UVM COUNSELING PROGRAM

Practicum/Internship Field Site Information Form

SITE INFORMATION						
Name of Agency/Scho	ool: Edmunds Middle School					
	Main Street, Burlington, VT 05401					
Website: Edmunds M	iddle School					
Phone Number: 802-8	364-8486					
Fax Number: 802-864	-2218					
Type of School:	☐ Elementary	Type of Agency:	☐ Community Counseling			
	⊠ Middle		☐ College Counseling			
	☐ Secondary		☐ Alcohol/Drug Counseling			
	☐ Public or ☐ Private		☐ Integrated Health/MH			
			☐ Other: Enter information			
Agency Administrator	/School Principal: Megan McDonough					
Phone Number: 802-864-8486						
Email Address: mmcd						
Contact Person: Brad	y Lozier					
Phone Number: 802-	864-8486					
Email Address: klozie	r@bsdvt.org					
PRACTICUM/INTERN	SHIP EXPERIENCE INFORMATION					
For K-12 school sites	only, are you available to host a student	for (check all that apply	v):			
	. 4-5 hrs per week, Spring only)		orox. 20-24 hrs/week across year)*			
_ : : delica (app. c		e (sp)				
*Note: For clinical me	ental health sites, it will be assumed that	this form is being com	oleted as an internship site			
	,	, ,	•			
Responsibilities of a p	practicum or internship student:					
	a practicum/internship student would be expected to	assume in your school/agency ar	nd identify client population(s) you serve)			
-consultation						
-classroom lessons						
	ership Team and AWOD					
-individual counseling						
	n crisis situations (speaking with upset s	tudent, observing the p	process)			
-small group counseli	_					
-participating in resto	rative circles					
Diagram almost with the se	6 4 h - 6 - 11		d a subtational a tra			
	f the following activities the practicum/i	·	·			
☐ Classroom guidance	☐ Family/couples counseling		ounseling - college age			
☐ Group counseling	☐ Individual counseling - children		ounseling - adults			
□ Consultation	Individual counseling - adolesce	nt □ Other (<i>plea</i>	se specify): Click or tap here to enter text.			
	150011151011					
SITE SUPERVISOR IN	IFORMATION	.6.1				
Check one:		If there is a second supervisor, check one:				
_	ental Health Counselor	☐ Licensed Mental Health Counselor				
	hool Counselor	☐ Licensed School Counselor				
☐ Psychologis		☐ Psychologist				
☐ Social Work		☐ Social Worker				
 ☐ Certified Drug and Alcohol Counselor ☐ Psychiatrist 		 ☐ Certified Drug and Alcohol Counselor ☐ Psychiatrist 				
□ E2ACHI9HUSE		T T E SVUHIBILISE				

Name of Site Supervisor: Brady Lozier

Graduate Degree(s) and Licenses Held: MEd in School Counseling, Cert in Ed. Administration

Position Title: School Counselor

Name of Second Site Supervisor: Pat Hulbert

Graduate Degree(s) and Licenses Held: MEd in School Counseling

Position Title: School Counselor

APPLICATION INFORMATION						
Internship Application Deadline: As required by UVM						
Internship Application Materials Required:	⊠ Cover Letter	⊠ Resi	ume 🔲 Site Application			
	\square Other: Click or tap here to enter text.					
	_	_	_			
Site Is Available for the Following Semester(s):	⊠ Fall	Spring	☐ Summer			
Are You Able To Accommodate Summer Only* Interns?						
*For students who have already completed 2 semesters of internship at another site						
Internship Provides Stipend: ☐ Yes ☒ No ☐ Possibly						
Other Relevant Application Information:						
Click or tap here to enter text.						
Where (to whom) to submit materials: to Brady Lozier: klozier@bsdvt.org						
where (to whom) to submit materials. to brady Lozier, Nozier w bsavt.org						
FORM COMPLETED BY						

Name: Brady Lozier

For office use only:

Date received/updated by the UVM Counseling Program 12/16/2019