Dear Student:  

**INFORMATION FOR ALL FIELD PLACEMENTS:**
- Ethical Guidelines: 3
- Professional Behavior: 4
- Clinical Supervision: 4
- Evaluation: 4
- Logging Hours: 4
- Required Compliance Documents and Training: 5
- Orientation and Application: 6

**PRACTICUM OVERVIEW:**
- Practicum Application Checklist: 8

**INTERNERSHIP OVERVIEW:**
- Internship Application Checklist: 13

**PRACTICUM FORMS**
- Practicum Log 15
- Professional Development Log 16
- Summary and Cover Sheet 17
- CTPA Evaluation with definitions 18
- Auxiliary Site First Meeting Check List 19
- Site Agreement: 22
- Auxiliary Site Feedback Form 26
- Auxiliary Site Presentation Feedback Form (SC) 27
- SC Progress Report (779_781_783) 28
- Student Evaluation of Site Supervisor 29
- Handbook Receipt 30

**INTERNERSHIP FORMS**
- Internship First Meeting Checklist 37
- Site Agreement 38
- CMHC Log (778_785) 39
- CMHC Progress Report (778_785) 40
- SC Log (779_781_783) 41
- SC Progress Report (779_781_783) 42
- Summary and Cover Sheet 43
- Professional Development Log 44
- CTPA 45
- SC MO School Counselor Evaluation Procedure 46
- Group Evaluation Form 47
- Site Visit Form 48
- Student Evaluation of Site Supervisor 49
- Interim Agreement Form 50
- Consent to Record Form 51
- Handbook Receipt 52
Dear Student

Congratulations! You have reached an exciting and important time in your counseling program. The practicum and internship experience provides opportunities for counseling students to develop and practice counseling skills within the context of a supervised field site. Through these experiences, students integrate knowledge and counseling skills in your work with clients or students in clinical mental health or school settings under careful direction and supervision provided by faculty and site-supervisors.

In preparing for practicums and internships, you also have opportunities to assess areas that might be a good fit for you in your future counseling career. During this process, we encourage you to consider your interests, challenges you prefer, and how you want to best use your counseling skills.

Prior to applying for internship, exploring options for sites and site supervisors will be important. Choosing the site and supervisor that will best prepare you for your career as a counselor is vital. Consider the following questions:

1. What populations would you like to work with? Are there certain areas of the helping profession that are important to you?
2. What are you looking for in a clinical supervisor?
3. What do you hope to learn from your sites and supervisors to be as prepared as possible in your career as a counselor?

INFORMATION FOR ALL FIELD PLACEMENTS (Practicum and Internship):

The Council for Accreditation of Counseling and Related Educational Programs (CACREP) is the accrediting organization for counselor training program, including MSU. We follow the most recent CACREP standards. http://www.cacrep.org/about-cacrep/2016-cacrep-standards/

The CACREP (2016) definition of **practicum** is: “a distinctly defined, supervised clinical experience in which the student develops basic counseling skills and integrates professional knowledge. The Practicum is completed prior to entering Internship.”

Under these guidelines, a successful practicum requires a minimum of 100 total clock hours of practice, including **40 hours of direct service with actual clients** (Section 3: e, f, 2016).

The CACREP (2016) definition of **internship** is: “a distinctly defined, post-practicum, supervised clinical experience in which the student refines and enhances basic counseling or student development knowledge and skills, and integrates and authenticates professional knowledge and skills related to program objectives.”

CACREP guidelines require a minimum of **600 total clock hours** of practice, including “**240 clock hours of direct service**” (Section 3: j, k, 2016)

Students working toward Missouri School Counselor Certification will complete the same number of CACREP-required hours in school settings prescribed by the Department of Elementary and Secondary Education. *Due to the changing nature of DESE requirements, please contact the Internship Coordinator for the most current placement information.*

**Ethical Guidelines**

As a counselor trainee at MSU, in both graduate work and field placements students are agreeing to provide services most appropriate for clients while working within their scope of training and practice and to not exceed their level of training, education, and competence. Students are agreeing to engage in professional practices using ethical and professional guidelines where it is understood that they will do no harm to the client’s welfare.

Students must become familiar with the ACA Code of Ethics (CMCH) and/or the ASCA Ethical Guidelines (SC). Refer to them as a guide for ethical professional practice. Check these links regularly for updates to the codes.
American Counseling Association (ACA) Ethical Guidelines: https://www.counseling.org/knowledge-center/ethics

American School Counseling Association (ASCA) Ethical Guidelines https://www.schoolcounselor.org/About-School-Counseling/Ethical-Legal-Responsibilities

**Professional Behavior**

The primary purposes of a field placement are your continued development and application of counseling skills, and your work providing counseling to your clients in each site. You are expected to operate under the professional guidelines of the sites as well as the counseling program guidelines and expectations. This includes (but is not limited to) being punctual, dressing appropriately for the position, presenting oneself professionally, and engaging in professional verbal and written communication. As you continue the development of your professional identity, it is very important to be aware of current issues and trends. Professional behavior is evaluated informally through supervision meetings and feedback and formally at midterm and final through use of the Counselor Trainee Progress Assessments (CTPA) and in Dispositions Assessments. If you have concerns about the behavioral expectations at any site, contact the Practicum and Internship Coordinator as soon as you notice an issue.

**Clinical Supervision:**

Regular clinical supervision is part of the practicum and internship experiences. It involves an instructor/supervisor who has training and experience in supervision and one, or more, supervisees. Supervisors must have a master’s degree in counseling or related mental health discipline, must be fully licensed in their field, with two years of fully licensed/certified, post-master’s experience. School counseling supervisors must have completed 5 years of certified school counseling past the mentoring stage, per DESE requirements.

Additionally, practicum and internship clinical supervisors must attend Missouri State University’s Site Supervisor Training every three (3) years and must agree to provide supervision within the requirements of the counseling program.

Site supervisors are eligible to attend any continuing education training programs offered by the program, including those sponsored by Center City Clinic.

During practicums and internships, students participate in weekly group supervision at a minimum average of one and a half (1.5) hours per week and weekly individual/triadic supervision at a minimum average of one (1) hour per week.

Supervision sessions must occur during the entire duration of the practicums and internships and must be provided by approved supervisors. Students who are unable to participate in required individual/triadic and group supervision meetings will not be allowed to provide direct contact services until they are fully participating in supervision. Students who miss more than two weeks of practicum or internship, including supervision, will likely not pass that semester of their field placement.

**Evaluation**

Students are evaluated using multiple evaluations and will receive peer and instructor/supervisor feedback during group supervision. Students also complete self-reflective reviews, self-assessments, and journals as assigned.

Instructors and site supervisors will complete midterm and final Counselor Trainee Progress Assessments (CTPA) and dispositions assessments. School counseling interns are evaluated every semester using the DESE Missouri School Counselor Evaluation (MSCE or MEES). This document is required for certification and must be completed as directed. Additional instructions are found with the evaluation form, and on the course syllabi.

**Logging Hours**

Students are required to keep detailed records and logs of their hours and experiences including direct and indirect contact hours and professional development activities. A Summary and Cover Sheet is used to document the total hours at the end of each semester and interim period.
Samples of these logs and other documents are found in the handbook. Many instructors will provide them on Blackboard or other online formats as well.

**Required Compliance Documents and Training**

All students who participate in any field experience in the MSU College of Education, which includes the Counseling program, must **complete the following “compliances”** which include a fingerprinting background check, TB Test, and purchasing liability insurance. Purchase liability insurance which matches your “track.” The insurance links list what are the acceptable options for a student at MSU. When entering a professional career there are multiple options for insurance. While working as a student, these are the options MSU allows.

Once these “compliances” have been completed, they must be maintained and shown as “current.” They are checked monthly while you are in a field placement. If any one of these compliances lapses or is out-of-date, you are not allowed to participate in a field placement until that compliance is marked as current. Students may not register for a field placement course until these compliances are complete. If a compliance is out of date when the semester begins, you may start your placement. *If you do not understand any of this information, contact the Practicum and Internship Coordinator for clarification.*

**Compliance Documentation Requirements:**

Send the following completed requirements to the College of Education, Professional Education Services Office:

https://www.missouristate.edu/professionaled/compliance/

- **MOVECHS Fingerprinting** Information (approx. cost: $41.75)
  refer to process explained on MSU website:
  https://www.missouristate.edu/professionaled/compliance/fbi-background-check.htm

- **TB Test** (approx. cost: $25.00)
  Magers Health and Wellness Center/ SGF Campus
  https://health.missouristate.edu/treatment.htm
  Student Health Services/West Plains
  https://wp.missouristate.edu/StudentServices/professional-services.htm#Student_Health_Services

- **Liability Insurance/School Counseling**  $69
  Membership in ASCA includes Insurance
  https://www.schoolcounselor.org/

* **Liability Insurance/Clinical Mental Health Counseling**  $105
  Membership in ACA includes Insurance
  https://www.counseling.org/

**Required Training:**

Before you will be released to register for any field placement through the MSU Counseling program, you must **complete the following trainings:** (send the certificates showing completion to the Practicum and Internship Coordinator)

- **Mandated Reporter Training** $0
  www.protectmokids.com

- **Suicide Prevention/Gatekeeper Training** $30
  https://qprinstitute.com/individual-training

*Retain the certificate for the QPR Suicide Training for your records. When you apply for your LPC, you will provide this copy to indicate you have completed your first required suicide prevention training.*
Practicum and Internship Orientation and Application:

Each fall and spring semester, a mandatory orientation meeting is held for students who are eligible to enroll in a practicum or internship in the next semester. Students who attend the mandatory meeting are provided information about the application process, details about each field experience and more, and will be provided with the most current list of already-approved placements.

Students who do not attend may not be able to retain a seat in the next semester’s practicum or internship schedule.

The dates for these meetings are provided in the student newsletters, which are emailed directly to each student’s MSU email account.

Practicum and internship students must complete an online application which will open after the mandatory meeting and will remain open until the deadline set for registration. Students who do not complete an application cannot be guaranteed a spot for the upcoming semester.

PRACTICUM OVERVIEW:

Practicum courses with their prerequisites, as described in the catalog include:

**COU 777 Counseling Practicum**
Prerequisite: admission to Counseling program or certificate program; and COU 710 and COU 714 and COU 751 each with grade of B or better; and COU 711; and departmental approval for practicum.

Supervised counseling experience involving work with clients from the community addressing a wide range of mental health and/or school counseling (elementary and/or secondary level) related presenting issues, observation, discussion, and evaluation of counseling sessions

**COU 778 Mental Health Practicum**
Prerequisite: admission to Counseling program or certificate program; and COU 777 with a grade of P.
Supervised clinical mental health counseling experience of clients from the community, observation, discussion, and evaluation of counseling sessions. Graded Pass/Not Pass only.

**COU 779 School Counseling Practicum**
Prerequisite: admission to Counseling program or certificate program; and COU 777 with a grade of P.
Supervised clinical mental health counseling experience of clients from the community, observation, discussion, and evaluation of counseling sessions. Graded Pass/Not Pass only.

*COU 780 Secondary School Counseling Practicum* *Not currently offered in most cohort plans of study.*
Prerequisite: admission to Counseling program; and COU 710 and COU 714 and COU 751 each with grade of B or better; and COU 711; and department approval for practicum.
Supervised counseling with secondary school aged students and their families; observation, discussion, and evaluation of the counseling process. Graded Pass/Not Pass only.

*COU 782 Elementary School Counseling Practicum* *Not currently offered in most cohort plans of study.*
Prerequisite: admission to Counseling program; and COU 708 and COU 710 and COU 714 each with grade of B or better; and COU 711; and department approval for practicum.
Supervised counseling with elementary school-aged children and their parents; observation, discussion, and evaluation of counseling sessions. Graded Pass/Not Pass only.

*COU 784 Mental Health Counseling Practicum* *Not currently offered in most cohort plans of study.*
Prerequisite: admission to Counseling program; and COU 710 and COU 714 and COU 751 each with grade of B or better; and COU 711; and department approval for practicum.
Supervised counseling experience of clients from the community; observation, discussion, and evaluation of counseling sessions. Graded Pass/Not Pass only.
Practicum courses are “by permission only” courses. Refer to the section above: Information for All Field Placements for specific information regarding the application and registration process for practicums. Failure to complete these steps will prevent you from entering practicum at the correct time in your plan of study.

**Practicum Requirements**

**A.** 100 total hours (minimum)
1. 40 direct client/student contact hours
2. Most practicums are completed at Center City Counseling Clinic.
3. Auxiliary Site hours offered off-site if approved or required by program.
4. A minimum of 10 class meetings (10 for summer, 16 fall/spring)

**B. Logs/Documentation**
1. Weekly Client Services Log
2. Auxiliary Practicum Site Log (if needed)
3. Final Summary and Cover Sheet (every semester throughout all field placements)

**D. Evaluation**
1. Midterm Counselor Trainee Progress Assessment (CTPA)
2. Final Counselor Trainee Progress Assessment (CTPA)
3. Final Counselor Trainee Dispositions Assessments (completed by instructor)

**E. Weekly Requirements**
1. a minimum average of one (1) hour of in-person individual/triadic supervision
2. a minimum average of one and a half (1.5) hours of in-person group supervision.

**F. Attendance and participation in weekly scheduled class meetings.**
1. Missing more than 2 classes/group supervisions in a semester will prevent a Pass grade for practicum. Refer to syllabus for details.

**Practicum Auxiliary Site Information:**

Students seeking school counseling certification (K-8 and/or 7-12) who are not currently teacher certified, may be required to complete direct hours in a school site during the practicum experience.

Students should spend 4 of these auxiliary hours co-facilitating classroom guidance lessons or group sessions in schools. On-site supervisors will complete the Classroom Counseling Activity Feedback form. Students interested in completing auxiliary hours in Springfield Public Schools must notify their instructor and supervisor so that contact can be made with the Coordinator of Counseling Services to determine placement options. **Students interested in completing auxiliary hours placements in Ozark or Waynesville school districts must go through the Practicum/Internship Coordinator and should not contact these schools directly.**

The site must be pre-approved by the instructor/supervisor, approved by the Practicum/Internship Coordinator, and all required documents must be completed and submitted prior to attending the site and documenting client contact hours. Students must document direct and indirect activities at the auxiliary site.

**Center City Clinic Orientation:**

Before beginning practicum at Center City Clinic, students participate in a mandatory Clinic Orientation. This is typically held during finals week, the semester before your practicum starts. Students learn about the policies and procedures of the clinic, including documentation, clinic professionalism, and client care. The clinic director will email students directly about the meeting with dates and times.

RSVP to the meeting by emailing the following documents and information to the Clinic director:

- A copy of your current liability insurance.

Revised 03/22 amc
Your most up to date contact information (phone and email)
•Have you completed the following courses?
  COU 708 (Child Counseling and Play Therapy)
  COU 733 (Couple and Family Counseling)

Students who attend the orientation and/or who provide the required information will be assigned clients to begin their practicum. Thus, following these directions is essential to your success in practicum and to the ability of the Clinic’s clients to access care in a timely manner.

Therapy Notes:

During your clinic orientation, you will learn how to access the clinic’s electronic medical record (EMR) Therapy Notes where you will complete treatment plans, progress notes and other documentation on each of your clients every week before you leave the clinic. The clinic director will provide your log in and password. Protect this password carefully—your clients’ protected health information depends on it.

Practicum Application Checklist

_____ Meet with your advisor or the Practicum Coordinator, to verify you have completed all prerequisites and are ready to proceed to practicum.

_____ Attend the mandatory Practicum Information meeting in the semester prior to your scheduled practicum(s)

_____ Complete the required Compliance Documents and submit them to the COE Compliances Office
  _____ MOVECHS Fingerprinting Background Check
  _____ TB Test
  _____ ACA or ASCA Liability Insurance (based on track)

_____ Complete the required trainings and submit certificates to the Practicum and Internship Coordinator
  _____ Mandated Reporter Training
  _____ QPR Suicide Prevention/Gatekeeper Training

_____ Once you have been provided the releases and overrides, register for your practicum(s).

_____ Attend mandatory Clinic Orientation in the semester prior to application semester, provide required documents and information to clinic director.

_____ Provide a signed copy of the Statement of Understanding from the Practicum and Internship Handbook to your course instructor at the required clinic orientation.

_____ Memorize or carefully store your Therapy Notes log in information.

_____ Students completing a practicum off-site: Complete a Site Agreement before the second week of practicum and before completing any direct contact hours. Follow instructions on form for signatures.

INTERNERSHIP OVERVIEW

Internship courses, as described in the catalog with their prerequisites, include:

•COU 781 Secondary School Counseling Internship
  Prerequisite: admission to Counseling program; and COU 777 or COU 780 or COU 782 or COU 784; and either COU 778 or COU 779; and either ELE 302 or SEC 302; and department permission.
  Supervised experience in secondary school counseling at an approved school site. Minimum of 300 hours on-site. Students will
receive individual supervision on-site, and small-group supervision from the department. May be repeated up to 9 hours. Graded Pass/Not Pass only.

• COU 783 Elementary School Counseling Internship
  Prerequisite: admission to Counseling program; and COU 777 or COU 780 or COU 782 or COU 784; and either COU 778 or COU 779; and either ELE 302 or SEC 302; and department permission.
  Supervised experience in elementary school counseling at an approved school site. Minimum of 300 hours on-site. Students will receive individual onsite supervision, and small-group supervision from the department. May be repeated up to 9 hours. Graded Pass/Not Pass only.

• COU 785 Mental Health Counseling Internship
  Prerequisite: admission to Counseling program; and either COU 780 or COU 784; and department permission. *Prerequisites for this course also may include COU 777 or COU 782, and either COU 778 or COU 779. (*not yet in catalog)
  Supervised experiences (individual, family, group) in counseling at an approved community agency site. Minimum of 300 hours on-site. Students will receive individual supervision on-site, and small group supervision from the department. May be repeated to 9 hours. Graded Pass/Not Pass only.

**Course Requirements**

Internship courses are “by permission only” courses. Refer to the section above: Information for All Field Placements for specific information regarding the application and registration process for internships. Failure to complete these steps will prevent you from beginning or remaining in an internship.

Internships are completed in approved schools or agencies under the direction of a clinical supervisor who has completed the required MSU site supervisor training. The training is updated every three years. Supervisors must have a master’s degree in counseling or related mental health discipline, must be fully licensed in their field, with two years of fully licensed/certified, post-master’s experience. School counseling supervisors must have completed 5 years of certified school counseling past the mentoring stage, per DESE requirements.

Interns are responsible for securing an internship site. It is best to contact a minimum of two (2) potential sites prior to the application deadline to begin the application and interview process. The Internship Coordinator maintains a list of sites which have been pre-approved for placements. However, if you have a site in mind that is not on the list, contact the Internship Coordinator as soon as possible so that we can begin the process of determining if the site can be approved for you to complete your internship there.

An internship search is like a job search. Plan to have an up-to-date resume and cover letter ready. Send professional-sounding emails and be ready to interview. Even better: Contact the MSU Career Center and let them help get your documents looking good, and ready to send. They will even work on interview skills and connect students with internship prospects. This is a free service for MSU students!

**Internship Requirements**

Semester credit requirements (Two 3 credit hour semesters for a total of 6 credit hours)

A. 300 total hours (minimum) each semester (additional hours may be carried over into the second internship semester).
   1. Up to 48 hours of in-class meetings (3 hours per week x 16 weeks = 48 indirect hours)
   2. Group requirement: Interns are required to facilitate or co-facilitate one six-week group during one of the internship experiences.

C. Logs
   1. Daily Time/Task Activities Log (School Counseling Only-during MSCE weeks)
   2. Weekly Progress/Activities Log
   3. Final Summary and Cover Sheet

D. Evaluation
1. Midterm Counselor Trainee Progress Assessment (CTPA) completed by on-site supervisor
2. Final Counselor Trainee Progress Assessment (CTPA) completed by on-site supervisor
3. Final Site Supervisor Evaluation completed by intern
4. Final Counselor Trainee Dispositions Assessments completed by course instructor
5. Missouri School Counselor Evaluation (2 formative, 1 Summative) by on-site supervisor and by instructor, each semester. Required for School Counselor Certification.

Weekly Requirements

A. A minimum average of one (1) hour of in-person individual/triadic supervision by on-site supervisor
B. A minimum average of one and a half (1.5) hours of in-person group supervision by course instructor as part of the weekly scheduled class time.
C. Attendance and participation in weekly scheduled class meetings (students who miss more than two classes will not be able to get a Pass for the internship in that semester).
D. Weekly Progress Report with Daily/Weekly Activities Log

A typical week during the semester includes:

1. An average of a **minimum 15 hours** of on-site activity, including one (1) hour per week of face-to-face supervision with the on-site supervisor and experiences in enhancing counseling skills. School interns should be engaged in each of the four component areas of the Comprehensive Counseling Program.

Over the course of the **semester**, this is a minimum of **300** total hours (including 16 hours of on-site supervision) completing a variety of counseling duties and activities. (Of the 15 hours of on-site activity, interns should average 8 hours per week of direct client contact for a total of 120 for the semester (7.5 hours x 16 weeks= 120 direct contact hours). Interns may log more than 120 direct hours. Indirect activities include a variety of experiences where time is spent balancing activities that contribute to overall counselor development. *(Remember that the complete internship requirement is 600 total hours, with 240 direct hours)*

Note that averaging 8 hours of direct client contact means working with clients or students during that time. Most counselors find that to see that many clients means scheduling about twice as many. This means if you intend to see 8 clients, you will need to schedule at least 12 – 14 clients.

Interns may accumulate indirect hours throughout the semester by completing a variety of training and professional development/learning activities. This includes shadowing other counselors, attending professional development workshops or conferences, listening to podcasts, attending webinars and other activities that have been approved by the course instructor.

All interns are expected to attend staff meetings, treatment team meetings, case consultations, IEPs, parent meetings, and many other site activities, by scheduling internship hours on days when meetings and activities are held.

School interns are also expected to attend school-related activities that their site supervisor attends such as parent-teacher conferences, professional learning/development days/workshops, IEPs, 504 plan meetings, Behavior Intervention Plan meetings and other school events.

These activities should be documented in logs. Consult with course instructor to verify appropriate documentation of such activities.

**Information for ALL Interns:**

CACREP requires 600 total clock hours of internship, and 240 of those hours must be direct client service clock hours.

Interns complete a minimum of two internship courses, earning 300 hours (120 direct service hours) per semester for the total of 600 hours of internship. Some students may need to take more than two semesters to complete their internships. Interns may take up to five semesters of internship to complete their hours.
Interns may also accumulate more than 300 hours in a semester and more than 120 hours of direct client contact. In these situations, the hours accumulated over the minimum requirements may be carried over into the next semester of internship.

Some individuals may apply to take on a second internship site in effort to meet additional certification or degree requirements and should consult with the Internship Coordinator to verify processes for these types of applications.

**Information for School Counseling Interns:**

School sites within the public school system in Missouri are often already approved. If you are not sure the school you are hoping to work with is approved, contact the Internship Coordinator before beginning the application process.

Note that some school sites prefer that interns do not contact them directly, but that MSU makes the internship arrangements with them. For instance, school counseling interns should not contact the Ozark or Waynesville School Districts. If you want to intern at these districts, contact the Internship Coordinator so that they can arrange the next steps for you.

The Springfield Public Schools has specific steps to help MSU students get a placement within their schools. Follow the instructions found on the MSU Practicum and Internship page –scroll to the end of the page and follow the links and instructions. (https://education.missouristate.edu/Counseling/Internships.htm)

Missouri DESE updated their internship requirements in 2021. This information impacts all MSU school counseling interns beginning their internships in FA21 and after. Here is the most recent update information:

(The rule in its entirety may be viewed at the following website: https://www.sos.mo.gov/cmsimages/adrules/csr/current/5csr/5c20-400.pdf (beginning on page 49).

(II) Field and Clinical Experience (three (3) semester hours minimum of three hundred (300) clock hours of which two hundred (200) clock hours will be in a major area (elementary or secondary); fifty (50) clock hours in a minor area (elementary or secondary); and the remaining fifty (50) clock hours will be at the discretion of the program and candidate.

(a) Culminating Clinical Experience. This refers to elementary and secondary school placement(s) in which candidates actively participate and complete class assignments and work with students as requested while under the supervision of a school counselor. The candidate should experience a wide range of class settings and have opportunities to collaborate with the supervising school counselor, preparation program supervisors, and/or other stakeholders working to improve student learning;

MSCA, in collaboration with DESE, has made the following determinations concerning the new internship requirements:

OPTION 1: A student may do a major (200 hours) in an elementary school. For secondary hours, they may choose between middle school or high school. The remaining 50 hours is at a site of their choosing, level-wise.

OPTION 2: A student may do a major (200 hours) in a middle school; middle school placement will ONLY count as secondary. For elementary hours, they would need to do 50 hours in an elementary setting. The remaining 50 hours is at a site of their choosing, level-wise.

OPTION 3: A student may do a major (200 hours) in a high school. For elementary hours, they would need to do 50 hours in an elementary setting (not middle school). The remaining 50 hours is at a site of their choosing, level-wise.

Please consult with your advisor and/or the Internship Coordinator for additional information about choosing your sites each semester to adhere to these updated field experience rules.

**Group Requirement (ALL internship students)**

Student interns are required to facilitate or co-facilitate at least one six-week group during one of the internship experiences. A minimum of four clients typically constitutes a group. If you are unsure if your group qualifies for this requirement, discuss this with your on-site supervisor and the Internship Coordinator. A Group Evaluation Form is utilized to summarize the intern’s group facilitation abilities. The form should be submitted to the instructor upon completion of this requirement. Students are advised to begin working on finding and facilitating their group as early as possible during their internship process.
**Recording Sessions**

CACREP standards require that “Supervision of practicum and internship students includes program-appropriate audio/video recordings and/or live supervision of students’ interactions with clients.”

To complete this requirement then, MSU site supervisors will facilitate the audio and/or video recordings of student interactions with clients when clinically appropriate. In situations where such recordings may be detrimental to a client’s mental health and wellbeing, or is forbidden by the institution at large, the site supervisor will document that the recording is not possible and will provide live supervision of the student’s client interaction. The site is responsible for providing client consent forms for recording sessions. The *MSU Internship Recording Form* is used to document the recording authorization.

**Site Visits**

MSU internship university supervisor will make site visits, in person or via video conferencing as required, each semester or more frequently as needed. If the site supervisor or student would like a site visit sooner than scheduled, contact your instructor or internship coordinator. A summary of the site visit is documented using the *Site Visit Form*.

**Starting at Your Site**

Interns may begin at internship sites once approval has been granted by the Practicum and Internship Coordinator, an Internship Site Agreement and interim agreement (if appropriate) is signed and on file, clearance documents are updated to cover the duration of the semester, and after the announced start date. **First semester interns must be participating in group supervision through their internship class before providing direct client/student services.**

Interns who are starting their first semester, may begin accumulating indirect hours at a site, with approval from the Internship Coordinator and their instructor. Documentation must be complete, and interns must document all activities using required forms, must meet with the on-site supervisor for scheduled individual supervision, and must attend group supervision as available.

**Interim Agreements**

Interns continuing at sites between semesters must have an *Interim Agreement on file* with the course instructor prior to the end of the current semester of internship. The Interim Agreement must be signed by all parties and approved by the course instructor and Practicum/Internship Coordinator prior the start of the interim period. Interns must continue to participate in weekly face-to-face supervision with the on-site supervisor and are encouraged to participate in group supervision at their site, when it is available.

Interns working at sites between semesters are required to take an Incomplete (I) grade during the interim until the start date of the next semester. The interim period should be clearly documented on the Interim Agreement and on weekly logs.

**Incomplete Grades**

At times, interns may not be able to complete all the internship requirements in one semester. Internships may continue beyond the current semester of enrollment with an “Incomplete (I)” grade assigned until the requirements for the current semester have been completed. In these instances, and Interim Agreement is required if the intern works in between MSU semesters and the agreement. Interns will complete a Final Summary and Cover Sheet at the end of each semester, and an updated version at the end of the interim period.

Interns and course instructors should consult with the Practicum/Internship Coordinator immediately upon determining if internship requirements are not going to be completed in the semester of enrollment.
Changing an Intern’s Placement

Circumstances may arise where it is in the best interest of the intern to be removed from his/her placement because of incompatibility with the site and/or supervisor or other unforeseen issues that could be detrimental to a positive internship experience. This decision may be made by the course instructor in consultation with the intern, site administrator, Practicum/Internship Coordinator and Department Head. If the decision is to remove the intern, then every attempt for another more appropriate placement will be arranged and confirmed by the counseling program.

Removal Due to Unsatisfactory Progress

Circumstances may arise where an intern must be removed from his/her placement because of unsatisfactory progress and performance or violation of site and/or university policies. This action may take place after consultation with the course instructor in consultation with the intern, site administrator, Practicum/Internship Coordinator and Department Head. The intern may have the following options depending on the decisions of the above-mentioned group:

• Withdrawing from internship with a grade of “W” if the withdrawal occurs within the appropriate university time frame for no penalty.
• Receive a grade of “NP” if intern does not withdraw from the course within the appropriate university time frame.
• The student intern may appeal the decisions of the administration and should refer to the undergraduate catalog for information. (See Academic Regulations: Grade Appeals and Academic Grievances)

Internship Application Checklist

_____ Attend the mandatory Internship Application Meeting in the semester prior to application
_____ Complete the online Internship Application

Once your application has been conditionally approved, the following items are required:

_____ Complete updates to required Clearance Documents and provide verification to the office of Educational Field Experiences
_____ Student Professional Liability Insurance
   American Counseling Association (ACA) or
   American School Counselor Association (ASCA)
_____ TB test
_____ Mandated Reporter Training Update, send certificate to Internship Coordinator

_____ Contact the Career Center for help with resume and interview skills
_____ Contact at least two internship sites, begin applying for internship placements
_____ Accept an internship placement, have a backup plan in mind.

_____ Complete the Internship First Meeting Checklist with your on-site supervisor
_____ Complete the Internship Site Agreement, provide a copy to your instructor by the second week of class.
_____ Provide a copy of the Independent Contractor Form to your site supervisor for completion. Any questions about the form should be directed to Marian Green at mariangreen@MissouriState.edu.
Missouri State University
Counseling Program

Practicum and Internship Documents
Documents for Practicum

The forms in the next pages are those that may be used in a practicum. Not all these forms and documents are used every semester or by every student. These forms are placed in order that they are typically used in a practicum. Refer to the Table of Contents for a listing of forms.
Missouri State University- Counseling Program
Weekly Client Services Practicum Log
Select: COU 777____778____779____

Student Name: ___________________________ Semester/Year: ________

Directions: Use ¼ hour approximations. (Ex. .25 for 10-15 minutes, .5 for 25-30 minutes, .75 for 40-45 minutes, and 1.0 for 50-60 minutes. Each session is counted as 1 hour.

<table>
<thead>
<tr>
<th>Add Semester Meeting Dates:</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>14</th>
<th>15</th>
<th>16</th>
<th>17</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult/Teen</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Couple or Family</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Play Therapy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent Meeting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Auxiliary Direct</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Direct (attach info)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL DIRECT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual/Triadic Supervision 1.0 weekly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group Supervision 1.5 weekly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peer Review/ Peer Feedback</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Case Notes, Tx Plans Documentation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mandated Reports, Related crisis calls</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tape Review/ Self-Review</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional Development (Document on Form)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Auxiliary Indirect</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL INDIRECT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WEEKLY TOTAL (Total Direct + Total Indirect)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Direct Hours (at least 40 hours): ______ Indirect Hours: ______ Practicum Total (must total 100): ____

________________________________________________________
Counselor Trainee Signature                                      Date of Completion
________________________________________________________
Instructor Signature                                             Date of Review

Revised 03/22 amc
Practicum/Internship  
Personal & Professional Development Log

*Use this log to record the resources you obtained, trainings you attended (online, webinars, at your site or work, etc.), research conducted and/or presented, seminars presented and/or attended, books or audiobooks, podcasts, videos, websites, and any other resources you use to increase skills or improve your work with clients, at your site and/or in your personal growth as a helping professional.

Counselor Trainee: ________________________________________________________  Semester/Year: _______

<table>
<thead>
<tr>
<th>Date</th>
<th>Type of Resource (Training, Resource, Research Participation, Personal Development, Outside Study, etc.)</th>
<th>Description:</th>
<th>Hours:</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/1/21</td>
<td>Podcast/Outside Study</td>
<td>The Thoughtful Counselor Episode 199 Equine Therapy</td>
<td>1.0</td>
</tr>
</tbody>
</table>

Revised 03/22 amc
Missouri State University- Counseling Program

PRACTICUM AND INTERNSHIP SUMMARY AND COVER SHEET

COU 777__778__778__781__783__785__ Other____ 1st__2nd__3rd__4th__Internship

Counselor Trainee Name: ___________________________ Semester/Year: ___________

Site Name: ___________________________ Site Supervisor: ___________________________

Final Grade: Pass____ Not Pass____ Incomplete____ Instructor: ___________________________

<table>
<thead>
<tr>
<th>Attendance: # of Classes Attended (No more than 2 absences)</th>
<th>__<strong><strong><strong>of</strong></strong></strong></th>
</tr>
</thead>
</table>

| Semester Direct Hours Total (practicum minimum 40) (Intern minimum 240: 120/semester) |
|-----------------|----------------|

| Semester Indirect Hours Total: |
|-----------------|----------------|

| Semester Hours TOTAL: (Practicum minimum 100 total) (Intern300/semester 600 total): |
|-----------------|----------------|

**Supervision**

<table>
<thead>
<tr>
<th>Individual Supervision (Minimum average of 1 hour per week, face-to-face)</th>
<th>________hours</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Group Supervision (Minimum average of 1.5 hours per week)</th>
<th>________hours</th>
</tr>
</thead>
</table>

**Domain**

<table>
<thead>
<tr>
<th>Complete</th>
<th>Incomplete</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Assignments</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Student Midterm Evaluation</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Student Final Evaluation</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Dispositions Rubric by Instructor</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Evaluation of Site/Supervisor by Intern</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Weekly Activity/Time Logs/Progress Reports</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>All Evaluations Requested by Student (MSCE for School Counseling)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Internship only: 6-week Group (N/A if not applicable or semester of completion from 1st internship)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Other: (specify if needed)</th>
</tr>
</thead>
</table>

Notes: (Explanation of added hours, accommodations, etc.) ______________________________________________________

_________________________________________________________________________________________________________

**Student Cumulative Clinical Training Log (complete all prior semesters that apply)**

<table>
<thead>
<tr>
<th>Practicum</th>
<th>Practicum II</th>
<th>Internship I</th>
<th>Interim I</th>
<th>Internship II</th>
<th>Interim II</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Semester/year)</td>
<td>(Semester/year)</td>
<td>(Semester/year)</td>
<td>(Start-end dates)</td>
<td>(Semester/year)</td>
<td>(Start-end dates)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Direct</th>
<th>Direct</th>
<th>Direct</th>
<th>Direct</th>
<th>Direct</th>
<th>Direct</th>
<th>Direct</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Indirect</th>
<th>Indirect</th>
<th>Indirect</th>
<th>Indirect</th>
<th>Indirect</th>
<th>Indirect</th>
<th>Indirect</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TOTAL</th>
<th>TOTAL</th>
<th>TOTAL</th>
<th>TOTAL</th>
<th>TOTAL</th>
<th>TOTAL</th>
<th>TOTAL</th>
</tr>
</thead>
</table>

*Keep running total of practicum hours.  *Keep running total of Internship hours

__________________________________________________________________________

<table>
<thead>
<tr>
<th>Counselor Trainee Signature</th>
<th>Date</th>
<th>Instructor Signature</th>
<th>Date</th>
</tr>
</thead>
</table>
Missouri State University-Graduate Counseling Program
Counselor Trainee Progress Assessment

COU 777__ 778__ 779__ 781__ 783__ 785__

Student Name: ___________________________ Semester/Year: ________
Rater Name: ___________________________ Site ___________________________

Helping Relationship: \[ \begin{array}{ccc} \text{Midterm} & \text{Final} & \text{Date} \\ \hline \end{array} \] 
Practicum: \[ \begin{array}{ccc} \text{Midterm} & \text{Final} & \text{Date} \\ \hline \end{array} \] 
Internship: \[ \begin{array}{ccc} \text{Midterm} & \text{Final} & \text{Date} \\ \hline \end{array} \] 

Please read and follow instructions thoroughly. When items ask for more than one area, circle specific area rated if progress is not uniform. Write in N/A if entire item is not applicable or you have no basis for rating. To achieve a “Pass” in practicum, in addition to other course requirements listed in the syllabus, students should have an average rating of 3 across all skills.

Complete this form on Task Stream if provided in that format.

**Rate counselor trainee (or self if student) using the following scale for each item:**

1 = cannot do, does not demonstrate; substandard and needing remediation  
2 = can do/demonstrate, with prompting, but lacks effectiveness; fair  
3 = can do/demonstrate, unprompted, and is effective to some degree; meets expectations  
4 = can do/demonstrate, appropriate timing, delivery; works above expected level  
5 = can do/demonstrate, natural part of style, well-timed, delivered, effective; excellent
### Client/Counselor Interaction Skills

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
<th>#</th>
<th>Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>Accuracy of paraphrasing and reflection</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Use of feeling words (accuracy, variety, and depth).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
<td>Poignancy of responses; responses specifically tailored to clients’ implied meanings</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>Brevity, tolerance of silence and/or timing of responses</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Responses on “leading edge” of client message</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6</td>
<td>Questions, if asked, are appropriate, open-ended, and used sparingly</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7</td>
<td>Maintains appropriate boundaries (not overly responsible or disengaged)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8</td>
<td>Appropriateness of nonverbal behaviors and affect displayed.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9</td>
<td>Recognizes and utilizes countertransference</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10</td>
<td>Immediacy and process responses</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11</td>
<td>Interpretations, hypotheticals, and/or directives, if used, are appropriate</td>
</tr>
<tr>
<td></td>
<td></td>
<td>12</td>
<td>Forms quick, solid working alliances with children and adults</td>
</tr>
</tbody>
</table>

**Comment on Interaction Skills, especially strengths and areas for growth:**

### Learning and Professional Skills

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
<th>#</th>
<th>Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>13</td>
<td>Critical and/or creative thinking skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>14</td>
<td>Relationships with staff, peers and professionals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>15</td>
<td>Conceptualizes cases, human problems and strengths</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16</td>
<td>Responsiveness to supervision; motivation to learn</td>
</tr>
<tr>
<td></td>
<td></td>
<td>17</td>
<td>Ethical conduct and a working knowledge of ethical codes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>18</td>
<td>Awareness of privilege and one’s own multicultural biases</td>
</tr>
<tr>
<td></td>
<td></td>
<td>19</td>
<td>Assumes complexity to understand diverse clients’ worldviews</td>
</tr>
<tr>
<td></td>
<td></td>
<td>20</td>
<td>Contributions based upon understanding of school or site culture</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21</td>
<td>Use of micro-skills and tape review</td>
</tr>
<tr>
<td></td>
<td></td>
<td>22</td>
<td>Initiative, self-care, meta-cognitive, and personal process skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>23</td>
<td>Use of emotional reactivity in relationships</td>
</tr>
<tr>
<td></td>
<td></td>
<td>24</td>
<td>Other:</td>
</tr>
</tbody>
</table>

**Comment on Learning and Professional Skills, especially strengths & areas for growth:**
**Play Therapy and Child Advocacy Skills**

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
<th>#</th>
<th>Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>25</td>
<td>Sets appropriate limits as needed with child, using ACT model</td>
</tr>
<tr>
<td></td>
<td></td>
<td>26</td>
<td>Accurately identifies themes in the child’s play and develops insight into the child’s world</td>
</tr>
<tr>
<td></td>
<td></td>
<td>27</td>
<td>Identifies own childhood issues that interfere with the child’s therapeutic process</td>
</tr>
<tr>
<td></td>
<td></td>
<td>28</td>
<td>Accurately reflects the child’s play</td>
</tr>
<tr>
<td></td>
<td></td>
<td>29</td>
<td>Serves as an advocate for child by successfully relaying pertinent information to parents/guardians, DFS, etc.</td>
</tr>
</tbody>
</table>

**Comment on Play Therapy and Child Advocacy Skills, especially strengths and areas for growth:**

Have you noticed any deficiencies that would hinder the student’s successful progress through the counselor training program or impede his or her professional development?

Yes________  No________

If yes, please describe:

**Student Response:**

**Counselor Trainee Signature:** ____________________________ **Date:** __________

**Rater Signature:** ____________________________ **Date:** __________
DEFINITIONS

Client Interaction Skills

1. Accuracy of paraphrasing and reflection.
   The degree to which the student captures the meaning of statements made by others and accurately articulates those meanings back to the speaker.

2. Use of feeling words (accuracy, variety, and depth).
   The degree to which the student can identify and use feelings in self and others. As noted, this also includes the variety of feeling words identified and used, identification of differing depths of feelings and their appropriate use.

3. Poignancy of responses; responses specifically tailored to clients’ implied meanings.
   The degree to which the student perceives and communicates with vividness and intensity. It is, their ability to get the most moving parts in a client’s statement, their ability to paraphrase that meaning, and their ability to articulate that implied meaning in a timely manner in conversation with the client.

4. Brevity, tolerance of silence and/or timing of responses.
   The student’s ability to respond to clients briefly (but accurately), to avoid “filling in” silences to calm their own anxiety, and to use good timing in their responses to clients (not too soon or too delayed).

5. Responses on “leading edge” of client message.
   Similar to #3 in some respects, this skill reflects the student’s ability to perceive and articulate in a timely manner the as-yet unspoken meaning in a client’s statement. That is, it is the student’s ability to articulate the clients’ statements that are at the edge of their consciousness and are only implied by their spoken statements.

6. Questions, if asked, are appropriate, open-ended, and used sparingly.
   The degree to which the student prudently and judiciously uses questions (appropriate and open-ended questions), and refrains from either “interrogating” a client or calming their own anxiety about what to do by asking questions.

7. Maintains appropriate boundaries (not overly responsible or disengaged).
   The degree to which the student can be both present and not become enmeshed with the client. This includes appropriate verbal, emotional, physical, and session boundaries.

8. Appropriateness of nonverbal behaviors and affect displayed.
   The degree to which the student is aware of the nonverbal messages they send the client, and of the client’s nonverbal messages, and their ability to utilize this awareness in a therapeutic manner. This includes nonverbal affective displays as well.
9. Recognizes and utilizes countertransference.

Countertransference has to do with thoughts and feelings that arise in the counselor/therapist in response to their client. While they are natural, expected, and potentially helpful, they can cause difficulties if not attended to and addressed by the counselor/therapist. This item assesses the degree to which the student allows themselves to be aware of the feelings and thoughts that their client provokes within them, the degree to which they address them, and the degree to which they utilize the information gained toward the best interests of their client.

10. Immediacy and process responses.

The degree to which the student utilized their “in-the-moment” awareness to address the interpersonal process with their client. By implication, it also is an assessment of the degree to which the student allows themselves to be aware of the immediate therapeutic process, their own internal processes, and the degree of their courage and ability to articulate this awareness in a timely manner.

11. Interpretations, hypotheticals, and/or directives, if used, are appropriate.

The degree to which the student can construct and articulate fitting (and sparingly used) interpretations, hypotheticals, and/or directives.

12. Forms quick, solid working alliances with children and adults.

The degree to which the student can rapidly develop rapport, a safe therapeutic/interpersonal environment, and the fundamentals of a working relationship with their client in appropriate ways.

Learning and Professional Skills

13. Critical and/or creative thinking skills.

The degree to which the student demonstrates their ability to evaluate information critically and/or allows themselves to “think outside the box.”

14. Relationships with staff, peers, and professionals.

The degree the student forms and maintains a respectful, collegial working relationship with staff and faculty, their fellow students, and with other professionals in the community. This includes appropriate and timely communication, appropriate respect for position and authority, and respectful teaming with others in the service of both education and the best interests of clients.

15. Conceptualizes cases, human problems, and strengths.

The degree to which the student demonstrates their ability to coherently conceptualize their work with a client and being able to articulate the framework within this conceptualization is constructed. It also includes the degree to which the student can incorporate both the client’s problems, as presented, and their strengths into their overall conceptualization.

16. Responsiveness to supervision; motivation to learn.
The degree to which the student initiates and seeks learning. It is also the extent that they allow themselves to be open to feedback from peers and supervisors, and the degree to which they sincerely address/incorporate this feedback.

17. Ethical conduct and a working knowledge of ethical codes.

The degree to which the student demonstrates their working knowledge of professional ethical standards and their ability to translate this knowledge into practical action. It includes complying with APA’s and ACA’s enforceable standards as well as relevant laws.

18. Awareness of privilege and one’s own multicultural biases.

The degree to which the student is aware of and acknowledges the privilege from which they benefit, conferred upon them by the culture by virtue of things like race, ethnicity, class, gender, or disability status. Further, this item addresses the degree to which the student allows themselves to be aware of the potentially biasing nature of this privilege and the sources from whence it comes.

19. Assumes complexity to understand diverse clients’ worldviews.

The degree to which the student allows themselves to acknowledge the inherent complexity of the meeting of divergent worldviews and the complexity of developing client-centered understandings.

20. Contributions based upon understanding of school or site culture.

The degree to which the student adapts to the setting in which they learn and serve. This includes an appreciation for existing subcultures and tactful and responsible development within that setting.

21. Use of micro-skills and tape review.

The degree to which the student allows their self to learn and utilize counseling micro-skills and learn from tape review.

22. Initiative, self-care, meta-cognitive, and personal process skills.

The degree to which the student is a “self-starter”, willing and able to care for themselves, know and evaluate their own thought processes, and is willing to look at, receive feedback about, and learn from their interpersonal processes, thereby further refining their interpersonal processing skills.

23. Use of emotional reactivity in relationships.

The degree to which the student can be aware of their emotional reactivity in relationships (with clients and otherwise) and to utilize this awareness in positive, growth-producing ways.

24. Other:

This item is for evaluation areas not otherwise covered in this evaluation, the content of which should be specified by the evaluator.

25. Sets appropriate limits as needed with child, using ACT model

The degree to which the student addresses the need for limits in the playroom based on child safety, room safety, counselor safety and to meet the needs of structure. ACT model is used to Acknowledge what the child is feeling, Communicate the limit, and Target appropriate alternative ways the feelings can be shared.

26. Accurately identifies themes in the child’s play and develops insight into the child’s world.
The degree to which the student demonstrates their ability to coherently conceptualize their work with a client and being able to articulate the framework within this conceptualization is constructed. This includes the obvious initial themes such as consistently cooking for themselves and others, and extends to the deeper meaning, such as, the child learning to nurture themselves in healthy ways.

27. Identifies own childhood issues that interfere with the child’s therapeutic process.

This item assesses the degree to which the student allows themselves to be aware of the feelings and thoughts that their client provokes within them, the degree to which they address them, and the degree to which they utilize the information gained toward the best interests of their client.

28. Accurately reflects the child’s play.

The degree to which the student can respond to the needs of the child while in they are in session. The ability for the student to reflect to the client what they are doing, saying and feeling.

29. Serves as an advocate for child by successfully relaying pertinent information to parents/guardians, DFS, etc.

The degree to which the student is a supporter for the child and is aware of who to contact and how to go about making the contact in specific situations where the need arises.
Auxiliary Practicum Site
First Meeting Checklist

Counselor Trainee: __________________________ Date: _______________________

Site Name: ___________________________________________________________________

Site Physical Address: __________________________________________________________

On-Site Supervisor Name and Credentials: _______________________________________

On-Site Supervisor Email: ___________________________________________ Phone: ______

During the first meeting, please discuss/complete the following items:

_____ 1. Complete Site Agreement with appropriate signatures.

_____ 2. Set dates and times for site attendance and clinical supervision. Discuss site supervisor’s expectations related to direct/indirect student hours.

_____ 3. Discuss format of record keeping, including daily log (for class) and any site documentation (per site-supervisor/site policy and expectations). Students log and document hours, site supervisors review and sign logs.

_____ 4. Discuss duties that the student will participate in and the supervisor expectations of participation. This may include individual and group counseling, whole classroom lessons, and small group co-facilitation and in planning counseling curriculum. School based counselor trainees may also be participating in opportunities that optimize learning in the four components of the Comprehensive Counseling Program.

_____ 5. Discuss counselor trainee personal/professional goals, including areas of growth desired.

_____ 6. Review the Auxiliary Site Performance Feedback form. This form will be completed by the site supervisor at the end of the experience to assist in completion of the student’s progress assessment.

_____ 7. (School) Schedule minimum classroom lesson opportunities and discussion of lessons to be conducted. Review Classroom Observation Feedback form. (Non-teacher certified counselor-trainees must complete a minimum of four (4) hours of classroom lesson instruction with site supervisor completing classroom feedback rubrics. These do not have to be completed in one-hour increments. Please utilize the on-site supervisor’s judgement and schedule to complete the minimum hourly requirements.)
COUNSELING FIELD PLACEMENT SITE AGREEMENT

Interns: Turn this document in to your internship instructor prior to beginning work at your site; no later than the second week of internship class. Practicum Students: This signed form must be turned in to your instructor before you may begin your placement.

Select Course

781 SEC School Counseling: ____ 783 ELE School Counseling: ____ 785 Mental Health: ____
777 Counseling Practicum: _____ 778 MH Practicum: _____ 779 SC Practicum: _____
Other Field Placement not listed (include course code): ________________________________

1. Counseling Programs
   Department of Counseling, Leadership, and Special Education
   Missouri State University
   901 South National
   Springfield, MO 65897

2. Site/Agency Name:____________________________________________________________

3. Address:_______________________________________________________________

4. Phone: _________________________________________________________________

5. Email:________________________

6. Site Director: _____________________________________________________________
   Site Supervisor: __________________________________________________________
   Site Supervisor Phone (if different from above): ______________________________
   Site Supervisor Email: ____________________________________________________

7. Student:
   Name: _____________________________M#: _____________________________
   Address:___________________________________________________________________
   Phone: __________________________ Email: _________________________________
It is mutually agreed that the above-named mental health agency/school and/or site supervisor will provide the following services:

1. Assign a site supervisor who is a licensed professional counselor, licensed psychologist/certified school counselor, or other qualified licensed professional who has at least two (2) years of fully licensed/certified experience. The site supervisor must complete (or have attended within the last 3 years) MSU’s site supervisor training, and provide copies of an updated resume, professional liability insurance and license/certification.

2. Orientation to the agency or school for the student with specific counselor-trainee duties defined.

3. A site and supervisor operating under ACA/ASCA ethical guidelines.

4. Define and communicate intern/practicum duties, responsibilities, expectations, specific information related to supervision provided by site supervisor on site, contact information, and an emergency policy with contact information.

5. Coordinate student’s duties with direct client contact at a minimum of 40% of total time spent (120 hours of direct contact for total of 300 clock hours/semester for internship, 40/100 for practicum).

6. Ensure that the student is working within their level of training. Students who have not had coursework in the use of certain specific therapies such as couples and family, addictions, etc. should not work in these areas without specific training, and/or supervision.

7. Permit student intern’s videotaping of one session, with signed permission, for analysis and supervision. In populations where video is not possible, contact the student intern’s university supervisor or internship coordinator for alternative arrangements.

8. Individual supervision of the student by the site supervisor is required at a minimum of one hour per week to provide feedback and to communicate progress. Please contact the university supervisor immediately in case of any concerns or deficiencies noted.

9. Provide the student with a mid-term and final progress evaluations, using program evaluation forms provided, including any documentation required for certification.

The student intern agrees to:

1. Be at the agreed-upon location at the scheduled times.

2. Always demonstrate professional behavior consistent with ethical guidelines, including providing only those services within student intern’s level of training and preparation.
3. Complete all required documentation of duties for the university and site.

4. Be assigned the following general duties and responsibilities: Clinical mental health will include individual counseling and may include group, couples, family, child therapy, etc. as applicable based on level of training. School counseling will include individual and whole classroom counseling, guidance lessons and planning, and may include play therapy, group counseling, etc. as applicable based on level of training.

• Site supervisor: Please list any additional specific responsibilities here:

5. Attend scheduled MSU classes to receive feedback and training regarding counseling performance, techniques, and skills. Students must attend each class to receive total credit. Additionally, students must attend an average of 1.5 hours per week group supervision as part of the scheduled class time, for a minimum of 30 hours of group supervision. Failure to attend class results in loss of group supervision. Failure to meet class attendance and group supervision requirements will result in a NP (Not Pass) grade.

6. Complete an evaluation of the site supervisor and the field experience to provide to the instructor at the end of the semester.

7. Maintain all College of Education and program required documents including current MOVECHS FBI Fingerprinting National Background Check, professional liability insurance, TB test results, mandated reporter training, suicide screening training.

The MSU field experience instructor will provide the following:

1. Explain the internship and/or practicum requirements (class meetings, activities, reports, evaluations, assignments, etc.)

2. Provide weekly class meetings to discuss common needs and experiences, provide instruction and relevant trainings at a minimum of 1.5 hours per week.

3. Maintain periodic contact to discuss progress (telephone contact, email, site visits, etc.) as deemed necessary.

4. Give the student feedback regarding faculty supervision and maintain appropriate records for evaluation and grading and provide final grading for the internship.

5. Ensure that the student is working within their level of training based on assigned duties and weekly review of logs.
If at any time circumstances prevent any of these participants from providing the conditions herein, including required supervision of the student intern, the course instructor and Practicum/Internship Coordinator should be notified immediately.

This Agreement will remain in effect as long as the student intern remains in place as an intern or practicum student, for up to three consecutive semesters.

The following signatures verify agreement to these conditions:

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Intern Signature</td>
<td></td>
</tr>
<tr>
<td>Site Supervisor Signature</td>
<td></td>
</tr>
<tr>
<td>Site Director/Administrator Signature</td>
<td></td>
</tr>
<tr>
<td>MSU Internship/Practicum Instructor Signature</td>
<td></td>
</tr>
<tr>
<td>MSU Practicum/Internship Coordinator Signature</td>
<td>Date Received</td>
</tr>
</tbody>
</table>
Auxiliary Practicum Site
Performance Feedback

Site supervisors: Please complete at the end of the auxiliary experience and attach to the student’s final hours log.

Does the counselor trainee:

1. Utilize effective management strategies/techniques? Yes___ No___
2. Build rapport with others? Yes___ No___
3. Vary strategies/techniques? Yes___ No___
4. Utilize active listening/reflection? Yes___ No___
5. Utilize formative and summative assessment? Yes___ No___
6. Utilize appropriate follow up as needed? Yes___ No___
7. Demonstrate openness to feedback/supervision? Yes___ No___
8. Establish appropriate closure? Yes___ No___
9. Demonstrate professionalism? Yes___ No___

Comment on counseling skills, especially strengths and areas for growth:

Performance Evaluation: Satisfactory___ Unsatisfactory___

Counselor Trainee Signature: ________________________________
Date: ________________________________

On-Site Supervisor Signature: ________________________________
Date: ________________________________
Classroom Activity/Presentation

Instructions: Site supervisors should complete this to provide counselor trainees with feedback following classroom guidance and counseling activities.

Counselor Trainee: ________________________________________________________________

Name of Reviewer: ______________________________________________________________

Date of Review: ___________________________ Grade Level: __________________________

Please rate the following items if applicable during the review.

Circle one - Rating scale: 5 High - 1 Low, NO – Not Observed

1. **Lesson Objectives:** Were objectives established and/or addressed? 5 4 3 2 1
   Describe/comment about effectiveness:

2. **Rapport:** Was rapport observed and established? 5 4 3 2 1
   Describe/comment about effectiveness:

3. **Materials:** Effectiveness of materials used? 5 4 3 2 1
   Describe/comment about effectiveness:

4. **Listening:** Did you observe active listening? 5 4 3 2 1
   Describe/comment about effectiveness:

5. **Reflection:** Did you observe reflection? 5 4 3 2 1
   Describe/comment about effectiveness:

6. **Questioning:** Do you observe follow-up questions? 5 4 3 2 1
   Describe/comment about effectiveness:

7. **Lesson Assessment:** Was formative assessment observed? 5 4 3 2 1
   Describe/comment about effectiveness:

8. **Closing session:** Effective closure of session? 5 4 3 2 1
   Describe/comment about effectiveness:
### Missouri State University- Counseling Program

**School Counseling Weekly Progress Report-COU 779 COU 781 COU 783**

Student: ___________________________________________ Site: __________________________________

Week #_______ Dates: ____________ to ____________

Semester Totals:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Hours: _____</td>
<td>+ Indirect Hours: _____ = Semester Running Total _____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Rate the counselor-trainee’s rapport with students:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Rate the counselor-trainee’s progression toward independence as a counselor:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Rate the counselor-trainee’s rapport with colleagues:</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4. We completed 1 hour face to face individual supervision this week</td>
<td></td>
</tr>
<tr>
<td>5. Supervision included discussing areas the trainee needs to focus on for improvement, additional work or which are areas of concern.</td>
<td></td>
</tr>
<tr>
<td>6. Supervision included highlighting areas where the trainee is showing strength or success.</td>
<td></td>
</tr>
<tr>
<td>7. The trainee is receiving opportunities to learn about school counseling curriculum and goals.</td>
<td></td>
</tr>
<tr>
<td>8. We have requested assistance from the University Supervisor this week for the following concern: ____________________________ (Contact the University Supervisor directly for quickest response)</td>
<td></td>
</tr>
</tbody>
</table>

9. Please list any concerns addressed with the counselor-trainee this week:

10. Please list the area(s) of strengths and successes you are noticing with the counselor-trainee this week:

Site Supervisor Signature ___________________________ Date ___________________________
Missouri State University - Counseling Program  
Student Evaluation of Site Supervisor/Site Experience

Student Name: _______________________________________________  Sem/Yr: ________

Track:   Clinical Mental Health _____  School _____

Course:   Practicum _____  Internship _____

University Supervisor:  ___________________________________________

Site Supervisor:  ________________________________________________

Site Name:  ______________________________________________________

Site Address:  ____________________________________________________

Site Phone: __________________________  Site Email: _____________________

Total hours on site: _______________  Direct contact hours: ______________

Hours of individual supervision from Site Supervisor: __________________________

Please answer check Y (Yes) or N (No) for the following questions.  
If you check N (No), please explain in the space provided under each question.

Y___  N___  1. Was the orientation to the site that you received helpful?

Y___  N___  2. Were the expectations at your site clearly explained?

Y___  N___  3. Was your site supervisor available for consultation when needed?

Y___  N___  4. Were you able to meet with your site supervisor for supervision for the required minimum amount of time each week? (1 hr/week)

Y___  N___  5. Was the supervision that you received from your site supervisor helpful?
Y___  N___  6. Were other professionals at the site helpful?

Y___  N___  7. Were you given appropriate levels of responsibility?

Y___  N___  8. Did you receive adequate opportunities to engage in individual counseling with clients?

Y___  N___  9. Did you receive adequate opportunities to engage in small group counseling with clients?

Y___  N___  10. Did you receive opportunities to record counseling sessions with clients?

Y___  N___  11. If you were unable to record client sessions, did your site supervisor provide alternatives for live supervision?

Y___  N___  12. Would you recommend this site to another student?

Please comment on these aspects of your clinical experience:

1. What were the strengths of this site?

2. What were the weaknesses of this site?

Additional comments:

Student Signature: ________________________________ Date: ______________
Missouri State University-Graduate Counseling Program
Statement of Understanding/Handbook Receipt

I ____________________________ (print name) attest that I have read the Practicum and Internship Handbook including the forms, documents, information, and procedures contained within it.

I further attest that I have reviewed the ethical expectations and that I understand the professional responsibilities and behaviors that are required of me during my practicums and internships.

I understand my responsibility to follow the requirements and processes for applying to and participating in practicums and internships including (but not limited to) application deadlines, evaluations, and assignments.

I understand the ramifications of not adhering to these requirements may result in such consequences as my not participating in a required field experience to my being unable to obtain certification or licensure in my desired area.

I am aware that I may obtain clarification or get additional information with my practicum or internship instructor or the practicum and internship coordinator if needed.

____________________________________________________
Student Signature

____________________________________________________
Date Signed

____________________________________________________
Semester/Year
Documents for Internship

The forms in the next pages are those that may be used in an internship. These forms are placed in order that they are typically used in internships. You will note that some are used only in CMHC internships, some are used only in School Counseling internships, and many are used in both. Refer to the Table of Contents for a listing of forms.
It is *recommended* that the Internship Site Supervisor and Intern complete the following items during the intern’s first meeting at the placement site:

_____Discuss and sign the Internship Site Agreement form prior to intern beginning at the site. This is an agreement between the intern, site supervisor, site director, and MSU, which is specific to this intern’s field placement. It does not replace the Memorandum of Understanding between the Site and the University.

_____Provide site supervisor information regarding access to forms (including copies if requested), TaskStream, MSCE training (for school counseling) and any related documentation requirements.

_____Site Supervisor will provide emergency policies and procedures to intern.

_____Discuss strengths and challenges for intern that may be helpful for the site supervisor to know in the early stages of the internship, so that the intern to be able to fully benefit from supervision.

_____Schedule weekly clinical supervision including a day and time. If permanent changes are made to this schedule, inform the internship instructor in writing.

_____Intern should be able provide Mandated Reporter training and QPR Suicide Screening training certificates and any background check requirements if requested/required.

The signatures below indicate that these areas have been discussed by the undersigned. Provide as required by instructor or coordinator.

Student Intern Signature: 

Site Supervisor Signature: 

Date ________________
COUNSELING FIELD PLACEMENT SITE AGREEMENT

Interns: Turn this document in to your internship instructor prior to beginning work at your site; no later than the second week of internship class.

781 SEC School Counseling: ____ 783 ELE School Counseling: ____ 785 Mental Health: ____
777 Counseling Practicum: ____ 778 MH Practicum: ____ 779 SC Practicum: ____
Other Field Placement not listed (include course code): __________________________

1. Counseling Programs
   Department of Counseling, Leadership, and Special Education
   Missouri State University
   901 South National
   Springfield, MO 65897

2. Site/Agency Name:__________________________________________________________

3. Address:_________________________________________________________________

4. Phone:___________________________________________________________________

5. Email:___________________________________________________________________

6. Site Director: _____________________________________________________________
   Site Supervisor: ___________________________________________________________
   Site Supervisor Phone (if different from above): ________________________________
   Site Supervisor Email: ______________________________________________________

7. Student (herein called the “student intern”):
   Name: __________________________________________ M#: _______________________
   Address: ________________________________________________
   Phone: _______________ Email: ________________________________
It is mutually agreed that the above-named mental health agency/school and/or site supervisor will provide the following services:

7. Assign a site supervisor who is a licensed professional counselor, licensed psychologist/certified school counselor, or other qualified licensed professional who has at least two (2) years of fully licensed/certified experience. The site supervisor must complete (or have attended within the last 3 years) MSU’s site supervisor training, and provide copies of an updated resume, professional liability insurance and license/certification.

8. Orientation to the agency or school for the student with specific counselor-trainee duties defined.

9. A site and supervisor operating under ACA/ASCA ethical guidelines.

10. Define and communicate intern/practicum duties, responsibilities, expectations, specific information related to supervision provided by site supervisor on site, contact information, and an emergency policy with contact information.

11. Coordinate student intern’s duties with direct client contact at a minimum of 40% of total time spent (120 hours of direct contact for total of 300 clock hours/semester for internship, 40/100 for practicum).

12. Ensure that the student intern is working within their level of training. Student interns who have not had coursework in the use of certain specific therapies such as couples and family, addictions, etc. should not work in these areas without specific training, and/or supervision.

13. Permit student intern’s videotaping of one session, with signed permission, for analysis and supervision. In populations where video is not possible, contact the student intern’s university supervisor or internship coordinator for alternative arrangements.

14. Individual supervision of the student intern by the site supervisor is required at a minimum of one hour per week to provide feedback and to communicate progress. Please contact the university supervisor immediately in case of any concerns or deficiencies noted.

15. Provide the student intern with a mid-term and final progress evaluations, using program evaluation forms provided, including any documentation required for certification.

The student intern agrees to:

16. Be at the agreed-upon location at the scheduled times.

Always demonstrate professional behavior consistent with ethical guidelines, including providing only those services within student intern’s level of training and preparation.

17. Complete all required documentation of duties for the university and site.
18. Be assigned the following general duties and responsibilities: Clinical mental health will include individual counseling and may include group, couples, family, child therapy, etc. as applicable based on level of training. School counseling will include individual and whole classroom counseling, guidance lessons and planning, and may include play therapy, group counseling, etc. as applicable based on level of training.

• Site supervisor: Please list additional specific responsibilities here:

19. Attend scheduled MSU classes to receive feedback and training regarding counseling performance, techniques, and skills. Students must attend each class to receive total credit. Additionally, students must attend an average of 1.5 hours per week group supervision as part of the scheduled class time, for a minimum of 30 hours of group supervision. Failure to attend class results in loss of group supervision. Failure to meet class attendance and group supervision requirements will result in a NP (Not Pass) grade.

20. Complete an evaluation of the site supervisor and the internship experience to provide to the instructor at the end of the semester.

21. Maintain all College of Education and program required documents including current MOVECHS FBI Fingerprinting National Background Check, professional liability insurance, TB test results, mandated reporter training, suicide screening training.

The MSU internship instructor will provide the following:

1. Explain the internship requirements (class meetings, activities, reports, evaluations, assignments, etc.)

2. Provide weekly class meetings to discuss common needs and experiences, provide instruction and relevant trainings at a minimum of 1.5 hours per week.

3. Maintain periodic contact to discuss progress (telephone contact, email, site visits, etc.) as deemed necessary.

4. Give the student intern feedback regarding faculty supervision and maintain appropriate records for evaluation and grading and provide final grading for the internship.

5. Ensure that the student intern is working within their level of training based on assigned duties and weekly review of logs.
If at any time circumstances prevent any of these participants from providing the conditions herein, including required supervision of the student intern, the course instructor and Practicum/Internship Coordinator should be notified immediately.

This Agreement will remain in effect as long as the student intern remains in place as an intern or practicum student, for up to three consecutive semesters.

The following signatures verify agreement to these conditions:

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Intern Signature</td>
<td></td>
</tr>
<tr>
<td>Site Supervisor Signature</td>
<td></td>
</tr>
<tr>
<td>Site Director/Administrator Signature</td>
<td></td>
</tr>
<tr>
<td>MSU Internship Instructor Signature</td>
<td></td>
</tr>
<tr>
<td>MSU Practicum/Internship Coordinator Signature</td>
<td>Date Received</td>
</tr>
</tbody>
</table>
Missouri State University - Counseling Program
CMHC Weekly Log - COU 778 COU 785

Counselor-Trainee: ___________________________________ SEM/YR ____________
Week of ____________ to ____________ (date) Week # ____________ Total ____________

Directions: Use ¼ hour approximations: .25 for 10-15 minutes, .5 for 25-30 minutes, .75 for 40-45 min.

*Counseling sessions are counted in 1/2-hour (.5) approximations.*

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>DIRECT SERVICES</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adults/Teens</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual Counseling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group Counseling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Couples/Family</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(CMHC only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Play Therapy/ Child Counseling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent Meeting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychosocial Activities/Groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>\Other (obtain approval or attach explanation)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>INDIRECT SERVICES</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supervision: (1/week)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual or Triadic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group Supervision</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.5 hours/ week</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reports, case notes, team meetings, related.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional Development, Training, resource development</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Video/Case Review and presentations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Observations, shadowing, Other individualized training</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Totals:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>WEEKLY TOTAL</td>
</tr>
</tbody>
</table>

Student Signature _________________________________ Date ____________

Supervisor Signature _________________________________ Date ____________
Missouri State University-Graduate Counseling Program
CMHC Weekly Progress Report-COU 778____ COU 785____

Student: ___________________________________________________________

Location: ___________________________________________________________

Week #________ Dates: ______________ to ______________

Semester Totals:

Direct Hours: _____ + Indirect Hours: _____ = Semester Running Total _____

1. Rate the counselor-trainee’s rapport with clients:

2. Rate the counselor-trainee’s progression toward independence as a counselor:

3. Rate the counselor-trainee’s rapport with colleagues:

<table>
<thead>
<tr>
<th></th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5.</td>
<td>Supervision included discussing areas the trainee needs to focus on for improvement, additional work or which are areas of concern.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Supervision included highlighting areas where the trainee is showing strength or success.</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>The trainee is receiving opportunities to learn about clinical mental health counseling concepts as they relate to the client, agency and community.</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>We have requested assistance from the University Supervisor this week for the following concern: ______________________________</td>
<td></td>
</tr>
</tbody>
</table>

(Please contact the University Supervisor directly for a quicker reply)

11. Please list any concerns addressed with the counselor-trainee this week:

12. Please list the area(s) of strengths and successes you are noticing with the counselor-trainee this week:

Supervisor Signature_____________________________________________________

Date_____________________________________________________
Missouri State University
Counseling Program School Counseling
Internship/Auxiliary Site Log
COU 779 ___ COU 781 ___ COU 783 ___ Other: ____

Student: __________________________________________________ Sem/Yr: __________
Week _____ to _______ (date) Week #_____ Site: ______________________________
Directions: Use ¼ hour approximations. Example: .25 for 10-15 minutes, .5 for 25-30 minutes, .75 for 40-45 mins

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>DIRECT SERVICES</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Contact</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In classroom</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Small Groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual Student Counseling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Responsive Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent Meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student-focused Groups/Meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (obtain approval attach explanation)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>INDIRECT SERVICES</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supervision: 1hr/wk Individual/Triadic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group Supervision 1.5/week</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reports, team meetings, staffings,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prof Dev, Training, Resourcing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Video/Case Review presentations.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Observations, shadowing, related.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Totals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>WEEKLY TOTAL</td>
</tr>
</tbody>
</table>
**Missouri State University-Graduate Counseling Program**  
**School Counseling Weekly Progress Report**-COU 779 COU 781 COU 783

Student: ________________________________ Site: __________________

Week #_______ Dates: _____________ to ____________

Semester Totals:
Direct Hours:_____ + Indirect Hours:_____ = Semester Running Total ____

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Rate the counselor-trainee’s rapport with students:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Rate the counselor-trainee’s progression toward independence as a counselor:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Rate the counselor-trainee’s rapport with colleagues:</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4.</td>
<td>We completed 1 hour face to face individual supervision this week</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Supervision included discussing areas the trainee needs to focus on for improvement, additional work or which are areas of concern.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Supervision included highlighting areas where the trainee is showing strength or success.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>The trainee is receiving opportunities to learn about school counseling curriculum and goals.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>We have requested assistance from the University Supervisor this week for the following concern: __________________ (Contact the University Supervisor directly for quickest response)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. Please list any concerns addressed with the counselor-trainee this week:

14. Please list the area(s) of strengths and successes you are noticing with the counselor-trainee this week:

Site Supervisor Signature____________________________

Date______________________________
Missouri State University - Counseling Program
PRACTICUM AND INTERNSHIP
SUMMARY AND COVER SHEET

COU 777_778_778_781_783_785__ Other (enter code) 1st_2nd Internship

Student: ___________________________ Semester/Year: _____________

Site Name: ___________________________ Site Supervisor: ___________________________

Final Grade: Pass___ Not Pass___ Incomplete____ Instructor: ___________________________

<table>
<thead>
<tr>
<th>Semester Totals</th>
<th>Domain</th>
<th>Complete</th>
<th>Incomplete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance:</td>
<td>Assignments</td>
<td></td>
<td></td>
</tr>
<tr>
<td># Of Classes Attended (No more than 2 absences)</td>
<td>Student Midterm Evaluation</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Student Final Evaluation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semester Direct Hours Total (practicum minimum 40)</td>
<td>Dispositions Rubric by Instructor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Intern minimum 240: 120/semester)</td>
<td>Evaluation of Site/Supervisor by Intern</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semester Indirect Hours Total:</td>
<td>Weekly Activity/Time Logs/Progress Reports</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semester Hours TOTAL:</td>
<td>All Evaluations Requested by Student (MSCE for School Counseling)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Practicum minimum 100 total)</td>
<td>Internship only:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6-week Group (N/A if not applicable or semester of completion from 1st internship)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other: (specify if needed)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Notes: (Explanation of added hours, accommodations, etc.
___________________________________________________________)

<table>
<thead>
<tr>
<th>Supervision</th>
<th>Domain</th>
<th>Complete</th>
<th>Incomplete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Supervision (Minimum average of 1 hour per week, face-to-face)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group Supervision (Minimum average of 1.5 hours per week)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Semester Totals</th>
<th>Domain</th>
<th>Complete</th>
<th>Incomplete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance:</td>
<td>Assignments</td>
<td></td>
<td></td>
</tr>
<tr>
<td># Of Classes Attended (No more than 2 absences)</td>
<td>Student Midterm Evaluation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semester Direct Hours Total (practicum minimum 40)</td>
<td>Dispositions Rubric by Instructor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Intern minimum 240: 120/semester)</td>
<td>Evaluation of Site/Supervisor by Intern</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semester Indirect Hours Total:</td>
<td>Weekly Activity/Time Logs/Progress Reports</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semester Hours TOTAL:</td>
<td>All Evaluations Requested by Student (MSCE for School Counseling)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Practicum minimum 100 total)</td>
<td>Internship only:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6-week Group (N/A if not applicable or semester of completion from 1st internship)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other: (specify if needed)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Student Cumulative Clinical Training Log (complete all prior semesters that apply) |
|---------------------------------|---------------------------------|--------|
| Practicum | Practicum II | Internship I | Interim I | Internship II | Interim II |
| (Semester/year) | (Semester/year) | (Semester/year) | (Start-end dates) | (Semester/year) | (Start-end dates) |
| Direct | Direct | Direct | Direct | Direct | Direct |
| Indirect | Indirect | Indirect | Indirect | Indirect | Indirect |
| TOTAL | TOTAL | TOTAL | TOTAL | TOTAL | TOTAL |

*Keep running total of practicum hours.  *Keep running total of Internship hours

Student Signature/Date ___________________________ Instructor Signature/Date ___________________________
Practicum/Internship Personal & Professional Development Log

*Use this log to record the resources you obtained, trainings you attended (online, webinars, at your site or work, etc.), research conducted and/or presented, seminars presented and/or attended, books or audiobooks, podcasts, videos, websites, and any other resources you use to increase skills or improve your work with clients, at your site and/or in your personal growth as a helping professional.

<table>
<thead>
<tr>
<th>Date</th>
<th>Type of Resource</th>
<th>Description</th>
<th>Hours:</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/1/21</td>
<td>Podcast/Outside Study</td>
<td><em>The Thoughtful Counselor Episode 199 Equine Therapy</em></td>
<td>1.0</td>
</tr>
</tbody>
</table>

Student: ____________________________________________ Semester/Year: ______________
Missouri State University-Graduate
Counseling Program Counselor Trainee
Progress Assessment

<table>
<thead>
<tr>
<th>COU 777</th>
<th>778</th>
<th>779</th>
<th>781</th>
<th>783</th>
<th>785</th>
</tr>
</thead>
</table>

Student Name: __________________________________________ Semester/Year: ________
Rater Name: __________________________________________ Site _________________________

<table>
<thead>
<tr>
<th>Helping Relationship:</th>
<th>Midterm</th>
<th>Final</th>
<th>Date: _________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practicum:</td>
<td>Midterm</td>
<td>Final</td>
<td>Date: _________</td>
</tr>
<tr>
<td>Internship:</td>
<td>Midterm</td>
<td>Final</td>
<td>Date: _________</td>
</tr>
</tbody>
</table>

Please read and follow instructions thoroughly. When items ask for more than one area, circle specific area rated if progress is not uniform. Write in N/A if entire item is not applicable or you have no basis for rating. To achieve a “Pass” in practicum, in addition to other course requirements listed in the syllabus, students should have an average rating of 3 across all skills.

Complete this form on Task Stream if provided.

Rate counselor trainee (or self if student) using the following scale for each item:

1 = cannot do, does not demonstrate; substandard and needing remediation
2 = can do/demonstrate, with prompting, but lacks effectiveness; fair
3 = can do/demonstrate, unprompted, and is effective to some degree; meets expectations
4 = can do/demonstrate, appropriate timing, delivery; works above expected level
5 = can do/demonstrate, natural part of style, well-timed, delivered, effective; excellent
### Client/Counselor Interaction Skills

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
<th>#</th>
<th>Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>Accuracy of paraphrasing and reflection</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Use of feeling words (accuracy, variety, and depth)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
<td>Poignancy of responses; responses specifically tailored to clients’ implied meanings</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>Brevity, tolerance of silence and/or timing of responses</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Responses on “leading edge” of client message</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6</td>
<td>Questions, if asked, are appropriate, open-ended, and used sparingly</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7</td>
<td>Maintains appropriate boundaries (not overly responsible or disengaged)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8</td>
<td>Appropriateness of nonverbal behaviors and affect displayed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9</td>
<td>Recognizes and utilizes countertransference</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10</td>
<td>Immediacy and process responses</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11</td>
<td>Interpretations, hypotheticals, and/or directives, if used, are appropriate</td>
</tr>
<tr>
<td></td>
<td></td>
<td>12</td>
<td>Forms quick, solid working alliances with children and adults</td>
</tr>
</tbody>
</table>

**Comment on Interaction Skills, especially strengths and areas for growth:**

### Learning and Professional Skills

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
<th>#</th>
<th>Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>13</td>
<td>Critical and/or creative thinking skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>14</td>
<td>Relationships with staff, peers and professionals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>15</td>
<td>Conceptualizes cases, human problems and strengths</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16</td>
<td>Responsiveness to supervision; motivation to learn</td>
</tr>
<tr>
<td></td>
<td></td>
<td>17</td>
<td>Ethical conduct and a working knowledge of ethical codes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>18</td>
<td>Awareness of privilege and one’s own multicultural biases</td>
</tr>
<tr>
<td></td>
<td></td>
<td>19</td>
<td>Assumes complexity to understand diverse clients’ worldviews</td>
</tr>
<tr>
<td></td>
<td></td>
<td>20</td>
<td>Contributions based upon understanding of school or site culture</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21</td>
<td>Use of micro-skills and tape review</td>
</tr>
<tr>
<td></td>
<td></td>
<td>22</td>
<td>Initiative, self-care, meta-cognitive, and personal process skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>23</td>
<td>Use of emotional reactivity in relationships</td>
</tr>
<tr>
<td></td>
<td></td>
<td>24</td>
<td>Other:</td>
</tr>
</tbody>
</table>

**Comment on Learning and Professional Skills, especially strengths & areas for growth:**
Play Therapy and Child Advocacy Skills

<table>
<thead>
<tr>
<th>Midterm</th>
<th>Final</th>
<th>#</th>
<th>Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>25</td>
<td>Sets appropriate limits as needed with child, using ACT model</td>
</tr>
<tr>
<td></td>
<td></td>
<td>26</td>
<td>Accurately identifies themes in the child’s play and develops insight into the child’s world</td>
</tr>
<tr>
<td></td>
<td></td>
<td>27</td>
<td>Identifies own childhood issues that interfere with the child’s therapeutic process</td>
</tr>
<tr>
<td></td>
<td></td>
<td>28</td>
<td>Accurately reflects the child’s play</td>
</tr>
<tr>
<td></td>
<td></td>
<td>29</td>
<td>Serves as an advocate for child by successfully relaying pertinent information to parents/guardians, DFS, etc.</td>
</tr>
</tbody>
</table>

Comment on Play Therapy and Child Advocacy Skills, especially strengths and areas for growth:

Have you noticed any deficiencies that would hinder the student’s successful progress through the counselor training program or impede his or her professional development?

Yes_______ No_______

If yes, please describe:

Student Response:

Counselor Trainee Signature: __________________________ Date: ____________

Rater Signature: __________________________ Date: ____________
Included in the requirements for School Counselor certification under the Missouri Department of Elementary and Secondary Education, are intern’s successful scores on the Missouri School Counselor Evaluation (MSCE, or MEES).

The MSCE is completed three times each semester of internship, by both the site supervisor and university supervisor. Failure to have fully completed all formative and summative MCSEs will result in the intern being ineligible for Missouri School Counselor Certification.

The MSCE is completed by the intern’s supervisors through the Taskstream program. If you do not have access to Taskstream, contact your university supervisor or the Internship Coordinator before using a paper form to determine if another format is required. If/when Taskstream is replaced, your instructor will explain how the MSCE should be completed. If you do not receive these instructions, then inquire directly to your instructor or the Internship Coordinator.

• The first formative MSCE must be completed after the first six weeks of internship.

• The second formative MSCE must be completed after the first 12 weeks of internship.

• The summative MSCE must be completed by the 15th week of internship.

    (Students who are graduating should request their summative MCSEs to be completed at least one week earlier.)

Site supervisors are exempt from completing the Counselor Trainee Progress Assessment (CTPA).

Interns should remind their supervisors when the MSCE due dates are approaching and verify that they are complete.

Site supervisors must complete a DESE training on how to use the MSCE. The training is found here:

https://dese.mo.gov/college-career-readiness/school-counseling/counselor-educators

Upon completion of the training, supervisors then complete the Site Supervisor Training Completion Form (found at link above) to send to the MSU Internship Coordinator, and to retain in their own files. They may be asked to provide a copy of this document to DESE or their school administration as well.

Each School Counseling Intern will provide information about the MSCE and the required training to their site supervisor during the first meeting.

The MSCE evaluation form can be found here:
(Scroll to Missouri School Counselor Candidate Evaluation):
https://dese.mo.gov/college-career-readiness/school-counseling/counselor-educators

The evaluation is completed on Task Stream at this time. If you need a paper form, go to the link above to print a copy.

If a Time/Task Analysis is also required by your instructor, they will provide the form and instructions during internship class.
Missouri State University- Counseling Program

Six-Week Group Evaluation Form

Intern: ____________________________________________ SEM/YR: ___________

Type of Group: ______________________________________________________________

Criteria for selection of group members: __________________________________________

Group session dates: __________________________________________________________

Rate the following on a 1 – 5 Scale (1=needs improvement to 5=exceeds)

________ Purpose of group clearly defined (goals & objectives)

________ Permission forms/letters complete

________ Pre-group interview/screening completed for all group members

________ Invitation/reminders sent to all group members

________ Lesson plans (if appropriate)

________ Pre-test/post-test (if appropriate)

________ Assessment/Evaluation

________ Overall group experience

Other strengths or challenges for group not listed above:

Site Supervisor Signature: ____________________________ Date: ____________
Missouri State University- Graduate Counseling Program
Internship Site Visit Feedback Form-Supervisor Version

MSU Intern: __________________________________________ Semester/Year: ___________

Site: _________________________________________________ Site Visit Date: ___________

Site Supervisor: ___________________________________________________

Signature: _____________________________________________________________________

Missouri State University Faculty: _________________________________________________

What strengths did you observe in this intern?

What are some areas of continued growth you can recommend for this intern?

On a scale of 1-5 (with 1 low and 5 high), how did this intern compare to other MSU interns? __

Using the same scale, rank this intern compared to interns from programs other than MSU: ___

What suggestions do you have for improving the training that counselor trainees receive at Missouri State University?

Return this Site Visit Feedback Form to MSU faculty at the site visit, or email to the internship coordinator.

Thank you for hosting our interns.
Missouri State University-Graduate Counseling Program
Student Evaluation of Site Supervisor/Site Experience

Student Name: ________________________________________________
Sem/Yr: ________

Track: 
Clinical Mental Health _____ School _____

Course: 
Practicum _____ Internship _____

University Supervisor: ________________________________________________

Site Supervisor: ________________________________________________

Site Name: ________________________________________________

Site Address: ________________________________________________

Site Phone: __________________________ Site Email: __________________________

Total hours on site: ________________ Direct contact hours: ________________

Hours of individual supervision from Site Supervisor: ________________

Please answer check Y (Yes) or N (No) for the following questions. If you check N (No), please explain in the space provided under each question.

Y___ N___ 1. Was the orientation to the site that you received helpful?

Y___ N___ 2. Were the expectations at your site clearly explained?

Y___ N___ 3. Was your site supervisor available for consultation when needed?

Y___ N___ 4. Were you able to meet with your site supervisor for supervision for the required minimum amount of time each week? (1 hr/week)

Y___ N___ 5. Was the supervision that you received from your site supervisor helpful?

Y___ N___ 6. Were other professionals at the site helpful?
7. Were you given appropriate levels of responsibility?  Y___  N___

8. Did you receive adequate opportunities to engage in individual counseling?  Y___  N___

9. Did you receive adequate opportunities to engage in small group counseling?  Y___  N___

10. Did you receive opportunities to record counseling sessions?  Y___  N___

11. If you were unable to record client sessions, did your site supervisor provide adequate alternatives?  Y___  N___

12. Would you recommend this site to another student?  Y___  N___

Please comment on these aspects of your clinical experience:

3. What were the strengths of this site?

4. What were the weaknesses of this site?

Additional comments:

__________________________________________  __________________________
Signature of Student                           Date
Interim Agreement
Missouri State University - Counseling Program

Intern: ___________________________________________  Semester/Year: ______
Site: ___________________________________________________________________
Site Supervisor: _______________________

This agreement, made between (site)____________________ (site supervisor) ____________
and (student)_____________________ permits the counselor trainee (intern) to continue at the site to
provide continuity of care for clients, and to continue to accumulate interim (between semester)
supervised direct and indirect counseling service hours.

• The student intern must be in good standing, have accumulated the required minimum individual
supervision hours for the semester and continue to meet for weekly individual supervision during the
interim.

• The student intern will maintain all compliance documents including liability insurance, TB tests,
background checks and any additional required compliances throughout this interim period. Out of date
compliances will terminate this agreement.

• Student Interns working during the interim must agree to an “Incomplete” grade in the internship class
until the beginning of the next semester, or completion of required hours, if longer.

• It is understood that the field site clinical supervisor will continue to provide weekly face-to-face
supervision services for one hour per week during the interim (between-semester) period.

• It is understood that the student intern has accrued sufficient group supervision hours to average
minimum required group supervision over the interim period, and that the Missouri State University
counseling program faculty will not provide regularly scheduled supervision services during this period,
although the Internship Instructor/Supervisor will be available for consultation by phone during this time.

• It is understood that the site supervisor will contact the Missouri State University instructor and/or the
Practicum/Internship Coordinator if problems arise with the student intern’s work/services and that in
such cases the student intern may be requested to discontinue interim services at the discretion of the
instructor, and in consultation with the Practicum/Internship Coordinator, acting on behalf of the
counselor training program at Missouri State University.

• The student intern will document direct and indirect hours on the Weekly Progress Log, which the site
supervisor will sign weekly. These logs should clearly indicate the start and end date of the interim period
matching the dates below. The student intern submits signed originals to the course instructor for
completion of required documentation to remove the incomplete grade.

The period covered by this agreement begins on ___/___/___ and ends on ___/___/___

____________________________________________________________________________
Agency Administrator/Date  Site Supervisor/Date
____________________________________________________________________________
Student/Date.  Instructor/Date

Reviewed and approved for file by the Practicum/Internship Coordinator on: _____________ (Date)
Internship Video Consent Form  
Missouri State University  
Graduate Counseling Program

As part of its teaching curriculum, Missouri State University’s Counseling program requires counseling students to submit video recordings of counseling sessions they have facilitated so that faculty can evaluate the student's counseling skills and practice.

To assist in this student evaluation process, we are asking that you consent to the videotaping of your counseling session(s) with your counselor trainee (i.e., student counselor). Please complete the following to provide consent:

I__________________________________________ hereby give my permission to Missouri State University (“MSU”), and the agency or clinic in which my counseling sessions are being held to videotape my session with my counselor trainee, __________________________ for the purpose of assisting in the academic evaluation of my counselor trainee and their counseling skills and practice.

I understand that the videotaped sessions will be shared only with my counselor trainee and the faculty member(s) evaluating my counselor trainee’s counseling skills and practice. The videotaped sessions will not be used by persons other than those in training with the Counseling program at MSU, absent court requiring disclosure.

Additionally, the content of the counseling sessions will be confidential within the Counseling program to the fullest extent permitted by law. In that the videotaping is for educational and training, rather than therapeutic, purposes, the video recording(s) will not be included in my client records maintained by MSU or the agency at which I am being seen in a counseling capacity. All such video recordings will be destroyed after the semester in which they are used.

I understand and agree that no consideration will be furnished to me in exchange for my consent, and I agree that no representations or promises have been made to me for payment of any kind.

Client’s Name (print): _______________________________ Phone: ________________

Client Signature: ________________________________ Date: ________________
Counselor Trainee Name (print): ________________________________
Internship Instructor Name (print): ________________________________
Missouri State University-Graduate Counseling Program
Statement of Understanding/Handbook Receipt

I_________________________________ (print name) attest that I have read the **Practicum and Internship Handbook** including the forms, documents, information, and procedures contained within it.

I further attest that I have reviewed the ethical expectations and that I understand the professional responsibilities and behaviors that are required of me during my practicums and internships.

I understand my responsibility to follow the requirements and processes for applying to and participating in practicums and internships including (but not limited to) application deadlines, evaluations, and assignments.

I understand the ramifications of not adhering to these requirements may result in such consequences as my not participating in a required field experience to my being unable to obtain certification or licensure in my desired area.

I am aware that I may obtain clarification or get additional information with my practicum or internship instructor or the practicum and internship coordinator if needed.

____________________________________________________
Student Signature

_________________________ ____________________________
Date Signed

____________________________
Semester/Year