



Professional Practice Handbook

Counselor Education Master's Degree Programs

CLINICAL MENTAL HEALTH COUNSELING
CLINICAL REHABILITATION COUNSELING
SCHOOL COUNSELING

COUN 5570 Practicum
COUN 5595 Internship

ALBANY STATE UNIVERSITY
School of Education

INTRODUCTION TO PROFESSIONAL PRACTICES

Professional practice, which includes practicum and internship, provides for the application of theory and the development and enhancement of skills for client assessment, planning, intervening, and evaluating. These experiences will provide opportunities for students to provide counseling services to diverse clients. Site placements will be arranged by students under the guidance of the clinical coordinator and/or program coordinator. All site placements will be in sites which include counseling is one of the primary professional areas. Counselor candidate placement shall be supervised counseling professional who have a minimum of two years of post-master's experience and are active/involved in professional counseling associations.

PRACTICUM AND INTERNSHIP PLACEMENTS

Placements for practicum and internship sites is a collaborative process between the counselor candidate, counseling sites, and the clinical coordinator. Counselor candidates will follow the placement protocols for their respective programs:

Clinical Mental Health Counseling:

In the CMHC program, counselor candidates will work with clinical coordinator to identify possible practicum and internship sites. After learning about the sites, student will contact the practicum and internship sites to begin the placement process. Once the practicum/internship sites review the student applicants' information, they may contact the student to schedule a professional interview. After the interview process, practicum/internship sites will contact the Clinical Coordinator with their student recommendations. Clinical Mental Health counselor candidates must take the Counselor Preparation Comprehensive Examination (CPCE) before enrolling in practicum and internship.

Professional Interview. CMHC counselor candidates will participate in professional interviews during the practicum and internship placement process. Counselor candidates are expected to demonstrate professional behaviors during these interviews. If a counselor candidate is unable to secure a practicum and internship placement after multiple interviews, the clinical coordinator and their committee may meet to discuss the counselor candidates' fitness for the practicum and internship process.

Testing. CMHC counselor candidates may be required to take a drug test, participate in a background check or participate in other testing per site placement policies. If a CMHC counselor candidate does not pass the testing offered by the potential site, their standing in the program may be at risk. Oftentimes, CMHC counselor candidates are required to pay for these tests for placement consideration.

Clinical Rehabilitation Counseling:

For practicum in Clinical Rehabilitation Counseling, counselor candidates will work with faculty to identify appropriate placements in the area in which counselor candidates live. Sites vary including non-profit agencies and state/federal programs, and the site must be approved by the Clinical Coordinator. Internship placements are collaboratively identified by faculty and the student in order to best meet the professional practice goals and availability of the student. Approval must be obtained from the University Supervisor regarding the site selected prior to beginning the internship. It is suggested to start locating internship location (6) six months prior to internship. Rehabilitation counselor candidates are required to complete 300 hours of their internship in the state vocational rehabilitation program.

School Counseling:

In the School Counseling program, counselor candidates will select their preferred practicum and internship sites and notify Clinical Coordinator of their selections. Placements are approved only for locations where the site and the primary on-site supervisor reflect the mission of our program. A list of approved site supervisors is available from the Clinical Coordinator. School counselors who are not currently approved site supervisors may qualify to become site supervisors. School counseling counselor candidates must take and pass GACE 103 before enrolling in practicum and GACE 104 before enrolling in internship.

PROFESSIONAL PARAMETERS/ISSUES

Informed Consent

Before initiating a counseling relationship, the counselor candidate must first inform the client of any limits to confidentiality, status as a counselor-in-training, and any site-specific information which the site supervisor has provided. Counselor candidate must also secure client's permission to tape the counseling sessions. Counselor candidates' sites may have a form that they prefer to use. If not, please use the Albany State University form provided by your course instructor.

Emergency Procedures

Counselor candidates need to ask their site supervisor about the emergency procedures under which the site operates. What are the hours of operation? Who/Where should clients call if they have an emergency after hours? How should you proceed if you have an emergency situation with a client? Counselor candidates are only allowed to see clients under supervision and are not available to clients after hours or off-site. Counselor candidates should not give home phone number to clients but should have an alternate emergency number to give them should they request it or should it be determined that they are at risk. Counselor candidate should confirm with the emergency number with site supervisor.

Ethical Guidelines

When entering a counseling relationship, counselor candidates are entering into an agreement to keep their welfare foremost during their time together. Counselor candidates are agreeing to provide the treatment/counseling most appropriate to address the client's concern, to treat the client with respect, to refer when appropriate, and not to exceed your level of competence. Counselor candidates should be familiar with **ACA Code of Ethics (2014)** as well as ethical guidelines specific to their specialty area including the **ASCA Ethical Standards for School Counselors (2016)**, and the **Code of Professional Ethics For Rehabilitation Counselors (CRCC, 2017)** and use them as a guide for behaving in a professional, ethical manner.

Professional Liability Insurance

All Practicum and Internship counselor candidates are required to purchase their own individual professional liability insurance through organizations such as [HPSO](#), the [National Board of Certified Counselors \(NBCC\)](#), or [Lockton Affinity LLC](#) and provide proof of coverage to the clinical coordinator to be placed in their student files in the department. American Counseling Association (ACA) <https://www.counseling.org/> and American School Counselor Association (ASCA) <https://www.schoolcounselor.org/> membership includes liability insurance for counselor candidates during professional practice.

Professional Behavior

Although the primary purpose of practicum is to assist counselor candidate in continued development and application of counseling skills, counselor candidates are representative of the ASU Counselor Education Program and contractor with the site. Thus, counselor candidates are expected to operate under the norms of the site by adhering to their policies and procedures of daily operations. This includes, but is not limited to, being punctual, dressing appropriately, and presenting oneself professionally. As counselor candidates continue the development of their professional identity, it is very important to be aware of current issues and trends. Counselor candidates can learn a lot about the profession through contact with counselors at placement site, supervision/consultation, membership in professional organizations (e.g., ACA, AMHCA, ASCA, CRCC) and attendance at professional development workshops and seminars.

PRACTICUM

SUPERVISION

Supervision is a requirement of practicum and it is designed to assist counselor candidates to develop competence in counseling and to monitor the level and appropriateness of services provided for clients. Supervision involves a supervisor, who is a senior member of the profession, and one or more supervisees, who are junior members of the profession. The supervisor works with the supervisee to enhance his/her professional competence and monitors the quality of counseling services extended to the client. The relationship is evaluative and extends over time (Bernard & Goodyear, 2014).

Your faculty supervisor will be appointed by counselor education program.

- Counselor education program faculty members serving as individual/triadic supervisors have counseling supervision training and experience, relevant clinical experience, and appropriate professional credentials.

Supervision appointments are scheduled to fit into the needs of your site, yourselves, and your individual and group supervisors. **Counselor candidates must attend an average of one hour of individual/triadic supervision with your faculty supervisor every week in order to continue to see clients.** In the event of an emergency or illness, faculty supervisor will work with counselor candidate to reschedule so that client sessions are not interrupted. However, if counselor candidates are persistently absent or late for non-emergency reasons or fail to submit materials in a timely fashion so that they and their supervisor cannot be prepared for supervision, **counselor candidate may not be allowed to see clients and your continuation in the practicum class may be discontinued.** We all have a responsibility to each, and every client seen, and a large part of demonstrating commitment to these responsibilities is through counselor candidates' preparedness for and participation in both group and individual supervision.

REQUIRED WORK SAMPLES

Work samples are required to successfully complete practicum and internship. Counselor candidates are expected to submit one recorded counseling sessions weekly throughout the semester in which they are enrolled in practicum. Weekly recordings of counseling sessions must be uploaded to Supervision Assist in GaView/D2L for review. Please see the COUN 5570 and COUN 5595 syllabi for specific assignment instructions.

There are three principal purposes for submitting actual work samples, such as digital recordings of counseling sessions:

- The site supervisor needs to monitor the services that are being provided to the clients/student. Work samples provide evidence that the strategies being used with clients are empirically supported or based on theory and ethically and legally sound.
- The faculty and site supervisors assist the supervisee in identifying his or her strengths as well as areas for improvement. The supervisors focus on counselor candidates' development as a counselor, as well as on the client's needs. Additionally, the supervisor is responsible for facilitating counselor

candidates' development over time and with a variety of different types of clients/students

- Worksamples are intended to be an instructive tool. They should lead counselor candidates to reflection, help determine improvements need and find the types of learning experiences counselor candidates need to be an effective counselor for clients/students with a wide variety of needs. Counselor candidates are expected to review videos to identify their specific areas of strength and weakness. Use these discoveries to develop professional, and, at times, personal development goals. These reflections should be discussed in individual and/or group supervision sessions. What exactly do you believe you need to work on and how can your supervisor help you develop strategies leading to improvement? Supervision, like counseling, is *not* a passive process.

Counselor candidates recorded sessions are due to their supervisor by 11:59pm each Sunday. Counselor candidates are responsible for uploading recorded counseling sessions to supervision assist. Faculty supervisor will review the sessions and provide counselor candidate with feedback.

In the rare case that the practicum site does not permit recordings, please discuss this with the clinical coordinator ahead of time that alternative methods of reviewing or another site might be discussed and identified.

PRACTICUM AND INTERNSHIP DOCUMENTATION AND CASE NOTES

The purpose of documentation for the practicum and internship is for educational reasons. For any documentation submitted to faculty supervisors, please remove all identifying information and use a coding system to identify clients to ensure client confidentiality. For each recorded counseling session, counselor candidates are also required to complete a session critique after listening to the session themselves and prior to their supervision session with the faculty supervisor. Session critiques are also due Sunday by 11:59pm prior to supervision. Counselor candidates and their site supervisor are responsible for the welfare of all client's counselor candidates see each week, not just those for whom recording are submitted.

Practicum and internship counselor candidates are not permitted to keep their own personal "case" notes of client progress and individual impressions. Counselor candidates are strongly encouraged to refer to their documentation at site or submitted to the university to help them recall important information related to specific client cases. Personal case notes can be admissible in court.

PRACTICUM AND INTERNSHIP COUNSELING HOURS

Placement requests are for specified lengths of time, typically starting the first week of the semester through the last week. Although there are specified minimum numbers of hours for both practicum (100) and internship (600), counselor candidates are obligated to continue in their placement for the full semester, regardless of completion of the required number of hours earlier in the semester. Remember, counselor candidates' commitment is to their clients and to the sites that work with our programs to ensure that counselor candidates have opportunities to develop critical professional skills. Even though an important educational need is met by your placement, the counseling services you provide are first and foremost for the benefit of clients.

Counselor candidates must complete a minimum of 100 hours providing direct and indirect services for Practicum. Forty (40) direct counseling hours are required. These direct hours are primarily accrued by providing individual counseling services; however, counselor candidates may accrue up to 15 hours of group counseling.

Counselor candidates must complete a minimum of 600 hours providing direct and indirect services for internship. Two hundred forty (240) direct counseling hours are required. These direct hours may be comprised of both individual and group counseling services.

*Counselor candidates should try to accrue group counseling experience in practicum but must accrue group counseling hours in internship.

SUMMARY OF REQUIRED MATERIALS FOR PRACTICUM AND INTERNSHIP

Practicum and Internship Application process:		
Task	Person Responsible	Deadline
Complete Pre-Profession Practice Form	Candidates	Fall - March 7 th Spring - October 7 th
Complete Placement Request Form	Candidates	Fall - March 15 th Spring - October 15 th
Send Placement Request to Site	Clinical Coordinator	Fall - March 31 st Spring - October 31 st
Professional Practice Informational Meeting	Clinical Coordinator and Candidates	Fall - May Spring - November
Submit Completed Professional Practice Application	Candidates	Fall - July 15 th Spring - December 15 th

SUMMARY OF REQUIRED MATERIALS FOR PRACTICUM AND INTERNSHIP

Practicum Documentation	Due	Submit to
Practicum and Internship Contract	Semester before practicum placement	Clinical Coordinator
Proof of Completion of training for Site Supervisors	Before practicum begins	Clinical Coordinator
Information Sheet	Before practicum begins	Clinical Coordinator
Supervisor Resume/CV	Before practicum begins	Clinical Coordinator
Supervisor Contract	Before practicum begins	Clinical Coordinator
Proof of Liability Insurance		Clinical Coordinator
Case Conceptualization Presentation	Variable	Course Instructor
Client Documentation (Progress notes, session summaries, counseling plans)	Ongoing for each client	Course Instructor
Practicum Log	Midterm and Final	Course Instructor
Site Supervisor Evaluations	Midterm and Final	Course Instructor
University Supervisor Evaluations	Midterm and Final	Course Instructor
Self-Evaluations	Midterm and Final	Course Instructor
Evaluation of your Site	Final week of class	Course Instructor

Internship Documentation	Due	Submit to
Practicum and Internship Contract	Semester before internship placement	Practicum and Internship Coordinator
Information Sheet	Before Internship Begins	Clinical Coordinator
Supervisor Resume/CV	Before Internship Begins	
Supervisor Contract	Before Internship Begins	
Proof of Liability Insurance	Before Internship Begins	
Proof of Completion of Site Supervisor Training	Before Internship Begins	
Internship Log	Midterm and Final	Course Instructor
Site Supervisor Evaluations	Midterm and Final	
Self-Evaluations	Midterm and Final	
Evaluation of your Site	Final week of class	

**Counselor Education Master's Programs
Professional Practice Forms**

PRACTICUM AND INTERNSHIP STUDENT CONTRACT

Albany State University
School of Education
244 Billy C. Black Building Albany, GA
Phone 229-500-2273

The purpose of this document is for the Counselor Education Program faculty to communicate the requirements and expectations for counseling students to apply for and successfully matriculate through the practicum and internship professional practice experiences.

In the application process, I understand that:

1. I must have a strong academic record (3.0 or above in all of my classes and a B or higher in Introduction to Counseling Practice course) in order to qualify for practicum and internship placement consideration;
2. I must take and pass GACE 103 in order to qualify for practicum and GACE 104 in order to qualify for internship;
3. I must demonstrate appropriate online classroom behaviors, competent counseling skills and professionalism to be considered for practicum placement;
4. I may not be placed at a counseling site that I ranked as a top priority;
5. It is my responsibility to contact site supervisors directly;
6. Clinical Coordinator make all final decisions about site placements and approving students to be placed.

At my site, I understand that:

1. I am to comply with all site policies and procedures;
2. I am required to abide by the *ACA Code of Ethics* as well as professional ethical codes and guidelines specific to my specialty area including but not limited to the *ASCA Ethical Standards for School Counselors (2016)*, and the *Code of Professional Ethics for Rehabilitation Counselors (CRCC, 2017)*, while I am working at my site;
3. I am expected to maintain excellent attendance at the site and use the appropriate call-off procedures in emergency and illness circumstances;
4. I am to arrive on time for my practicum/internship hours;
5. my schedule may not be conducive to the site's regular operations and that I must be flexible in scheduling my availability and work with the site to make changes or adjustments;
6. although there is a minimum number of hours that I am to work at my site each week (10 to 12 hours a week for practicum and 20 to 40 hours for internship depending on whether I am a full-time or part-

time intern), I may be required to schedule additional hours on site to accrue direct hours if I experience a lot of no shows, trouble scheduling clients, transition issues, etc.;

7. I am to provide counseling services at the site for the duration of the semesters in which I am enrolled in the practicum or internship course, even if I completed my required hours;
8. I may be terminated by my site supervisor for any reason including, but not limited to, not adhering to site policies, breaking ethics codes, poor attendance, poor professional behaviors, etc. In addition, termination from a site will require a thorough review by my academic committee to determine my progress in the program.

I hereby agree to the above conditions.

Albany State University Counselor Candidate Signature

Date

Clinical Coordinator Signature

Date

COUNSELOR EDUCATION MASTER'S PROGRAMS SUPERVISOR CONTRACT

Albany State University
School of Education
244 Billy C. Black Building Albany, GA
Phone 229-500-2273

This contract delineates the expectations for all counseling master's student who are providing services to clients as part of a supervised field experience in counseling, practicum/internship site supervisors, and Albany State University Counselor Education Clinical Coordinator. Questions regarding this contract and student performance should be directed to the following respective clinical coordinator:

Dr. Claudia Calder, Clinical Coordinator - claudia.calder@asurams.edu; 229-500-2273

Requirements of Practicum and Internship

For COUN 5570 Practicum, counselor candidates are required to:

1. Work a minimum of 100 hours at a practicum site (pre-approved by the Clinical Coordinator);
2. Provide a minimum of 40 hours of direct counseling services for clients through the provision of individual and/or group counseling services;
3. Complete a minimum of 60 indirect hours of counseling-related activities such as staff meetings, clinical documentation, trainings, preparing for counseling sessions, etc.;
4. Complete a client case conceptualization presentation;
5. Participate in one hour of individual supervision online with appointed university supervisor; and
6. Participate in group supervision each week online with appointed university supervisor

For COUN 5595 Internship, counselor students are required to:

1. Work a minimum of 600 hours at an Internship site (pre-approved by the Clinical Coordinator)
2. Provide a minimum of 240 hours of direct counseling services with clients through the provision of individual and/or group therapy services;
3. Complete a minimum of 360 indirect hours of counseling-related activities such as staff meetings, clinical documentation, trainings, preparing for counseling sessions, etc.;
4. Complete a client case conceptualization presentation;
5. Participate in one hour of individual supervision at the internship site; and
6. Participate in group supervision every other week online with Albany State University appointed supervisor.

Expectations of Counseling Students

Albany State University counselor candidates are expected to:

1. Comply with all practicum and internship site policies and procedures;
2. Abide by the *ACA Code of Ethics* (2014) as well as professional ethical codes and guidelines specific to my specialty area including but not limited to the *Alabama Board of Examiners (ABEC) Code of Ethics and Standards of Practice*, *ASCA Ethical Standards for School Counselors* (2016), and the *Code of Professional Ethics for Rehabilitation Counselors* (CRCC, 2017) while working at their practicum/internship site;
3. Maintain excellent attendance at the site and use the appropriate call-off procedures in emergency and illness circumstances;
4. Arrive on time to their practicum/internship site;
5. Be flexible in scheduling their availability and works with the site to make changes or adjustments if scheduling issues arise;
6. Schedule additional hours on site to accrue direct hours if the student experiences a lot of no shows, trouble scheduling clients, transition issues, etc.;
7. Provide counseling services at the practicum or internship site for the duration of the semesters in which the counselor candidate is enrolled in the practicum or internship course;
8. Accurately and honestly record direct and indirect hours on their practicum/internship log;
9. Gain experience in group counseling (10 hour minimum) in or internship.

Expectations of the Practicum or Internship Site Supervisors

The Albany State University Counselor Education faculty will work closely with site supervisors to provide an optimal training experience for counselor candidates. In order to offer a collaborative and supportive training environment, site supervisors are expected to:

1. Offer one hour of individual supervision to the counselor candidate each week throughout the practicum or internship placement;
2. Communicate with Clinical Coordinator if a practicum/internship counselor candidate is not performing adequately to meet the site's standards;
3. Complete a midterm and final evaluation for each counselor candidate for both practicum and internship;
4. Offer counselor candidate an opportunity to lead or co-lead counseling or psychoeducational groups in either practicum or internship;
5. Offer counselor candidate opportunities to become familiar with a variety of professional activities and resources, including technological resources during their practicum or internship.

Expectations of Counselor Education Faculty

The Counselor Education faculty are committed to counselor candidate's success and preparing competent counselors. In order to provide a supportive training environment, faculty are expected to:

1. Offer group supervision to practicum and internship students as stipulated by the CACREP Standards;

2. Communicate with counselor candidates who are not adequately progressing through practicum and/or internship.

By signing this form, I agree to the requirements outlined in this contract. Failure to abide by this contract could result in removal of the counseling student from the practicum/internship site, the implementation of a remediation plan and/or dismissal from the counseling program.

Counselor Candidate Date

Site Supervisor Date

Faculty Supervisor Date

PRACTICUM LOG INSTRUCTIONS AND EXPECTATIONS

Please use the following instructions to complete the attached log as you complete the 100-hour requirement for practicum (minimum of 40 hours providing direct counseling services).

1. On a weekly basis, document the number of hours of direct counseling services you provided for that week on the log.
 - a. Time should be documented in .25-hour increments. For example, if you see a client for 45 minutes, record .75 hours; 15 minutes, record .25 hours; 90 minutes, record 1.5 hours and so on. Please round to the nearest quarter-hour increment.
 - b. The term DIRECT means that you are providing FACE-TO-FACE counseling services. This includes individual sessions as well as counseling groups for which you are ACTIVELY leading or co-leading. You have to be the one demonstrating these skills to be able to count the time as DIRECT.
 - c. Indirect hours accumulated. All other services that do not fall under this explanation are considered indirect and should be counted as such.

COUNSELOR EDUCATION MASTER'S PROGRAMS PRACTICUM (COUN 5570) LOG
Albany State University
School of Education

Counseling Candidate: _____ Counseling Program: _____

Semester and Year: _____ Faculty Supervisor: _____

Site Supervisor: _____ Site: _____

Site Practicum Hours Per Week (Minimum: 100 total hours; 40 hours providing direct counseling services)
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Column 1	Column 2	Column 3	Column 4	Column 5	Column 6
Dates (By Week)	Individual Counseling Hours (e.g. .5, .75, 1)	Number of Recorded Sessions (e.g., 1, 2, 3)	Indirect hours	Total Hours for Week (direct + indirect)	Site Supervisor Initials
Column Total					

**Albany State University
Counselor Education Program
Supervisor's Evaluation of Candidate's Performance
COUN 5570 Practicum
Midterm and Final**

Candidate/Student: _____

Site: _____

Site Supervisor: _____

Rating Scale: 4 = exceeds expectations; 3 = Meets expectations; 2 = Needs improvement; 1 = Unsatisfactory;
X = Not applicable

Areas of Performance: Counseling Skills	4	3	2	1	x
The ability to communicate to the client/student the nature and limits of the counseling relationship.					
The ability to interview the client/student using direct and indirect methods of inquiry.					
Uses immediacy					
The ability to identify small increments of change.					
The ability to deal with the issues related to termination (i.e., referrals, timing, resistance)					
The ability to apply the counseling skills referenced above to culturally diverse client populations					
The ability to develop and maintain a productive counselor-client relationship.					
Uses basic counseling skills to respond to client needs.					
Competence in providing leadership, developing interventions, and awareness of factors influencing group dynamics in therapeutic and non-therapeutic groups					
The ability to respond to important material as it arises in the counseling session					
Recognize and verbalize personal issues that may impair objectivity and negatively impact the counseling process.					
The ability to recognize and respond appropriately to crisis.					
The ability to use and/or create interventions consistent with the counselor's guiding theory and/or consistent with the client's needs.					
Communicates in a style compatible with the communication style and developmental level of the client.					
Uses advanced accurate empathy					
Uses appropriate self-disclosure					
Uses confrontation					
The ability to generate appropriate counseling goals and select					

**Albany State University
Counselor Education Program**

interventions based on a comprehensive case conceptualization.					
Considers sociopolitical contexts when evaluating, conceptualizing, and planning interventions					
The ability to present and staff a case using principles and methods of case conceptualization.					
The student uses empirically supported counseling practices and or interventions.					
Area of Performance: Evaluation Skills	4	3	2	1	x
The ability to identify small increments of change and integrate them into an overall pattern or theme within the counseling process.					
The ability to modify specific interventions on the basis of effectiveness.					
The ability to develop, implement and evaluate individual and group treatment/counseling plans.					
The ability to apply the evaluation skills referenced above to culturally diverse client populations.					
Area of Performance: Professional Identity	4	3	2	1	x
Professional Identity: Knowledge of and identification with the role and function of a professional counselor/therapist.					
Self-Awareness: Demonstration of self-awareness as a professional counselor.					
Legal and Ethical Standards of Practice: Possess a thorough knowledge of ethical and legal standards of professional organizations and credentialing bodies.					
Professional Development: Promote individual professional development both in and outside of the practicum experience.					
Advocacy: Demonstrate ability to place clients' welfare and wellbeing as priority.					

Please use the back of this sheet to provide a written explanation of your evaluation scores.

Signature of supervisor: _____

Date: _____

**Albany State University
Counselor Education Program**

**Candidate's Self -Evaluation of Performance
COUN 5570 Practicum
Midterm and Final**

Candidate/Student: _____

Site: _____

Site Supervisor: _____

Rating Scale: 4 = exceeds expectations; 3 = Meets expectations; 2 = Needs improvement; 1 = Unsatisfactory;
X = Not applicable

Areas of Performance: Counseling Skills	4	3	2	1	x
The ability to communicate to the client/student the nature and limits of the counseling relationship.					
The ability to interview the client/student using direct and indirect methods of inquiry.					
Uses immediacy					
The ability to identify small increments of change.					
The ability to deal with the issues related to termination (i.e., referrals, timing, resistance)					
The ability to apply the counseling skills referenced above to culturally diverse client populations					
The ability to develop and maintain a productive counselor-client relationship.					
Uses basic counseling skills to respond to client needs.					
Competence in providing leadership, developing interventions, and awareness of factors influencing group dynamics in therapeutic and non-therapeutic groups					
The ability to respond to important material as it arises in the counseling session					
Recognize and verbalize personal issues that may impair objectivity and negatively impact the counseling process.					
The ability to recognize and respond appropriately to crisis.					
The ability to use and/or create interventions consistent with the counselor's guiding theory and/or consistent with the client's needs.					
Communicates in a style compatible with the communication style and developmental level of the client.					
Uses advanced accurate empathy					
Uses appropriate self-disclosure					

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Counselor Education Program**

Uses confrontation					
The ability to generate appropriate counseling goals and select interventions based on a comprehensive case conceptualization.					
Considers sociopolitical contexts when evaluating, conceptualizing, and planning interventions					
The ability to present and staff a case using principles and methods of case conceptualization.					
The student uses empirically supported counseling practices and or interventions.					
Area of Performance: Evaluation Skills	4	3	2	1	x
The ability to identify small increments of change and integrate them into an overall pattern or theme within the counseling process.					
The ability to modify specific interventions on the basis of effectiveness.					
The ability to develop, implement and evaluate individual and group treatment/counseling plans.					
The ability to apply the evaluation skills referenced above to culturally diverse client populations.					
Area of Performance: Professional Identity	4	3	2	1	x
Professional Identity: Knowledge of and identification with the role and function of a professional counselor/therapist.					
Self-Awareness: Demonstration of self-awareness as a professional counselor.					
Legal and Ethical Standards of Practice: Possess a thorough knowledge of ethical and legal standards of professional organizations and credentialing bodies.					
Professional Development: Promote individual professional development both in and outside of the practicum experience.					
Advocacy: Demonstrate ability to place clients' welfare and wellbeing as priority.					

Please use the back of this sheet to provide a written explanation of your evaluation scores.

Signature of student: _____

Date: _____

Albany State University
Counselor Education Program
Supervisor's Evaluation of Candidate's Performance
COUN 5595 and 5598 Internship
Midterm and Final

Candidate/Student: _____

Site: _____

Site Supervisor: _____

Rating Scale: 4 = exceeds expectations; 3 = Meets expectations; 2 = Needs improvement; 1 = Unsatisfactory;
 X = Not applicable

Areas of Performance: Counseling Skills	4	3	2	1	x
The ability to communicate to the client/student the nature and limits of the counseling relationship.					
The ability to interview the client/student using direct and indirect methods of inquiry.					
Uses immediacy					
The ability to identify small increments of change.					
The ability to deal with the issues related to termination (i.e., referrals, timing, resistance)					
The ability to apply the counseling skills referenced above to culturally diverse client populations					
The ability to develop and maintain a productive counselor-client relationship.					
Uses basic counseling skills to respond to client needs.					
Competence in providing leadership, developing interventions, and awareness of factors influencing group dynamics in therapeutic and non-therapeutic groups					
The ability to respond to important material as it arises in the counseling session					
Recognize and verbalize personal issues that may impair objectivity and negatively impact the counseling process.					
The ability to recognize and respond appropriately to crisis.					
The ability to use and/or create interventions consistent with the counselor's guiding theory and/or consistent with the client's needs.					
Communicates in a style compatible with the communication style and developmental level of the client.					
Uses advanced accurate empathy					
Uses appropriate self-disclosure					
Uses confrontation					

**Albany State University
Counselor Education Program**

The ability to generate appropriate counseling goals and select interventions based on a comprehensive case conceptualization.					
Considers sociopolitical contexts when evaluating, conceptualizing, and planning interventions					
The ability to present and staff a case using principles and methods of case conceptualization.					
The student uses empirically supported counseling practices and or interventions.					
Area of Performance: Evaluation Skills	4	3	2	1	x
The ability to identify small increments of change and integrate them into an overall pattern or theme within the counseling process.					
The ability to modify specific interventions on the basis of effectiveness.					
The ability to develop, implement and evaluate individual and group treatment/counseling plans.					
The ability to apply the evaluation skills referenced above to culturally diverse client populations.					
Area of Performance: Professional Identity	4	3	2	1	x
Professional Identity: Knowledge of and identification with the role and function of a professional counselor/therapist.					
Self-Awareness: Demonstration of self-awareness as a professional counselor.					
Legal and Ethical Standards of Practice: Possess a thorough knowledge of ethical and legal standards of professional organizations and credentialing bodies.					
Professional Development: Promote individual professional development both in and outside of the practicum experience.					
Advocacy: Demonstrate ability to place clients' welfare and wellbeing as priority.					

Please use the back of this sheet to provide a written explanation of your evaluation scores.

Signature of supervisor: _____

Date: _____

**Albany State University
Counselor Education Program**

**Candidate's Self -Evaluation of Performance
COUN 5595 and 5598 Internship
Midterm and Final**

Candidate/Student: _____

Site: _____

Site Supervisor: _____

Rating Scale: 4 = exceeds expectations; 3 = Meets expectations; 2 = Needs improvement; 1 = Unsatisfactory;
X = Not applicable

Areas of Performance: Counseling Skills	4	3	2	1	x
The ability to communicate to the client/student the nature and limits of the counseling relationship.					
The ability to interview the client/student using direct and indirect methods of inquiry.					
Uses immediacy					
The ability to identify small increments of change.					
The ability to deal with the issues related to termination (i.e., referrals, timing, resistance)					
The ability to apply the counseling skills referenced above to culturally diverse client populations					
The ability to develop and maintain a productive counselor-client relationship.					
Uses basic counseling skills to respond to client needs.					
Competence in providing leadership, developing interventions, and awareness of factors influencing group dynamics in therapeutic and non-therapeutic groups					
The ability to respond to important material as it arises in the counseling session					
Recognize and verbalize personal issues that may impair objectivity and negatively impact the counseling process.					
The ability to recognize and respond appropriately to crisis.					
The ability to use and/or create interventions consistent with the counselor's guiding theory and/or consistent with the client's needs.					
Communicates in a style compatible with the communication style and developmental level of the client.					
Uses advanced accurate empathy					
Uses appropriate self-disclosure					

**Albany State University
Counselor Education Program**

Uses confrontation					
The ability to generate appropriate counseling goals and select interventions based on a comprehensive case conceptualization.					
Considers sociopolitical contexts when evaluating, conceptualizing, and planning interventions					
The ability to present and staff a case using principles and methods of case conceptualization.					
The student uses empirically supported counseling practices and or interventions.					
Area of Performance: Evaluation Skills	4	3	2	1	x
The ability to identify small increments of change and integrate them into an overall pattern or theme within the counseling process.					
The ability to modify specific interventions on the basis of effectiveness.					
The ability to develop, implement and evaluate individual and group treatment/counseling plans.					
The ability to apply the evaluation skills referenced above to culturally diverse client populations.					
Area of Performance: Professional Identity	4	3	2	1	x
Professional Identity: Knowledge of and identification with the role and function of a professional counselor/therapist.					
Self-Awareness: Demonstration of self-awareness as a professional counselor.					
Legal and Ethical Standards of Practice: Possess a thorough knowledge of ethical and legal standards of professional organizations and credentialing bodies.					
Professional Development: Promote individual professional development both in and outside of the practicum experience.					
Advocacy: Demonstrate ability to place clients' welfare and wellbeing as priority.					

Please use the back of this sheet to provide a written explanation of your evaluation scores.

Signature of student: _____

Date: _____

**Albany State University
Counselor Education Program**

Evaluation of Fieldwork Candidate's Use of Individual Supervision

Candidate/Student: _____

Site: _____

Site Supervisor: _____

Rating Scale: 4 = exceeds expectations; 3 = Meets expectations; 2 = Needs improvement; 1 = Unsatisfactory;
X = Not applicable

Areas of Performance	4	3	2	1	x
Open to supervision and feedback.					
Open to learning.					
Able to function independently					
Dresses according to site dress code/policy.					
Demonstrates collegiality with other staff.					
Establishes appropriate professional relationships with clients.					
Functions in an ethical manner.					
Maintains confidentiality.					
Demonstrates professional knowledge of counseling theory application to school settings.					
Demonstrates professional knowledge of state and national models of school counseling.					

Please provide a written explanation of your evaluation scores below. Use the back of this sheet if you need additional space.

Signature of supervisor: _____

Date: _____

Albany State University
Counselor Education
Candidate-Student Evaluation of Fieldwork Site Supervisor

Please complete the following survey about your supervision experience. Use the rating scale to answer each question. Indicate your fieldwork course (i.e., practicum or internship) and add additional comments as desired.

Rating Scale:

4 = exceeds expectations

3 = Meets expectations

2 = Needs improvement

1 = Unsatisfactory

X = Not applicable

Supervision

1. Supervision provided opportunities for me to discuss clinical issues and plan strategies for counseling interventions.
4 3 2 1 X

2. I developed a working relationship with the supervisor and was able to use supervision as a way to meet my goals for practicum.
4 3 2 1 X

3. I had regularly scheduled weekly supervision sessions with my assigned supervisor for a minimum of one hour per week.
4 3 2 1 X

4. The supervisor and I communicate well about clinical issues and I feel respected as a professional in training.
4 3 2 1 X

5. The supervisor provided opportunities for me to participate or observe a variety of counselor duties such as record keeping, in-service training, special meetings, and administrative tasks.
4 3 2 1 X

6. The supervisor provided opportunities for me to participate in a variety of clinical and psycho-educational duties including individual/group counseling, career counseling, large group counseling, and large group testing.
4 3 2 1 X

7. The supervisor addressed multicultural issues as a matter of course during case presentation and conceptualization.
4 3 2 1 X

8. The site supervisor encouraged me to take more autonomy as my skills increased.

4 3 2 1 X

9. The site supervisor provided formal ways to contact him/her via telephone and e-mail.

4 3 2 1 X

Check One:

Practicum _____ **Internship** _____ **Name of Site:** _____

Student Evaluation of Fieldwork Site Environment

1. The site provided an appropriate physical space for me to conduct my duties.

4 3 2 1 X

2. The site offered a procedures manual that detailed operating procedures during the regular course of business and during crises.

4 3 2 1 X

3. The site provided technology that facilitated accomplishing my duties including telephone access, computers with internet, and videotaping.

4 3 2 1 X

4. Within the first week of practicum, the site arranged a formal orientation to the setting.

4 3 2 1 X

Multicultural Issues

1. The site offered opportunities for me to work with diverse students, faculty, and parents.

4 3 2 1 X

2. The site encouraged me to include diversity issues in the development and implementation of counseling activities and interventions.

4 3 2 1 X

3. The site addressed multicultural issues as a matter of its mission and outreach to constituents.

4 3 2 1 X

Site Strengths/Areas of Concern

1. This site's strengths include

2. Areas of concern that I have for this site include

Check One:

Practicum _____ Internship _____

Albany State University
Counselor Education
Candidate-Student Evaluation of University Supervisor

Please complete the following survey about your supervision experience. Use the rating scale to answer each question. Add additional comments as you desire.

Rating Scale:

4 = exceeds expectations

3 = Meets expectations

2 = Needs improvement

1 = Unsatisfactory

X = Not applicable

Supervision

1. Supervision provided opportunities for me to discuss clinical issues and plan strategies for counseling interventions.

4 3 2 1 X

2. I developed a working relationship with the supervisor and was able to use supervision as a way to meet my goals for practicum.

4 3 2 1 X

3. I had regularly scheduled weekly supervision sessions with my assigned supervisor for a minimum of one hour per week.

4 3 2 1 X

4. The supervisor and I communicate well about clinical issues and I feel respected as a professional in training.

4 3 2 1 X

5. The supervisor provided opportunities for me to participate or observe a variety of counselor duties such as record keeping, in-service training, special meetings, and administrative tasks.

4 3 2 1 X

6. The supervisor provided opportunities for me to participate in a variety of clinical and psycho-educational duties including individual/group counseling, career counseling, large group counseling, and large group testing.

4 3 2 1 X

7. The supervisor addressed multicultural issues as a matter of course during case presentation and conceptualization.

4 3 2 1 X

8. The site supervisor encouraged me to take more autonomy as my skills increased.

4 3 2 1 X

9. The site supervisor provided formal ways to contact him/her via telephone and e-mail.

4 3 2 1 X

Check One:

Practicum _____ Internship _____

Appendix A

Professional Practice Practicum and Internship Form

COUNSELING FIELD EXPERIENCE CHECKLIST

Below is a list of all the items that you **NEED** to have as part of your **PRACTICUM** or **INTERNSHIP** application. You **MUST** initial in the box next to each item **IN THE TABLE** as an acknowledgment that you are in fact submitting the required item.

You must have your application **COMPLETED** and **SUBMITTED** to Dr. Claudia Calder, Clinical Coordinator by the close of business on April 15th or Oct 15th, depending on the semester you are taking practicum or internship. Your application is to be in an envelope with this checklist (**THIS PAGE**) **STAPLED** to the front of the envelope when it is submitted. Please place envelope containing the application and the checklist attached in Dr. Calder's mailbox in the mail room in BCBB 244. Late applications will **NOT** be accepted. Incomplete applications will **NOT** be accepted.

Name: _____

Date of Submission: _____

Completed application forms	
Established a field experience site prior to filling out this application.	
Copy of Fieldwork Placement Agreement	
Proof of liability insurance	
Vita/Resume of potential site supervisor & site supervisor information form including initials	
Copy of potential site supervisor's License/Certificate	
<ul style="list-style-type: none"> • Proof of completion of site supervisor training by SITE SUPERVISOR <ul style="list-style-type: none"> a. If your site supervisor has already completed the online training this academic year, it is not necessary for the individual to complete the training modules again. However, you or the supervisor must provide proof of completion. b. For individuals whose supervisors have NOT completed the training this academic year, please provide the names and email address of the potential supervisor April 15th to Dr. Calder. This needs to be done PRIOR to submitting your fieldwork application to allow for the individual to enroll in the training and have enough time to complete the modules. Once the modules are completed you MUST submit proof of completion as part of your application packet. 	
Copy of Placement Activity Proposal	
GACE scores Test 1(103) for Practicum GACE scores Test 2(104) for Internship.	
Completed background: You may do so at the ASU campus police office on campus for FREE - Students who submitted a background check when applying to complete practicum are still required to complete a background check for this semester.	
A copy of driver's license	

**COUNSELOR EDUCATION PROGRAM
STUDENT VERIFICATION OF PROFESSIONAL LIABILITY INSURANCE**

As part of my professional training in ASU Counselor Education Program, I understand that I will participate in field experiences in a school system or facility, beyond the university campus. I am further aware of the policy established by the program requiring that students provide evidence of holding liability insurance prior to their participation in field experiences. I am also aware that I may not begin to accrue field work hours until I show proof of liability insurance.

I, _____
(Full name printed)

ASU RAM ID # _____ verify

that I have professional liability insurance currently in effect with _____
(Name of Insurance Company)

Dates period of insurance coverage, (e.g. from 1/14 to 12/14) _____

Furthermore, having attested to liability insurance coverage as described above, I assume full responsibility for my own professional liability during field experiences, practicum, and internship, and hereby relieve all parties of any responsibility.

(Signature of Counselor Candidate)

(Date)

(Signature of Site Supervisor)

(Date)

(Signature of Faculty Supervisor)

(Date)

Note: Verification is required. Attach a copy of your policy to this application.

PLACEMENT ACTIVITY PROPOSAL

An evaluation of the learner's level of proficiency will be **completed by the site supervisor** at the end of each semester using the Site Supervisor Evaluation online survey. Please note the types of activities the learner will engage in at the site to meet the required competencies. These activities should be provided in sufficient amounts to facilitate meeting the required fieldwork hours. **The learner and supervisor should collaborate in filling out the Placement Activity Proposal and must be submitted as part of the application packet.**

Practicum Student's Name:

Practicum Site Supervisor's Name:

Placement Activity Proposal

Required Competency Areas	Activities at Site to Meet the Competencies	Hours/week Practicum Student Will Engage in the Activities
Counseling Relationship Skills- Individual [Core Clinical]		
Counseling Relationship Skills- Group [Core Clinical]		
Core Clinical Assessment Skills [Core Clinical]		
Counseling Intervention Skills- Individual & Group [Core Clinical]		
Consultation with Parents [SC Specialty]		
Consultation with Teachers, School Professionals [SC Specialty] Consultation with Stakeholders		
Research and Program Evaluation Skills [Core Clinical]		

Practicum Student's Signature

Practicum Site Supervisor's Signature

**Clinical Mental Health Counseling
Professional Forms**

PRACTICUM AND INTERNSHIP INFORMATION SHEET

Albany State University
Counseling and Educational Leadership Clinical
Mental Health Counseling

This form is to be completed at the beginning of practicum and internship by the student, site supervisor, and faculty supervisor. All concerned should retain copies and the faculty supervisor shall place one copy in the student's folder.

Number of practicum/internship credit hours for which you are enrolled this semester:

Student Information

Student's Name:

Address:

Home Phone #: _____ Cell Phone #: _____

Email Address: _____ Faculty Advisor: _____

Practicum/Internship Goals & Objectives (use back of page):

Practicum/Internship Site Information

Practicum/Internship Site Name:

Address:

On-site Supervisor:

Name:

Title:

Office Phone/Email Address:

Please initial each of the following indicating you are aware of and agree to the requirements for supervising an ASU fieldwork student:

1. Provide a minimum of 12 hours of individual/triadic supervision during each 16-week semester (1-1.5 hrs. weekly) _____
2. Provide regular feedback to intern on skill development including reviews of audio/video tapes of intern's work with clients, co-counseling, and/or live supervision of intern's work _____

Counselor Candidate

Date

Site Supervisor

Date

Faculty Supervisor

Date

SITE SUPERVISOR INFORMATION

Name: _____

Address: _____

Phone: (Home) _____ (Work) _____

E-mail Address: _____

Position / Title: _____

Agency: _____

Have you supervised rehabilitation counseling students from Albany State University in the past?

_____ If yes, when? _____

Who was your university contact? _____

Education (Highest academic level obtained)

Institution: _____

Degree/Year: _____

Certification (Please check if applicable)

Licensed Professional Counselor (LPC)

Other _____

Renewal Date for Certification: _____

Other Related Educational Experiences (Begin with the most recent)

1.) _____

2.) _____

3.) _____

Professional Experience (Begin with the most recent)

Employer: _____

Address: _____

Start and End Dates: _____

Job Title: _____

Responsibilities: _____

Employer: _____

Address: _____

Start and End Dates: _____

Job Title: _____

Responsibilities: _____

Employer: _____

Address: _____

Start and End Dates: _____

Job Title: _____

Responsibilities: _____

Employer: _____

Address: _____

Start and End Dates: _____

Job Title: _____

Responsibilities: _____

Professional Affiliations: _____

**COUN 5595 CLINICAL MENTAL HEALTH COUNSELING
INTERNSHIP LOG**

Student's Name: _____ Internship Semester/Year: _____ Date Semester Began: _____

Activity	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Supervisor Initials
Intake Assessment																
Testing																
Diagnosis/Assessment																
Crisis/Emergency																
Individual Counseling																
Group Counseling																
Family Counseling																
Sub-Total Direct Hours:																
Consultation																
Case Management																
Referral Process																
Educational Training																
Client Research																
Clinical Supervision																
Staff Meetings																
Documentation																
Sub-Total Indirect Hours:																
TOTAL HOURS: DIRECT & INDIRECT																
Site Supervisor Initials & Date (REQUIRED Weekly)																

Summary of Direct Hours: _____ Summary of Indirect Hours: _____ Total Hours: _____

By signing this Internship Log, I am confirming that the Clinical Mental Health Counselor Candidate has completed the hours listed.

Site-Supervisor Signature: _____

Counselor Candidate Signature: _____

Faculty Supervisor Signature: _____

Clinical Rehabilitation Counseling

Professional Forms

PRACTICUM AND INTERNSHIP INFORMATION SHEET
Albany State University
Department of Counselor and Educational
Leadership

This form is to be completed at the beginning of practicum and internship by the counselor candidate, site supervisor, and faculty supervisor. All concerned should retain copies and the university group supervisor shall place one copy in the student's folder.

Number of practicum or internship credit hours for which you are enrolled this semester:

Student Information

Student's Name:

Address:

Home Phone#:

Cell Phone#:

Email Address:

Faculty Advisor:

Internship Goals & Objectives (use back of page):

Internship Site Information

Internship Site Name:

Address:

On-site Supervisor:

Name:

Title:

Office Phone/Email Address:

Please initial each of the following indicating you are aware of and agree to the requirements for supervising an ASU fieldwork student:

1. Provide a minimum of 12 hours of individual/triadic supervision during each 16-week semester (1-1.5 hrs. weekly) _____
2. Provide regular feedback to intern on skill development including reviews of audio/videotapes of intern's work with clients, co-counseling, and/or live supervision of intern's work _____

Counselor Candidate

Date

Site Supervisor

Date

Faculty Supervisor

Date

APPLICATION FOR REHABILITATION COUNSELING INTERNSHIP

Name: _____

Address: _____

Phone: (Home) _____ (Work) _____

E-mail Address: _____

Date of Application: _____

Term of Internship: _____

Total number of program hours completed: _____

List previous experiences at human service agencies:

Name of Agency: _____

Start and End Dates: _____

Duties: _____

Name of Agency: _____

Start and End Dates: _____

Duties: _____

Name of Agency: _____

Start and End Dates: _____

Duties: _____

Name of Agency: _____

Start and End Dates: _____

Duties: _____

Anticipated date of graduation:

Completed and signed plan of study on file? _____

Full-time or part-time student? _____

Are you on an approved limited leave of absence or sabbatical?

If yes, please attach appropriate documentation from employer.

SITE SUPERVISOR INFORMATION

Name: _____

Address: _____

Phone: (Home) _____ (Work) _____

E-mail Address: _____

Position / Title: _____

Agency: _____

Have you supervised rehabilitation counseling students from Albany State University in the past?
_____ If yes, when? _____

Who was your university contact? _____

Education (Highest academic level obtained)

Institution: _____

Degree/Year: _____

Certification (Please check if applicable)

Certified Rehabilitation Counselor (CRC) _____

Licensed Professional Counselor (LPC) _____

Other _____

Renewal Date for Certification: _____

Other Related Educational Experiences (Begin with the most recent)

1.) _____

2.) _____

3.) _____

Professional Experience (Begin with the most recent)

Employer: _____

Address: _____

Start and End Dates: _____

Job Title: _____

Responsibilities: _____

Employer: _____

Address: _____

Start and End Dates: _____

Job Title: _____

Responsibilities: _____

Employer: _____

Address: _____

Start and End Dates: _____

Job Title: _____

Responsibilities: _____

Employer: _____

Address: _____

Start and End Dates: _____

Job Title: _____

Responsibilities: _____

Professional Affiliations: _____

CLINICAL REHABILITATION COUNSELING INTERNSHIP
College of Professional Studies
Department of Counseling and Educational Leadership
Albany State University

Counselor Candidate's Name: _____

Current Address: _____

Telephone: (Current) _____ (Work) _____

(E-Mail) _____

INSTRUCTIONS: This agreement must be completed in **triplicate**, with one copy retained by the Counselor Candidate and On-Site Supervisor. The original must be filed with the Faculty Supervisor. This agreement is subject to the following conditions: (1) Rehabilitation Counseling Internship **cannot** begin until the student has completed I **Practicum (100 hrs.)** and a majority of **(Approximately 75 percent, semester hours)** of coursework in Rehabilitation Counseling; (2) Duties outlined may be subjected to revision, pending all parties' approval.

Organization's Name: _____

Address: _____

Telephone: _____

On-Site Supervisor's Name: _____

Beginning Date of Rehabilitation Counseling Internship: _____

Full-Time: (# of hours per week): _____

Semester and Year in which officially registered for Rehabilitation Services Internship:

Specific objectives to be achieved must be attached to this form and by reference, become a part of this agreement.

Approval:

Student: _____ Date: _____

Site Supervisor: _____ Date: _____

Faculty Supervisor: _____ Date: _____

REHABILITATION COUNSELING INTERNSHIP
School of Education Albany State University

Student's Name: _____

Site: _____

Supervisor: _____

Telephone: _____ E-Mail: _____

Days/Hours per Week: _____

Learning Objectives:

Organizational

1. To apply and test academic/theoretical knowledge in a realistic rehabilitation setting.
2. To experience the realities of the counselor/client relationships and that self-understanding plays in this relationship.
3. To develop confidence in his or her abilities (knowledge and skills) in a situation that provides consistent and appropriate feedback necessary for maximum professional growth and development.
4. To inculcate high standards of professional identity.
5. To acquire an understanding of organizational structure, protocol, processes, and internal and external working relationships.

Individual (Use additional sheets and attach as necessary.)

6.

7.

8.

9.

Signatures:

Site Supervisor: _____ Student: _____

Faculty Supervisor: _____ Date: _____

**School Counseling Professional Practice
Practicum and Internship Forms**

SCHOOL COUNSELING PRACTICUM AND INTERNSHIP INFORMATION SHEET

Albany State University
School of Education

This form is to be completed at the beginning of practicum and internship by the counselor candidate, site supervisor, and university group supervisor. All concerned should retain copies and the university group supervisor shall place one copy in the student's folder

Student Information

Name:

Address:

Home Phone#: Cell Phone#:

Email Address:

Practicum/Internship Goals and Objectives (Please be specific and attach a separate document):

Practicum/Internship Site Information

School Name:

Address:

Principal's Name:

Site Supervisor's Name:

Office Phone #:

Email Address:

Practicum/Internship Schedule (Please include a daily work hour schedule and a total number of work hours per week):

Counseling Student

Date

Site Supervisor

Date

Faculty Supervisor

Date

**College of Education, School Counseling Program
Fieldwork Application Form**

Student Name: _____

Ram ID: _____

Mailing Address: _____

Phone (Home/Cell): _____

ASU Email: _____

Alternate Email Address _____

Intended Course (Please **only** choose **one** option) _____ Practicum, which requires 100 clock hours completed during the semester of enrollment (40 direct and 60 indirect).

_____ Internship, which requires completion of 600 hours completed during the semester of enrollment (240 direct, 360 indirect hours).

Intended Semester for completion option chose above _____

Name of Field Placement School: _____

School's Phone # & Fax Number # _____

School's Physical Address
(include city, state, zip code) _____

Intended Site Supervisor (**first and last name**) _____

**** SUPERVISOR MUST BE CERTIFIED/LICENSED AND HAVE A
MINIMUM OF 2 YEARS PROFESSIONAL EXPERIENCE.**

Site Supervisor's Phone# & FaxNumber _____

I, _____, certify that all of the information provided above is accurate and truthful.

****** PLEASE ENSURE THAT THIS IS THE FIRST PAGE OF YOUR APPLICATION PACKET. ******

SAMPLE PROGRESS NOTE FORMAT- INDIVIDUAL

Counselor-in-training: S. Jones

Session Number: 2

Session Objective(s): In brief format, describe the specific session objective(s). These objectives should relate to the goals and objectives outlined in your treatment/counseling plan.

EX: The objective in this session was to have the client identify the specific living skills they would like to work on in counseling.

Therapeutic Intervention(s): This section should discuss the specific therapeutic techniques, skills, or activities you used in the session to assist the client in working through the session objective(s).

EX: Initially I worked with the client on brainstorming, generating ideas for living skills. This occurred after getting the client to focus on his goal of living independently. Then I helped the client prioritize skills and select three for our sessions.

Evaluation: This section should provide an overview of the session in relation to the objective(s) established for this session. This may include consideration of client progress, evaluation of your role as counselor, critical issues that arose, client - counselor dynamics, and issues that may have led to a revision of the original session objectives or treatment/counseling plan. Specific questions or concerns for the supervisor can be put in bold or underlined.

EX: Initially there was some difficulty in focusing the client. He seemed very distracted and had difficulty maintaining eye contact. Brainstorming was useful when I focused the goal of independent living. The client was resistant to prioritizing living skills "I want to do all of them." I worked on refocusing and together we identified three goals to begin with in our sessions (an apartment, a job, a car). I need to develop some other techniques for refocusing the client.

Plan(s) for Next Session: This should include consideration of overall objectives and what occurred in the previous session.

EX: The focus will be on independent living skills related to living in an apartment (e.g., finding an apartment, paying bills, etc.).

PROGRESS NOTE - INDIVIDUAL

Client Code: _____ Counselor-in-Training: _____

Session Number: _____ Date: _____

Session Objective(s):

Therapeutic Intervention(s):

Evaluation:

Plan(s) for Next Session:

INDIVIDUAL COUNSELING PLAN

ClientCode: _____ Date: _____

Counselor-in-training: _____

Counseling Focus:

Diagnostic Information:

Long-term Goals:

- | | |
|----|----|
| 1. | 2. |
| 3. | 4. |

Short-term Objectives

Therapeutic Intervention(s)

- | | |
|----|----|
| 1. | 1. |
| 2. | 2. |
| 3. | 3. |
| 4. | 4. |

Changes to Counseling Plan (please note reason and type of modification)

- 1.
- 2.
- 3.

Counseling Plan Evaluation (note session and date)

- 1.
- 2.
- 3.

CASE CONCEPTUALIZATION

Client (Pseudonym): _____ Number of Sessions/Date of Last Session: _____

Counselor In-Training: _____ Date: _____

1. Personal Concerns related this session:
2. Professional Development Goals:
3. Rationale for section of audio tape presented:
4. Description of the Student:
5. Mental Status of the Student:
6. Presenting Issue or reason for referral:
7. Relevant Background Information
8. Multicultural Considerations:
9. How do these considerations impact your work with this student as a practicing school counselor?
10. Individual Strengths (including observations from sessions):
11. Current Status of your work with the student:
12. Treatment Goals:
13. Treatment Interventions/Therapeutic Approaches:
14. Questions or Concerns for which you would like to receive peer feedback (3 to 4 questions):

COUN 5595 SCHOOL COUNSELING INTERNSHIP HOURS LOG

Intern: _____ Site: _____

Faculty Supervisor: _____ Site Supervisor: _____

Weekly, use the following chart as a log to record internship activities. Create a new chart for each week.

Week # _____	School Counseling Core Curriculum:	Individual Planning	Responsive Services	Indirect Student Services	Foundation, Management, Accountability
Activity	Instruction, Group Activities	Appraisal, Advisement	Counseling, Crisis Response	Referrals, Consultations, Collaboration	Program Planning, Assessment, Program Improvement
Topics					
Direct Service Hours					
Indirect Service Hours					
Supervision					
Total Hours					

At the end of the semester, record the semester totals in the following chart:

	School Counseling Core Curriculum:	Individual Planning	Responsive Services	Indirect Student Services	Foundation, Management, Accountability
Semester Total Direct Service					
Semester Total Indirect Service					
Total Supervision Hours					

Signatures

Intern: _____

Date: _____

Site Supervisor: _____

Date: _____

Faculty Supervisor: _____

Date: _____

LESSON PLAN TEMPLATE

School Counselor: _____ Date: _____

Activity: _____

Grade(s): _____

ASCA Mindsets & Behaviors (Domain/Standard):

Learning Objective(s) (aligns with competency):

1. _____

2. _____

3. _____

Materials:

Procedure:

GUIDELINES FOR CASE CONCEPTUALIZATION

- i. In his/her own words, what is the client's presenting problem?
- ii. In what way(s) does the client perception differ from that of the referral agent
- iii. What is your perception of the presenting problem?
- iv. How is your view of the presenting problem different from the clients?
- v. Using a specific counseling theory, how do you conceptualize the client's presenting
- vi. Problem?
- vii. What are the secondary problems?
- viii. When did the problems begin (onset)?
- ix. How has the client's day-to-day life been impacted by the problem?
 - x. Describe the impact of the family system, and others (peer culture, work, etc.) on the
 - xi. client's concern.
- xii. How was life different before onset of the problem?
- xiii. How would the client like for things to be different?
- xiv. What are the client's strengths?
- xv. What are the limitations/barriers that might hinder or prevent the changes the client would like to enact?

Based on the information above, a treatment/counseling plan, including goals (long range) and objectives (short range) should be formulated. The methods for working toward change should be clearly identified.

CLASSROOM GUIDANCE/CORE CURRICULUM FORMATIVE FEEDBACK

Date:

The purpose of this letter is to provide you with feedback from the recent observation I conducted of you performing one or more of the tasks associated with the school counselor's role. Additionally, I will at this time provide you with a summary of the overall strengths and areas for improvement identified by your site supervisor and myself to this point in the term. The feedback is intended to assist you in identifying professional development goals for the remainder of the internship period. Both your site supervisor and I are available to assist you in the formulation of these goals and to suggest interventions that facilitate and support your efforts to meet them.

Observation:

Date: _____ Location: _____ Grade: _____ Activity: _____

Rating Scale: 1 = not demonstrated; 2 = demonstrated minimally; 3 = demonstrated appropriately

The intervention was:	<u>1</u>	<u>2</u>	<u>3</u>
Appropriate for the established goal			
Age and grade appropriate			
Culturally sensitive and inclusive			
Consistent with accepted practices in the field of school counseling			
Consistent with the program at the internship site			
You demonstrated the following teaching behaviors and skills:			
Begin lessons with something that will capture students' interests			
Outline the basic goal/plan of the lesson in the introduction			
Communicate clearly and accurately			
Move around the room to keep students engaged			
Show your enthusiasm and energy			
Relax and smile			
Use open-ended questions and facilitate discussions			
Check often for understanding			
Use diverse teaching and learning formats			
Create a supportive environment			
Capture students' attention			
Respect for individual differences in learning and experience			
Use effective classroom management strategies			
The intervention was:	1	2	3

Be knowledgeable in the content area			
Stimulate and encourage all students' involvement			
Establish positive relationships with students			
Provide a smooth flow to lessons			
Management time effectively			
Restate your learning objective and summarize the lesson			
Overall Performance:			
Strengths:			
Areas for improvement:			

Professional Practice Practicum and Internship
Sample Consent and Documentation Forms

ADULT INFORMATION AND CONSENT FORM

Albany State University
School of Education
244 Billy C. Black Building Albany, GA
Phone: 229-500-2273

I would like to take this opportunity to welcome you to counseling and provide you with some information that you may find valuable. I am currently a counselor candidate at Albany State University. When I complete my program, I will hold a graduate degree in Counseling.

Our relationship, although psychologically personal at times, should be regarded as strictly professional in nature. We will meet once a week for approximately 50 minutes. Since we will be limited in the amount of time we have to work together, our highest priority will be on the short-term goals we work together to establish. As your counselor, all I request is that you be willing to work with me towards the goals you set for yourself.

Should you need to cancel an appointment, please attempt to do so at least 24 hours in advance. Additionally, it will benefit you to know that I am not on call. Should you have a problem that needs immediate attention, contact the designated individual at your site.

I am ethically bound to keep confidential anything you say in our sessions, with the following exceptions: (1) if I believe you are a potential danger to yourself or to someone else; (2) if I suspect child abuse or neglect or the abuse or neglect of an adult who is mentally or physically unable to care for him or herself; (3) if I am ordered to disclose information by a court of law; (4) if you grant me written permission to disclose information to another person; and (5) for supervision/consultation purposes. In order for me to provide you with the best care possible, I will regularly record our sessions and consult with my supervisor and peer counselors.

If at any time you are dissatisfied with my services, please do not hesitate to let me know. If we cannot come to an understanding and resolution, it is my duty to refer you to another care provider. My faculty supervisor is _____ . My site supervisor is _____ .

If you have any questions now or in the future, please feel free to ask at any time. Please indicate your understanding and consent by signing below.

Signature of Candidate: _____ Date: _____

Signature of Client: _____ Date: _____

CHILD/ADOLESCENT INFORMED CONSENT

Albany State University
School of Education
244 Billy C. Black Building Albany, GA
Phone: 229-500-2273

Dear Parent or Guardian:

Clinical Mental Health Counseling (CMHC) students from Albany State University are enrolled in a course during their graduate work called Counseling Practicum. This course involves working in the school or agency where your child is served for approximately 10 to 12 hours each week. During those hours, student counselors provide individual and group counseling for those students or clients who have been identified by an official at the site, through self or parent referral, as someone who might benefit from participating in counseling. You are receiving this form because we are requesting your consent to provide counseling services to a child in your care. If you have questions about the reason you are receiving this request, please contact the counseling center or school that your child is affiliated with.

Counseling Student's Name _____ would like to work with your son/daughter, a student at _____.

If your child experiences a crisis and requires immediate attention, due to my role as a Counselor-in-Training, I may be unavailable and suggest that you contact the counseling center for which I am affiliated.

I am ethically bound to keep confidential anything your child/adolescent shares in our sessions, with the following exceptions: (1) if I believe your child is a potential danger to themselves or to someone else; (2) if I suspect child abuse or neglect; (3) if I am ordered to do so by a court of law; (4) if you grant me written permission to disclose information to another person; and, (5) for supervision purposes. In order for me to provide the best care possible, I will often audio tape our sessions and consult with my supervisor and peer counselors. Your child's identity will be protected in these circumstances.

If at any time you are dissatisfied with my services, please do not hesitate to let me know. If we cannot come to an understanding and resolution, it is my duty to refer you to another care provider. My faculty supervisor is _____. My site supervisor is _____.

If you are interested and willing to have your child participate, please sign the form where indicated.

Thank you.

Parent's Signature: _____ Date: _____

STANDARD CHILD INTAKE FORM
Albany State University
School of Education

CHILD/ADOLESCENT CLINICAL MENTAL HEALTH ASSESSMENT

INTAKE

Date of Intake:

Start time:

End time:

RE: (Client Name)

Date of Birth:

Reason for Referral/Presenting Problem:

STRENGTHS BASED ASSESSMENT TO INCLUDE CURRENT AND HISTORICAL

SOCIAL AND FAMILY HISTORY:

MEDICAL HISTORY;

MENTAL HEALTH HISTORY:

TRAUMA HISTORY:

CRIMINAL HISTORY:

SCHOOL/VOCATIONAL HISTORY:

ALCOHOL AND SUBSTANCE USE HISTORY:

MENTAL STATUS EXAMINATION:

STRENGTHS:

Describe in the client's own words how they view recovery, experience challenges, strengths, needs, goals, values, lifestyle, family and community support and needs:

Other services/treatments being received and recommendations for additional services to other provider(s):

DIAGNOSTIC IMPRESSION

COUNSELING TREATMENT PLAN

Client Code:

Date Plan was Prepared:

STRENGTHS BASED ASSESSMENT TO INCLUDE CURRENT PRESENTING CONCERNS

PRESENTING PROBLEM(S)

BARRIERS TO TREATMENT

STRENGTHS AND RESOURCES AVAILABLE

EVIDENCE BASED GOALS

LONG-TERM GOAL

- 1.
- 2.
- 3.

LONG-TERM GOALS WILL BE ADDRESSED THROUGH THE FOLLOWING SHORT-TERM GOALS AND INTERVENTIONS

- 1.
- 2.
- 3.

THESE GOALS WILL BE REVISITED EVERY 90 DAYS AND REVISED AS NEEDED.

THERAPIST SIGNATURE: _____

ORIGINAL DATE OF TREATMENT PLAN: _____

TREATMENT PLAN REVIEWED: _____

TREATMENT PLAN REVIEWED: _____

TREATMENT PLAN REVIEWED: _____

Counseling Program Check Sheet

Program of Study for M.Ed. in Counselor Education
Concentration: Clinical Mental Health Counseling
DEPARTMENT OF COUNSELING AND EDUCATIONAL LEADERSHIP
Albany State University
Albany, Georgia 31705

Degree Options:	<input type="checkbox"/> Master's Degree
Non-Degree Options:	<input type="checkbox"/> Licensure (Limit: Up to 4 courses)

Name: _____ Advisor: _____ RAMID # _____

Address: _____ Phone/H: _____ Date Admitted: _____

City/State/Zip: _____ Phone H/O: _____ Email: _____

Required for Degree Program

Area A: Foundations (21 hours)		Grade	Hours
EDUC 5199	Graduate Orientation*		0
COUN 5000	Introduction to Professional Counseling*		3
COUN 5500	Theories of Counseling*		3
COUN 5501	Lifespan Development*		3
COUN 5520	Multicultural Counseling: Theory and Practice		3
COUN 5540	Prevention, Intervention, and Consultation		3
COUN 5600	Ethical and Legal Issues in Counseling		3
COUN 5610	Crisis Counseling and Intervention		3

Area B: Nature of the Learner (12 hours)		Grade	Hours
COUN 5508	Introduction to Mental Health Counseling		3
COUN 5519	Addiction Counseling		3
COUN 5560	Diagnosis and Treatment		3
COUN 5561	Psychopharmacology		3

Area C: Clinical Skills (21 hours)		Grade	Hours
COUN 5512	Counseling Strategies and Techniques		3
COUN 5515	Group Counseling and Dynamics		3
COUN 5517	Couples and Family Counseling		3
COUN 5531	Career Counseling and Development		3
COUN 5570	Practicum		3
COUN 5595	Internship I		3
COUN 5598	Internship II		3

Area D: Research (6 hours)		Grade	Hours
COUN 5510	Assessment in Counselor Education		3
COUN 5620	Research and Program Evaluation for Counselors		3
COUN 5596	Thesis		3

Area E: Electives		Grade	Hours
COUN 5001	Introduction to Professional Writing*		3
COUN 5002	Professional Issues in Counseling*		3
COUN 5514	Counseling Children and Adolescents		3
COUN 5550	Medical and Psychosocial Aspects of a Disability I		3
COUN 5551	Medical and Psychosocial Aspects of a Disability II		3
COUN 5575	Selected Topics in Counseling		3

The **Clinical Mental Health Counseling** concentration requires completion of a curriculum of at least 60 semester hours and an ePortfolio.

*These courses may be taken by provisional/non-degree Counselor Education students and non-majors.

Program of Study for M.Ed. in Counselor Education
Concentration: Clinical Mental Health Counseling
 DEPARTMENT OF COUNSELING AND EDUCATIONAL LEADERSHIP
 Albany State University
 Albany, Georgia 31705
 University System of Georgia

Other Requirements

EDUC 5199: Graduate Orientation	Date Completed:
Residency I	Date Completed:
Annual Background Check	Date Completed: Date Completed: Date Completed: Date Completed:
ePortfolio Review	Date Completed: Date Completed: Date Completed:
Graduation Application Submitted	Date Completed:
Application for Practicum approved	Date Completed:
Residency II	Date Completed:
Application for Internship approved	Date Completed:
ePortfolio Final Approval	Date Completed:
Exit Examination passed	Date Completed:
Graduation Audit Completed	Date Completed:

Program of Study for M.Ed. in Counselor Education
Concentration: Clinical Rehabilitation Counseling
DEPARTMENT OF COUNSELING AND EDUCATIONAL LEADERSHIP
Albany State University
Albany, Georgia 31705
University System of Georgia

Degree Options:	<input type="checkbox"/> Master's Degree	
Non-Degree Options:	<input type="checkbox"/> Certification (have a counseling related degree)	<input type="checkbox"/> Licensure (Limit: Up to 4 courses)

Name: _____ Advisor: _____ RAMID # _____

Address: _____ Phone/H: _____ Date Admitted: _____

City/State/Zip: _____ Phone H/O: _____ Email: _____

Required for Degree Program

Area A: Foundations (21 hours)		Grade	Hours
EDUC 5199	Graduate Orientation*		0
COUN 5000	Introduction to Professional Counseling*		3
COUN 5500	Theories of Counseling*		3
COUN 5501	Lifespan Development*		3
COUN 5520	Multicultural Counseling Theory and Practice		3
COUN 5540	Prevention, Intervention, and Consultation		3
COUN 5600	Ethical and Legal Issues in Counseling		3
COUN 5610	Crisis Counseling and Intervention		3

Area B: Nature of the Learner (12 hours)		Grade	Hours
COUN 5504	Foundations of Rehabilitation Counseling		3
COUN 5525	Case Management		3
COUN 5532	Vocational Development and Placement		3
COUN 5550	Medical and Psychosocial Aspects of a Disability I		3

Area C: Clinical Skills (21 hours)		Grade	Hours
COUN 5512	Counseling Strategies and Techniques		3
COUN 5515	Group Counseling and Dynamics		3
COUN 5517	Couples and Family Counseling		3
COUN 5531	Career Counseling and Development		3
COUN 5570	Practicum		3
COUN 5595	Internship		3
COUN 5598	Internship II		3

Area D: Research (6 hours)		Grade	Hours
COUN 5510	Assessment in Counselor Education		3
COUN 5620	Research and Program Evaluation for Counselors		3
COUN 5596	Thesis		3

Area E: Electives		Grade	Hours
COUN 5001	Introduction to Professional Writing*		3
COUN 5002	Professional Issues in Counseling*		3
COUN 5519	Addiction Counseling		3
COUN 5551	Medical and Psychosocial Aspects of a Disability II		3
COUN 5560	Diagnosis and Treatment		3

COUN 5561	Psychopharmacology		3
COUN 5575	Selected Topics in Counseling		3

The **Clinical Rehabilitation Counseling** concentration requires completion of a curriculum of at least 60 semester hours and an ePortfolio.

*These courses may be taken by fully admitted/provisional/non-degree counselor education students and non-majors.

Program of Study for M.Ed. in Counselor Education

Concentration: Clinical Rehabilitation Counseling

DEPARTMENT OF COUNSELING AND EDUCATIONAL LEADERSHIP

Albany State University

Albany, Georgia 31705

University System of Georgia

Other Requirements

EDUC 5199: Graduate Orientation	Date Completed:
Residency I	Date Completed:
Annual Background Check	Date Completed: Date Completed: Date Completed: Date Completed:
ePortfolio Review	Date Completed: Date Completed: Date Completed:
Graduation Application Submitted	Date Completed:
Application for Practicum approved	Date Completed:
Application for Internship approved	Date Completed:
Residency II	Date Completed:
ePortfolio Final Approval	Date Completed:
Exit Examination passed	Date Completed:
Graduation Audit Completed	Date Completed:

Program of Study for M.Ed. in Counselor Education
Concentration: School Counseling
DEPARTMENT OF COUNSELING AND EDUCATIONAL LEADERSHIP
Albany State University
Albany, Georgia 31705
University System of Georgia

Degree Options:	<input type="checkbox"/> Master's Degree w/ Certification	<input type="checkbox"/> Master's Degree w/ Certification & Licensure
Non-Degree Options:	<input type="checkbox"/> Certification Only (have a counseling related degree)	<input type="checkbox"/> Licensure Only (Limit: Up to 4 courses)

Name: _____ Advisor: _____ RAMID # _____

Address: _____ Phone/H: _____ Date Admitted: _____

City/State/Zip: _____ Phone H/O: _____ Email: _____

Georgia Teacher Certification/License # _____ (Attach copy of certificate/license)

Area A: Foundations (21 hours)		Grade	Hours
EDUC 5199	Graduate Orientation		0
COUN 5000	Introduction to Professional Counseling*		3
COUN 5500	Theories of Counseling*		3
COUN 5501	Lifespan Development*		3
COUN 5520	Multicultural Counseling: Theory and Practice		3
COUN 5540	Prevention, Intervention, and Consultation		3
COUN 5600	Ethical and Legal Issues in Counseling		3
COUN 5610	Crisis Counseling and Intervention		3

Area B: Nature of the Learner (15 hours)		Grade	Hours
COUN 5506	School Counseling Foundations		3
COUN 5514	Counseling Children and Adolescents		3
COUN 5528	School Counseling in P-12 Settings		3
COUN 5529	Curriculum and Program Coordination		3
SPED 5501	Exceptional Children and Youth		3

Area C: Clinical Skills (21 hours)		Grade	Hours
COUN 5512	Counseling Strategies and Techniques		3
COUN 5515	Group Counseling and Dynamics		3
COUN 5517	Couples and Family Counseling		3
COUN 5531	Career Counseling and Development		3
COUN 5570	Practicum		3
COUN 5595	Internship		3
COUN 5598	Internship II		3

Area D: Research (6 hours)		Grade	Hours
COUN 5510	Assessment in Counselor Education		3
COUN 5620	Research and Program Evaluation for Counselors		3
COUN 5596	Thesis		3

Area E: Electives		Grade	Hours
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COUN 5001	Introduction to Professional Writing		3
COUN 5002	Professional Issues in Counseling		3
COUN 5550	Medical and Psychosocial Aspects of a Disability I		3
COUN 5519	Addiction Counseling		3
COUN 5560	Diagnosis and Treatment		3
COUN 5561	Psychopharmacology		3

The **School Counseling** concentration requires completion of a curriculum of at least 60 semester hours and an ePortfolio.
 *These courses may be taken by Provisional/Non-Degree Counselor Education students and non-majors.

Program of Study for M.Ed. in Counselor Education
Concentration: School Counseling
 DEPARTMENT OF COUNSELING AND EDUCATIONAL LEADERSHIP
 Albany State University
 Albany, Georgia 31705
 University System of Georgia

Other Requirements

EDUC 5199: Graduate Orientation	Date Completed:
Establish MyPSC account (for GA certification)	Date Completed:
Entrance Examination passed	Date Completed:
Residency I	Date Completed:
Background Check	Date Completed: Date Completed:
ePortfolio Review	Date Completed: Date Completed: Date Completed:
GACE 103 passed	Date Completed:
Residency II	Date Completed:
Application for Practicum approved	Date Completed:
Graduation Application Submitted	Date Completed:
GACE 104 or <i>Praxis</i> [®] Professional School Counselor Test (Test 5421) passed	Date Completed:
Application for Internship approved	Date Completed:
Special Education requirement met	Date Completed:
ePortfolio Final Approval	Date Completed:
Certification application/upgrade submitted	Date Completed:
Graduation Audit Completed	Date Completed:

**List of Approved Supervisors that
consented to have their information
shared with candidates.**

Site Supervisor Name	Site Name	Site Supervisor Contact
LaPorsha Pollard	Terrell Middle School	laporshapollard@gmail.com
Tara Miller	Worth County Primary School	tmiller@worthschools.net
Beulah D. Evans	Center Elementary School	bevans@ware.k12.ga.us
Aurelia E. Moss	Effingham County High School	amosseffingham.k12.ga.us
Ronnie Andrews	Fulton County Renaissance Middle School	andrews@fultonschools.org
Tammie Lewis	Dodge County High School	tlewis@dodge.k12.ga.us
Desia Selby	Rutland High School - Bibb County Schools	desia.selby@bcds12.net
Kirsteen Mosier	Bryan County High School	kmosier@bryan.k12.ga.us
Michele Mobley	Buford Academy	michele.mobley@bufordcityschools.org
Amanda Summers	North Paulding High School	arsummers@paulding.k12.ga.us
Cathy Nobles	CA Gray Junior High School	cathy.nobles@colquitt.k12.ga.us