The Practicum & Internship Handbook
The School Counseling Program
Department of Counseling
John Carroll University
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Dear Student:
Welcome to the clinical experience component of the school counselor program. This handbook describes the final step in your formal training within your Master's program and will provide the information you need to plan for and complete the practicum/internship experience.

An important facet of your program, the practicum and internship courses provide the opportunity to test your academic coursework as you put into practice the counseling theories, techniques, and procedures you have learned. During practicum/internship, you will assume the role of the professional school counselor-in-training and provide services to students, staff and parents within a school under appropriate supervision.

This handbook will give you general information about practicum and internship and a step-by-step process for you to identify and plan for your practicum and internship experiences. It is important that your site suits your learning requirements and provides you an opportunity to meet your knowledge and skills objectives. Once a potential site has been located, the School Counseling Practicum/Internship Coordinator will document the appropriateness of the setting and supervision.

Begin the process early. If you have questions at any point in this process, please contact your advisor or the School Counseling Practicum/Internship Coordinator.

Sincerely,

Faculty Members of John Carroll University's Department of Counseling
Introduction – How to Use this Handbook
This handbook is designed to provide comprehensive information that will assist you in completing the Practicum and Internship experience required for the completion of your degree program. You are encouraged to become thoroughly familiar with its contents, much of which are designed to meet state and national licensure requirements.

Definitions
In order to promote a clear understanding of the meanings intended in this handbook, a number of specific terms are defined.

School Counseling Practicum Student— A student in training to be a school counselor who is enrolled in CG 591 School Counseling Practicum. The practicum course is an entry-level experience, less intensive than the internship course.

School Counseling Intern— A student in training to be a school counselor who is enrolled in a specific internship course, CG 598A/B School Counseling Internship. By previously completing the academic and experiential requirements of the practicum course, this student has satisfied the prerequisites necessary to enroll in the internship component of the program.

School Counselor Trainee— An individual who is seeking licensure as a professional School Counselor and who is currently enrolled in either a practicum or internship within a counselor education program approved by the Ohio Department of Education. By definition, this term includes both practicum students and interns. This term should be used by both practicum students and interns to designate properly and legally a training status within the profession.

Practicum/Internship Site— The location where the practicum/internship experience occurs. This site must meet John Carroll University training program standards for the practicum/internship experiences. A significant portion of the practicum/internship experience must involve direct client contact in this regard. This site must also provide the practicum student or intern with opportunities to perform all activities that a regular employed staff member is expected to perform. These activities must be within the scope of counselor training as delineated by the CACREP Standards for School Counselors mandated by the Ohio Department of Education. All sites must be approved by JCU. The practicum and internship experiences are typically completed at the same location.

Clinical Coordinator—This individual is responsible for discussing specific requirements for the practicum/internship experience with the practicum student or intern.

Dr. Tahani Dari currently occupies this position within the School Counseling Program and may be reached directly at (216)397-4617 Her office is located in AD 307.

Clinical Coordinator Assistant—This individual collects paperwork related to the practicum/internship experience prior to semester-specific deadlines, maintaining an updated file for each practicum/internship student.

Amy Zucca currently occupies this position within the Counseling Program and may be reached directly at 216-397-1708 or at azucca@jcu.edu. Her office is located in AD309.
**Practicum Instructor or Internship Instructor**— This individual instructs a weekly or bi-weekly course during which individual student progress is monitored and individual case studies are presented. In this way, group supervision of students is provided. In some instances, instructors may provide student supervision on an individual basis. The instructor maintains communication with on-site supervisors as indicated, making one on-site visit each semester. Any dialogue regarding significant problems occurring on-site will be initiated with the assistance of this instructor. At the conclusion of the practicum/internship experience, the instructor secures confidential site evaluations from students, delivers these site evaluations to the School Counselor Practicum/Internship Coordinator and assigns credit for the practicum or internship course.

**John Carroll University Practicum Supervisor**— This individual meets with practicum students on a weekly basis, providing personalized supervision and a weekly review of specific on-site cases encountered by the practicum student. Utilized during the practicum experience only, this supervisor is typically a John Carroll University faculty member or a part time faculty member working under the supervision of John Carroll University faculty. During weekly meetings with the John Carroll University Practicum Supervisor, individual cases are reviewed and counselor trainee progress and performance is critiqued and evaluated. At the conclusion of the semester, this supervisor provides the practicum instructor with a completed Professional Performance Fitness Evaluation, which summarizes the student’s progress over the course of the semester. Concurrently, this supervisor is also evaluated by each student, through use of the John Carroll University Practicum Supervisor Evaluation Form.

**Practicum/Internship Site Supervisor**— This individual is a School Counselor with at least two years of experience and a professional staff member at the practicum or internship site who is directly responsible for providing systematic, intensive supervision of the student’s professional training activities and performance. This supervisor must make appropriate provisions for the student’s orientation to the practicum or internship site (procedures for assigning clients, emergency procedures, site-specific limits to confidentiality, etc.), providing whatever on-site student working space is feasible. Student goals are developed with the assistance of this supervisor, who maintains responsibility for on-site continuity throughout the practicum/internship experience. This supervisor assists in the evaluation of student performance relative to the stated objectives of the practicum/internship experience, by completing the Professional Performance Fitness Evaluation at the conclusion of practicum and the Counselor Competencies Scale – Revised (CCS-R) at the conclusion of the CG 598A and CG 598B. At this same time, this supervisor completes John Carroll University Counseling Program Evaluation form.
Practicum (CG 591) Course Requirements

The course, Practicum in School Counseling (CG 591), is the bridge between the coursework in clinical foundations and the more extensive implementation of the role of the professional school counselor during internship. It is expected that students will have taken the core coursework requirements in order to be considered for Practicum.

It is recommended that students complete the following prerequisite courses:
- Counseling Theories (CG 561)
- Counseling Techniques (CG 562)
- Group Dynamics, Processing, and Counseling (CG 535)
- Foundations of School Counseling (CG 501)

Students are considered eligible for practicum when these three courses have been completed; however, students may also take CG 535 concurrently with Practicum. Please discuss any questions with the Practicum Coordinator.

Practicum in School Counseling (CG 591) is a prerequisite for Internship I in School Counseling (CG 598A).

CG 591, CG 598A and CG 598B are only offered during Fall and Spring semesters.

Requirements for the Practicum Experience

The practicum experience requires a total of 100 clock hours, including a minimum of 40 hours of direct counseling services with clients (at least 10 of these hours must be in group work), one hour per week of supervision with the student’s John Carroll University Practicum Supervisor, and the practicum seminar for 1 ½ hours. All hours in relation to CG 591 coursework should be recorded on the Practicum/Internship Log. This completed form will be presented to the Practicum Instructor weekly during the semester. CG 591 meets for 1 ½ hours weekly for group supervision. Students are required to present cases during group supervision. In this way, the student will gain expertise in appropriate case consultation with fellow practitioners.

Portfolio – Students should purchase and maintain a three ring binder portfolio for the entire practicum/internship experience. An outline of items to be kept in the portfolio can be found here. Students are responsible for keeping copies of ALL paperwork for ALL three semesters in the portfolio and will be required to turn in their portfolio for review at the completion of each clinical course. Some of the forms will be turned in to the instructor at that time.

Additional Details Regarding Requirements for Practicum

The minimum of 40 direct counseling service client contact hours (including a minimum 10 group contact hours) must include work with at least three different individual clients and at least one group containing 5-9 members.

Each student must meet individually with a John Carroll University Practicum Supervisor for at least one hour per week. Over the course of the semester, the student will present case material for the Practicum Supervisor. Discussion of these cases should include a focus on student issues and the investigation of particular aspects of counseling. Understanding the student, developing rapport
with the student, defining the student's problem, enhancing counseling skills within the context of the counseling session, and selecting counseling interventions are all relevant examples of potential supervisor/student discussion.

The practicum course incorporates two types of supervision—individual supervision (through the John Carroll University Practicum Supervisor and the Site Supervisor) and group supervision (through weekly class meetings with the Practicum Instructor). The student will complete a formal evaluation of his/her John Carroll Practicum Supervisor at the conclusion of the practicum course.

The practicum experience requires the development of specific objectives by the student and the demonstration of behavior in accordance with the ethical and professional standards delineated in the American School Counseling Association’s Ethical Standards for School Counselors. These standards can be found on the ASCA website.

Additional assignments—including student self-evaluations, John Carroll University Practicum Supervisor evaluations, and site supervisor evaluations of student progress—will be addressed at the outset of the practicum course and detailed on the course syllabus. Over the course of the semester, students may be required to complete other duties such as listening to case material of counseling sessions, researching particular client populations in order to prepare for counseling sessions, or completing related paperwork.

At the completion of the course, students will turn in four evaluations. The Professional Performance Fitness Evaluation should be completed by your:
- John Carroll University Practicum supervisor
- John Carroll University Practicum Instructor
- Site Supervisor
- Self

Practicum Grading
Credit (CR) is assigned by the Practicum Instructor in a Pass or Fail format. If the Practicum Instructor or the Site Supervisor has concerns regarding a student's progress, the Practicum Instructor will meet with the student and the Site Supervisor during the course of the semester to determine an appropriate course of action.

Things to Do Before Practicum (CG 591)
In order to apply for the Practicum/Internship experience, students will have a variety of forms to complete.

School Counseling Program Practicum Registration Intent Form
The first step of the practicum/internship process is electronically submitting the School Counseling Program Practicum Registration Intent Form. It will assist in clarifying your needs and goals at each phase of your clinical experience. A confirmation email of your submission will be sent to you. Keep a copy of this email in your portfolio.

This form MUST be submitted no later than MARCH 1 for a practicum starting during the Fall.
semester and no later than **OCTOBER 1** for a practicum start during the Spring semester. Students applying later than these dates will not be permitted to enroll in CG 591.

**Determine Your Practicum/Internship Site**

Students who are not currently employed in a school district where they intend to do their practicum and internship may consult with the School Counseling Practicum/Internship Coordinator who will assist them in developing a list of potential sites. You may also consult the School Counseling Practicum & Internship School Directory.

**Make Contact with Potential Practicum/Internship Site(s)**

If you are planning to do your field experience at the school where you are teaching, schedule an interview with the school principal and senior school counselor. If you are not currently employed in a school, once you have identified several potential internship sites, it is recommended that you begin making telephone calls and scheduling appointments early in the process. When you call each school, ask to speak directly with the senior ranking school counselor and inquire about the specific services provided by each school that a counseling intern would be able to offer. When possible, request an on-site interview at potential schools of interest. Take copies of this manual and your resume with you. It is recommended that you keep a record of the persons you contact and list their positions at the school.

**Set Up an Interview**

For helpful tips regarding this area, consult the School Counseling Practicum & Internship School Directory.

**Student Liability Insurance**

Practicum and internship students are required to possess liability insurance required for coverage during the entire practicum/internship experience. Students should obtain a personally held policy, even if coverage is provided by their employer.

The American Counseling Association offers a free student rate for this insurance. Students are advised to choose the $1,000,000—$3,000,000 coverage. Students must be members of ACA and in a Master’s Level counseling program. There is a student rate of $96 to join ACA.

See [http://www.counseling.org/membership/membership-benefits](http://www.counseling.org/membership/membership-benefits) for more details or call 1-800-347-6647 ext. 284.

The ACA Insurance Trust, Inc. (ACAIT) has partnered with Healthcare Providers Service Organization (HPSO) to provide a comprehensive professional liability program for students. Students interested in obtaining liability insurance for $37 through this program and not join ACA, should call ACAIT for an application (1-800-347-6647 extension 284) or apply online by visiting the website: [www.hpso.com](http://www.hpso.com). This is a less expensive option, however joining one’s professional organization is both important and allows students other membership benefits as well.

If students do not want to apply by credit card, send address or fax number to have an application sent via mail to:

ACAI Insurance Trust, Inc.
5999 Stevenson Avenue
Alexandria, VA 22304
Information on ASCA insurance can be found at [http://www.schoolcounselor.org/school-counselors-members/member-benefits-info/liability-insurance](http://www.schoolcounselor.org/school-counselors-members/member-benefits-info/liability-insurance).

Students can also purchase liability insurance on their own through a private policy.

Once liability insurance is obtained, a copy of the student policy should be provided to their practicum instructor and as well as maintained by the student for inclusion in the practicum/internship portfolio. Keep in mind that ACA insurance coverage is for one year only, so apply closer to the start of your practicum or plan to renew during your internship.

**Register for CG 591 Practicum in School Counseling**
Register for CG 591 using BannerWeb.

**Participatory Agreement**
This agreement must be signed by the student, site supervisor, school principal, and John Carroll University representative.

**Assignment of Supervisor Form**
The Assignment of Supervisor Form must be signed by the site supervisor.

**Supervisors Qualifications Form**
The site supervisor must complete the Site Supervisor Qualifications Form.

**School Counseling Program Practicum/Internship Student and Site Information Form**
Notification of finding a site must be submitted by MAY 1 for a practicum starting during Fall semester and no later than DECEMBER 1 for a practicum starting during Spring semester. These deadlines are non-negotiable. Use the online School Counseling Program Practicum/Internship Student and Site Information Form to submit this information. A confirmation email of your submission will be sent to you. Keep a copy of this email in your portfolio. Failure to submit this by the deadlines indicated above may result in a student being unable to enter the course.

**Review/Checklist for Starting Practicum (CG 591)**
- School Counseling Program Practicum Registration Intent Form
- Use the School Counseling Practicum & Internship School Directory to help you find a site, set up interview, secure a site.
- Proof of personally held liability insurance
- Register for CG 591
- Participatory Agreement
Assignments and Forms:

- **Assignment of Supervisor Form**
- **Site Supervisor Qualifications Form**
- **School Counseling Program Practicum/Internship Student and Site Information Form**

Keep copies of all these forms/confirmation in your **Portfolio**. These will be reviewed in the first day of class.

**Things to Do During Practicum (CG 591)**

The Appendix of this Handbook contains forms that you will need to complete during your practicum. Please make additional copies as needed. These forms will be explained more fully in your Practicum Course Syllabus. If you have any questions about a form please consult your instructor or the clinical coordinator, Dr. Tahani Dari.

It is your responsibility to fill the forms out and give them to the appropriate person(s). Please read these forms carefully. If necessary, make multiple copies of these forms.

Please print legibly or type responses.

- **Practicum/Internship Log**
- **School Counseling Practicum/Internship Plan of Action**
- **Client Consent Form**: for audio-recording of sessions if site does not have one, and if recording is permitted
- **Parental Consent Form**: for audio-recording if recording is allowed
- **Counselor Self-Efficacy Scale**: this will be emailed to you electronically to complete and a summary report of your responses will be emailed to you within two weeks
- **Session Review Form**

**Things to Do by the End of Practicum (CG 591)**

Forms can be found in the Appendices. If you have any questions about a form please consult your instructor or the Clinical Coordinator, Dr. Tahani Dari.

It is your responsibility to fill the forms out and give them to the appropriate person(s). Please read these forms carefully. If necessary, make multiple copies of these forms.

Please print legibly or type responses.

- **Practicum Supervisor Evaluation**
- **Professional Performance Fitness Evaluation**: At the completion of the course, students will submit four evaluations completed by:
  - John Carroll University Practicum Supervisor
  - Practicum Site Supervisor
  - By the Student him/her self
  - Practicum Instructor
- **Counselor Competencies Scale - Revised (CCS-R)**: This instrument provides evidence of your growth and development in counseling skills, behaviors, and dispositions. Please note that the CCS-R was piloted fall 2015 and spring 2016. The CCS-R will be emailed to your licensed site representative to complete online and a summary report of your responses will be emailed to you at the end of the semester. Keep a copy in your portfolio.
**Internship (CG 598A and CG 598B) Course Requirements**

The internship is designed to be an intensive hands-on experience conducted in a setting similar to one in which the student will eventually find employment. The internship experience should incorporate activities specific to the practice of professional school counseling, with consistent and extensive supervision.

CG 598A/B Internship in School Counseling should be taken only after a student has successfully completed CG 591 Practicum in School Counseling and its related prerequisites.

The internship experience program requires a total of 600 clock hours on-site, including a minimum of 240 hours of direct service with clients and a minimum of one hour of direct supervision with the Internship Site Supervisor for every 20 hours on-site. All hours in relation to CG 598 coursework should be recorded on the Practicum/Internship Log included in this handbook. CG 598 class meets for 3 hours bi-weekly or 1 ½ hours weekly. Students are required to present cases (possibly including portions of audio or video recorded material) to the class. In this way, the student will gain further expertise in participating in appropriate case consultation with fellow practitioners. The internship experience provides opportunities for students to gain supervised experience in the use of a variety of professional resources that include print and non-print media, professional literature, research findings, and appropriate referral sources and providers.

**Additional details regarding requirements for the Internship Experience**

The minimum of 240 direct service client hours must include work typically with individual clients and groups containing at least 5-9 members. For suggested direct service categories in the school setting see [here](#).

The internship course incorporates two types of supervision—individual supervision (through the Internship Site Supervisor) and group supervision (through weekly or bi-weekly class meetings with the Internship Instructor). The Site Supervisor will complete a formal evaluation of the intern following the completion of the required 600 on-site hours. This evaluation is designed to include an opportunity for the intern and Site Supervisor to consult formally regarding the student’s performance during the internship. This evaluation will eventually be forwarded to the Internship Instructor for inclusion in an overall evaluation of the student’s work during the semester.

The internship experience requires the development of specific objectives by the student and the demonstration of behavior in accordance with the ethical and professional standards delineated in the American School Counseling Association’s Ethical Standards for School Counselors. These standards can be found on the ASCA [website](#).

Additional assignments will be addressed at the outset of the internship course and detailed in the course syllabus. By design, CG 598 is focused on the on-site component of the experience, as direct supervision is experienced on-site and students increase their amount of hours on-site. CG 598 A and B are taken for a total of 6 credit hours and broken up over two semesters.

**Internship Grading**
Credit (CR) is assigned by the Internship Instructor as a Pass or Fail grade. If the Internship Instructor or the Site Supervisor has concerns regarding a student’s progress, the Internship Instructor will meet with the student and the Site Supervisor during the course of the semester, to determine an appropriate course of action. Students who have not completed 600 on-site hours by the end of the semester in question will receive an "in process" grade until they complete the requirements for the internship course.

**Suggested Direct Service Categories for Internship**

I. Individual Counseling
One-to-one counseling for any personal, social, academic, career, or developmental concern. The intern may see students on a regular basis if that is possible and required. Some schools may not do as much of this type of counseling, while others place greater emphasis in this area. Quality time may only be a few minutes in the hall before class, during lunch, or may take form of a regular appointment in the Counseling Office. Please try to log as much one-one counseling time as possible.

II. Group Counseling
Small groups of children exploring a common theme are popular in most schools. Groups in the elementary setting on Anger Management, Children of Divorce, Socialization Skills, Conflict Resolution, ADHD, and Grief/Loss are just some of the themes interns have worked with in the past. At the middle school level, such themes as Making and Keeping Friends, Self-Esteem, Respecting Rules and Adults, Alcohol and Drug Abuse Prevention, and Test Anxiety are popular. High school interns have developed successful groups on Body Image, Healthy Living, Self-Esteem, Sexuality Issues, Stress Management, and Preparing for College. Group counseling should probably address a particular theme, over several sessions, with 5-8 students, should be psycho-educational and provide opportunity for interaction by all members rather than groups where teaching takes place in a classroom setting. (See Below)

III. Group Guidance
Larger class-sized groups where the intern has an opportunity to present a topic to the group and where some opportunity is provided for questions and comments, from at least a portion of those present, may be counted for some of the intern’s group time. It is expected, however, that such groups will make up a considerably shorter portion of group time than the above category. While these groups are important and offer an excellent and practical way of addressing real school counseling issues to larger groups, they are typically teaching endeavors. Drug Abuse Prevention, Proficiency Test Preparation, Test Score Interpretation, etc. have been some of the themes reported to be addressed in this fashion by previous school counselor interns.

IV. IEP/IAT Participation
Interns may count time served on such teams as direct service to children. Those interns whose professional background in Special Education and whose duties require their regular participation on such teams may count some of this time for internship, but other experiences should dominate the intern’s log in areas where little or no time has been spent before.

V. Testing and Appraisal
Interns may administer tests if they are judged qualified to do so by a supervisor. They may count this time as direct service if the testing is also followed by interpretation of student's scores in some way to them. In some locations, PSAT pre-testing sessions have been held with students to help them with test taking anxiety and test taking strategies. Some interpretation of what the returned scores mean to the individual student may be offered if this time is to count as counseling service.

VI. Parent Consultation
Time spent working with a parent is considered direct service time.

**Things to Do Before Internship I & II (CG 598A&B)**

**Register for CG 598A or B Internship in School Counseling**
Register for CG 598A or B using BannerWeb.

**School Counseling Program Practicum/Internship Student and Site Information Form**
Notification of finding a site must be submitted by **MAY 1** for an internship starting during Fall semester and no later than **DECEMBER 1** for an internship starting during Spring semester. These deadlines are non-negotiable. Use the online School Counseling Program Practicum/Internship Student and Site Information Form to submit this information. A confirmation email of your submission will be sent to you. Keep a copy of this email in your portfolio. Failure to submit this by the deadlines indicated above may result in a student being unable to enter the course. **You need to submit this form even if you are staying at the same site that you were at for practicum!**

**Apply for Graduation**
Apply for graduation through the Graduate Studies Office. Information can be found at [http://sites.jcu.edu/graduatestudies/pages/current-students-2/graduation/degree-application/](http://sites.jcu.edu/graduatestudies/pages/current-students-2/graduation/degree-application/)

For spring graduation, the deadline is the fourth Monday of November. For summer graduation, the deadline is February 15. For degrees awarded in winter, the deadline is the second Monday of July. Students usually apply for graduation during CG 598A, i.e. one and a half to two semesters prior to the intended graduation date.

*Please note that students need to pass the comprehensive exam AND the licensure exam prior to graduation.*

**Comprehensive Exam**
The final examination requirement for the Master’s Degree in School Counseling is satisfied through successful completion of the Master’s Comprehensive Examination. **It is recommended that students take the exam before their last semester in the program.** In case a student does not receive a passing grade, an additional semester before the anticipated graduation date is available for retaking the exam. The exam must be passed before a student can graduate from the program. More information can be found at [http://sites.jcu.edu/counselingdepartment/pages/info-for-students/comprehensive-exam/](http://sites.jcu.edu/counselingdepartment/pages/info-for-students/comprehensive-exam/).
Review/Checklist for Starting Internship (CG 598A or B)

- Register for CG 598A or B.
- Proof of personally held liability insurance – click here for more information
- Participatory Agreement
- Assignment of Supervisor Form
- Site Supervisor Qualifications Form
- School Counseling Program Practicum/Internship Student and Site Information Form - you need to submit this form even if you are staying at the same site
- Apply for Graduation during CG 598A
- Register to take the Comprehensive Exam

Keep copies of all these forms/confirmations in your Portfolio. These will be reviewed in the first day of class.

Things to Do During Internship I & II (CG 598A&B)

There are the things you will need to complete during the course of your internship. Please make additional copies as needed. These forms will be explained more fully in your Internship Course Syllabus. It is your responsibility to fill the forms out and give them to the appropriate person(s). Please read these forms carefully. If necessary, make multiple copies of these forms when completed. Please print legibly or type responses.

- Practicum/Internship Log: Use for logging of all Internship hours to fulfill Internship hour requirements. Submit to the Internship instructor.
- School Counseling Practicum/Internship Plan of Action
- Weekly Intern Activity Report and Log
- Session Review Form
- Client Consent Form: for audio-recording of sessions if site does not have one
- Parental Consent Form: for audio-recording (only for clients under the age of 18)
- Counselor Self-Efficacy Scale: this will be emailed to you electronically to complete and a summary report of your responses will be emailed to you within two weeks
- Client Satisfaction Survey: Complete five (5) if allowed by site and submit to internship instructor

Things to Do by the End of Internship I (CG 598A)

There are forms that you will need to complete by the end of internship A. Please make additional copies as needed. These forms will be explained more fully in your Internship Course Syllabus. It is your responsibility to fill the forms out and give them to the appropriate person(s). Please read these forms carefully. If necessary, make multiple copies of these forms. Please print legibly or type responses.

- Counselor Competencies Scale - Revised (CCS-R): This instrument provides evidence of your growth and development in counseling skills, behaviors, and dispositions. Please note that the CCS-R was piloted fall 2015 and spring 2016. The CCS-R will be emailed to your licensed
Things to Do by the End of Internship II (CG 598B)

There are forms that you will need to complete by the end of internship B. Please make additional copies as needed. These forms will be explained more fully in your Internship Course Syllabus. It is your responsibility to fill the forms out and give them to the appropriate person(s). Please read these forms carefully. If necessary, make multiple copies of these forms. Please print legibly or type responses.

- **Program Evaluation Form**: Student completes one, supervisor completes one.
- **Counselor Competencies Scale - Revised (CCS-R)**: This instrument provides evidence of your growth and development in counseling skills, behaviors, and dispositions. Please note that the CCS-R was piloted fall 2015 and spring 2016. The CCS-R will be emailed to your licensed site representative to complete online and a summary report of your responses will be emailed to you at the end of the semester. Keep a copy a copy in your portfolio.
- **Student Internship Site Evaluation**: Return this form to the Clinical Coordinator Assistant, Amy Zucca in AD309

If a student has not completed the necessary hours by the end of Internship II (CG 596B) at the site, he/she may get a PR in the course.

Professional School Counselor Licensure

To apply for a professional school counselor license, submit an online application found at the Ohio School Counselor Association website: www.ohioschoolcounselor.org. You will need a Professional Pupil Services license specializing in school counseling. The initial license is a 5-year professional license.

Requirements for Obtaining a School Counselor License:

1. Completion of an approved school counselor training program of preparation in Ohio
2. Passing score on the Ohio Assessment for Educators
3. Completion of a BCI/FBI background check

Ohio Assessments for Educators

All School Counselors need to pass the Ohio Assessment for Educators (OAE) in order to apply for their pupil services license. It is recommended to take this exam towards the end of the school counseling program. It is also recommended that it be taken in a different semester than the John Carroll University comprehensive exam.
The OAE is a 150 question multiple choice computer-based test. The test must be completed in three hours and a score of 220 is needed to pass. The exam can be taken year round. The cost of one exam is $105 and to take the exam you must agree to all testing rules and policies.

You can visit the following website for more information: [http://www.oh.nesinc.com/](http://www.oh.nesinc.com/)

- Under the Registration tab you can register for an account and pay for an exam. After you have paid for the exam you can then register for a specific testing date.

**BCI/FBI Background Check**

To obtain BCI/FBI fingerprints and background checks you can call JCU PD and set up an appointment at 216-397-1615. JCU PD is located on the Ground Floor of the D.J. Lombardo Student Center, Room 14. You can also check this website to find other fingerprinting locations: [http://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/Webcheck-Community-Listing](http://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/Webcheck-Community-Listing)

Q&A from the Department of Education Website:

- **How much should I expect to pay for the background checks?**
  - Cost of the fingerprinting varies, depending on the location or agency providing the service

- **Where do I send the results of the background check?**
  - Licensed educators and applicants for ODE licenses, certificates and permits, need to have the results sent to the Ohio Department of Education. Please tell the agency you use to send the results to ODE.

- **Can I send ODE a paper copy of my background check?**
  - No, ODE cannot accept paper copies of background checks. ODE is required to use the background checks sent and reported electronically by BCI.

Go to the Ohio Department of Education (ODE) website [www.education.ohio.gov](http://www.education.ohio.gov) or to Ohio School Counselors Association (OSCA) [www.ohioschoolcounselor.org](http://www.ohioschoolcounselor.org) website for information on how you want to get licensed

**What license do I need to practice as a school counselor in Ohio?**

You will need a Profession Pupil Services license specializing in school counseling. The initial license is a 5-year professional license.

**Where do I apply to get my license?**

School counselors are licensed through the Ohio Department of Education. Click the link above to visit the ODE licensure website and create a [SAFE Account](http://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/Webcheck-Community-Listing) to for your license online. ODE no longer
accepts paper applications.

**What are the requirements for obtaining a school counselor license if I complete a training program in Ohio?**

- Completion of an approved school counselor training program of preparation within Ohio;
- Passing score on the *Ohio Assessment for Educators* (#040);
- Completion of a BCI/FBI background check

**What testing requirements do I have to meet and where can I take that test?**

Beginning January 2014, the NEW school counselor licensure exam is the OAE (Ohio Assessment for Educators) and no longer the PRAXIS. [Click here](#) to visit the Ohio Department of Education for further information about the testing process. [Click here](#) to visit the Ohio Assessments for Educators website to register for testing and access preparation materials. Individuals seeking school counselor licensure must take the following OAE test.

- *OAE School Counselor (Test #040)*
- *Needed score to pass is a 220.*

**How can I obtain a temporary school counselor license?**

ODE has provisions for individuals to obtain a one-year temporary pupil service license for those who are hired to work as a school counselor and have not completed their degree programs or are awaiting decisions on professional licensure. There are two pathways for being approved for a temporary license. Both pathways require the individual seeking the temporary license to be currently employed by a school to serve as a school counselor as someone from said school/district must recommend and sign for the temporary license. Beginning January 2014 you will have to apply for a temporary license online using a SAFE account.

- *Those with a teaching license must provide the following:* 1) current valid standard teaching credential; 2) evidence of enrollment in an approved program of preparation for school counselors; and 3) documentation by the college/university that the applicant demonstrates an understanding of professional identity, social and cultural diversity, human growth and development, helping relationships, group work, assessment, research and program evaluation
- *Those with a counselors license must provide the following:* 1) current valid license to practice as a counselor from the Ohio Counselor, Social Worker and Marriage and Family Therapist Board; and 2) evidence of enrollment in an approved program of preparation for school counselors

**Where can I get a BCI/FBI background check done?**

[Click here](#) to learn more about the BCI/FBI background check requirements. It is recommended that you first check with your local school district, then neighboring school districts or your region’s Educational Service Center. If none of these have the ability to electronically complete both background checks, then check with your local law enforcement agencies or use the [Ohio Attorney General’s Website](#) to find a convenient location.
ODE requests that both background checks (BCI and FBI) be completed electronically through WebCheck so the fingerprints will be sent immediately to BCI. This allows for a much quicker processing of the prints and results reported to ODE. Please ask the agency you use if they have both Ohio and National WebCheck machines. Everyone in Ohio must use WebCheck unless: the individual lives 75 miles away from the nearest WebCheck facility or the individual has a history of ‘bad quality prints’ that cannot be captured on a WebCheck screen. Licensed educators need to have the results sent to the Ohio Department of Education. Please tell the agency you use to send the results to ODE.

**Who do I contact if I have questions about my license?**
Office of Educator Licensure / 614-466-3593 / educator.licensure@education.ohio.gov
Appendix A: Forms to Complete Before Practicum (CG 591)
School Counseling Program Practicum Registration Intent Form
Students must electronically submit the School Counseling Program Practicum Registration Intent Form. It will assist in clarifying your needs and goals at each phase of your clinical experience. A confirmation email of your submission will be sent to you. Keep a copy of this email in your portfolio.

This form MUST be submitted no later than MARCH 1 for a practicum starting during the Fall semester and no later than OCTOBER 1 for a practicum start during the Spring semester. Students applying later than these dates will not be permitted to enroll in CG 591.
Participatory Agreement
John Carroll University
School Counseling Program
PAGE 1 OF 5

CG 591- Practicum and CG 598A/B – School Counseling Internship

Dear Principal,

The student identified in Part I, below, is nearing the end of a long, rigorous course of study leading to certification as a school counselor. While John Carroll University believes it has provided required coursework in theory, ethical and legal guidelines for practice, and basic counseling skills and techniques, practical experience is still the best method of learning to become a good school counselor. The student is asking that you consider making your site available for attaining the required number of contact hours of counseling experience with the children and adolescents in your school.

If our student is already employed at your site in a teaching role, we realize valuable release time for the student to meet his/her obligations for this experience may be required. Further, we appreciate the time you and your staff set aside for a non-employee student. All prospective practicum and/or internship students will have the required background checks and personal liability insurance plans before beginning at your site. We sincerely appreciate your willingness to make this opportunity available to one of our graduate students. We believe the careful, supervised work of our counselor trainees will be a real asset to your school in terms of service to children and the broader school community.

John Carroll University expects the highest of ethical practice from all of its counselor intern/practicum students and we further recognize your right to terminate from internship or practicum any individual who has, upon joint review, adjudged to have abrogated school policy or has otherwise acted in an unprofessional or unethical manner while representing John Carroll on-site. It shall be further understood that no intern or practicum student will expect additional remuneration, compensation, or special consideration for future employment at your site in exchange for his/her service as a counselor intern.

I welcome your joint participation with John Carroll University in providing this opportunity for our student.

Nathan C. Gehlert, Ph.D.
Chair and Associate Professor,
Department of Counseling
Director, Integrated Behavior Health Specialization
(216) 397-4697
Participatory Agreement
John Carroll University
School Counseling Program
PAGE 2 OF 5
Part One:

☐ Internship  ☐ Practicum

Name: _________________________________________________________________

Address: __________________________________________________________________

Work Phone: _______________ Best Time to Call: ______________________
Home Phone: ___________________ Best Time to Call: ______________________

Are you employed at the internship site? Yes___ No___
If yes, how long have you been employed on-site? _____ Years
What are your current duties; subjects taught; grade level(s)?
______________________________________________________________________
______________________________________________________________________

Part Two:

Internship/Practicum Site School’s Name: ________________________________

Site School’s Address: __________________________________________________________________________

Site Schools’ Phone Number: ________________________________________________

Grade Levels Served: ______________________________________________________

Site School’s Principal: ___________________________________________________

Site School’s Counselor: ___________________________________________________

Intern’s Supervisory Counselor: _____________________________________________

Site Supervisor’s Phone Number: ____________________________________________

The John Carroll University school counselor intern/practicum student identified in Part One above, is required to complete ___ semesters of internship or practicum to complete requirements for State of Ohio certification as a school counselor. The intern/practicum student is expected to document ____total hours of direct service contact with children present in the site chosen for internship/practicum. Some examples of direct service contact hours are: individual counseling with children; group counseling with children; service as an I.A.T. team member; direct consultation to a parent of a child. All interns and practica students are required to be supervised by a certified school counselor on-site as well as a licensed or certificated University supervisor off-site. All interns are encouraged to purchase professional counseling liability insurance prior to entering internship. All interns or practicum students are required to meet with their on-site supervisor a minimum of one hour for each 20 hours of direct service contact.
Participatory Agreement
John Carroll University
School Counseling Program
PAGE 3 OF 5

with children, or more frequently if the on-site supervisor requests. All interns are required to attend CG 598A/B (Practicum Students CG 591) classes at John Carroll University as part of their off-site supervision. It is desirable to audio tape intern sessions with children for effective supervision. If the site school, its principal, and supervising counselor jointly determine that audio taping of session(s) may occur, a proper consent to tape form shall be secured and signed by the (child's/children's) parent or guardian prior to any taping. John Carroll University will provide such a form (See Appendix B if desired by the on-site team). On the following page the responsibilities of the school counselor trainee, the school site, and the University are clearly delineated.

Participatory Agreement

This agreement is to promote clarity of understanding between the practicum student/intern identified in Part One, the site principal and counselor supervisor, and John Carroll University's School Counseling Practicum/Internship Coordinator. It is not a binding, legal contractual agreement.

I, ________________ (Site School Principal), have reviewed this Participatory Agreement and offer my school's counselor for supervision of the practicum student or intern identified in Part One above. I agree that the intern may devote the required time in direct contact services with children for the duration of the internship period, in return for services as a school-counselor-in-training.

ALL PARTIES: PLEASE SIGN AND DATE THIS AGREEMENT

Practicum Student or Intern: _____________________________ Date:_____________

Site School Principal: _________________________________ Date:_____________

Site Supervisor: _________________________________ Date:_____________

JCU Coordinator: _________________________________ Date:_____________
Participatory Agreement
John Carroll University
School Counseling Program
PAGE 4 OF 5

Responsibilities of the university, the site, and the students are listed below:

**John Carroll University agrees:**

1. To select a student who has successfully completed all the prerequisite courses.

2. To assign a University faculty liaison to facilitate communication between the University and the practicum/internship experience site.

3. That the faculty liaison shall be available for consultation with both site supervisors and students.

4. That the Practicum Instructor or Internship Instructor will provide class/group supervision sessions the student is required to attend with the purpose of helping students further clarify their work with clients and to assist them in being prepared for clinical supervision. The Instructor is responsible for the assignment of a final grade.

5. To advise students that they must have adequate liability insurance.

**The Practicum/Internship Site agrees:**

1. To assign a designated Site Supervisor who is licensed school counselor with at least two years of school counseling experience, who has a demonstrated interest in training, and who is willing to provide 1 hour of student supervision for every 20 hours of student work.

2. To provide the student with an overall orientation to the school’s specific services necessary for the effective implementation of the practicum/internship experiences.

3. To provide opportunities for the student to engage in a wide variety of professional activities, over and above the required direct service hours.

4. To allow the student to audio or video tape counseling sessions (with consent of the client and the client’s parents, in the case of a minor) for supervisory purposes.

5. To encourage students to gain experience in the use of a variety of professional resources such as assessment instruments, relevant computer software, print and non-print media, professional literature, research findings, and appropriate referral sources and providers.

6. To evaluate the student’s performance at the conclusion of his/her practicum and internship, based upon criteria established by the School Counseling Program at John Carroll University, and to evaluate the John Carroll University Counseling Program on the form provided.
The Practicum Student/Intern agrees:

1. To abide by existing policies and procedures of the given school and local education agency.

2. To prepare a proposed plan for the practicum/internship experience, this includes individual goals and activities designed to facilitate the achievement of these goals. This plan should be endorsed by the Site Supervisor.

3. To perform functions agreed upon in the proposed plan, as well as additional functions as directed by the Site Supervisor.

4. To inform the Site Supervisor of problems or situations which might affect or change the student's ability to function within the clinical setting.

5. To keep a daily log of overall hours, direct contact hours, and supervisory hours, in accordance with John Carroll University guidelines.

6. To secure appropriate, personally held liability insurance.

7. To demonstrate behavior in accordance with the American School Counseling Association’s Code of Ethics and Standards of Practice, adhering closely to standards regarding the maintaining of client confidentiality.

8. To obtain written consent regarding audio or video taping from all clients in individual and group counseling prior to treatment, while obtaining written parent/guardian consent for all clients under the age of 18.

It is mutually agreed that:

1. Any problems or grievances that occur with students will be handled in cooperation with the school, John Carroll University Instructor and/or their immediate supervisors, and the Practicum Student or Intern.

2. If any involved party deems it necessary to cancel this agreement, notification must be given at least three weeks prior to the intended date of termination.
Assignment of Supervisor Form
John Carroll University
School Counseling Program

Directions: This form must be completed along with the Participatory Agreement Form and the original submitted to the JCU School Counseling Practicum/Internship Coordinator.

Name of School Counseling Practicum/Internship Student: ________________________
School Name: __________________________________________________________
Assigned Supervisor Contact Information:
Name: __________________________________________________________
Address: __________________________________________________________
Phone Number: ______________________________________________________
Certificate(s) and License(s) of Supervisor:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Practicum will extend for _____ hours a week for _____ weeks, totaling at least 100 clock hours of service, of which a minimum of 40 hours are devoted to direct service in individual counseling and group guidance or group counseling. One hour of supervision is to be provided weekly.

Internship will extend for _____ hours a week for _____ weeks, totaling at least 600 clock hours of service, of which a minimum of 240 clock hours are devoted to direct, face to face service. Minimum face-to-face supervision hours to be provided each week = 1 hour of individual supervision for every 20 direct service hours. The field/clinical supervisor will assume full and direct legal responsibility for all clients.

Site Supervisor’s Signature: ______________________________ Date: ______________
Printed Site Supervisor’s Name: __________________________ Date: ______________
Practicum/Intern Student’s Name: ________________________ Date: ______________
Site Supervisor Qualifications Form  
John Carroll University  
School Counseling Program  

Name of Internship/Practicum Supervisor______________________________________
Name of School______________________________________________________________
Business Address______________________________________________________________
___________________________________________ Zip________
E-mail Address______________________________________________________________
Business Telephone Number _________________________________________________
Current Job Title______________________________________________________________

Licensure Information

<table>
<thead>
<tr>
<th>Type of License</th>
<th>State &amp; Department Issuing License</th>
<th>License #/ID &amp; Expiration Date</th>
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Certification Information

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<tr>
<th>Type of Certification</th>
<th>State &amp; Department Issuing Certification</th>
<th>Certification #/ID &amp; Expiration Date</th>
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Educational/Academic Information

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<tr>
<th>Highest Degree Earned</th>
<th>Major/Program of Study</th>
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School Counseling Program Practicum/Internship Student and Site Information Form

Notification of finding a site must be submitted by MAY 1 for a practicum starting during Fall semester and no later than DECEMBER 1 for a practicum starting during Spring semester. These deadlines are non-negotiable. Use the online School Counseling Program Practicum/Internship Student and Site Information Form to submit this information. A confirmation email of your submission will be sent to you. Keep a copy of this email in your portfolio. Failure to submit this by the deadlines indicated above may result in a student being unable to enter the course.
Portfolio Outline
In a three-ring binder, with dividers noting the following completed documents:

1. Practicum/Internship initial-ongoing paperwork
   - School Counseling Program Practicum Registration Intent Form
   - Participatory Agreement
   - Evidence of current malpractice insurance (1,000,000/3,000,000)
2. Current resume
3. Plan of Action sheets for Practicum/Internship
4. Log sheets and completion forms
5. Case Presentations and rubrics
6. Session Reviews (individual and group)
7. Session Critiques (internship only)
8. Self-efficacy data
9. Program evaluations (self and site supervisor – internship B only)
10. Additional data, e.g. client satisfaction surveys, (internship only)
11. Completed CCS-R forms for each semester
Appendix B: Forms to Complete During Practicum (CG 591)
# Practicum/Internship Log
John Carroll University  
School Counseling Program

<table>
<thead>
<tr>
<th>Date:</th>
<th>Total Hours:</th>
<th>Individual Counseling: Hours:</th>
<th>Group Hours:</th>
<th>Supervision Hours:</th>
<th>Other:</th>
<th>Totals:</th>
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JCU Practicum Supervisor ____________________ Practicum Instructor ____________________
Semester ____________________
**School Counseling Practicum/Internship Plan of Action**

John Carroll University  
School Counseling Program

**Student Name:** ___________________________  **Date:** __________

<table>
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<tr>
<th>Objective</th>
<th>How</th>
<th>Anticipated Time Frame</th>
<th>Date Objective Met</th>
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<tr>
<td>Develop this plan</td>
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<td>Should be completed prior to beginning internship</td>
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<td>M. Ed.</td>
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<td>Plan and conduct classroom guidance activities</td>
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<td>Individual counseling</td>
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<td>Co-lead/lead group counseling</td>
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<td>Consultation with parents/teachers</td>
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<td>Attend staff meetings</td>
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<td>Develop and conduct a teacher/parent workshop</td>
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<td>Six additional objectives</td>
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**Client Consent Form**
John Carroll University
School Counseling Program

Client’s Name _____________________________________________________________

Address ________________________________________________________________

Phone (home) _______________________________

I agree to be counseled by a practicum student/intern from the School Counseling Program at John Carroll University. I understand that this counselor trainee has completed advanced course work in the field of counseling. The counselor trainee will be supervised by ________________________, a John Carroll University Practicum Supervisor or Site Supervisor. I further understand that counseling interviews may be audio or video taped for purposes of supervision. Recorded information is used only for training, with all tapes erased at the completion of your involvement in counseling. Information gathered in the counseling interview is strictly confidential and privileged in accordance with the American School Counseling Association Ethical Standards for School Counselors. Exceptions to this confidentiality occur when there is suspected child abuse or an indication of imminent danger to oneself or others.

If for any reason questions arise regarding the counseling arrangement or if you are dissatisfied for any reason, you have every right to meet with the counselor trainee and/or the supervisor named above.

I have read the above and understand the nature of the supervisory procedures. Any related questions have been answered to my satisfaction.

_________________________________________________  _______________________
Signature of Client                                                      Date

_________________________________________________  _______________________
Signature of Counselor Trainee                                          Date
Parental Consent Form
John Carroll University
School Counseling Program

Child's Name _________________________________________________________________

Parent's Name _______________________________________________________________

Address ______________________________________________________________________

_____________________________________________________________________________

Phone (home) ___________________________ (office) ___________________(Cell) ________________

I agree that my child may be counseled by a practicum student/intern from the School Counseling
Program at John Carroll University. I understand that this counselor trainee has completed advanced
course work in the field of counseling. The counselor trainee will be supervised by
_____________________________________________________________________________

a John Carroll University Practicum Supervisor or Site Supervisor. I further understand that counseling interviews may be audio or video taped for purposes of
supervision. Recorded information is used only for training, with all tapes erased at the completion
of your child's involvement in counseling. Information gathered in the counseling interview is
strictly confidential and privileged in accordance with the American School Counseling Association
Ethical Standards for School Counselors. Exceptions to this confidentiality occur when there is
suspected child abuse or an indication of imminent danger to oneself or others.

If for any reason questions arise regarding the counseling arrangement or if you are dissatisfied for
any reason, you have every right to meet with the counselor trainee and/or the supervisor named
above.

I have read the above and understand the nature of the supervisory procedures. Any related
questions have been answered to my satisfaction.

_____________________________________________________________________________

Signature of Parent/Guardian                                      Date

_____________________________________________________________________________

Signature of Counselor Trainee                                   Date
Counselor Self-Efficacy Scale
This is emailed to the student electronically to complete and a summary report of responses is emailed to the student within two weeks. The survey is shown below for illustrative purposes only.

General Instructions: The following questionnaire consists of three parts. Each part asks to rate your beliefs about your ability to perform various counselor behaviors and to deal with particular issues in counseling. Please provide your honest, candid responses that reflect your beliefs about your current capabilities, rather than how you would like to be seen or how you might look in the future. There are no right or wrong answers to the following questions.

Name: 
Email Address: 
Semester: 
Course: Instructor: 

Part I: Please indicate how confident you are in your ability to use each of the following helping skills effectively, over the next week, in counseling most clients. When completing these items, please use the 0–9 rating scale, with 0 being equal to no confidence and 9 being equal to complete confidence.

How confident are you that you could use these general skills effectively with most clients over the next week?

<table>
<thead>
<tr>
<th>Skill Description</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attending (orient yourself physically toward the client)</td>
<td></td>
</tr>
<tr>
<td>Listening (capture and understand the messages that clients communicate)</td>
<td></td>
</tr>
<tr>
<td>Restatements (repeat or rephrase what the client has said, in a way that is succinct, concrete, and clear)</td>
<td></td>
</tr>
<tr>
<td>Open Questions (ask questions that help clients to clarify or explore their thoughts or feelings)</td>
<td></td>
</tr>
<tr>
<td>Reflection of Feelings (repeat or rephrase the client’s statements with an emphasis on his or her feelings)</td>
<td></td>
</tr>
<tr>
<td>Self-Disclosure for Exploration (reveal personal information about your history, credentials, or feelings)</td>
<td></td>
</tr>
<tr>
<td>Intentional Silence (use of silence to allow clients to get in touch with their thoughts or feelings)</td>
<td></td>
</tr>
<tr>
<td>Challenges (point out discrepancies, contradictions, defenses, or irrational beliefs of which the client is unaware or that he or she is unwilling or unable to change)</td>
<td></td>
</tr>
<tr>
<td>Interpretations (make statements that go beyond what the client has overtly stated and that give the client a new way of seeing his or her behavior, thoughts, or feelings)</td>
<td></td>
</tr>
<tr>
<td>Self-Disclosure for Insight (disclose past experiences in which you gained some personal insight)</td>
<td></td>
</tr>
<tr>
<td>Immediacy (disclose immediate feelings you have about the client, the therapeutic relationship, or yourself in relation to the client)</td>
<td></td>
</tr>
<tr>
<td>Information-Giving (teach or provide the client with data, opinions, facts, resources, or answers to questions)</td>
<td></td>
</tr>
<tr>
<td>Direct Guidance (give the client suggestions, directives, or advice that imply actions for the client to take)</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Role-Play and Behavior Rehearsal (assist the client to role-play or rehearse behaviors in-session)</td>
<td></td>
</tr>
<tr>
<td>Homework (develop and prescribe therapeutic assignments for clients to try out between sessions).</td>
<td></td>
</tr>
</tbody>
</table>

How confident are you that you could do these specific tasks effectively with most clients over the next week?

<table>
<thead>
<tr>
<th>Keep sessions &quot;on track&quot; and focused.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respond with the best helping skill, depending on what your client needs at a given moment.</td>
</tr>
<tr>
<td>Help your client to explore his or her thoughts, feelings, and actions.</td>
</tr>
<tr>
<td>Help your client to talk about his or her concerns at a &quot;deep&quot; level.</td>
</tr>
<tr>
<td>Know what to do or say next after your client talks.</td>
</tr>
<tr>
<td>Help your client set realistic counseling goals.</td>
</tr>
<tr>
<td>Help your client to understand his or her thoughts, feelings, and actions.</td>
</tr>
<tr>
<td>Build a clear conceptualization of your client and his or her counseling issues.</td>
</tr>
<tr>
<td>Remain aware of your intentions (i.e., the purposes of your interventions) during sessions.</td>
</tr>
<tr>
<td>Help your client to decide what actions to take regarding his or her problems.</td>
</tr>
</tbody>
</table>

How confident are you that you could work effectively over the next week with a client who...

<table>
<thead>
<tr>
<th>Is clinically depressed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has been sexually abused.</td>
</tr>
<tr>
<td>Is suicidal.</td>
</tr>
<tr>
<td>Has experienced a recent traumatic life event (i.e., physical or psychological injury or abuse).</td>
</tr>
<tr>
<td>Is extremely anxious.</td>
</tr>
<tr>
<td>Shows signs of severely disturbed thinking.</td>
</tr>
<tr>
<td>You find sexually attractive.</td>
</tr>
<tr>
<td>Is dealing with issues that you personally find difficult to handle.</td>
</tr>
<tr>
<td>Has core values or beliefs that conflict with your own (i.e., regarding religion or gender roles).</td>
</tr>
<tr>
<td>Differs from you in a major way or ways (i.e., race or ethnicity).</td>
</tr>
<tr>
<td>Is not &quot;psychologically-minded&quot; or introspective.</td>
</tr>
<tr>
<td>Is sexually attracted to you.</td>
</tr>
<tr>
<td>You have negative reactions toward (i.e., boredom or annoyance).</td>
</tr>
<tr>
<td>Is at an impasse in therapy.</td>
</tr>
<tr>
<td>Wants more from you than you are willing to give (i.e., in terms of frequency of contacts or problem-solving prescriptions).</td>
</tr>
<tr>
<td>Demonstrates manipulative behaviors in-session.</td>
</tr>
</tbody>
</table>
Session Review Form
John Carroll University
School Counseling Program

PAGE 1 OF 2

Student Name _________________________________  Date of Session _______________________
Date Reviewed _________________  Supervisor’s Name _________________________________
Session # __________

Instructions: This page should be filled out by the student’s supervisor. Please rate the student on the below criteria regarding the student’s use of clinical skills when working with a specified case.

<table>
<thead>
<tr>
<th>Please rate each of the following categories:</th>
<th>E (3)</th>
<th>M (2)</th>
<th>D (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Motivational Interviewing Techniques</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Open Ended Questions</td>
<td>E3</td>
<td>M2</td>
<td>D1</td>
</tr>
<tr>
<td>Affirmations</td>
<td>E3</td>
<td>M2</td>
<td>D1</td>
</tr>
<tr>
<td>Reflections</td>
<td>E3</td>
<td>M2</td>
<td>D1</td>
</tr>
<tr>
<td>Summarizations</td>
<td>E3</td>
<td>M2</td>
<td>D1</td>
</tr>
</tbody>
</table>

| **Basic Clinical Skills**                     |       |       |       |
| Warmth, respect, positive regard, genuineness | E3    | M2    | D1    |
| Attending skills utilized                     | E3    | M2    | D1    |
| Connecting, linking                           | E3    | M2    | D1    |
| Use of evidenced based interventions          | E3    | M2    | D1    |
| Refrains from lecturing and advice giving    | E3    | M2    | D1    |
| Empathy                                       | E3    | M2    | D1    |
| Silence used effectively                      | E3    | M2    | D1    |

| **Use of self**                               |       |       |       |
| Congruent body language (eye contact, posture, etc.) | E3    | M2    | D1    |
| Congruent voice, tone, and pace               | E3    | M2    | D1    |
| Professional demeanor and presentation        | E3    | M2    | D1    |

| **Planning & Structure of Session**           |       |       |       |
| Evidence of planning for the session         | E3    | M2    | D1    |
| Opening of the session well implemented      | E3    | M2    | D1    |
| Treatment goals clear                         | E3    | M2    | D1    |
| Closing was on time & well implemented       | E3    | M2    | D1    |

| **Multicultural Competency**                  |       |       |       |
| Open to gaining cultural knowledge            | E3    | M2    | D1    |
| Respectful of client’s personal values & beliefs | E3    | M2    | D1    |

Total Points _____/63
Session Review Form
John Carroll University
School Counseling Program

PAGE 2 OF 2

Student Name _________________________________ Date of Session _______________________
Date Reviewed ___________ Supervisor’s Name ________________________________
Session # ___________

**Instructions:** The top portion of this page should be filled out by the student prior to meeting with the supervisor.

Strengths _____________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
Areas for Improvement _______________  _______________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
Theoretical orientation ______________________________. How did you apply this theoretical orientation to this case __________
________________________________________________________________________________________
________________________________________________________________________________________
Feedback requested from Supervisor _____________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

**Instructions:** The bottom portion of this form should be filled out by the supervisor during the supervision meeting with the student. The last question should be answered by the supervisor and the student.

Strengths _________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
Areas for Improvement _______________  _______________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
Supervisor and Supervisee’s Plan of Action
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
Supervisor’s Signature _______________________________ Date __________________
Student’s Signature _______________________________ Date __________________
Appendix C: Forms to Complete by the End of Practicum (CG 591)
## Practicum Supervisor Evaluation

John Carroll University  
Clinical Mental Health Counseling Program

### Practicum Student Name  
________________________________________________________________________

### JCU Doctoral Intern Practicum Supervisor Name  
________________________________________________________________________

### Practicum/Internship Site:  
________________________________________________________________________

### Semester/Year  
________________________________________________________________________

The following is a list of objectives for practicum students to utilize in an evaluation of both their John Carroll University Practicum Supervisor and the supervision experience itself. For each item, please circle an appropriate number from the following scale to assess how well your supervisor met each objective.

- 4 = Strongly Agree  
- 3 = Somewhat Agree  
- 2 = Somewhat Disagree  
- 1 = Strongly Disagree  
- 0 = Not Applicable

1. Supervisor helps me feel at ease with the supervision process.  
   ![Circle Number]  

2. Supervisor makes supervision a constructive learning process.  
   ![Circle Number]  

3. Supervisor provides specific help regarding areas that need work.  
   ![Circle Number]  

4. Supervisor addresses issues relevant to my current concerns as a counselor trainee.  
   ![Circle Number]  

5. Supervisor helps me focus on how my counseling behavior influences the client.  
   ![Circle Number]  

6. Supervisor structures the supervision process appropriately.  
   ![Circle Number]  

7. Supervisor adequately emphasizes the development of my strengths and capabilities.  
   ![Circle Number]  

8. Supervisor allows me to brainstorm solutions, responses, and techniques that will be potentially helpful in future counseling situations.  
   ![Circle Number]  

9. Supervisor allows me to become actively involved in the supervision process.  
   ![Circle Number]  

10. Supervisor makes me feel accepted and respected as a person.  
    ![Circle Number]  

11. Supervisor conveys competence through supervisory style.  
    ![Circle Number]  

12. Supervisor is helpful regarding case notes and report writing.  
    ![Circle Number]  

13. Supervisor helps me to utilize tests constructively and appropriately in the counseling situation.  
    ![Circle Number]  

14. Supervisor appropriately addresses interpersonal dynamics between supervisor and practicum student.  
    ![Circle Number]  

15. Supervisor can appropriately accept feedback.  
    ![Circle Number]  

16. Supervisor allows me to express opinions, ask questions, and voice concerns about my progress.  
    ![Circle Number]
<table>
<thead>
<tr>
<th></th>
<th>Statement</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>17.</td>
<td>Supervisor prepares me adequately for my next counseling session.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>18.</td>
<td>Supervisor helps me clarify my counseling objectives.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>19.</td>
<td>Supervisor provides me with opportunities to adequately discuss the major difficulties that I have faced with clients.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>20.</td>
<td>Supervisor encourages me to conceptualize in new ways, regarding my clients.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>21.</td>
<td>Supervisor challenges me to accurately perceive the thoughts, feelings, and goals that my client and I experience during the counseling session.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>22.</td>
<td>Supervisor is flexible enough for me to be spontaneous and creative.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>23.</td>
<td>Supervisor provides suggestions for developing my counseling skills.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>24.</td>
<td>Supervisor encourages me to utilize new and different techniques when appropriate.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>25.</td>
<td>Supervisor helps me to define and achieve specific, concrete goals for myself during the practicum experience.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>26.</td>
<td>Supervisor provides useful feedback.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>27.</td>
<td>Supervisor helps me organize relevant case data for planning goals and strategies with my clients.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>28.</td>
<td>Supervisor helps me develop increased skill in critiquing and gaining insight from my tapes of counseling sessions.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>29.</td>
<td>Supervisor allows and encourages me to evaluate myself.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>30.</td>
<td>Supervisor explains criteria for evaluation clearly and in behavioral terms.</td>
<td>4 3 2 1 0</td>
</tr>
<tr>
<td>31.</td>
<td>Supervisor applies criteria fairly in evaluating my counseling performance.</td>
<td>4 3 2 1 0</td>
</tr>
</tbody>
</table>

Additional Comments:

*Form adapted from original evaluation developed by J. Bernard, 1981*
Professional Performance Fitness Evaluation
John Carroll University
School Counseling Program

Student ____________________________ Semester/Year _______________________

Site _______________________________________

Evaluation completed by: (check and write name)

__Self-Assessment

__Site Supervisor Name: ________________________________

__JCU Supervisor Name: ________________________________

__Instructor Name: ____________________________________

N- No opportunity to observe
1- Does not meet criteria for program level
2- Meets criteria only minimally or inconsistently for program level
3- Meets criteria consistently at this program level

Therapeutic Skills and Abilities

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>N</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>The student demonstrates the ability to establish a therapeutic relationship.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>The student demonstrates therapeutic communication skills including</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Creating appropriate structure: (setting and maintaining the boundaries of the therapeutic relationship throughout the work (i.e. setting parameters for meeting time and place, maintaining time limits, etc.))</td>
<td>N</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>b. Understanding content: (understanding the primary elements of the client's story.)</td>
<td>N</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>c. Understanding context: (understanding the uniqueness of the story elements and their underlying meaning.)</td>
<td>N</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>d. Responding to feelings: (identifying client affect and addressing those feelings in a therapeutic manner.)</td>
<td>N</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>e. Congruence-genuineness: (demonstrating external behavior consistent with internal affect.)</td>
<td>N</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
### Personal Competence

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>f.</td>
<td>Establishing and communicating empathy: (taking the perspective of the client without over-identification with client’s experience.)</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>g.</td>
<td>Non-verbal communication: (demonstrating effective use of head, eye, hands, feet, posture, voice, attire, etc.)</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>h.</td>
<td>Immediacy: (staying in the here and now)</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>i.</td>
<td>Timing: (responding at the optimal moment)</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>j.</td>
<td>Intentionally: (responding with a clear understanding of one’s own therapeutic intention.)</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>k.</td>
<td>Self-disclosure: (skillful and carefully considered for a specific purpose.)</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

3. The student demonstrates awareness of power differences in the therapeutic relationship and manages these differences therapeutically. N 1 2 3

4. The student collaborates with the client to establish clear therapeutic goals. N 1 2 3

5. The student facilitates movement toward the client goals. N 1 2 3

6. The student demonstrates adequate knowledge of a wide variety of theoretical bases. N 1 2 3

7. The student demonstrates the capacity to match appropriate interventions to the presenting clinical profile in a theoretically consistent manner. N 1 2 3

8. The student creates a safe clinical environment. N 1 2 3

9. The student demonstrates willingness and ability to articulate analysis and resolution of ethical dilemmas. N 1 2 3

10. Student demonstrates focus: (establishes and maintains concentration on client goals.) N 1 2 3

### Professional Responsibility

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>The student conducts self in an ethical manner to promote confidence in the counseling profession and school district.</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2.</td>
<td>The student relates to professors, colleagues, supervisors and others in a manner consistent with stated school standards.</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>3.</td>
<td>The student demonstrates sensitivity to real and ascribed differences in power between themselves and others, and does not exploit or</td>
<td>N</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
The student demonstrates application of legal requirements relevant to counseling training practice and the school.

### Competence

1. The student recognizes the boundaries of her/his particular competencies and the limitations of her/his expertise.  
   N 1 2 3

2. The student takes responsibility for compensating for her/his deficiencies. Openness to supervision.  
   N 1 2 3

3. The student takes responsibility for assuring client welfare when encountering the boundaries of her/his expertise.  
   N 1 2 3

4. The student provides only those services and applies only those techniques for which she/he is qualified by education, training, or experience.  
   N 1 2 3

5. The student demonstrates basic cognitive, affective, sensory, and motor capacities to respond therapeutically to clients.  
   N 1 2 3

6. The student demonstrates knowledge and respect for school policies and procedures.  
   N 1 2 3

### Maturity

1. The student demonstrates appropriate self-control (such as anger control, impulse control) in interpersonal relationship with supervisors, colleagues and clients.  
   N 1 2 3

2. The student is honest, fair, and respectful of others.  
   N 1 2 3

3. The student is aware of his/her own belief systems, values, needs, and limitations and the effect of these on his/her work.  
   N 1 2 3

4. The student demonstrates ability to receive, integrate and utilize feedback from colleagues and supervisors.  
   N 1 2 3

5. The student exhibits appropriate levels of self-assurance, confidence, and trust in own ability.  
   N 1 2 3

6. The student follows professionally recognized problem solving process, seeking to informally solve problems first with the individual(s) with whom the problem exists.  
   N 1 2 3
**Integrity**

1. The student refrains from making statements that are false, misleading or deceptive.  
   
2. The student avoids improper and potentially harmful dual relationships.  
   
3. The student respects the fundamental rights, dignity and worth of all people.  
   
4. The student respects the rights of individual to privacy, confidentiality, and choices regarding self-determination and autonomy.  
   
5. The student respects cultural, individual, and role differences, including those due to age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status.  

**Comments/Suggestions:**

_______________________________________________________________________________________

Signature of Evaluator  
Date

_______________________________________________________________________________________

Counselor Trainee  
Date
Counselor Competencies Scale – Revised (CCS-R)
The Counselor Competencies Scale (CCS-R) will be emailed to your licensed site representative to complete online and a summary report of your responses will be emailed to you at the end of the semester. Keep a copy in your portfolio. The survey is shown below for illustrative purposes only.
Counselor Competencies Scale—Revised (CCS-R) ©
(Lambie, Mellen, & Swands, & Bleier, 2014)

The Counselor Competencies Scale—Revised (CCS-R) assesses counselors’ and trainees’ skills development and professional competencies. Additionally, the CCS-R provides counselors and trainees with direct feedback regarding their demonstrated ability to apply counseling skills and facilitate therapeutic conditions, and their counseling dispositions (dominant qualities) and behaviors, offering the counselors and trainees practical areas for improvement to support their development as effective and ethical professional counselors.

Scales Evaluation Guidelines

- **Exceeds Expectations / Demonstrates Competencies (5)** = the counselor or trainee demonstrates strong (i.e., exceeding the expectations of a beginning professional counselor) knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition and behavior(s).

- **Meets Expectations / Demonstrates Competencies (4)** = the counselor or trainee demonstrates consistent and proficient knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s). A beginning professional counselor should be at this level at the conclusion of his or her practicum and/or internship.

- **Near Expectations / Developing towards Competencies (3)** = the counselor or trainee demonstrates inconsistent and limited knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

- **Below Expectations / Insufficient / Unacceptable (2)** = the counselor or trainee demonstrates limited or no evidence of the knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

- **Harmful (1)** = the counselor or trainee demonstrates harmful use of knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

**Directions:** Evaluate the counselor’s or trainee’s counseling skills, ability to facilitate therapeutic conditions, and professional dispositions & behaviors per rubric evaluation descriptions & record rating in the “score” column on the left.
CACREP (2009; 2016, Draft #2) Standards relating to the Counselor Competencies Scale—Revised (CCS-R)

- Ethical and culturally relevant strategies for developing helping relationships (CACREP, 2016, Section II, Standard 5.d.);
- Counselor characteristics and behaviors that influence helping processes (CACREP, 2009, Section II, Standard 5.b; CACREP, 2016, Section II, Standard 5.e.);
- Essential interviewing, counseling, and case conceptualization skills (CACREP, 2009, Section II, Standard 5.c.; CACREP, 2016, Section II, Standard 5.f.).
- Processes for aiding students in developing a personal model of counseling (CACREP, 2016, Section II, Standard 5.m.).
- Strategies for personal and professional self-evaluation and implications for practice (CACREP, 2016, Section II, Standard 1.j.).
- Self-care strategies appropriate to the counselor role (CACREP, 2009, Section II, Standard 1.d.; CACREP, 2016, Section II, Standard 1.k.).
- If evaluations indicate that a student is not appropriate for the program, faculty members help facilitate the student’s transition out of the program and, if possible, into a more appropriate area of study, consistent with established institutional due process policy and the ethical codes and standards of practice of professional counseling organizations. (CACREP, 2009, Section I, Standard P.; CACREP, 2016, Section I, Standard P.).
- Professional practice, which includes practicum and internship, provides for the application of theory and the development of counseling skills under supervision. These experiences will provide opportunities for students to counsel clients who represent the ethnic and demographic diversity of their community (CACREP, 2009, Section III, Professional Practice; CACREP, 2016, Section III, Professional Practice).
- Entry-Level Program Practicum (CACREP, 2016, Section III, Professional Practice, p. 12).
  A. Students must complete supervised counseling practicum experiences that total a minimum of 100 clock hours per academic term that is a minimum of 10 weeks.
  B. Practicum students must complete at least 40 clock hours of direct service with actual clients that contributes to the development of counseling skills.
  C. An average of one hour per week of individual and/or triadic supervision is provided throughout the practicum by (1) a counselor education program faculty member, (2) a student supervisor who is under the supervision of a counselor education program faculty member, or (3) a site supervisor who is working in biweekly consultation with a counselor education program faculty member in accordance with the supervision agreement.
  D. An average of 1½ hours per week of group supervision is provided on a regular schedule throughout the practicum by a counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member.
  E. Students are covered by individual professional counseling liability insurance policies while enrolled in practicum.
  F. Supervision of practicum students includes program-appropriate audio/video recordings and/or live supervision of students’ interactions with clients.
  G. Formative and summative evaluations of the student’s counseling performance and ability to integrate and apply knowledge are conducted as part of the student’s practicum.
### Part I: Counseling Skills & Therapeutic Conditions

<table>
<thead>
<tr>
<th>#</th>
<th>Score</th>
<th>Primary Counseling Skill(s)</th>
<th>Specific Counseling Descriptors</th>
<th>Exceeds Expectations / Demonstrates Competencies (5)</th>
<th>Meets Expectations / Demonstrates Competencies (4)</th>
<th>Near Expectations / Developing towards Competencies (3)</th>
<th>Below Expectations / Unacceptable (2)</th>
<th>Harmful (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A</td>
<td>Nonverbal Skills</td>
<td>Includes Body Position, Eye Contact, Posture, Distance from Client, Voice Tone, Rate of Speech, Use of silence, etc. (matches client)</td>
<td>Demonstrates effective nonverbal communication skills, conveying confidence &amp; empathy (95%)</td>
<td>Demonstrates effective nonverbal communication skills for the majority of counseling sessions (70%)</td>
<td>Demonstrates inconsistency in his or her nonverbal communication skills</td>
<td>Demonstrates limited nonverbal communication skills</td>
<td>Injures client &amp; gives judgmental looks</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>Encouragers</td>
<td>Includes Minimal Encouragers &amp; Door Openers such as “Tell me more about...”, “Hm...”</td>
<td>Demonstrates appropriate use of encouragers, which supports development of a therapeutic relationship (95%)</td>
<td>Demonstrates appropriate use of encouragers for the majority of counseling sessions, which supports development of a therapeutic relationship (70%)</td>
<td>Demonstrates inconsistency in his or her use of appropriate encouragers</td>
<td>Demonstrates limited ability in use of appropriate encouragers</td>
<td>Uses skill in a judgmental manner</td>
</tr>
<tr>
<td></td>
<td>C</td>
<td>Questions</td>
<td>Use of Appropriate Open &amp; Closed Questioning (e.g., avoidance of double questions)</td>
<td>Demonstrates appropriate use of open &amp; close-ended questions, with an emphasis on open-ended questions (95%)</td>
<td>Demonstrates appropriate use of open &amp; close-ended questions for the majority of counseling sessions (70%)</td>
<td>Demonstrates inconsistency in using open-ended questions &amp; may use closed questions for prolonged periods</td>
<td>Uses open-ended questions sparingly &amp; with limited effectiveness</td>
<td>Uses multiple questions at one time</td>
</tr>
<tr>
<td></td>
<td>D</td>
<td>Reflecting, Paraphrasing</td>
<td>Basic Reflection of Content – Paraphrasing</td>
<td>Demonstrates appropriate use of paraphrasing in a primary therapeutic approach (95%)</td>
<td>Demonstrates appropriate use of paraphrasing (majority of counseling sessions; 70%)</td>
<td>Demonstrates parroting inconsistently &amp; inaccurately or word-for-word repetition</td>
<td>Demonstrates limited proficiency in paraphrasing or is often inaccurate</td>
<td>Judgmental, dissonant, &amp;/or overwords</td>
</tr>
<tr>
<td></td>
<td>E</td>
<td>Reflecting, Reflection of Feelings</td>
<td>Reflection of Feelings</td>
<td>Demonstrates appropriate use of reflection of feelings in a primary approach (95%)</td>
<td>Demonstrates appropriate use of reflection of feelings (majority of counseling sessions; 70%)</td>
<td>Demonstrates inconsistency in reflecting feelings inconsistently &amp; is not matching the client</td>
<td>Demonstrates limited proficiency in reflecting feelings or is often inaccurate</td>
<td>Judgmental, dissonant, &amp;/or overwords</td>
</tr>
<tr>
<td></td>
<td>F</td>
<td>Reflecting, Summarizing</td>
<td>Summarizing content, feelings, behaviors, &amp; future plans</td>
<td>Demonstrates consistent ability to use summarization to include content, feelings, behaviors, and future plans (95%)</td>
<td>Demonstrates ability to use summarization consistently &amp; accurately to include content, feelings, behaviors, and future plans (majority of counseling sessions; 70%)</td>
<td>Demonstrates inconsistency &amp; inaccurate ability to use summarization</td>
<td>Demonstrates limited ability to use summarization</td>
<td>Judgmental, dissonant, &amp;/or overwords</td>
</tr>
<tr>
<td></td>
<td>G</td>
<td>Advanced Reflection (Meaning)</td>
<td>Advanced Reflection of Meaning including Values and Core Beliefs (taking counseling to a deeper level)</td>
<td>Demonstrates consistent use of advanced reflection &amp; promotes discussions of greater depth during counseling sessions (95%)</td>
<td>Demonstrates ability to use advanced reflection, supporting increased exploration in session (majority of counseling sessions; 70%)</td>
<td>Demonstrates inconsistency &amp; inaccurate ability to use advanced reflection</td>
<td>Demonstrates limited ability to use advanced reflection</td>
<td>Judgmental, dissonant, &amp;/or overwords</td>
</tr>
<tr>
<td>#</td>
<td>Type</td>
<td>Primary Counseling Skill(s)</td>
<td>Specific Counseling Descriptors</td>
<td>Exceeds Expectations / Demonstrates Competencies (E)</td>
<td>Meets Expectations / Demonstrates Competencies (M)</td>
<td>Near Expectations / Developing towards Competencies (N)</td>
<td>Below Expectations / Unacceptable (B)</td>
<td>Harmful (H)</td>
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<td>1</td>
<td>H</td>
<td>Confrontation</td>
<td>Counselor challenges client to recognize &amp; evaluate inconsistencies.</td>
<td>Demonstrates the ability to challenge client through verbalizing inconsistencies &amp; discrepancies in the client’s words &amp;/or actions in a supportive fashion. Balance of challenge &amp; support (80%).</td>
<td>Demonstrates the ability to challenge client through verbalizing inconsistencies &amp; discrepancies in the client’s words &amp;/or actions in a supportive fashion. (can centrist, but hesitant) or wins over client and therefore appropriately uses a majority of counseling sessions; (70%).</td>
<td>Demonstrates insufficient ability to challenge client through verbalizing inconsistencies &amp; discrepancies in the client’s words &amp;/or actions in a supportive fashion. Used minimally/insufficient opportunity.</td>
<td>Demonstrates limited ability to challenge client through verbalizing inconsistencies &amp; discrepancies in the client’s words &amp;/or actions in a supportive &amp; caring fashion; (60%). or skill is lacking.</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>I</td>
<td>Goal Setting</td>
<td>Counselor collaborates with client to establish realistic, appropriate, &amp; attainable therapeutic goals</td>
<td>Demonstrates consistent ability to establish collaborative &amp; appropriate therapeutic goals with client (90%).</td>
<td>Demonstrates ability to establish collaborative &amp; appropriate therapeutic goals with client majority of counseling sessions; (70%).</td>
<td>Demonstrates insufficient ability to establish collaborative &amp; appropriate therapeutic goals with client.</td>
<td>Demonstrates limited ability to establish collaborative, appropriate therapeutic goals with client.</td>
<td>No therapeutic goals collaboratively established.</td>
</tr>
<tr>
<td>1</td>
<td>J</td>
<td>Focus of Counseling</td>
<td>Counselor focuses (or refrains) client on his or her therapeutic goals – i.e., purposeful counseling</td>
<td>Demonstrates consistent ability to focus or refrain counseling on client’s goal attainment (85%).</td>
<td>Demonstrates ability to focus on client’s goal attainment (majority of counseling sessions; 70%).</td>
<td>Demonstrates insufficient ability to focus on client’s goal attainment.</td>
<td>Demonstrates limited ability to focus or refrain counseling on client’s goal attainment.</td>
<td>Superficial; is or moves from one to another from client to client in client.</td>
</tr>
<tr>
<td>1</td>
<td>K</td>
<td>Facilitate Therapeutic Environment *</td>
<td>Expresses accurate empathy &amp; care. Counselor is “present” and open to client. (includes immediacy and concreteness)</td>
<td>Demonstrates consistent ability to be empathic &amp; non-appropriate responses (85%).</td>
<td>Demonstrates ability to be empathic &amp; non-appropriate responses (majority of counseling sessions; 70%).</td>
<td>Demonstrates insufficient ability to be empathic &amp; non-appropriate responses.</td>
<td>Demonstrates limited ability to be empathic &amp; non-appropriate responses.</td>
<td>Creates sulkish space for client.</td>
</tr>
<tr>
<td>1</td>
<td>L</td>
<td>Facilitate Therapeutic Environment b</td>
<td>Counselor expresses appropriate respect &amp; unconditional positive regard.</td>
<td>Demonstrates consistent ability to be responsive, accepting, &amp; caring with client (85%).</td>
<td>Demonstrates ability to be responsive, accepting, &amp; caring with client (majority of counseling sessions; 70%).</td>
<td>Demonstrates insufficient ability to be responsive, accepting, &amp; caring.</td>
<td>Demonstrates limited ability to be responsive, accepting, &amp; caring.</td>
<td>Demonstrates conditional or negative respect for client.</td>
</tr>
</tbody>
</table>

Total Score (out of a possible 60 points)
# Part 2: Counseling Dispositions & Behaviors

<table>
<thead>
<tr>
<th>Score</th>
<th>Primary Professional Dispositions</th>
<th>Specific Professional Disposition Descriptors</th>
<th>Exceeds Expectations / Demonstrates Competencies (E)</th>
<th>Meets Expectations / Demonstrates Competencies (M)</th>
<th>Near Expectations / Developing towards Competencies (N)</th>
<th>Below Expectations / Unacceptable (B)</th>
<th>Harmful (H)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. A</td>
<td>Professional Ethics</td>
<td>Adheres to the ethical guidelines of the ACA, ASCA, IAMFPC, APA, &amp; NBCC; including practices within competencies.</td>
<td>Demonstrates consistent ethical behavior &amp; judgments.</td>
<td>Demonstrates consistent ethical behavior &amp; judgments.</td>
<td>Demonstrates inconsistent ethical behavior or judgment.</td>
<td>Demonstrates limited ethical behavior or judgment, and limited ethical decision-making process.</td>
<td>Expectedly violates the ethical code &amp;/or makes poor decisions.</td>
</tr>
<tr>
<td>2. B</td>
<td>Professional Behavior</td>
<td>Behaves in a professional manner towards supervisors, peers, &amp; clients (including appropriate dress &amp; attitudes). Able to collaborate with others.</td>
<td>Demonstrates consistent &amp; advanced responsiveness and thoughtfulness, &amp; appropriate within all professional interactions.</td>
<td>Demonstrates consistent responsiveness and thoughtfulness, &amp; appropriate within all professional interactions.</td>
<td>Demonstrates inconsistent responsiveness and thoughtfulness, &amp;/or inappropriate within some professional interactions.</td>
<td>Demonstrates limited responsiveness and thoughtfulness, &amp;/or inappropriate within some professional interactions.</td>
<td>Demotes unappropriately after discussion &amp;/or repeatedly displays inappropriate behaviors.</td>
</tr>
<tr>
<td>2. D</td>
<td>Knowledge &amp; Adherence to Site Policies</td>
<td>Demonstrates an understanding &amp; appreciation for all counseling site policies &amp; procedures.</td>
<td>Demonstrates consistent adherence to all counseling site policies &amp; procedures, including strong attendance and engagement.</td>
<td>Demonstrates consistent adherence to all counseling site policies &amp; procedures, including strong attendance and engagement.</td>
<td>Demonstrates inconsistent adherence to all counseling site policies &amp; procedures, including attendance and engagement.</td>
<td>Demonstrates limited adherence to all counseling site policies &amp; procedures, including attendance and engagement.</td>
<td>Fails to adhere to policies after discussion with supervisor.</td>
</tr>
<tr>
<td>2. E</td>
<td>Record Keeping &amp; Task Completion</td>
<td>Completes all weekly recordkeeping &amp; tasks correctly &amp; promptly (e.g., case notes, psychological reports, treatment plans, supervisory report).</td>
<td>Completes all required recordkeeping, documentation, and reports in a thorough, timely, &amp; comprehensive fashion.</td>
<td>Completes all required recordkeeping, documentation, and tasks in a competent &amp; timely fashion.</td>
<td>Completes all required recordkeeping, documentation, and tasks, but in an inconsistent &amp; questionable fashion.</td>
<td>Completes required recordkeeping, documentation, and tasks, but in an inconsistent &amp; questionable fashion.</td>
<td>Fails to complete paperwork &amp;/or tasks by specified deadlines.</td>
</tr>
<tr>
<td>#</td>
<td>Source</td>
<td>Primary Professional Dispositions</td>
<td>Specific Professional Disposition Descriptors</td>
<td>Exceeds Expectations / Demonstrates Competencies (E)</td>
<td>Meets Expectations / Demonstrates Competencies (M)</td>
<td>Near Expectations / Developing towards Competencies (N)</td>
<td>Below Expectations / Insufficient / Unacceptable (B)</td>
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<tr>
<td>2</td>
<td>P</td>
<td>Multicultural Competencies</td>
<td>Demonstrates awareness, appreciation, &amp; respect of cultural difference (e.g., race, ethnicity, spirituality, sexual orientation, disability, SES, etc.)</td>
<td>Demonstrates consistent &amp; advanced multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills) in interactions with clients, peers, &amp; supervisors.</td>
<td>Demonstrates multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills) in interactions with clients, peers, &amp; supervisors.</td>
<td>Demonstrates limited multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills) in interactions with clients, peers, &amp; supervisors.</td>
<td>Demonstrates limited multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills) in interactions with clients, peers, &amp; supervisors.</td>
</tr>
<tr>
<td>2</td>
<td>G</td>
<td>Emotional Stability &amp; Self-control</td>
<td>Demonstrates emotional stability (i.e., congruence between mood &amp; affect) &amp; self-control (i.e., impulse control) in relationships with supervisor, peers, &amp; clients.</td>
<td>Demonstrates emotional stability, emotional resiliency &amp; appropriateness in interpersonal interactions with clients, peers, &amp; supervisors.</td>
<td>Demonstrates emotional stability, emotional resiliency &amp; appropriateness in interpersonal interactions with clients, peers, &amp; supervisors.</td>
<td>Demonstrates limited emotional stability, emotional resiliency &amp; appropriateness in interpersonal interactions with clients, peers, &amp; supervisors.</td>
<td>Demonstrates limited emotional stability, emotional resiliency &amp; appropriateness in interpersonal interactions with clients, peers, &amp; supervisors.</td>
</tr>
<tr>
<td>2</td>
<td>H</td>
<td>Motivated to Learn &amp; Grow through Initiative</td>
<td>Demonstrates engagement in learning &amp; development of his or her counseling competencies.</td>
<td>Demonstrates consistent &amp; strong engagement in promoting his or her professional and personal growth &amp; development.</td>
<td>Demonstrates inconsistent engagement in promoting his or her professional and personal growth &amp; development.</td>
<td>Demonstrates limited engagement in promoting his or her professional and personal growth &amp; development.</td>
<td>Demonstrates limited engagement in promoting his or her professional and personal growth &amp; development.</td>
</tr>
<tr>
<td>2</td>
<td>I</td>
<td>Openness to Feedback</td>
<td>Responds non-defensively &amp; alters behavior in accordance with supervisory feedback.</td>
<td>Demonstrates consistent openness to supervisory feedback &amp; implements suggested changes.</td>
<td>Demonstrates consistent openness to supervisory feedback &amp; implements suggested changes.</td>
<td>Demonstrates inconsistent openness to supervisory feedback, however does not implement suggested changes.</td>
<td>Demonstrates limited openness to supervisory feedback &amp; does not implement suggested changes.</td>
</tr>
<tr>
<td>2</td>
<td>J</td>
<td>Flexibility &amp; Adaptability</td>
<td>Demonstrates ability to flex &amp; change, unexpected events, &amp; new situations.</td>
<td>Demonstrates consistent and strong ability to adapt &amp; &quot;reach &amp; adjust&quot; appropriately.</td>
<td>Demonstrates consistent ability to adapt &amp; &quot;reach &amp; adjust&quot; appropriately.</td>
<td>Demonstrates inconsistent ability to adapt &amp; &quot;reach &amp; adjust&quot; to his or her clients’ diverse changing needs.</td>
<td>Demonstrates limited ability to adapt &amp; &quot;reach &amp; adjust&quot; to his or her clients’ diverse changing needs.</td>
</tr>
<tr>
<td>2</td>
<td>K</td>
<td>Congruence &amp; Genuineness</td>
<td>Demonstrates ability to be present &amp; &quot;be true to oneself&quot;.</td>
<td>Demonstrates consistent and strong ability to be genuine &amp; accepting of self &amp; others.</td>
<td>Demonstrates consistent ability to be genuine &amp; accepting of self &amp; others.</td>
<td>Demonstrates inconsistent ability to be genuine &amp; accepting of self &amp; others (disengagement).</td>
<td>Demonstrates limited ability to be genuine &amp; accepting of self &amp; others (disengagement).</td>
</tr>
</tbody>
</table>

**Total Score (out of a possible 55 points)**
Narrative Feedback from Supervising Instructor / Clinical Supervisor

Please note the counselor’s or trainee’s areas of strength, which you have observed:

Please note the counselor’s or trainee’s areas that warrant improvement, which you have observed:

Please comment on the counselor’s or trainee’s general performance during his or her clinical experience to this point:

______________________________  ______________________________
Counselor’s or Trainee’s Name (print)  Date

______________________________  ______________________________
Supervisor’s Name (print)  Date

Date CCS was reviewed with Counselor or Trainee —  ______________________________

______________________________  ______________________________
Counselor’s or Trainee’s Signature  Date

______________________________  ______________________________
Supervisor’s Signature  Date

*Note. If the supervising instructor / clinical supervisor is concerned about the counselor’s or trainee’s progress in demonstrating the appropriate counseling competencies, he or she should have another appropriately trained supervisor observe the counselor’s or trainee’s work with clients to provide additional feedback to the counselor or trainee.*
Appendix D: Forms to Complete Before Internship I & II (CG 598A&B)
School Counseling Program Practicum/Internship Student and Site Information Form

Notification of finding a site must be submitted by **MAY 1** for a practicum starting during Fall semester and no later than **DECEMBER 1** for a practicum starting during Spring semester. These deadlines are non-negotiable. Use the online School Counseling Program Practicum/Internship Student and Site Information Form to submit this information. A confirmation email of your submission will be sent to you. Keep a copy of this email in your portfolio. Failure to submit this by the deadlines indicated above may result in a student being unable to enter the course.
Appendix E: Forms to Complete During Internship I & II (CG 598A&B)
Practicum/Internship Log
John Carroll University
School Counseling Program

Practicum Student ____________________________________ Practicum Site ____________________________
JCU Practicum Supervisor ____________________________ Practicum Instructor __________________________
Semester ________________________________

<table>
<thead>
<tr>
<th>Date:</th>
<th>Total Hours:</th>
<th>Individual Counseling: Hours:</th>
<th>Group Hours:</th>
<th>Supervision Hours:</th>
<th>Other:</th>
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</thead>
<tbody>
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</tbody>
</table>

Totals:
School Counseling Practicum/Internship Plan of Action
John Carroll University
School Counseling Program

Student Name: ___________________________ Date: ____________

<table>
<thead>
<tr>
<th>Objective</th>
<th>How</th>
<th>Anticipated Time Frame</th>
<th>Date Objective Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop this plan</td>
<td></td>
<td>Should be completed prior to beginning internship</td>
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<tr>
<td>M. Ed.</td>
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<tr>
<td>Plan and conduct classroom guidance activities</td>
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<tr>
<td>Individual counseling</td>
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<tr>
<td>Co-lead/lead group counseling</td>
<td></td>
<td></td>
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<tr>
<td>Consultation with parents/teachers</td>
<td></td>
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<tr>
<td>Attend staff meetings</td>
<td></td>
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<tr>
<td>Develop and conduct a teacher/parent workshop</td>
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<td>Six additional objectives</td>
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<td>6.</td>
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</table>
**Weekly Intern Activity Report & Log**

John Carroll University
School Counseling Program

Directions: This report should be completed weekly and turned into the internship course instructor to be placed in the student’s internship file.

Name of Student: _____________________________ Date: __/__/__ - __/__/__  Week #: ___

Name of School: ______________________________ Site Supervisor: ________________

<table>
<thead>
<tr>
<th>Activity</th>
<th>Mon</th>
<th>Tues</th>
<th>Wed</th>
<th>Thurs</th>
<th>Fri</th>
<th>Current Week Total</th>
<th>Previous Total</th>
<th>Cumulative Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Supervision</strong></td>
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<td>• Group</td>
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<td><strong>Counseling</strong></td>
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<td><strong>Consultation</strong></td>
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<td>• Administrator</td>
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<tr>
<td><strong>Staff Meetings</strong></td>
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<td><strong>In-Service Training</strong></td>
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</table>
Describe your assignment within the school keeping in mind the following:

- What specifically am I expected to do?
- In what ways is my assignment different from at the time of the last report?
- Mention specific knowledge or skill objectives that you and/or your supervisor have developed for you.
- Describe new areas of growth and development during this report period.
- Are there tasks or assignments that you would like to have added to your workload?

Reflect on your experience:

- Assess your own performance during the past two weeks. Give an example of something that demonstrates your confidence in implementing counseling services.
- Describe something that you learned you would do differently.

Internship Concerns:

- Indicate any internship-related problems that you are experiencing. What steps have you now taken to resolve the problem? Is your supervisor aware of this problem?
- Please indicate any matter that you feel requires the assistance of the internship instructor.
**Session Review Form**
John Carroll University
School Counseling Program

**PAGE 1 OF 2**

Student Name _________________________________  Date of Session _______________________
Date Reviewed _________________  Supervisor’s Name _________________________________

**Session # __________**

**Instructions:** This page should be filled out by the student’s supervisor. Please rate the student on the below criteria regarding the student’s use of clinical skills when working with a specified case.

<table>
<thead>
<tr>
<th>Please rate each of the following categories:</th>
<th>E (3)</th>
<th>M (2)</th>
<th>D (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exceeds Expectations</td>
<td>Meets Expectations</td>
<td>Does not meet Expectations</td>
<td></td>
</tr>
</tbody>
</table>

**Motivational Interviewing Techniques**
- Open Ended Questions  
  - Rating: E3  
- Affirmations  
  - Rating: E3  
- Reflections  
  - Rating: E3  
- Summarizations  
  - Rating: E3

**Basic Clinical Skills**
- Warmth, respect, positive regard, genuineness  
  - Rating: E3  
- Attending skills utilized  
  - Rating: E3  
- Connecting, linking  
  - Rating: E3  
- Use of evidenced based interventions  
  - Rating: E3  
- Refrains from lecturing and advice giving  
  - Rating: E3  
- Empathy  
  - Rating: E3  
- Silence used effectively  
  - Rating: E3

**Use of self**
- Congruent body language (eye contact, posture, etc.)  
  - Rating: E3  
- Congruent voice, tone, and pace  
  - Rating: E3  
- Professional demeanor and presentation  
  - Rating: E3

**Planning & Structure of Session**
- Evidence of planning for the session  
  - Rating: E3  
- Opening of the session well implemented  
  - Rating: E3  
- Treatment goals clear  
  - Rating: E3  
- Closing was on time & well implemented  
  - Rating: E3

**Multicultural Competency**
- Open to gaining cultural knowledge  
  - Rating: E3  
- Respectful of client’s personal values & beliefs  
  - Rating: E3

Total Points ______/63
Session Review Form
John Carroll University
School Counseling Program
PAGE 2 OF 2

Student Name _________________________________  Date of Session ________________
Date Reviewed ___________  Supervisor’s Name ________________________________
Session # ___________

Instructions: The top portion of this page should be filled out by the student prior to meeting with the supervisor.

Strengths ________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Areas for Improvement ____________________________ _______________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Theoretical orientation ___________________________. How did you apply this theoretical orientation to this case ____________________________
________________________________________________________________________________________

Feedback requested from Supervisor _____________________________________________________
________________________________________________________________________________________

Instructions: The bottom portion of this form should be filled out by the supervisor during the supervision meeting with the student. The last question should be answered by the supervisor and the student.

Strengths _________________________________________________________________________________
________________________________________________________________________________________

Areas for Improvement ____________ __________________________________________________________
________________________________________________________________________________________

Supervisor and Supervisee’s Plan of Action
________________________________________________________________________________________
________________________________________________________________________________________

Supervisor’s Signature ______________________________________ Date ________________
Student’s Signature ______________________________________ Date ________________
Client Satisfaction Survey
John Carroll University
School Counseling Program

Name of Counselor _______________________

Semester/year _______________________

Number of counseling sessions you have participated in with this counselor ______

Indicate the extent to which you AGREE or DISAGREE with each of the statements below.

Strongly disagree (1)  Disagree (2)  Neither agree or disagree (3)  Agree (4)  Strongly Agree (5)

1. I would rate my overall counseling experience positively ______

2. The counseling services I am receiving meet my needs ______

3. My counselor is interested in and accepting of me ______

How much have you benefited so far from being in counseling?
Check one
___ I've gotten much worse
___ I've gotten worse
___ I'm about the same
___ I'm better
___ I'm much better

Please rate the overall level of distress that brought you to counseling
High  5_  4_  3_  2_  1_  low

Please rate the overall level of that same distress now
High  5_  4_  3_  2_  1_  low

Please rate the overall service provided by my counselor
High  5_  4_  3_  2_  1_  low
Appendix G: Forms to Complete by the End of Internship II (CG 598B)
Program Evaluation Form
John Carroll University
Clinical Mental Health Counseling Program

*The Program Evaluation is automatically emailed via the Survey Monkey system at the end of the semester to CG 596B students and their site supervisors for completion.*
Student Internship Site Evaluation
John Carroll University
School Counseling Program

FOR FUTURE STUDENT INQUIRIES ONLY*
WILL NOT BE VIEWED BY SITE EMPLOYEES*

Name: ___________________ Internship Site: __________________________

Dates of placement: __________________________

Internship Site Supervisor: __________________________

Rate the following questions about your internship experience using the following scale:
1. Very unsatisfactory
2. Moderately unsatisfactory
3. Moderately satisfactory
4. Very satisfactory

____ Amount of on-site supervision.
____ Quality and usefulness of on-site supervision.
____ Usefulness and helpfulness of Internship Instructor.
____ Relevance of internship experience to career goals.
____ Exposure to and communication of school goals.
____ Exposure to and communication of school procedures.
____ Exposure to information regarding community resources.

Rate all applicable experiences which you had at your site, using the same scale:
____ Report writing.
____ Administration and interpretation of tests
____ Staff presentations/case reviews/ staff in-services.
____ Individual counseling.
____ Classroom group guidance activities.
____ Family conferences.
____ Psychoeducational activities.
____ Consultation.
____ Career counseling.

Present an overall rating of your internship site, using the same scale:
____ Overall evaluation of internship site.
____ Other __________________________
Please provide brief answers to the following questions:

1. Did your orientation session at the beginning of your placement give you an adequate overview of the placement site?

2. Were the goals of your placement adequately defined between you and your Site Supervisor?

3. Was your Site Supervisor available for regular consultation?

4. Were you able to utilize staff resources from all areas of the school district and community?

5. Were you given feedback regularly and consistently during your internship experience, regarding your progress?

6. Were you given appropriate responsibility? Too little responsibility? Too much responsibility?

7. Did you learn useful, marketable skills during your internship?

8. What could have been done differently to make this a better placement?

9. Would you recommend this site to another student? Why or why not?

Please return this form to the Clinical Coordinator Assistant, Amy Zucca in AD309.