

# Stockton University

## M.A. Counseling Site Supervision and Internship Agreement

Student: \_\_\_\_\_ Phone: \_\_\_\_\_

email: \_\_\_\_\_ Internship Site: email: \_\_\_\_\_

Site Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Site Supervisor name: \_\_\_\_\_ Phone: \_\_\_\_\_

email: \_\_\_\_\_ Site Supervisor Credentials: Lic. No.: \_\_\_\_\_

Years of practice: \_\_\_\_\_

Beginning Date of Internship: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Monthly consultation via email w University instructor

Physical Site Address: \_\_\_\_\_ City \_\_\_\_\_

State: \_\_\_\_\_ Zip \_\_\_\_\_

Anticipated Weekly Schedule:

	Mon.	Tues.	Wed.	Thurs.	Friday	Sat.	Sun.

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

*The University Program Agrees:*

1. to assign a University faculty liaison (Internship Coordinator) to facilitate communication between the University and Site;

2. to notify the student that the student must adhere to the administrative policies, rules, standards, schedules, and practices of the Site;

3. that the faculty liaison shall be available for consultation with both Site Supervisor and student and shall be immediately contacted should any problem or change in relation to the student, Site, or University occur; and

4. that the University supervisor is responsible for the assignment of the fieldwork grade.

*The Internship Site Agrees:*

1. to assign an internship supervisor who has the appropriate credentials, time and interest for training the internship student;
2. to provide opportunities for the internship student to engage in a variety of counseling activities under supervision and for evaluating the internship student's performance;
3. to provide the internship student with adequate work space, telephone, office supplies, the ability to video record sessions (not necessarily the equipment necessary for recording), and staff to conduct professional activities.

*The Internship Student Agrees:*

1. to read and understand the ACA Code of Ethics and practice in accordance to these standards;
2. to keep internship supervisors informed regarding internship experiences;
3. to demonstrate a minimal level of competency in specified counseling knowledge, skills, and attitudes in order to receive a passing grade;
4. to attend classes and supervisory sessions fully prepared as outlined by the course requirements and supervisors' expectations.

**Student Agreement:**

I understand and agree to perform the above responsibilities. I understand and agree to practice my counseling in accordance with the ACA Code of Ethics. I understand that it is my responsibility to keep my faculty & Site Supervisor informed of my on-site activities and provide them with the appropriate material needed for supervision.

Intern: \_\_\_\_\_ Date: \_\_\_\_\_

Site Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_