

UVM COUNSELING PROGRAM

Practicum/Internship Field Site Information Form

SITE INFORMATION

Name of Agency/School: Northern Vermont University Johnson Wellness Center

Physical Address: 337 College Hill Johnson VT

Website: Northern Vermont University Johnson Wellness Center

Phone Number: 802-635-1265

Fax Number: **Enter fax number**

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**

Contact Person: Kate McCarthy

Phone Number: (802) 635-1458

Email Address: Kathleen.mccarthy@northernvermont.edu

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*

Please check the following population(s) that your organization serves:

☐ Children ☐ Adolescents ☒ College Age ☐ Adults ☐ Other (please specify): **Click or tap here to enter text.**

Responsibilities of practicum/internship student:

(Briefly list expectations and responsibilities of practicum/internship student and please identify any unique client population(s) you serve – i.e., trauma, substance abuse, etc.)

Clinical Experience:

The intern will gain exposure to a wide range of clinical issues which may include: adjustment reactions, depressive disorders, anxiety disorders, eating disorders, response to trauma, sexual orientation issues, couples counseling, family of origin issues, drug and alcohol abuse and personality disorders. The setting lends itself well to the intern's exploration of different clinical orientations. Interns are encouraged to develop their own style; this professional growth is supported by supervision. Interns receive experience collaborating with other college offices and local agencies to coordinate care and best serve their clients. Interns are expected to keep up to date charts and are provided training and guidance around documentation when needed.

Outreach Opportunities:

Interns usually become involved in at least one outreach activity such as a residence hall floor or lobby talk, an awareness campaign, hosting an event info table or a support group on a chosen topic. Interns are encouraged to explore their own areas of interest when designing group and outreach opportunities.

Please check which of the following activities the practicum/internship student would participate in and indicate a percentage:

**Note: Individual counseling and a minimum of 20 hours of group counseling are required for all internship sites.*

☒ Individual Counseling: **50 %** ☒ Classroom Guidance/Instruction: **10 %** ☐ Assessment: **Enter %**
☒ Group Counseling: **10 %** ☒ Workshop(s) Facilitation: 25% ☒ Intake: **5 %**
☐ Family/Couples Counseling: **Enter %** ☐ Consultation: **Enter %** ☐ Case Management: **Enter %**

☐ Other (please specify & include percentage): **Click or tap here to enter text.**

SITE SUPERVISOR INFORMATION

Name of Site Supervisor(s): Kate McCarthy and Elliott Buelter
Graduate Degree(s) and Licenses Held: **Kate - MSW, MPH, LICSW; Elliott - MSW, LICSW**
Position Title: **Kate – Director; Elliott - Clinical Counselor**
Field Discipline (CMH, SW, Psychologist, SC, SAP): **Social Work**
Years in Field Post Licensure: **Kate 9; Elliott 1**

APPLICATION INFORMATION

Internship Application Deadline: **February 15, 2022**

Internship Application Materials Required: ☒ Cover Letter ☒ 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: Kate McCarthy

FORM COMPLETED BY

Name: **Enter name**

For office use only:

Date received/updated by the UVM Counseling Program 11/29/2021