MEMORANDUM OF AGREEMENT

In carrying out the terms of supervision of a master’s level counseling intern in the Professional Counseling Program at Texas State University, the following is understood and agreed to by the undersigned:

1. ______________________ (Counseling Intern Name) will serve as a graduate-level counselor intern from the Texas State University Professional Counseling Program. The internship site is located at _____________________________
   _____________________________

2. The internship will begin on (semester start date) ______________________, and end on (semester end date) ____________________, for an approximate total of ___________ clock hours of experience.

3. ____________________________ (Supervisor name with credentials) will serve as On-site supervisor for counselor intern during the above-stated period. On-site supervisor’s phone number at the site: ___________________________ and email address: _____________________________

4. The On-site supervisor will be responsible for:
   A. Providing a Professional Disclosure Statement for Supervision;
   B. Providing weekly individual supervision, for a minimum of 1 hour per week;
   C. Providing supervision on an emergency basis, as needed;
   D. Providing ongoing evaluative feedback to the counselor intern as necessary;
   E. Providing the ability to video/audio tape counseling sessions;
   F. Completing a final written evaluation at the end of each internship semester.

5. Internship activities appropriate for professional practice in counseling:
   A. Direct Services – All interns will provide at least 120 hours of face-to-face counseling services each semester (240 in one semester for school counseling), including:
      1. individual, group, couples, family counseling, and/or play therapy;
      2. parent, teacher, administrator consultation;
      3. group guidance activities (for school setting).
   B. Indirect Services – All interns will provide the remaining 180 hours required each semester (360 hours in one semester for school counseling) in professionally relevant activities such as:
      1. workshops, in-service trainings, staffings, individual and group supervision;
      2. documentation, referrals, reviewing video/audio tapes, reading;
3. consultation with other professionals;
4. appropriate test administration and interpretation.

6. The Counseling Program will designate a faculty member to serve as the “University Supervisor.” There will typically be an on-site meeting during the course of the semester, as well as another form of contact with the On-site Supervisor. This meeting is designed to introduce the University Supervisor to the On-site Supervisor as well as to the facility, and to discuss goals for the semester. The University Supervisor will also meet with the counselor intern in a group supervision format (class) every other week for an average of 3 hours. Additional meetings may be scheduled as needed.

7. The counselor intern is responsible for the following:
   A. adhering to the administrative policies, rules, standards, schedules and practices of the facility and University;
   B. providing all necessary and appropriate supplies where required or when not provided by the facility and/or University;
   C. arranging for his/her own transportation;
   D. arranging a schedule for weekly individual supervision with the On-site Supervisor and group supervision (class) as scheduled by the University Supervisor;
   G. purchasing and maintaining professional liability insurance;
   H. adhering to all applicable ethical codes.

8. It is understood and agreed to by and between the parties that the On-site supervisor has the right to terminate the field experience of the counselor intern if, in the judgment of the On-site supervisor, the counselor intern’s professional performance and development are below the requirements set by the site. Also, it is understood and agreed to by and between all parties that the Texas State University Professional Counseling Program has the right to terminate the field experience of the counselor intern for reasons concerning the performance of the counselor intern and/or the internship site. Such action will not be taken until the concerns have been discussed with the relevant and pertinent individuals.

9. It is understood and agreed to that the aforementioned parties may revise or modify this agreement and/or the activity plan by mutual agreement only through written amendment.

This agreement shall be effective when executed by all parties.

__________________________________________ Date: ____________
On-site Supervisor

__________________________________________ Date: ____________
Counselor Intern – Texas State University

__________________________________________ Date: ____________
University Supervisor – Texas State University