

MASTER OF ARTS IN PROFESSIONAL COUNSELING
or
**MASTER OF SCIENCE IN MARRIAGE AND FAMILY
THERAPY**

**SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY GRADUATE PROGRAM IN COUNSELING**

Letter to the Agency and the Field Supervisor

Through the Master of Arts in Professional Counseling or Master of Science in Marriage and Family Therapy, Texas Wesleyan students become trained mental health counselors who are competent in today's multi-cultural society. Graduates from this program are eligible to meet requirements to become licensed professional counselors (LPC) and licensed marriage and family therapists (LMFT) in the state of Texas. Texas Wesleyan is the only university in Tarrant County that provides this opportunity.

As you know, an integral part of this process includes a supervised practicum field experience completed consecutively. We appreciate your dedication to providing mental health services to the community and its willingness to train and supervise graduate students desiring a career in this field as well. Enclosed is a Practicum Site Orientation Packet with the necessary application forms.

On behalf of the Texas Wesleyan University Graduate Program in Counseling, I want to thank you for taking time and interest in this endeavor and look forward to an on-going relationship in this vital service to our graduate students and community.

*Linda Metcalf, PhD
Director of Graduate Counseling Program
817-531-7530
lmetcalf@txwes.edu*

PRACTICUM SITE ORIENTATION PACKET

SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY GRADUATE PROGRAM IN COUNSELING

Enclosed in this packet are application/information forms to qualify as a practicum site. **Please return completed *original* forms 1-3, keeping copies for your records.** Once forms 1-3 are filed, all Wesleyan students seeking internship will provide the forms pertinent (Forms 4-8) for individual placement at the time of acceptance. If several Wesleyan interns are accepted by your facility, ***it is not necessary to duplicate all forms.*** **If not previously submitted,** Form 3 is for **each** designated Field Supervisor. When acceptance occurs, Forms 4 and 5 are completed by the Field Supervisor and intern.

Form 1	Agency/Practice Affiliation Application
Form 2	Practicum Site Agreement*
Form 3	Field Supervisor Approval Application
Form 4	Field Supervisor Agreement
Form 5	Waiver of Liability
Form 6	Statement of Mutual Responsibilities
Form 7	Field Supervisor Mid-Term Evaluation
Form 8	Field Supervisor Final Evaluation
Form 9	Corrective Action Contract (<i>Only if needed</i>)

***Practicum Site Agreement (Form 2) will be signed by the Texas Wesleyan Clinical Director and returned to you as practicum site confirmation.**

Each graduate counseling student will contact a prospective site well in advance to complete interview/registration procedures. The practicum instructor-supervisor will be contacting each of their student's practicum site for follow-up to answer any questions.

Thank you for your kind consideration,

Linda Metcalf

Linda Metcalf, PhD
Director of Graduate Counseling Program
817-531-7530
lmetcalf@txwes.edu

Please return via applicant or mail to

Texas Wesleyan University
Community Counseling Center
3110 E. Rosedale
Fort Worth, Texas 76105-1536
ATTN: Scott Methvin, Clinical Director
smethvin@txwes.edu

AGENCY/PRACTICE AFFILIATION APPLICATION

SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY GRADUATE PROGRAM IN COUNSELING

Date of Application: ____ / ____ / ____

Name of person completing form: _____

Agency/Practice Name: _____

Agency/Practice Address: _____

Agency/Practice Phone: ____ - ____ - ____ Fax: ____ - ____ - ____

Agency/Practice E-mail: _____

How long has agency been in existence? _____

Main contact person at agency/practice: _____

Agency/Practice Director/Coordinator: _____

General agency/practice Information

A. Services your agency offers:

- Intake/Assessment Individual Counseling Group Counseling
- Couples Counseling Family Therapy Career Counseling Parenting
- Consulting Psychological testing Workshop/training Crisis Intervention
- Divorce Counseling Adoption Counseling Chemical Dependency
- Grief/loss Child/Adolescent Other _____

B. In what areas of your agency/practice will the graduate counseling student(s) be involved?

- Direct service Agency programs Administrative Board/Committee
- Staff training

C. Number of openings for field supervision in: Spring ____, Summer ____, Fall ____

D. Which methods of training/feedback are provided to evaluate the student's progress toward professional goals and objectives?

- Videotape work and review
- Audio tape review
- Co-therapy or practice
- Observation by experienced practitioners
- Other (specify) _____

Practicum students should also have the opportunity to carry their own caseload. Are there sufficient numbers of cases for the student to be involved? _____Yes _____No

Field Supervisor Information

The title “field supervisor” designates those who supervise activities of the counseling students while at the site location. **It is NOT necessary the Field Supervisor be a Board Approved Supervisor.** Field supervisors facilitate the synthesis of theory and practice and provide opportunities for graduate counseling students to complete the learning objectives of the field practicum. **Field supervisors must:**

Possess a Master degree in Social Work OR Master degree in the clinical *counseling* field (M.Ed, M.S, M.A), or Doctorate in the clinical *counseling* field; AND possess *Texas* licensure (LPC, LCSW, LMSW, LMFT, Licensed Psychologist); **Psychiatrists and LCDC’s alone are ineligible as field supervisors.**

- Have at least two years of postgraduate experience in *supervision* OR have been in social work or counseling *practice* for three years following completion of the Master/Doctoral degree;
- Have training AND/OR significant experience in direct practice to supervise/direct practicum graduate counseling students.

List: _____

Please list the names and credentials of those individuals who desire to be considered for approval as field supervisors.

Prospective field supervisors:

Credentials:

Please list the names and credentials of those individuals who are *Texas Board approved supervisors* that may consider supervising post-graduate interns.

Texas Board approved supervisors:

Credentials:

Director/Coordinator **signature:** _____ / _____ / _____
(Date)

PRACTICUM SITE AGREEMENT

SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY
GRADUATE PROGRAM IN COUNSELING

This agreement is made on ____/____/____ between _____
(Agency/practice)

and Texas Wesleyan University for the purpose of providing qualified graduate counseling students in a graduate counseling program with practicum experience in the field of counseling. The site will provide a *minimum* of ____ hours per week during Summer semester (14 hours is ideal total), and ____ hours per week during Spring/Fall semester (11 hours is ideal total) of practicum experience for the duration of the agreed upon semester period(s) to be negotiated between the agency and graduate counseling student at the time of formal acceptance.

The Practicum site agrees:

- To assign a field supervisor who has appropriate credentials (LPC, LMSW, LCSW, LMFT, Psychologist) and time for training;
- To provide opportunities for the graduate counseling student to engage in a variety of counseling activities under supervision and provide on-going evaluation of the student's performance (one hour per week minimum of face-to-face supervision);
- To provide the graduate counseling student with adequate workspace, telephone, office supplies to conduct counseling activities in a professional manner;
- To provide supervisory contact which includes some examination of the graduate counseling student's work using observation, and/or live supervision and;
- To provide written evaluation of the graduate counseling student based upon criteria established by the Texas Wesleyan University Graduate Counseling Program.

Texas Wesleyan University Agrees:

- To assign a practicum instructor to facilitate communication between Texas Wesleyan University and the site;
- To notify the student that he/she must adhere to the administrative policies, rules, standards, schedules, and practices of the site;
- That the practicum instructor shall be available for consultation with both Field Supervisor and graduate student and shall be immediately notified should any change in relation to the graduate student, site, or University occur and;
- That the university practicum instructor is responsible for practicum grade assignment.

This is a non-binding agreement that documents an initial understanding between Texas Wesleyan University and the agency/practice providing practicum training. The purpose of this agreement is twofold: first, to serve as documentation for the Texas Wesleyan University Graduate Program in Counseling to describe the nature of training this graduate student is

receiving (and later as reference on internship and licensure applications); and secondly, to establish initial consensus between the training graduate student and the practicum agency/practice about their responsibility to each other.

(Agency Director/Coordinator **signature**)

_____/_____/_____
(Date)

(Texas Wesleyan University Community Counseling Center Clinical Director)

_____/_____/_____
(Date)

NOTE: Graduate counseling student and Field Supervisor will communicate to the practicum instructor regarding progress, problems, and performance evaluations. If you have any questions, **first contact the practicum instructor**. If the practicum instructor **cannot be contacted** AND an **emergency** exists, *then and only then*, please contact: Dr. Linda Metcalf, Director of Graduate Counseling Program - 817-531-7530; lmetcalf@txwes.edu

FIELD SUPERVISOR APPROVAL APPLICATION

SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY
GRADUATE PROGRAM IN COUNSELING

Please complete this application and **attach a current resume**. Only **one** resume with this form for **each** field supervisor is needed (If one supervisor is supervising several Texas Wesleyan students, only form 4 and 5 is required for each student and this will be provided by the student at the time of acceptance). All information is confidential.

Date: ____/____/____

Name: _____

Licensure and license no. _____

Degrees and Year received: _____

Current place of employment: _____

Business address: _____

Business Phone: ____ - ____ - ____ Fax: ____ - ____ - ____

Email Address: _____

Please check YES or NO to the following:

Yes No Do you agree to spend at least one hour per week with each counseling student assigned to you in individual/group education supervision?

Yes No Have you been in social work or counseling practice for three (3) or more years?

(Field supervisor applicant **signature**)

_____/_____/_____
(Date)

FIELD SUPERVISOR AGREEMENT
SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY
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This agreement made on ____/____/____ between _____
(Print Field Supervisor)

and _____, effective ____/____/____ (practicum start date)
(Print counseling student)

to ____/____/____ (practicum end date). The site will provide ____ hours for Spring and Fall semester, and ____ hours for Summer semester.

The Practicum site agrees:

- To assign a field supervisor who has appropriate degree and credentials, and time for training;
- To provide opportunities for the counseling student to engage in a variety of counseling activities under supervision and provide on-going evaluation of the student’s performance (one hour per week minimum of face-to-face supervision, individual or group);
- To provide the graduate counseling student with adequate workspace, telephone, office supplies to conduct counseling activities in a professional manner;
- To provide supervisory contact which includes some examination of the graduate counseling student’s work using observation, and/or live supervision;
- To provide written evaluation of the graduate counseling student based upon criteria established by the Texas Wesleyan University Graduate Program in Counseling.

Texas Wesleyan University Agrees:

- To assign a practicum instructor to facilitate communication between Texas Wesleyan University and the site;
- To notify the student that he/she must adhere to the administrative policies, rules, standards, schedules, and practices of the site;
- That the practicum instructor shall be available for consultation with both Field Supervisor and the graduate student and shall be immediately notified should any change in relation to the graduate student, site, or University occur and;
- That the university practicum instructor is responsible for practicum grade assignment.

This is a non-binding agreement that documents an initial understanding between this graduate student from Texas Wesleyan University and the field supervisor providing

practicum training. The purpose of this agreement is twofold: first, to serve as documentation for the Texas Wesleyan University Graduate Program in Counseling to describe the nature of training this graduate student is receiving (and later as reference on internship and licensure applications); and secondly, to establish initial consensus between the training graduate student and the practicum field supervisor about their responsibility to each other.

_____/_____/_____
(Graduate counseling student **signature**) (Date)

_____/_____/_____
(Field supervisor **signature**) (Date)

NOTE: Graduate counseling student and field supervisor will communicate to the practicum Instructor regarding progress, problems, and performance evaluations. If you have any questions, **first contact the practicum instructor** If the practicum instructor cannot be **contacted** AND an **emergency** exists, then and only then, please contact: Linda Metcalf, Director of Graduate Counseling Program. Phone - 817-531-7530; email - lmetcalf@txwes.edu

WAIVER OF LIABILITY
SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY
GRADUATE PROGRAM IN COUNSELING

It is understood by the undersigned graduate counseling practicum student that in consideration for receiving counseling supervision from _____(Agency) and participating in the Texas Wesleyan University Graduate Counseling Program field practicum, the undersigned waives and relinquishes all claims for damage or injury to his/her person or property which may be caused by an act, or failure to act of the agency. The undersigned assumes the risk of injury from any dangerous conditions in the above-mentioned Agency.

The undersigned further agrees to indemnify, save and hold the Agency, Texas Wesleyan University and their officers and employees harmless from any claim or liability for injury or damage to person or property as a result of a negligent act or omission of the undersigned in connection with and during the graduate counseling field practicum.

The undersigned understands the risks inherent in field practicum work. Therefore, the Agency, Field Supervisor, Practicum Instructor-supervisor and graduate counseling practicum student shall collaborate in an effort to minimize such risks. The Field Supervisor shall orient the graduate counseling practicum student regarding agency policies and procedures that relate to personal safety and risk management. This orientation shall include ways the graduate counseling practicum student can protect him/her and avoid harm. The graduate counseling practicum student shall adhere to agency risk-management policies. The graduate counseling practicum student shall be advised of the potential risks while providing services to clients at the agency as well as other designated settings where service may be rendered such as home visits, public and private offices and others facilities. Other workplace risks may include assault, sexual harassment, civil or criminal lawsuits, clients who become threatening or violent, and exposure to environmental hazards. The graduate counseling practicum student shall promptly address any safety concerns with the Field Supervisor and Practicum Instructor-supervisor.

(Graduate Counseling Student **signature**)

_____/_____/_____
(Date)

STATEMENT OF MUTUAL RESPONSIBILITIES

SCHOOL OF HEALTH PROFESSIONS
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GRADUATE PROGRAM IN COUNSELING

Responsibilities of the Graduate Counseling Degree Program

1. Approve students for registration and provide a practicum site opportunity list.
2. Endorse the Graduate Counseling Student Practicum Agreement for the designated term.
3. As far as practical, conference with graduate practicum students to provide feedback, give support and direction, and determine opportunities for professional growth.
4. Assign grades after consultation with the field supervisor and practicum instructor.
5. Contact or visit the field supervisor at least one time during the practicum term and maintain regular contact by telephone and/or additional visits.

Responsibilities of the Graduate Counseling Practicum Student

1. Follow all instructions and provide the required information in this packet. If there are any questions, please ask the practicum instructor for clarification.
2. Read, complete and sign the Graduate Counseling Student Practicum Agreement, Professional Liability Insurance Statement, and Waiver of Liability.
3. Reasonable effort will be made to honor student requests regarding Practicum placements. Sites which offer the greatest breadth of opportunity, most direct client contact hours, and best qualified supervision will take priority.
4. Arrange an initial interview at the Practicum site. At that time, provide your resume and comply with all agency registration procedures. Next, mutually decide with your field supervisor goals for your practicum. Be sure to specify the number of total experience hours needed per semester and the total hours needed of direct contact. These hours may be divided equally between concurrent semesters or as otherwise needed between more than one practicum site.
5. Submit a practicum schedule to the practicum instructor during the first week of the semester and attend all orientations and seminars related to practicum course and site.
6. Field supervisors are requested to meet with graduate counseling practicum students a minimum of one hour per week, but some may choose to meet more often. At least half of those hours must involve individual face-to-face supervision.
7. The practicum instructor will meet with each graduate counseling practicum student at least one time during the practicum term. Depending upon the skill level demonstrated and other relevant factors, meetings may be more frequent.

FIELD SUPERVISOR *MID-TERM* EVALUATION

SCHOOL OF HEALTH PROFESSIONS
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FIELD SUPERVISOR _____ DATE ____/____/____

GRADUATE COUNSELING STUDENT _____

DIRECTIONS: Please write the number that best evaluates the graduate counseling student's performance.

**(4 – Outstanding; 3 – Excellent; 2 – Adequate; 1 – Poor; 0 – Unacceptable;)
 NA – Not Applicable**

Professional Personalization

- _____ Accepts and uses constructive criticism to enhance the development of professional competencies.
- _____ Engages in open, comfortable and clear communication with peers and supervisor.
- _____ Recognizes own competencies and skills and shares these with peers and supervisor.
- _____ Recognizes own deficiencies and actively works to overcome them with peers and supervisor.
- _____ Completes case reports and records punctually and conscientiously.

The Counseling Process

- _____ Keeps appointments on time.
- _____ Begins counseling sessions smoothly, explaining the nature and objectives of counseling as appropriate.
- _____ Is relaxed, comfortable and spontaneous in counseling sessions.
- _____ Communicates interest in and acceptance of the client.
- _____ Facilitates the client's expression of concerns and feelings.
- _____ Recognizes and resists manipulation by the client.
- _____ Uses silence effectively in the counseling sessions.

- _____ Is aware of and deals effectively with own feelings in the counseling session.
- _____ Self-discloses to the client when appropriate.
- _____ Recognizes and skillfully interprets the client’s covert messages.
- _____ Facilitates realistic goal-setting and encourages appropriate action-step planning with the client.
- _____ Employs professional judgment in the timing and use of different techniques.
- _____ Initiates periodic evaluation of goals, action-steps, and process during counseling.
- _____ Explains, administers, and interprets tests correctly when appropriate.
- _____ Terminates counseling sessions smoothly.
- _____ Focuses on specific behaviors and their consequences, implications, and contingencies.
- _____ Recognizes and pursues discrepancies and the meaning of inconsistent information.
- _____ Bases decisions on a theoretically sound and consistent rationale of human behavior.
- _____ Is perceptive in evaluating the impact of own counseling techniques.
- _____ Demonstrates ethical behavior in the counseling activity and case management.

Additional comments and/or suggestions:

 (Field Supervisor Signature)

____/____/____
 (Date)

 (Graduate Counseling Student Signature)

____/____/____
 (Date)

Adapted from Dr. Harold Hackney, Assistant Professor, Purdue University. This form was designed by two graduate students based upon material from *Counseling Strategies and Objectives* by H. Hackney and S. Nye, Prentice Hall, 1973. This material was taken from the chapter titled “Evaluation of Student Counselors and Supervisors,” pp. 265-274, in Kenneth Dimick and Frank Krause (Eds.), *Practicum Manual in Counseling and Psychotherapy*, Muncie, IN: Accelerated Development, Inc.

FIELD SUPERVISOR FINAL EVALUATION

SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY
GRADUATE PROGRAM IN COUNSELING

FIELD SUPERVISOR _____ DATE ____/____/____

GRADUATE COUNSELING STUDENT _____

DIRECTIONS: Please write the number that best evaluates the graduate counseling student's performance.

**(4 – Outstanding; 3 – Excellent; 2 – Adequate; 1 – Poor; 0 – Unacceptable;)
NA – Not Applicable**

Professional Personalization

- _____ Accepts and uses constructive criticism to enhance the development of professional competencies.
- _____ Engages in open, comfortable and clear communication with peers and supervisor.
- _____ Recognizes own competencies and skills and shares these with peers and supervisor.
- _____ Recognizes own deficiencies and actively works to overcome them with peers and supervisor.
- _____ Completes case reports and records punctually and conscientiously.

The Counseling Process

- _____ Keeps appointments on time.
- _____ Begins counseling sessions smoothly, explaining the nature and objectives of counseling as appropriate.
- _____ Is relaxed, comfortable and spontaneous in counseling sessions.
- _____ Communicates interest in and acceptance of the client.
- _____ Facilitates the client's expression of concerns and feelings.
- _____ Recognizes and resists manipulation by the client.
- _____ Uses silence effectively in the counseling sessions.
- _____ Is aware of and deals effectively with own feelings in the counseling session.

- _____ Self-discloses to the client when appropriate.
- _____ Recognizes and skillfully interprets the client’s covert messages.
- _____ Facilitates realistic goal-setting and encourages appropriate action-step planning with the client.
- _____ Employs professional judgment in the timing and use of different techniques.
- _____ Initiates periodic evaluation of goals, action-steps, and process during counseling.
- _____ Explains, administers, and interprets tests correctly when appropriate.
- _____ Terminates counseling sessions smoothly.
- _____ Focuses on specific behaviors and their consequences, implications, and contingencies.
- _____ Recognizes and pursues discrepancies and the meaning of inconsistent information.
- _____ Bases decisions on a theoretically sound and consistent rationale of human behavior.
- _____ Is perceptive in evaluating the impact of own counseling techniques.
- _____ Demonstrates ethical behavior in the counseling activity and case management.

Additional comments and/or suggestions listing areas of growth comparing mid-term to final:

 (Field Supervisor Signature)

_____/_____/_____
 (Date)

 (Graduate Counseling Student Signature)

_____/_____/_____
 (Date)

Adapted from Dr. Harold Hackney, Assistant Professor, Purdue University. This form was designed by two graduate students based upon material from *Counseling Strategies and Objectives* by H. Hackney and S. Nye, Prentice Hall, 1973. This material was taken from the chapter titled “Evaluation of Student Counselors and Supervisors,” pp. 265-274, in Kenneth Dimick and Frank Krause (Eds.), *Practicum Manual in Counseling and Psychotherapy*, Muncie, IN: Accelerated Development, Inc.

CORRECTIVE ACTION CONTRACT

Form 9

SCHOOL OF HEALTH PROFESSIONS
TEXAS WESLEYAN UNIVERSITY
GRADUATE PROGRAM IN COUNSELING

The contract is for proactively identifying imperative areas of concern and propose appropriate actions necessary for future success/continuance within the graduate counseling practicum experience. It is useful only to the extent the recommendations are purposefully initiated.

_____/_____/_____
(Date) (Semester) (Print graduate counseling student Name)

(Agency/Practice Name) (Print Field supervisor Name)

1. Identify/describe area(s) of concern with graduate counseling student's performance in behavioral terms:

2. Identify/describe what the graduate counseling student must do to correct the behavior(s) listed above:

3. Identify the time frame/date by which the corrective behavior(s) is to occur:

4. Identify/describe the consequences to the graduate counseling student if the desired behavior change does not occur:

5. Document any previous discussions with this graduate counseling student that have occurred about this issue:

Field supervisor and graduate counseling student will meet ____/____/____ for an Evaluative Conference to determine progress toward goals. (Date)

(Graduate counseling student **Signature**)

____/____/____
(Date)

(Field supervisor **Signature**)

____/____/____
(Date)

Documentation of Evaluative Conference

Describe how the graduate counseling student did or did not demonstrate the desired behavior(s).

(Graduate Counseling Student **Signature**)

(Date)

(Field Supervisor **Signature**)

(Date)