be completed by the Site Supervisor, reviewed with the student in conference, and returned to the University Internship Supervisor at the completion of the internship. Any additional comments the Site Supervisor might like to make should be included on the rating form.

**INSTRUCTIONS FOR FORMS**

**Note:** All forms MUST be legible. If they are not legible they will be returned to the student.

**Internship Agreement Instructions (Attachment A):**
1. Read agreement thoroughly
2. Type or print legibly all required information
3. Obtain necessary signatures three weeks prior to end of semester prior to start of internship
4. Return agreement to the Site Placement Coordinator or APCE Main Office

**Eligibility Verification Form Instructions (Attachment B):**
1. Read verification form thoroughly
2. Complete form legibly
3. Submit during the Mandatory Practicum II/Internship Information Meeting. After the form has been approved, you may then begin to look for an internship site.

**Internship Hours Log Instructions: (Attachment C):**
1. Type or legibly print your name and your supervisor’s name
2. Obtain the signature of your site supervisor on each log sheet.
3. After completing your internship, give your original log sheets to the University Internship Instructor at your exit interview.
4. Keep copies of all documents for your files.
ATTACHMENT A: Internship Agreement
INTERNERSHIP AGREEMENT

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

________________________________ and the Professional Counseling Program at the University of Northern (Student Name)

Colorado. The agreement will be effective for a period from ______ to ______ for ______ hours a week.

start of semester end of semester

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

The Professional Counseling Program agrees:

1. To assign a University faculty member to facilitate communication between the University and the internship site. This person will contact the Site Supervisor at the beginning of the academic semester to establish communication and review internship procedures;

2. To notify the internship student that he/she must adhere to the administrative policies, rules, standards, schedules, and practices of the internship site;

3. That the University faculty member will provide a minimum of 6 hours per month of group supervision in the form of internship class meetings;

4. That the University faculty member 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; and

5. That the University faculty member assigned as the internship supervisor, in consultation with the on-site supervisor, is responsible for the assignment of an internship final grade.

The Internship Site agrees:

1. To assign an internship on-site supervisor who has (1) a minimum of a master’s degree, preferably in counseling, or a related profession; (2) relevant certifications and/or licenses; (3) a minimum of two years of pertinent professional experience in the specialty area in which the student is enrolled; (4) relevant training in counseling supervision; and (5) has the time and interest in the supervision and training of the internship student;
2. To provide opportunities for the student to engage in a variety of counseling activities under supervision and be involved in the evaluation of the student performance (suggested counseling experiences included in the Internship Activities);

3. A UNC Graduate Student Intern cannot perform any direct client service without a licensed mental health provider present and accessible on-site. This includes but is not limited to providing after-hours services and/or in-home services. A Graduate Student Intern is not permitted to do home visits as part of their internship experience unless accompanied and assisted by a licensed mental health provider (LPC, LP, LCSW, LAC, LMFT, etc.).

4. To provide the student with adequate workspace, telephone, office supplies, and staff to conduct professional activities;

5. To provide supervisory contact for an average of 1 hour per week which involves some examination of student work using audio/visual tapes, observation, and supervision;

6. To provide written evaluation of the student based on criteria established by the Professional Counseling Program; and

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 internship 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 the University Internship Instructor for conferences, i.e., consultation, staffings, etc., and to keep the University Internship Instructor informed regarding the internship 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 internship course requirements as required, and demonstrate the specified minimal level of counseling skill, knowledge, and competence in the various internship activities evaluated during the student's internship experience.

INTERNSHIP ACTIVITIES (Please check all that apply):

The internship requires that the graduate student counselor complete 600 clock hours. At least 240 hours (Clinical Mental Health) or 300 hours (MCFC/T) are to be spent in direct counseling activities (with a client), which include:

_____ 1. Individual Counseling/Psychotherapy: Personal/Social/Occupational
_____ 2. Group Counseling/Psychotherapy: Co-leading, Leading (Includes Psycho-educational)
_____ 3. Intake Counseling
_____ 4. Testing: Administration and Interpretation
_____ 5. Consultation (as a consultant)
_____ 6. Working with Children or Adolescents
_____ 7. Couples and Family Counseling (MCFC/T students only!)

A maximum of 300 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 INTERN:

__________________________________________
Name
__________________________________________
Student I.D.

__________________________________________
Address
City
State
Zip

UNC Email

Student Primary Telephone (inc. area code)

Graduate Student Intern Signature
Date

If you are also employed elsewhere, please list place

TO BE COMPLETED BY INTERNSHIP SITE:

Within the specified time frame, ___________________________ will be the primary internship (Site Supervisor)
on-site supervisor. The Internship Activities (checked) will be provided for the graduate student intern in sufficient amounts to allow an adequate evaluation of the student level of competence in each activity.

__________________________________________
Agency Director or Administrator (name/title)
Signature
Date

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

Agency address
City
State
Zip

Site Supervisor Email

Site Supervisor and/or Internship Site Telephone
TO BE COMPLETED BY UNC SITE PLACEMENT COORDINATOR:

_______________________________
Site Supervisor License Verification

<table>
<thead>
<tr>
<th>Professional Counseling Program Coordinator</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Site Placement Coordinator</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Dean of the College of Education and Behavioral Sciences</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Signature indicates approval of internship site)</td>
<td></td>
</tr>
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<td>* * * * * * * * * * * * * * * * * * * * * * *</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Additional site supervisor signatures will ONLY be added below at the end of each completed internship term (spring, summer, fall, winter interim) if the following criteria has been met:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The student has successfully completed the current term</td>
</tr>
<tr>
<td>2. The student will be continuing on at the site during the following academic term</td>
</tr>
<tr>
<td>Contracts must be resigned each academic term by the site supervisor, and electronically resubmitted to the university internship coordinator by the internship contract deadline, in order to release the student to continue their internship placement at the site.</td>
</tr>
<tr>
<td>Supervisor signature indicates that all parties agree to extending the contract for the time period noted. The agreement will be effective for a period from _______ to _______ for _______ per week.</td>
</tr>
<tr>
<td>(start date of starting semester)</td>
</tr>
<tr>
<td>(end date of ending semester)</td>
</tr>
<tr>
<td>(# hours per week)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>On-site Supervisor (name/degree/license)</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

| Supervisor signature indicates that all parties agree to extending the contract for the time period noted. The agreement will be effective for a period from _______ to _______ for _______ per week. |
| (start date of starting semester)                                                                                                 |
| (end date of ending semester)                                                                                                      |
| (# hours per week)                                                                                                                |
On-site Supervisor (name/degree/license)  

Signature  

Date

**TO BE COMPLETED BY INTERNSHIP SITE:**

Within the specified time frame,________________________will be the primary (Site Supervisor) internship on-site supervisor. The **Internship Activities (checked)** will be provided for the graduate student intern in sufficient amounts to allow an adequate evaluation of the student level of competence in each activity.

Agency Director or Administrator (name/title)  

Signature  

Date

On-site Supervisor (name/degree/license)  

Signature  

Date

Agency address  

City  

State  

Zip

Site Supervisor Email

Site Supervisor and/or Internship Site Telephone

**TO BE COMPLETED BY UNC SITE PLACEMENT COORDINATOR:**

Site Supervisor License Verification

Professional Counseling Program Coordinator  

Date

Site Placement Coordinator  

Date
Additional site supervisor signatures will ONLY be added below at the end of each completed internship term (spring, summer, fall, winter interim) if the following criteria has been met:

1. The student has successfully completed the current term
2. The student will be continuing on at the site during the following academic term

Contracts must be resigned each academic term by the site supervisor, and electronically resubmitted to the university internship coordinator by the internship contract deadline, in order to release the student to continue their internship placement at the site.

Supervisor signature indicates that all parties agree to extending the contract for the time period noted.
The agreement will be effective for a period from ________________ to ________________
(start date of starting semester)
_____________________ for __________________ per week.
(end date of ending semester) (# hours per week)

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

Supervisor signature indicates that all parties agree to extending the contract for the time period noted.
The agreement will be effective for a period from ________________ to ________________
(start date of starting semester)
_____________________ for __________________ per week.
(end date of ending semester) (# hours per week)

_________________________________________________________
On-site Supervisor (name/degree/license).                 Signature       Date
ATTACHMENT B: Eligibility Verification Form
Eligibility Verification for Clinical Mental Health Counseling and MCFC/T Internship

Name: __________________________________________
Date Attended Mandatory Meeting:_______________
Semester you intend to start Internship: ____________ UNC Email: ________________________

To be eligible for enrollment in the Clinical Mental Health Counseling (APCE 692) and or MCFC/T emphasis Internship (APCE 691) the following criteria must be met and verified. Check each of the following requirements that have been met, provide the requested information, and attach the appropriate documentation. Present all documentation and information to the Site Placement Coordinator at the Mandatory Internship Meeting or turn into the APCE Main Office.

1. **Pre-requisites** include the successful completion of:

   _____ APCE 607 Theories of Counseling semester taken ___________
   _____ APCE 612 Practicum in Individual Counseling semester taken ___________
   _____ APCE 619 Practicum II in Individual Counseling (Clinical Mental Health Counseling students only) semester taken ___________
   _____ APCE 558 Diagnosis and Treatment Planning semester taken ___________
   _____ APCE 657 Legal and Ethical Aspects of Counseling and Psych semester taken ___________
   _____ APCE 605 Group Lab Experience semester taken ___________
   _____ APCE 662 Group Dynamics and Facilitation semester taken ___________
   _____ APCE 661 Psychological Trauma and Intervention for Individuals, Families and Communities semester taken ___________

   *(NOTE: APCE 661 May be taken concurrently with first semester of Internship but must be successfully completed by the end of the first semester)*

   _____ APCE 673 Appraisal & Assessment in Counseling semester taken ___________
   _____ APCE 603 Understanding Children, Adolescents and Their Systems (if working with children or adolescents) semester taken ___________

   **Marriage Couples and Family Counseling/Therapy emphasis must have also completed:**

   _____ APCE 665 Family Systems semester taken ___________
   _______ APCE 669 Advanced Methods: Couples and Family Therapy semester taken
   _______ APCE 694 Practicum in Couples and Family Therapy semester taken ___________

2. _____ Proof of professional liability insurance (attach copy of insurance policy).
I have met the eligibility requirements for taking APCE 692 or 691.

Graduate Student Intern Signature: ____________________________ Date: ___________________
ATTACHMENT C: Internship Hours Logs
**INTERNSHIP HOURS LOG**  
**CLINICAL MENTAL HEALTH COUNSELING**

Graduate Student Intern: ____________________________  Course/Semester: ____________________________

University Internship Supervisor: ____________________________

<table>
<thead>
<tr>
<th>Week</th>
<th>Direct Service</th>
<th>Indirect Service</th>
<th>Supervision</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Individual</td>
<td>Group</td>
<td>Total</td>
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<tr>
<td></td>
<td>Other direct</td>
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<td>client contact</td>
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<td>Total</td>
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<td>Other direct</td>
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<td>client contact</td>
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Signatures: By signing this document you are indicating that the above information is true to your knowledge

Graduate Student Intern: ____________________________  Date: ______________

University Internship Supervisor: ____________________________  Date: ______________

Site Supervisor: ____________________________  Date: ______________
# Internship Hours Log

**Marriage, Couple, and Family Counseling/Therapy**

**Graduate Student Intern:** ____________________________  **Course/Semester:** ________________

**University Internship Supervisor:** ______________________________________________________

<table>
<thead>
<tr>
<th>Week</th>
<th>Direct Service</th>
<th>Indirect Service</th>
<th>Supervision</th>
<th>Total</th>
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<tbody>
<tr>
<td></td>
<td>1+ Person</td>
<td>Systemic</td>
<td>Any approach</td>
<td>Total</td>
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<tr>
<td></td>
<td>Systemic</td>
<td>Indirect Service</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Systemic</td>
<td>Supervision</td>
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<td></td>
<td>Individual</td>
<td>Triadic</td>
<td></td>
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<td>Triadic</td>
<td>Group</td>
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<td></td>
<td>Group</td>
<td>Total</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Other client contact</td>
<td>(Paperwork, Workshops Watching Tapes, etc.)</td>
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**Total Hours**

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

**Graduate Student Intern:** ____________________________  **Date:** ________________

**University Internship Supervisor:** ____________________________  **Date:** ________________

**Site Supervisor:** ____________________________  **Date:** ________________
ATTACHMENT D: Site Evaluations of the Graduate Student Intern
**UNIVERSITY OF NORTHERN COLORADO**  
**INTERNSHIP IN CLINICAL MENTAL HEALTH COUNSELING**  
**AGENCY SITE SUPERVISOR**  
**MIDTERM & FINAL EVALUATION FORM**

Name of Supervisee: __________________________ Date: __________________________

Name of Supervisor: __________________________ Site: __________________________

Address: ________________________________________________________________

Please identify the types of activities utilized in supervision with this supervisee.

| Observed supervisee directly via one way mirror or video circuit |
| Listened to or watched tapes of supervisee counseling               |
| Read session notes                                                 |
| Discussed cases with supervisee                                    |
| Group Supervision (6 supervisees or less)                          |
| Triadic Supervision (2 supervisees)                                |
| Individual Supervision                                            |
| Other (please describe)                                           |

What number of overall hours did the supervisee spend doing the following:

| Direct client contact (Individual counseling)                      |
| Direct client contact (couples or families)                        |
| Indirect client activities (i.e. case conferences, staff meetings, in-service workshops, trainings, administrative duties, completion of paperwork, case notes, treatment plans, etc.) |

**TOTAL INTERNSHIP HOURS**

Logistical aspects:

| Supervisee is on time for sessions and supervision               |
| Case notes are ready on time                                    |
| Case notes are well written                                     |
| Treatment planning notes completed and modified with supervision|
| Supervisee has current and active liability insurance in place   |
| Supervisee has completed application/is registered with DORA as a Registered Psychotherapist |
Counseling/theoretical models used by supervisee: 

Supervisee Skills Rating Form

Please use the scale below to rate the supervisee across each of the following dimensions.

Use the scale on the left side for the mid-term evaluation, and the scale on the right side for the final evaluation.

1 = Student is in need of further training and/or requires additional growth, maturation, and change in order to be effective in the various skill areas; trainee should not be allowed to function independently.
2 = Competence is below average but, with further supervision and experience, is expected to develop satisfactorily; independent functioning is not recommended and close supervision is required.
3 = Competence is at least at the minimal level necessary for functioning with moderate supervision required.
4 = Competence is above average, trainee can function independently with periodic supervision.
5 = Competence is well developed and trainee can function independently with little or no supervision required.
N = Insufficient date to rate at this time.

Interaction / Interview Skills

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 2 3 4 5 Counselor establishes good rapport with clients</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>1 2 3 4 5 Counselor is in charge of direction of interview</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>1 2 3 4 5 Counselor is accepting and encouraging of client emotions, feelings, and expressed thoughts</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>1 2 3 4 5 Counselor is aware and accepting of client’s cultural, religious, sexual orientation, ethnic, economic, gender and lifespan/developmental issues, and displays sensitivity to these dimensions in sessions</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

Counselor Responses

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 2 3 4 5 Counselor’s responses are appropriate in view of what client is expressing and according to developmental level</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>1 2 3 4 5 Counselor reflects emotions and responds to feelings appropriately</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>1 2 3 4 5 Counselor is able to establish appropriate boundaries between therapist and client (i.e., counselor avoided being “caught” by client dynamics)</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
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<tr>
<td>---</td>
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<tr>
<td>1</td>
<td>2</td>
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<td>1</td>
<td>2</td>
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</tbody>
</table>

**Counseling Relationship**

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Therapeutic relationship was conducive to productive counseling</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Counselor used appropriate language level with client</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Counselor used language, tone of voice, and other behavior to convey an interest in clients</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Counselor communicated his/her interests, feelings and experiences to clients when appropriate</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

**Client Conceptualization**

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Understands/conceptualizes client’s problem in its full perspective (systemic, developmental, cultural)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Reports client’s behavior patterns accurately and supports reports with specific behavioral observations</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Identifies and utilizes client strengths in sessions and treatment planning</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Interventions reflect a clear understanding of the client’s problem and the client’s goals</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Interventions are consistent with the theoretical counseling model being used to conceptualize the client</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Counselor is able to demonstrate knowledge of principles and processes of theoretical framework underlying mode of treatment used</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Treatment goals and plans reflect good case conceptualization and are consistent with the theoretical model being used</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Counselor assesses influence of other systems (i.e. school, work, medical etc) and acts accordingly</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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</table>

**Termination**

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<th>5</th>
<th>1</th>
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<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Counselor reviews goals with clients and prepares for closure</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>Termination was initiated and planned properly (was it a smooth transition from the counseling process)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
### Case Conceptualization & Supervision

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N 1 2 3 4 5</td>
<td>Supervisee is able to observe/understand his or her own personal influence on the counseling relationship</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Supervisee is able to conceptualize and discuss cases meaningfully and insightfully with the supervisor</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Able to reflect on personal motives, regulate emotions, and is open to accepting personal responsibility and addressing issues pertaining to personal/professional growth conceptually and/or behaviorally</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Supervisee seeks, is well prepared, and actively participates in the supervisory process</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Supervisee is open to entertaining new ideas and behaviors</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Supervisee is receptive to supervisor feedback</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Conversations in supervision and feedback reflected in future counseling sessions</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor demonstrates an ability to appropriately negotiate the balance between autonomy and dependency in supervision</td>
</tr>
</tbody>
</table>

### Use of Evidence Based Interventions and Literature

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor made serious effort to integrate case with Evidence Based Interventions</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor used literature to be more informed in regards to case conceptualization, and intervention</td>
</tr>
</tbody>
</table>

### Miscellaneous

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor actively participates in group supervision and both gives and receives feedback with other supervisees</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor understands and observes agency operating procedures</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor collegially participates with the treatment team in consultation and collaboration with other providers (intra- and inter-professionally)</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor demonstrates an ability to negotiate conflict or differences in a professional manner</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor produces appropriate documentation (i.e., case notes, treatment plans, etc.) consistent with uniformly acceptable guidelines as well as adapting stylistically to agency-specific standards</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor actively pursues answers to ethical dilemmas as they arise in cases: aware of and follows general guidelines for ethical decision making, with guidance in supervision and attention to professional organization’s (i.e., ACA) ethical guidelines as well as the state-specific statutes</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor strives to become a more multi-culturally competent counselor and to promote social justice within the domains of current practice and client contact</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor demonstrates initiative, motivation, and a focus on professional development</td>
</tr>
</tbody>
</table>

Comments:

Supervisor Signature:______________________________________________

Trainee signature:__________________________________________________

- The faculty has approved this form for evaluation in Clinical Internship for MA students. It is a CACREP requirement that a copy of this evaluation is to be included in the student’s file upon course completion.

- This form has been adapted and modified. It was originally developed for use in the internship manual for MA students in Community Counseling: Couples and Family Therapy Emphasis and for use in Family Practicum with MA and Doctoral students by Lia Softas-Nall, Professor of Counseling Psychology and adopted by the APCE faculty. It appears as a published contribution in Hovestadt, C. et al (2002). *Practice management forms: Tools for the business of therapy*. Washington, DC: American Association for Marriage and Family Therapy.
SITE EVALUATION OF THE GRADUATE STUDENT INTERN
APCE 691 Marriage, Couples, and Family Counseling/Therapy Emphasis
Professional Counseling Program

Name of Supervisee: ___________________________ Date: ___________________

Name of Supervisor: ___________________________ Site: ___________________

Address: ____________________________________________

Please identify the types of activities utilized in supervision with this supervisee.

<table>
<thead>
<tr>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observed supervisee directly via one way mirror or video circuit</td>
</tr>
<tr>
<td>Listened to or watched tapes of supervisee counseling</td>
</tr>
<tr>
<td>Read session notes</td>
</tr>
<tr>
<td>Discussed cases with supervisee</td>
</tr>
<tr>
<td>Group Supervision (6 supervisees or less)</td>
</tr>
<tr>
<td>Triadic Supervision (2 supervisees)</td>
</tr>
<tr>
<td>Individual Supervision</td>
</tr>
<tr>
<td>Other (please describe)</td>
</tr>
</tbody>
</table>

What number of overall hours did the supervisee spend doing the following:

<table>
<thead>
<tr>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct client contact (Individual counseling)</td>
</tr>
<tr>
<td>Direct client contact (couples or families)</td>
</tr>
<tr>
<td>Indirect client activities (i.e. case conferences, staff meetings, in-service workshops, trainings, administrative duties, completion of paperwork, case notes, treatment plans, etc.)</td>
</tr>
<tr>
<td>TOTAL INTERNSHIP HOURS</td>
</tr>
</tbody>
</table>

Logistical aspects:

<table>
<thead>
<tr>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisee is on time for sessions and supervision</td>
</tr>
<tr>
<td>Case notes are ready on time</td>
</tr>
<tr>
<td>Case notes are well written</td>
</tr>
<tr>
<td>Treatment planning notes completed and modified with supervision</td>
</tr>
<tr>
<td>Supervisee has current and active liability insurance in place</td>
</tr>
<tr>
<td>Supervisee has completed application/is registered with DORA as a Registered Psychotherapist</td>
</tr>
</tbody>
</table>
Counseling/theoretical models used by supervisee:__________________________

**Supervisee Skills Rating Form**

Please use the scale below to rate the supervisee across each of the following dimensions.

**Use the scale on the left side for the mid-term evaluation, and the scale on the right side for the final evaluation.**

1 = Student is in need of further training and/or requires additional growth, maturation, and change in order to be effective in the various skill areas; trainee should not be allowed to function independently.

2 = Competence is below average but, with further supervision and experience, is expected to develop satisfactorily; independent functioning is not recommended and close supervision is required.

3 = Competence is at least at the minimal level necessary for functioning with moderate supervision required.

4 = Competence is above average, trainee can function independently with periodic supervision.

5 = Competence is well developed and trainee can function independently with little or no supervision required.

N = Insufficient date to rate at this time.

---

**Interaction / Interview Skills**

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
</tr>
</thead>
<tbody>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor establishes good rapport with clients</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor is in charge of direction of interview</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor is accepting and encouraging of client emotions, feelings, and expressed thoughts</td>
</tr>
<tr>
<td>N 1 2 3 4 5</td>
<td>Counselor is aware and accepting of client’s cultural, religious, sexual orientation, ethnic, economic, gender and lifespan/developmental issues, and displays sensitivity to these dimensions in sessions</td>
</tr>
</tbody>
</table>

**Counselor Responses**

| N 1 2 3 4 5 | Counselor’s responses are appropriate in view of what client is expressing and according to developmental level | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor reflects emotions and responds to feelings appropriately | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor is able to establish appropriate boundaries between therapist and client (i.e., counselor avoided being “caught” by client dynamics) | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor’s values remain neutral when working with the client | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Interventions are presented appropriately to the client | N 1 2 3 4 5 |

### Counseling Relationship

| N 1 2 3 4 5 | Therapeutic relationship was conducive to productive counseling | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor used appropriate language level with client | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor used language, tone of voice, and other behavior to convey an interest in clients | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor communicated his/her interests, feelings and experiences to clients when appropriate | N 1 2 3 4 5 |

### Client Conceptualization

| N 1 2 3 4 5 | Understands/conceptualizes client’s problem in its full perspective (systemic, developmental, cultural) | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Reports client’s behavior patterns accurately and supports reports with specific behavioral observations | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Identifies and utilizes client strengths in sessions and treatment planning | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Interventions reflect a clear understanding of the client’s problem and the client’s goals | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Interventions are consistent with the theoretical counseling model being used to conceptualize the client | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor is able to demonstrate knowledge of principles and processes of theoretical framework underlying mode of treatment used | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Treatment goals and plans reflect good case conceptualization and are consistent with the theoretical model being used | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor assesses influence of other systems (i.e. school, work, medical etc) and acts accordingly | N 1 2 3 4 5 |

### Termination

| N 1 2 3 4 5 | Counselor reviews goals with clients and prepares for closure | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Termination was initiated and planned properly (was it a smooth transition from the counseling process) | N 1 2 3 4 5 |
### Case Conceptualization & Supervision

| N 1 2 3 4 5 | Supervisee is able to observe/understand his or her own personal influence on the counseling relationship | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Supervisee is able to conceptualize and discuss cases meaningfully and insightfully with the supervisor | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Able to reflect on personal motives, regulate emotions, and is open to accepting personal responsibility and addressing issues pertaining to personal/professional growth conceptually and/or behaviorally | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Supervisee seeks, is well prepared, and actively participates in the supervisory process | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Supervisee is open to entertaining new ideas and behaviors | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Supervisee is receptive to supervisor feedback | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Conversations in supervision and feedback reflected in future counseling sessions | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor demonstrates an ability to appropriately negotiate the balance between autonomy and dependency in supervision | N 1 2 3 4 5 |

### Use of Evidence Based Interventions and Literature

| N 1 2 3 4 5 | Counselor made serious effort to integrate case with Evidence Based Interventions | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor used literature to be more informed in regards to case conceptualization, and intervention | N 1 2 3 4 5 |

### Miscellaneous

<p>| N 1 2 3 4 5 | Counselor actively participates in group supervision and both gives and receives feedback with other supervisees | N 1 2 3 4 5 |
| N 1 2 3 4 5 | Counselor understands and observes agency operating procedures | N 1 2 3 4 5 |</p>
<table>
<thead>
<tr>
<th>Score</th>
<th>Statement</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/5</td>
<td>Counselor collegially participates with the treatment team in consultation and collaboration with other providers (intra- and inter-professionally)</td>
<td>1/5</td>
</tr>
<tr>
<td>1/5</td>
<td>Counselor demonstrates an ability to negotiate conflict or differences in a professional manner</td>
<td>1/5</td>
</tr>
<tr>
<td>1/5</td>
<td>Counselor produces appropriate documentation (i.e., case notes, treatment plans, etc.) consistent with uniformly acceptable guidelines as well as adapting stylistically to agency-specific standards</td>
<td>1/5</td>
</tr>
<tr>
<td>1/5</td>
<td>Counselor actively pursues answers to ethical dilemmas as they arise in cases: aware of and follows general guidelines for ethical decision making, with guidance in supervision and attention to professional organization’s (i.e., ACA) ethical guidelines as well as the state-specific statutes</td>
<td>1/5</td>
</tr>
<tr>
<td>1/5</td>
<td>Counselor strives to become a more multi-culturally competent counselor and to promote social justice within the domains of current practice and client contact</td>
<td>1/5</td>
</tr>
<tr>
<td>1/5</td>
<td>Counselor demonstrates initiative, motivation, and a focus on professional development</td>
<td>1/5</td>
</tr>
</tbody>
</table>

Comments:

Supervisor Signature:

Trainee signature:

- The faculty has approved this form for evaluation in Clinical Internship for MA students. It is a CACREP requirement that a copy of this evaluation is to be included in the student’s file upon course completion.

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ATTACHMENT E: Student Evaluation of the Internship Site
EVALUATION OF THE INTERNSHIP SITE
Professional Counseling Program

Academic Semester: Spring_______ Fall_______ Summer_______ Academic Year:___________

Name of Student:__________________________________________________________________________

UNC Internship Supervisor:_________________________________________________________________

Site:____________________________________ On-Site Supervisor:________________________________

Address:__________________________________________________________________________________

__________________________________________________________________________________________ Phone:__________________________

On-Site Internship Contact Person:____________________________________________________________

Email Address: ____________________________________________________________________________

__________________________________________________________________________________________

Briefly describe your overall experience at this Internship site.

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

Why?

Description of Client 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
_____Individual Supervision                 _____number of students
_____Other (please describe)
Describe the quality of therapeutic and diagnostic supervision, as well as the supervisor's style of supervision and theoretical orientation.

What are the responsibilities required of Internship students at this site?

Check all counseling opportunities available to students at this site:

<table>
<thead>
<tr>
<th>Individual Counseling:</th>
<th>Report Writing</th>
<th>Intake Interviewing</th>
<th>Psycho/Educational Training</th>
<th>Case/Staff Conferencing</th>
<th>Program Administration</th>
<th>Assessment/Testing</th>
<th>Consulting</th>
<th>Special Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adolescents</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Career Counseling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Couples Counseling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Counseling</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group Counseling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(please describe)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What number of overall Internship hours did you spend in:

- Direct client activities
- Direct client contact with couples and/or families
- Indirect client activities (i.e. case conferences, staff meetings, administrative duties, etc.)

Please rate the following items:

<table>
<thead>
<tr>
<th>1) Degree to which your expectations for the Internship were met.</th>
<th>Very Little</th>
<th>Very Much</th>
</tr>
</thead>
<tbody>
<tr>
<td>2) Opportunity you were given to participate in decisions that affected you.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>3) Degree to which your training needs were provided for.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>4) Degree to which you were satisfied with your internship experience</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>

Please add any additional comments you feel would be helpful to students interested in this site.
ATTACHMENT F: New Internship Site Approval Request Form
New Internship Site Approval Request Form

SITE INFORMATION

Site Name: ________________________________________________________________

Site Address: _____________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Site Phone: ______________________________________________________________

SITE SUPERVISOR INFORMATION (please attach a copy of supervisor’s resume/vita to this form)

Supervisor Name: ____________________________________ Title: ____________________________

Email: __________________________________________ Phone #: ________________________________

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)

_______________________________________________________________________________

_______________________________________________________________________________

(Return completed form to APCE Main Office)
Attachment G: How to Create an Electronic Signature
To create an e-signature, you will want to follow the steps indicated below which also correspond to the attached screenshots:

1. After downloading the pdf contract your supervisee sent, open it in Adobe.

2. Read through and complete the specific fields required for you in your role.

3. Click on the signature line requesting your specific signature (not someone else's i.e. if you are the on-site supervisor, make sure just to click that signature line). There are two screenshots below showing signature lines for students and one for supervisors.

4. You will then be asked to "Sign with a Digital ID", click "Continue"
5. Next, a box with three options will pop up. You will likely want to select the option "Create a New Digital ID"

6. Unless you want to save to an Apple Keychain, you will next select "Save to File".
7. Complete the next box with the fields requesting your contact information

8. Next it will ask you to apply a password. Create a password and proceed.
9. Then select the ID you just created, which will then show you what the "signature" will look like. Fill in your password and hit "Sign"

10. Lastly, you will see your signature in the field on the original pdf document and you will be prompted to save the document.
11. Once you've completed all fields required of you to complete the contract, save the document and email it to your supervisee or the other individuals that will need to sign.
ATTACHMENT H: Mandatory Information Meeting Decision Trees

Fall and Spring
Do I need to Attend the Mandatory Practicum II / Internship Meeting?

Fall Meeting

Do you intend to start your Practicum II experience in the upcoming Spring semester?
APCE 619

- Yes
  - Yes!
    - You need to attend the Mandatory Meeting in the Fall Semester.
  - No
    - No.
      - Check again the semester before you want to start Practicum II

Do you intend to start your Internship experience in the upcoming Spring semester?
APCE 614, 691 or 692

- Yes
  - Yes!
    - You need to attend the Mandatory Meeting in the Fall Semester.
  - No
    - Check again the semester before you want to start Internship

Did you attend the previous Mandatory Meeting before Prac II? (Spring Meeting)

- Yes
  - Yes!
    - You need to attend the Mandatory Meeting in the Fall Semester.
  - No
    - No.
      - Check again the semester before you want to start Practicum II

Do you intend to stay at the same site for 692, or stay in a school setting for 614?

- Yes
  - Yes!
    - You need to attend the Mandatory Meeting in the Fall Semester.
  - No
    - No.
      - You do not need to attend, however, make sure to turn in the Internship Eligibility form ASAP

- No
  - Yes!
    - You need to attend the Mandatory Meeting in the Fall Semester.
  - No
    - No.
      - Check again the semester before you want to start Internship

Are you still unsure if you need to come to the meeting? Contact the Site Placement Coordinator:
Angela.weingartner@unco.edu

***Note: Students may attend a meeting before they are required to do so, however, they will still be required to attend the meeting the semester before they begin an off-site Practicum II/Internship experience***
Do I need to Attend the Mandatory Practicum II / Internship Meeting?

Spring Meeting

Do you intend to start your Practicum II experience in the upcoming Summer or Fall semester?
APCE 619

Yes
No

Yes!
You need to attend the Mandatory Meeting in the Spring Semester.

No.
Check again the semester before you want to start Practicum II
(Fall Meeting)

Did you attend the previous Mandatory Meeting before Prac II?

Yes
No

Yes!
You need to attend the Mandatory Meeting in the Spring Semester.

No.
Check again the semester before you want to start Internship

No.
You do not need to attend, however, make sure to turn in the Internship Eligibility form ASAP

Yes!
You need to attend the Mandatory Meeting in the Spring Semester.

Are you still unsure if you need to come to the meeting? Contact the Site Placement Coordinator:
Angela.weingartner@unco.edu

***Note: Students may attend a meeting before they are required to do so, however, they will still be required to attend the meeting the semester before they begin an off-site Practicum II/Internship experience.