

**INTERNSHIP AGREEMENT**

**IMPORTANT NOTE:** Completed & signed copies of this AGREEMENT need to be submitted to the Site Supervisor and the Clinical Team **prior to commencing** this internship.  
Signatures of *all parties* are needed to ensure intern is covered by TWU's insurance.

The Graduate (M.A.) Counselling Psychology Department of Trinity Western University (hereinafter **TWU**) is hereby entering into an AGREEMENT with:

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**Agency & Department Name(s)**

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**Agency Internship Site Address**

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**Contact Person/and or Supervisor\* Name & Information: – Phone / E-Mail**

*\*See Supervisor Qualifications on Page 5, Professional Background Form*

(Hereinafter **SITE**)

to provide a counselling internship experience placement for:

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**Internship Student**

(Hereinafter **STUDENT**)

effective this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_ \*

*\*Form must be submitted to and approved by Clinical Team before effective date to ensure coverage of intern*

intended to end on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

**DESCRIPTION OF INTERNSHIP DUTIES**

1. At least 40% of the Student's time spent at the Internship Site will involve direct contact with clients.
2. The Student will spend \_\_\_\_\_ **hours per week** at the Internship Site, on the following days\*:  
\_\_\_\_\_  
\*Any expectation by the site of the intern that falls outside of the stated contracted days and hours above to be documented below at the outset of the internship placement:  
\_\_\_\_\_
3. The Student will participate in at least **1 hour per week of face-to-face, individual supervision** with the Site Supervisor indicated on this form;
4. The Student will meet weekly for **1½ hours of group supervision** (this requirement, along with item 3, may increase if the Student is participating in an intensified Internship);
5. The Student will meet with the Faculty Supervisor/Coordinator as required by the Graduate Program;
6. Expected counselling modalities for the Internship include the following:  
 Individual Adult                       Adolescent  
 Couples/Family                       Child  
 Group/Workshop
7. The Student will complete file documentation in a neat and timely fashion, and ensure that files are brought to supervision sessions with the Site Supervisor.

Clinical Supervisor\*: \_\_\_\_\_ Date: \_\_\_\_\_

Site Supervisor\*: \_\_\_\_\_ Date: \_\_\_\_\_  
(if applicable)

Internship Student\*: \_\_\_\_\_ Date: \_\_\_\_\_

Clinical Coordinator\*: \_\_\_\_\_ Date: \_\_\_\_\_

\*Definitions on the following page

***DEFINITION OF TERMS***

<b>Internship Student</b>	Graduate Counselling Psychology Intern (2nd year +).
<b>Clinical Supervisor</b>	On-site direct supervisor at agency. Meets qualifications outlined on Professional Background Form, Page 5.
<b>Site Supervisor</b>	The individual responsible for program operation and clinical training. May or may not meet Clinical Supervisor qualifications.
<b>Clinical Coordinator</b>	Member of the CPSY Clinical Team.
<b>Supervision</b>	Evaluation & training, including 1 hour of individual face-to-face feedback and 1½ hours of group supervision weekly.
<b>Direct Contact</b>	Face-to-face, personal communication with clients (including psychotherapy, counselling, telephone conversations, groups and workshops).
<b>Indirect Contact</b>	All other forms of clinically relevant activities in which the Student participates while at the Internship Site (including directed readings, supervision, viewing psychotherapy videos or listening to audiotapes of relevant client sessions, Web research on particular cases or disorders, consultation with other professionals, file notation and record keeping).
<b>Internship Site</b>	May include Community Agencies, Government or Para-government organizations, Private Counselling Centers Hospitals, Schools or Churches.
<b>Evaluations</b>	These include evaluations of the Internship Site and the Site Supervisor by the Student, and evaluations of the Student by his/her Site Supervisor.

**TWU AGREES TO:**

1. Assign a Faculty Supervisor/Coordinator to facilitate communication between the institution (TWU) and the Internship site;
2. Provide the Internship site with a Certificate of Insurance, if required by the site, to confirm the Institution's liability coverage for the Student;
3. Ensure that a Faculty Supervisor/Coordinator is available for consultation with both the Site Supervisor and the Student;
4. Notify both the Site Supervisor and the Student immediately if any problem or change arises regarding the Student or Internship Site;
5. Ensure that the Faculty Supervisor/Coordinator is responsible for assignment of field work grades (P / F / Inc), in consultation with the Site Supervisor;
6. Provide opportunity for the intern to conduct assessments for clients of internship sites through a Fraser River Counselling (TWU agency) Assessment Clinic, normally in October or November.

**SITE AGREES TO:**

1. Assign a Site Supervisor with appropriate credentials, experience, time and interest for training a Student (see Page 5, Professional Background Form);
2. Provide opportunities for the Student to engage in a variety of Counselling activities under supervision;
3. Evaluate the Student's performance at the end of each semester (see Intern Performance Evaluation Form);
4. Provide the Student with adequate workspace, telephone access and office supplies to conduct professional activities;
5. Provide supervision and feedback to the Student through audiovisual tapes, observation and case consultation for the purpose of evaluating the Student's level of performance relative to her/his peers;
6. Consult with clinical team regarding ethical, legal, professional issues if arising.

**STUDENT AGREES TO:**

Maintain appropriate clinical records of counselling sessions to ensure quality control of services offered to clients;

1. Follow the clinical direction and supervision instruction from both the Faculty Supervisor/Coordinator and the Site Supervisor;
2. Sustain cooperative, positive relationships with Supervisors, Clients and fellow Students, for the duration of the Internship placement.

## PROFESSIONAL BACKGROUND FOR ON-SITE CLINICAL SUPERVISORS

*(To be submitted by the student to a prospective on-site clinical supervisor, completed and signed by the prospective supervisor, and submitted to a Clinical Team Coordinator by the student **prior to** completing an agreement with a site)*

1. Degree (minimum requirements are a Master's degree in a mental health/counselling profession, and the equivalent of five years post-masters full-time professional experience)

<input type="checkbox"/> MD	<input type="checkbox"/> MA	<input type="checkbox"/> MTS-C
<input type="checkbox"/> PsyD	<input type="checkbox"/> MSc	<input type="checkbox"/> MSN
<input type="checkbox"/> PhD	<input type="checkbox"/> MSW	<input type="checkbox"/> Other (        )

2. Degree-granting institution & date of completion:

\_\_\_\_\_

3. Post-masters Professional Experience [FTEs, full-time equivalents]

**Number of years:**

**Work Responsibilities:**

4. Post-masters Supervision Experience

**Number of years:**

**Supervisee's training program(s):**

5. a) Professional Credentials (e.g., CCC, RCC, etc.) and professional memberships (e.g., CCPA, BCPA.):

\_\_\_\_\_

- b) Province/territory & college granting credentials (for regulated professions):

\_\_\_\_\_

- c) Registration Number: \_\_\_\_\_

I, \_\_\_\_\_ of \_\_\_\_\_  
hereby certify that the above information is complete and accurate.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_