



Graduate Fieldwork Application for Trainees

(This page is to be completed by the Supervisor)

Student's Name: _____

Proposed Fieldwork Site: _____

Phone: _____

Proposed On-Site Supervisor:

Name: _____

Phone: _____

Email Address: _____ (for Dominican forms only)

Position/Title: _____

Degree: _____

License and license number: _____

ON-SITE SUPERVISOR'S NEEDS AND GOALS FOR FIELDWORK PLACEMENT:

1. List Trainee responsibilities for this fieldwork placement (e.g. staff meetings, number of client contact, hours expected, etc.).
2. List how this fieldwork site provides for training, supervisor and evaluation of trainee (e.g. case conferences, individual and group face-to-face supervision or contact and process notes, audio, videotape or direct observation).
3. State how you feel your professional expertise and training coincide with the trainee's needs in professional growth and skill development.
4. List those professional counseling competencies you feel the trainee will gain through supervision and the proposed fieldwork experience.



Supervision shall include at least one hour of direct supervisor contact for each week of experience claimed. A trainee shall also receive an average of at least one hour of direct supervisor contact for every five hours of client contact in each setting in which experience is gained. For the purposes of this section, "one hour of direct supervisor contact" means one hour face-to-face contact on an individual basis or two hours of face-to-face contact in a group of not more than eight persons. All experience gained by a trainee shall be monitored by the supervisor as specified in BBS regulations.

The on-site supervisor or fieldwork placement site shall be responsible for providing all supervision to the trainee. The Dominican fieldwork seminar instructors will provide supporting case consultation to the supervision provided by the on-site supervisor and fieldwork site.

NOTE: *The following forms are required for trainees who wish to count hours to meet BBS requirements: **Responsibility Statement for a Supervisor** form signed by their on-site supervisor from each fieldwork placement and a **Weekly Summary of Hours of Experience** form signed weekly by their supervisor. These forms must be kept by the student and after graduation from the Master's Program, the **Responsibility Statement for a Supervisor** form must be submitted to the BBS with the application for licensure as an MFT. Upon completion of supervised experience at each fieldwork placement, students must have their Supervisor complete a **Marriage, Family, Child Counselor Experience Verification** form which must be submitted with the application for licensure as an MFT. All forms are available at the department office.*

Proposed On-Site Supervisor's Signature

Date

Mailing address for Supervisor: _____

Student's Signature

Date

APPLICATION STATUS:

Fieldwork Placement: Approved Denied Pending

Director of Field Placement Signature
Department of Counseling Psychology

Date