

# UVM COUNSELING PROGRAM

## Practicum/Internship Field Site Information Form

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### SITE INFORMATION

Name of Agency/School: Essex High School

Physical Address: 2 Educational Drive, Essex Junction, VT 05402

Website: [Essex High School](#)

Phone Number: 802-879-7121

Type of School: ☐ Elementary  
☐ Middle  
☒ Secondary  
☒ Public or ☐ Private

Type of Agency: ☐ Community Counseling  
☐ College Counseling  
☐ Alcohol/Drug Counseling  
☐ Integrated Health/MH  
☐ Other: Enter information

Agency Administrator/School Principal: Tamara Parks & Donald Van Nostrand

Phone Number:

Email Address:

Contact Person: Andrew Roy

Phone Number: 802-879-7111

Email Address: [aroy@ewsd.org](mailto:aroy@ewsd.org)

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### PRACTICUM/INTERNSHIP EXPERIENCE INFORMATION

For K-12 school sites only, are you available to host a student for (check all that apply):

☐ Practicum (approx. 4-5 hrs per week, Spring only) ☐ Internship (approx. 20-24 hrs/week across year)\*

**\*Note:** For clinical mental health sites, it will be assumed that this form is being completed as an internship site

Responsibilities of a practicum or internship student (please differentiate internship vs. practicum responsibilities):

(Briefly list the responsibilities a practicum/internship student would be expected to assume in your school/agency and identify client population(s) you serve)

Please check which of the following activities the practicum/internship student would participate in:

<input checked="" type="checkbox"/> Classroom guidance	<input type="checkbox"/> Family/couples counseling	<input type="checkbox"/> Individual counseling - college age
<input checked="" type="checkbox"/> Group counseling	<input type="checkbox"/> Individual counseling - children	<input type="checkbox"/> Individual counseling - adults
<input checked="" type="checkbox"/> Consultation	<input checked="" type="checkbox"/> Individual counseling - adolescent	<input type="checkbox"/> Other (please specify): Click or tap here to enter text.

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### 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: Varies by academic year; there are multiple qualified supervisors

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### APPLICATION INFORMATION

Internship Application Deadline: Enter date

Internship Application Materials Required: ☒ Cover Letter ☒ Resume ☐ Site Application

☒ Interview Required   ☐ Other: Click or tap here to enter text.

Site Is Available for the Following Semester(s):   ☒ Fall                      ☒ Spring                      ☐ Summer  
(Only two semesters of internship are required)

Internship Provides Stipend:   ☐ Yes   ☐ No   ☐ Possibly

Other Relevant Application Information:  
Click or tap here to enter text.

Where (to whom) to submit materials: Andrew Roy  
Email/Website: [aroy@ewsd.org](mailto:aroy@ewsd.org)

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FORM COMPLETED BY

Name: Liana Redmond

*For office use only:*

Date received/updated by the UVM Counseling Program   1/15/2021