SCHOOL COUNSELING
Master of Education
Practicum/Internship
Handbook

COUNSELING AND PSYCHOLOGICAL SERVICES
COLLEGE OF EDUCATION
GEORGIA STATE UNIVERSITY

Fall 2012/Spring 2013 Practicum-Internship Sequence
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IMPORTANT DEADLINES

TUESDAY, OCTOBER 18, 2011
Mandatory Practicum/Internship Orientation. All students planning to begin practicum in Fall 2012 MUST attend this meeting. Time/place to be announced on the following website: http://education.gsu.edu/cps/4983.html

MONDAY, NOVEMBER 14, 2011
Current School Counseling Students must turn in the Application for Practicum CPS 7661 & Internship CPS 7681 to Annette Johnson in room 950 College of Education. If you need to fax it, the fax number is 404-413-8013.

JULY 1, 2012
Your proof of student liability insurance must be turned in to Annette Johnson in Room 950 College of Education by July 1, 2012. Liability insurance can be purchased from ACA or APA. If the site you have selected requires drug screening or criminal background checks, this documentation should also be completed by July 1, 2012. ALL STUDENTS MUST CARRY INDIVIDUAL LIABILITY INSURANCE.

PREREQUISITES FOR ELEMENTARY/MIDDLE STUDENTS
Summer 2010 Entry: CPS 6020, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, and CPS 8400
CPS 7550 will be taken concurrently with CPS 7661

Summer 2009 Entry: CPS 6020, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, and CPS 8400
CPS 7550 will be taken concurrently with CPS 7661

Summer 2008 Entry: CPS 6020, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, and CPS 8400
CPS 7550 will be taken concurrently with CPS 7661

Summer 2007 Entry: CPS 6020, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, and CPS 8400
CPS 7550 will be taken concurrently with CPS 7661

Summer 2006 Entry: CPS 6020, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, and CPS 8400
CPS 7550 will be taken concurrently with CPS 7661

PREREQUISITES FOR SECONDARY STUDENTS
Summer 2010 Entry: CPS 6030, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, and CPS 7500. CPS 7550 will be taken concurrently with CPS 7661

Summer 2009 Entry: CPS 6030, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, and CPS 7500. CPS 7550 will be taken concurrently with CPS 7661

Summer 2008 Entry: CPS 6030, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, and CPS 7500. CPS 7550 will be taken concurrently with CPS 7661

Summer 2007 Entry: CPS 6030, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, and CPS 7500. CPS 7550 will be taken concurrently with CPS 7661

Summer 2006 Entry: CPS 6030, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, and CPS 7500. CPS 7550 will be taken concurrently with CPS 7661
GUIDELINES: PRACTICUM & INTERNSHIP

PREREQUISITES AND DEPARTMENTAL APPLICATION

1. The school counseling practicum/internship sequence begins only in fall semester of the second year of the school counseling program. This procedure applies to new students to the Master of Education program, initial certification (non-degree) students, and current CPS students.

2. Students must attend the practicum/internship workshop before turning in the practicum application. The practicum/internship workshops are normally held in October or November. Please check the bulletin boards and website for workshop announcements.

3. The application for practicum/internship must be submitted by the third Monday in November. (See Appendix A for sample)

   You need not submit another application for the second semester in the practicum/internship sequence. Enrollment and completion of the first semester of CPS 7661 ensures you the ability to enroll in the next semester of internship, CPS 7681.

4. Notification of placement will be mailed to you by the Office of Academic Assistance in the College of Education. Included in this letter will be information on getting authorization to enter the course. Students must receive course authorizations prior to registering for CPS 7661 and CPS 7681; authorization is required prior to registering for CPS 7661. Authorization will be available to students on a first-come, first-served basis. Students can find authorization forms in room 950 in the bookcase.

5. Special note: If you have applied or registered for CPS 7661, but later decide not to enter the course for that particular semester, it is important that you fill out the Practicum Postponement form (see Appendix A for sample) and return it to the department. Be sure to advise the instructor of the section in which you are enrolled as well.

6. Practicum and internship must be completed during two consecutive semesters.

PLACEMENT INFORMATION

1. Students are asked to follow the guidelines of the system to which they are applying. Each student will be assigned a school by the County Placement Office. If students have any questions, they are encouraged to contact Dr. Dixon, the School Counseling Program Coordinator.

2. Students will not be assigned to a school that their children attend and/or in which a family member works.

3. Students who are teachers in DeKalb County and Fulton County are not permitted to complete their practicum and internships in that county while employed as a full-time teacher. THIS IS A DEKALB AND FULTON COUNTY POLICY, AND IT IS NOT NEGOTIABLE. You must plan to complete your field experience by taking a leave of absence in DeKalb County and/or Fulton County.

4. Students may not change placements for any reason without prior approval from Dr. Dixon, the School Counseling Program Coordinator.
SITE SUPERVISOR GUIDELINES

Approval of sites will depend on the availability of a qualified on-site supervisor. The on-site supervisor must be a certified school counselor in Georgia with at least three years of experience as a school counselor.

1. The on-site supervisor should schedule a planning and supervision conference each week with the intern to discuss various aspects of his/her work and make suggestions and recommendations relative to intern's progress. At least one (1) hour of on-site supervision should be provided each week.

2. The on-site supervisor should also provide an opportunity for the student to observe him/her in his/her work with students, teachers, and parents.

3. The on-site supervisor should observe the student in a number of settings such as teacher/parent conferences and working with students.

4. At the conclusion of each semester the on-site supervisor will complete a School Counselor Intern Evaluation Form related to the intern's progress and will discuss the evaluation with the student.

5. Students will evaluate the site and site supervisor at the end of the Internship I in Fall 2011 and Internship II in Spring 2012. (See Appendix C).

CPS 7661 APPLIED PRACTICE I/ PRACTICUM (FIRST 10 WEEKS OF THE FALL 2012 SEMESTER)

1. The program requires students to complete a 10 week supervised practicum experience. Students are expected to spend 250 clock hours (40 hours of which must be DIRECT service) on site during the first 10 weeks of the Fall 2012 semester. The practicum provides for the development of teacher/parent consultation, classroom guidance, psychoeducational activities, individual counseling, group counseling, and the administration of general guidance services. ALL students must maintain a LiveText account in order to be enrolled in CPS 7661. An overview of the practicum requirements includes the following:

   a) A minimum of 3 parents conferences and/or psychoeducational consultations such as STEP, etc.
   b) A minimum of 3 teacher consultations and/or psychoeducational consultations based on STEP, etc.
   c) A minimum of 7 classroom guidance sessions on such topics as affective education, career exploration, drug education, etc. (ONE classroom guidance lesson Unit [3 lessons] must be completed by the end of the Practicum).
   d) A minimum of 7 individual student counseling sessions.
   e) A minimum of 5 small group counseling sessions.
   f) Audio and/or videotapes of the intern’s interactions with students, parents, teachers, etc., for use in supervision.
   g) Students will keep a Microsoft Excel log outlining activities (will be emailed to you and/or posted on LiveText).
   h) A minimum of one (1) hour per week of individual supervision on site.
   i) A minimum of one (1) hour per week of individual supervision with the practicum instructor.
   j) A one hour and 40 minutes per week of supervision group with other students.
   k) An evaluation of the intern’s performance throughout the practicum including a formal evaluation at the completion of the practicum (See Appendix C).
CPS 7681 INTERNSHIP I (FALL 2012 SEMESTER MINI-INTERNSHIP; 5 WEEKS)

1. The program requires students to complete a 5-week supervised Internship I of 100 clock hours (50 hours of which must be DIRECT service) that is begun after successful completion of the student's 250 hour practicum. ALL students must maintain a LiveText account in order to be enrolled in CPS 7681 Internship I. The student's Internship I includes the following:
   a) A minimum of 4 parent consultations and/or psychoeducational consultations such as STEP, etc.
   b) A minimum of 4 teacher consultations and/or psychoeducational consultations based on STEP, etc.
   c) A minimum of 8 classroom guidance sessions on such topics as affective education, career exploration, drug education, etc.
   d) A minimum of 8 individual student counseling sessions by the end of the Fall 2012 semester.
   e) A minimum of 10 small group counseling sessions by the end of the Fall 2012 semester.
   f) Audio and/or videotapes of the intern’s interactions with students, parents, teachers, etc., for use in supervision.
   g) Students will keep a Microsoft Excel log outlining activities (will be emailed to you and/or posted on LiveText).
   h) A minimum of one (1) hour per week of individual supervision, throughout the internship provided by the on-site supervisor.
   i) A one hour and 40 minutes per week of supervision group with other students.
   j) A formal evaluation of the intern’s performance during the Internship I and intern’s evaluation of his/her Site (See Appendix C).

CPS 7681 INTERNSHIP II (SPRING 2013 SEMESTER FULL INTERNSHIP)

1. The program requires students to complete a 5-week supervised Internship I of 500 clock hours (190 hours of which must be DIRECT service) that is begun after successful completion of the student's 250 hour practicum and 100 hour Internship I. ALL students must maintain a LiveText account in order to be enrolled in CPS 7681 Internship II. The student's Internship II includes the following:
   a) A minimum of 8 parent consultations and/or psychoeducational consultations such as STEP, etc.
   b) A minimum of 8 teacher consultations and/or psychoeducational consultations based on STEP, etc.
   c) A minimum of 15 classroom guidance sessions on such topics as affective education, career exploration, drug education, etc.
   d) A minimum of 15 individual student counseling sessions by the end of the Spring 2013 semester.
   e) A minimum of 15 small group counseling sessions by the end of the Spring 2013 semester.
   f) Audio and/or videotapes of the student's interactions with students, parents, teachers, etc., for use in supervision.
   g) Students will keep a Microsoft Excel log outlining activities (will be emailed to you and/or posted on LiveText).
   h) A minimum of one (1) hour per week of individual supervision, throughout the internship provided by the on-site supervisor.
   i) A one hour and 40 minutes per week of supervision group with other students.
   j) A formal evaluation of the intern’s performance during the Internship II and intern’s evaluation of his/her Site (See Appendix C).

LICENSURE

1. Students planning to pursue licensure as a professional counselor will want to familiarize themselves with the requirements and also begin documenting their training, supervision, and clinical experience. 
   Note: It is in students’ best interests to keep all GSU graduate bulletins and all course syllabi.

2. Students seeking further information are encouraged to contact the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists at 912-207-1670 or 1678.

3. Applying to take the National Counselor Exam (NCE) when it is offered at GSU during the spring semester is in the student’s best interest.
STUDENT RESPONSIBILITIES

Program Requirements

1. All students are expected to purchase Student Liability Insurance before beginning the practicum/internship sequence. Liability insurance is available from ACA and ASCA. Applications are available in 950 COE or by calling ACA at (800) 347-6647/ext. 284 or ASCA at (800) 306-4722. Information is available via ACA (www.counseling.org) and ASCA (www.schoolcounselor.org) web pages. A copy of the student's insurance policy should be submitted to Annette Johnson (Room 950) no later than July 1, 2012 before beginning practicum. Your insurance must cover you for the entire time of your internship sequence. A copy of your insurance policy, this handbook and the practicum syllabus should be given to the site supervisor prior to the student's first day at the site.

2. All school counseling students must pass the School Counseling GACE II Certification Test administered by the State of Georgia as required by Rule 502-2-.08 of the Georgia Professional Standards for Teacher Certification. Students must complete this requirement prior to graduation, because this certification test is your graduation exit exam for the CPS department. A copy of the GACE II results must be submitted to Dr. Dixon to fulfill the graduation exit exam requirement.

Miscellaneous

1. Even though students are offering counseling assistance to their respective schools, they are guests of that school and have been invited to learn about the practical aspect of school counseling. This is also a time to become familiar with their role as a professional.

2. The school may require more of a student than the practicum/internship requires. Students should be clear on organizational expectations. Any problem with these expectations should be discussed with the student's site supervisor and CPS instructor. Students are strongly encouraged to talk with their assigned site supervisor BEFORE THE SCHOOL YEAR BEGINS to determine and work out potential problems.

3. In addition to training requirements, students will want to become familiar with the general policies and procedures of their school. Such information may include but not be limited to:
   a) General operational procedure, required paperwork, dress code.
   b) Procedures for handling emergency situations with clients (i.e. suicide risk, psychotic episode, etc.).
   c) The availability of on-call consultation/back-up.
   d) Procedures for referrals outside your school and those resources typically used.
   e) Opportunities available for use of assessment instruments, computers, professional literature, and research.

4. When in doubt - ask. Interns should remember that they are students and new to the school. As such, they are not expected to know everything. Students are encouraged to utilize on-site conflicts and problems as learning experiences, keeping in mind that they are there with the permission of the school.

5. Criminal Background Check
   All students must have a criminal background check as required by the College of Education.

Tips for the New Professional School Counselor

Transitioning to the role of a professional school counselor can be both exciting and anxiety provoking. The practicum/internship experience offers students the opportunity to begin applying the knowledge gained through readings and coursework. It is natural for beginning counselors to experience insecurities related to their skill level and potential clients. Students should remember the intent of their role and make use of the suggestions and guidance that their supervisor can provide.
Ethical and Legal Guidelines

1. The *Ethical Standards for School Counseling* published by the American School Counselor Association (ASCA) and the *ACA Code of Ethics* published by American Counseling Association (ACA) are available from the practicum/internship instructor or online at ASCA (www.schoolcounselor.org) or ACA (www.counseling.org).


SUPERVISION

Purpose:

1. The practicum/internship experience, the actual development and application of clinical skills, is central to the education of professional school counselors. The supervision process is an integral part of this experience as it provides the opportunity to hone skills, explore new possibilities, receive feedback, and build one's repertoire and confidence as a professional school counselor.

2. Each student should be prepared to effectively use supervision time, both on-site and at the University.

3. Each counseling session and tape should be thoroughly previewed by the student, with notes reflecting important content and appropriate sections of the tape.

4. The practicum/internship supervisor has the authority and responsibility to withdraw a student from a practicum/internship experience if the student's performance constitutes a detriment to the students or parents at the school. If such a removal is necessary, the student will be given a “U” for the semester.

Taping:

1. The use of audio taping (as well as videotaping and live supervision when available) provides a rich source of feedback and opportunity to reflect on issues and dynamics arising during a counseling interview.

2. Audio recordings of counseling sessions are required for supervision. An example of a permission letter for taping is at the end of this section.

3. In order to maximize the quality of supervision, clear and audible audio recordings are essential.

Confidentiality:

1. One of the most important aspects of counseling is ethical confidentiality. It is also essential in building trust with clients. There are several aspects of confidentiality which students need to be especially aware:

   a) Students should know their school's regulations regarding confidentiality of case notes, files, and audio taping.
   b) Audio recording is an important aspect of supervision. It is students' responsibility to obtain written parental permission to tape individuals and group counseling sessions. (See Appendix C for sample). Students must also explain the limits of confidentiality to clients and parents if this is not provided in writing by the school. Students should let students and parents know who else will be hearing the audio tape (i.e., supervisor/class) and for what purpose.
   c) As a professional, any information shared in class is to be kept confidential by all class members.
   d) The client's full name should not be used on any forms. Forms can be identified for use by labeling it with the client's initials.

2. The importance of confidentiality cannot be stressed enough. Students should be extremely careful with their audio recordings and safeguard against loss or others having access to them.
Critical Clinical Issues:

Critical issues listed below should be handled by immediate consultation with the on-site supervisor. Faculty supervisors can also serve as a second consultant on these issues.

a) Suicide information, risk assessment, and suicide contracting.
b) Information regarding threat of harm to others, including Tarasoff decision and guidelines for handling such students.
c) Child abuse and neglect information - definition, recognition, and reporting.
EXAMPLE

PERMISSION STATEMENT FOR TAPE RECORDING *

Dear ______________________:

I am presently a school counselor trainee in the School Counseling program at Georgia State University and am completing my practicum at ____________________________ (school name) this semester. I will be supervised by Dr. Andrea Dixon, a faculty member at Georgia State University and by ____________________________, my on-site supervisor at your child’s school. In order to fulfill the requirements for this master’s degree, I need to video and/or audio tape my sessions with students whenever possible. The purpose of these recordings is to allow my supervisors to help me improve my counseling skills and techniques. The recordings are strictly confidential.* Although these recordings may be reviewed/viewed by other school counselor trainees for training purposes, no last names will be used, and the recordings will be erased as soon as my supervisors have reviewed them.

I am requesting your permission to video and/or audio-tape my sessions with your son or daughter. Please sign below to give your consent and permission. My Georgia State University supervisor’s contact information is here for your information: (Dr. Andrea Dixon, 404-413-8201; dixon@gsu.edu).

Sincerely,

__________________________________
Counselor Trainee’s Name
Counseling Department
Happy High School

*The audio recording itself is confidential. However, counselors are required by law to report suspected child abuse and/or neglect. Counselors must also report to parents/guardians any concern that a student might harm him/herself. If there is a concern that a student could harm others, parents/guardians and school officials must be notified, as well as the potential victim(s) if identified.

__________________________________
Site Supervisor’s Signature: _____________________________ Date: __________________

Parent’s/Guardian’s Signature: _____________________________ Date: _________________

Counselor Trainee’s Signature: _____________________________ Date: _________________
SCHOOL COUNSELING
APPLICATION FOR PRACTICUM CPS 7661 & INTERNSHIP CPS 7681

Name:_____________________________________Student ID Number:

___________________________

Address:____________________________________

Home Phone: ( )______________________________ Business Phone: (   )

______________________________

E-Mail Address:_________________________________

IMPORTANT
All School Counseling students will begin practicum in Fall semester 2012; Internship I will begin during the last 5 weeks of the fall semester; and Internship II will begin in the Spring 2013 semester.

November 14, 2011: Application deadline for the practicum and internship sequence. Please turn application in to Annette Johnson.

1. Please indicate if you hold a teaching certificate: ___Yes ___No ___ State

2. If you are presently teaching or working in a school, please indicate the name of the school.

3. Please indicate which semester and year you plan to graduate.

4. Which program are you in (circle one): Elementary   Middle   Secondary

5. What systems are you interested in for placement?
a. ________________________b.______________________c._________________________

6. Please indicate the semester/year in which the prerequisite courses were taken and the grade earned: (Attach an unofficial transcript)

ELEMENTARY/MIDDLE SCHOOL COUNSELING
CPS 6020 ___________ CPS 6150 __________ CPS 6410 __________ 
CPS 6450 ___________ CPS 7260 __________ CPS 7300 __________ 
CPS 7340 ___________ CPS 7500 __________ CPS 8400 ___________

SECONDARY SCHOOL COUNSELING:
CPS 6030 ___________ CPS 6150 __________ CPS 6410 __________ 
CPS 6450 ___________ CPS 7260 __________ CPS 7300 __________ 
CPS 7340 ___________ CPS 7500 __________
* I have been admitted to the school counseling program and am eligible to begin practicum/internship in Fall 2012.

* I have read the information in the practicum/internship handbook for School Counseling. Any questions about the contents have been answered by the CPS Graduate Advisor or by a School Counseling Program faculty member.

* I understand that if I am qualified and accepted to begin the practicum/internship sequence, I will do so during the semester for which I applied. Should my plans change for any reason, I will immediately notify the CPS academic advisor and submit a Practicum Postponement form.

* I agree to purchase liability insurance for my two semesters of field based experience and to complete a Criminal Background Check as required by the College of Education.

Student Signature: _______________________________ Date: __________________

The above named student attended the School Counseling Practicum/Internship Workshop.

Advisor’s Signature: _______________________________ Date: __________________

Please consult the School Counseling Handbook before completing this application. Completed applications should be returned to Annette Johnson in room 950 COE by November 14, 2011.
PRACTICUM POSTPONEMENT FORM

Name: ____________________________________________________________________________________

Student Panther ID Number: __________________________________________________________________

Address: __________________________________________________________________________________

City: __________________________ State: __________________________ Zip: __________________________

Home Phone: (_______)________________________ Business Phone: (_______)____________________

E-Mail Address: __________________________________________________________________________

I am in the __________________counseling program and am requesting to postpone my practicum/internship from
_________________________semester to __________________________semester. I need to do this because

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

I realize that this may result in my not being able to start practicum the semester I have requested.

Signature: ___________________________________________ Date: __________________________

Faculty Advisor’s Signature: ___________________________________________ Date: ________________

Academic Advisor’s Signature: ___________________________________________ Date: ________________

School Counseling Program Coordinator’s Signature: __________________________ Date: ________________

Please complete this form, and then make an appointment with the academic advisor so you can make plans for future semesters.
CPS 7661/7681 Tape Summary Form

Your Name: ________________________________________  Date: _______________________________________  

Student Initials: ___________________  Session Length: _________  Session Number with Student: ________  

Rate Your Performance in this Session:  1  2  3  4  5  6  7  8  9  10  Please explain your reason for this ranking.

__________________________________________________________________________ _______________________

1. Type of Intervention:       IND   CG   SG   PC   TC

2. Date of Intervention: ________________________________

3. Child Discussed (Age, gender, no names):
_____________________________________________________________________

4. Reason for Intervention: ________________________________________________

5. Summary (Including interventions suggested and follow up information such as who is responsible for what):
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

6. School Counselor’s Strengths:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

7. Something to Work on Next Time:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

8. Plan for Follow up with Student, Teacher(s), or Parent/Guardian:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Questions for feedback from your peers and supervisor…
__________________________________________________________________________

❖  Note: Be sure to address each item; do not leave blanks.
Individual Counseling Notes

Student (use initials): ___________  Grade Level: _________  Session Number with Student: ____________

Date: ___________________  Initial Session _____  Follow Up _____  Session Length: ___________

Focus of Session (2):     PERSONAL/SOCIAL   ACADEMIC   CAREER

Presenting Concern(s):
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________

Goal of Misbehavior:  ATTENTION   POWER   REVENGE   WITHDRAWAL

Interventions (2):
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________

Encouragement Strategies:     CONNECT   CAPABLE   CONTRIBUTE
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________

___ Referral Made (1) ____________________________________________________________
___ Potential Future Referral (1) ________________________________________________

Follow Up Plan (Minimum of two ideas/suggestions/strategies) (2):
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________

As a School Counselor-in-Training, I learned (thoughts and feelings):
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________

Questions for feedback from your peers and supervisor…
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________

✓ Note: Be sure to address each item; do not leave blanks.
**Consultation Notes**

<table>
<thead>
<tr>
<th>_____ Parent</th>
<th>_____ Teacher</th>
<th>_____ Other</th>
</tr>
</thead>
</table>

Consultee’s Name: ___________________________ Date: ________________

Focus of Consultation (2): PERSONAL/SOCIAL  ACADEMIC  CAREER

Goal of Misbehavior: ATTENTION  POWER  REVENGE  WITHDRAWAL

Intervention Suggestions (*Minimum of two*) (2):

Encouragement Strategies: CONNECT  CAPABLE  CONTRIBUTE

Referral(s) Made (1):

Potential Future Referral (1):

Follow Up Plan (*Minimum of two ideas/suggestions/strategies*) (2):

As a School Counselor-in-Training, I learned (thoughts and feelings):

Questions for feedback from your peers and supervisor…

- Note: Be sure to address each item; do not leave blanks
Group Counseling and Classroom Guidance Lesson Notes

<table>
<thead>
<tr>
<th>Small Group</th>
<th>Topic&gt;Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom Guidance</td>
<td>Teacher: _______________________ Date: ______________________</td>
</tr>
</tbody>
</table>

Grade Level: ______________ Number of Students Present: ______________

Georgia Performance Standards:

<table>
<thead>
<tr>
<th>ASCA National Model Domain (1):</th>
<th>Academic</th>
<th>Personal/Social</th>
<th>Career</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASCA National Model Standard (1):</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
</tbody>
</table>

Competencies (2):

Objectives (2):

Activities:

Resources/Materials Used:

Assessment/Evaluation Used (2):

Assessment/Evaluation Results:

As a School Counselor-in-Training, I learned (thoughts and feelings):

Questions for feedback from your peers and supervisor…

Note: Be sure to address each item; do not leave blanks.
SCHOOL COUNSELOR INTERN EVALUATION FORM
CPS 7661/7681

DATE____________________

Name of counseling practicum/intern student: ____________________________________________

Address: ____________________________________________________________

City: __________________________ State: __________________________ Zip: _______________________

Home Phone: (____) ______________________ Cell Phone: (____) ______________________

Name of University: ____________________________________________________________

On-site Supervisor: ________________________________________________________________

School Address: ________________________________________________________________

City: __________________________ State: __________________________ Zip: ______________________

Phone number: (____) ______________________

University Supervisor: ____________________________________________________________

University Address: ______________________________________________________________

City: __________________________ State: __________________________ Zip: ______________________

Phone Number: (____) ______________________

**Scoring Rubric**

<table>
<thead>
<tr>
<th>Not Introduced/Not Assessed:</th>
<th>The practicum student has not been introduced to this standard/disposition at this time in the program, or this standard/disposition has not been assessed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Demonstrated:</td>
<td>The practicum student does not demonstrate a basic level of knowledge, performance or other professional skill on this standard.</td>
</tr>
<tr>
<td>Novice, with Support:</td>
<td>The practicum student demonstrates the basic knowledge and skill needed to achieve this standard, but only with support from others.</td>
</tr>
<tr>
<td>Novice, Independent:</td>
<td>The practicum student demonstrates the basic knowledge and skill needed to achieve this standard through independent and autonomous planning and action. (aka first year counselor)</td>
</tr>
<tr>
<td>Intermediate:</td>
<td>The practicum student demonstrates the intermediate knowledge and skill needed to achieve this standard through independent and autonomous planning and action. (aka beyond first year counselor)</td>
</tr>
<tr>
<td>Advanced:</td>
<td>The practicum student demonstrates exemplary levels of knowledge and skill on this standard through independent, effective, and innovative planning and action. (aka seasoned counselor)</td>
</tr>
</tbody>
</table>
**AREA 1: Professional Identity, Dispositions & Behaviors**

<table>
<thead>
<tr>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knows &amp; applies knowledge of history, philosophy, and current trends in school counseling to guide his/her professional behavior during practicum/internship placement</td>
<td></td>
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<tr>
<td>Knows roles, functions, settings, and professional identity of the school counselor in relation to the roles of other professional and support personnel in the school</td>
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<tr>
<td>Understands ethical and legal considerations related specifically to the practice of school counseling</td>
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<tr>
<td>Applies ethical and legal principals in all aspects of their role as a school counseling intern (i.e. confidentiality, reporting of abuse)</td>
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<tr>
<td>Respects the privacy of students, teachers, and parents/guardians and the confidentiality of information</td>
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<tr>
<td>Presents in a professional manner (i.e., attire, grooming, interactions)</td>
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<tr>
<td>Exhibits initiative, industry, &amp; effort</td>
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<tr>
<td>Demonstrates organizational skills with priorities and documentation</td>
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<tr>
<td>Completes assignments and tasks promptly and accurately</td>
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<tr>
<td>Uses appropriate verbal/written communication skills</td>
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<tr>
<td>Complies with system school mandates</td>
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<tr>
<td>Demonstrates use of good judgment</td>
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<tr>
<td>Promotes positive school climate</td>
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<tr>
<td>Interacts effectively with students</td>
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<tr>
<td>Interacts effectively with parents</td>
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<tr>
<td>Interacts effectively with colleagues (teachers, administrators, paraprofessionals)</td>
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<tr>
<td>Interacts effectively with supervisor by asking for supervision when needed and makes appropriate referrals to school-based &amp; non-school-based resources</td>
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<tr>
<td>Accepts and learns from feedback</td>
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</tbody>
</table>

**Overall Area 1 Rating**

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**AREA 2: Assessment, Intentionality, Program Development & Evaluation**

<table>
<thead>
<tr>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
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22
<table>
<thead>
<tr>
<th>Understands methods of planning, developing, implementing, monitoring, and evaluating comprehensive developmental counseling programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effectively plans, develops, implements, monitors, and evaluates the elements of a comprehensive developmental counseling program</td>
</tr>
<tr>
<td>Understands the needs of individuals at various developmental levels</td>
</tr>
<tr>
<td>Uses knowledge of human growth and development to create counseling activities that are appropriate to the developmental level of students</td>
</tr>
<tr>
<td>Understands career development and related life factors</td>
</tr>
<tr>
<td>Uses knowledge of career development when working with students</td>
</tr>
<tr>
<td>Understands individual and group approaches to assessment and program evaluation</td>
</tr>
<tr>
<td>Effectively evaluates students’ progress in school counseling program</td>
</tr>
<tr>
<td>Understands relevant research methods, statistical analysis, needs assessment, and program evaluation</td>
</tr>
<tr>
<td>Effectively assesses student needs to design school counseling program interventions and uses appropriate program evaluation methods</td>
</tr>
<tr>
<td>Understands how to use student outcome data in order to facilitate academic, personal/social, and career preparedness success</td>
</tr>
<tr>
<td>Effectively uses student outcome data in order to facilitate academic, personal/social, and career preparedness success</td>
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</tbody>
</table>

**Overall Area 2 Rating**
### AREA 3: Cultural Awareness, Advocacy, and Leadership

<table>
<thead>
<tr>
<th></th>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
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</thead>
<tbody>
<tr>
<td>Demonstrates the ability to articulate, model, and advocate for an appropriate school counselor identity and program</td>
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<tr>
<td>Believes all students can learn at high levels and helps all students achieve success and demonstrates a commitment to helping all students excel</td>
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<tr>
<td>Appreciates and values human diversity</td>
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<tr>
<td>Shows respect for students’ varied talents and perspectives by designing and implementing prevention and intervention plans related to the effects of (a) atypical growth and development, (b) health and wellness, (c) language, (d) ability level, (e) multicultural issues, and (f) factors of resiliency on student learning and development</td>
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<tr>
<td>Respects students as individuals with differing personal and family backgrounds with different skills, talents, and interests</td>
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<tr>
<td>Is sensitive to school, community, and cultural norms</td>
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<tr>
<td>Effectively makes students feel valued for the potential as people and helps them learn to value each other</td>
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<tr>
<td>Understands the counselor’s role in social justice, advocacy, and conflict resolution</td>
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<tr>
<td>Is culturally self-aware and understands the impact of biases, prejudices, processes of intentional and unintentional oppression and discrimination on the student’s academic, personal/social, and career development</td>
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<tr>
<td>Effectively uses knowledge of culture, advocacy, and social justice to create academic, personal/social, and career development programs that meet the needs of the diverse population</td>
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</table>

**Overall Area 3 Rating**
**AREA 4: Individual Counseling**

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<tr>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
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</thead>
<tbody>
<tr>
<td>Understands counseling theories that related to the school setting</td>
<td></td>
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<tr>
<td>Uses a consistent model to conceptualize student concerns and selects appropriate counseling interventions</td>
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<tr>
<td>Structures the individual interview</td>
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<tr>
<td>Establishes/maintains open and honest communication</td>
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<tr>
<td>Responds empathetically</td>
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<tr>
<td>Uses appropriate questioning techniques</td>
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<tr>
<td>Reflects content</td>
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<tr>
<td>Allows silence when appropriate</td>
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<tr>
<td>Identifies and discloses goal of misbehavior</td>
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<tr>
<td>Offers alternatives when appropriate</td>
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<tr>
<td>Summarizes</td>
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<tr>
<td>Uses appropriate closure techniques</td>
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<tr>
<td>Uses individual counseling approaches to promote school success through academic development</td>
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<tr>
<td>Uses individual counseling approaches to promote school success through career development</td>
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<tr>
<td>Uses individual counseling approaches to promote school success through personal/social development</td>
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<tr>
<td>Demonstrates the ability to use procedures for assessing and managing suicide risk.</td>
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</table>

**Overall Area 4 Rating**
## AREA 5: Small Group Counseling

<table>
<thead>
<tr>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understands both the theoretical and experiential aspects of group purpose, development, dynamics, counseling theories, group counseling methods and skills, and other group approaches</td>
<td></td>
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<tr>
<td>Use of small group counseling approaches is appropriate for students with whom s/he works</td>
<td></td>
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<tr>
<td>Uses group process observations within group setting to facilitate student growth and development</td>
<td></td>
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<tr>
<td>Uses a consistent theoretical model or approach when planning group strategies to facilitate student growth and development</td>
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<tr>
<td>Effectively structures group sessions</td>
<td></td>
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<tr>
<td>Facilitates the establishment of group norms/clear ground rules and consequences</td>
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<tr>
<td>Maintains an open/relaxed atmosphere</td>
<td></td>
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<tr>
<td>Reflects content and feelings of group members</td>
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<tr>
<td>Invites and/or encourages all group members to participate</td>
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<tr>
<td>Uses appropriate summary techniques and closes group sessions effectively</td>
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<tr>
<td>Effectively terminates group experience</td>
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<tr>
<td>Utilizes small group approaches to promote academic success</td>
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<tr>
<td>Utilizes small group approaches to promote career development</td>
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<tr>
<td>Utilizes small group approaches to promote personal/social development</td>
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</tbody>
</table>

**Overall Area 5 Rating**
## AREA 6: Classroom Guidance Planning, Implementation, & Evaluation

<table>
<thead>
<tr>
<th></th>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
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</thead>
<tbody>
<tr>
<td>Uses needs assessment data to develop classroom guidance lessons/units</td>
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<tr>
<td>Clearly defines session goals</td>
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<tr>
<td>Effectively structures the group</td>
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<tr>
<td>Uses age appropriate activities and materials</td>
<td></td>
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<tr>
<td>Uses variety of activities to achieve lesson goals</td>
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<tr>
<td>Keeps group on task</td>
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<tr>
<td>Uses effective classroom management skills</td>
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<tr>
<td>Paces lesson according to students needs</td>
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<tr>
<td>Effectively processes activities to enhance student learning and development</td>
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<tr>
<td>Uses appropriate summary/closure techniques</td>
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<tr>
<td>Utilizes classroom guidance to promote academic success</td>
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<tr>
<td>Utilizes classroom guidance to promote career development</td>
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<tr>
<td>Utilizes classroom guidance to promote personal/social development</td>
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<tr>
<td>Implements strategies and activities to prepare students for home-to-school, school-to-school, and school-to-work transitions and for a full range of postsecondary options and opportunities</td>
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**Overall Area 6 Rating**
### AREA 7: Consultation and Collaboration

<table>
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<tr>
<th>Action</th>
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<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understands strategies and methods of working collaboratively with parents, guardians, families, communities, teachers, administrators, and other school personnel</td>
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<tr>
<td>Establishes effective working relationship with consultee(s)</td>
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<tr>
<td>Knows a general framework for understanding and practicing consultation</td>
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<tr>
<td>Effectively structures the interview</td>
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<tr>
<td>Responds empathetically</td>
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<tr>
<td>Reflects content</td>
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<tr>
<td>Gives encouragement/support</td>
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<tr>
<td>Clearly identifies goal for consultation</td>
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<tr>
<td>Defines and focuses on problem areas</td>
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<tr>
<td>Develops a plan of action or treatment strategy with consultee</td>
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<tr>
<td>Helps consultee learn to advocate for self as appropriate</td>
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<tr>
<td>Evaluates consultation outcome</td>
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<tr>
<td>Plans for follow-up session</td>
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<tr>
<td>Uses appropriate closure techniques</td>
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**Overall Area 7 Rating**

<table>
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<th>Novice, Independent</th>
<th>Intermediate</th>
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</table>
Overall School Counselor Intern Evaluation

<table>
<thead>
<tr>
<th>In need of remediation</th>
<th>Novice, w/ Support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
</table>

Please identify 3 strengths you believe will help this intern be a successful professional school counselor:

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Please identify any areas for growth or development which you believe will help this intern be a more successful professional school counselor:

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Would you recommend this person to work in your school system?

___Yes    ___Yes, with reservations    ___No

If “Yes, with reservations” or “No”, what would you need to see to feel comfortable hiring them?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Please give any other comments about this intern’s promise as a professional school counselor:

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

What grade do you recommend for this student counselor?  (Check one)

☐S – Satisfactory      ☐ IP – In Progress      ☐U - Unsatisfactory

Supervisor’s Signature: ____________________________ Date: __________

My signature indicates that I have read the report(s) presented above and have had an opportunity to discuss the material with my supervisor.

Student’s Signature: ____________________________ Date: __________
SITE EVALUATION

DIRECTIONS: Student completes this form at the end of the practicum and internship. Submit form to the university supervisor at the designated class period.

Student Name: ___________________________  Site: _______________________________
Date: ___________________________________  Site Supervisor: ______________________
Faculty Supervisor: ________________________

Rate the following questions about your site and experiences by the following scale:

A. Very Satisfactory
B. Moderately Satisfactory
C. Moderately unsatisfactory
D. Very Unsatisfactory

1) _____ Amount of on-site supervision
2) _____ Quality and usefulness of on-site supervision
3) _____ Exposure to and communication of school goals
4) _____ Exposure to and communication of school procedures
5) _____ Exposure to professional roles & functions within the school, including leadership opportunities
6) _____ Exposure to information about community resources
7) _____ Rate all applicable experiences that you had at your site:
   _____ Individual Counseling
   _____ Group Counseling
   _____ Classroom Guidance
   _____ Parent Consultation
   _____ Teacher Consultation
   _____ Career Awareness/Exploration Activities
   _____ Coordinating School-Wide Activities
   _____ Student Transition (Elem. to Middle to High School)
   _____ Advocating for School Counseling Programs/School Counselors/Students/Parents
   _____ Accountability/Program Evaluation Processes
   _____ Referral Process/SST/504/Placement Meetings
   _____ Working with Special Education Students
   _____ Tests used for Special Education Placement and their Interpretation
   _____ General Standardized Testing Procedures and Test Interpretation
   _____ DFACS Reporting
   _____ Scheduling/Time Management
   _____ Record Keeping
   _____ Graduation Requirements (High School Only)
   _____ Writing Letters of Recommendation (High School Only)
   Other: __________________________________________
8) _____ Overall evaluation of the site

COMMENTS: Include any suggestions for improvements in the experiences you have rated moderately (C) or very unsatisfactory (D). Use additional sheets if needed.
Georgia State University
Department of Counseling and Psychological Services
School Counseling Practicum/Internship Placement Contract

Intern
Name: ______________________________________ Phone: ________________________________
Address: ___________________________________________________________________________
Email: _____________________________________________________________________________
Beginning date: _________________________ Ending date: _________________________________

Name of School: _____________________________________________________________________

On-Site Supervisor
Name: ______________________________________ Phone: ________________________________
School Address: _____________________________________________________________________
Email: _____________________________________________________________________________

Field Experience Placement Requirements

1. Proposed onsite supervisor has a minimum of 3 years of school counseling experience at the level of placement (or 2 years with an Ed.S. in School Counseling that included a supervision course).
   Years of Experience as a School Counselor _____________________
   Years of Experience at the Placement Level _____________________
   Ed.S. with Supervision Training _______ Yes _________ No

2. The school can provide a confidential space where the intern is able to meet with students, parents, and teachers.
   Confirmed Location ____________________________________________

3. The onsite supervisor is able to provide 1 hour of formal administrative/clinical supervision per week for at least 14 weeks in the Fall and 14 weeks in the Spring.
   Proposed Day and Time _______________________________________

4. Any concerns or questions will be shared with the university supervisor and/or school counseling program coordinator as they arise.

Intern Signature ____________________________________________ Date __________
Onsite Supervisor Signature _________________________________ Date __________

Please staple this sheet to the top of your INTERN-SUPERVISOR MANAGEMENT AGREEMENT due during in Practicum in Fall 2012.
Georgia State University
Department of Counseling and Psychological Services
School Counseling Program

CPS 7661 & 7681 Applied Practice: School Counseling
Fall 2012-Spring 2013

Practicum/Internship Management Agreement

Practicum/Intern’s work schedule:
M _____________________________________________________
T _____________________________________________________
W _____________________________________________________
Th _____________________________________________________
F _____________________________________________________
Other days/times: (after school, weekend times, etc.)

30 Classroom Guidance Lessons (3 units: Academic, Personal/Social, & Career by May 2013)
Topic __________________________________________ Dates_________________
Topic __________________________________________ Dates_________________
Topic __________________________________________ Dates_________________
Topic __________________________________________ Dates_________________
Topic __________________________________________ Dates_________________

3 Small groups for the year (3 unique Units: academic, career, and personal/social)
Topic __________________________________________ Date_________________
Topic __________________________________________ Date_________________
Topic __________________________________________ Date_________________
Topic __________________________________________ Date_________________

15 Parent Conferences
Plan/Strategies____________________________________ Dates (if approp.)________
Plan/Strategies____________________________________ Dates (if approp.)________

15 Teacher Conferences
Plan/Strategies____________________________________ Dates (if approp.)________
Plan/Strategies__________________________________ Dates (if approp.)__________

30 Individual Sessions

Plan for caseload ____________________________________________________________

Plan/Strategy for acquiring Audio-tapes _______________________________________

Individual Supervision (weekly for the year)

Day/Time _____________________ Backup day/time __________________________

Other projects/responsibilities practicum student will be involved with (optional):

Project______________________________________ Prac Student Role_______________________

Dates _______________________________

Project______________________________________ Prac Student Role_______________________

Dates _______________________________

Project______________________________________ Prac Student Role_______________________

Dates _______________________________

Project______________________________________ Prac Student Role_______________________

Dates _______________________________

Student Signature ________________________________ Date __________

Onsite Supervisor Signature __________________________ Date __________

University Supervisor Signature ________________________ Date __________