Master of Arts Program in Clinical Mental Health Counseling

2018 – 2020 Cohort Student Clinical Training Handbook

The Council for Accreditation of Counseling and Related Educational Programs (CACREP), a specialized accrediting body recognized by the Council for Higher Education Accreditation (CHEA), has granted accreditation to the Clinical Mental Health Counseling (M.A.) at Wheaton College through October 31, 2024.
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WHEATON COLLEGE CLINICAL TRAINING PHILOSOPHY

Overview
This handbook is intended to provide Wheaton College graduate students enrolled in the Clinical Mental Health Counseling (CMHC) program with the details and information needed to successfully guide them through their clinical training experiences while in the program. The policies and procedures described herein may be periodically revised, and updates will be communicated to students as appropriate. In the event of conflicting information or interpretation, the Wheaton College catalog takes precedence over the graduate and CMHC program handbooks. Students are required to become familiar with the entirety of this handbook; however, the Clinical Training Coordinator is available to assist with any difficulties in either the interpretation or application of materials.

The philosophy of our clinical training flows from the servant-practitioner-scholar model described in our CMHC Handbook. During graduate study, the student forms the foundation upon which all later clinical development will occur. The experiences that students receive in their practicum and internship training are central to their development. Habits and skills will be formed which will limit or enhance the student’s subsequent professional development. In light of their importance, it is imperative that the clinical training experience be directed by the faculty who also oversee the other aspects of the students’ training.

At the core of our program’s identity is our commitment to Christian distinctiveness. The assignment to Practicum and Internship faculty supervision groups (described later in this handbook) ensures that each student receives oversight from doctoral level Christian mental health professionals during the early formative years of their professional development.

The general philosophy of training entails a process of gradually introducing the student into the responsibilities of the professional clinical mental health counselor. As greater knowledge and skill are developed, a greater level of responsibility and autonomy are given. While those outside of the CMHC program have substantial input into the students’ training through clinical supervision, the oversight and final responsibility of that training must remain with the CMHC program faculty.
Definitions

Clinical Training Coordinator (CTC): The CTC is the primary liaison between the CMHC academic program, the student, and training sites. The CTC prepares students for and guides them through the Practicum and Internship application process. If problems arise between a student and site supervisor, students should first contact their faculty supervisor for assistance in resolving the issue. If the site supervisor issue cannot be resolved with the faculty supervisor, or if a problem arises between a student and a faculty supervisor, the CTC is the primary contact.

Clinical Training Office Coordinator (CT Office Coordinator): This person acts as a receptionist in the Clinical Training Office at Wheaton College and assists the CTC in a range of activities.

Direct Hours: Direct/Face2Face hours involves interaction with clients that include the application of counseling. In general, the term is used to refer to time spent by practicum or internship students working directly with clients. Experiences such as the following can be included as direct client hours: Clinical interviews, individual, group, couples/marital, and family counseling, intakes, crisis intervention, on-call coverage, and phone calls with clients.

Grading & Degree Dates: After a student’s final evaluation meeting with the Practicum/Internship faculty supervisor, at the end of each semester of clinical training, students must ensure that all paperwork has been submitted to the faculty supervisor in order to receive credit for the class. Each student cannot receive a “Practicum or Internship Complete” designation until all original paperwork is submitted. Thereafter, a grade will be assigned for either CMHC 692 (Practicum) or CMHC 696 (Internship). Students who do not complete necessary paperwork may jeopardize their date of graduation.

Students are most likely to complete all degree requirements either in May or August of the year of program completion. All students earning a degree in May or August are eligible to participate in the Commencement ceremony in May.

Please refer to the table below for deadlines regarding internship, grading and degree dates.

<table>
<thead>
<tr>
<th>Complete internship by:</th>
<th>Submit all paperwork by:</th>
<th>Eligible to earn degree date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 1, 2020</td>
<td>May 1, 2020</td>
<td>May 9, 2020</td>
</tr>
<tr>
<td>August 21, 2020</td>
<td>August 21, 2020</td>
<td>August 31, 2020</td>
</tr>
</tbody>
</table>

INDIRECT/OTHER HOURS

This category includes activities that students perform in association with direct service activities. There are activities indirectly related to client care. This category can also include activities that relate to educational or training activities that students may participate in as part of their fieldwork experiences. The following categories are included as Indirect Hours:

- **Research**: This time may include researching a client’s medical or mental health condition. It could also include investigation into potential resources for a client.
- **Correspondence/Report writing**: This activity includes any and all correspondence or formal report writing related to the client’s life.
**Staffing/Meeting:** This category includes meetings where several professionals are present to discuss one or more clients.

**Case management:** This category may include activities related to overseeing a client’s case. It may include phone calls, case note documentation, scheduling arrangements, etc.

**Training/observation:** This includes any activity where formal training is provided (e.g., orientation) or when a student is in the learning or observing phase of a new activity. Training in this code is related specifically to the job duties to be performed.

**In-service:** This category includes brief training experiences that are offered to professionals at a site from time to time. It might relate to a new treatment, a resource, or professional development.

**Conference/workshop:** This category includes a mental health counseling training that a site/program may allow the student to participate.

**Other (Specify):** This category can include activities when an indirect service is being provided that is not being captured by the above descriptions.

**Supervision:** This category includes group/individual/triad supervision.

**Internship:** A more extensive clinical training experience that students complete following the Practicum. The clinical experience gained through Internship must reach a minimum duration of 600 hours over the course of two semesters. The clinical experience will be supervised by a credentialed site supervisor (i.e. LCPC, LCSW, Licensed Psychologist). In addition, the Internship faculty supervisor, a department appointed faculty member, will also meet with the student to provide general oversight and feedback. Students begin their Internship after successfully completing a Practicum. Internship will last at least two semesters. Many sites, however, may require students to make a 12-month internship commitment to provide continuity of services at the site. Students are responsible for understanding the agency’s requirements and abiding by them. Vacation days are negotiated with the site supervisor while completing Wheaton’s learning contract. Internship experiences typically consist of 16-22 hours per week, of which about one third will be comprised of intensive individual and group supervision.

**Practicum:** An introductory supervised field experience that provides students with the opportunity to observe CMHC professionals as they function and to develop primary level mental health service provision skills. Students must obtain 100 hours of practicum experience over the course of one semester. This introductory experience will be supervised either by a credentialed site supervisor (i.e. LCPC, LCSW, Licensed Psychologist) or by a Wheaton faculty member. In addition, the Practicum faculty supervisor, a department appointed faculty member, will also meet with the student to provide general oversight and feedback. Most students begin their Practicum in the summer semester, following completion of their first year in the program. In some cases, students will begin their Practicum during the fall semester of their second year in the program. The practicum experience must be at least one semester in duration. If a student delays Practicum until the fall semester of the second year, the student will need to complete Internship during the spring and summer semesters of the second year.

**Practicum and Internship Faculty Supervisor:** In light of the program’s commitment to oversight of the students’ training experience, the department provides oversight of the students’ Practicum and Internship training, through the work of the faculty supervisor. Oversight by the faculty supervisor is
achieved through group supervision (averaging 90 minutes weekly). Students register for their Practicum or Internship seminar group during the registration period before each semester.

**Practicum Biweekly Consultation:** At the outset of the student’s Practicum 100 hours of clinical training, communication between the site supervisor and faculty supervisor is essential because the student is developing primary level counseling skills. Biweekly communication between the site and faculty supervisors regarding student progress during the 100-hour Practicum experience is required (Please Note: This biweekly communication is not required during the 600 hours Internship). The communication occurs between the Practicum site supervisor and the Practicum faculty supervisor via a brief electronic survey at least every other week, throughout the student practicum experience.

**Site Supervisor:** Site supervisors are at minimum master’s level, licensed mental health professionals who are responsible for overseeing the student’s clinical learning experiences while at the training site. The site supervisor has full legal and professional responsibility for the care of clients with whom the student has contact, and assists the College in evaluating the learning and performance of participating students. It is expected that students will receive a minimum of one continuous hour of supervision per week by the supervisor at their Practicum and Internship training sites.

**Supervision:** A tutorial and mentoring form of instruction in which a supervisor monitors the student’s activities in practicum and internship, and facilitates the associated learning and skill development experiences. The supervisor monitors and evaluates the clinical work of the student while monitoring the quality of services offered to clients.

- **Individual Supervision:** A tutorial and mentoring relationship between a member of the counseling profession and a counseling student.

- **Triadic Supervision:** A tutorial and mentoring relationship between a member of the counseling profession and two counseling students.

- **Group Supervision:** A tutorial and mentoring relationship between a member of the counseling profession and more than two counseling students.

**Student Problematic Behaviors:** A student’s behaviors, attitudes, or characteristics that may require attention, but are not perceived as excessive or unexpected for students in training. For example, discomfort with diverse lifestyles and ethnic backgrounds, performance anxiety, and lack of appreciation for agency norms are examples of problematic behaviors that are usually remedied and not likely to progress into impairment.

**CLINICAL TRAINING: PRACTICUM AND INTERNSHIP**

Students work together with the Clinical Training Coordinator to secure training experiences in facilities that are a good fit for both the student and the agency. This process is facilitated through a series of communications and events in which the student is expected to participate. Information on approved clinical training sites can be found on the Schoology CMHC Graduate Students Groups page at [https://lms.wheaton.edu](https://lms.wheaton.edu). The resources tab at the top of the page will bring you to the Practicum & Internship folder where you can find pertinent documents.
Clinical Training Calendar
The procedure, with corresponding times, has been outlined below.

Fall semester

October 1
11:30-12:30
Resume writing training.

October 15
11:30-12:30
First Year Practicum and Internship Interview Preparation Training.

October 29
11:30-12:30
Annual CMHC Pre-PIE Speed Site Selection Celebration. This is an opportunity to meet second-year students and learn first-hand about sites where the second-year students are currently completing their clinical training.

November 12
11:30-12:30
Role Play Interviews with Faculty and Staff.

December 4
Attend Practicum/Internship Information Exchange (PIE). This is an opportunity to meet directly with contacts from various sites and to obtain additional information. Supervisors from various sites attend PIE and are available to talk with students. Students should be dressed in professional attire and prepared with professional materials (i.e., résumé, note paper). PIE is held at Wheaton College.

October until placement confirmation
Network! Talk to students about their clinical training experiences to gain more insight about particular sites of interest. Set up an appointment with your advisor or the CTC to discuss Practicum and Internship options that would be consistent with your training goals.

Review current information on potential training sites on the Schoology CMHC Graduate Students Groups page (https://lms.wheaton.edu). Contact the CTC in person if you have any special needs or are unable to find any sites that you believe will meet your needs.

Collect application materials. Each site varies as to its application requirements. Make sure to look carefully at each site information sheet that is located on the clinical training web page. If it is unclear, assume that the site is only expecting a cover letter and résumé. If the site requires a transcript, submit your request to the registrar. The form is available on the registrar’s web page and can be faxed to the registrar’s office. Some students will be at the same site for both their Practicum and Internship placement. Other students will have two different
placements, one for Practicum and one for Internship. Students who procure two
different sites should be aware that the application process for both Practicum
and Internship may occur at the same time, even though students must complete
Practicum before beginning Internship.

**Recommendation Letters.** If recommendation letters are required for a
Practicum or Internship site where you would like to apply, please make all
faculty requests as soon as possible. Due to the large volume of faculty letter of
recommendation requests, it is essential that students follow procedures
carefully. First, ask faculty whether s/he is willing to write the letter. Second,
give the faculty a copy of your résumé and Focus of Letter of Recommendation.
Third, if faculty use the Clinical Training Office to print letters, copy the Focus of
Letter of Recommendation for the Clinical Training Office so that the Clinical
Training Office has the list of sites to which you are applying that require
letters. Please note that the Clinical Training Office only processes
recommendation letters for sites that require letters. Once the faculty person
has emailed his or her letter template to the Clinical Training Office, the CT
Office Coordinator will personalize the letters, obtain the faculty signature, and
place the letter in a sealed envelope. Please note that letters of recommendation
are usually confidential. If the student would like to read the recommendation
letter, the student must indicate this on the Focus of Letter of Recommendation
form that is given to the faculty member. The student will be notified when
the letters are ready to be picked up from the CT Office.

Prepare and send application packet for each site of interest. Unless the site
stipulates otherwise, this is your résumé and a cover letter.

Interview at Practicum sites; receive and accept offers.

**Spring Semester**

**April**
**Registration for Practicum & Internship**
The Program Administrator and CTC will meet with first-year students to
review the “Application for Practicum” and approve the placement as
indicated by signature. Via email, each student will submit the top three
preferences for a Practicum faculty supervisor to the CTC. The CTC will review
submissions and attempt to give the ranking order preference. The Program
Administrator will then register students; students are not able to register for
Practicum on their own.

**June 1**
The Personal Growth and Development counseling requirement must be
complete (see Student Handbook for complete details), and all paperwork
turned in. **Note:** Students may not start their Practicum until this
requirement is met.
**Thru August**

Interview at Internship sites; receive and accept offers. Please note that some students may interview at Practicum/Internship sites simultaneously.

**It is important to note that a student cannot begin Internship until completing a Practicum.** If a student procures an Internship placement but then does not procure a Practicum placement, he or she will not be permitted to begin Internship.

**Upon Placement**

Once Practicum placement is obtained, inform the CTC by completing the “Application for Practicum,” and the “Permission to Release Record Information” which can be found online on the Schoology.

**Delayed Placement**

If the student has not obtained a Practicum placement by the summer pre-registration period, continue to keep the CTC apprised of your placement status until you have obtained a Practicum.

Similarly, if the student has not obtained an Internship placement by the fall pre-registration period, continue to keep the CTC apprised of your placement status until you have obtained an Internship.

In general, students should begin to think about and plan for their clinical training experience about six to eight months prior to the beginning of that training year. Students with special needs, such as restrictions on travel distance, limited days able to work due to other commitments and constraints, or special clinical interests (forensic, child, etc.) may need to allow even more time to find a suitable placement and to work out all the details in consultation with the CTC.

**Practicum/Internship for International Students Policy**

For students enrolled in the CMHC program who do not have U.S. Citizenship, once a practicum placement has been procured, students must register their placement as Curricular Practical Training (CPT) with the Graduate Student Care Office. The U.S. Government considers practicum work a form of employment for international students and, as such, proper documentation of employment must be recorded with the college. The Graduate Student Care Office can be reached by calling 630-752-7084, by emailing graduate.student.care@wheaton.edu or in person at BGC 228.

**MA – International Clinical Experience Scholarship (MA-ICE)**

In the spirit of our department mission to serve the underserved, a limited number of scholarships are available to students who are interested in completing their Practicum or Internship clinical training experience at an international mental health facility. Funds are awarded to provide a portion of travel expenses, room and board, and/or supervision costs for students for a minimum ten-week placement. International clinical experiences must meet all training requirements as outlined in this manual, including length of placement and supervision provided by both site and faculty supervisors. Students who wish to apply for the MA-ICE scholarship should write a one-page essay indicating
their desire to complete an international Practicum or Internship and how international clinical training would contribute to their personal and professional development. The application essay and a copy of the student’s resume should be submitted to the CTC after the student has secured an international placement but prior to the student’s departure for the international clinical training experience. Funds are awarded at the discretion of the Graduate Training Council, in consultation with the CMHC program director. Students who are awarded funds must submit an expense report along with detailed receipts indicating how the funds were used. Any unused or unreceipted funds must be returned to the MA-ICE scholarship fund.

**International Clinical Experience Requirements**

Any Wheaton College student who will be completing an international clinical experience needs to be registered on Global (Wheaton’s registration system for international experiences) even if the travel is to the student’s home country. Students will need to complete the following requirements:

- Complete a Psychology International Internship/Practicum application
- Submit a copy of the Application for Practicum that students submitted to the Clinical Training Office
- Make an appointment with Student Health Services to complete an international travel consultation
- Attend a Pre-Departure Health and Safety Meeting
- Attend the Intercultural Orientation Session

In order to begin this process, students need to contact the Center for Global and Experiential Learning to complete the above requirements.

Additionally, a student who would like to complete an international clinical experience needs to ensure that the student liability insurance under consideration provides coverage outside the United States. Verification of the coverage needs to be submitted to the Clinical Training Director.

**Clinical Activities**

Practicum and Internship opportunities are available at a wide range of sites, including community mental health centers, private practices, hospitals, prison facilities, residential facilities, churches, and college counseling centers. Students may have the opportunity to participate in didactic seminars, group staffings that address the ethics and legalities of professional counseling practice as well as clinical issues, case management, record keeping, the administrative structure and responsibilities of a particular setting. These activities are available depending on sites, and are beyond the more generally emphasized clinical activities, which include the following:

- **Individual/Family/Couples Counseling:** Students will have opportunity to engage in counseling from varied therapeutic modalities depending on site population. Training sites may offer long-term and/or short-term counseling approaches.

- **Group Counseling:** Students are required to function as a group leader during their Internship placement. With increasing experience, students may be encouraged to develop and facilitate groups of their own.
Social Systems Interventions: Students may have the opportunity to gain exposure to working with a variety of social systems including families, educational institutions, social welfare, and the legal system. This work may include working with smaller systems such as families, or larger systems such as organizations.

Other activities: Other possible activities for students to engage in are program development, research, program evaluation, specialized assessment, consultation, etc.

Practicum Requirements

1. **Prerequisites for Practicum** Prior to beginning Practicum, each student must have the approval of the Clinical Training Coordinator, and must have completed 26 hours of successful coursework (i.e., a minimum of C (74%) in all courses) (with transfer credit as applicable) including: Research and Program Evaluation (CMHC 618), Issues and Ethics in Professional Practice (CMHC 624), Foundations of Integration I & II (CMHC 611 & 612), Counseling Skills and Techniques/Basic Counseling Skills Lab (CMHC 621/621L), Clinical Counseling Theories & Practice I and II (CMHC 622, 623), Group Counseling/Group Counseling Lab (CMHC 614/614L), Psychopathology (CMHC 642), and Family Systems Theory & Counseling (CMHC 636). Exceptions may be granted by approval of the Clinical Training Coordinator and Program Director. Additionally, each student must have completed eight hours of Professional Growth and Development counseling, as outlined in the CMHC Program Handbook by June 1 (prior to beginning internship).

2. **Time** The minimum requirement of 100 hours is usually completed over the summer semester following the first year of academic coursework. At least 40 hours must be obtained in face-to-face direct client contact. Students are encouraged to exceed the minimum required hours of experience whenever possible. Practicum must last a full academic semester.

3. **Direct Experience with Clients** Experiences such as the following can be included as direct client contact: clinical interviews; individual, group, couples/marital, and family counseling; intakes; crisis intervention; on-call coverage; phone calls with clients or collateral contact; and consultation with an organization. Upon completion of Practicum, students should have a minimum of 40 hours of direct service with clients. Students must abide by confidential practices when recording and transporting recordings (See Non-Recording Site: Site Supervisor Observation of Student Policy).

4. **Ethical Practice** It is critical and expected that both training sites and students adhere to the guidelines set forth by the American Counseling Association found at http://www.counseling.org/resources/aca-code-of-ethics.pdf. It is also important for both sites and students to be aware of state laws and regulations and practice in accordance with them.

5. **Documentation** Students are expected to keep and submit accurate records of all clinical experiences encountered while in training using the Hour Log. At the completion of practicum, a signed hard copy of the dashboard (signed and dated by site supervisor, faculty supervisor, and student on the dashboard of the Hour Log) must be submitted to the Clinical Training Office.
6. **Semester Clinical Hours** Students who wish to complete additional hours between semesters (e.g., December/January, August) and have permission from their site supervisor to complete these hours at the site (as indicated in the Learning Contract), must keep the On-Call faculty supervisor apprised of any ethical, legal, or crisis situation during the break.

**Internship Requirements**

1. **Prerequisites for Internship** Prior to beginning Internship, each student must have the approval of the Clinical Training Coordinator, and must have completed a Practicum. There is no exception to this requirement.

2. **Time** The *minimum* requirement of 600 hours is usually completed over the fall and spring semesters of the second year of the program. Some students may need to extend their Internship into the summer following the second year to complete their required hours. At least 240 hours must be obtained in face-to-face direct client contact. Students are encouraged to exceed the minimum required hours of experience whenever possible. Internship will last *at least two semesters*. Students who delay their Practicum until the fall of the second year will be expected to complete two semesters of Internship in the Spring and Summer of their second year in the program. These students will have an August 31 (rather than a May) graduation date. Many sites may require students to make a 12-month commitment to provide continuity of services at the site. Students are responsible for understanding the agency’s requirements and abiding by them.

3. **Direct Experience with Clients** Experiences such as the following can be included as direct client contact: clinical interviews; individual, group, couples/marital, and family counseling; intakes; crisis intervention; on-call coverage; phone calls with clients or collateral contact; consultation with organization. Upon completion of internship, students should have a minimum of 240 hours in direct service. All internship students must gain some experience leading groups. Students must abide by confidential practices when recording and transporting recordings (See Non-Recording Site: Site Supervisor Observation of Student Policy).

4. **Ethical Practice** It is critical and expected that both training sites and students adhere to the guidelines set forth by the American Counseling Association found at [http://www.counseling.org/resources/aca-code-of-et...](http://www.counseling.org/resources/aca-code-of-ethics.pdf). It is also important for both sites and students to be aware of state laws and regulations and practice in accordance with them.

7. **Documentation** Students are expected to keep and submit accurate records of all clinical experiences encountered while in training using the Hour Log. See syllabus for requirement details.

8. **Between Semester Clinical Hours** Students who wish to complete additional hours between semesters (e.g., August, December/January) and have permission from their site supervisor to complete these hours at the site, must complete the Between Semester Notification form with required signatures and submit the form to the On-Call faculty supervisor (included in the Learning Contract).
Criteria for Site Selection
Students work together with the Clinical Training Coordinator to secure training experiences in facilities that are a good fit for both the student and the agency. Information on approved internship sites is contained on Schoology at the CMHC Graduate Students Groups page (https://lms.wheaton.edu).

Supervisor Criteria:
Clinical Supervisors of Master’s students must be appropriately licensed masters, or doctoral level clinicians (LCPC, LCSW, Ph.D., Psy.D.).

Suitable practicum and internship training sites are selected from counseling agencies in the greater Chicago area according to the following criteria. They shall be:

1. High-quality facilities in terms of service provision and integrity;
2. Service-focused, with training as one of its major functions;
3. Conforming in practice to all relevant ACA standards and guidelines;
4. Able to provide quality supervision by licensed mental health professionals;
5. Able to provide adequate, suitable clinical counseling experience situations* for participating students;
6. Able to designate appropriate personnel to coordinate the student’s clinical learning experience;
7. Willing and able to abide by all other terms as stipulated in the Affiliation Agreement and Learning Contract; and
8. Responsive to the needs of the people residing in that geographical area.

*Adequate, suitable clinical counseling experience situations” (number 5 above) include clinical interviews, individual, couples, group and family counseling, intakes, crisis intervention, and on-call coverage. Other acceptable training experiences will be activities such as case conferences and presentations, supervisory sessions, writing reports and progress notes, and case management. Related experiences such as research opportunities, workshop or seminar presentations, and staff training may also be acceptable; however, the majority of a student’s clinical counseling experience should come from clinical interviews and counseling. Any questions regarding what constitutes clinical counseling experience should be directed to the CTC.

Special emphasis will continue to be placed upon securing sites both within the city of Chicago and in its outlying suburbs which “emphasize and model a commitment to professional practice as service, especially to the Body of Christ, the Church, and also to those persons who have been marginalized and wounded by our society on the basis of racial or ethnic identification, age, socioeconomic status, or gender” (M.A. CMHC Program Mission Statement).

Students are encouraged to facilitate their training experiences by investigating new or unique training possibilities, and by providing the names of qualified, potential training sites to the College through the CT Office Coordinator. All leads will be followed up, sites and supervisors screened, and, if appropriate, Affiliation Agreements negotiated through the Clinical Training Office on behalf of the College and the CMHC program.
Learning Contract
The Learning Contract is a functional document that allows clear expectations to be laid out regarding the training experience between a student and a training site. It outlines the student’s learning objectives, expectations for performance and tasks, procedure for remediation, and logistical issues (e.g., vacations, sick days). This form is necessary to complete at the beginning of both the Practicum and the Internship as it provides the outline and structure of the clinical training experience, and shapes the direction of the student’s learning. It also provides a basis for any conflict in expectations that may arise during the training experience. Finally, the Learning Contract includes the Between Semester Supervisor Notification form that is required to be completed if students are going to work at their sites between semesters. Listed below are some examples of learning objectives that a student may utilize:

- Increase clinical interviewing skills
- Initiate, maintain, and terminate clinical relationships with clients
- Increase practical understanding of diagnosis and treatment planning.
- Develop cohesive and precise written case presentation planning.
- Exposure and experience in community consultation
- Participate in a program evaluation
- Increase experience in counseling couples (or families, individuals, adolescents, etc.)
- Develop in-depth case conceptualization

Recording or Observation of Sessions
The review of session recordings by both faculty and site supervisors helps to provide optimal care to clients and assist supervisory feedback with students. CACREP requires either the review of a session recording or live supervision of a client session. Students are required to prepare a total of two recordings per clinical class (Practicum, Internship I, Internship II). If the training site does not allow recording of client sessions, see Non-Recording Site: Site Supervisor Observation of Student policy. Clients may be recorded only in accordance with the procedures listed below and in accordance with the ACA Ethics Code guidelines.

1. A student must obtain written permission of the client (or parent/guardian if the client is under the age of 18) prior to recording (ACA 2014 Code of Ethics B.6.c. and B.6.d.)
2. Students need to use password protection recording devices
3. Students are required to use password protection for digital files related to the client and recordings
4. Client recordings are used only for specified purposes
5. Recordings are stored securely until destroyed following its use for specified purposes
6. Students must abide by confidential practices when transporting recordings either electronically or physically

Non-Recording Site: Site Supervisor Observation of Student Policy
If the training site does not allow recording of client sessions, students may have their site supervisors observe their live session and complete the Supervisor Live Observation form (see Appendix E), which will be submitted to the faculty supervisor in lieu of a recording. Clients may be observed by their supervisor only in accordance with the procedures listed below and in accordance with the ACA Ethics Code guidelines.
1. A student must obtain written permission of the client (or parent/guardian if the client is under the age of 18) prior to supervision of live sessions (ACA 2014 Code of Ethics B.6.d.)
2. Students are required to use password protection for digital files related to the client
3. Students must abide by confidential practices when transporting client information either electronically or physically

PROBLEMS OF PROFESSIONAL COMPETENCE

Because professional counselors are usually in human service positions, professional competence of each student enrolled in the CMHC program is a concern of the clinical faculty. The purpose of this section is to clarify the areas of competence and professional behavior expected of all students, and to explain the procedures for identifying and addressing impairment, incompetence, ethical misconduct, or problematic behaviors that arise while students are in the program.

Definitions

Ethical Misconduct occurs when the CMHC student does not follow the ACA Code of Ethics. The ACA Code is intended to provide general principles and rules to cover most situations encountered by students in their professional activities. It has as its primary goal the welfare and protection of the individuals and groups with whom students work. It is the individual responsibility of each student to aspire to the highest possible standard of conduct. Students in the CMHC program respect and protect human dignity and civil rights, and do not knowingly participate in or condone unfair discriminatory practices. It is assumed that unethical behavior and impairment are overlapping concepts, in that all unethical behaviors are reflective of impairment. However, problematic behaviors may involve other aspects of professional behavior that may or may not result in unethical behavior.

Incompetence is defined as a lack of ability, either academically or related to professional and interpersonal skills.

Impairment is defined as a problem in professional functioning that occurs in one or more of the following ways:

- Inability or unwillingness to acquire professional skills at an accepted level of competency
- Inability to control personal stress, psychological dysfunction, or emotional reactions that affect professional functioning
- Inability or unwillingness to integrate standards of the profession into one’s professional behavior

Problematic Behaviors refers to a student’s behaviors, attitudes, or characteristics that may require attention, but are not perceived as excessive or unexpected for students in training. For example, discomfort with diverse lifestyles and ethnic backgrounds, performance anxiety, and lack of appreciation for agency norms are examples of problematic behaviors that are usually remedied and not likely to progress into impairment.

Identification of Problems Requiring Remediation

It is clear that the conduct of professional counselors and counseling trainees affects the public perception of counseling as a discipline, and professional responsibility requires faculty to monitor the conduct of students. Impairment, incompetence, ethical misconduct, and problematic behaviors may be identified in a variety of ways.
**Student Self-Identification of Problems**

When the student’s ability to deliver clinical services is compromised, the student should take steps to assure clients receive the best possible services in accordance with the ACA Code of Ethics. This principle holds true whether or not faculty or clinical supervisors have noticed any problems of professional competence. Sometimes problems of professional competence will be related to stressful situations in a student’s life. Other times, students may enter the program without adequate awareness of personal problems, biases, or values that detract from their ability to provide competent clinical services. The CMHC faculty seek to encourage voluntary awareness of problems of professional competency and to facilitate professional growth. This may include referrals to appropriate professional personnel off-campus, assisting the student or colleague in reassigning clinical work, and helping the student or colleague assess the nature and extent of problems of professional competency. Students cannot be assured of confidentiality when they discuss any problems with faculty members or their clinical supervisors if it is deemed there may be a risk of harm to self or others.

*Please note: Serious violation of the ACA Code of Ethics and/or the Wheaton College Student Handbook can result in a dismissal from the site and/or program.*

**Informal Identification of Problems**

Any faculty member, clinical training supervisor, or student may raise an issue at any time. Clinical training supervisors should initially discuss their concerns with the Clinical Training Coordinator, who will gather additional information and raise the issue at the next scheduled CMHC program meeting. Students who have a concern about a fellow student’s professional competence should first discuss the issue with their own advisor, who will then raise the issue with the CMHC program faculty. Advisors and faculty members will protect the confidentiality of the student reporting the potential problem, but they may request the student meet with them to provide additional information. The CMHC faculty will briefly discuss the potential problem, and if necessary the advisor of the student concerned will gather additional data and will report to the CMHC faculty within one week. Faculty strive to ensure that the student involved remains informed and consulted when any problems arise. Faculty members are committed to respect students’ privacy. If the concern appears valid, a referral is made to the Student Review Committee in order to provide assistance or remediation in consultation with the student.

The referral is made by the CMHC program administrator or the student’s faculty advisor using the Notification of Referral to the Student Review Committee form and sent to the student by campus mail. The goal is to restore the student to a level of personal functioning that assures clinical competence. SRC referrals are maintained in the student’s portfolio.

**FOR INFORMATION REGARDING THE STUDENT REVIEW COMMITTEE (SRC), POLICY ON ACADEMIC HONESTY, STUDENT EVALUATION, RESPONSIBILITY FOR DISCIPLINARY ACTION, PROGRAM EVALUATION, AND GRIEVANCE PROCEDURE, PLEASE REFER TO YOUR “CMHC STUDENT HANDBOOK.”**
ENDORSEMENT POLICY

Students and graduates may request an endorsement (i.e., a verbal or written recommendation) from program faculty in order to gain employment or credentials. Students and graduates should seek an endorsement only for employment and credentials that are appropriate given their training, coursework, and supervised experience. Students and graduates may be endorsed by counseling faculty only for positions or credentials for which they have been adequately prepared. Faculty will verify student records (e.g., GPA, program requirements, graduation status) as needed to ensure that students and graduates are only endorsed for employment or credentials for which they have been adequately trained.

RIGHTS AND RESPONSIBILITIES

Relationship between the CMHC Program and Training Sites
The procedure for matching or selecting students for training sites and for maintaining the training relationship is a three-fold process of responsibility, accountability, and choice on the part of the students, training sites, and the College.

Accountability will be maintained across the three areas (College, sites, and students) through regular communication and record keeping. The College will supply documents and schedule periodic contacts with participating sites to assist in tracking and evaluating Practicum and Internship experiences received by the students. Students and supervisors need to complete and return clinical documents in a timely fashion, and to give additional verbal feedback regarding any changes, difficulties, or extraordinary occurrences as they might arise during the course of the placement. It is our hope that all three levels of participants - student, training site, and program will benefit from the regular communication and evaluation process.

The College, training sites, and students all maintain their right to choose throughout the matching, selection and training processes. The College may accept or reject potential training sites based on the site selection criteria outlined below. A contract may also be terminated at any time if for any reason the training facility is unable or unwilling to fulfill its contract obligations. Training sites may interview and accept or reject students based upon their needs and special selection criteria as referenced in their “Practicum and Internship Site Information Sheet.” In addition, the College or any training facility may terminate a student from placement during any training experience with proper notice and following an appropriate course of action focused toward attempting to resolve the situation. In situations involving a serious ethical violation, immediate termination may be warranted. Students may accept or reject an offer from any given training site, and with due cause and process, may terminate a placement during the Practicum or Internship training experience with proper notice and following the completion of the grievance procedure as outlined in Section Five of the M.A. in Clinical Mental Health Counseling Student Handbook.

Wheaton College CMHC Program
Oversight Responsibilities
It is the College's responsibility to screen agencies and supervisors to determine their appropriateness as potential training sites for its CMHC students. In addition, the College is responsible for making
available information about the approved training sites, negotiating contracts with the sites, and overseeing, tracking, and evaluating students' experiences while in training.

In light of the commitment of the program to oversight of the students' training experience, the department will also provide oversight of the student Practicum and Internship training within the context of the training facilities through the work of the Practicum/Internship faculty supervisor. While the Practicum and/or Internship agency will provide a Supervisor, assign clients, maintain record-keeping, bill clients, and carry out all administrative aspects of the clinic, the CMHC Program will set the minimum number of hours required of the student, the minimum number of hours of supervision, and the general range of experiences that will be provided for each student. In general, students must meet or exceed the standards established by CACREP as well as the state of Illinois’s requirements for LCPC licensure (outlined on page 38 of this handbook). Clinical supervision will be the responsibility of the professional staff of the training site. Faculty of the Wheaton College program will retain final evaluative responsibility for the overall training experience and professional development of the student.

**Practicum and Internship Faculty Supervisor**

The Practicum/Internship faculty supervisor takes direct responsibility for the professional development of the student, but does not assume direct professional responsibility for the clinical work being performed. Students should take feedback from their Practicum/Internship seminar to their supervisor before utilizing it in treatment. Oversight by the Practicum/Internship faculty supervisor is achieved through regularly scheduled group meetings. Individual meetings are usually one hour and internship seminar group meetings average one and one half hours per week. During the Practicum experience, faculty supervisors take a direct role in the student’s clinical training by maintaining bi-weekly contact with the student’s site supervisor. During the Internship experience, faculty supervisors remain involved with site supervisors as needed in order to ensure oversight of the student’s training experience.

**Clinical Training Sites**

**Site Supervisor**

The Site Supervisor, who is under the employment of the training agency, takes direct clinical responsibility for the clinical work of the student and the welfare of the client/patient under the care of the student. In some limited cases, program faculty may serve as site supervisors, especially during Practicum placements. Faculty will not serve as Supervisors of master’s students when there is a conflict of interest.

It is the responsibility of the training sites to provide accurate information to the College about the types of experiences that are available, and any specific needs, restrictions, and/or requirements that the agency may have that could influence their selection criteria. It is also the responsibility of the training sites to provide adequate, suitable clinical experiences, including supervision, for participating students to assist the College in the evaluation of the learning and performance of participating students. Sites should comply with agreed upon interview and selection procedures to the best of their ability.

**Students**

Students carry the ultimate responsibility for pursuing, securing, and completing their training experiences. They prepare the documents necessary for application, arrange an interview with potential placements, establish learning contracts with their chosen Practicum and Internship sites, and fulfill all clinical training responsibilities in a timely and professional manner. They are also expected to obtain
professional liability insurance prior to the beginning of Practicum training and submit a copy of the Certificate of Insurance to their Practicum faculty supervisor before beginning Practicum.

**Ethical Practice**

Students are at all times to conduct themselves as professionals. Specifically, students will be expected to adhere to the following guidelines while engaged in their clinical training experiences:

1. To follow the administrative policies, standards and practices of the Facility when in the Facility.
2. To report to the Facility on time and to follow all established regulations during the regularly scheduled operating hours of the Facility.
3. To conform to the standards and practices established by the College while training at the Facility.
4. To keep in confidence all medical and health information pertaining to particular clients unless otherwise indicated.
5. To inform clients of his or her status as a student, and give specific information as to his or her qualifications and functions.
6. To inform clients of the possibility of periodic meetings with the supervising mental health professional at the client’s, the service provider’s, or the supervisor’s request.
7. To review with the Supervisor all written reports and clinical communications, including documentation of training experiences, for consultation and approval.
8. To fully read and abide by the ACA ethical code.
9. To dress in a professionally appropriate manner according to the dress codes of the Facility. Students should exercise sound judgment in choosing modest clothing.

**LIABILITY INSURANCE**

Every student is required to obtain liability insurance when on any Practicum or Internship placement. The minimum coverage required is $1,000,000 each incident/$3,000,000 annual aggregate. Proof of liability insurance is required in the student portfolio before the student begins a Practicum and Internship placement and should cover the student through the duration of both Practicum and Internship. A hard copy of the current insurance policy (page showing dates and amounts) should be given to the Clinical Training Office to be placed in the student’s file before the student begins each clinical placement.

To help students get started, listed are some carriers used by previous cohorts. The CMHC department does not recommend any of these agencies. These are simply examples of carriers.

- **American Counseling Association (Healthcare Providers Service Organization)**
  
  [www.counseling.org/Students](http://www.counseling.org/Students)

  1-800-347-6647

  Insurance offered through HPSO ([www.hpso.com](http://www.hpso.com)) is available as a free benefit to all student members of ACA. The yearly ACA membership fee for students is $94.00. It is recommended that students first join ACA via their website. We encourage students to become members of ACA, as there are many benefits of membership in addition to liability insurance.
• The American Professional Agency, Inc.
  www.americanprofessional.com/student/index.htm
  1-800-421-6694
  This policy provides coverage to individual students who are working towards a degree in the Mental Health field for duties performed as part of their school curriculum including field placement. Please ensure the appropriate minimum coverage of $1,000,000 each incident/$ 3,000,000 annual aggregate is obtained through this provider.

• Lockton Risk Services, Inc.
  http://ahc.lockton-ins.com/pl
  Annual insurance costs are $18.00 for Mental Health Counselor Students. There may be an additional small cost to be covered at the Illinois liability insurance limits. Please ensure the appropriate minimum coverage of $1,000,000 each incident/$ 3,000,000 annual aggregate is obtained through this provider.
LICENSING AND CERTIFICATION

Overview
Students come to our program with many diverse plans and goals for the professional futures. Many desire to become licensed and practice as professional counselors. The CMHC faculty and staff are committed to providing the appropriate coursework and clinical requirements to enable students to obtain licensure and certification as professional counselors. All students must understand from the beginning of their training, however, that becoming informed about, applying for, and obtaining a professional license or certificate is solely the responsibility of the student with the assistance of faculty and staff. NOTE: It is very important to keep copies of all your syllabi and clinical training records as they may be needed to verify the content of the curriculum or the Practicum/Internship experience to various licensing agencies. In the event that a syllabus or syllabi are lost, you may contact the department of Psychology, Counseling, and Family Therapy Senior Office Coordinator who will coordinate the reproduction of syllabi from the department’s archive. If a printed copy is desired, this service will cost $.50/page plus the cost of postage. There is no charge for an electronic copy.

Practice at the master’s level is extremely diverse. Each state defines its own license and the requirements. There is no reciprocity from state to state. It is important that students attempt to anticipate their future licensing needs. If you know of a state or several states where you are likely to want to move after completion of the program your research into the licensure requirements in those states must begin in your first semester of the program (if not before). On several occasions students have discovered that a state’s licensure requirements may differ from the department’s graduation requirements in such areas as courses, Practicum and Internship hours, type of supervisor, etc. It is difficult to correct such problems after graduation.

Resources
Since the licenses in all of the states (and other countries) are always changing it is not possible for faculty to monitor the situation in states other than Illinois. Websites that are helpful in locating the various boards and licensing information are:

- American Counseling Association [www.counseling.org]
- IL Counseling Association [www.ilcounseling.org]
- IL Department of Professional Regulations [www.ildpr.com]
- IL Mental Health Counselors Association [www.imhca.org]
- National Board for Certified Counselors [www.nbcc.org]

A copy of the current edition of Licensure Requirements for Professional Counselors: A State by State Report, which outlines the counseling licensure requirements in all fifty states, is available in the Psychology Department office. Students may wish to photocopy the pages pertaining to the state or states where they intend to pursue licensure.

We do monitor the requirements of the LCPC license in Illinois and provide students with information that is as current as possible on obtaining licensure as a Clinical Professional. However, the State Licensing Boards ultimately determine eligibility, thus taking the recommended curriculum at Wheaton is not a guarantee of licensure. Licensure Information Books and study materials for the NCE exam are kept in the Clinical Training Office, M245, but they may not contain the most current information as licensure requirements change regularly from state to state. These may not be taken outside the
premises. The most current licensure information should be found on the state web-site under the department of professional regulation.

There are two levels of licensure in Illinois of which students should be aware:

**Level One:**
Licensed Professional Counselor (LPC): a temporary, master’s level license that requires a master’s degree and expires after five years. The LPC is required to work under direct supervision and cannot engage in independent practice. Most students obtain the LPC first and then work to acquire the clinical hours necessary for the permanent LCPC license. The required exam (National Counselor’s Exam) consists of 200 multiple-choice questions.

**Level Two:**
Licensed Clinical Professional Counselor (LCPC): an independent practitioner’s license that requires a master’s degree as well as 3,360 post-degree supervised hours. In addition to the NCE, you must also pass the NCMHCE (National Clinical Mental Health Counseling Examination). This exam consists of case studies in order to assess a professional counselor’s diagnostic and conceptualization abilities. Study guides and free practice exams for the NCMHCE can be found online.
## Requirements for Masters-level Mental Health Licenses in Illinois

LCPC=Licensed Clinical Professional Counselor

(See [http://www.idfpr.com/dpr](http://www.idfpr.com/dpr) for complete up-to-date details and Application Forms.)

| Educational Requirements | Minimum of 48 sem. hrs. (CMHC program exceeds this.)
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Required courses in the following domains: (1) human growth and development, (2) counseling theories, (3) counseling techniques, (4) group counseling, (5) individual appraisal, (6) research and evaluation, (7) legal and ethical responsibilities, (8) social and cultural foundations, (9) lifestyle and career development, (10) practicum/internship, (11) psychopathology, (12) substance abuse, (13) family dynamics.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Experience Requirements</th>
<th>2 years of post-degree professional experience</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3360 total hours of professional experience</td>
</tr>
<tr>
<td></td>
<td>1920 hours of face-to-face counseling</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Supervision Requirements</th>
<th>104 hours of post-degree clinical supervision required.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Supervisor must be LCPC, LCSW, Licensed Psychologist, or Psychiatrist.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Examinations</th>
<th>Two exams: the National Counseling Examination (NCE) of the National Board for Clinical Counselors (NBCC) AND the National Clinical Mental Health Counseling Examination (NCMHCE) or the Examination of Clinical Counselor Practice (ECCP).</th>
</tr>
</thead>
</table>
## Course Recommendations for Illinois LCPC Requirements

<table>
<thead>
<tr>
<th>Required in Illinois for LCPC</th>
<th>Recommended Wheaton Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Growth &amp; Development</td>
<td>CMHC 631 – Lifespan Development</td>
</tr>
<tr>
<td>Counseling Theory</td>
<td>CMHC 622 – Counseling Theories I</td>
</tr>
<tr>
<td></td>
<td>CMHC 623 – Counseling Theories II</td>
</tr>
<tr>
<td>Counseling Techniques</td>
<td>CMHC 621 – Counseling Skills &amp; Techniques</td>
</tr>
<tr>
<td></td>
<td>CMHC 621 L – Basic Counseling Skills Lab</td>
</tr>
<tr>
<td>Group Dynamics</td>
<td>CMHC 614 – Group Counseling</td>
</tr>
<tr>
<td></td>
<td>CMHC 614L – Group Counseling Lab</td>
</tr>
<tr>
<td>Appraisal of Individuals</td>
<td>CMHC 641 - Assessment in Counseling</td>
</tr>
<tr>
<td>Research &amp; Evaluation</td>
<td>CMHC 618 – Clinical Research &amp; Program Evaluation</td>
</tr>
<tr>
<td>Professional, Legal, &amp; Ethical Responsibilities</td>
<td>CMHC 624 – Issues &amp; Ethics in Professional Practice</td>
</tr>
<tr>
<td>Social and Cultural Foundations</td>
<td>CMHC 648 – Multicultural Issues &amp; Social Advocacy</td>
</tr>
<tr>
<td>Lifestyle and Career Development</td>
<td>CMHC 653 – Lifestyle and Career Development</td>
</tr>
<tr>
<td>Practicum / Internship</td>
<td>CMHC 692 – Grad. Counseling Practicum</td>
</tr>
<tr>
<td></td>
<td>CMHC 696 – Graduate Internship</td>
</tr>
<tr>
<td>Psychopathology</td>
<td>CMHC 642 – Psychopathology</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>CMHC 651 – Substance Abuse &amp; Addictions</td>
</tr>
<tr>
<td>Family Dynamics</td>
<td>CMHC 636 – Family Counseling</td>
</tr>
</tbody>
</table>
APPENDIX

Initial Practicum & Internship Forms
Application for Practicum/Internship
Focus Letter of Recommendation
Learning Contract

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Supervisor Forms
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Practicum Faculty Supervisor Evaluation
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Internship Faculty Supervisor Evaluation

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Student Forms
Client Consent Agreement
Permission to Release Educational Record Information
Between Semester Supervision Notification Form
Post-Placement Site Evaluation
CMHC Clinical Training Timeline

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Initial Practicum & Internship Forms
Clinical Mental Health Counseling Program  

Application for Practicum/Internship

This application must be completed, including approval signature, before a student can register for a practicum or internship. Bring this completed and signed application to the Clinical Training Office for processing.

Name _______________________________  Student # _________  CPO# ______

Hours completed toward degree ________________

If completing a Practicum and Internship at two separate clinical training sites, please complete two separate forms, one for each site. If both Practicum and Internship are being completed at the same clinical training site, please use only one form. Check the level of Clinical Training experience this application applies to:

    Practicum Only ☐     Internship Only ☐     Practicum and Internship (both at the same site) ☐

Please list the full organization name and city/state where you will be doing your Clinical Training:

Name: ____________________________________________________________________________

Address: __________________________________________________________________________

City: ___________________________      ____________        __________     __

State: _______________      Zip: ______

Telephone #: ________________

Email: ____________________________

Name and credentials of supervisor(s): ____________________________

### Practicum Registration Information (indicate all semesters that apply)

<table>
<thead>
<tr>
<th>Course Title and #</th>
<th>Course CRN and Section</th>
<th>Summer Credit Hours</th>
<th>Year (e.g. 2014)</th>
<th>Fall Credit Hours</th>
<th>Year (e.g. 2014)</th>
<th>Spring Credit Hours</th>
<th>Year (e.g. 2015)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMHC 692 Practicum</td>
<td>692-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Expected dates of Practicum: Begin: _______ End: _______ Total number of expected clock hours: ______

### Internship Registration Information (indicate all semesters that apply)

<table>
<thead>
<tr>
<th>Course Title and #</th>
<th>Course CRN and Section</th>
<th>Summer Credit Hours</th>
<th>Year (e.g. 2014)</th>
<th>Fall Credit Hours</th>
<th>Year (e.g. 2014)</th>
<th>Spring Credit Hours</th>
<th>Year (e.g. 2015)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMHC 696 Internship</td>
<td>696-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Expected dates of Internship: Begin: _______ End: _______ Total number of expected clock hours: ______

Student ________________________________________________  Date ______________

(signature)

Approval Signature:
Clinical Training Coordinator ____________________________  Date ______________

(signature)

(Scan then send Original to Grad Records Analyst for Registration)

REGISTRAR’S OFFICE USE ONLY:  Added to transcript by: ________________________ Date: __________________
MA Program in Clinical Mental Health Counseling

FOCUS OF LETTER OF RECOMMENDATION

CMHC Practicum or Internship
(One form for each faculty member)

Student: ___________________________  Faculty: __________________________

I have received faculty approval for this letter of recommendation ____ (Student’s Initials)

Information for Faculty:
Use additional paper to provide the following information for faculty writing your letter.

Experience with Faculty: Describe your interactions with this faculty. Include courses taken, TA work, research work, etc.

Strengths: What are some of the outstanding things you would like emphasized in your recommendations? Provide concrete examples. Describe experiences that make you qualified for the sites you have chosen.

Sites: List 5-7 sites where you would like to apply: (list on here or additional paper)
   a. ________________________________________________
   b. ________________________________________________
   c. ________________________________________________
   d. ________________________________________________
   e. ________________________________________________
   f. ________________________________________________
   g. ________________________________________________

Rationale: Explain why you are applying to each of your chosen sites. (This will help your recommendation be tailored to meet your needs.)

Additional Comments: Provide any other relevant comments.

AGREEMENT RESPECTING CONFIDENTIALITY
I understand that this recommendation is considered confidential and will be sent only to those I designated above. I further agree that the contents of this appraisal shall not be made known to anyone else…

Check one: ____ Including myself  ____ Except myself

Signature: ___________________________ Date: ________________________

Submission Instructions - You will need at least 2 copies of this form:
1. Faculty: Give a folder containing a copy of this form and your résumé to them 2 weeks before you would like to apply to clinical training sites.
2. Keep a copy of this form for future reference as this will not be kept in your student file. It becomes quickly out of date.
Clinical Mental Health Counseling Program

LEARNING CONTRACT
[Completed by Student & Site Supervisor]

Training Semester(s): ____________  ❑ Practicum  ❑ Internship

Student: ____________________________________________________________

Site: ______________________________________________________________

Site Supervisor: ____________________________________________________

Site Supervisor Graduate Degree(s) Obtained: ____________________________

License/Certification: ________________________________________________

License #: ______________  Profession: ________________________________

Held License Since: __________________________________________________

Email: __________________  Contact Phone Number: ___________________

Additional Site Supervisor: ____________________________________________
(If different from Clinical Supervisor)

Site: ______________________________________________________________

Site Supervisor Graduate Degree(s) Obtained: ____________________________

License/Certification: ________________________________________________

License #: ______________  Profession: ________________________________

Held License Since: __________________________________________________

Email: __________________  Contact Phone Number: ___________________

Supervisor Criteria:
Clinical Supervisors of Master’s students must be appropriately licensed masters, or doctoral level clinicians (LCPC, LCSW, Ph.D, Psy.D.).

Preliminary Learning Objectives:
1. __________________________________________________________________

2. __________________________________________________________________

3. __________________________________________________________________

4. __________________________________________________________________
Additional student comments:

Additional supervisor comments:

Outline of required training hours & responsibilities:

CMHC Practicum – Minimum 100 hours, 1 semester in duration
A minimum of 40 hours of the student’s activities/hours must involve face-to-face direct service.

CMHC Internship – Minimum 600 hours, 2 semesters in duration
A minimum of 240 hours of the student’s activities/hours must involve face-to-face direct service. All internship students must gain some experience leading groups.

1. Placement will begin _______________ and go through _______________ mm/dd/yy mm/dd/yy

2. Hours / Days / Week to work: ________________________________

3. Practice Activities by hours or #s per week or month as applicable (approx.):
   a. Counseling cases __________ per _______
   b. Intake sessions __________ per _______
   c. Diagnostic evaluations __________ per _______
   d. Professional presentations __________ per _______
   e. Research activities __________ per _______
   f. Group experience __________ per _______
   g. Other (community intervention, advocacy) __________ per _______

*Please specify the details of above practice activities here:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

4. Time off allowed:
   a. Holidays: ___________________________________________
   b. Vacation: ___________________________________________
   c. Sick Days: ___________________________________________
5. Practice supervision and training:
   a. Individual supervision:\[\text{________________ per _____________}\]
   b. Group supervision:\[\text{________________ per _____________}\]
   c. Live supervision:\[\text{________________ per _____________}\]
   d. Case conferences:\[\text{________________ per _____________}\]
   e. Seminars:\[\text{________________ per _____________}\]
   f. Staff meetings:\[\text{________________ per _____________}\]
   g. Other training:\[\text{________________ per _____________}\]

\[1\text{A Licensed Site Supervisor will provide a minimum of 1 hour, weekly, continuous individual supervision.}\]

\[2\text{Live supervision refers to direct observation of a clinical practice or may consist of reviewing an audio or video recording. Some level of live supervision is required, with regular live supervision preferred.}\]

6. Accruing hours during semester breaks

Please specify any semester breaks that a student is expected to continue clinical training:

   a. Winter Break (e.g. December 2016/ January 2017): _________________________
   b. August Break (e.g. August 2017): ________________________________________

During semester breaks, students may continue to continue to accrue hours if they are receiving a minimum of one hour per week of individual supervision by their site supervisor, if the student has completed and submitted the Between Semester Supervision Notification form to the designated On-Call faculty supervisor.

7. Recorded Client Sessions

On a regular and selective basis, with the informed consent of the client or guardian, and with the approval of the site supervisor, the student will be allowed to present client audio or video recordings to CMHC faculty supervisors, for purposes of professional training and examination. The student assumes full responsibility for prior presentation of this material to the site supervisor for approval in a timely manner, so that the following issues can be discussed: Who will have access to the material, what uses will be made of the material, issues of informed consent, and final disposition of the material. The student assumes full responsibility for obtaining informed consent, and ensuring that the material has been carefully and thoroughly disguised in order to protect client confidentiality.

Specifically, confidentiality of test protocols will be protected by carefully blocking out names, dates of birth, agency names, and any other information that could be used to identify the source of the information. Confidentiality of written reports will be protected by changing all names (clients, supervisors, consultants, agencies), dates of birth, and any other information that could be used to identify the source of the information.

The recommended manner for disguising reports is to use dignified and appropriate pseudonyms, change birth dates by a few days or weeks, and alter other references that might be used to identify the source of the information. The report should carry a footnote to this effect, e.g., “Names, dates, and other information have been altered to protect the confidentiality of client, supervisor, and agency.”
*If the site does not permit recording sessions, site supervisors are required to observe a live counseling session and complete a Live Observation Form, in lieu of recording.

List site stipulations regarding case material:

Documents to be completed during the training period:
- **Learning Contract**: To be completed by the student and the site supervisor within the first two weeks of beginning the training at the site.
- **Student Evaluation**: To be completed by the site supervisor at the end of the Practicum semester and the end of each semester of Internship. The form should be provided to the supervisor by the student, but may be accessed via the Site Supervisor Manual.
- **Hour Log**: to be completed by the student at the end of each semester of clinical training (Practicum and Internship) and signed by the site supervisor verifying the student’s training experience.

The information recorded above is correct to the best of my knowledge. I will endeavor to uphold this contract through the training experience.
Changes in the contract prior to or during the time that it is in effect can be made if agreed upon by all parties. All changes should be made in writing on or attached to the original contracts, initialed, and resubmitted to the Clinical Training Coordinator.

By signing below, I understand that I am training under my site supervisor’s license. I will act in compliance with the ACA Code of Ethics, including accurately recording all practicum/internship hours and activities, accurately maintaining clinical records, and acting under the guiding principles of beneficence and nonmaleficence. Additionally, when I am unsure of my ethical and professional responsibilities, I will communicate my concerns to my supervisors and my academic training department, always practicing good judgment and consulting as needed.

____________________________

Student                                                                                             Date

By signing below, I agree that I am a licensed mental health professional and that the student’s experience will be performed under my direction and professional responsibility as a supervisor. As a supervising clinician, I will adhere to the ACA Code of Ethics and agree that the above stated clinical activities are within my competence to supervise. Additionally, I agree to discuss concerns about the student’s performance with the student and with the student’s academic training department, if indicated. If a student is not meeting expectations, I agree to attempt remediation with the student prior to termination. I understand that terminating a student from placement during the training experience should occur only with proper notice and following an appropriate course of action focused toward attempting to resolve the situation. Immediate termination is warranted only in rare cases of severe ethical violation.

____________________________

Site Supervisor                                                                                         Date

Please make copies of this contract when it is completed and signed:

1. Copy of this form to your site supervisor
2. Original hard copy given to faculty supervisor
3. Student should keep a copy of this form for future reference.
Supervisor Forms
MA Program in Clinical Mental Health Counseling

PRACTICUM
Site Supervisor
EVALUATION
(Completed by Site Supervisor)

Student: __________________________________________ Student ID: ________

Semester/Year ________

Agency: ___________________________ Date: ________________

Practicum Site Supervisor: ____________________________

Practicum Faculty Supervisor: __________________________

Please circle the appropriate number in light of what you would expect with other M.A. students at the same level of professional development. Please add comments for ratings of BE.

3 (AE) = Above Expectations  1 (BE) = Below Expectations
2 (ME) = Meets Expectations  N/A = No Basis for Judgment

*If there are serious concerns please note in comments

<table>
<thead>
<tr>
<th></th>
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<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Applies current record-keeping standards related to clinical mental health counseling (CACREP CMHC D7).</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Demonstrates appropriate use of the current edition of the DSM, including symptoms &amp; clinical presentations of clients with mental and emotional impairments (CACREP CMHC L1).</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
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<td>Conceptualizes an accurate diagnosis of disorders presented by a client and discusses differential diagnosis with collaborating professionals (CACREP CMHC L2).</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Demonstrate interpersonal skills, insightfulness, self-awareness, and empathy that are necessary for the effective conduct of clinical mental health interventions.</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Demonstrates theory-based skills and techniques for developing and implementing treatment and change plans.</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Demonstrates the ability to benefit from supervision as well as the skills and confidence to work independently when appropriate.</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Demonstrates a respectful and non-judgmental attitude toward all persons and valuing of that which brings them health and wholeness.</td>
<td>N/A</td>
<td>1</td>
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<td>3</td>
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</tbody>
</table>

**Supervisor Comments:**

**Strengths** (comment on student skills sets, character formation, and competencies):

**Growth Areas** (comment on areas in which the student needs to grow):

Please comment on any of the above issues or any other perceptions on your assessment of this student’s current or future capabilities as a mental health professional. An overall assessment of the student’s present and future capabilities as a mental health professional would also be helpful (a separate letter may be attached if you prefer).
X_____________________________________________  ___________________
SITE SUPERVISOR SIGNATURE  DATE

X_____________________________________________  ___________________
SUPERVISOR SIGNATURE (if different from primary)  DATE

STUDENT COMMENTS:

X_____________________________________________  ___________________
STUDENT’S SIGNATURE  DATE

PLEASE RETURN TO:
Faculty Supervisor;
CMHC Program
Wheaton College
501 College Avenue
Wheaton, IL 60187
MA Program in Clinical Mental Health Counseling

PRACTICUM
Faculty
Supervisor
EVALUATION
(Completed by Faculty Supervisor)

Student: ___________________________________________  Student ID: ____________

Semester/Year_________

Agency: ________________________________________________  Date: ___________

Practicum Faculty Supervisor: ________________________________________________

Please circle the appropriate number in light of what you would expect with other M.A. students at the same level of professional development. Please add comments for ratings of BE.

3 (AE)  = Above Expectations  1 (BE) = Below Expectations
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<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Advocates for policies, programs, and services that are equitable and responsive to the unique needs of clients (CACREP CMHC F2).</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Demonstrates appropriate use of the current edition of the DSM, including symptoms &amp; clinical presentations of clients with mental and emotional impairments (CACREP CMHC L1).</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Description</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>----------------------------------------------------------------------------</td>
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<td></td>
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**Recordings reviewed:** (yes or no).  **Date reviewed:** ______

**Live Observation Form submitted** (in lieu of recordings): (yes or no)

**Date of Live Observation:** _______

**Supervisor Comments:**

**Strengths** (comment on student skills sets, character formation, and competencies):

**Growth Areas** (comment on areas in which the student needs to grow):
Please comment on any of the above issues or any other perceptions on your assessment of this student's current or future capabilities as a mental health professional. An overall assessment of the student’s present and future capabilities as a mental health professional would also be helpful (a separate letter may be attached if you prefer).

X_____________________________________________
FACULTY SUPERVISOR SIGNATURE                      DATE

STUDENT'S COMMENTS:

X_____________________________________________
STUDENT SIGNATURE                                DATE
MA Program in Clinical Mental Health Counseling

INTERNSHIP
Site Supervisor
EVALUATION
(Completed by Site Supervisor)

Student: ________________________________  Student ID: _____

Semester/Year__________
Agency: ________________________________  Date: __________

Internship Site Supervisor: ________________________________

Internship Faculty Supervisor: ________________________________

Internship I Evaluation: _____ Internship II Evaluation: _____

Please circle the appropriate number in light of what you would expect with other M.A. students at the same level of professional development. Please add comments for ratings of BE.

3 (AE) = Above Expectations  1 (BE) = Below Expectations  
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<tr>
<td>Demonstrates the ability to apply and adhere to ethical &amp; legal standards in clinical mental health counseling (CACREP CMHC B1).</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling (CACREP CMHC D1).</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders (CACREP CMHC D2).</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Demonstrates appropriate use of culturally responsive individual, couple, family, group, and systems modalities for initiating, maintaining, and terminating counseling (CACREP CMHC D5).</td>
<td>N/A</td>
<td>1</td>
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<td>Applies current record-keeping standards related to clinical mental health counseling (CACREP CMHC D7).</td>
<td>N/A</td>
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<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Demonstrates ability to modify counseling theories, techniques, and interventions to make them culturally appropriate for diverse populations (CACREP CMHC F3).</td>
<td>N/A</td>
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<tr>
<td>Know the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the DSM (CACREP CMHC K1).</td>
<td>N/A</td>
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<tr>
<td>Understand the established diagnostic criteria for mental and emotional disorders, and be able to describe treatment modalities and placement criteria within the continuum of care (CMHC K2).</td>
<td>N/A</td>
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<td>Demonstrate appropriate use of the current edition of the DSM, describing the symptoms and clinical presentation of clients with mental and emotional impairments (CACREP CMHC L1).</td>
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<td>Conceptualize an accurate diagnosis of disorders presented by a client and discuss the differential diagnosis with collaborating professionals (CACREP CMHC L2).</td>
<td>N/A</td>
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<td>Demonstrates ability to benefit from supervision as well as the skills and confidence to work independently when appropriate.</td>
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Demonstrates a respectful and non-judgmental attitude toward all persons and valuing of that which brings them health and wholeness.

| N/A | 1   | 2   | 3   |

**Supervisor Comments:**

**Strengths** (comment on student skills sets, character formation, and competencies):

**Growth Areas** (comment on areas in which the student needs to grow):

Please comment on any of the above issues or any other perceptions on your assessment of this student’s current or future capabilities as a mental health professional. An overall assessment of the student’s present and future capabilities as a mental health professional would also be helpful (a separate letter may be attached if you prefer).
SITE SUPERVISOR'S SIGNATURE

SUPERVISOR'S SIGNATURE (if different from primary)

STUDENT'S COMMENTS:

STUDENT'S SIGNATURE

REVIEWED TOGETHER ON ___________________

PLEASE RETURN TO:
Faculty Supervisor;
CMHC Program
Wheaton College
501 College Avenue
Wheaton, IL  60187
MA Program in Clinical Mental Health Counseling

INTERNSHIP
Faculty
Supervisor
EVALUATION
(Completed by Faculty Supervisor)

Student: ____________________________  Student ID: __________
Semester/Year: __________
Agency: ____________________________  Date: ________________
Internship Faculty Supervisor: ____________________________

Internship I Evaluation: ____  Internship II Evaluation: ____

Please circle the appropriate number in light of what you would expect with other M.A. students at the same level of professional development. Please add comments for ratings of BE.

3 (AE) = Above Expectations  1 (BE) = Below Expectations
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Demonstrates the ability to apply and adhere to ethical & legal standards in clinical mental health counseling (CACREP CMHC B1).

Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling (CACREP CMHC D1).

Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders (CACREP CMHC D2).
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<th>N/A</th>
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<td>N/A</td>
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<td>3</td>
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<tr>
<td>Demonstrate a commitment to one’s own personal growth toward spiritual psychological, and professional maturity.</td>
<td>N/A</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>Demonstrate interpersonal skills, insightfulness, self-awareness, and empathy that are necessary for the effective conduct of clinical mental health interventions.</td>
<td>N/A</td>
<td>1</td>
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<td>3</td>
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</table>
Demonstrates ability to benefit from supervision as well as the skills and confidence to work independently when appropriate. | N/A | 1 | 2 | 3 |
Demonstrates a respectful and non-judgmental attitude toward all persons and valuing of that which brings them health and wholeness. | N/A | 1 | 2 | 3 |
Demonstrates a valuing of mental health work as an outreach of the individual Christian and of the church. | N/A | 1 | 2 | 3 |

**Recordings reviewed:**  (yes or no).  **Date reviewed:** ______
**Live Observation Form submitted** (in lieu of recordings): (yes or no)
**Date of Live Observation:** ______

**Phone/Email Consultation with the Site Supervisor** (in addition to written Site Supervisor Final Evaluations)
Include Date and Content of Phone/Email Consultation:

**Supervisor Comments:**
**Strengths** (comment on student skills sets, character formation, and competencies):

**Growth Areas** (comment on areas in which the student needs to grow):
Please comment on any of the above issues or any other perceptions on your assessment of this student's current or future capabilities as a mental health professional. An overall assessment of the student’s present and future capabilities as a mental health professional would also be helpful (a separate letter may be attached if you prefer).

X_____________________________________________
FACULTY SUPERVISOR SIGNATURE DATE

___________________
STUDENT'S SIGNATURE DATE

STUDENT'S COMMENTS:

X_____________________________________________
STUDENT'S SIGNATURE DATE
Student Forms
MA Program in Clinical Mental Health Counseling

CLIENT CONSENT AGREEMENT FOR PRACTICUM/INTERNSHIP

I, _______________________________, agree to participate in a counseling session which may include interview, psychological testing, or counseling.

I am aware that the process may be audiotaped or videotaped and observed by two or three mental health professionals who will be evaluating the counseling student intern.

I understand that the counselor will be a graduate student in the Clinical Mental Health Counseling Program at Wheaton College.

I further understand that the observers will keep all information revealed in the course of the evaluation confidential.

A copy of this consent form will be kept in the Department of Psychology at Wheaton College in a sealed envelope, to be opened only in cases of legal challenge.

I recognize that participation in the examination procedure is not a requirement to receive treatment at ________________________________.

My participation is completely voluntary.

I may withdraw this consent at any time.

This will automatically expire three years from the date it is signed.

Signature of Interviewee/Client: _______________________________ Date: _______________

Name of Interviewee/Client: _______________________________

Signature of Parent/Guardian (if applicable): _______________________________ Date: _______________

Signature of Witness: (Counselor Intern) _______________________________ Date: _______________
I give permission for Wheaton College M.A. in Clinical Mental Health Counseling Program to release information to and receive information from ____________________________

(Practicum/Internship site supervisor)

regarding my areas of academic and clinical competence as they pertain to Practicum/Internship training for the purpose of coordinating efforts toward my professional and clinical growth.

Printed Name ________________________________________________________________

Signed Name ____________________________________________ Date ______________

This release is effective for one year beginning ____________________________

Record of Contact:
To be completed by Clinical Training Coordinator, Advisor, or Practicum/Internship Faculty Supervisor only.

Date of contact ________ Person spoken to _____________________

Date of contact ________ Person spoken to _____________________

Date of contact ________ Person spoken to _____________________

Date of contact ________ Person spoken to _____________________

Date of contact ________ Person spoken to _____________________

Date of contact ________ Person spoken to _____________________
MA Program in Clinical Mental Health Counseling

Between Semester Supervision Notification Form

Student Name:

Student Cell Phone Number:

Practicum/ Internship Site:

Site Supervisor Name:

Site Supervisor Phone Number:

Site Supervisor Email:

By signing this form, if I continue to be at my site during semester break during department accepted dates, I will continue to receive individual supervision from my site supervisor for a minimum of one hour per week. Additionally, my signature indicates that I agree to contact the On-Call faculty supervisor for supervision on an as needed basis. I understand that between semesters, my site supervisor primarily provides supervision; however, the On-Call faculty supervisor is available to me as needed. I understand that I must continue to log my hours on the Hour Log and keep copies of all supporting documentation. I agree to keep the On-Call faculty supervisor apprised of any ethical, legal, or crisis situation during the break.

____________________________________  ______________________________
STUDENT SIGNATURE                  DATE

____________________________________  ______________________________
SITE SUPERVISOR SIGNATURE           DATE
POST-PLACEMENT
SITE EVALUATION
(Completed by student)

Name: _____________________
Date: _____________________ Site of Clinical Placement: _____________________
Dates of Placement (from - to): _____________________
Name(s) of Supervisor(s): _____________________ Faculty Supervisor: _____________________

Would you recommend this Practicum/Internship site to other students?  YES  MAYBE  NO

Please rate the quality of your Practicum/Internship experience on the following scale:

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Quality of Supervision</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. Quantity of Supervision</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. Relationship with Supervisor</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. Staff Rapport with Student</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. Quality of Training Experiences</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. Quantity of Training Experiences</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. Variety of Experiences</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8. Adherence to Learning Contract</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>9. Overall Quality of the Placement</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
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</table>

What are the positive aspects of your placement?
_______________________________________________________________________
_______________________________________________________________________

What are the less than positive aspects of your placement?
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
Describe your supervisor’s approach to supervision.

_______________________________________________________________________

_______________________________________________________________________

List characteristics a student would possess to make a good fit with this site.

_______________________________________________________________________

_______________________________________________________________________

*Please complete the following statement:*

I typically worked ____ hours per week, with ____ of those being direct service (through counseling, consultation, and assessment).

*Please indicate the percentage of your overall time you spent in each professional activity during this current clinical placement.*

<table>
<thead>
<tr>
<th>Service delivery</th>
<th>% of overall time given to each activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Adult (18-64)</td>
<td></td>
</tr>
<tr>
<td>Individual Child (&lt;12)</td>
<td></td>
</tr>
<tr>
<td>Individual Adolescent (13-17)</td>
<td></td>
</tr>
<tr>
<td>Individual Older Adults (65+)</td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td></td>
</tr>
<tr>
<td>Couples</td>
<td></td>
</tr>
<tr>
<td>Group</td>
<td></td>
</tr>
<tr>
<td>Community Intervention</td>
<td></td>
</tr>
<tr>
<td>Consultation (schools, hospitals, churches, etc.)</td>
<td></td>
</tr>
</tbody>
</table>
Please indicate the percentage of your overall time you worked with each population during this current clinical placement.

<table>
<thead>
<tr>
<th>Population</th>
<th>% of overall time worked with each population during current placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasian/European American</td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td></td>
</tr>
<tr>
<td>Asian American</td>
<td></td>
</tr>
<tr>
<td>Latino</td>
<td></td>
</tr>
<tr>
<td>Native American</td>
<td></td>
</tr>
<tr>
<td>Other (please describe)</td>
<td></td>
</tr>
<tr>
<td>Other (please describe)</td>
<td></td>
</tr>
</tbody>
</table>

Please initial here if you are willing to share this information with other students: _____

RETURN TO:
Practicum/ Internship Faculty Supervisor
Wheaton College
CMHC Clinical Training Timeline (First Year)

FALL SEMESTER 2018

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/4/18</td>
<td>Practicum Information Exchange (PIE)</td>
</tr>
<tr>
<td>12/14/18</td>
<td>Last day of Fall Classes</td>
</tr>
<tr>
<td>12/17 – 12/20/18</td>
<td>Finals</td>
</tr>
</tbody>
</table>

SPRING SEMESTER and SUMMER 2019

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/14/19</td>
<td>Spring classes begin</td>
</tr>
<tr>
<td>Upon Securing a Practicum or Internship Site (latest by April)</td>
<td><strong>DUE</strong> -- &quot;Application for Practicum and/ or Internship&quot; and &quot;Permission to Release Educational Record Information&quot; when you obtain a placement for next year</td>
</tr>
<tr>
<td>5/3/19</td>
<td>End of Spring Classes</td>
</tr>
<tr>
<td>5/6-5/9/2019</td>
<td>Finals</td>
</tr>
<tr>
<td>6/1/19</td>
<td><strong>DUE:</strong> Professional Growth &amp; Development Counseling, 8 hour requirement completed <strong>prior to June 1, 2019</strong></td>
</tr>
<tr>
<td>June 2019</td>
<td>Begin Practicum</td>
</tr>
<tr>
<td>August 2019</td>
<td>Complete Practicum</td>
</tr>
</tbody>
</table>