

Master of Arts in Counseling Professional Practice Form INTERNSHIP Agency Placement Form

Agen	cy:			
Addr	ess:			
Phone Number: ()			E-Mail :	
Agen	cy Director:			
Indiv	idual Supervisor:		e attach a current vita or resur	
		(* Please	e attach a current vita or resur	ne)
degree minim	, in counseling or a related prof um of two years post-master's p	ession; an active Virorofessional experie	ork site supervisors must have a min- rginia license, in counseling or a rel ence in counseling; and relevant super by completing the following section:	ated profession; a ervision training. Please
	ipervisor Education:		W. G. L. I	
			Year Completed	
Vi	irginia Licensure/Certifica	tion:	W C 1 1	
			Year Completed	
Y	ears of Experience:	_ Completed Sup	pervision Training: 20 hrs/Date	orCredit Class/Date
Genei	ral Description of Placeme	ıt:	Population(s): check all th	at apply
	Community Counseling A	gency	□ Children	
	Addictions/Rehabilitation		□ Adolescents	
	Hospital-based Mental He	alth	□ Adults	
	011011011		□ Geriatric	
	Community Services Boar	d	□ Family	
	Other:		□ Cross-Cultural	
Dagan	intion of Dossible Student	A adiridiaa.	□ Special Needs	
Descr	iption of Possible Student		ant D Intoles D Crisis Intervo	ntion
	Individual sessions □ Groups □ Assessment □ Intake □ Crisis Intervention Educational Workshops □ Classroom Guidance □ Staff meetings			
	0.1		0	
	g Allowed:			
	Yes, with appropriate cons	sent forms 🗆 No	0	
	Return to:	1200 Park F	Arts in Counseling Road nnonite University	

Harrisonburg, VA 22802-2462