## **UVM COUNSELING PROGRAM**

## Practicum/Internship Field Site Information Form

SITE INFORMATION	N			
Name of Agency/Sc	hool: U-32 Middle/High School			
	30 Gallison Hill Road, Montpelier, VT 05602			
Website: <u>U-32 Mido</u>	•			
Phone Number: 802				
Fax Number: 802-26	52-6979			
Type of School:	☐ Elementary	Type of Agency:	☐ Community Counseling	
,,	, ⊠ Middle	,, ,	☐ College Counseling	
	⊠ Secondary		☐ Alcohol/Drug Counseling	
	□ Private		☐ Integrated Health/MH	
	△ rubiic or ∟ riivate		☐ Other: Enter information	
Agangu Administrat	or/Cahaal Dringingly Stayon Dallingar Data		☐ Other. Effer information	
Phone Number: 802	or/School Principal: Steven Dellinger-Pate			
Email Address: sdpa	te@u32.org			
Contact Person: Lisa	a Lanlante			
Phone Number: 802	·			
Email Address: <u>llapla</u>				
Email Address. <u>liapi</u>	antewasz.org			
PRACTICUIVI/IINTER	RNSHIP EXPERIENCE INFORMATION			
For K 12 school site	s only are you available to best a student fo	or (chack all that apple		
	s only, are you available to host a student fo	·	, ,	
☐ Practicum (approx	k. 4-5 hrs per week, Spring only)		orox. 20-24 hrs/week across year)*	
* <u>Note</u> : For clinical n	nental health sites, it will be assumed that t	his form is being comp	oleted as an internship site	
Posponsibilities of a	practicum or internship student:			
	practicum or internship student. ies a practicum/internship student would be expected to ass	rume in vour school/agency a	nd identify client nonulation(s) you serve	
	ill school counselor responsibilities including			
communication, etc	•	5 post secondary plan	ining and parent, guardian	
communication, etc	•			
Please check which	of the following activities the practicum/int	ernshin student woul	ld participate in:	
□ Classroom guidance	☐ Family/couples counseling	•	counseling - college age	
☐ Group counseling	☐ Individual counseling - children		counseling - adults	
□ Consultation     □ Co			use specify): Click or tap here to enter text.	
	-			
SITE SUPERVISOR I	NFORMATION			
Check one:		If there is a second su	nervisor check one:	
	Mental Health Counselor	☐ Licensed Mental Health Counselor		
	School Counselor	☐ Licensed School Counselor		
☐ Psycholog		□ Psychologist		
☐ Social Wo		Social Worker		
	Drug and Alcohol Counselor	☐ Certified Drug and Alcohol Counselor		
☐ Psychiatri		☐ Psychiatrist		
i i sycillactist		L i sycinatiist		

Name of Site Supervisor: Nate Lovitz

Graduate Degree(s) and Licenses Held: MS in School Counseling from UVM

Position Title: High School Counselor

Name of Second Site Supervisor: Enter name

Graduate Degree(s) and Licenses Held: Enter information

Position Title: Enter position title

APPLICATION INFORMATION					
Internship Application Deadline: 1/10/2020					
Internship Application Materials Required:	⊠ Cover Letter	· ⊠ Resu	ume 🗌 Site Application		
	☐ Other: Click	or tap here to e	ter text.		
Site Is Available for the Following Semester(s):	⊠ Fall	☐ Spring	☐ Summer		
Are You Able To Accommodate Summer Only* I *For students who have already completed 2 se			site		
Internship Provides Stipend: $\square$ Yes $\boxtimes$ No $\square$ P	ossibly				
Other Relevant Application Information:					
Click or tap here to enter text.					
Where (to whom) to submit materials: Lisa Lapl	ante Student Se	rvices Director, <u>l</u>	laplante@u-32.org		
FORM COMPLETED BY	-				
Name: Linnea Jahn with information from Nate	Lovitz				

For office use only:
Date received/updated by the UVM Counseling Program 12/1/2019