SCHOOL COUNSELING
Master of Education
Practicum/Internship
Handbook

Putting the Pieces Together

COUNSELING AND PSYCHOLOGICAL SERVICES
COLLEGE OF EDUCATION
GEORGIA STATE UNIVERSITY

Spring 2018/Fall/Spring 2017-2018 Practicum-Internship Sequence
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IMPORTANT DEADLINES

September 20, 2016
Mandatory Practicum/Internship Orientation: All students planning to begin Practicum CPS 7661 in Spring 2017 MUST attend this meeting. Time/place to be announced on the following website: http://education.gsu.edu/cps/4983.html

October 11, 2016
Current School Counseling Students must email the completed Application for Practicum CPS 7661 to Lydia Stewart at lstewart32@gsu.edu and copy Dr. Rice at rrice3@gsu.edu.

Spring Semester
Your proof of student liability insurance must be turned in to Dr. Rice Room 980 College of Education by first day of spring semester for practicum and by July 1st for Internship. Liability insurance can be purchased from ACA, ASCA, GAE, or PAGE. If the site you have selected requires drug screening or criminal background checks, this documentation should also be complete before you can be fully approved for your schools. ALL STUDENTS MUST CARRY INDIVIDUAL LIABILITY INSURANCE.

PREREQUISITES FOR ELEMENTARY/MIDDLE STUDENTS
School counseling students who do not already have initial certification in the State of Georgia must successfully complete EXC 4020 Characteristics and Instructional Strategies for Students with Disabilities and the appropriate GACE Content Assessment before Georgia State University will recommend them for graduation and/or certification in School Counseling. Characteristics and Instructional Strategies for Students with Disabilities

Summer 2016 Entry: CPS 6020, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, CPS 8260, and CPS 8400
CPS 7550 will be taken concurrently with CPS 7681

Summer 2015 Entry: CPS 6020, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, CPS 8260 and CPS 8400
CPS 7550 will be taken concurrently with CPS 7661

PREREQUISITES FOR SECONDARY STUDENTS
Summer 2016 Entry: CPS 6030, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, CPS 8260 and choice of CPS 8400/CPS 8460/or CPS 8380
CPS 7550 will be taken concurrently with CPS 7681

Summer 2015 Entry: CPS 6030, CPS 6150, CPS 6410, CPS 6450, CPS 7260, CPS 7300, CPS 7340, CPS 7500, CPS 8260 and choice of CPS 8400/CPS 8460/or CPS 8380 CPS 7550 will be taken concurrently with CPS 7661

GUIDELINES: PRACTICUM & INTERNSHIP

PREREQUISITES AND DEPARTMENTAL APPLICATION

1. The school counseling practicum/internship sequence begins only in fall semester of the second year of the school counseling program. This procedure applies to new students to the Master of Education program, initial certification (non-degree) students, and current CPS students.
2. Students must attend the practicum/internship workshop before turning in the practicum application. The practicum/internship workshops are normally held in October or November. Please check the bulletin boards and website for workshop announcements.

3. The application for practicum/internship must be submitted by **October 11**, to Lydia Stewart. (See Appendix A for sample)

   You will need to submit a second application for the internship sequence in February for the following fall and spring internship sequencing. Enrollment and completion of the Fall CPS 7681: Internship I and CPS7550 will ensure you the ability to enroll in the spring semester of internship, CPS 7681: Internship II.

4. Notification of placement will be emailed to you by the Office of Academic Assistance in the College of Education and Human Development. Included in this email will be information on getting authorization to enter the course. Students must receive course authorizations prior to registering for CPS 7661 and CPS 7681; authorization is **required** prior to registering for CPS 7661 and CPS 7681. Students can find authorization forms on the CPS website.

5. *Special note:* If you have applied or registered for CPS 7661/CPS 7681, but later decide not to enter the course for that particular semester, it is important that you fill out the *Practicum Postponement* form (see Appendix A for sample) and return it to the department. Be sure to advise the instructor of the section in which you are enrolled as well.

6. Practicum and internship must be completed during semesters indicated, spring for practicum and consecutive fall and spring semesters for internship.

**Placement Information**

1. Students are asked to follow the guidelines of the system to which they are applying. The County Placement Office will assign each student a school. If students have any questions, they are encouraged to contact Dr. Rice, the School Counseling Program Coordinator.

2. Students will not be assigned to a school that their children attend and/or in which a family member works.

3. Students who are teachers in DeKalb County and Fulton County are not permitted to complete their practicum and internships in that county while employed as a full-time teacher. THIS IS A DEKALB AND FULTON COUNTY POLICY, AND IT IS NOT NEGOTIABLE. You must plan to complete your field experience by taking a leave of absence in DeKalb County and/or Fulton County.

4. Many counties have applications that students must complete in addition to GSU’s application.

5. Students may not change placements for any reason without prior approval from Dr. Rice, the School Counseling Program Coordinator.

6. Please note that all sites will require students to pass a background check prior to placement. Any student with concerns about being able to pass this background check should consult the school counseling program coordinator immediately, and well before beginning the school-counseling program of study. Students unable to be placed at a site due to background concerns will not be able to complete CPS 7661 or CPS 7681, and therefore, will be unable to earn their MED in school counseling.
SITE SUPERVISOR GUIDELINES

Approval of sites will depend on the availability of a qualified on-site supervisor. Sites with a Comprehensive School Counseling Program are preferred. **The on-site supervisor must be a certified school counselor in Georgia with at least three years of experience as a school counselor.**

1. The on-site supervisor should schedule a planning and supervision conference each week with the intern to discuss various aspects of his/her work, and make **suggestions and recommendations** relative to intern's progress. At least one (1) hour of on-site supervision should be provided each week.

2. The on-site supervisor should also provide an opportunity for the student to observe him/her in his/her work with students, teachers, and parents/guardians.

3. The on-site supervisor should observe the student in a number of settings such as teacher/parent conferences and working with students.

4. At the conclusion of each semester the on-site supervisor will complete a School Counselor Evaluation Form related to the student's progress and will discuss the evaluation with the student.

5. Students will evaluate the site and site supervisor at the end of Practicum, Internship I and Internship II. (See Appendix C).

CPS 7661 APPLIED PRACTICE I/ PRACTICUM (Spring Semester of the first year)

1. The program requires students to complete a 10 week supervised practicum experience. Students are expected to spend **150 clock hours (40 hours of which must be DIRECT service)** on site during the spring semester of their first year. The practicum provides for the development of teacher/parent consultation (observation only), classroom lessons, psychoeducational activities, individual counseling, group counseling, and the administration of general school counseling services. ALL students must maintain a LiveText account in order to be enrolled in CPS 7661. An overview of the practicum requirements includes the following:

   a) Observe a minimum of 2 parents conferences and/or psychoeducational consultations.
   b) Observe a minimum of 2 teacher consultations and/or psychoeducational consultations.
   c) Co-lead a minimum of 7 classroom lessons in at least two domains (academic, career, social/emotional) completed by the end of Practicum.
   d) Co-lead/Lead a minimum of 7 individual student counseling sessions.
   e) Co-lead/Lead a minimum of 5 small group counseling sessions.
   f) Audio and/or videotapes of the intern’s interactions with one student for use in supervision.
   g) Students will keep a Microsoft Excel log outlining activities (will be emailed to you and/or posted on LiveText).
   h) A minimum of one (1) hour per week of individual supervision provided by on-site supervisor.
   i) A two (2) hour per week of supervision group with other students and practicum instructor.
   j) An evaluation of the intern’s performance throughout the practicum including a **formal** evaluation at the completion of the practicum (See Appendix C).
1. The program requires students to complete a 15-week supervised Internship I of 350 clock hours (125 hours of which must be DIRECT service) that is begun after successful completion of the student's 10 week, 150 hour Practicum. ALL students must maintain a LiveText account in order to be enrolled in CPS 7681 Internship I. An overview of the student's Internship I includes the following Co-lead and Lead:
   a) A minimum of 7 parent consultations and/or psychoeducational consultations following the consultation model.
   b) A minimum of 7 teacher consultations and/or psychoeducational consultations following the consultation model.
   c) A minimum of 15 classroom guidance sessions on such topics as affective education, career exploration, drug education, etc.
   d) A minimum of 15 individual student counseling sessions.
   e) A minimum of 10 small group counseling sessions.
   f) Audio and/or videotapes of the intern’s interactions with students, parents, teachers, etc., for use in supervision.
   g) Students will keep a Microsoft Excel log outlining activities (will be emailed to you and/or posted on LiveText).
   h) A minimum of one (1) hour per week of individual supervision, throughout the internship provided by the on-site supervisor.
   i) A One (1) hour a week triadic supervision with the GSU supervisor and a one hour and 40 minutes per week of supervision group with other students and the GSU supervisor.
   k) A formal evaluation of the intern’s performance during the Internship I and intern’s evaluation of his/her Site (See Appendix C).

CPS 7681 INTERNSHIP II (SPRING 2018 SEMESTER FULL INTERNSHIP)

1. The program requires students to complete a 15-week supervised Internship II of 350 clock hours (125 hours of which must be DIRECT service) that is begun after successful completion of the student's 150-hour practicum and 350 hour Internship I. ALL students must maintain a LiveText account in order to be enrolled in CPS 7681 Internship II. The student's Internship II includes the following to be CO-Lead or Lead:
   a) A minimum of 8 parent consultations and/or psychoeducational consultations following the consultation model.
   b) A minimum of 8 teacher consultations and/or psychoeducational consultations following the consultation model.
   c) A minimum of 15 classroom guidance sessions on such topics as affective education, career exploration, drug education, etc. Students must complete TWO classroom guidance units by the end of Internship II.
   d) A minimum of 15 individual student counseling sessions by the end of the Spring 2018 semester.
   e) A minimum of 15 small group counseling sessions by the end of the Spring 2018 semester.
   f) Audio and/or videotapes of the student's interactions with students, parents, teachers, etc., for use in supervision.
   g) Students will keep a Microsoft Excel log outlining activities (will be emailed to you and/or posted on LiveText).
   h) A minimum of one (1) hour per week of individual supervision provided by the on-site supervisor.
   i) A one hour and 40 minutes per week of supervision group with other students and Internship I instructor.
   k) A formal evaluation of the intern’s performance during the Internship II and intern’s evaluation of his/her Site (See Appendix C).
Licensure & Certification

1. Students planning to pursue licensure as a professional counselor will want to familiarize themselves with the requirements and also begin documenting their training, supervision, and clinical experience. 
   
   Note: It is in students' best interests to keep all GSU graduate bulletins and all course syllabi.

2. Students seeking further information are encouraged to contact the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists at 478-207-2440.

3. Applying to take the National Counselor Exam (NCE) when it is offered at GSU during the spring semester is in the student’s best interest.

4. The Department of Counseling and Psychological Services is not a licensure or certification organization. Students are responsible and accountable for obtaining licensure and/or certification information to be a School Counselor in the state of Georgia from the Georgia Professional Standards Commission and The Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists. If students are planning to practice in a state other than Georgia, it is their responsibility to know this information for their chosen state. The department does not advise or speak for any licensing or certification board.

5. Please note that the CPS department cannot guarantee that The Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists or Professional Standards Commission (or any state Board or Commission) will approve your application to be a licensed or certified School Counselor. Our CPS program is designed around the Georgia Professional Standards Commissions’ qualifications for an approved program; however, the Georgia Board (and all other state Boards) reserves the right to individually approve or deny each applicant, regardless of school counseling graduate program completed.
STUDENT RESPONSIBILITIES

Program Requirements

1. All students are expected to purchase Student Liability Insurance before beginning the practicum/internship sequence. Liability insurance is available from ACA and ASCA. Applications are available by calling ACA at (800) 347-6647/ext. 222 or ASCA at (800) 306-4722. Information is also available online via ACA (www.counseling.org) and ASCA (www.schoolcounselor.org) web pages. The department cannot advise you on the best policy to purchase—only ACA and ASCA can advise you on this. A copy of the student's insurance policy should be submitted to Dr. Rice (Room 980) no later than January 8, 2017 before beginning practicum and again July 1, 2017 before beginning internship I. Your insurance must cover you for the entire time of your practicum and internship sequence. A copy of syllabus should be given to the site supervisor prior to the student's first day at the site.

2. All school counseling students must pass the School Counseling GACE II Certification Test administered by the State of Georgia as required by Rule 502-2-.08 of the Georgia Professional Standards for Teacher Certification. Students must complete this requirement prior to graduation, because this certification test is your graduation exit exam for the CPS department. A copy of the GACE II results must be submitted to Dr. Rice to fulfill the graduation exit exam requirement.

Miscellaneous

1. Even though students are offering counseling assistance to their respective schools, they are guests of that school and have been invited to learn about the practical aspect of school counseling. This is also a time to become familiar with their role as a professional.

2. The school may require more of a student than the practicum/internship requires. Students should be clear on organizational expectations. Any problem with these expectations should be discussed with the student's site supervisor and CPS instructor. Students are strongly encouraged to talk with their assigned site supervisor BEFORE THE SCHOOL YEAR BEGINS to determine and work out potential problems.

3. In addition to training requirements, students will want to become familiar with the general policies and procedures of their school. Such information may include but not be limited to:
   
a) General operational procedure, required paperwork, dress code.
b) Procedures for handling emergency situations with clients (i.e. suicide risk, psychotic episode, crisis, etc.).
c) The availability of on-call consultation/back-up.
d) Procedures for referrals outside your school and those resources typically used.
e) Opportunities available for use of assessment instruments, computers, professional literature, and research.

4. When in doubt - ask. Interns should remember that they are students and new to the school. As such, they are not expected to know everything. Students are encouraged to utilize on-site conflicts and problems as learning experiences, keeping in mind that they are there with the permission of the school.

5. Criminal Background Check
   All students must have a criminal background check as required by the College of Education. Any student with concerns about being able to pass this background check should consult the school counseling program coordinator immediately, and well before beginning the school counseling program of study. Students unable to be placed at a site due to background concerns will not be able to complete CPS 7661 or CPS 7681, and therefore, will be unable to earn their MED in school counseling.
**Tips for the New Professional School Counselor**

Transitioning to the role of a professional school counselor can be both exciting and anxiety provoking. The practicum/internship experience offers students the opportunity to begin applying the knowledge gained through readings and coursework. It is natural for beginning counselors to experience insecurities related to their skill level and potential clients. Students should remember the intent of their role and make use of the suggestions and guidance that their supervisor can provide.

**Ethical and Legal Guidelines**

1. **The Ethical Standards for School Counseling** published by the American School Counselor Association (ASCA) and the **ACA Code of Ethics** published by American Counseling Association (ACA) are available from the practicum/internship instructor or online at ASCA (www.schoolcounselor.org) or ACA (www.counseling.org). Students are required to adhere to these Codes.


**SUPERVISION**

**Purpose:**

1. The practicum/internship experience, the actual development and application of clinical skills, is central to the education of professional school counselors. The supervision process is an integral part of this experience as it provides the opportunity to hone skills, explore new possibilities, receive feedback, and build one's repertoire and confidence as a professional school counselor.

2. Each student should be prepared to effectively use supervision time, both on-site and at the University.

3. Each counseling session and tape should be thoroughly previewed by the student, with notes reflecting important content and appropriate sections of the tape.

4. The practicum/internship supervisor has the authority and responsibility to withdraw a student from a practicum/internship experience if the student's performance constitutes a detriment to the students or parents/guardians at the school. If such a removal is necessary, the student will be given a “U” for the semester. Repetition of the entire practicum-internship sequence will be required, even if the student earns a “U” grade in only one of the three required courses (CPS 7661, CPS 7681-I, or CPS 7681-II).

**Taping:**

1. The use of audio taping (as well as videotaping and live supervision when available) provides a rich source of feedback and opportunity to reflect on issues and dynamics arising during a counseling interview.

2. Audio recordings of counseling sessions are *required* for supervision. An example of a permission letter for taping is at the end of this section.

3. In order to maximize the quality of supervision, *clear and audible audio recordings are essential.*
**Confidentiality:**

1. One of the most important aspects of counseling is ethical confidentiality. It is also essential in building trust with clients. There are several aspects of confidentiality of which students need to be especially aware:

   a) Students should know their school's regulations regarding confidentiality of case notes, files, and audiotaping.
   b) Audio recording is an important aspect of supervision. It is students' responsibility to obtain written parental permission to tape individuals and group counseling sessions. (See Appendix C for sample). Students must also explain the limits of confidentiality to clients and parents if this is not provided in writing by the school. Students should let students and parents know who else will be hearing the audio tape (i.e. supervisor/class) and for what purpose.
   c) As a professional, any information shared in class is to be kept confidential by all class members.
   d) The client's full name should not be used on any forms. Forms can be identified for use by labeling it with the client's initials.

2. *The importance of confidentiality cannot be stressed enough.* Students should be extremely careful with their audio recordings and safeguard against loss or others having access to them.

**Critical Clinical Issues:**

Critical issues listed below should be handled by immediate consultation with the on-site supervisor. Faculty supervisors can also serve as a second consultant on these issues.

a) Suicide information, risk assessment, and suicide contracting.
b) Information regarding threat of harm to others, including Tarasoff decision and guidelines for handling such students.

**c) Child abuse and neglect information - definition, recognition, and reporting.**
PERMISSION STATEMENT FOR TAPE RECORDING *

Dear ________________:

I am presently a school counselor trainee in the School Counseling program at Georgia State University and am completing my practicum at _______________ (school name) this semester. I will be supervised by Dr. Robert Rice, a faculty member at Georgia State University and by ________________, my on-site supervisor at your child’s school. In order to fulfill the requirements for this master’s degree, I need to video and/or audio tape my sessions with students whenever possible. The purpose of these recordings is to allow my supervisors to help me improve my counseling skills and techniques. The recordings are strictly confidential. * Although these recordings may be reviewed/viewed by other school counselor trainees for training purposes, no last names will be used, and the recordings will be erased as soon as my supervisors have reviewed them.

I am requesting your permission to video and/or audiotape my sessions with your son or daughter. Please sign below to give your consent and permission. My Georgia State University supervisor’s contact information is here for your information: (Dr. Robert Rice, 404-413-8189; rrice3@gsu.edu).

Sincerely,

__________________________________
Counselor Trainee’s Name
Counseling Department
Happy High School

*The audio recording itself is confidential. However, counselors are required by law to report suspected child abuse and/or neglect. Counselors must also report to parents/guardians any concern that a student might harm him/herself. If there is a concern that a student could harm others, parents/guardians and school officials must be notified, as well as the potential victim(s) if identified.

__________________________________ has my permission to be video and/or audio taped during counseling sessions.

Parent’s/Guardian’s Signature: ___________________________ Date: ________________

Site Supervisor’s Signature: ___________________________ Date: ________________

Counselor Trainee’s Signature: ___________________________ Date: ________________
APPENDIX A

SCHOOL COUNSELING
APPLICATION FOR PRACTICUM CPS 7661 & INTERNSHIP CPS 7681

Name: _______________________________ Student ID Number: _______________________________

Address: ____________________________________________________________

Home Phone: (   ) ___________________________ Other Phone: (   ) ____________________________

E-Mail Address: _______________________________________________________

IMPORTANT

All School Counseling students will begin practicum in Spring semester 2017; Internship I will begin fall semester 2017; and Internship II will begin in the Spring 2018 semester.

MONDAY, October 11, 2016: Application deadline for the practicum and internship sequence. Please email the completed application to Lydia Stewart lstewart32@gsu.edu and copy Dr. Rice at rrice3@gsu.edu.

1. Please indicate if you hold a teaching certificate: ____Yes ____ No ____ State

2. If you are presently teaching or working in a school, please indicate the name of the school.

3. Please indicate which semester and year you plan to graduate.

4. Which program are you in (circle one): Elementary Middle Secondary

5. What School Systems are you interested in for placement? If you have specific schools in these systems, please list those schools as well.

System 1. ____________________________ Possible Schools

______________________________

System 2. ____________________________ Possible Schools

______________________________

System 3. ____________________________ Possible Schools

______________________________
6. Please indicate the **semester/year** in which the **prerequisite** courses were taken and the **grade earned**:

**ELEMENTARY/MIDDLE SCHOOL COUNSELING**

CPS 6020 ___________    CPS 6150 ___________    CPS 6410 ___________
CPS 6450 ___________    CPS 7260 ___________    CPS 7300 ___________
CPS 7340 ___________    CPS 7500 ___________    CPS 8260 ___________
CPS 8400 ___________

**SECONDARY SCHOOL COUNSELING:**

CPS 6030 ___________    CPS 6150 ___________    CPS 6410 ___________
CPS 6450 ___________    CPS 7260 ___________    CPS 7300 ___________
CPS 7340 ___________    CPS 7500 ___________    CPS 8260 ___________
Choice of CPS 8400/CPS 8460/or CPS 8380 _____________________

* I have been admitted to the school counseling program and am eligible to begin practicum/internship in Spring 2017.

* I have read the information in the practicum/internship handbook for School Counseling. Any questions about the contents have been answered by the CPS Graduate Advisor or by a School Counseling Program faculty member.

* I understand that if I am qualified and accepted to begin the practicum/internship sequence, I will do so during the semester for which I applied. **Should my plans change for any reason, I will immediately notify the CPS academic advisor and submit a Practicum Postponement form.**

* I agree to purchase liability insurance for my two semesters of field-based experience and to complete a Criminal Background Check as required by the College of Education.

*Please consult the School Counseling Handbook before completing this application. Completed applications must be emailed to Lydia Stewart lstewart32@gsu.edu and copy Dr. Rice at rrice3@gsu.edu.*
PRACTICUM POSTPONEMENT FORM

Name: _______________________________________________________________________________________

Student Panther ID Number: ________________________________________________________________

Address: __________________________________________________________________________________

City: __________________________ State: ____________ Zip: _______________

Home Phone: (     ) ____________________  Business Phone: (     ) ________________________

E-Mail Address: ____________________________________________________________________________

I am in the School Counseling program and am requesting to postpone my practicum/internship from
_________semester to ________________________________semester. I need to do this because
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________

I realize that this may result in my not being able to start practicum the semester I have requested.

Please complete this form and email to Lydia Stewart lstewart32@gsu.edu and copy Dr. Rice at
rrice3@gsu.edu. Additionally, you should make an appointment with your academic advisor (Regina Finan) so
you can make plans for future semesters.
APPENDIX B
CPS 7661/7681 Tape Summary Form

Your Name: ___________________________ _____________ Date: _________________________________

Student Initials: ______________________ Session Length: ___________ Session Number with Student: _______

Rate Your Performance in this Session: 1 2 3 4 5 6 7 8 9 10 Please explain your reason for this ranking.

1. Type of Intervention: IND CG SG PC TC

2. Date of Intervention: __________________________

3. Child Discussed (Age, gender, no names): _________________________________

4. Reason for Intervention: ______________________________________________________________________

___________________________________________________________________________________________________________

5. Summary (Including interventions suggested and follow up information such as who is responsible for what):

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

6. School Counselor’s Strengths:

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

7. Something to Work on Next Time:

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

8. Plan for Follow up with Student, Teacher(s), or Parent/Guardian:

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

Questions for feedback from your peers and supervisor…

___________________________________________________________________________________________________________

Note: Be sure to address each item; do not leave blanks.
### Individual Counseling Notes

<table>
<thead>
<tr>
<th>Student (use initials):</th>
<th>Grade Level:</th>
<th>Session Number with Student:</th>
</tr>
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<tbody>
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<table>
<thead>
<tr>
<th>Date:</th>
<th>Initial Session</th>
<th>Follow Up</th>
<th>Session Length:</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Focus of Session (2):</th>
<th>PERSONAL/SOCIAL</th>
<th>ACADEMIC</th>
<th>CAREER</th>
</tr>
</thead>
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</table>

Presenting Concern(s):
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

Goal of Misbehavior: ATTENTION POWER REVENGE WITHDRAWAL

Interventions (2):
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

Encouragement Strategies: CONNECT CAPABLE CONTRIBUTE
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

Referral Made (1)

Potential Future Referral (1)

Follow Up Plan (Minimum of two ideas/suggestions/strategies) (2):
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

As a School Counselor-in-Training, I learned (thoughts and feelings):
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

Questions for feedback from your peers and supervisor…
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

- Note: Be sure to address each item; do not leave blanks.
Consultation Notes

Note: Be sure to address each item; do not leave blanks

Consultee’s Name: _______________________________ Date: ____________
_____ Parent  _____ Teacher  _____ Other

Focus of Consultation (2):  PERSONAL/SOCIAL  ACADEMIC  CAREER

Goal of Misbehavior:  ATTENTION  POWER  REVENGE  WITHDRAWAL

Intervention Suggestions (Minimum of two) (2):

Encouragement Strategies:  CONNECT  CAPABLE  CONTRIBUTE

Referral(s) Made (1):

Potential Future Referral (1):

Follow Up Plan (Minimum of two ideas/suggestions/strategies) (2):

As a School Counselor-in-Training, I learned (thoughts and feelings):

Questions for feedback from your peers and supervisor…
Group Counseling and Classroom Guidance Lesson Notes
Note: Be sure to address each item; do not leave blanks.

_____ Small Group  _____ Classroom Guidance

Topic/Title: _______________________________________________________________  Date: ______________________

Teacher:  ________________________________ Grade Level:  ____________Number of Students Present: ___________

Georgia Performance Standards: _________________________________________________________________________

ASCA National Model Domain (1): Academic  Personal/Social  Career

ASCA National Model Standard (1): A   B   C

Competencies (2):
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Objectives (2):
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Activities:
______________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Resources/Materials Used:
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Assessment/Evaluation Used (2):
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Assessment/Evaluation Results:
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

As a School Counselor-in-Training, I learned (thoughts and feelings):
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Questions for feedback from your peers and supervisor…
____________________________________________________________________________________________________
### APPENDIX C

**SCHOOL COUNSELOR INTERN EVALUATION FORM**

**CPS 7661/7681**

---

**DATE**

**Name of counseling practicum/intern student:**

**Address:**

City: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ State: _ _ _ _ Zip: _ _ _ _

**Home Phone:** ( _ _ _ _ ) **Cell Phone:** ( _ _ _ _ )

**Name of University:**

---

**On-site Supervisor:**

**School Address:**

City: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ State: _ _ _ _ _ _ _ Zip: _ _ _ _ _ _ _

**Phone number:** ( _ _ _ _ )

---

**University Supervisor:**

**University Address:**

City: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ State: _ _ _ _ _ _ _ Zip: _ _ _ _ _ _ _

**Phone Number:** ( _ _ _ _ )

---

**Scoring Rubric**

<table>
<thead>
<tr>
<th>Not Introduced/ Not Assessed:</th>
<th>The practicum/Intern student has not been introduced to this standard/disposition at this time in the program, or this standard/disposition has not been assessed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Demonstrated:</td>
<td>The practicum/Intern student does not demonstrate a basic level of knowledge, performance or other professional skill on this standard.</td>
</tr>
<tr>
<td>Novice, with Support:</td>
<td>The practicum/Intern student demonstrates the basic knowledge and skill needed to achieve this standard, but only with support from others.</td>
</tr>
<tr>
<td>Novice, Independent:</td>
<td>The practicum/Intern student demonstrates the basic knowledge and skill needed to achieve this standard through independent and autonomous planning and action. (aka first year counselor)</td>
</tr>
<tr>
<td>Intermediate:</td>
<td>The practicum/Intern student demonstrates the intermediate knowledge and skill needed to achieve this standard through independent and autonomous planning and action. (aka beyond first year counselor)</td>
</tr>
<tr>
<td>Advanced:</td>
<td>The practicum/Intern student demonstrates exemplary levels of knowledge and skill on this standard through independent, effective, and innovative planning and action. (aka seasoned counselor)</td>
</tr>
</tbody>
</table>
## AREA 1: Professional Identity, Dispositions & Behaviors

<table>
<thead>
<tr>
<th>Knows &amp; applies knowledge of history, philosophy, and current trends in school counseling to guide his/her professional behavior during practicum/ internship placement</th>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knows roles, functions, settings, and professional identity of the school counselor in relation to the roles of other professional and support personnel in the school</td>
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<tr>
<td>Understands ethical and legal considerations related specifically to the practice of school counseling</td>
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<tr>
<td>Applies ethical and legal principles in all aspects of their role as a school counseling intern (i.e. confidentiality, reporting of abuse)</td>
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<tr>
<td>Respects the privacy of students, teachers, and parents/guardians and the confidentiality of information</td>
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<tr>
<td>Presents in a professional manner (i.e., attire, grooming, interactions)</td>
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<tr>
<td>Exhibits initiative, industry, &amp; effort</td>
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<tr>
<td>Demonstrates organizational skills with priorities and documentation</td>
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<tr>
<td>Completes assignments and tasks promptly and accurately</td>
<td></td>
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<tr>
<td>Uses appropriate verbal/written communication skills</td>
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<tr>
<td>Complies with system school mandates</td>
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<tr>
<td>Demonstrates use of good judgment</td>
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<tr>
<td>Promotes positive school climate</td>
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<tr>
<td>Interacts effectively with students</td>
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<tr>
<td>Interacts effectively with parents</td>
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<tr>
<td>Interacts effectively with colleagues (teachers, administrators, paraprofessionals)</td>
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<tr>
<td>Interacts effectively with supervisor by asking for supervision when needed and makes appropriate referrals to school-based &amp; non-school-based resources</td>
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<tr>
<td>Accepts and learns from feedback</td>
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<tr>
<td><strong>Overall Area 1 Rating</strong></td>
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</tbody>
</table>
### AREA 2: Assessment, Intentionality, Program Development & Evaluation

<table>
<thead>
<tr>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understands methods of planning, developing, implementing, monitoring, and evaluating comprehensive developmental counseling programs</td>
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<tr>
<td>Effectively plans, develops, implements, monitors, and evaluates the elements of a comprehensive developmental counseling program</td>
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<tr>
<td>Understands the needs of individuals at various developmental levels</td>
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<tr>
<td>Uses knowledge of human growth and development to create counseling activities that are appropriate to the developmental level of students</td>
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<tr>
<td>Understands career development and related life factors</td>
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<tr>
<td>Uses knowledge of career development when working with students</td>
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<tr>
<td>Understands individual and group approaches to assessment and program evaluation</td>
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<tr>
<td>Effectively evaluates students’ progress in school counseling program</td>
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<tr>
<td>Understands relevant research methods, statistical analysis, needs assessment, and program evaluation</td>
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<tr>
<td>Effectively assesses student needs to design school counseling program interventions and uses appropriate program evaluation methods</td>
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<tr>
<td>Understands how to use student outcome data in order to facilitate academic, personal/social, and career preparedness success</td>
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<tr>
<td>Effectively uses student outcome data in order to facilitate academic, personal/social, and career preparedness success</td>
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</table>

### Overall Area 2 Rating
### AREA 3: Cultural Awareness, Advocacy, and Leadership

<table>
<thead>
<tr>
<th></th>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
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</thead>
<tbody>
<tr>
<td>Demonstrates the ability to articulate, model, and advocate for an appropriate school counselor identity and program</td>
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<tr>
<td>Believes all students can learn at high levels and helps all students achieve success and demonstrates a commitment to helping all students excel</td>
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<tr>
<td>Appreciates and values human diversity</td>
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<tr>
<td>Shows respect for students’ varied talents and perspectives by designing and implementing prevention and intervention plans related to the effects of (a) atypical growth and development, (b) health and wellness, (c) language, (d) ability level, (e) multicultural issues, and (f) factors of resiliency on student learning and development</td>
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<tr>
<td>Respects students as individuals with differing personal and family backgrounds with different skills, talents, and interests</td>
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<tr>
<td>Is sensitive to school, community, and cultural norms</td>
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<tr>
<td>Effectively makes students feel valued for the potential as people and helps them learn to value each other</td>
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<tr>
<td>Understands the counselor’s role in social justice, advocacy, and conflict resolution</td>
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<tr>
<td>Is culturally self-aware and understands the impact of biases, prejudices, processes of intentional and unintentional oppression and discrimination on the student’s academic, personal/social, and career development</td>
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<tr>
<td>Effectively uses knowledge of culture, advocacy, and social justice to create academic, personal/social, and career development programs that meet the needs of the diverse population</td>
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</tbody>
</table>

**Overall Area 3 Rating**
# AREA 4: Individual Counseling

<table>
<thead>
<tr>
<th></th>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
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</thead>
<tbody>
<tr>
<td>Understands counseling theories that related to the school setting</td>
<td></td>
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<tr>
<td>Uses a consistent model to conceptualize student concerns and selects appropriate counseling interventions</td>
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<tr>
<td>Structures the individual interview</td>
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<tr>
<td>Establishes/maintains open and honest communication</td>
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<tr>
<td>Responds empathetically</td>
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<tr>
<td>Uses appropriate questioning techniques</td>
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<tr>
<td>Reflects content</td>
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<tr>
<td>Allows silence when appropriate</td>
<td></td>
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<tr>
<td>Identifies and discloses goal of misbehavior</td>
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<tr>
<td>Offers alternatives when appropriate</td>
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<tr>
<td>Summarizes</td>
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<tr>
<td>Uses appropriate closure techniques</td>
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<tr>
<td>Uses individual counseling approaches to promote school success through academic development</td>
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<tr>
<td>Uses individual counseling approaches to promote school success through career development</td>
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<tr>
<td>Uses individual counseling approaches to promote school success through personal/social development</td>
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<tr>
<td>Demonstrates the ability to use procedures for assessing and managing suicide risk.</td>
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</table>

**Overall Area 4 Rating**
## AREA 5: Small Group Counseling

<table>
<thead>
<tr>
<th></th>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understands both the theoretical and experiential aspects of group purpose, development, dynamics, counseling theories, group counseling methods and skills, and other group approaches</td>
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<tr>
<td>Use of small group counseling approaches is appropriate for students with whom s/he works</td>
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<tr>
<td>Uses group process observations within group setting to facilitate student growth and development</td>
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<tr>
<td>Uses a consistent theoretical model or approach when planning group strategies to facilitate student growth and development</td>
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<tr>
<td>Effectively structures group sessions</td>
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<tr>
<td>Facilitates the establishment of group norms/clear ground rules and consequences</td>
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<tr>
<td>Maintains an open/relaxed atmosphere</td>
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<tr>
<td>Reflects content and feelings of group members</td>
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<tr>
<td>Invites and/or encourages all group members to participate</td>
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<tr>
<td>Uses appropriate summary techniques and closes group sessions effectively</td>
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<tr>
<td>Effectively terminates group experience</td>
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<tr>
<td>Utilizes small group approaches to promote academic success</td>
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<tr>
<td>Utilizes small group approaches to promote career development</td>
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<tr>
<td>Utilizes small group approaches to promote personal/social development</td>
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</table>

**Overall Area 5 Rating**
# AREA 6: Classroom Guidance Planning, Implementation, & Evaluation

<table>
<thead>
<tr>
<th></th>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
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</thead>
<tbody>
<tr>
<td>Uses needs assessment data to develop classroom guidance lessons/units</td>
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<tr>
<td>Clearly defines session goals</td>
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<tr>
<td>Effectively structures the group</td>
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<tr>
<td>Uses age appropriate activities and materials</td>
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<tr>
<td>Uses variety of activities to achieve lesson goals</td>
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<tr>
<td>Keeps group on task</td>
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<tr>
<td>Uses effective classroom management skills</td>
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<tr>
<td>Paces lesson according to students needs</td>
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<tr>
<td>Effectively processes activities to enhance student learning and development</td>
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<tr>
<td>Uses appropriate summary/closure techniques</td>
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<tr>
<td>Utilizes classroom guidance to promote academic success</td>
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<tr>
<td>Utilizes classroom guidance to promote career development</td>
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<tr>
<td>Utilizes classroom guidance to promote personal/social development</td>
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<tr>
<td>Implements strategies and activities to prepare students for home-to-school, school-to-school, and school-to-work transitions and for a full range of postsecondary options and opportunities</td>
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</table>

**Overall Area 6 Rating**
### AREA 7: Consultation and Collaboration

<table>
<thead>
<tr>
<th>Not Assessed</th>
<th>Not Demonstrated</th>
<th>Novice, w/ support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understands strategies and methods of working collaboratively with parents, guardians, families, communities, teachers, administrators, and other school personnel</td>
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<tr>
<td>Establishes effective working relationship with consultee(s)</td>
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<tr>
<td>Knows a general framework for understanding and practicing consultation</td>
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<tr>
<td>Effectively structures the interview</td>
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<tr>
<td>Responds empathetically</td>
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<tr>
<td>Reflects content</td>
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<tr>
<td>Gives encouragement/support</td>
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<tr>
<td>Clearly identifies goal for consultation</td>
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<tr>
<td>Defines and focuses on problem areas</td>
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<tr>
<td>Develops a plan of action or treatment strategy with consultee</td>
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<tr>
<td>Helps consultee learn to advocate for self as appropriate</td>
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<tr>
<td>Evaluates consultation outcome</td>
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<tr>
<td>Plans for follow-up session</td>
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<tr>
<td>Uses appropriate closure techniques</td>
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</table>

**Overall Area 7 Rating**
### Overall School Counselor Intern Evaluation

<table>
<thead>
<tr>
<th>In need of remediation</th>
<th>Novice, w/ Support</th>
<th>Novice, Independent</th>
<th>Intermediate</th>
<th>Advanced</th>
</tr>
</thead>
</table>

Please identify 3 strengths you believe will help this intern be a successful professional school counselor:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Please identify any areas for growth or development which you believe will help this intern be a more successful professional school counselor:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Would you recommend this person to work in your school system?

___Yes  ___Yes, with reservations  ___No

If “Yes, with reservations” or “No”, what would you need to see to feel comfortable hiring them?

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Please give any other comments about this intern’s promise as a professional school counselor:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

What grade do you recommend for this student counselor? (Check one)

☐ S – Satisfactory  ☐ IP – In Progress  ☐ U - Unsatisfactory

**Supervisor’s Signature:** ___________________________  **Date:** __________

My signature indicates that I have read the report(s) presented above and have had an opportunity to discuss the material with my supervisor.

**Student’s Signature:** ___________________________  **Date:** __________
SITE EVALUATION

DIRECTIONS: Student completes this form at the end of the practicum and internship. Submit form to the university supervisor at the designated class period.

Student Name: ___________________________  Site: _______________________________
Date: ___________________________________  Site Supervisor: ______________________
Faculty Supervisor: ________________________

Rate the following questions about your site and experiences by the following scale:

A. Very Satisfactory
B. Moderately Satisfactory
C. Moderately unsatisfactory
D. Very Unsatisfactory

1) _____ Amount of on-site supervision
2) _____ Quality and usefulness of on-site supervision
3) _____ Exposure to and communication of school goals
4) _____ Exposure to and communication of school procedures
5) _____ Exposure to professional roles & functions within the school, including leadership opportunities
6) _____ Exposure to information about community resources
7) _____ Rate all applicable experiences that you had at your site:
   ____ Individual Counseling
   ____ Group Counseling
   ____ Classroom Guidance
   ____ Parent Consultation
   ____ Teacher Consultation
   ____ Career Awareness/Exploration Activities
   ____ Coordinating School-Wide Activities
   ____ Student Transition (Elem. to Middle to High School)
   ____ Advocating for School Counseling Programs/School Counselors/Students/Parents
   ____ Accountability/Program Evaluation Processes
   ____ Referral Process/SST/504/Placement Meetings
   ____ Working with Special Education Students
   ____ Tests used for Special Education Placement and their Interpretation
   ____ General Standardized Testing Procedures and Test Interpretation
   ____ DFACS Reporting
   ____ Scheduling/Time Management
   ____ Record Keeping
   ____ Graduation Requirements (High School Only)
   ____ Writing Letters of Recommendation (High School Only)
   ____ Other: __________________________________________

8) _____ Overall evaluation of the site

COMMENTS: Include any suggestions for improvements in the experiences you have rated moderately (C) or very unsatisfactory (D). Use additional sheets if needed.
# APPENDIX D

Georgia State University  
Department of Counseling and Psychological Services  
School Counseling Practicum/Internship Placement Contract

<table>
<thead>
<tr>
<th><strong>Intern</strong></th>
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<tbody>
<tr>
<td>Name: __________________________</td>
<td>Phone: __________________________</td>
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<tr>
<td>Address: __________________________</td>
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</tr>
<tr>
<td>Email: __________________________</td>
<td></td>
</tr>
<tr>
<td>Beginning date: __________________________</td>
<td>Ending date: __________________________</td>
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<tr>
<td>Name of School: __________________________</td>
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</table>

<table>
<thead>
<tr>
<th><strong>On-Site Supervisor</strong></th>
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<tbody>
<tr>
<td>Name: __________________________</td>
<td>Phone: __________________________</td>
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<tr>
<td>School Address: __________________________</td>
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<tr>
<td>Email: __________________________</td>
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</table>

## Field Experience Placement Requirements

1. Proposed onsite supervisor has a minimum of 3 years of school counseling experience at the level of placement (or 2 years with an Ed.S. in School Counseling that included a supervision course).
   - Years of Experience as a School Counselor: __________________________
   - Years of Experience at the Placement Level: __________________________
   - Ed.S. with Supervision Training: Yes No

2. The school can provide a confidential space where the intern is able to meet with students, parents, and teachers.
   - Confirmed Location: __________________________

3. The onsite supervisor is able to provide 1 hour of formal administrative/clinical supervision per week for at least 14 weeks in the Fall and 14 weeks in the Spring.
   - Proposed Day and Time: __________________________

4. Any concerns or questions will be shared with the university supervisor and/or school counseling program coordinator as they arise.

| Intern Signature | __________________________ | Date: ____________ |
| Onsite Supervisor Signature | __________________________ | Date: ____________ |

Please staple this sheet to the top of your INTERN-SUPERVISOR ANNUAL AGREEMENT due during Practicum in Fall 2017.
Practicum/Intern’s work schedule:
M _____________________________________________________
T _____________________________________________________
W _____________________________________________________
Th _____________________________________________________
F _____________________________________________________
Other days/times: (after school, weekend times, etc.)

30 Classroom Guidance Lessons (3 units: Academic, Personal/Social, & Career by May 2018)
Topic __________________________________________ Dates_________________
Topic __________________________________________ Date___________________
Topic __________________________________________ Date___________________
Topic __________________________________________ Date___________________
Topic __________________________________________ Date___________________

3 Small groups for the year (each group must have 6 session; 3 unique Units of: academic, career, and personal/social)
Topic __________________________________________ Date___________________
Topic __________________________________________ Date___________________
Topic __________________________________________ Date___________________
Topic __________________________________________ Date___________________

15 Parent Conferences
Plan/Strategies _________________________________ Dates (if approp.)________
Plan/Strategies _________________________________ Dates (if approp.)________
15 Teacher Conferences
Plan/Strategies__________________________________ Dates (if approp.)__________

Plan/Strategies__________________________________ Dates (if approp.)__________

30 Individual Sessions
Plan for caseload _____________________________________________________________

Plan/Strategy for acquiring Audio-tapes __________________________________________

Individual Supervision (weekly for the year)
Day/Time _____________________ Backup day/time __________________________

Other projects/responsibilities practicum student will be involved with (optional):

Project______________________________________Prac Student Role_______________________
Dates _________________________________

Project______________________________________Prac Student Role_______________________
Dates _________________________________

Project______________________________________Prac Student Role_______________________
Dates _________________________________

Project______________________________________Prac Student Role_______________________
Dates _________________________________

Student Signature ___________________________ Date __________
Onsite Supervisor Signature ________________ Date __________
University Supervisor Signature _______________ Date __________