ON SITE SUPERVISION AGREEMENT

The purpose of this on-site supervision is to provide the counseling intern, ____________________________________________, indicated herein with the opportunity to satisfy the Practicum/Internship requirements of the Department of Counselor Education at The College of New Jersey. As the clinical site supervisor, I agree to provide face-to-face supervision to the counseling intern and meet the following requirements.

1. Provide a one hour weekly supervision session.
2. Review a minimum of three audio- and/or videotapes of supervisee’s counseling sessions with client(s) or provide three live supervisions during the internship experience.
3. Review and discuss the supervisee’s client cases (individuals and groups).
4. Monitor the supervisee’s case load including the paperwork to ensure welfare of the clients.
5. Assist the supervisee in meeting the practicum/internship requirements described in the Clinical Manual and summarized in the Site Approval Request Form.
6. Help assist the supervisee’s professional development.
7. Support the supervisee in becoming aware of personal issues potentially impacting counselor-client relationships and encourage him/her to seek counseling when appropriate.
8. Remain physically on-site, or appoint a qualified designee (see supervisor manual) to be available for supervision if needed, when the student is seeing clients.
9. Complete formal written evaluations provided by the supervisee’s training institution.

______________________________  _______________________________
Student’s Signature              Date                          Clinical Site Supervisor’s Signature

______________________________  _______________________________
Date                          Date

Return to: Clinical Coordinator
Department of Counselor Education
The College of New Jersey
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