SITE INFORMATION
Name of Agency/School: Colchester High School
Physical Address: 131 Laker Lane, PO Box 900 Colchester, VT 05446
Website: https://www.csdvt.org/chs/
Phone Number: 1-802-264-5700
Fax Number: 1-802-2645775
Type of School: ☒ Secondary
Type of Agency: ☒ Community Counseling
☐ College Counseling
☐ Alcohol/Drug Counseling
☐ Other:

Agency Administrator/School Principal: Heather Baron
Phone Number: 1-802-264-5700
Email Address: Heather.Baron@colchestersd.org

Contact Person: Jean Shea
Phone Number: 1-802-264-5700
Email Address: jean.shea@colchestersd.org

INTERNship EXPERIENCE INFORMATION
Responsibilities of a practicum/internship student:
(Briefly list the responsibilities a practicum/internship student would be expected to assume in your school/agency and identify client population(s) you serve)
- individual meetings (social emotional, college, post-secondary planning)
- small group instruction (organization/time management, mindfulness)
- large group instruction (college, post-secondary planning)
- scheduling
- family and community outreach
- high school (grade 9-12)

Please check which of the following activities the practicum/internship student would participate in:
☒ Classroom guidance
☒ Group counseling
☒ Consultation
☐ Family/couples counseling
☐ Individual counseling - children
☐ Individual counseling - adolescent
☐ Individual counseling - college age
☐ Individual counseling - adults
☒ Other (please specify): Scheduling & Family Outreach

SITE SUPERVIsOR INFORMATION
Check one:
☐ Licensed Mental Health Counselor
☒ Licensed School Counselor
☐ Psychologist
☐ Social Worker
☐ Certified Drug and Alcohol Counselor
☐ Psychiatrist

If there is a second supervisor, check one:
☐ Licensed Mental Health Counselor
☐ Licensed School Counselor
☐ Psychologist
☐ Social Worker
☐ Certified Drug and Alcohol Counselor
☐ Psychiatrist

Name of Site Supervisor: Robert Hall
Graduate Degree(s) and Licenses Held: Licensed School Counselor
Position Title: Guidance Team Leader

Name of Second Site Supervisor:
Graduate Degree(s) and Licenses Held:
Position Title:

APPLICATION INFORMATION Internship
Application Deadline: Internship
Application Materials Required: ☒ Cover Letter ☒ Resume ☐ Site Application ☐ Other:

Site Is Available for the Following Semester(s): ☒ Fall ☒ Spring ☐ Summer ☐ Academic Year

Other Relevant Application Information:

Where (to whom) to submit materials: Jean Shea, Jean.Shea@colchester sd.org

FORM COMPLETED BY
Name: Julie Welkowitz, with information from Jean Shea

For office use only:
Date received/updated by the UVM Counseling Program 1/9/2019