

Albany State University School Counseling Program

# Field Experience Application

#### FIELD EXPERIENCE CHECKLIST

Below is a list of all of 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. Edwards-Joseph**, Clinical Coordinator by the close of business on **April 15<sup>th</sup> or Oct 15**, 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 my mail box in the mail room in ACAD 244.

You need to submit an application for practicum and one for internship even if you are remaining at the same school.

ate 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  Copy of Proof of liability insurance (The policy must offer at least \$1,000,000 of coverage).  Vita/Resume of potential site supervisor & site supervisor information form including initials  Copy of potential site supervisor's License/Certificate	
Proof of completion of site supervisor training by SITE SUPERVISOR	
<ul> <li>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.</li> </ul>	
For individuals whose supervisors have NOT completed the training this academic year, please provide the names and email address of the potential supervisor March 18, 2015 to Dr. Edwards-Joseph. 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.	
<ul> <li>Completed background.</li> <li>You may do so at the ASU campus police office on campus for FREE.</li> <li>Students who submitted a background check when applying to complete practicum are still required to complete a background check for this semester.</li> </ul>	
A copy of driver's license	
Student's signature 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# & Fax Number	
I,, certify that all of the i	information provided above is accurate and truthful.

## 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, beyond the university campus students provide evidence of holding liability insura not begin to accrue field work hours until I show pr	ance prior to their participation in fiel	d experiences. I am also aware that I may
coverage.	ool of hability insurance. The policy	παστοποι ατισαστ ψ 1,000,000 οι
I,	ASU RAM ID#	verify
(Full name printed)	7.00 TO WITE #	
that I have professional liability insurance currently	in effect with(Name of Insurance Comp	
Dates period of insurance coverage, (e.g. from 1/1	4 to 12/14)	
Furthermore, having attested to liability insurance professional liability during field experiences, pract	•	
(Signature of Student)		(Date)
(Signature of Site Supervisor)		(Date)
(Signature of University Supervisor)		(Date)

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

#### SITE SUPERVISOR INFORMATION

Internship Supervisor Information:
First Name:
Last Name:
Current Work Site:
Phone Number:
E-mail Address
Please initial each of the following indicating you are aware of and agree to the requirements for supervising an ASU fieldwork student (electronic initials are not accepted):
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, counseling, and/or live supervision of intern's work
Review Site Supervisor Orientation materials
4. Provide intern with a caseload by which he/she will earn the required number of direct contact hours (40 hours in practicum during one 16-week semester and 240 hours in internship over 1-2 semester) which is inclusive of individual, family, couple, group, and/or classroom guidance activities, as appropriate within the intern's specialization
5. Provide a copy of resume/CV and license/certificate

### **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.

Competencies to be met by learner	Activities at the site that will meet the Competencies	Hours each week learner will be engaged in these activities
Core Clinical/ Counseling Relationship Skills		
Core Clinical/ Counseling Assessment Skills		
Core Clinical/ Counseling Intervention Skills		
Research and Evaluation Skills		
Ethics and Standards of Practice Skills		
Self-Management and Reflective Practice		

### **Fieldwork Placement Agreement**

(Please check appropriate program) SC	
Parties to the Agreement:	
This agreement, dated	, is made by and among the following parties:
the Student, named	,
the Fieldwork Site (the "Site")	·,
and Albany State University, School Counseling Program, C	College of Education.
<u>Term of Agreement:</u> (insert exact start date of academic site)	semester you will begin practicum or internship and will end the experience at this
This agreement shall be effective between (mo/day/year) _	and (mo/day/year) for approximately hours per week.
Site during the fieldwork application process.  2. To provide the supervisor with the Site Supervisor Orien  3. To maintain regular contact during the quarter from the f  3. To notify the Student that he/she must adhere to the adr  4. To provide immediate consultation from the Fieldwork Fa  Supervisor (acknowledging that the Site Supervisor has printing the supervisor for	or to facilitate communication between Albany State University, the Student, and the tation materials and evaluation forms required to assess the performance of interns. faculty member who is teaching the learner's fieldwork course section. In ministrative policies, rules, standards, and practices of the Site. In account the student and the Site mary authority for all activities of the Student at the Site). It is structor should any problem or change occur in the relation to the Student, Site, or
<ol> <li>To provide the site supervisor's resume or curriculum vita University.</li> <li>To provide opportunities for the student to engage in a var Placement Activity Proposal and for evaluating the Student'</li> <li>To provide the student with adequate work space, teleph fieldwork placement;</li> <li>To provide regular supervisory contact that involves evaluations for each quarter.</li> <li>To complete and submit regular written evaluations of the 7. To respond to the Faculty Instructor's email and/or phone</li> </ol>	a supervision experience and training, time, and commitment to train the learner. The earner composed in the supervision to meet the competencies as outlined in the superformance.  Some office supplies, and staff to conduct professional activities appropriate to the suation of the Student's work to meet the minimum number of required supervision as student on the evaluation forms provided to the Site by Albany State University. The calls on an every-other-week basis to consult about the learner's progress. The contract, including dates, hours, supervision, etc.
Please check one of the following:	
The Fieldwork Site is NOT the learner's regular p	place of employment.
will be substantially different from their regular paid employe	of employment. Please attach a description of how the learner's supervisor and duties ment (population, presenting issues, etc.). This description should be signed by the e application packet. If the fieldwork site is the learner's current place of isor sign below.
Employment Supervisor's Name:	Signature
By signing below, I agree to the above agreement:	
Site Supervisor signature Date	Albany State University Student signature Date