Rehabilitation Counseling/Rehabilitation Psychology

Field Experience Contract

The field experience component of undergraduate and graduate instruction in rehabilitation psychology/rehabilitation counseling is designed to provide students with practical experience, including the provision of direct client/consumer services, assuming responsibilities that are consistent with the student’s level of professional development and learning needs.

________________________________________ will complete field experience under the supervision of ___________________________________________ at ______________________________________________________ from ____________ through ____________ for ____________ hours/week.

Start Date End Date

Schedule:

________________________________________________________________________

Duties and responsibilities will include the following:

(over)
Learning objectives (knowledge and skill to be developed) will include the following:

The student will perform the duties and responsibilities specified in a reliable and conscientious manner and will maintain regular contact with the instructor, and agency supervisor(s), and any other university supervisor(s), informing them of any problems that might develop in performing those duties and utilizing them as resources to facilitate learning and professional development.

The agency supervisor(s) will assign duties consistent with student readiness and provide the necessary supervision to perform those duties. The agency supervisor(s) will also provide an evaluation of the student’s performance at the end of the semester, using a form to be provided.

The instructor will be available to both the student and agency supervisor to facilitate the fulfillment of this contract. The instructor and/or other designated university supervisor will meet with the student and agency supervisor (in the case of out-of-state placements, phone and/or e-mail contacts will be used) at least three times for graduate students and twice for undergraduates to facilitate planning and to monitor and facilitate progress.

_________________________________________  ____________________________
Student  Date

_________________________________________  ____________________________
Agency Supervisor(s)  Date

_________________________________________  ____________________________
Instructor  Date

_________________________________________  ____________________________
Other University Supervisor(s)  Date