UVM COUNSELING PROGRAM

Practicum/Internship Field Site Information Form

SITE INFORMATION				
Name of Agency/Scho	ol: CHOICE Academy/Washingto	on County Mental Health Servic	es	
- ··	South Barre Road, Barre, VT 05	•		
•	emy - Washington County Ment			
Phone Number: 802-4				
Fax Number: 802-476				
Type of School:	☐ Elementary ☐ Middle ☐ Secondary	Type of Agency:	 □ Community Counseling □ College Counseling □ Alcohol/Drug Counseling □ Public or □ Private ☑ Other: Alternative 	
		Therapeutic Education Program for Youth with Emotional and Behavioral Challenges		
Agency Administrator, Phone Number: 802-4 Email Address: <u>Angela</u>		nger-Auer, LCMHC		
	-			
Contact Person: Ange Phone Number: 802-4	79-0012			
Email Address: Angela	f@wcmhs.org (Email is preferre	ed contact)		
INTERNSHIP EXPERIE				
(Briefly list the responsibilities Interns at our program These include facilitat members of the stude	n are given a small caseload (2-3 ing therapy groups, one on one nts sending school, parents, etc	sessions with their clients, facili	responsibilities that a clinician has. itating team meetings with es access resources both within	
behavioral challenges	that impede their ability to acco	ess their education in a mainstre	ents 10-22 who have emotional and eam setting. The students that we	
	-	ntal health diagnosis, medication substance use issues and pover		
Please check which of	the following activities the prac	cticum/internship student would	d participate in:	
	☐ Family/couples counse	•	ounseling - college age	
□ Group counseling	☑ Individual counseling -		ounseling - adults	
□ Consultation	☑ Individual counseling -	adolescent	se specify):	
	TORNAL TION			
SITE SUPERVISOR IN	-ORMATION	15.1		
Check one:			If there is a second supervisor, check one:	
☐ Licensed Mental Health Counselor			☐ Licensed Mental Health Counselor	
☐ Licensed School Counselor			☐ Licensed School Counselor	
☐ Psychologist			☐ Psychologist	
☐ Social Worker			☐ Social Worker ☐ Cortified Drug and Alcohol Counselor	
☐ Certified Drug and Alcohol Counselor☐ Psychiatrist		_	☐ Certified Drug and Alcohol Counselor☐ Psychiatrist	

Name of Site Supervisor: Angela Fagginger-Auer, LCMHC Graduate Degree(s) and Licenses Held: MA in CMHC Position Title: Program Coordinator 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: Rolling Admissions (although helpful to know earlier in the Spring) Internship Application Materials Required: □ Resume ☐ Site Application ☐ Other: Click or tap here to enter text. Other Relevant Application Information: Rolling Admission Process for Internship Applications * First Come, First Serve * Where (to whom) to submit materials: mail to Angela Fagginger-Auer, 579 South Barre Rd., Barre, VT 05641 or email to:

FORM COMPLETED BY

AngelaF@wcmhs.org

Name: Liana Redmond (based on information from Angela Fagginger-Auer)

For office use only:

Date received/updated by the UVM Counseling Program November 2021