## **UVM COUNSELING PROGRAM**

## Practicum/Internship Field Site Information Form

SITE INFORMATION	N			
		ing Center, NCSS Inc.		
Physical Address: Mo		• •		
Website: NCSS - SOA		<u>:er</u>		
Phone Number: 802 Fax Number:	-527-7514			
-Type of School:	<ul><li>☑ Elementary</li><li>☑ Middle</li><li>☑ Secondary</li><li>☐ Public or ☐ Private</li></ul>		Type of Agend	y: ⊠ Community Counseling □ College Counseling □ Alcohol/Drug Counseling □ Integrated Health/MH ⊠ Other: DA Community MH
Contact Person: Sara				
Phone Number: 802				
Email Address: <u>Sarah</u>	n.Kenny@ncssin	c.org		
PRACTICUM/INTER	NSHIP EXPERIE	NCE INFORMATION		
For K-12 school sites	only, are you av	vailable to host a stud	ent for (check all tha	apply):
$\square$ Practicum (approx.	4-5 hrs per week,	Spring only)	☑ Internship (appr	ox. 20-24 hrs/week across year)*
* <u>Note</u> : For clinical m	ental health site	es, it will be assumed t	hat this form is being	completed as an internship site
Please check the foll	lowing populatio	on(s) that your organiz	ation serves:	
<ul><li>☑ Children</li><li>☑ A</li><li>enter text.</li></ul>	dolescents	☐ College Age	☐ Adults	☐ Other (please specify): Click or tap here to
Responsibilities of p (Briefly list expectations and abuse, etc.)			I please identify any <u>unique</u> o	lient population(s) you serve – i.e., trauma, substance
The Clinica students so communica appropriate both individuate in individuate community participate	cial, emotional ate closely with a supports for sudual and group Medical Recordal client and school partners. Ther	and behavioral well internal members of access. The clinical modalities, and be to disystem. Additional hool-wide treatment e will be additional onings or access psychological entitles.	being. The clinical f the students' acad intern will provide rained on subsequently, clinical intern we team meetings, as apportunities through	orts/interventions, which promote intern will also collaborate and emic and behavior team to ensure most direct therapeutic supports utilizing at required documentation within the ill have the opportunity to participate well as collaborate with local shout the year for the intern to trials onsite as they pertain to her role
Please check which opercentage:	of the following	activities the practicu	m/internship student	would participate in and indicate a
*Note: Individual co	unseling and a n	ninimum of 20 hours o	f group counseling a	re required for all internship sites.
<ul><li>☑ Individual Counseling:</li><li>☑ Group Counseling: 10</li><li>☐ Family/Couples Counseling:</li></ul>	-15 %	<ul><li>☑ Classroom Guidane</li><li>☐ Workshop(s) Facili</li><li>☐ Consultation: Ente</li></ul>		<ul><li>✓ Assessment: 10 %</li><li>☐ Intake: Enter %</li><li>☐ Case Management: Enter %</li></ul>
☐ Other (please specify	& include percentag	e): Click or tap here to ent	er text.	

## SITE SUPERVISOR INFORMATION Name of Site Supervisor(s): 1. Christie Moffett, 2. Mary Gratton, 3. Sarah Kenny Graduate Degree(s) and Licenses Held: Christie Moffett MS; Mary Gratton MS, LADC and Sarah Kenny MA Position Title: Enter title Field Discipline (CMH, SW, Psychologist, SC, SAP): CMH Years in Field Post Licensure: Mary Gratton 1 year APPLICATION INFORMATION Internship Application Deadline: April 4, 2022 Internship Application Materials Required: □ Resume ☐ Site Application ☐ Other: Click or tap here to enter text. Open House/Information Session? ☐ Yes ☐ No If yes, please provide more information: Click or tap here to enter text. Site Is Available for the Following Semester(s): ☐ Fall ☐ Spring ☐ Summer Internship Site Provides Compensation/Stipend: ☐ Yes ☒ No ☐ Possibly Other Relevant Application Information: Click or tap here to enter text.

Where (to whom) to submit materials: Application materials can be sent directly to Sarah Kenny

FORM COMPLETED BY

Name: Christie Moffett

For office use only:

Date received/updated by the UVM Counseling Program 12/7/2021