

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

Agency:	
Address:	
Phone Number: ()	E-Mail:
Agency Director:	
Individual Supervisor:	
	(* Please attach a current vita or resume)
degree, in counseling or a related profession minimum of two years post-master's profe	s (4.F.), fieldwork site supervisors must have a minimum of a master's on; an active Virginia license, in counseling or a related profession; a assional experience in counseling; and relevant supervision training. Please requirements by completing the following section:
Supervisor Education: Degree	Year Completed
Virginia Licensure/Certification License License]	: Number Year Completed
Years of Experience: Co	ompleted Supervision Training: or Credit Class/Date
General Description of Placement:	Population(s): check all that apply
□ Community Counseling Agence	cy Children
□ Addictions/Rehabilitation	□ Adolescents
☐ Hospital-based Mental Health	□ Adults
□ Church□ Community Services Board	□ Geriatric□ Family
□ Other:	□ Cross-Cultural
- Oner.	□ Special Needs
Description of Possible Student Activ	vities:
	s □ Assessment □ Intake □ Crisis Intervention lassroom Guidance □ Staff meetings
Taping Allowed:	
☐ Yes, with appropriate consent	forms No
Return to:	Master of Arts in Counseling 1200 Park Road Eastern Mennonite University

Harrisonburg, VA 22802-2462