

CLINICAL SITE AGREEMENT

**POST-MASTERS EDUCATIONAL SPECIALIST DEGREE IN
MARRIAGE AND FAMILY THERAPY**

Student Intern: _____

Current Address: _____

Home Phone: _____

Clinical Site Name: _____

Address: _____

Phone: _____

Site Supervisor Name & Title: _____

Days/Hours of Clinical Agreement: _____

Day/Time of Weekly Supervision Session: _____

Brief Description of Practicum Activities (Please see *below for examples):

INTERNSHIP

Brief Description of Activities Projected:

POLICIES, PROCEDURES AND PROFESSIONAL PRACTICE AGREEMENT

This is to confirm that the counseling activities I undertake as part of my supervised field experience of the Department of Counselor Education at The College of New Jersey, Ewing, New Jersey will be subjected to the policies, procedures and professional practices of my field site, and the rules covered in Title XVIII New Jersey Statutes if applicable.

Student Date

Field Site Supervisor Date

Faculty Supervisor Date

***Examples of Practicum and Internship Activities** that can be included above:

- 1) Collaboration with other mental health professionals
- 2) Organizational policies and procedures of the agency, including pertinent ethical and legal issues
- 3) Crisis intervention policies and procedures used at the agency
- 4) Individual and group counseling, including parenting skills training and relationship enhancement
- 5) Marriage, couple and family counseling and therapy
- 6) Case management
- 7) Initial intake procedures from a system's perspective
- 8) Culturally sensitive service and counseling modalities to serve the culturally diverse members of the community
- 9) Program design, implementation and evaluation
- 10) Consultation
- 11) Referral services
- 12) Client advocacy
- 13) Assessment of clients utilizing diagnostic tools that are appropriate for the agency
- 14) Assessment of marriage, couple, and family functioning
- 15) Documentation and record keeping
- 17) Includes a minimum of one (1) hour each week of individual supervision by the Site Supervisor

SITE SUPERVISOR RESUME

- A. Name
- B. Academic degrees held, institutions awarding the degrees, and years awarded
- C. Professional work experience
- D. Professional memberships, certifications, and/or licenses obtained or maintained in the last three years
- E. Other information specifically relative to professional competence and expertise to serve as a site supervisor
- F. Address and contact phone number

Site supervisors will receive an honorarium of \$100.00 per semester. In order for the supervisor to receive payment, you must give her or his name to the department administrative coordinator by September 15th.