



Oregon State University
Cascades

**Master of Counseling (MCoun) Program
Internship Handbook**

2024-2025

***Counseling Academic Unit
Oregon State University-Cascades Campus
1500 SW Chandler Ave.
Bend, OR 97702
Phone: (541) 322-3173
Fax: (541) 322-3139***

Revised 06/2024

Table of Contents

General Suggestions for Your Clinical Experience	4
Internship	5
Case Presentations	5
Quarterly Expectations	5
Counseling People You Know.....	5
Endangerment	5
Remedial Practicum and Internship	6
Hours	7
Supervision and Direct Contact Hours Internship.....	8
Internship Hour <i>Average</i> by Term for Clinical Mental Health Counseling students taking 24 total credits/entered 2022.....	8
Internship Hour <i>Average</i> by Term for Clinical Mental Health Counseling students taking 12 total credits/entered 2023.....	8
Internship Hour <i>Average</i> by Term for School Counseling students	9
School Counseling Students:	9
Internship Experience at the different school Levels.....	10
Academic Requirements for Internship	10
CACREP Requirements: 2016 Standards	10
Frequently Asked Questions about Internship	12
Demonstrating Compliance with Oregon Administrative Requirements.....	13
CastleBranch	14
School Counseling Practicum and Internship SAFE SCHOOLS Requirements.....	15
Post-Internship Professional Licensure	15
Acquiring Professional Licensure	16
Post-Internship Supervision and Licensure.....	16
Licensing for School Counselors	16
Licensing for Clinical Mental Health Counselors	17
An important note on criminal background check:.....	18
Forms.....	18
Form 1: Student Responsibility Form	18
Form 2: Evaluation of COUN515 Individual/Triadic Supervisor	20
Form 4: Informed Consent for Video/Audio Recording- CMHC	25
Form 5: Parental/Guardian Permission/Consent Forms for School Counseling	27

Form 6: Parental/Guardian Permission/Consent Forms for School Counseling30
Form 7: Supervision Agreement.....33

General Suggestions for Your Clinical Experience

- Supervision Assist is the only OSU-Cascades program-approved platform for recording and storing videos.
- Consult with your supervisor immediately if you believe you need to make a mandatory report.
- Be open to consultation, feedback, and/or ideas when you are unsure how to address a presenting concern or on-going clinical need for one or more of your clients. When in doubt, engage in an ethical decision-making process.
- Always remember to maintain the confidentiality of your students and clients.
 - Clinical Mental Health Students: This includes while utilizing electronic health record platforms or Supervision Assist.
 - School Counseling Students: Maintaining the confidentiality of your students can be challenging in school environments in which there exists a large number of diverse stakeholders, often possessing conflicting interests. Be diligent!
- Once you have received written permission to record a session, record the session on Supervision Assist. Keep the signed consent form on-site for future reference.
- Always be alert to your environment and the hearing range of others when asking a question or discussing clinical information.
- Be intentional with the information you chose to consult about or discuss with others about your client(s). Sharing information related to your client/student should be de-identified before consulting.
- Be prompt to class, group supervision, individual/triadic supervision, your site, and all professional appointments.
- Dress in a manner befitting a professional in your environment (e.g., shower and dress appropriately). Talk with your supervisors about appropriate dress for your setting.
 - OSU-Cascades students can take up to 10 free clothing items from the [Clothing Connection](#) every term.
- Never provide counseling services via email or text; neither are secure forms of communication.
 - **Texting with students/clients and/or friending them on social media is prohibited.**
- School counseling students: Do not provide transportation for students at your practicum or internship site under any circumstances. It is important to know your school site's policies regarding student meetings.
- Do not miss an appointment:
 - Clinical mental health students: if an emergency prevents you from being at an appointment telephone the client or another counselor to make other arrangements. This is your responsibility.
 - School Counseling Students: telephone your school counselor site coordinator and follow protocols to make other arrangements. This is your responsibility.
- Hour logs and other paperwork will need to be completed throughout your internship. Make sure your paperwork is completed properly and on time. Always keep a copy for your own records.
- Constantly stretch yourself, look for new techniques to assist your client(s) and seek support as a means of expanding your clinical acumen. Read books, watch videotapes, attend workshops and conferences, search the internet for reliable sources, review information in the library or electronically through the library's online resources. Talk to program faculty, supervisors, other students, or doctoral students to gain insight.
- Focus on the fundamentals: nonverbal communication, feeling reflections, paraphrasing, active listening, curiosity, and goal setting (helping the client/student determine steps to get to where they want to be, etc.).
- A major challenge of counseling is to find ways of effectively integrating who you are as an individual into your role as a developing professional counselor. Take appropriate, intentional, and supervised risks.
- Maintain your own health and wellbeing, seek support as necessary (see *ACA Code of Ethics*, Section C.2.g; F.8.b). Seek out your own personal counseling. Ultimately, it is also important to remember that you are on a journey of discovery. Set reasonable expectations for yourself and what you wish to accomplish. Stretch yourself, but not to the breaking point.

Internship

In this section, you will find information that was developed by faculty and counselors-in-training to help interns successfully navigate their way through the final stage of their program. As such, this document shows that professional success is a collaborative endeavor that calls for experienced professionals to mentor developing professionals, and for developing professionals to take on greater professional responsibility.

Case Presentations

The case presentation serves several purposes. The assignment provides the student with the opportunity to reflect on how the therapeutic experience impacts them, experience in writing a case conceptualization, and presenting a case as can be expected in an agency setting. It is also an opportunity for the student to get feedback (and for observing students to learn how to provide feedback) regarding counseling and reporting skills.

- Clinical Mental Health students: Each student is required to make six (over three quarters) to eight (over four quarters) oral case presentations across internship. These presentations will be roughly 30 minutes in length, though this may depend on your instructor. **Presentations must include video excerpts from recent sessions, demonstrating identified counseling skills.**
- School Counseling students: Each student is required to make six oral case presentations across internship. These presentations will be about 30 minutes in length, though this may depend on your instructor. **Presentations must include video excerpts, demonstrating identified counseling skills.**

Quarterly Expectations

Be sure you have all necessary approvals on all paperwork. Logs with pending hours will not be accepted. Typically, you must complete your hour log, dispositional evaluation, and clinical skills evaluation during week 10 of the quarter. Be proactive! Remember to have all of your recorded sessions erased before the last day of the last week of the term. Failure to submit paperwork by the end of the term may result in an “Incomplete” grade. In spring term, students must submit final hour log reports to the program (in addition to their faculty supervisor) for degree and licensure requirements. Reference the graduation and degree conferral timeline for specific dates and instructions. Failure to submit these accurately and on time may result in a delayed degree conferral.

- **Keep a copy of all of your hour log for your records. This is your responsibility.**

Again, Supervision Assist is the only OSU-Cascades program-approved platform for recording and storing videos.

Counseling People You Know

You may know some potential clients/students and wonder whether it is okay for you to counsel them. Other questions may come up regarding seeing relatives of people you know or relatives of clients/students you have. To resolve such issues, refer to the ACA and/or ASCA Ethical Standards, engage with an ethical decision-making process, and consult with your supervisor. *You should consult with your university or site supervisor about any potential situations that may include dual relationships.*

Endangerment

No MCoun student or faculty member is expected to be in a position of endangerment as a function of teaching or learning. Any faculty member or student who believes there is a risk of endangerment should take immediate steps to remove themselves from the situation. The individual should report the situation and attendant circumstances to the site and/or University supervisor.

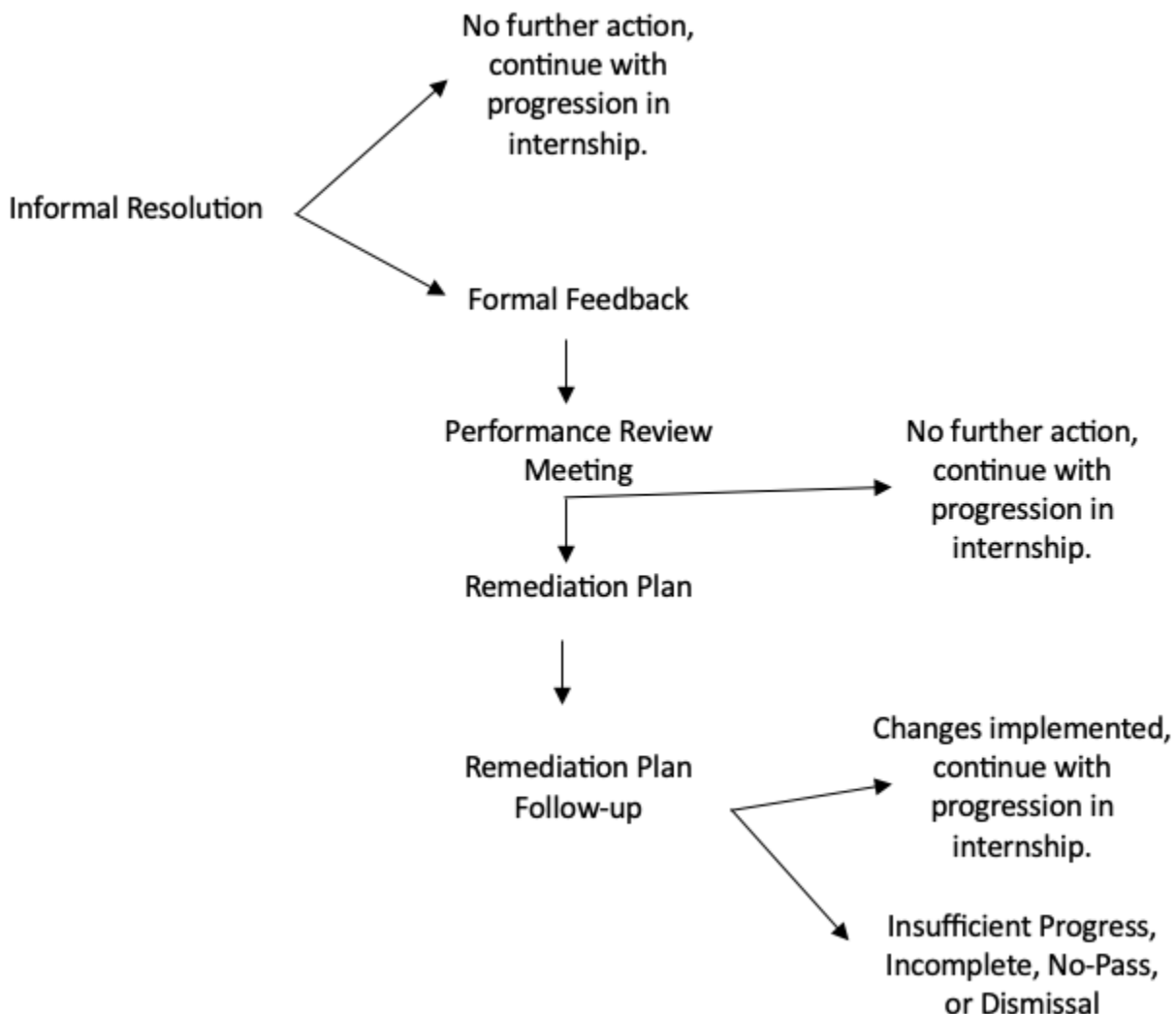
In the event that a client threatens significant harm to self or others, please follow the protocol as determined by your site. The event should be documented in writing at the earliest possible moment, and you should notify

your site supervisor immediately. In such instances, proactive measures are pursued to provide assistance to the client/student and the intern.

Remedial Practicum and Internship

In alignment with processes outlined in the Student Handbook, student remediation procedures follow ethical guidelines from the American Counseling Association 2014 *Ethical Code* related to gatekeeping and remediation, evaluation of students, and limitations. Students receive quarterly evaluations on their skills and dispositions. It is possible students may receive feedback in addition to the quarterly evaluation.

Students must earn an average score of “3” or higher within each skills evaluation section and cumulatively on the disposition evaluation. Otherwise, the student will receive either a Pass with Remediation, Incomplete, No-Pass with Remediation, or a “No Pass” in the course. For students enrolled in COUN 512/514 and COUN 515 who earn a No-Pass grade, the accrued direct and indirect hours across the term will not be counted. Supervisors should incorporate multiple experiences of the student (supervision content, group supervision, observation of interactions with peers and clients, etc.) to assess students, and record dates of observation of skills/competencies. Remediation for practicum and internship follow the procedures outlined in the student handbook. Please refer to the student handbook for additional details and information. Below is a flow chart of remediation procedures.



Hours

Recording Hours

Record the amount of time you spend with clients (direct hours), supervision, and indirect site experience hours in Supervision Assist. The term “client” refers to any person receiving services including students, parents, teachers, or patients.

- Quarterly hour logs must be approved by the site supervisor, university supervisor, and student before the end of each quarter. The university supervisor will review the logs, along with the quarterly evaluations, and approve each, before submitting final grades for the term.
- For summer, fall, and winter terms, you must have hour logs approved in Supervision Assist by your site supervisor and faculty supervisor by 5:00 PM on the Friday of week 11. In **spring term**, students must submit final hour log reports to the program (in addition to their faculty supervisor) for degree and licensure requirements. Reference the graduation and degree conferral timeline for specific dates and instructions. Failure to submit hours and approved logs accurately and on time may result in a delayed degree conferral.
- **Clinical Mental Health Students may not accrue direct hours and should not be on-site during academic breaks and university recognized holidays.**
- **School Counseling Students must receive prior approval from their site supervisor and campus instructor to accrue direct hours during university breaks. Direct hours cannot be accrued without supervision.**
- *Note: It is important for students to keep copies of all hours logs and evaluations for their own records.*

Total Hours include:

- Counseling direct contact hours (which can include shadowing if you participate in the session)
- Individual supervision hours
- Group supervision hours
- Indirect site activities
-

Counseling Direct Contact Hours include: Individual counseling hours + career counseling hours + group counseling hours + group psychoeducation hours + intake and assessment hours + crisis intervention hours + family counseling hours. They are therapeutic in nature and consist of **face-to-face and/or voice to-voice** communication. School Counseling students can include teaching hours in direct contact hours, but these hours will not count for associate registration (LPC).

Individual Supervision Hours include: An average of one hour per week spent with your official site supervisor discussing your development as a counselor and your counseling interactions with clients at the site. Supervision may be conducted as a triad (i.e., two supervisees and a supervisor), but not as group staffing. The ideal format for supervision is face-to-face and includes review of a recent recording of a counseling session. Supervision should cover skills, conceptualization, personalization, and professional identity development. You should plan, negotiate, and advocate at your site to receive these experiences. Consultation in passing (also known as drive-by supervision) is not a viable alternative to real supervision.

Should you encounter difficulty in scheduling/receiving individual supervision on site, your first step is to advocate directly with your site supervisor to develop an appropriate schedule. If that is not successful, your university supervisor and/or internship coordinator will be available to consult with you and assist you in ensuring you receive adequate supervision. If the situation is not remedied in a timely manner, you will not be able to continue to see clients on site until adequate supervision is provided. Supervision counts toward your indirect hours.

Group Supervision Hours include: Time spent in COUN 515 group supervision internship class on campus. Some sites may have you also participate in their own group supervision. Group supervision must equal an average of 1.5 hours per week for the terms you are registered for internship regardless of the number of credits. Supervision counts toward your indirect hours.

Indirect Site Activities include: Activities at your site that are not direct counseling contact, but are related to client service, site support, or your development as a counselor. These hours can include case management, staff/faculty consultation, family consultation, in-service or trainings, site/client-related paperwork, site-related administrative duties, advocacy, lesson planning, etc.

Supervision and Direct Contact Hours Internship

- Minimum Individual Supervision Hours = 1 hour per week average
- Minimum Group Supervision Hours = 1.5 hours per week average
- Minimum Direct Contact Hours out of 600/900 = 240 hours

Internship Hour *Average* by Term for Clinical Mental Health Counseling students taking 24 total credits/entered 2022

Term	Weeks of Internship	Average hours over 4 terms (44 weeks)	Average hours over 3 terms (33 weeks)
Summer	11	20.5/week	
Fall	11	20.5/week	27.5/week
Winter	11	20.5/week	27.5/week
Spring	11	20.5/week	27.5/week
Total:		=900	=900

Internship Hour *Average* by Term for Clinical Mental Health Counseling students taking 12 total credits/entered 2023

Term	Weeks of Internship	Average hours over 4 terms (44 weeks)	Average hours over 3 terms (33 weeks)
Summer	11	14/week	
Fall	11	14/week	18.5/week
Winter	11	14/week	18.5/week
Spring	11	14/week	18.5/week
Total:		=600	=600

Internship Hour *Average* by Term for School Counseling students

Term	Weeks of Internship	Average hours over 3 terms (38 weeks)
Late Summer/Fall	16	16/week
Winter	11	16/week
Spring	11	16/week
Total:		=600

Scheduling

A minimum of one hour per week of **individual supervision** (which may include triadic supervision) is required **on site** by the on-site supervisor. Approximately 1.5 hours per week is required for **group supervision**, which occurs on campus. The student and the internship supervisor will determine specific schedules of internship hours jointly. This schedule should provide the student with the minimum of **600-900** hours of supervised clinical experience, **240** of which must be **direct client contact hours**.

Clinical Mental Health Students:

General Responsibilities include facilitating times and places for all meetings with your site supervisor. In general, meetings should be arranged well in advance with the first meeting being arranged within the first two weeks of your internship experience. This also includes completing and turning in all assigned coursework and internship forms.

- Students are expected to spend approximately 14 to 30 hours per week (based on a 3-8 credit internship class) for a minimum of three academic terms at the internship site. You can designate how those hours are distributed over each term. You may want to consult with your advisor as you formulate your plan, taking into consideration the total number of credits you are taking each term, full-time/part-time status, and financial impact of additional credit hours. For example, summer internship term coincides with 3 additional courses (9 credit hours) for full-time students. You may choose to take 3 internship credit hours to bring your total to 12, taking more internship credit hours in fall, winter, and spring when you only have 6 other credit hours required.
- If you entered the program in 2022 or earlier, you must complete **24 total credit hours** of internship.
- If you entered the program in 2023 or later, you must complete **12 total credit hours** of internship.

School Counseling Students:

General Responsibilities include facilitating times and places for all meetings with your site-based supervisor. In general, meetings should be arranged well in advance with the first meeting being arranged within the first two weeks of your internship experience. This also includes completing and turning in all assigned coursework and internship forms. Knowing that things come up during the school day, plan ahead of deadlines for turning in required forms (needing supervisor signatures).

- Students are expected to spend at minimum 18 hours per week (at least two and one-half full days to three days), for the three academic terms, at the internship site for a minimum of three academic terms.
- If you entered the program in 2022 or earlier, you must complete a **minimum of 15 total credit hours of internship**.
- If you entered the program in 2023 or later, you must complete **12 total credit hours** of internship.
- You may take up to 25 credits of internship. Each additional credit of internship equates to approximately 40 hours per term.
- School counseling interns begin their internship just prior to the beginning of the k-12 school year (i.e., late

August) when their site supervisor begins their school year. This time at the beginning of the school year is an orientation to the site and experiencing the beginning of the school year routine. This is a job shadow/job orientation. The hours will count as indirect hours.

Internship Experience at the different school Levels.

- You will work with the practicum and internship coordinator, the school counseling program coordinator, and/or your advisor to help determine placements.
- Teachers Standards and Practice Commission (TSPC) abide by the following Oregon Administrative Rules that dictate standards. The internship experience is an opportunity to meet many standards and OAR's that school counselors (and other educators) are required to meet in order to obtain your Preliminary School Counselor License.
 - [OAR 584-435-0100 School Counselor Program Standards](#)

Academic Requirements for Internship

A student may enroll in internship credits when they:

1. have a minimum overall GPA of 3.0 for all courses included in the program of study
2. have successfully completed COUN 512/514 Practicum sequence
 - Including passing scores on their Clinical Skills Evaluation and Dispositions Evaluation
3. have completed all prerequisites for the internship experience
 - Clinical Mental Health students: Including all required documentation in CastleBranch

CACREP Requirements: 2016 Standards

Internship

- Students are covered by individual professional counseling liability insurance policies while enrolled in practicum and internship.
 - Supervision of practicum and internship students includes program-appropriate audio/video recordings and/or live supervision of students' interactions with clients.
 - Formative and summative evaluations of the student's counseling performance and ability to integrate and apply knowledge are conducted as part of the student's practicum and internship.
 - Students have the opportunity to become familiar with a variety of professional activities and resources, including technological resources, during their practicum and internship.
 - In addition to the development of individual counseling skills, during *either* the practicum or internship, students must lead or co-lead a counseling or psychoeducational group.
 - After successful completion of the practicum, students complete 600 clock hours of supervised counseling internship in roles and settings with clients relevant to their specialty area.
 - Internship students complete at least 240 clock hours of direct service.
 - Internship students have weekly interaction with supervisors that averages one hour per week of individual and/or triadic supervision throughout the internship, provided by (1) the site supervisor, (2) counselor education program faculty, or (3) a student supervisor who is under the supervision of a counselor education program faculty member.
- and**
- Internship students participate in an average of 1.5 hours per week of group supervision on a regular schedule throughout the internship. Group supervision must be provided by a counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member.

Supervisor Qualifications

- Counselor education program faculty members serving as individual/triadic or group practicum/internship supervisors for students in entry-level programs have (1) relevant experience, (2) professional credentials, and (3) counseling supervision training and experience.
- Doctoral students serving as individual/triadic or group practicum/internship supervisors for students in entry-level programs must (1) have completed CACREP entry-level counseling degree requirements, (2) have completed or are receiving preparation in counseling supervision, and (3) be under supervision from counselor education program faculty.
- Site supervisors have (1) a minimum of a master's degree, preferably in counseling, or a related profession; (2) relevant certifications and/or licenses; (3) a minimum of two years of pertinent professional experience in the specialty area in which the student is enrolled; (4) knowledge of the program's expectations, requirements, and evaluation procedures for students; and (5) relevant training in counseling supervision.
- Orientation, consultation, and professional development opportunities are provided by counselor education program faculty to site supervisors.
- Written supervision agreements define the roles and responsibilities of the faculty supervisor, site supervisor, and student during practicum and internship. When individual/triadic practicum supervision is conducted by a site supervisor in consultation with counselor education program faculty, the supervision agreement must detail the format and frequency of consultation to monitor student learning.

Internship Site

- The student must accumulate a minimum of 240 hours of direct client contact within a total internship experience of 600-900 hours over three or more academic quarters. The student should be provided with a workspace as similar as possible to the professional staff of the agency.
- The site supervisor must complete and review with the student one Clinical Skills evaluation and one Disposition evaluation per term. The final evaluations will be completed electronically and submitted via Supervision Assist.

OSU Faculty

- The OSU Internship faculty supervisor and/or the OSU Internship Coordinator will be available to consult with the site supervisor about the student's progress and development, or any other issues that emerge during the student's placement.
- The Internship faculty supervisor will collect and review the Performance Evaluation form and discuss student progress and goals with the student.
 - For School Counseling students: ****TSPC Supervision** requires that the university supervisor will conduct at least two site visits/consultations per academic year with the student and site supervisor over the course of the academic year. During each visit or consultation, the site-supervisor, university supervisor and student will discuss student progress and goals/or review the Quarterly Evaluation Form. If the university supervisor who conducts site visits is not the internship instructor, it is important for the university supervisor and internship instructor to also maintain communication on student intern's progress. **The site supervisor will contact the internship instructor (if different from the university supervisor conducting site visits) when questions or issues arise in between the official site visits.**
- The Internship Instructor will consult with the student's faculty advisor as required or needed.
- Students will submit their final hour logs to the program and provide any other necessary materials to program faculty and staff, as needed.

Frequently Asked Questions about Internship

What do I do if I have more than one internship site?

- Each internship site will require a designated supervisor who provides individual/triadic site supervision (total supervision will be minimum 1 hour per week divided between sites).
- Both site supervisors and sites must have a placement application in Supervision Assist. You must keep hour logs specific to each site in Supervision Assist. Your hour log must be approved by both/all site supervisors and your university supervisor. At the end of spring term, your final aggregate hour report for each site must be submitted to the program. This is needed by the program to verify degree and licensure requirements.
- You will need to have a clinical skills evaluation and disposition evaluation completed for each site by each site supervisor. These must be reviewed and acknowledged in Supervision Assist every quarter.

I'm not getting client/student hours! What if I don't get enough hours?

- In the summer, it is not unusual for interns to spend most of their internship time in training, shadowing, and other indirect service activities. If you have few summer direct hours, an average of 8 direct hours/week for fall/winter/spring terms will still get you to 240.
- If, however, by mid fall you are not on pace for accruing 6-8 direct hours per week, consult with your site supervisor, your university supervisor, and internship coordinator (in that order) to develop a plan of action.
- When making plans for accruing direct hours, clinical mental health students should budget for about one quarter to one third of their appointments being cancellations or no shows. For example, if you are trying to accrue 8 hours of direct service per week, you should schedule 10-11 hours of appointments per week.
- School counselors should plan to spend approximately 2-3 extra hours on site per week to account for snow days, sick days, school events, or student absences that may impact your ability to accrue direct hours.

I'm not getting consistent supervision and my supervisor is not available to me when I need them. What should I do?

- First, advocate directly with your site supervisor to develop an appropriate schedule.
- Bring this concern to your university supervisor immediately. They, in coordination with the internship coordinator, will have conversations with the site supervisor(s) to ensure that you are getting adequate support.
- If no acceptable change occurs, you may be removed from the site and placed in a new internship site. It is rare that this step is required, and only occurs when all other avenues for acceptable solutions have been exhausted.

My site wants me to work over school holidays, but I need a break. Do I have to go to internship?

- No. It is program policy that you are not on-site during university recognized holidays and academic breaks.
- School Counseling Students must receive prior approval from their site supervisor and campus instructor to accrue direct hours during university breaks. Direct hours cannot be accrued without supervision.

I've finished all my hours, and it's only winter term. Do I have to do internship in spring term?

- Yes. It is the program's expectation that you complete internship through spring quarter. With approval from your advisor and site supervisor, there are unique circumstances in which you may exit internship before the end of spring term. In this rare event, it is essential that you provide adequate notice to your site to ensure that your clients are not adversely impacted by an early departure. **Client abandonment is an ethical breach.**

- If you have received approval and you choose to leave before the end of the anticipated internship term, you must work out a timeline to ensure continuity of care, as this is part of your ethical obligation.
- You must ensure you have enrolled in the internship credits required to graduate per your program sequence (12-24 for CMHC; 12-15 for SC).

My internship site has offered me a job. Can I take it?

- It depends. Consult with the internship coordinator for clarification based on your specific situation.
- Some sites will allow interns to also be employees, some will not. Accepting an offer of employment may, in some cases, result in the end of your internship with that site. There is no guarantee that another site would be available, and you may need to delay completion of internship to the next academic year.
- If you have completed your internship requirements, and wish to transition to employee status, that is between you and your site. You may not, however, take a position that requires a completed Master’s Degree in Counseling until such a time as your degree is complete or accept a position that requires licensure (LPC, or Registered Associate), until those requirements have been met. Consult with the OBLPCT for more information about Registered Associate and LPC requirements.

I can’t register for preferred section of COUN 515/group supervision because it’s already full. I need to be in this section because of my internship schedule. Can I be added to it anyway?

- No. Once course sections become full during registration, our program is unable to entertain requests to add students to full sections. Because of the nature of clinical courses, we must keep all sections manageable and of equal size. This helps to ensure that all students get ample opportunities and time for discussion, case presentations, consultation, etc. It also ensures that we maintain required CACREP ratios. If students have conflicts with courses or supervision sections, it is their responsibility to adjust their personal and professional schedules, which may include internship site schedules.
- MCoun students can register for courses beginning at 6:00 AM on the first day of Priority Registration Phase 1. You can find registration dates posted on the [OSU Academic Calendar](#).

Demonstrating Compliance with Oregon Administrative Requirements

Clinical Mental Health Students Only

Clinical Mental Health Counseling students and students desiring to complete clinical mental health counseling requirements must meet the relevant requirements determined by the Oregon Administrative Requirements (OARs) for Health Profession Student Clinical Training ([409-030-0100 – 409-030-0250](#)) prior to enrollment in their first clinical experience in a clinical mental health setting (e.g., COUN 514).

Review the **Oregon Administrative Rules** (OARs) here:

<https://www.oregon.gov/oblpcct/Pages/LawsRules.aspx>

More information [can be found at this link](#).

We as a program have adopted these requirements for all of our students. The purpose of these regulations is to 1) protect your health and 2) to protect the health and wellbeing of any clients, students, supervisors, and other community members with whom you interact throughout the duration of your program.

Some internship sites will have you complete some of the requirements on site and have specific background check requirements that supersede the OAR requirements. Some sites have requested exemptions from the State Authority

for specific OAR requirements. The complete list of exemptions is available from Stephanie Thomas. When you know the site(s) hosting you for internship, you will work with Stephanie on completing the requirements specific to that site.

- **When you know the site(s) hosting you for internship, please contact Stephanie Thomas to obtain information about completing the requirements specific to that site. Different fees and requirements are associated with specific sites.**

Please ensure that you also complete any and all site-specific trainings and orientations for your practicum or internship placement. Should you have any further questions or require any additional information please contact Stephanie Thomas.

You must demonstrate that you have completed your site-specific requirements prior to your anticipated start date; otherwise, your clinical experience could be delayed. Below is a list of potential requirements.

- **Potential Immunizations (*must be current*)**
 - Hepatitis B—Positive Titer or Series (3 doses)
 - Measles, mumps, and rubella (MMR) or Proof of 2 MMRs
 - Tetanus booster with pertussis (must be within 10 years)
 - Varicella
 - Provider verification of chicken pox case or Positive Titer or Varicella Immunizations (2 doses)
 - Note- for students entering internship in 2021 and beyond, Oregon State University intends to implement a COVID-19 vaccination requirement beginning fall term 2021 for those students and employees who learn, work or engage onsite at OSU locations throughout Oregon. *It is possible that OAR's may also be updated to reflect a COVID-19 vaccination requirement.*
- **Potential Screenings**
 - Tuberculosis (screened within past 12-months)
 - 2 PPD Skin Tests OR
 - 1 Blood Test—Quanterferon Gold (QF Gold) AND T-Spot
 - Substance Abuse 10-panel drug screen (screened no longer than 3 months prior to admittance of program)
 - Criminal Background Check (screened no longer than 3 months prior to admittance of program)
 - SSN trace
 - State/National criminal background history
 - Sex offender registry check
 - OIG LEIE check
- **Potential Trainings**
 - CPR/Basic Life Support **for healthcare providers** (Infant, Child, Adult)
 - Bloodborne pathogen training (OSHA)—link provided by program
 - OSHA recommended safety guidelines
- **Required Insurance Standards**
 - Professional Liability Insurance, (ACA, SAVERS, etc. Upload copy in Supervision Assist)
 - General Liability Insurance (provided by university—no action required by the student)

CastleBranch

Clinical Mental Health Students Only

You are to document the completion of these requirements by setting up an account with CastleBranch which serves as our information and documentation clearinghouse. You will need to set up an account with CastleBranch from the email invite sent by Stephanie Thomas. *There is a one-time fee to set up your account.* **Students are financially responsible to create and maintain their CastleBranch account and satisfy the OAR requirements.**

- **Students will sign up for packages specific to their internship sites. Fees vary based on the package required. Again, confirm with Stephanie which package is appropriate for your internship site.**

You must submit all documentation of all required immunizations, screenings, and trainings set forth by the OAR's to CastleBranch.

- **Different fees and requirements are associated with specific sites. Please work closely with Stephanie to confirm you have the correct immunizations, screenings, and trainings.**

Your Oregon Administrative Rule (OAR) requirements must be met/completed prior to working with clients.

School Counseling Practicum and Internship SAFE SCHOOLS Requirements

School Counseling Students Only

School counseling students are required to submit fingerprints and background checks to TSPC, prior to entering schools for practicum and internship. Fingerprints are good for three years.

Safe Schools Training: Additionally, school counseling students will need to complete "Safe Schools" training modules each school year (both for practicum and again before internship) for all school districts. The Safe Schools training has specific modules according to the school district they will be working in. If school counseling interns are in two or more different schools in different school districts for internship, students will complete the Safe Schools modules per each district requirement.

Fingerprinting instructions:

Fingerprinting- Must be completed with Teachers Standards and Practice Commission (TSPC) follow the e-licensure process:

- Step 1: Visit <https://www.oregon.gov/tspc/LIC/Pages/Fingerprinting.aspx>Links to an external site. (Keep all receipts of payment.) Continue to: <https://apps.oregon.gov/TSPC/eLicense>Links to an external site. (Links to an external e-licensing site.) and follow the process for "CLINICAL PRACTICE." (note: it can look a little confusing, like you're applying for a license, but it will just say Clearance, and you'll select OSU).
- Step 2: After submitting to TSPC, you will receive a "field print code" back within 5-7 days in an email.
- Step 3: You will need to take the code and instructions with you to a Field Print Office where your fingerprints will be submitted.
- Step 4: Fingerprint clearance should occur within 2 weeks. You will receive an email from TSPC showing that your fingerprint clearance has come through. Please save this email in a safe spot for the duration of the program.
- Step 5: Please take a screenshot (example below) of this clearance and submit documentation to the school district where you are completing your practicum. Also submit to your SLL Portfolio under Fingerprinting / Background Check. This is required before beginning your practicum.

Note: Please consult the SC Internship Canvas Page for updated details and information.

Post-Internship Professional Licensure

Acquiring Professional Licensure

Each state or government agency has its own specific procedures for acquiring licensure, but most have the same basic components: (1) An application form or checklist for applicants to complete, and (2) an application processing fee. It is the student/graduate's responsibility to facilitate their own licensure process. Program faculty and staff will help you with verifying that you met your educational and clinical training requirements, as well as provide endorsement for the professional license.

Post-Internship Supervision and Licensure

To qualify for licensure as a professional counselor under ORS 675.715(1)(c) and 675.720, an applicant must have completed at least two years, defined as 24 months, of supervised clinical counseling experience. The applicant must have completed no less than 1,900 **direct client contact hours** (up to 400 of those hours may be completed during the clinical portion of the degree program) and 120 supervision hours with a qualified supervisor.

Other specific requirements apply. For further information, contact the Oregon Board of Licensed Professional Counselors and Therapists: (503) 378-5499, lpc.lmft@state.or.us or www.oblpct.state.or.us

School Counseling Licensure Continuing Education. This license is valid for three years. TSPC requires ongoing professional development in order to renew your license. You will be required to earn 75 PDU's (professional development units) over the course of those three years.

Licensing for School Counselors

Oregon – Teachers Standards and Practice Commission (TSPC)

250 Division St. NE, Salem, OR 97301-1012

503-378-3586 web site: <http://www.oregon.gov/tspc>

Request for proof that you completed the program. Proof will consist either of official transcripts showing all your program coursework, a recommendation from the Placement and Licensure Officer (issued on behalf of the Dean of the College of Education), or both.

A criminal history background check is required, including fingerprinting. Some states may accept Oregon's background check, but most require you to follow their own state's process. (Fingerprinting and a criminal history background check is completed within the first to second term of the program. Fingerprinting is good for three years.

Teacher Standards and Practices Application Instructions for an Oregon Preliminary School Counselor License. <http://www.oregon.gov/tspc/Pages/elicensing.aspx>. The application is an electronic, online process.

School Counselor Preliminary License.

- During your time in the program, you will have completed various core assignments that meet CACREP and TSPC School Counseling Standards. While you are completing your internship throughout the year, you will develop and complete a portfolio. Explanation, examples and support on the portfolio will be ongoing throughout your internship.
- More information about first time licensing can be found here: <https://www.oregon.gov/tspc/lic/pages/first-time-license.aspx>

For School Counseling students interested in supervision and earning your LPC:

Oregon State Regulations on Supervisors for LPC Candidates (Post-Degree) OAR 833-020-0050

- (4) The supervisor, at the time of supervision must have:
- (a) Held a master's degree in counseling or graduate degree judged equivalent by the Board;
 - (b) Completed three years of post-graduate supervised clinical experience as a professional counselor or other mental health professional;
 - (c) Completed 30 clock hours of training in supervision theory and practice through post-master's workshops or post-master's graduate level academic coursework for any supervision hours provided after June 30, 1992; and
 - (d) Been certified as a National Certified Counselor (NCC), Certified Clinical Mental Health Counselor (CCMHC), Certified Rehabilitation Counselor (CRC); or Certified Career Counselor (CCC); or
 - (e) Held a license as a professional counselor in the State of Oregon or held an Oregon or other state certification or licensure judged comparable by the Board, such as Oregon standard school counselors or Oregon psychologist associates or those state licensed as clinical psychologists, clinical social workers, and marriage and family therapists.

Students intending to apply for school counselor licensure need to review the "First time License" on the TSPC website. Eligibility for the Preliminary School Counselor License includes:

- Comply with Standards for Competent and Ethical Performance of Oregon Educators as defined in OAR 584, Division 20.
- Meet the standards set forth in OAR 584-018-0305 – Personnel Service Licensure Programs School Counselors – students will demonstrate the professional knowledge, skills, abilities, cultural competencies and professional disposition for the preliminary school counselor license. These standards align with the Counsel for Accreditation of Counseling and Related Educational Programs (CACREP) school counselor standards.
- In addition to the standards for school counselors, students will demonstrate knowledge, skills and cultural competence in the CACREP common core standards for all counselors.
- Pass a criminal background clearance, including fingerprints (or are updated if expired).

***TSPC Fees for testing and fingerprints are subject to change.**

Licensing for Clinical Mental Health Counselors
Oregon Board of Licensed Professional Counselors and Therapists
3218 Pringle Rd SE Ste. 250 Salem, OR 97302-6312 (503) 378-5499

Licensure: PLEASE NOTE

We strongly encourage you to research the state you will be working in to learn the details of their process for licensure before you complete the program so you will be prepared to apply when you are finished with your program.

We recommend you gather official (unopened and not photocopied) copies of test scores and transcripts from all secondary schools, colleges, and universities you have attended, and store them in a single secure location throughout your professional counseling career.

The OSU-Cascades MCoun program and faculty are not obligated to endorse any graduate or candidate for professional licensure. Graduation from the program does not automatically guarantee licensure endorsement; Program faculty and staff reserve the right to refrain from licensure endorsement based on the student's performance, disposition, legal/ethical/criminal issues, or any other professional issues that are known about the individual.

An important note on criminal background check:

Professional counseling is a licensed occupation in the state of Oregon. To be licensed you must pass a criminal background check through the Teachers Standards & Practices Commission (TSPC) or the Oregon Board of Licensed Professional Counselors & Therapists (OBLPCT). If you have any criminal history, you need to be aware that you may or may not be eligible for licensure based on TSPC and/or OBLPCT criteria. If you have a criminal background, we recommend that you speak directly with the OBLPCT or TSPC regarding your licensure eligibility prior to your acceptance of our invitation to join the MCOUN program at OSU Cascades.

Forms

**Form 1: Student Responsibility Form
Oregon State University – Cascades Campus
Counseling Academic Unit**

- ✓ I have read and agree to adhere to the American Counseling Association’s (2014) *Code of Ethics and/or the American School Counselor Association Ethical Guidelines (2024)*
- ✓ I have received the Oregon State University Internship Handbook. I understand that I am responsible to read, understand, and comply with the information presented in the Master of Counseling Internship Handbook. I have reviewed the materials carefully, and if I have questions concerning these materials, I will ask for clarification in COUN515, Internship. I will also seek clarification from my university supervisor, individual supervisor, and/or any other faculty, as needed, to ensure that I follow best practice in the profession of counseling.
- ✓ I understand I am responsible for having, and providing documentation of, malpractice insurance at the start of practicum, and throughout the internship experiences.
- ✓ I understand I must upload a copy of my insurance coverage to Supervision Assist.
- ✓ I understand I am responsible for having a subscription to Supervision Assist for the purpose of recording sessions and documenting my hours.

I have student malpractice insurance through _____.
Insurance Company

Policy/Member# _____ Date Policy Expires _____

Student’s printed name

Student's Signature

Date

Form 2: Evaluation of COUN515 Individual/Triadic Supervisor
Oregon State University Cascades
Counseling Academic Unit

Students will be provided an electronic copy of this survey to be completed at the end of their placement and as needed.

University and/or Site Supervisor: _____
 Year: _____

Please evaluate your supervisory experience in the following areas based on the following ratings:

- 1: Strong Disagree
- 2: Disagree
- 3: No Opinion
- 4: Agree
- 5: Strongly Agree

Please circle only ONE number for each question.

	Strongly Disagree				Strongly Agree
1. My supervisor was genuinely interested in my growth as a professional counselor.	1	2	3	4	5
2. My supervisor was professional in their dealings with me.	1	2	3	4	5
3. My supervisor created a setting of support.	1	2	3	4	5
4. I was treated as a professional by my supervisor.	1	2	3	4	5
5. My supervisor was dependable regarding their meetings with me.	1	2	3	4	5
6. My supervisor offered constructive feedback that assisted in improving my counseling skills.	1	2	3	4	5
7. My supervisor's requirements and expectations of me were fair.	1	2	3	4	5

	Strongly Disagree				Strongly Agree
8. My supervisor was interested in and aware of my experiences with my clients.	1	2	3	4	5
9. My supervisor provided timely feedback on my case notes.	1	2	3	4	5
10. My supervisor demonstrated cultural competence.	1	2	3	4	5
11. My supervisor helped me conceptualize my clients theoretically.	1	2	3	4	5
12. My supervisor supported my development of cultural competence.	1	2	3	4	5
13. My supervisor helped me increase and develop my self-awareness.	1	2	3	4	5
14. My supervisor helped me integrate knowledge and skills in working with my clients.	1	2	3	4	5
15. My supervisor created a balance of challenge and support.	1	2	3	4	5

Please comment on the following:

16. What do you feel you gained as a result of working with your supervisor?

17. What could have been done differently by your supervisor to make your experience more profitable?

18. Other Comments?

**Form 3: Informed Consent for Counseling - CMHC
Oregon State University Cascades
Counseling Academic Unit**

Student Information		
Student Name:		
Practicum/Internship Site:		
Academic Degree: MCoun	Program: Clinical Mental Health	Course:
Site Supervisor Information		
Site Supervisor's Name:		Title:
Phone:		Email:
University Supervisor Information		
University Supervisor's Name:		Title:
Phone:		Email:
Informed Consent		
Introduction		
<p>Please take time to read and understand this form. This informed consent document is intended to give you general information about my counseling services, which can include individual, small group, and large group counseling. If you have any questions about signing this document and/or would like a copy of this document, please ask me and I will provide you with this information. The Counseling unit at Oregon State University Cascades requires that I obtain your (and/or your parent/guardian's) signature, acknowledging that I have provided you with this information, before I provide you with any professional services. You may end this Agreement at any time.</p>		
Nature of Counseling		
<p>There may be both benefits and risks while participating in counseling. Counseling may improve your ability to relate with others, provide a clearer understanding of yourself, your values, and your goals. Since counseling may also involve discussing unpleasant parts of your life, you may also experience uncomfortable feelings. Counseling often leads to better relationships, solutions to specific problems, and significant improvement in feelings of distress. Please understand that there are no guarantees of what you will experience. Please discuss any questions you may have with me. You have the right to ask about or to decline any part of your counseling.</p>		
Legal/Court Proceedings		
<p>My aim is to support clients to achieve counseling goals, not to address legal issues that require an adversarial approach, such as divorce or custody proceedings. As a counseling intern, I am not a legal expert nor am I qualified to make assessments or recommendations to the court about any mental health or custody-related issues. Individuals (and/or parents or guardians) entering counseling are agreeing not to involve the student counselor, site or university supervisor, or OSU in legal or court proceedings or attempt to obtain records of treatment for adversarial legal or court proceedings. This policy prevents misuse of counseling for legal objectives.</p>		

Mental Health Emergencies (Harm to Self/Others)

In some instances, you might need immediate help at a time when I am unavailable. These emergencies may involve thoughts of harming yourself or others, or thoughts of committing dangerous acts. If you find yourself in any emergency situation and you are at school, please contact the site or university information listed on this form. If, for whatever reason, that option is not available to you, please contact one of the following:

- **9-1-1**
- Deschutes County Behavioral Health Crisis Line: **541-322-7500 (ext. 9 after hours)**

Local Emergency Rooms:

- St. Charles Hospital-Bend, 2500 NE Neff Road, Bend, OR 97701,
 - **(541) 382-4321**
- St. Charles Hospital-Redmond, 1253 NW Canal Blvd., Redmond, OR 97756,
 - **(541) 548-8131**
- Pioneer Memorial Hospital-Prineville, 1201 NE Elm St., Prineville, OR 97754,
 - **(541) 447-6254**

Supervision

You have the right to know the name of my supervisor(s) and how to contact them. Because of my training, my supervisor may ask about our counseling for confidential supervisory and training purposes. Occasionally, I may find it helpful to consult with other professional staff at the school about a case. If you don't object, I will not tell you about these consultations unless I feel that it is important our work together. I will note all consultations in my case notes.

Confidentiality

The law protects the privacy of all communications between a client and a counselor. In most situations, I can only release information about our professional relationship if you (and/or your parent/guardian) sign a written authorization form. There are some circumstances in which a counselor must share information without a client's consent. These circumstances are unusual. If such a situation arises, I will make every effort to fully discuss it with you before taking any action and will limit disclosure to what is necessary. These circumstances are defined by Oregon State law and include the following:

- If I learn of a specific intent to harm yourself or another person, or to commit an act of violence, it is the counselor's responsibility to protect you and others. The counselor will inform a family member, an intended victim, or law enforcement as appropriate.
- If I learn that harm or abuse has been done to a child (age 17 and younger), an elderly person, a disabled person, or a mentally ill person, the counselor will make a mandatory report to the appropriate authorities.
- If I am subpoenaed or court ordered to testify in court or to submit records, I may have to give information about you without your permission. Should that situation arise, I will make an effort to contact you. If I am unavailable, the instructor and/or clinical supervisor will disclose this information or appear in court.

Statement of Acknowledgment

I have read, or have had read to me, the above information and have had an opportunity to ask questions about it. I understand my rights to confidentiality, the exceptions to my rights to privacy, and that there are risks associated with counseling. I hereby consent to counseling or, in the event that my child is involved in counseling, I hereby give my consent for that child's counseling and affirm that I am the legal guardian with the authority to authorize counseling services.

**Informed Consent for Counseling
Signatures**

Client's Signature	Printed Name	Date
Signature of Parent/Guardian (if client is under 18)	Printed Name	Date
Student Counselor's Signature	Printed Name	Date
Site Supervisor's Signature	Printed Name	Date

**Form 4: Informed Consent for Video/Audio Recording- CMHC
Oregon State University Cascades
Counseling Academic Unit**

Student Information

Student Name:

Practicum/Internship Site:

Academic Degree: MCoun

**Program: Clinical Mental
Health**

Course & Quarter:

Site Supervisor Information

Site Supervisor's Name:

Title:

Phone:

Email:

University Supervisor Information

University Supervisor's Name:

Title:

Phone:

Email:

Informed Consent for Audio/Video Recording

As a graduate student, I am required to be under the direct supervision of qualified clinical supervisors. My supervisors review all aspects of the services that I am providing to you. You have the right to know the name of my supervisor(s) and how to contact them. This information is listed above. In addition, as part of my program and clinical supervision requirements, I electronically record my counseling sessions. These recordings are reviewed during clinical supervision for the purposes of facilitating my learning and effectiveness as a developing counselor. Recordings are kept secure and confidential, and they are never shared with any person who is not part of the OSU Counseling program. Recordings are erased after the clinical requirements have been met.

Your signature (as the client/and parent or guardian) below confirms that this form has been explained to you, and that you understand the following:

- I am not required and I am under no obligation to have counseling sessions recorded.
- I may withdraw my permission at any time during or after the recording session. My care will not change by my decision not to be recorded.
- I have the right to review my recording(s) with my student counselor during a counseling session.
- My student counselor receives supervision both at this location and by the faculty at Oregon State University Cascades.
- The contents of this recording will remain confidential within the supervision at OSU Cascades.
- Recordings are erased after the clinical requirements have been met.
- I may revoke this consent at any time by submitting to the student counselor a request to withdraw my (as the client, parent/guardian) permission.
- The original copy of this consent form will be kept in my records with this agency.
- This recording will only be used as a tool to help my student counselor in assisting me or my family.

**Informed Consent for Video/Audio Recording
Signatures**

Client's Signature

Printed Name

Date

Signature of Parent/Guardian (if client is under 18)

Printed Name

Date

Student Counselor's Signature

Printed Name

Date

Site Supervisor's Signature

Printed Name

Date

**Form 5: Parental/Guardian Permission/Consent Forms for School Counseling
Oregon State University Cascades (English)**

Dear Parent/Guardian,

My name is [your name] and I am enrolled as a Master of Counseling student at Oregon State University-Cascades in Bend, Oregon. I am currently in my school counseling internship (COUN 514/515), which includes working with students at [name of school]. I am under the supervision of the school counselor/administrator, [name of school counselor or administrator]. They can be reached at [site supervisor phone number] or by email at [site supervisor email]. I am also under the supervision of [university supervisor] at Oregon State University-Cascades. They can be reached at [phone number] or by email at [email]. Because of my training, my supervisors may ask about our counseling for confidential supervisory and training purposes. Occasionally, I may find it helpful to consult with other professional staff at the school about a case. If you don't object, I will not tell you about these consultations unless I feel that it is important to our work together.

The purpose of this document is to give you information about my school counseling services, which can include individual, small group, and large group counseling. If you have any questions about signing this document and/or would like a copy of this document, please ask me and I will provide you with this information. The Counseling unit at Oregon State University-Cascades requires that I obtain your (and/or your parent/guardian's) signature, acknowledging that I have provided you with this information, before I provide you with any professional services. You may end this Agreement at any time.

There may be both benefits and risks to participating in counseling. Counseling may improve a student's ability to relate with others, provide a clearer understanding of themselves, their values, and their personal and academic goals. Counseling often leads to better relationships, solutions to specific problems, and significant improvement in feelings of distress. Counseling can also bring about uncomfortable feelings. Please understand that there are no guarantees of what you will experience. Please discuss any questions you may have with me. You have the right to ask about or to decline any part of your counseling.

My aim is to support students to achieve counseling goals, not to address legal issues that require an adversarial approach, such as divorce or custody proceedings. Individuals (and/or parents or guardians) entering counseling are agreeing not to involve the student counselor, site or university supervisor, or OSU in legal or court proceedings or attempt to obtain records of treatment for adversarial legal or court proceedings. This policy prevents misuse of counseling for legal objectives.

In some instances, your dependent might need immediate help at a time when I am unavailable. These emergencies may involve thoughts of harming one's self or others, or thoughts of committing dangerous acts. If you or your dependent find yourselves in any emergency situation and you are at school, please contact the site supervisor information. If, for whatever reason, that option is not available to you, please contact community mental health resources available to and/or given to you by the school.

The law protects the privacy of all communications between a client and a counselor. In most situations, I can only release information about our professional relationship if you (and/or your parent/guardian) sign a written authorization form. There are some circumstances in which a counselor must share information without a student or parent/guardian's consent. These circumstances are unusual. If such a situation arises, I will make every effort to fully discuss it with you before taking any action and will limit disclosure to what is necessary. These circumstances are defined by Oregon State law and include the following:

- If I learn of a specific intent to harm yourself or another person, or to commit an act of violence, it is the counselor's responsibility to protect you and others. The counselor will inform a family member, an intended victim, or law enforcement as appropriate.

- If I learn that harm or abuse has been done to a child (age 17 and younger), an elderly person, a disabled person, or a mentally ill person, the counselor will make a mandatory report to the appropriate authorities.
- If I am subpoenaed or court ordered to testify in court or to submit records, I may have to give information about you without your permission. Should that situation arise, I will make an effort to contact you. If I am unavailable, the instructor and/or clinical supervisor will disclose this information or appear in court.

Statement of Acknowledgment

I have read, or have had read to me, the above information and have had an opportunity to ask questions about it. I understand my rights to confidentiality, the exceptions to my rights to privacy, and that there are risks associated with counseling. I hereby consent to counseling or, in the event that my child is involved in counseling, I hereby give my consent for that child’s counseling and affirm that I am the legal guardian with the authority to authorize counseling services.

Parental/Guardian Permission/Consent Form for School Counseling- Signatures		
Student Name		Parent/Guardian Name
Signature of Parent/Guardian (if student is under 18)		Date
Student Counselor’s Signature		Printed Name Date
Site Supervisor’s Signature		Printed Name Date

As part of my program and clinical supervision requirements, I electronically record my counseling sessions through a HIPPA compliant software platform. These recordings are reviewed during clinical supervision by my supervisors and/or supervision group for the purposes of facilitating my learning and effectiveness as a developing counselor. Recordings are kept secure and confidential, and they are never shared with any person who is not affiliated with the OSU Counseling program. Recordings are erased after the clinical requirements have been met.

Your signature (as the student/and parent or guardian) below confirms that this form has been explained to you, and that you understand the following:

- I am not required, and I am under no obligation, to have counseling sessions recorded;
- I may withdraw my permission at any time during or after the recording session.
- My (or my dependent’s) care will not change by my decision not to be recorded;
- The contents of this recording will remain confidential within the supervision at OSU Cascades and with my site supervisor;
- Recordings are erased after the clinical requirements have been met;
- I may revoke this consent at any time by submitting to the student counselor a request to withdraw my (as the student, parent/guardian) permission.
- The original copy of this consent form will be kept in my records with this school. This recording will only be used as a tool to help my student counselor in assisting me or my family.

Student Name		Parent/Guardian Name
--------------	--	----------------------

Signature of Parent/Guardian (if student is under 18)

Date

**Form 6: Parental/Guardian Permission/Consent Forms for School Counseling
Oregon State University Cascades (Spanish)**

Formulario de permiso / consentimiento de los padres para la práctica de consejería escolar

Estimado Padre / Tutor,

Mi nombre es [su nombre] y estoy matriculado como estudiante de Maestría en Consejería en Oregon State University Cascades en Bend, Oregon. Actualmente estoy en mi pasantía de consejería escolar (COUN 515), que incluye trabajar con estudiantes en [nombre de la escuela]. Estoy bajo la supervisión del consejer/administrador de la escuela, [nombre del consejero o administrador de la escuela]. Puede comunicarse con ellos en el [número de teléfono del supervisor del sitio] o por correo electrónico en el [correo electrónico del supervisor del sitio]. También estoy bajo la supervisión del [supervisor nombre] en Cascades de la Universidad Estatal de Oregon. Puede ser contactado al [] o por correo electrónico a []. Debido a mi capacitación, mis supervisores pueden preguntar acerca de nuestro asesoramiento con fines confidenciales de supervisión y capacitación. De vez en cuando, puedo encontrar útil consultar con otro personal profesional de la escuela sobre un caso. Si no se opone, no le hablaré de estas consultas a menos que crea que es importante nuestro trabajo conjunto.

El propósito de este documento es brindarle información sobre mis servicios de consejería escolar, que pueden incluir consejería individual, en grupos pequeños y en grupos grandes. Si tiene alguna pregunta sobre la firma de este documento y / o desea una copia de este documento, por favor pregúnteme y le proporcionaré esta información. La unidad de Consejería de Oregon State University Cascades requiere que obtenga su firma (y / o la de su padre / tutor), reconociendo que le he proporcionado esta información, antes de proporcionarle cualquier servicio profesional. Puede finalizar este Acuerdo en cualquier momento.

Puede haber beneficios y riesgos al participar en el asesoramiento. La consejería puede mejorar la capacidad de un estudiante para relacionarse con los demás, proporcionar una comprensión más clara de sí mismo, sus valores y sus metas personales y académicas. La consejería a menudo conduce a mejores relaciones, soluciones a problemas específicos y una mejora significativa en los sentimientos de angustia. La consejería también puede provocar sentimientos incómodos. Por favor entiendan que no hay garantías de lo que va a experimentar. Por favor discutir cualquier pregunta que pueda tener con mí. Usted tiene el derecho a preguntar acerca o rechazar cualquier parte de su asesoramiento.

Mi objetivo es ayudar a los estudiantes a lograr los objetivos de la consejería, no abordar cuestiones legales que requieran un enfoque contradictorio, como los procedimientos de divorcio o custodia. Las personas (y / o padres o tutores) que ingresan a la consejería están de acuerdo en no involucrar al consejero estudiantil, al supervisor del sitio o de la universidad, u OSU en procedimientos legales o judiciales ni a intentar obtener registros de tratamiento para procedimientos judiciales o legales contradictorios. Esta política evita el uso indebido del asesoramiento con fines legales.

En algunos casos, su dependiente puede necesitar ayuda inmediata cuando yo no esté disponible. Estas emergencias pueden involucrar pensamientos de hacerse daño a uno mismo oa otros, o pensamientos de cometer actos peligrosos. Si usted o su dependiente se encuentran en una situación de emergencia y se encuentran en la escuela, comuníquese con el sitio o con la información del supervisor de la universidad. Si, por cualquier motivo, esa opción no está disponible para usted, comuníquese con los recursos comunitarios de salud mental disponibles y / o proporcionados por la escuela.

La ley protege la privacidad de todas las comunicaciones entre un cliente y un consejero. En la mayoría de las situaciones, solo puedo divulgar información sobre nuestra relación profesional si usted (y / o su padre / tutor)

firma un formulario de autorización por escrito. Hay algunas circunstancias en las que un consejero debe compartir información sin un estudiante o padre / tutor consentimiento. Estas circunstancias son inusuales. Si por ejemplo una situación surge, yo voy a hacer todo lo posible para plenamente discutir que con usted antes de tomar cualquier acción y a limitar la divulgación de lo que es necesario. Estas circunstancias están definidas por la ley del estado de Oregon e incluyen lo siguiente:

- Si me entero de una intención específica de lastimarte a ti mismo oa otra persona, o de cometer un acto de violencia, es responsabilidad del consejero protegerte a ti y a los demás. El consejero informará a un miembro de la familia, la víctima prevista o la policía, según corresponda.
- Si me entero de que se ha hecho daño o abuso a un niño (de 17 años o menos), una persona mayor , una persona discapacitada o una persona con una enfermedad mental, el consejero hará un informe obligatorio a las autoridades correspondientes.
- Si me citan o me ordenan que testifique en el tribunal o que presente registros, es posible que tenga que brindar información sobre usted sin su permiso. En caso de que la situación surgir, me voy a hacer un esfuerzo de ponerse en contacto con usted. Si no estoy disponible, el instructor y / o supervisor clínico divulgarán esta información o comparecerán ante el tribunal.

Declaración de reconocimiento

He leído, o me han leído, la información anterior y he tenido la oportunidad de hacer preguntas al respecto. Entiendo mis derechos a la confidencialidad, las excepciones a mis derechos a la privacidad y que existen riesgos asociados con el asesoramiento. Por la presente doy mi consentimiento para la consejería o, en el caso de que mi hijo esté involucrado en la consejería, por la presente doy mi consentimiento para la consejería de ese niño y afirmo que soy el tutor legal con la autoridad para autorizar los servicios de consejería.

Nombre del estudiante _____ Nombre del padre / tutor

Firma del padre / tutor (si el estudiante es menor de 18 años) _____ Fecha:

Firma del Consejero Estudiantil _____ Fecha: _____

Firma del supervisor del sitio _____ Fecha: _____

Permiso de los padres / tutores para la grabación de video / audio

Como parte de mi programa y los requisitos de supervisión clínica, grabo electrónicamente mis sesiones de asesoramiento. Estas grabaciones son revisadas durante la supervisión clínica por mis supervisores y / o grupo de supervisión con el propósito de facilitar mi aprendizaje y efectividad como consejero en desarrollo. Las grabaciones se mantienen seguras y confidenciales, y nunca se comparten con ninguna persona que no esté afiliada al programa de consejería de OSU. Las grabaciones se borran una vez que se han cumplido los requisitos clínicos.

Su firma (como estudiante / padre o tutor) a continuación confirma que se le ha explicado este formulario y que comprende lo siguiente:

- No estoy obligado, ni tengo ninguna obligación, a que se graben las sesiones de asesoramiento ;
- Puedo retirar mi permiso en cualquier momento durante o después de la sesión de grabación.

- Mi cuidado (o el de mi dependiente) no cambiará por mi decisión de no ser registrado;
- El contenido de esta grabación permanecerá confidencial bajo la supervisión de OSU Cascades y con el supervisor de mi sitio;
- Las grabaciones se borran una vez que se han cumplido los requisitos clínicos ;
- Yo puedo revocar esta autorización en cualquier momento mediante la presentación a la estudiante consejero de una petición a retirar mi (como el estudiante, el padre / tutor) permiso.
- La copia original de este formulario de consentimiento se mantendrá en mis registros con esta escuela. Este registro será únicamente se utiliza como una herramienta para ayudar a mi consejero de estudiante en ayudar a mí o mi familia.

Nombre del Padre de Familia / Guardian _____

Firma del padre / tutor (si el estudiante es menor de 18 años) _____ Fecha: _____

**Form 7: Supervision Agreement
Oregon State University Cascades
Counseling Academic Unit**

(Based on the Supervisee's Bill of Rights)

The supervisory relationship is an experiential learning process that assists the supervisee in developing therapeutic and professional competence. Students, site supervisors, and faculty supervisors are required to uphold the ACA Code of Ethics and/or the ASCA Code of Ethics. The supervisor is ultimately responsible for the welfare of the supervisee's clients/students. This contract is designed to assist the supervisor and supervisee in establishing clear expectations about the supervisory process.

Introduction to the Supervisory Experience

Supervisee

- Introduce yourself and describe your academic background, counseling experiences, and training thus far.
- Describe the therapeutic skills you want to enhance and professional development opportunities you want to experience during your practicum/internship experience.
- Discuss your learning style and your developmental needs.
- Discuss your current ideas about your developing theoretical orientation.

Supervisor

- Introduce yourself; discuss your credentials, licenses, academic background, counseling experience, and your supervisory style.
- Describe your theory or model of supervision. This may include explanation of your supervisory role as: teacher, consultant, counselor, evaluator
- Describe your theory of counseling and how it influences your counseling and supervision style.
- Discuss your responsibilities: monitoring client/student welfare, teaching therapeutic skills, providing regular verbal and written feedback and evaluation, and ensuring compliance with legal, ethical, and professional standards.
- Ask the supervisee about their learning style and developmental needs.
- Help supervisee develop goals and counseling skills.

Expectations of the Supervisory Relationship

Supervisor & Supervisee

- Discuss your expectations of the supervisory relationship.
- Discuss how you will work towards establishing a positive and productive supervisory relationship.
- Discuss how you will address and resolve conflicts.
- The supervisory experience will increase the supervisee's awareness of feelings, thoughts, behaviors, and aspects of self, which are stimulated by the client/student. Discuss the role of the supervisor in assisting with this process.
- Share your thoughts with one another about the influence of power, privilege, oppression, positionality, and colonization on the counseling and the supervision process.

Supervision Agreement

Supervisee

- Describe how you would like to increase your awareness of personal, cultural assumptions, constructs, and ability to work with clients from diverse cultures.
- Clearly communicate, in advance, any anticipated absences from your internship site
- Come prepared each week with a thoughtful plan for supervision.

Supervisor

- If the supervisee needs to consult with you prior to the next supervision session, discuss how you would like to be contacted.
- If you are unavailable during a period of time, inform the supervisee of an alternate supervisor who will be available in your absence.
- Clearly communicate concerns with the supervisee and the university supervisor. Make sure the student has the opportunity to reasonably correct any deficit areas prior to formal evaluation.

Expectations of Supervisory Sessions

Supervisee

- Discuss your expectations about the learning process and interest in reviewing audiotapes, videotapes, and case notes.
 - Briefly discuss information you want to address during the supervisory meetings.
- Discuss your expectations for receiving feedback on client/student notes and documentation, formal assessments, group outlines, etc.

Supervisor

- Describe the structure and content of the weekly supervisory sessions.
- Discuss your expectations regarding supervisee preparedness for supervisory sessions (audiotapes, videotapes, case notes, research, theory integration, questions, ethical concerns, etc.)
- After the initial supervisory meeting, the supervisee and supervisor(s) can reestablish goals, expectations, and discuss roles of the supervisory process.
- During each supervisory session, the supervisee will review each client's/student's progress and relate specific concerns to the supervisor in a timely manner
- The weekly supervisory session will take place face-to-face in a professional environment that insures confidentiality. Decide the location, day, and time.

Expectations Regarding Evaluation

Supervisee

- Discuss your interest in receiving feedback in areas of counseling skill development, theory integration, dispositions, cultural factors, trauma-informed care, etc.

Supervisor

- Discuss your style of providing verbal feedback and evaluation.
- Review the Clinical Skills Evaluation; clarify specific items that need additional explanation.
- Review the Disposition Evaluation; clarify specific items that need additional explanation.
 - Please note, while the university supervisor is responsible for formally completing the Disposition evaluation, they may ask the site supervisor for feedback and information

Supervision Agreement

- Discuss the benefit of self-evaluation; provide a copy of self-evaluation forms, if helpful, and clarify specific items that need additional explanation.

Supervision Frequency Requirement

- Students enrolled in practicum and internship must receive an average of **one-hour of individual/triadic** supervision per week.
- Students enrolled in practicum and internship must receive an average of ninety minutes of group supervision each week.
- The MCoun program requires all students enrolled in internship to have a minimum of two site visits per academic year.

By the end of the first supervision, supervisors and supervisees should have clear expectations of:

- The content covered in this agreement
- Confidentiality and the importance of obtaining a written release from the client prior to consultation with other professionals who are serving the client. Supervisees should know where to find the relevant consent forms.
- The importance of recording and reviewing taped sessions. Discuss obtaining written consent from the client prior to recording. Supervisees should know where to find the relevant consent forms.
- During the initial counseling session, the supervisee will inform clients that they are in training and are being supervised.

By signing below, I acknowledge that I have fully read and understood the Supervision Agreement. I understand that if I have any questions or concerns about this policy, it is my responsibility to discuss this with my supervisor.

Supervisee's Name: _____ Signature _____ Date: _____

Supervisor's Name: _____ Signature _____ Date: _____