

**PRACTICUM AGREEMENT FORM**  
**MEd Counselor Education Program**  
**Department of Educational Psychology**  
**The University of Texas at Austin**

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

Student: \_\_\_\_\_ Agency: \_\_\_\_\_

This is a non-binding agreement that documents an initial understanding between this student--from The University of Texas Counselor Education Program-- and the agency providing practicum training. The purpose of this agreement is twofold; first, to serve as documentation for the Program to describe the nature of training this student is receiving (and later as reference on Internship and licensure applications); and secondly, to establish initial consensus between the training student and the practicum agency about their responsibilities to each other.

Starting date for practicum \_\_\_\_\_ Tentative date for ending \_\_\_\_\_

Practicum Agency will provide:

\_\_\_\_\_ hours/week of individual supervision (1 hr/wk minimum) by

\_\_\_\_\_  
Site Supervisor's name Title

\_\_\_\_\_ hours/week of group supervision/case conferencing

\_\_\_\_\_ hours/week counseling/advising case load (5 hrs/wk minimum)

\_\_\_\_\_ hours/week of other professional experiences to be distributed among:

- \_\_\_\_\_ crisis intervention
- \_\_\_\_\_ group presentations
- \_\_\_\_\_ parent meetings
- \_\_\_\_\_ intake assessment
- \_\_\_\_\_ writing case notes
- \_\_\_\_\_ administrative meetings
- \_\_\_\_\_ other: \_\_\_\_\_
- \_\_\_\_\_ other: \_\_\_\_\_
- \_\_\_\_\_ other: \_\_\_\_\_

Students will provide:

\_\_\_\_\_ hours/week to practicum duties (12-15 hours/week is expected)

Other activities considered important to practicum experience:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
Practicum Student

\_\_\_\_\_  
Supervisor's Phone

\_\_\_\_\_  
Supervisor's E-Mail

(A copy should be provided to MEd Practicum Instructor, Dept. of Educational Psychology,  
George I. Sánchez Building 504, Austin, TX 78712-1296 Fax: (512) 475-7641)