**Doctoral Counseling/Research/Professional**

 **Internship Contract**

 **North Carolina State University**

 **Counselor Education Program**

This contract outlines the primary expectations for the Doctoral Counseling/Research/Professional Internship student and the Internship site supervisor. Please read to become familiar with the basic process and requirements of the Doctoral internship (ECD 850) in the Counselor Education program. The Contract contains 4 parts: Part I- An Overview of Expectations; Part II- Site Supervisor Information; Part III- Internship Instructor Information, and Part IV. Doctoral Student Information. After reviewing all items, if you agree to the contract, please sign and date where a signature is requested at the end of the document. The Doctoral Student will complete his/her part, take the paperwork to the Site Supervisor, bring it to his/her Internship instructor, and ultimately all paperwork will end up with the Clinical Coordinator who will file the contract in the student’s clinical file.

**Part I- Overview**

**1.Hours**

 **For Counseling/Research/Professional Internship**: For the purpose of this contract and this internship experience, doctoral students are required to complete 300 hours of counseling, research, or professional experiences. If the internship is counseling focused, the delegation of direct and indirect service hours are to be negotiated by the supervisor, Internship course instructor, and doctoral student intern

 **Direct client contact hours** is defined by CACREP as interaction with clients that includes the application of counseling, consultation, or human development skills. In general, the term is used to refer to time spent by internship students working directly with clients. Examples of direct client contact are a.) Individual counseling, b.) group counseling c.) psycho-education groups or classroom guidance, and d.)parent or family meetings/counseling. All activities that are not applicationsof counseling, consultation or human development skills will be counted as **in-direct** or **non-direct contact hours/service.**

 **2. Setting goals and orienting the doctoral student to the Internship Experience**

 The Site Supervisor of the internship will collaborate with the student in developing goals for the Internship experience.

 The Site Supervisor will provide an orientation of the site/experience to the doctoral student. This will involve general information, an understanding of the structure and roles of the experience, and an introduction of the student to individuals whom he/she will work with.

 **3.Supervision**

 The Site Supervisor will need to spend a minimum of one hour a week in direct supervision of the Doctoral internship student. As the experience progresses the supervisor will consult with the student on any professional concerns that may arise. The student will receive constructive feedback on his/her performance. At the university, the student interns will receive on-going regularly scheduled group supervision in a class for which they are registered, facilitated by a program faculty member (the instructor of ECD 850).

**4.Professionalism and Ethical behavior**

The site and university supervisor will model professional and ethical behavior (e.g. confidentiality and limits to confidentiality, recognition of qualifications and limitations, record keeping , dual relationships, self awareness and monitoring etc.) Students need to be aware and behave in accordance with the American Counseling Association Code of Ethics and discuss with their site supervisors any ethical guidelines/codes specific to their teaching experience. Students are expected to exhibit professional during their internship experience.

**5.Contacts between the Site and University Supervisor:**

The Internship Instructor will reach out to the Site Supervisor throughout the semester to check on the progress of the doctoral student. Contact will be made by e-mail or by phone to schedule visits if any concerns arise.

**6.Evaluation:**

The Site Supervisor will provide on-going feedback to the student concerning his/her performance during the internship experience. The students will also get on-going feedback from their Internship Instructor.

The Site Supervisor and University Supervisor/Instructor will evaluate the Internship student at mid semester and end of the semester. During Internship, the Site Supervisor will complete the mid and end of the semester evaluations and go over the feedback with the student interns. They will then send the evaluation to the internship instructor. The Counselor Education Program’s student evaluation form is called The Evaluation of the Doctoral Student
Counseling/Research/Professional Intern.

**Part II. –Site Supervisor Information** (to be completed by Site Supervisor)

1. Name of North Carolina State University Counselor Education Program Internship Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name of Site Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Site Supervisor Position/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Name of Site (Institution or Agency):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Site Supervisor’s Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Site Supervisor’s Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Site Supervisor’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Site Supervisor’s Highest Degree Completed (MA, MS, EdS, PhD, MD): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Does Site Supervisor have a masters degree in counseling or counseling related field?\_\_\_\_\_\_\_\_\_\_\_\_(If a School Counselor, must have a NC school counseling license.)

10. Does Site Supervisor have a minimum of two years of pertinent professional experience in the program area in which the student is completing clinical field experience (e.g. school, college, community agency?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Credentials of Site Supervisor: Please spell out acronyms

* Licensure: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Certification(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. Years of Post-Master’s Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

13. Years of Counseling Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14. Site Supervisor: Educational Background (chronological order beginning with most recent training.)

Name of Institution Degree/Year Title of Program

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

15. Professional Experience (chronological order beginning with most recent experience)

Job Titles/Duties Year/Dates

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16. Does the Site Supervisor verify that the NCSU Counselor Education student will be able to complete the following:

 300 hours of counseling/research/or professional experience

(If a counseling internship, direct and indirect services hours will be negotiated)\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1 hour of weekly supervision\_\_\_\_\_\_\_\_\_\_\_\_

Site Supervisor will evaluate the student at mid-term and the end of the Internship\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site Supervisor Signature Date

**Part III- ECD Internship Instructor (University Supervisor) Information**

To be completed by Instructor

1.Instructor Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Instructor Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.Instructor E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Instructor University Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.Instructor Signature: The Internship instructor must read the following and initial and sign at the end if in agreement.

* The student’s course instructor has approved the above stated Internship experience.\_\_\_\_\_\_\_\_\_\_\_\_\_\_(initial signifying agreement)
* The Instructor approves the Site Supervisor’s credentials as being in counselor or Counseling related preparation \_\_\_\_\_\_\_\_(initial)
* The NCSU Counselor Education Internship instructor agrees to contact the Site Supervisor during the Internship semesters by phone, e-mails, and/or visit/s to assist in monitoring student progress.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(initial)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ECD 850 Internship Instructor Signature Date

**Part IV.- Student Information (**To be completed by Student)

1.Doctoral Internship Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.Student Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.Student E-Mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.Student Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Statement of Good Standing:

Place a check on the line for each statement that is true; write an explanation for items that are not checked.

\_\_\_\_\_As a student, I have never had a formal disciplinary charge against me by NCSU or any college or university, and there are no pending student misconduct charges against me. (If yes, please provide full details on a separate sheet. A disciplinary history does not necessarily disqualify an applicant.)

\_\_\_\_\_I have never been diagnosed or treated for a physical or emotional problem that would interfere with my roles and duties as a counselor. (If yes, please provide full details on a separate sheet.)

\_\_\_\_To the best of my knowledge, I have no attitudes that would interfere with my ability to work with or cause me to discriminate against clients upon the basis of race, color, religion, creed, sex, national origin, age, disability, veteran status, sexual orientation, or socioeconomic status.

\_\_\_\_I have never been convicted of a felony in a court of law (NOTE: You may be required to complete and pay for a criminal background check at the request of the school system or other site in which you work (as a paid or unpaid employee). If yes, please provide full details on a separate sheet.)

\_\_\_\_\_I am neither under the influence of illegal drugs nor participating in the distribution/sale of illegal drugs; and will not, while I am a Doctoral student in the Counselor Education Program, use illegal drugs or participate in the distribution/sale of illegal drugs.

\_\_\_\_\_I agree to inform the Counselor Education Program if, while I am a Doctoral student in the Counselor Education Program, I am charged with any violations of the NCSU Code of Student Conduct; charged by any university representative with a violation of any disciplinary code; or charged with any violations of federal, state, or local law.

\_\_\_\_I agree to inform the Counselor Education Program if I am dealing with a mental health concern that would put myself or my clients at my Practicum or Internship site at risk.

Note: The Counselor Education Program as part of the application process checks with other University programs (i.e .the Office of Student Conduct) regarding applicant behavior/conduct on campus.

Ethical Guidelines:

Place a check on the line to indicate you plan to adhere to each guideline.

\_\_\_\_\_I plan to uphold confidentiality as well as the limits to confidentiality.

\_\_\_\_\_I am aware of the limits to my training and abilities and plan to see assistance with supervisors when an internship situation is beyond my abilities and training.

\_\_\_\_\_I will identify myself as a counselor-in-training and not misrepresent myself.

\_\_\_\_\_I will accurately and reliably maintain written and other records require by my site.

\_\_\_\_\_I will refrain from counseling people with whom I have other types of relationships. (I will avoid dual relationships.)

\_\_\_\_\_Under no circumstances will I become involved in a sexual or romantic relationship with clients at my site and I will not engage in sexual harassment.

\_\_\_\_\_I will monitor my own emotional and physical status and practice self awareness to avoid any adverse impact on my clients.

\_\_\_\_\_I will discuss ethical standards with my supervisors.

**By signing below I affirm that I have provided full and truthful details on this document as well as agreeing that I will adhere to all of the ethical guidelines listed above and in the Internship Handbook. I understand this contract and will uphold this contract to the best of my ability.**

**Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Site Supervisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Internship Instructor (ECD 850) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**