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Indiana University of Pennsylvania

Department of Counseling

# FIELD EXPERIENCE HANDBOOK FOR MASTER'S PROGRAMS



Summer 2024, Fall 2024, and Spring 2025

**Important Note:** Information contained in this handbook is subject to change.

(Handbook Revised 10-31-23)

# Department of Counseling Field Experience Handbook

## Table of Contents

Introduction.....	3
Overview of Requirements.....	5
A. Required Hours.....	5
B. Clarification of Duties.....	6
C. Additional Requirements.....	7
D. Dates of Field Experience.....	7
E. Accruing Field Experience Hours.....	7
Pre-Field Experience Planning.....	8
Sample Site Letter – CMHC.....	9
Sample Site Letter - SCHOOL.....	10
Field Experience Responsibilities.....	11
A. Field Experience Coordinator’s Responsibilities.....	11
B. Faculty Supervisor’s Responsibilities.....	11
C. Site Supervisor’s Responsibilities.....	11
D. Field Experience Student’s Responsibilities.....	12
Field Paperwork Due Dates & Professional Behavior.....	13
Finishing the Field Experience.....	14
Appendices.....	15
Appendix A: Field Experience Application.....	16
Appendix B: Field Experience Student Documents.....	17
Appendix C: Field Experience Site Documents.....	19
Site Information Sheet.....	19
Affiliation Agreement Form.....	24
Administrator Letter Requirements & Sample.....	26
Appendix D: Learning Contract.....	27
Appendix E: Site Supervisor’s Evaluation of Field Experience Student.....	31
Appendix F: Field Experience Student’s Self-Evaluation.....	35
Appendix G: Faculty Supervisor’s Evaluation of Field Experience Student.....	39
Appendix H: Field Experience Student’s Evaluation of Site Supervisor.....	40
Appendix I: Field Experience Log Sample.....	41
Appendix J: Clearance Policy.....	43
Appendix K: Request to Extend Field Experience.....	43
Critical Incident Response: Sequence Documentation Policy.....	46
Student Removal from Practicum or Field Site: Policy and Process.....	48

*Dedicated to Dr. Janet Fontaine, whose energy making the Field Experience a valuable experience lives on in part through this Handbook.*

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# Introduction

Welcome to your field experience for master's degree programs! It is the Department's hope that this culminating experience is both fruitful and beneficial. This handbook is structured in a chronological manner. That is, by reading this important guide, you will understand the process as you prepare, conduct, and terminate your field experience. A few introductory notes may be of help to you:

## **A. Catalog Description for Field Experience (COUN 755)**

Provides a supervised professional practice field placement for students in the Counseling programs. The plan and scope of the field experience will be determined by the student and supervising faculty on an individual basis and in keeping with the departmental policies and procedures as stated in the Field Experience Handbook. May be repeated for a maximum of six credits.

**Clinical Mental Health Counseling Prerequisites:** COUN 710, 615, 617, 618, 637, 639, 634, 636, 657, 669, 671, & 720

**School Counseling Prerequisites:** COUN 615, 617, 618, 621, 624, 636, 628, 637, 639, 659, 667, & 720

## **B. Course Description**

This course is meant to be a culminating course that facilitates the transition between your master's degree program and entry into the next phase of your career in the counseling profession. This course is intended to enhance your abilities to effectively offer counseling services to students or clients in a school or clinical mental health setting.

While the Faculty Supervisors (course instructors) will have different syllabi for this course, much of it will be identical. All students, regardless of the section, will have the same required hours, summative assignment, and necessary forms to complete for the field experience. However, each Faculty Supervisor will also have her/his/their own course requirements.

## **C. Course Objectives**

Upon completion of this course, students will successfully:

1. Apply theory and skills acquired through the counselor training program to practical situations by completing a 600-hour training experience in one semester or over two semesters (300 hours each semester) providing 240 hours of direct service with students/clients in a school or clinical mental health setting.
2. Enhance the academic, career, and/or social/emotional development of students/clients through direct and indirect service.
3. *For Clinical Mental Health Counseling Students:* Within the 240 hours of direct service, a minimum of 75 hours must consist of individual and group counseling sessions with clients over the duration of the field experience. This includes a minimum of 10 individual counseling sessions and 4 ongoing group counseling sessions over the duration of the field experience.  
*For School Counseling Pre-K-12 Certification Students:* Within the 120 hours of direct service at each level (elementary, secondary), a minimum of 37.5 hours must consist of individual and group counseling sessions with students at each level. This includes a minimum of 10 individual counseling sessions, 4 ongoing group counseling sessions, 2 school counseling classroom core curriculum lessons, and systemic advocacy interventions at each level. Elementary placements should involve grades Pre-K-6 and secondary placements should involve grades 7-12.
4. Conduct consultations with various members of the field placement constituency.
5. Follow the site's testing/assessment, diagnosis, and record-keeping procedures and understand how this information is used in making decisions affecting students/clients in this setting.

6. Become familiar with a variety of professional activities in addition to direct service, such as record keeping, supervision, team/staff meetings, in-service meetings, referral, and appropriate use of technology.
7. Prepare for and participate in individual or triadic clinical supervision with Site Supervisor for 1 hour per week and an average of 1.5 hours of group supervision per week with Faculty Supervisor.
8. Conduct a developmentally appropriate and culturally responsive case conceptualization presentation that integrates and applies learning across the core curriculum areas.
9. Review how professional credentialing, including school counseling certification from the Pennsylvania Department of Education, the state licensing from the PA State Board of Social Workers, Marriage and Family Therapists and Professional Counselors, and the national certification through the National Board for Certified Counselors, accreditation practices and standards, and public policy impacts professional functioning.
10. Enhance knowledge of personal career development in school or clinical mental health settings.

#### **D. Questions About Field Experience**

The content of this handbook will no doubt answer many of your initial questions. However, it is also understood that unique questions will likely arise in regard to your field experience. Please feel free to address such questions with the Field Experience Coordinator or your Faculty Supervisor.

#### **E. Site Supervisors**

As you can already tell, this handbook is written for you, the student who is completing the field experience. However, please make sure that your Site Supervisor has a copy. It will be critical for her/him/them to have a copy to further understand the IUP Department of Counseling model for the field experience.

Finally, please know that this handbook is reviewed periodically to ensure that the information is clearly explained and up to date. Your feedback is welcome as these reviews take place as the Department is committed to creating a useful field experience handbook.

#### **F. Additional Helpful Information**

- Students must apply for graduation through MyIUP by the established deadlines. More information may be found at <https://www.iup.edu/commencement/graduate/how-to-apply-for-graduation.html>
- The Graduate Student Administration of the National Counseling Exam (GSA-NCE) is typically administered at IUP. Please see Department of Counseling announcements for more information.
- Information about pursuing and applying for school counselor certification can be found at <https://www.iup.edu/counseling/students/index.html>
- Information about counselor licensure in Pennsylvania can be found at <http://www.pacode.com/secure/data/049/chapter49/chap49toc.html>
- As an IUP student, you have many rights related to IUP's administration of Title IX regulations. It is essential for you to become familiar with some important resources. Please read the information contained in the Sexual Discrimination/Sexual Misconduct Reporting and Resources as well as the Where to Turn For Help documents that can be accessed through the following link: <https://www.iup.edu/supportingstudents/where-to-turn-for-help.html>

## Overview of Requirements

The field experience provides a supervised clinical placement for students in the counseling programs. The exact plan and scope of the field experience will be determined by the field experience student, Faculty Supervisor, and Site Supervisor on an individual basis. However, the following are the minimum requirements for this experience.

### A. Required Hours

Clinical Mental Health Counseling students and School Counseling students are required to complete a 600-hour field experience providing 240 hours of direct service with students/clients and 360 hours of indirect service. Examples of direct contact hour duties include individual counseling, group counseling, family counseling, couples counseling, intakes, assessment, career counseling, post-secondary planning, and school counseling core curriculum lessons. Examples of indirect contact hour duties include supervision, observation of counseling sessions, attending team meetings or staffing, record keeping, and training.

Students may have a maximum of 2 field experience sites during the 600-hour field experience. Licensure only or certification only students may only be required to complete a 300-hour field experience. A breakdown of hours for both the 600-hour and 300-hour field experience is included below.

For 600-hour field experiences, students may complete the hours in one semester (600 hours) or over two semesters (300 hours each semester). **This means that students are required to work at least 16.5 hours per week at the site for 15 weeks (300-hour field experience) or 36.5 hours per week at the site for 15 weeks (600-hour field experience).** For school counseling students, at least one 300-hour experience must be completed in a public school setting. Note that cyber and charter school placements are not permitted by the College.

**Clinical Mental Health Counseling Students:** Within the 240 hours of direct service, a minimum of 75 hours must consist of individual and group counseling sessions with clients over the duration of the field experience. This includes a minimum of 10 individual counseling sessions and 4 ongoing group counseling sessions over the duration of the field experience.

<b>Clinical Mental Health Counseling 600 hours in one semester</b>	
<b>Direct Service</b>	240 hours, including minimum 75 hours of individual and group counseling
<b>Indirect Service</b>	360 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university

<b>Clinical Mental Health Counseling 600 hours over two semesters</b>			
	<b>Totals</b>	<b>Semester 1 (300 Hours)</b>	<b>Semester 2 (300 Hours)</b>
<b>Direct Service</b>	240 hours, including minimum 75 hours of individual and group counseling	120 hours, including minimum 37.5 hours of individual & group counseling	120 hours, including minimum 37.5 hours of individual & group counseling
<b>Indirect Service</b>	360 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university	180 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university	180 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university

<b>300 hours in one semester</b>	
<b>(For students seeking licensure only or school counseling certification only. Check with advisor for specific requirements.)</b>	
<b>Direct Service</b>	120 hours, including minimum 37.5 hours of individual and group counseling
<b>Indirect Service</b>	180 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university

**School Counseling Pre K-12 Certification Students:** Within the 120 hours of direct service at each level (elementary, secondary), a minimum of 37.5 hours must consist of individual and group counseling sessions with students. This includes a minimum of 10 individual counseling sessions, 4 ongoing group counseling sessions, 2 school counseling classroom core curriculum lessons, and systemic advocacy interventions at each level. Elementary placements should involve grades Pre K-6 and secondary placements should involve grades 7-12.

**Important Note for Pre-K-12 School Counseling Students:** For field experience, the PDE guidelines (March 2014) recommend students to design and implement school counseling programs at the elementary and secondary levels. Therefore, the IUP Department of Counseling requires students to complete 300 hours of field at the elementary level (Pre-K-6) and 300 hours of field at the secondary level (7-12). When students choose field sites, they may select a maximum of two schools that will satisfy these grade level requirements.

<b>School Counseling Pre-K-12 Certification 600 hours in one semester</b>			
	<b>Totals</b>	<b>Elementary School (300 hours)</b>	<b>Secondary School (300 hours)</b>
<b>Direct Service</b>	240 hours, including minimum 37.5 hours of individual and group counseling at the elementary level and 37.5 hours of individual and group counseling at the secondary level	120 hours, including minimum 37.5 hours of individual & group counseling	120 hours, including minimum 37.5 hours of individual & group counseling
<b>Indirect Service</b>	360 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university	180 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university	180 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university

<b>School Counseling Pre-K-12 Certification 600 hours over two semesters</b>			
	<b>Totals</b>	<b>Semester 1 - Elementary or Secondary School (300 Hours)</b>	<b>Semester 2 - Secondary or Elementary School (300 Hours)</b>
<b>Direct Service</b>	240 hours, including minimum 37.5 hours of individual and group counseling at the elementary level and minimum 37.5 hours of individual and group counseling at the secondary level	120 hours, including minimum 37.5 hours of individual & group counseling	120 hours, including minimum 37.5 hours of individual & group counseling
<b>Indirect Service</b>	360 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university	180 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university	180 hours, including one hour of individual and/or triadic supervision per week on-site and an average of 1.5 hours per week group supervision at the university

## **B. Clarification of Duties**

The field experience duties will vary from site to site. However, it is important to understand that all duties performed must be appropriate for a Master's-level counselor in order to be counted as field experience hours. All direct hours must take place when the field experience student is at the site location. One potential exception to this policy may be for home-based counseling. Home-based counseling will be permitted if the site ensures the student is accompanied by the Site Supervisor or a qualified supervisor designee (Master's Degree in counseling or closely related clinical discipline, three years of post-Master's Degree counseling experience, and is practicing in a clinician or clinical supervisor role). The designee information must be reported to the Faculty Supervisor. The other exception to this may be if the site offers telehealth sessions where the Site Supervisor is remotely available. The site will also provide the student with appropriate training, safety measures, and supervision for these duties.

### C. Additional Requirements

- ALL paperwork must be filled out using PDFs, which will be provided, and be emailed to [coun-field@iup.edu](mailto:coun-field@iup.edu).
- Complete and electronically submit the Field Experience Application (Appendix A).
- Complete required paperwork prior to the start of field and electronically submit by the specified due date to the Field Experience Coordinator (Appendices A-C).
- Verify your required clearances and TB test on the CastleBranch system will be current for the duration of your entire field experience and will not expire anytime during the field timeframe. Any documents that will expire during the field timeframe must be renewed by the specified due date (see renewal procedure on D2L). You must also renew your liability insurance in a timely manner so it remains current for the duration of the field experience. All renewal documents must be electronically submitted on the CastleBranch clearance management system. Call CastleBranch customer service (888-723-4263) if help is needed.
- After all student and site materials are reviewed and found to meet eligibility requirements, you will receive an e-mail from the Field Coordinator stating you are approved for field. **You may NOT begin working at your site until you have received this approval from the Field Experience Coordinator.**
- Negotiate a Field Experience Learning Contract with your Site Supervisor.
- Maintain Field Log (Appendix I) that provides a tally of hours and activities completed during field experience.
  - **Note: It is your responsibility to keep copies of your final signed field logs.**
- Complete the Summative Assignment for the field experience.
- Attend weekly individual and/or triadic supervision with the Site Supervisor and group supervision with the Faculty Supervisor.

### CI. Dates of Field Experience

The field experience will begin on the first day of the IUP semester and end on the last day of semester finals. There are only two possible exceptions to these dates:

- If there is pre-requisite training that is required by the site before the semester begins (e.g. HIPPA training, in-service meetings, etc.), a letter or an e-mail from the Site Supervisor detailing the required training/dates must be sent to the Field Experience Coordinator ([coun-field@iup.edu](mailto:coun-field@iup.edu)) for approval in advance.
- If the student needs to continue between concurrent field semesters for client continuity of care or for an extenuating circumstance, preapproval must be obtained through your Faculty Supervisor (See Appendix K).

### CII. Accruing Field Experience Hours

- It is expected that field experience students will accrue their hours over the entire duration of the semester. For the field experience, students are required to work at least 16.5 hours per week at the site for 15 weeks (300-hour field experience) or 36.5 hours per week at the site for 15 weeks (600-hour field experience). **Important Note:** Students interested in taking field in the summer semester (if offered) will need to increase the number of hours per week at the site because the summer semester has fewer weeks than the fall/spring semesters. **All direct hours must take place when the field experience student is at the site location.**
- Students may arrange to work more than the required hours at the site in a given week. However, regardless of when total field hours are met, students **must work at each site at least 10 hours per week** for the remainder of the semester fulfilling their field experience responsibilities.
- The required supervision hours are counted towards the indirect hours needed for the 300-hour or 600-hour experience. In addition to the supervision hours, students are permitted to accrue a maximum of two hours per week of indirect work off site.
- When students have two sites, they typically split the hours equally between the sites. However, in unusual cases, it is permissible to have a different configuration of hours. In this case, **no site would be approved that is under 10 hours per week.**

# Pre-Field Experience Planning

Students **must** follow the subsequent steps in order to have a successful field experience.

<p><b>Step 1:</b> <b>Attend Field Experience Meeting</b></p>	<p><u>Students Become Familiar With:</u></p> <ol style="list-style-type: none"> <li>1. Appendix A- Field Experience Application</li> <li>2. Field Experience Planning Schedule</li> <li>3. Professional Liability Insurance Requirement</li> <li>4. Clearances, Protection of Minors Training, TB Test Requirements, and CastleBranch Submission</li> <li>5. ACA Code of Ethics</li> <li>6. Affiliation Agreement Information</li> </ol> <p><u>Students Submit:</u></p> <ol style="list-style-type: none"> <li>1. Appendix A</li> </ol>
<p><b>Step 2:</b> <b>Review Handbook and Eligibility Requirements</b></p>	<p><u>Eligibility Requirements Include:</u></p> <ol style="list-style-type: none"> <li>1. Minimum of 3.00 GPA in master's degree program</li> <li>2. All program course prerequisites have been completed</li> </ol>
<p><b>Step 3:</b> <b>Site Selection</b></p>	<ol style="list-style-type: none"> <li>1. <b>Review site requirements specified in Appendix C</b></li> <li>2. Identify potential field experience using the guidelines below:             <ul style="list-style-type: none"> <li>• Site must satisfy all field experience site requirements (see Appendix C)</li> <li>• Site should meet your personal and professional goals</li> <li>• Sites must be within a 90-mile radius from your campus location (Indiana or Pittsburgh East)</li> <li>• Students may have a maximum of 2 sites during the 600-hour field experience</li> <li>• Students are permitted to do the field experience at their place of employment if the site meets all site requirements and involves master's level counseling work</li> </ul> </li> <li>3. Select your top choice as a field experience site and contact the site for an informal interview. Be prepared to convey information found in sample site letter via phone and/or email. You may also:             <ul style="list-style-type: none"> <li>• Provide a copy of the <i>Field Experience Handbook</i> &amp; your résumé to site personnel</li> <li>• State why you want to explore field experience opportunities at their site</li> <li>• Determine if the site can meet the field experience requirements</li> <li>• Determine if there is a mutual agreement for placement</li> <li>• Complete Appendix B (Student Documents)</li> <li>• Work with Site Supervisor to complete required site paperwork (Appendix C)</li> </ul> </li> </ol>
<p><b>Step 4:</b> <b>Submit Required Paperwork by Due Date</b></p> <p><small>(Be mindful not to renew too early prior to the paperwork deadline)</small></p>	<p><u>To the Field Experience Coordinator:</u></p> <ol style="list-style-type: none"> <li>1. Appendix B- Field Experience Student Documents (2 pages)</li> <li>2. Appendix C- Field Experience Site Documents (4 pages)</li> <li>3. Administrator Letter (if completing field experience at place of employment)</li> </ol> <p><u>Update Documents on the CastleBranch Clearance Management System (see renewal procedure on D2L):</u></p> <ol style="list-style-type: none"> <li>1. Required Clearances &amp; Protection of Minors Training</li> <li>2. TB Test (school students only)</li> <li>3. Renewed Liability Insurance (cannot lapse; update in a timely manner)</li> </ol> <p>Verify your required clearances and TB test on the CastleBranch system will be current for the duration of your entire field experience and will not expire during the field timeframe. Any documents that will expire during the field timeframe must be renewed by the specified due date. You must also renew your liability insurance in a timely manner so it remains current for the duration of the field experience. All renewal documents must be electronically submitted on the CastleBranch clearance management system. Call CastleBranch customer service (888-723-4263) if help is needed with the renewal.</p>
<p><b>Step 5:</b> <b>Field Experience Approval</b></p>	<p>Students are approved for field when the student qualifications and site qualifications are met. After all student and site materials are reviewed and found to meet eligibility requirements, you will receive an e-mail from the Field Experience Coordinator stating that you are approved for field experience.</p>
<p><b>Step 6:</b> <b>Field Registration</b></p>	<p>After receiving the field approval e-mail, you are then permitted to register for the <u>assigned</u> field experience class (COUN 755).</p>



## Sample Site Letter – CMHC

Customize the following letter to fit your specific field experience requirements/hours.

\_\_\_\_\_  
Date

Dear \_\_\_\_\_:

I am currently completing my master's degree in clinical mental health counseling at Indiana University of Pennsylvania (IUP). I am ready to take a culminating field experience course that facilitates the transition between my master's degree program and entry into the next phase of my career in the counseling profession. This course is intended to enhance my abilities to effectively offer counseling services to clients in a clinical mental health setting.

I am writing to see if there are opportunities at your agency to host me for this 600-hour counseling field experience that includes 240 hours of direct service. Within the 240 hours of direct service, a minimum of 75 hours must consist of individual and group counseling sessions with clients over the duration of the field experience. This includes a minimum of 10 individual counseling sessions and 4 ongoing group counseling sessions over the duration of the field experience.

The field experience would be under the direct supervision of an IUP faculty member who will provide weekly group supervision sessions over the course of this experience. I also need to have an assigned Site Supervisor at your agency who would provide one hour per week of individual and/or triadic supervision, which involves some examination and/or direct observation of my counseling abilities. I am including a copy of the IUP Field Experience Handbook that further outlines all other requirements for this experience.

I would appreciate your cooperation in allowing me to work with clients at your agency during the \_\_\_\_\_ semester(s). Please contact me to further discuss.

Thanks for considering this request,

\_\_\_\_\_  
Field Experience Student's Name

\_\_\_\_\_  
Phone Number and Email

## Sample Site Letter - SCHOOL

Customize the following letter to fit your specific field experience requirements/hours.

\_\_\_\_\_  
Date

Dear \_\_\_\_\_:

I am currently completing my master's degree in school counseling at Indiana University of Pennsylvania (IUP). I am ready to take a culminating field experience course that facilitates the transition between my master's degree program and entry into the next phase of my career in the counseling profession. This course is intended to enhance my abilities to effectively offer counseling services to students in a school setting.

I am writing to see if there are opportunities in your school district to host me for this 600-hour counseling field experience that involves 300 hours at the elementary level and 300 hours at the secondary level. For each 300-hour field placement, I would provide 120 hours of direct service and 180 hours of indirect service.

Within the required 120 hours of direct service with students, I need to provide:

- A minimum of 37.5 hours of individual & group counseling, with a minimum of ten individual counseling sessions, four on-going group counseling sessions, two guidance curriculum lessons, and systemic advocacy interventions.
- An opportunity to assist students with their academic, career, and personal/social development.

The field experience would be under the direct supervision of an IUP faculty member who will provide weekly group supervision sessions over the course of this experience. I also need to have an assigned Site Supervisor at each school who would provide one hour per week of individual and/or triadic supervision, which involves some examination and/or direct observation of my counseling abilities. I am including a copy of the IUP Field Experience Handbook that further outlines all other requirements for this experience.

I would appreciate your cooperation in allowing me to work with students at your school during the \_\_\_\_\_ semester(s). Please contact me to further discuss.

Thanks for considering this request,

\_\_\_\_\_  
Field Experience Student's Name

\_\_\_\_\_  
Phone Number and Email

# Field Experience Responsibilities

## A. Field Experience Coordinator's Responsibilities

- Conduct the Field Experience Orientation Meeting.
- Secure Appendices A, B, & C from students and create folders for the students.
- Verify student eligibility for field experience by reviewing the signed Field Experience Application Forms.
- Verify site has a current Affiliation Agreement with IUP or provide new affiliation agreement to the College Clinical Services Specialist who secures the authorized signature from the university.
- Review all submitted paperwork from the student and the site. Please Note: The Department of Counseling has the discretion to refuse a site or remove students from a site if necessary.
- Notify students of field experience approval after student & site qualifications are determined to be met.
- Assign students to appropriate field experience sections and advise them to register for their section.  
**The Field Experience coordinator will send each approved student specific registration instructions. Students may not register for field until they receive this e-mail.**
- Distribute approved student folders to Faculty Supervisors.

## B. Faculty Supervisor's Responsibilities

- Ensure completion of field experience student's forms.
- Send an introductory email or letter at the beginning of the semester to each site supervisor that includes faculty supervisor contact information.
- Arrange an initial phone/email orientation for each Site Supervisor.
- Conduct a site visit with each Site Supervisor and student during the semester.
- Conduct end of semester phone/email contact with each Site Supervisor and other contact as needed.
- Establish course guidelines and requirements.
- Provide an average of 1.5 hours per of week group supervision for field experience students.
- Verify that the students have proof of current professional liability insurance for the entire semester.

## C. Site Supervisor's Responsibilities

- Site supervisors must complete the required online IUP Site Supervisor training prior to the start of the semester (found at <https://www.iup.edu/counseling/site-supervisor-masters/index.html>).
- Agree to follow all the policies in this handbook including all the requirements listed in Appendix C.
- Oversee the field experience student's work for the purpose of facilitating personal and professional development and improving professional competence.
- Schedule with the student 1-hour weekly individual/triadic supervision at the site.
- Provide opportunities for a variety of master's level counseling duties for the field experience student, including opportunities for direct and indirect contact. The site is responsible for providing clients or students for the field experience. In no instance will IUP counseling students recruit their own clients (outside of the agency or school) for the field experience. Site advertisements for counseling services must be in accordance with the ACA Code of Ethics (ACA, 2014) and be approved in advance by the faculty supervisor and site supervisor. Advertisements for off-campus counseling services are not permitted to be displayed at any IUP facility.
- Arrange for an appropriate work area for the field experience student.

- Introduce the student to administration and staff with whom they will work.
- Maintain contact with the Faculty Supervisor, by speaking with him/her/them for orientation, at midterm site visit, at the end of the semester, and if any problematic situations arise.
- Engage in active counseling supervision such as critiquing field experience student counseling sessions and co-facilitating groups.
- Complete required university evaluation at the end of the semester (Appendix E) & review with student.
- Ensure that the student immediately notifies the Faculty Supervisor of any critical incidents that occur at the site.

#### **D. Field Experience Student's Responsibilities**

- Agree to follow all the policies and requirements contained in the Field Experience Handbook.
- Secure a site within a 90-mile radius of the campus location that meets all site requirements.
- Ensure Site Supervisor meets all supervisor qualifications as noted below:
  - **School Counseling Setting:** Site Supervisor has a minimum of a master's Degree in School Counseling; is currently certified as a school counselor by the PA Department of Education; has a minimum of three recent years of experience as a school counselor; is currently employed as a school counselor; and has the time and interest to supervise the field experience student.
  - **Clinical Mental Health Counseling Setting:** Site Supervisor has a minimum of a master's Degree in Counseling (or closely related clinical discipline); has a minimum of three recent years of post-master's counseling experience; is practicing in a clinician or clinical supervisor role; and has the time and interest to supervise the field experience student.
- **Electronically submit all required clearances by due date to the CastleBranch clearance management system.** See planning schedule for details. This includes ensuring that all clearances, protection of minors training, and TB test are current for the duration of the field experience and will not expire during the field timeframe. **This means that these documents must be valid until the last day of finals week at the end of the entire field experience.**
- **Students must electronically submit student and site paperwork by the specified due date to the field experience coordinator ([coun-field@iup.edu](mailto:coun-field@iup.edu)) and keep copies of all field paperwork.**
- Renew liability insurance so it remains current for duration of the field experience.
- Act professionally and ethically at all times.
- Work with the Site Supervisor to create the Field Experience Learning Contract (Appendix D).
- Request assistance from the Site and/or Faculty Supervisor as needed.
- Maintain accurate field experience logs and complete all course requirements.
- **Failure to meet the established deadlines will result in a delay in registration for field and/or inability to take the field experience in the desired semester.**
- **Failure to comply with the policies contained in this manual may result in removal from the field experience, referral to the Student Development Committee, a failing grade, other disciplinary action, and/or removal from the program.**

**Important Note:** Counselors in training must always demonstrate professionalism. This includes completing paperwork in a timely manner and submitting paperwork by specified due dates. To be eligible for the field experience(s), counseling students must follow all guidelines and procedures specified in this field handbook. The chart on the next page illustrates the process if the requirements are met or not met.

## Field Paperwork Due Dates & Professional Behavior

Counselors in training must always demonstrate professionalism. This includes completing paperwork in a timely manner and submitting paperwork by specified due dates. To be eligible for the field experience, counseling students must follow all guidelines and procedures specified in the field experience handbook. The chart below illustrates the process if these requirements are met or not met.

Requirement	If Met	If NOT Met
<p>Student must attend the mandatory field experience meeting (offered once a year).</p>	<p>Student is eligible for a seat in the field experience class.</p>	<p>Student must contact the field experience coordinator and arrange to make up the meeting and write a paper summarizing the information presented at the field meeting. A seat in the field experience class would only be offered on a space available basis. Seat is not guaranteed in the class.</p>
<p>Student must submit the required field experience paperwork and clearances by the specified due date. See field experience planning schedule.</p>	<p>Student remains eligible for a seat in the field experience class.</p>	<p>Student no longer has a guaranteed seat in the field experience class. A seat in the field experience class would only be offered on a space available basis. Student is not eligible for consideration for a seat in the class until all required paperwork and clearances are submitted.</p>
<p>If a site is not secured by the specified due date in the field experience planning schedule, the student must submit the minimum required paperwork and email the field experience coordinator with an update every three weeks until a site is secured, and paperwork is submitted.</p>	<p>Student remains eligible for a seat in the field experience class.</p>	<p>It will be assumed that the student will not be completing field experience and student will no longer have a guaranteed seat in the field experience class. A seat in the field experience class would only be offered on a space available basis. Student is not eligible for consideration for a seat in the class until all required paperwork is submitted.</p>

# Finishing the Field Experience

## **Field Experience Student Checklist**

Whether coming to the end of your 300-hour semester or 600-hour semester, certain paperwork must be completed.

- Ensure that your final log documents the necessary total on-site hours (minimum 300 or 600) as well as requirements for direct and indirect contact hours, etc.
- Complete the evaluation form: “Field Experience Student’s Self-Evaluation” (Appendix F).
- Consider writing a “thank you” letter to the Site Supervisor as well as her/his/their immediate supervisor.
- Complete the evaluation form “Field Experience Student’s Evaluation of Site Supervisor” (Appendix H) and submit to your Faculty Supervisor at the end of the semester. You also have the option to share the feedback with your site supervisor, but this is not required.
- Evaluate your Faculty Supervisor by completing the student evaluation instruments that are administered at the end of the semester.
- Ensure that your summative assignment is completed during the duration of your field experience. You are required to submit your summative assignment to your course instructor as well as post on LiveText.
- School counseling students should also consult the Department website and follow the procedures for pursuing the school counselor certification <https://www.iup.edu/counseling/students/index.html>.

## **Site Supervisor Checklist**

- Complete the “Site Supervisor’s Evaluation of Field Experience Student” (Appendix E).
- Review your final evaluation of the field experience student with her/him/them.
- Provide a signed copy of the evaluation (Appendix E) to the Faculty Supervisor. This feedback is critical in determining the field experience student’s final grade. A copy of your evaluation will be placed in the field experience student’s academic file.

## **Faculty Supervisor Checklist**

- Review the field experience student’s logs, evaluations, and quality of completed required coursework (including participation in group supervision).
- Ensure all course requirements have been met and assign final grade.
- Complete Faculty Supervisor’s Evaluation the field experience student (Appendix G).
- If requested, the Faculty Supervisor can take part in the student offering feedback to the Site Supervisor.
- If requested, the student may request to offer face-to-face feedback to the Faculty Supervisor.
- Deposit signed logs and completed Appendices E-H into the student’s file and return it to the Field Experience Coordinator at the end of the semester.

The Department of Counseling hopes you will have an excellent field experience and wishes you the best during the next step of your journey!

## **Appendices**

## Appendix A: Field Experience Application

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: C: \_\_\_\_\_

H: \_\_\_\_\_

W: \_\_\_\_\_

Student ID#: \_\_\_\_\_

E-mail: \_\_\_\_\_

Personal Pronoun: \_\_\_\_\_

Advisor Name: \_\_\_\_\_

Campus Location:  Indiana  Pittsburgh East

Program:  Clinical Mental Health Counseling  
 Pre-K-12 School Counseling  
 Licensure Only

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### General Field Information:

Semester(s) of Placement:  Summer 2024 (CMHC ONLY)  Fall 2024  Spring 2025

Plan for Field Hours:  600 in 1 semester (approximately 40 hours per week)  
 600 over 2 semesters (approximately 20 hours per week during each semester)  
 300 in 1 semester (approximately 20 hours per week)

---

### Application Check List:

\_\_\_\_\_ I have met with my advisor & attest that the field semester(s) requested are consistent with my plan of study. I also attest that I will have completed all the prerequisite courses for the field experience.

\_\_\_\_\_ I understand my approval for field experience is based on both my clearances/liability/TB test compliance and a site that meets all departmental requirements.

\_\_\_\_\_ I understand that deadline for all required field experience materials is \_\_\_\_\_.

---

Field Experience Student Signature

\_\_\_\_\_ Date

---

### Office Use Only:

Clearances and tests are in compliance.

YES  NO

Liability insurance is current.

YES  NO

Liability insurance will need to be renewed during the field experience.

YES  NO

---

Department Contact for Clearances Signature



## Appendix B: Field Experience Student Documents

### Field Experience Item Checklist

Name \_\_\_\_\_

The following items must be submitted to the Field Experience Coordinator by **the specified due date**. Please submit all items together as a complete packet. Complete the form below (place a ✓ next to the items you are submitting) and include this checklist as the first page of your completed field experience paperwork.

1.  Appendix B: Field Experience Student Documents (2 pages)
2.  Appendix C: Field Experience Site Documents (4 pages)
3.  Administrator Letter (if completing field experience at place of employment)

The above materials must be emailed to:

**Lorraine J. Guth, Ph.D., Field Experience Coordinator for Master's Degree Programs  
Department of Counseling**

Phone: 724-357-5509    E-mail: [coun-field@iup.edu](mailto:coun-field@iup.edu)

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- By the specified due date, I verify that I have obtained and submitted the required clearances and TB test so the documents will be current for the duration of my entire field experience and will not expire during the field timeframe.
- I also verify that my liability insurance is current and will expire on \_\_\_\_\_ (date).
- I agree to renew my liability insurance before the expiration date so it remains current during the duration of field experience.
- I will submit all renewals via the CastleBranch clearance management system.

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date

(Appendix B: Page 1)

## Appendix B: Field Experience Student Documents

### Field Experience Student Agreement

Please **INITIAL** boxes beside each statement indicating your agreement.

\_\_\_\_\_ I hereby attest that I have read, understand, and agree to follow the information contained in the Field Experience Handbook. I also understand that all forms in this document cannot be altered in any way.

\_\_\_\_\_ I hereby attest that I have read and understand the American Counseling Association Ethical Standards (all students) and American School Counselor Association Ethical Standards (school counseling students) and will practice my counseling in accordance with these Standards. Any breach of these ethics or any unethical behavior on my part will result in my removal from the field experience, a failing grade, other disciplinary action, and/or possible removal from the program. Unprofessional behavior and/or student performance issues may also result in my removal from the field experience, a failing grade, other disciplinary action, and/or possible removal from the program. Documentation of this behavior will also become part of my permanent record.

\_\_\_\_\_ I attest to the fact that I have purchased and will provide evidence of professional student liability insurance that is in full force for the entire duration of my field experience. I have verified that the minimum limits of this policy are \$1,000,000.00 per claim and an aggregate of \$3,000,000.00 per occurrence.

\_\_\_\_\_ I attest that I obtained and submitted the required clearances, protection of minors training, and TB test so the documents will be current for the duration of my entire field experience and will not expire during the field experience timeframe. I understand that will not be approved for field experience if I fail to comply with this Departmental policy.

\_\_\_\_\_ I attest that I have read the information contained in Sexual Discrimination/Sexual Misconduct Reporting and Resources as well as the Where to Turn For Help documents that can be accessed through the following link: <https://www.iup.edu/supportingstudents/where-to-turn-for-help.html>

\_\_\_\_\_ I agree to adhere to the administrative policies, rules, standards, and practices of the field experience site.

\_\_\_\_\_ I understand that my responsibilities include keeping my Faculty Supervisor informed regarding my field experiences.

\_\_\_\_\_ I understand that I will not be issued a passing grade in the field experience unless I demonstrate the specified minimal level of counseling skill, knowledge, and competence as well as complete all course requirements and required field experience hours.

\_\_\_\_\_ I agree that if I am still finalizing a field experience site and cannot submit Appendix C by the due date, I will provide justification on Appendix B that demonstrates that I am working to secure a site. I understand that I am responsible for updating the Field Experience Coordinator every three weeks via email regarding the status of the remaining paperwork submission. I understand that if I do not provide the update, it will be assumed that I will not be completing the field experience in the desired semester(s) and will not be permitted to register for the field experience class. I understand that my failure to do so could also result in referral to the Student Development Committee.

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date  
(Appendix B: Page 2)

## Appendix C: Field Experience Site Documents

### Site Information Sheet

**THE INFORMATION CONTAINED IN THIS APPENDIX DOES NOT SUPERSEDE THE OFFICIAL AFFILIATION AGREEMENT BETWEEN IUP AND THE SITE.**

Please type the information below as soon as a site is identified. The forms in this Appendix must be submitted by the specified due date prior to beginning the field experience.

Semester(s) for this Site:  Summer 2024 (CMHC ONLY)  Fall 2024  Spring 2025  
(Early Summer to Summer 2 Sessions)

Placement Site: \_\_\_\_\_

Placement Address: \_\_\_\_\_

School District

(If applicable): \_\_\_\_\_

Site Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Site Supervisor's E-mail: \_\_\_\_\_

Site Supervisor's Telephone: \_\_\_\_\_

Setting:  School  Agency  Other: \_\_\_\_\_

If school, check **all** grade levels at this site:

Pre-K   K   1   2   3   4   5   6   7   8   9   10   11   12

Field Experience Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ (home) \_\_\_\_\_ (cell)

Email: \_\_\_\_\_

Is this site your place of employment:  yes  no (If yes, you must submit a letter from administrator- see page 26)

### TO BE COMPLETED BY FACULTY

Date of site orientation contact \_\_\_\_\_ Notes:

Date of mid-semester site visit \_\_\_\_\_ Notes:

Date of end of semester contact \_\_\_\_\_ Notes:

**Note: School Counseling Students complete additional pages 20, 21, & 24**

**Note: Clinical Mental Health Counseling students complete additional pages 22, 23, & 24**

(Appendix C: Page 1)

**Appendix C: Field Experience Site Documents**  
**School Counseling - Checklist for Site**

**This checklist must be completed by the Site Supervisor. Please INITIAL each item below indicating agreement and provide verification signature at the bottom of the page.**

1. Site is an approved school by the Pennsylvania Department of Education. \_\_\_\_\_
2. Site Supervisor possesses a minimum of a master’s degree in school counseling and is a certified school counselor in the State of PA. \_\_\_\_\_
3. Site Supervisor has a minimum of three years of experience as a school counselor and is currently employed as a school counselor. \_\_\_\_\_
4. Site Supervisor agrees to provide a minimum of one hour of individual and/or triadic supervision per week and complete required evaluations of the student. \_\_\_\_\_
5. Site Supervisor will be present at the same physical location when the field experience student is at the placement. If the Site Supervisor needs to leave the physical location on rare occasions (less than 10% of field hours), then a qualified supervisor designee must be appointed to be at the site when student is there. This designee must have a master’s degree in school counseling, be certified as a school counselor, have a minimum of three years of experience as a school counselor, and be currently employed as a school counselor. The designee information must be reported to the Faculty Supervisor. \_\_\_\_\_
6. If a site requires a student to provide off-site services (e.g. home visit), the site will ensure the student is accompanied by the Site Supervisor or qualified supervisor designee (master’s degree in school counseling, certified as a school counselor, minimum of three years of experience as a school counselor, and currently employed as a school counselor). The designee information must be reported to the Faculty Supervisor. The site will also provide student with appropriate training, safety measures, and supervision for these duties. \_\_\_\_\_
7. If a site requires a student to provide telehealth services, the site will ensure the Site Supervisor is remotely available to the student while the sessions are occurring. The site will provide student with appropriate training, safety measures, & supervision for these duties. \_\_\_\_\_
8. Site Supervisor agrees to follow all requirements and policies specified in the field experience handbook. This includes ensuring that the field experience student immediately reports any critical incidents that occur at the site to the Faculty Supervisor. \_\_\_\_\_
9. a. Site will permit session recording (audio/video) for supervision at IUP, **OR** \_\_\_\_\_  
 b. Site will permit on-site observation by Faculty Supervisor. \_\_\_\_\_
10. Site agrees to provide a variety of training experiences consistent with regular duties of master’s level school counselors to include a minimum of 120/300 or 240/600 hours in direct service. Within the 120 hours of direct service at each level (elementary, secondary), a minimum of 37.5 hours must consist of individual and group counseling sessions with students. This includes a minimum of 10 individual counseling sessions, 4 ongoing group counseling sessions, 2 school counseling classroom core curriculum lessons, & systemic advocacy interventions at each level. \_\_\_\_\_
11. If the field experience site is also the student’s place of employment, then the student’s administrator will also sign below and provide a letter indicating approval of the field experience and including other requirements of the administrator letter (see p. 26 of this manual). \_\_\_\_\_

\_\_\_\_\_  
 Site Supervisor Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 School Administrator Signature  
 (if site is place of employment)

\_\_\_\_\_  
 Date

**Appendix C: Field Experience Site Documents**  
**School Counseling - Site Supervisor Qualifications Form**

***Note: This page should be completed by the Site Supervisor.***

In preparation of my supervision of this field experience student, I have read, understand, and agree to follow the ACA Code of Ethics, including but not limited to Section F: Supervision, Training, & Teaching ([www.counseling.org](http://www.counseling.org)), the ASCA Code of Ethics ([www.schoolcounselor.org](http://www.schoolcounselor.org)), the Pennsylvania Code of Professional Practice and Conduct for Educators (<http://www.pacode.com/secure/data/022/chapter235/chap235toc.html>). I also agree to complete the required online IUP Site Supervisor training prior to the start of the semester (found at <https://www.iup.edu/counseling/site-supervisor-masters/index.html>).

**Yes**       **No**

Have you ever had ethical violations or disciplinary action taken against you in your role as a counselor during the past five years?

**Yes**       **No**

If yes, please explain:

I verify that all information reported in this document is correct to the best of my knowledge. If any information is found to be untrue, the IUP Department of Counseling has the right to remove a student from the field experience. This could also jeopardize future field placements.

\_\_\_\_\_  
Site Supervisor Signature

\_\_\_\_\_  
Date

(Appendix C: Page 3)

**Appendix C: Field Experience Site Documents**  
**Clinical Mental Health Counseling – Checklist for Site**

**This checklist must be completed by the Site Supervisor. Please INITIAL each item below indicating agreement and provide verification signature at the bottom of the page**

1. Site Supervisor possesses a minimum of a master's Degree in Counseling or a closely related clinical discipline (e.g. clinical social work or counseling/clinical psychology). \_\_\_\_\_
2. Site Supervisor has a minimum of three years of recent post-master's counseling experience and is practicing in a clinician or clinical supervisor role. \_\_\_\_\_
3. Site Supervisor agrees to provide a minimum of one hour of individual and/or triadic supervision per week and complete required evaluations of the student. \_\_\_\_\_
4. Site Supervisor will be present at the same physical location when the field experience student is at the placement. If the site supervisor needs to leave the physical location on rare occasions (less than 10% of field hours), then a qualified supervisor designee must be appointed to be at the site when student is there. This designee must have a master's Degree in counseling or closely related clinical discipline, three years of post-master's Degree counseling experience, and is practicing in a clinician or clinical supervisor role. The designee information must be reported to the Faculty Supervisor. \_\_\_\_\_
5. If a site requires a student to provide off-site services (e.g. home-based counseling), the site will ensure the student is accompanied by the Site Supervisor or a qualified supervisor designee (master's Degree in counseling or closely related clinical discipline, three years of post-master's Degree counseling experience, and is practicing in a clinician or clinical supervisor role.). The designee information must be reported to the Faculty Supervisor. The site will also provide the student with appropriate training, safety measures, and supervision for these duties. \_\_\_\_\_
6. If a site requires a student to provide telehealth services, the site will ensure the Site Supervisor is remotely available to the student while the sessions are occurring. The site will provide student with appropriate training, safety measures, & supervision for these duties. \_\_\_\_\_
7. Site Supervisor agrees to follow all requirements and policies specified in the field experience handbook. This includes ensuring that the field experience student immediately reports any critical incidents that occur at the site to the Faculty Supervisor. \_\_\_\_\_
8. a. Site will permit session taping (audio/video) for supervision at IUP, **OR** \_\_\_\_\_  
b. Site will permit on-site observation by Faculty Supervisor. \_\_\_\_\_
9. Site agrees to provide a variety of training experiences consistent with the regular duties of master's level clinical mental health counselors to include a minimum of 120/300 or 240/600 hours in direct service. Within the 240 hours of direct service, a minimum of 75 hours must consist of individual and group counseling sessions with clients over the duration of the field experience. This includes a minimum of 10 individual counseling sessions and 4 ongoing group counseling sessions over the duration of the field experience. \_\_\_\_\_
10. If the field experience site is also the student's place of employment, then the student's administrator will also sign below and provide a letter indicating approval of the field experience and including other requirements of the administrator letter (see p. 26 of this manual). \_\_\_\_\_

\_\_\_\_\_  
Site Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agency Administrator Signature  
(if site is place of employment)

\_\_\_\_\_  
Date

(Appendix C: Page 2)

**Appendix C: Field Experience Site Documents**  
**Clinical Mental Health Counseling - Site Supervisor Qualifications Form**

***Note: This page should be completed by the Site Supervisor.***

I have read, understand, and agree to follow the ACA Code of Ethics, including but not limited to Section F: Supervision, Training, and Teaching ([www.counseling.org](http://www.counseling.org)) and Chapter 49 of the Pennsylvania Code: State Board of Social Workers, Marriage and Family Therapists and Professional Counselors and Professional Counselors-Licensure of Professional Counselors (<http://www.pacode.com/secure/data/049/chapter49/chap49toc.html>). I also agree to complete the required online IUP Site Supervisor training prior to the start of the semester (found at <https://www.iup.edu/counseling/site-supervisor-masters/index.html>).

**Yes**       **No**

Have you ever had ethical violations or disciplinary action taken against you in your role as a counselor during the past five years?

**Yes**       **No**

If yes, please explain:

I verify that all information reported in this document is correct to the best of my knowledge. If any information is found to be untrue, the IUP Department of Counseling has the right to remove a student from the field experience. This could also jeopardize future field placements.

\_\_\_\_\_  
Site Supervisor Signature

\_\_\_\_\_  
Date

(Appendix C: Page 3)

## Appendix C: Field Experience Site Documents

### Affiliation Agreement Form

### Department of Counseling

**This form is to be completed and submitted for all potential field experience sites.**  
Please see procedure on next page.

**Student Name:** \_\_\_\_\_

**Program:**  MA (Clinical Mental Health)  M. Ed (School)

**School District/Agency Site:** \_\_\_\_\_

I checked the Master List of Fully Executed Agreements and there is a valid affiliation agreement for the site listed above:  YES  NO

If YES, list the agreement expiration date \_\_\_\_\_

**If no current Affiliation Agreement exists or the agreement will expire before the end of the field experience, IUP will contact the site to request a new Affiliation Agreement. Please provide additional site information below:**

**Site Contact Name:** \_\_\_\_\_

(i.e. Superintendent, Agency Director, or other person who has signature authority for the site; this is usually NOT the site supervisor)

**Site Contact Title:** \_\_\_\_\_

**Site Contact E-Mail:** \_\_\_\_\_

**Site Address:** \_\_\_\_\_

**Site Phone Number:** \_\_\_\_\_

#### **FOR OFFICE USE ONLY**

AA current on wiki?  YES  NO

If **YES**, AA is dated \_\_\_\_\_

If **NO**, AA request submitted on \_\_\_\_\_

AA approved on \_\_\_\_\_

\_\_\_\_\_  
Field Experience Coordinator Signature

(Appendix C: Page 4)



## Procedure for Requesting & Obtaining Affiliation Agreements

1. Students will identify a field site that meets the Department of Counseling requirements.
  - Students access Field Experience IWIKI at <https://iwiki.iup.edu/spacedirectory/view.action> (type or copy this link in web browser)
  - Note: To access this page you must login with your IUP Username and Password
  - Click on Internship Agreements Field Experiences
  - Click on Documents
  - Then click on Excel Spreadsheet with Fully Executed Agreements
  - Click on the Excel spreadsheet to open
  - Download the file by clicking on the “Download” arrow in the upper right-hand corner
  - In the Excel file, scroll down until you get to the COEC agreements
  - See if your identified site has an Affiliation Agreement (AA) and is categorized in either **COEC COUN** or **COEC EPP**. If yes, also note the AA expiration date on the list. Other categories such as EDSP & EDEX do **not** apply to Counseling Field Experience sites
2. Complete Affiliation Agreement Form (Appendix C: Page 4)
  - A. If there is a current AA that will NOT expire before the end of the field experience, complete the first part of the Affiliation Agreement Form
  - B. If there is no AA or the current AA will expire before the end of the field experience, complete **both parts** of the Affiliation Agreement Form

Students should identify the person at the school district or agency that has the authority to sign the AA. For schools this is typically the **District Superintendent**. For agencies this is typically the **Agency Director**. **This is usually not your site supervisor**. Students should obtain the needed contact information for this person and site.

**Please note:** Affiliation agreements are valid for five years and are designed to cover an entire school district or agency (rather than a single location).

3. IUP Process for Obtaining the Affiliation Agreement
  - If it is determined that an AA is needed, the Department of Counseling practicum/field coordinator will work with key personnel at IUP to send an AA to the site.
  - After the site returns a signed agreement, the AA will be processed at IUP. The fully executed agreement will then be mailed to the contact person at the site.

### **Administrator Letter Requirements & Sample**

An Administrator Letter is required if field experience is at the student's place of employment and must be completed by an administrator who can sign on behalf of the school/organization/agency. This letter must contain:

- Acknowledgment that the field experience student will be completing master's level counseling work during field experience hours.
- Acknowledgment that the student will be completing field experience work in at least two-hour increments of time (field experience work for the week still must total 20 hours [300-hour field experience] or 40 hours [600-hour field experience]).

Please see the example provided below.

Dear Dr. Guth,

I am writing this letter in support of John Smith doing his field experience with The Site, which is also his place of employment. For his field experience, he will be providing master's level counseling services in at least two-hour blocks of time. In this master's level position, John will be providing individual counseling, group counseling, intakes, and assessment services. He will have the opportunity to accrue the required direct and indirect hours for this field experience. Please contact me with any questions.

Thank you,

Jane Jones  
Administrator

## **Appendix D: Learning Contract**

### **School Counseling**

This Learning Contract establishes the activities in which the field experience student will engage during his/her/their placement in your School Counseling office. Goals are listed under each section heading below, based on the ASCA National Model. As these activities influence the Field Experience Evaluation, they should be specified in behavioral terms to make it clear for the Site Supervisor and student to plan and assess. Space is provided for several activities under each goal area, though the exact number will be determined in a collaborative effort between the Site Supervisor and field experience student. The learning contract should include duties for field experience students to accrue the **120 direct contact hours** for a 300-hour field experience or **240 direct contact hours** for a 600-hour field experience. \*Highlight one or more activities below that will use school data to drive and evaluate at least a portion of your work.

#### **A. Academic Development**

The field experience student will enhance the academic development of students within the school site.

- 1.
- 2.
- 3.

#### **B. Career Development**

The field experience student will assist students with their career development.

- 1.
- 2.
- 3.

#### **C. Social/Emotional Development**

The field experience student will support students with their social & emotional development

- 1.
- 2.
- 3.

#### **D. Individual and Group Counseling**

The field experience student will conduct individual and group counseling with students for a minimum of 37.5 hours at each level (elementary, secondary) including:

A minimum of ten hours of individual counseling

- 1.
- 2.
- 3.

And a minimum of four on-going group counseling sessions.

- 1.
- 2.

And a minimum of two classroom core curriculum lessons.

- 1.
- 2.

*Please note that the individual and group counseling requirements may overlap with the objectives for the academic, career, and/or the personal social development of students.*

**E. Other**

The activities listed below are additional learning activities, which the field experience student must address:

Consultation: The student must be consult with other members of the school staff (e.g., teachers, SAP teams) as well as parents and community members/agencies.

- 1.
- 2.

System Advocacy: The student must provide systemic advocacy interventions.

- 1.
- 2.

Other activities specific to site/ field experience student:

- 1.
- 2.

---

**Site Supervisor Signature**

---

**Date**

---

**Field Experience Student Signature**

---

**Date**

---

**Faculty Supervisor Signature**

---

**Date**

## **Appendix D: Learning Contract Clinical Mental Health Counseling**

This Learning Contract establishes the goals and activities in which the field experience student will engage during his/her/their placement. As these activities will influence the Field Experience Evaluation, they should be specified in behavioral terms to make it clear for the Site Supervisor and student to assess. Space is provided for several activities under each goal area, though the exact nature and number will be determined in a collaborative effort between the Site Supervisor and field experience student. The learning contract should include duties for field experience students to accrue the **120 direct contact hours** for a 300-hour field experience or **240 direct contact hours** for a 600-hour field experience.

### **A. Counseling Skill Development**

The field experience student will conduct individual and group counseling to clients for a minimum of 75 hours over the duration of the field experience, including

A minimum of ten hours of individual counseling

1.

2.

3.

And a minimum of four on-going group counseling sessions

1.

2.

3.

### **B. Assessment/Diagnosis**

1.

2.

3.

**C. Clinical Knowledge**

The field experience student will acquire knowledge and training in specific population issues related to clients served at this site.

- 1.
- 2.

**D. Therapeutic Interventions (Other)**

- 1.
- 2.

**E. Other** The activities listed below are additional learning areas for the field experience student.

Case Conference Presentation: The student will perform a case conference presentation.

- 1.
- 2.

Consultation: The student will consult with other members of the agency staff and from other clinical mental health agencies.

- 1.
- 2.

Additional activities specific to site/field experience student such as systemic advocacy, social justice, or other relevant duties.

- 1.
- 2.

---

**Site Supervisor Signature**

---

**Date**

---

**Field Experience Student Signature**

---

**Date**

---

**Faculty Supervisor Signature**

---

**Date**

## Appendix E: Site Supervisor's Evaluation of Field Experience Student Fulfillment of School Counseling Learning Contract

Directions: As SITE SUPERVISOR, please complete this form in triplicate.  
Copies go to: (1) field experience student; (2) Faculty Supervisor; and (3) for your records.

The areas and specific activities listed below should be taken from the Field Experience Learning Contract. You may choose to attach a copy of the contract and provide your assessment directly on it. Please rate the field experience student on the activities using the following scale.

- A – Functions extremely well and/or independently.
- B – Functions adequately and/or requires occasional supervision.
- C – Functions minimally and/or requires close supervision in this area.
- F – Functions poorly and/or unresponsive to supervision.
- NA – Not applicable to this training experience.

Field Experience Student: \_\_\_\_\_

Site Supervisor: \_\_\_\_\_

### Learning Contract Activities

**Rating**

**A. Academic Development Activities**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.
- \_\_\_\_\_ 3.

**B. Career Development Activities**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.
- \_\_\_\_\_ 3.

**C. Social/Emotional Development Activities**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.
- \_\_\_\_\_ 3.

**D. Individual and Group Counseling**

**Individual Counseling**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.
- \_\_\_\_\_ 3.

**Group Counseling**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**E. School Counseling Classroom Core Curriculum**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**F. Other Activities**

**Consultation**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**Systemic Advocacy Interventions**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**Other Specific Activities**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**Professional Behavior and General Supervision (Please Comment)**

\_\_\_\_\_

**Additional Comments**

**What grade do you recommend for this student? (Please Check One of the Following)**

A

B

C

F

Incomplete to Finish Hours

\_\_\_\_\_  
Site Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_ *I have had the opportunity to review this evaluation.*

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date



## **Appendix E: Site Supervisor's Evaluation of Field Experience Student Fulfillment of Clinical Mental Health Counseling Learning Contract**

Directions: As SITE SUPERVISOR, please complete this form in triplicate.

Copies go to: (1) 1 field experience student; (2) Faculty Supervisor; and (3) for your records.

The areas and specific activities listed below should be taken from the Field Experience Learning Contract. You may choose to attach a copy of the contract and provide your assessment directly on it. Please rate the field experience student on the activities using the following scale.

A – Functions extremely well and/or independently.

B – Functions adequately and/or requires occasional supervision.

C – Functions minimally and/or requires close supervision in this area.

F – Functions poorly and/or unresponsive to supervision.

NA – Not applicable to this training experience.

Field Experience Student: \_\_\_\_\_

Site Supervisor: \_\_\_\_\_

### **Learning Contract Activities**

#### **Rating**

#### **A. Counseling Skill Development**

##### **Individual Counseling**

1.

\_\_\_\_\_

2.

\_\_\_\_\_

3.

\_\_\_\_\_

##### **Group Counseling**

1.

\_\_\_\_\_

2.

\_\_\_\_\_

3.

\_\_\_\_\_

#### **B. Assessment/Diagnosis**

1.

\_\_\_\_\_

2.

\_\_\_\_\_

3.

\_\_\_\_\_

#### **C. Clinical Knowledge**

1.

\_\_\_\_\_

2.

\_\_\_\_\_

**D. Therapeutic Interventions (Other)**

\_\_\_\_\_ 1.

\_\_\_\_\_ 2.

**E. Other Activities**

**Case Conference Presentation**

\_\_\_\_\_ 1.

\_\_\_\_\_ 2.

**Consultation**

\_\_\_\_\_ 1.

\_\_\_\_\_ 2.

**Other Activities Specific to Site/Field Experience Student**

\_\_\_\_\_ 1.

\_\_\_\_\_ 2.

**Professional Behavior and General Supervision (Please Comment)**

\_\_\_\_\_

**Additional Comments**

**What grade do you recommend for this student? (Please Check One of the Following)**

A

B

C

F

Incomplete to Finish Hours

\_\_\_\_\_  
Site Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_ *I have had the opportunity to review this evaluation.*

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date

## Appendix F: Field Experience Student's Self-Evaluation Fulfillment of School Counseling Learning Contract

Directions: As FIELD EXPERIENCE STUDENT, please complete this form in duplicate.  
Copies go to: (1) field experience student; (2) Faculty Supervisor.

The areas and specific activities listed below should be taken from the Field Experience Learning Contract. You may choose to attach a copy of the contract and provide your assessment directly on it. Please rate yourself on the activities using the following scale.

- A – Functions extremely well and/or independently.
- B – Functions adequately and/or requires occasional supervision.
- C – Functions minimally and/or requires close supervision in this area.
- F – Functions poorly and/or unresponsive to supervision.
- NA – Not applicable to this training experience.

Field Experience Student: \_\_\_\_\_

Site Supervisor: \_\_\_\_\_

### Learning Contract Activities

**Rating**

**A. Academic Development Activities**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.
- \_\_\_\_\_ 3.

**B. Career Development Activities**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.
- \_\_\_\_\_ 3.

**C. Social/Emotional Development Activities**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.
- \_\_\_\_\_ 3.

**D. Individual and Group Counseling**

**Individual Counseling**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.
- \_\_\_\_\_ 3.

**Group Counseling**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**E. School Counseling Classroom Core Curriculum**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**F. Other Activities**

**Consultation**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**Systemic Advocacy Interventions**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**Other Specific Activities**

- \_\_\_\_\_ 1.
- \_\_\_\_\_ 2.

**Professional Behavior and General Supervision (Please Comment)**

\_\_\_\_\_

**Additional Comments**

**What grade do you believe you earned for this semester's field experience?(Please Check One of the Following)**

A

B

C

F

Incomplete to Finish Hours

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date

## **Appendix F: Field Experience Student's Self-Evaluation Fulfillment of Clinical Mental Health Counseling Learning Contract**

Directions: As FIELD EXPERIENCE STUDENT, please complete this form in duplicate.  
Copies go to: (1) field experience student; (2) Faculty Supervisor.

The areas and specific activities listed below should be taken from the Field Experience Learning Contract. You may choose to attach a copy of the contract and provide your assessment directly on it. Please rate yourself on the activities using the following scale.

- A – Functions extremely well and/or independently.
- B – Functions adequately and/or requires occasional supervision.
- C – Functions minimally and/or requires close supervision in this area.
- F – Functions poorly and/or unresponsive to supervision.
- NA – Not applicable to this training experience.

Field Experience Student: \_\_\_\_\_

Site Supervisor: \_\_\_\_\_

### **Learning Contract Activities**

**Rating**

**A. Counseling Skill Development**

**Individual Counseling**

1.

\_\_\_\_\_

2.

\_\_\_\_\_

3.

\_\_\_\_\_

**Group Counseling**

1.

\_\_\_\_\_

2.

\_\_\_\_\_

3.

\_\_\_\_\_

**B. Assessment/Diagnosis**

1.

\_\_\_\_\_

2.

\_\_\_\_\_

3.

\_\_\_\_\_

**C. Clinical Knowledge**

1.

\_\_\_\_\_

2.

\_\_\_\_\_

**D. Therapeutic Interventions (Other)**

1.  
\_\_\_\_\_

2.  
\_\_\_\_\_

**E. Other Activities**

**Case Conference Presentation**

1.  
\_\_\_\_\_

2.  
\_\_\_\_\_

**Consultation**

1.  
\_\_\_\_\_

2.  
\_\_\_\_\_

**Other Activities Specific to Site/Field Experience Student**

1.  
\_\_\_\_\_

2.  
\_\_\_\_\_

**Professional Behavior and General Supervision (Please Comment)**

**Additional Comments**

**What grade do you believe you earned for this semester's field experience?(Please Check One of the Following)**

A

B

C

F

Incomplete to Finish Hours

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date

## Appendix G: Faculty Supervisor's Evaluation of Field Experience Student

Field Experience Student: \_\_\_\_\_

Site Supervisor: \_\_\_\_\_

Faculty Supervisor: \_\_\_\_\_

Directions: As FACULTY SUPERVISOR, please complete this form in duplicate.  
Copies go to: (1) field experience student and into (2) field experience student file.

The areas and specific activities listed below should be taken from the overall semester. Please rate the field experience student on the activities using the following scale.

A – Functions extremely well and/or independently.

B – Functions adequately and/or requires occasional supervision.

C – Functions minimally and/or requires close supervision in this area.

F – Functions poorly and/or unresponsive to supervision.

NA – Not applicable to this training experience.

### Rating

\_\_\_\_\_ **Professionalism**

Comments:

\_\_\_\_\_ **Conceptualization**

Comments:

\_\_\_\_\_ **Development of Counseling Skills**

Comments:

### **Other Evaluative Feedback**

#### Faculty Supervisor Evaluation Grade (Please Check One of the Following)

A

B

C

F

Incomplete to Finish Hours

\_\_\_\_\_  
Faculty Supervisor signature

\_\_\_\_\_  
Date

\_\_\_\_\_ *I have had the opportunity to review this evaluation.*

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date

## Appendix H: Field Experience Student's Evaluation of Site Supervisor

This evaluation is to be completed at the end of the semester and submitted to your Faculty Supervisor. It is optional to share a copy of this evaluation with the Site Supervisor.

Name of Site Supervisor: \_\_\_\_\_

Period Covered: \_\_\_\_\_ to \_\_\_\_\_

Directions: Check the number that best represents your evaluation of the Site Supervisor.

	Poor		Satisfactory		Exceptional		N/A
	1	2	3	4	5	6	0
1. Gives time and energy in discussing cases.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Recognizes and encourages further development of my strengths and capabilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Provides useful feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Provides the freedom to develop flexible and effective counseling styles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is spontaneous and flexible in supervisory sessions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Helps me to define and achieve specific, goals for the client and myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Encourages and listens to my ideas and suggestions for developing my counseling skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Helps me define and maintain ethical and professional behavior.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Maintains confidentiality in material discussed in supervisory sessions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Deals with both content and affect when supervising.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Offers resource information when needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Explains his/her/their criteria for evaluation clearly and applies it fairly when evaluating my counseling performance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Additional Comments and/or Suggestions:**

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date



## Appendix I: Field Experience Log Sample

(School Counseling)

\*\* Field experience students are required to document field experience hours. Please go to the D2L *Field Experience Information and Materials* website to obtain and use the appropriate electronic log (clinical mental health or school). At the end of each month you are to print the page and submit to the Faculty Supervisor after obtaining required signatures.

Activity	Week 1	Week 2	Week 3	Week 4	Totals
	From: To:	From: To:	From: To:	From: To:	
Individual Counseling (including career, academic & social/emotional)					
Group Counseling (including career, academic & social/emotional)					
School Counseling Classroom Core Curriculum Lessons					
Testing: Administration and Interpretation					
Other Direct					
Indirect hours (e.g. paperwork, observations, meetings, consultation, etc.)					
Individual/Triadic Supervision					
Group Supervision					
Total					

<b>Monthly Totals</b>	Direct	
	Nondirect	
	Supervision	
	Direct Individual/Group	
<b>Semester Totals To Date</b>	Direct	
	Nondirect	
	Supervision	
	Direct Individual/Group	
	TOTAL HRS	

As the field experience student, my signature below verifies that I completed these hours **AND** during this time, I maintained current liability insurance and clearances in accordance with the IUP Department of Counseling policy.

**Field Experience Student's Signature:** \_\_\_\_\_

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

**Site Supervisor's Signature:** \_\_\_\_\_

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

**Appendix I: Field Experience Log Sample**  
(Clinical Mental Health Counseling)

\*\* Field experience students are required to document field experience hours. Please go to the D2L *Field Experience Information and Materials* website to obtain and use the appropriate electronic log (clinical mental health or school). At the end of each month you are to print the page and submit to the Faculty Supervisor after obtaining required signatures.

<b>Student Name and Site:</b>					
<b>Clinical Mental Health Counseling Log</b>					
<b>Activity</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 4</b>	<b>Totals</b>
	<b>From: To:</b>	<b>From: To:</b>	<b>From: To:</b>	<b>From: To:</b>	
Individual Counseling (including intakes)					
Group Counseling					
Family Counseling					
Couples Counseling					
Mental Status or Other Assessment/Interpretation					
Other Direct					
Indirect hours (e.g., assessment, observation, consultation, paperwork, meetings, etc.)					
Individual Supervision					
Group Supervision					
<b>Total</b>					
<b>Monthly Totals</b>	<b>Direct</b>				
	<b>Nondirect</b>				
	<b>Supervision</b>				
<b>Semester Totals To Date</b>	<b>Individual/Group</b>				
	<b>Direct</b>				
	<b>Nondirect</b>				
	<b>Supervision</b>				
	<b>Direct</b>				
	<b>Individual/Group</b>				
	<b>TOTAL HRS</b>				

As the field experience student, my signature below verifies that I completed these hours **AND** during this time, I maintained current liability insurance and clearances in accordance with the IUP Department of Counseling policy.

**Field Experience Student's Signature:** \_\_\_\_\_

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

**Site Supervisor's Signature:** \_\_\_\_\_

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

**Appendix J: Clearance Policy**  
**Policies and Procedures Regarding Professional Liability Insurance and Clearances**  
**Department of Counseling**  
Revised January 20, 2022

**CastleBranch Clearance Management System**

All counseling students must obtain the required clearances and liability insurance as specified in this policy. All documents must then be uploaded to the CastleBranch system. See instructions at the end of this policy for account setup.

***New Student Clearance Requirements – Initial CastleBranch Package***

After admission and between July 1 – August 15\*, all students must obtain all required clearances and upload the documents to the CastleBranch system. Note that the documents must be dated within this timeframe and must not be obtained prior to July 1.

***Continuing Student Clearance Requirements – Renewal CastleBranch Package***

Between July 1 – August 15\*, all continuing students must renew all required clearances and upload the documents to the CastleBranch system. Note that the documents must be dated within this timeframe and must not be obtained prior to July 1.

**Professional Liability Insurance and Clearances Required by Program**

***Clinical Mental Health Counseling/Counselor Education and Supervision:***

Professional Liability Insurance (\$1 million per claim/\$3 million per occurrence coverage)

Federal Fingerprinting Clearance (DHS), within the last 5 years

Protection of Minors Training, less than one year old

Act 34: Pennsylvania Access to Criminal History (PATCH) Clearance, less than one year old

Act 151: Child Abuse Clearance, less than one year old

***School Counseling***

Professional Liability Insurance (\$1 million per claim/\$3 million per occurrence coverage)

Act 24: Arrest/Conviction Report and Certification Form

Act 34: Pennsylvania Access to Criminal History (PATCH) Clearance, less than one year old

Act 151: Child Abuse Clearance, less than one year old

Act 114: Federal Fingerprinting Clearance (PDE), within the last 5 years

Act 126: Child Abuse Recognition and Reporting Act (Protection of Minors), less than one year old

TB test, less than one year old (school districts may require shorter time periods at practicum or field placement)

**Policies and Procedures for Obtaining Liability Insurance and Clearances**

**Obtaining Liability Insurance**

All students must obtain professional liability insurance and submit the proof of the insurance policy.

Liability insurance may be purchased through any appropriate insurance carrier. **Liability insurance limits of 1 million: 3 million are required by the university.** Two options often used by counseling students include:

1. HPSO Professional Liability Insurance

1-800-982-9491

<http://www.hpso.com>

Approximately \$37.00 per year for students

2. You may also join the American Counseling Association at [www.counseling.org](http://www.counseling.org). Student members receive professional liability insurance through HPSO as part of their membership.

**Obtaining Clearances**

1. PA Criminal Record Check – This is included in the CastleBranch fee and they will obtain.
2. PA Child Abuse History Clearance – May be done online at <https://www.compass.state.pa.us/CWIS>. This clearance is free for students.



## Appendix K: Request to Extend Field Experience

Indiana University of Pennsylvania – Department of Counseling

### **Field Experience Student:**

I, \_\_\_\_\_, am requesting to extend my field experience from \_\_\_\_\_ to \_\_\_\_\_  
(Student name) (Date)  
\_\_\_\_\_ for the purpose of client continuity of care or due to other extenuating circumstances. I  
(Date)  
understand that my course grade is based on my performance and will be evaluated by my faculty supervisor in  
consultation with my faculty supervisor designee (if applicable) and site supervisor.

\_\_\_\_\_  
Field Experience Student Signature

\_\_\_\_\_  
Date

---

### **Site Supervisor:**

I, \_\_\_\_\_, approve the field experience extensions for client continuity of care or  
(Site Supervisor)  
other extenuating circumstances and agree to provide one hour a week of supervision during this time.

\_\_\_\_\_  
Site Supervisor Signature

\_\_\_\_\_  
Date

---

### **Assigned Faculty Supervisor:**

I, \_\_\_\_\_, approve the Field Experience extension for client continuity of care or  
(Assigned Faculty Supervisor)  
other extenuating circumstances. I agree to issue an "L" grade since the student's work is expected to extend  
beyond the given semester. I also agree to change the "L" grade to a course grade. I have arranged for  
\_\_\_\_\_ to be the faculty supervisor designee during this time. This person will be the faculty  
(Faculty Supervisor Designee)  
contact available during this time if crisis or other issues arise. He/she can be reached at:  
\_\_\_\_\_ or \_\_\_\_\_.  
(Phone Number) (Email)

\_\_\_\_\_  
Assigned Faculty Supervisor Signature

\_\_\_\_\_  
Date

---

### **Faculty Supervisor Designee (if applicable):**

I, \_\_\_\_\_, agree to be available for crisis or other critical issues that arise and  
(Faculty Supervisor Designee)  
will consult with the faculty supervisor for grade conversion.

\_\_\_\_\_  
Faculty Supervisor Designee Signature

\_\_\_\_\_  
Date

---

Assigned faculty supervisor must make copies of this completed form and must distribute a copy to the Field Experience Student, Site Supervisor, Assigned Faculty Supervisor, Faculty Supervisor Designee (if applicable), and the Field Experience Coordinator.

Indiana University of Pennsylvania  
**Critical Incident Response: Sequence Documentation Policy**

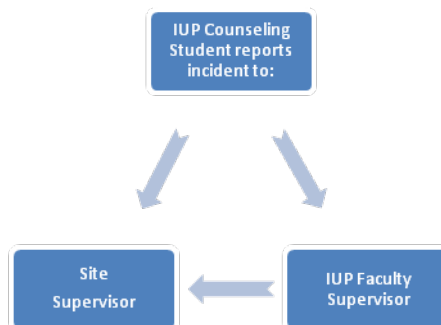
**Directions:** Critical incidents may arise at practicum and field experience sites. A critical incident is a situation that causes or has the potential to cause harm to an individual or group within the practicum or field experience setting. The critical incident requires an immediate response in order to assess and/or address the potential consequences of the incident. Some examples of critical incidents include but are not limited to: alarming behavior including student/client suicidal or homicidal indications; death of a student/client; injuries/accidents requiring medical attention; injury to student/client, IUP counseling student, or team member when on site; or any other crisis issues that occur in the practicum/field experience site. When critical incidents arise that directly involve the IUP counseling student, the policy below must be followed. The Critical Incident Response: Sequence Documentation Form must be completed within 48 hours of the incident, unless otherwise required by the faculty/site supervisors involved. An IUP student who does not comply with this policy will result in referral to the Student Development Committee.

**If a critical incident occurs at a practicum or field experience site that directly involves the IUP counseling student, the following steps must be taken.**

**Step 1:** In consultation with the IUP Faculty Supervisor, the IUP counseling student must follow the school or agency policies to deal with the critical incident. The assumption is that the school/agency and site supervisor are practicing in accordance with ethical standards and legal practices.

**Step 2:** The IUP counseling student must immediately report the critical incident to both the:  
1) Site Supervisor in person or by phone and send follow-up e-mail documenting the conversation  
**AND**  
2) Faculty Supervisor in person or by phone and send follow-up e-mail documenting the conversation.

**Step 3:** The IUP Faculty Supervisor must call the Site Supervisor to discuss the critical incident.



**Step 4:** The IUP counseling student and IUP Faculty Supervisor must each document the sequence of events related to the critical incident response using the form on the next page. The IUP Faculty Supervisor must place the completed forms in the student's practicum or field experience file.

**Step 5:** The IUP Faculty Supervisor must notify the Department of Counseling Practicum/Field Experience Coordinator about the critical incident and provide copies of the completed critical incident documentation forms.

**Step 6:** The IUP Department of Counseling Practicum/Field Experience Coordinator will notify the Department of Counseling Chairperson (if necessary) and College Dean (if necessary) about the critical incident.

**Indiana University of Pennsylvania  
Critical Incident Response: Sequence Documentation Form**

**Person Completing Report:** \_\_\_\_\_

**Practicum/Field Experience Site:** \_\_\_\_\_

**IUP Faculty Supervisor** \_\_\_\_\_ **Site Supervisor** \_\_\_\_\_

**IUP Course Number and Name** \_\_\_\_\_

**Date of Incident:** \_\_\_\_\_ **Time of Incident:** \_\_\_\_\_

**Brief Description of Critical Incident:**

**Provide a Timeline of the Sequence of Events and Action Taken at Each Event  
(including dates, times, and when notifications were made):**

**Signature of Person Completing Form:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Student Removal from Practicum or Field Site: Policy and Process

**Directions:** It is anticipated that student practicum and field placements will be successful. However, in rare instances it may be determined that an IUP student must be removed from the practicum or field site. Possible reasons for removal include but are not limited to: site can no longer meet the practicum/field requirements or student exhibits unprofessional or unethical behavior that cannot be remediated. When these issues arise, the policy below must be followed. The required documentation contained in this policy must be completed within 48 hours, unless otherwise required by the faculty/site supervisors involved. An IUP student who does not comply with this policy will result in referral to Student Development Committee.

**If a significant issue occurs at a practicum or field experience site that directly involves the IUP counseling student's continued placement at the site, the following steps must be taken.**

**Step 1: Issue identified.** The student and/or Site Supervisor must inform the Faculty Supervisor about the specific situation that could impact the student's continued placement at the site. Faculty Supervisor discusses the situation with Site Supervisor and student to gather needed information.

**Step 2: Faculty Supervisor determines if situation is a site issue or a student issue:**

**If Site Issue:** If site issue is identified (e.g. school/agency not able to provide enough direct contact hours, site supervisor medical issue arises that will require site supervisor to be absent for extended period of time, site cannot meet IUP practicum/field requirements, etc), the Faculty Supervisor will discuss the issue with the Site Supervisor and student to determine if the site issue can be resolved.

- a) **If YES – Student continues at site with the new corrective solution in place.** Note: Student placement/work at the site may need to be paused until solution is determined. This means the accrual of hours can be suspended during the resolution. If a new Site Supervisor needs to be assigned, the student must get new site paperwork completed and submitted to the IUP Clinical Coordinator for approval.
- b) **If NO – Student must be removed from site.**
  - i. Site Supervisor will sign practicum/field experience logs for hours accrued up to this point and will complete the practicum/field experience student evaluation.
  - ii. Faculty Supervisor will work with student to explore next steps for the practicum/field placement.

**If Student Performance/Professional Behavior Issue:** If a significant student performance or professional behavior issue is identified, the Faculty Supervisor will discuss the issue(s) with the Site Supervisor and student to determine if the student issue can be resolved.

- a) **If YES – Corrective Plan Created.** Faculty Supervisor, Site Supervisor, and student will meet to discuss the specific issues and create a plan for the student to correct the performance/behavioral issues that have been identified. A follow up plan will also be created so Site Supervisor, Faculty Supervisor, and student can assess the student progress on correcting the identified issues. If issues are corrected, IUP counseling student remains at the site. If the issues are not sufficiently corrected and/or additional significant performance issues surface, item b below gets followed.
- b) **If NO – Student Removed from Site.** If it is determined by the Faculty Supervisor and/or Site Supervisor that the IUP counseling student does not correct the identified issue(s) or the student behavior is assessed to be so egregious/unethical, then the IUP counseling student will be removed from the site.
  - i. Site Supervisor will sign practicum/field experience logs for hours accrued up to this point and will complete the practicum/field experience student evaluation.
  - ii. Faculty Supervisor will determine how the situation impacts the course grade, if referral to Student Development Committee is needed, if academic integrity issue is involved, etc. All IUP Department of Counseling, Graduate School, and University policies must be followed in this process.

**Note: Documentation-** In all situations above, the Faculty Supervisor and student must document the issue, sequence of events, and decisions/agreements that were made to address the issues. Site Supervisors must also complete the form if student is removed from the site. The IUP Faculty Supervisor must place the completed documentation in the student's practicum or field experience file. The IUP Faculty Supervisor must also notify the Department of Counseling Practicum/Field Experience Coordinator about the identified field issues and provide copies of the documentation.

**Step 3:** The IUP Department of Counseling Practicum/Field Experience Coordinator will notify the Department of Counseling Chairperson (if necessary) and College Dean (if necessary) about the identified practicum/field issues.



**Indiana University of Pennsylvania**  
**Documentation form for Identified Site Issue or Student Practicum/Field Issue**

**Person Completing Report:** \_\_\_\_\_

**Practicum/Field Experience Site:** \_\_\_\_\_

**IUP Faculty Supervisor** \_\_\_\_\_ **Site Supervisor** \_\_\_\_\_

**IUP Course Number and Name** \_\_\_\_\_

**Date(s) Issue(s) Identified** \_\_\_\_\_

**Brief Description of Significant Site Issue or Student Performance/Professional Behavior Issue:**

**Provide a Timeline of the Sequence of Events and Measures Taken to Correct the Issue (if any) (including dates, times, communication that was made, corrective measures taken, etc.):**

**If Student Is Removed From the Site, Describe Student Notification, Reasons for Removal, Current Status, and Other Pertinent Information**

**Signature of Person Completing Form:** \_\_\_\_\_ **Date:** \_\_\_\_\_