

# UVM COUNSELING PROGRAM

## Practicum/Internship Field Site Information Form

### SITE INFORMATION

Name of Agency/School: Washington County Mental Health Services – Polaris Adolescent & Family Dialectical Behavior Therapy (DBT) Intensive Outpatient Program (IOP)

Physical Address: 34 Barre Street, Montpelier, VT 05602

Website: [www.wcmhs.org](http://www.wcmhs.org)

Phone Number: 802-828-3983

Fax Number: 802-223-0842

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: Rebecca White

Phone Number: 802-828-3983

Email Address: [rebecca.white@wcmhs.org](mailto:rebecca.white@wcmhs.org)

### 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): Family

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.)

- Participate in training related to DBT treatment including reading, attending in-program training, observe groups and sessions
- Participate in treatment team meeting (Tuesdays 1-2)
- Participate in DBT consultation meeting (Thursdays 1-2)
- Facilitate DBT skills groups
- Facilitate group therapy (expressive therapy, supportive counseling, activity-based groups)
- Observe multi-family DBT skills group
- Provide individual and family DBT therapy to 1-3 IOP clients
- Provide outpatient DBT therapy for adolescent (number of clients depends on interest and availability)
- Coordinate with outpatient providers
- Complete all documentation in timely manner
- Participate in weekly individual supervision

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: **20-25%** ☐ Classroom Guidance/Instruction: **Enter %** ☒ Assessment: **5-10%**  
☒ Group Counseling: **30-35%** ☐ Workshop(s) Facilitation: **Enter %** ☐ Intake: **Enter %**

☒ Family/Couples Counseling: **20-25%**

☒ Consultation: **5-10%**

☒ Case Management: **5-10%**

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

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## SITE SUPERVISOR INFORMATION

Name of Site Supervisor(s): **Rebecca White**

Graduate Degree(s) and Licenses Held: **MS, LCMHC**

Position Title: **Director**

Field Discipline (CMH, SW, Psychologist, SC, SAP): **CMH**

Years in Field Post Licensure: **6**

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## APPLICATION INFORMATION

Internship Application Deadline: **Program is year-round and can accept interns at any time if there is space and it is the right fit.**

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: Rebecca White: [rebecca.white@wcmhs.org](mailto:rebecca.white@wcmhs.org)

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## FORM COMPLETED BY

Name: Rebecca White, LCMHC

*For office use only:*

Date received/updated by the UVM Counseling Program 2/1/2022