



## INTERNSHIP MEMORANDUM OF AGREEMENT

(Note: Please enter dates in the form mm/dd/yy)

This agreement is made this       day of       by and

Between

(hereinafter referred to as the AGENCY or SCHOOL) and the **Counseling and Human Services**

**Program of the University of Colorado at Colorado Springs** (hereinafter referred to as

the PROGRAM). This agreement will be in effect for a period of time

from       to       .

**Student's Name:**

**Site Phone:**       **Home Phone:**       **Work Phone:**

**Site Name:**

**Site Address:**

**Consenting On-Site Supervisor:**

**Supervisor's Phone:**       **Highest Degree:** High School

**License/Certification Type:**       **State:**       **Number:**

**Supervisor's Years of Professional Experience:**

**Purpose:** The purpose of this agreement is to establish an internship experience for a qualified PROGRAM graduate student in the field of Professional Counseling.

The PROGRAM shall be responsible for the following:

1. identifying students who have completed the required prerequisites for the internship experience.
2. providing the AGENCY/SCHOOL with a course outline that clearly delineates the responsibilities of the PROGRAM and the AGENCY/SCHOOL.
3. identifying a qualified faculty member (University Supervisor) to work with the AGENCY/SCHOOL in coordinating the internship experience. The University Supervisor provides PROGRAM orientation, professional development opportunities as well as assistance and consultation to AGENCY/SCHOOL site supervisors

4. informing the student of the requirement to adhere to the administrative policies, rules, standards, schedules, and practices of the AGENCY/SCHOOL.

#### Internship Contract

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5. requiring the intern to purchase student professional liability insurance through the American Counseling Association.
6. providing on-campus small group supervision conducted weekly by the university supervisor. Interns will make case presentations about their work in the AGENCY/SCHOOL and discuss possible strategies for working with these cases. These group supervision meetings will be conducted with a heavy emphasis on the ethical treatment of confidential client information. Names and other key client identifying data will not be used in these presentations.
7. awarding the student's final grade. The PROGRAM gives considerable weight to the evaluation of the intern provided by the AGENCY/SCHOOL supervisor in the grade determination.

The AGENCY/SCHOOL shall be responsible for the following:

1. providing an orientation to the student that fully describes the AGENCY/SCHOOL and its policies, procedures and services provided. The orientation should describe the student counselor's expected role in the AGENCY/SCHOOL.
2. identifying a qualified AGENCY/SCHOOL site supervisor. The site supervisor must be a licensed mental health professional or school counselor and have at least two years of professional experience.
3. Providing the opportunity for the intern to engage in a variety of appropriate counseling activities under supervision. A CONTRACT specifying the duties the intern will be perform and estimating the time spent in each activity will be developed by the intern and on-site supervisor. The CONTRACT will be signed by the intern, on-site supervisor and university supervisor. As a minimum the CONTRACT must define the number and type of direct service hours/week the intern will perform; number of indirect hours/week the intern will perform; the number of hours of individual and group supervision the intern will receive/week.
4. providing a minimum of 600 clock hours of counseling experience for interns over a minimum of two academic semesters. Of these hours, 240 hours are in "direct client service". The remainder may be in other counseling related activities that are in support of the AGENCY/SCHOOL mission.
5. ensuring that direct on-site supervision is available to the intern whenever he/she is counseling or providing direct service to clients.
6. providing a minimum of one hour per week of individual supervision (using audiotape, videotape, and or direct observation) delivered by a qualified on-site supervisor.
7. providing the opportunity for the intern to become familiar with a variety of professional activities other than direct service.
8. Providing the opportunity for the intern to develop audio and/or videotapes of the intern's interactions with clients appropriate to the specialization for use in supervision.
9. Providing the opportunity for the intern to gain supervised experience in the use of a variety of professional resources such as assessment instruments, computers, print and non-print media, professional literature, research and information on appropriate referral techniques.
10. Preparing a formal evaluation of the intern's performance for each semester of the internship prepared by the on-site supervisor. This evaluation will be used as a major factor in the evaluation of the intern by the university supervisor. The results of the university supervisor's evaluation will be communicated to the on-site supervisor.

**Equal Opportunity:** It is mutually agreed that neither party shall discriminate on the basis of race, color, nationality, ethnic origin, age, sex or creed.

**Financial Agreements:** Financial stipulations may vary from one AGENCY/SCHOOL to another. If a financial stipulation is to be provided, it is stated in a separate agreement and approved by the AGENCY/SCHOOL, INTERN and UNIVERSITY.

**Termination:** It is understood and agreed upon by the parties hereto that the AGENCY/SCHOOL has the right to terminate the internship experience of the student whose health status is detrimental to the services provided the clients of the AGENCY/SCHOOL. Further, the AGENCY/SCHOOL has the right to terminate the internship if, in the opinion of the supervising counselor, the intern's behavior is detrimental to the operation of the AGENCY and/or client care. Such action will not be taken by the AGENCY/SCHOOL until the issues involved have been discussed with the intern and university supervisor.

**The names of the responsible individuals at the two institutions charged with the implementation of the contract are:**

UNIVERSITY SUPERVISOR (typed)

AGENCY/SCHOOL SUPERVISOR (typed)

\_\_\_\_\_  
UNIVERSITY SUPERVISOR'S SIGNATURE

\_\_\_\_\_  
AGENCY/SCHOOL SUPERVISOR'S SIGNATURE

**I agree to the terms of this Memorandum of Agreement and will abide by the policies and procedures of the AGENCY.**

INTERN'S NAME (typed)

\_\_\_\_\_  
INTERN'S SIGNATURE