

Off-Campus Practicum Site Agreement

DEPARTMENT OF FAMILY SCIENCES

FAMILY THERAPY

Requirements Agreed Upon by the Site, Student, and University

Site Supervision

The practicum student will receive (1) hour of individual supervision per week from the person named as on-site supervisor. Submission of a professional vita is required before the student will be allowed to practice with the on-site supervisor. The supervisor must have a master's degree in family therapy or a related clinical field, two years of experience as a licensed therapist, and supervisor status in order to be eligible. It is expected that the supervisor will have expertise in systemic family therapy theories and models and hold LMFT-S or equivalent.

Video Capabilities--Permission and Releases

The practicum student will be allowed to videotape her/his sessions with clients, with written client permission, at the site. S/he will bring these videotapes to TWU for group and individual supervision with the university professor. Therefore, your site release form must cover "viewing video for supervision and consultation purposes" (or equivalent wording).

Client Contact Hours

The practicum student will average 10-15 direct client contact hours per week per semester (12 weeks in summer, 15 weeks in the spring and fall). Total hours needed per semester will be determined by the professor of record. The student is required to complete 300 hours of face-to-face therapy sessions, 150 of which must be with couples and families, across the total semesters of his/her Practicum experience.

Access to All Staff Functions

Because s/he needs a global professional orientation, the practicum student will be allowed to attend staffings for his/her clients, including treatment planning, case reviews, and all clinical training. The student will be given exposure to all applicable professional experiences at this site.

Type of Site

This site will provide couple and family therapy in an agency or non-profit setting. While the student may also work with individuals and groups, s/he must be practicing with couples and families in this practicum.

I HEREBY AFFIRM THAT THE REQUIREMENTS ABOVE HAVE BEEN MET AND WILL BE KEPT THROUGH THE STUDENT'S PRACTICUM EXPERIENCE.

Student's Signature

Date

Signature of Site Supervisor

Date

Signature of Site Director or Administrator

Date

Signature of Family Therapy Program Coordinator, TWU

Date

[Revised 10-2008]