

INTERNSHIP CONTRACT CLINICAL PSYCHOLOGY PROGRAM

(Return this form to the Clinical Training Office.)

Type: CAPIC – Half Time; CAPIC – Full Time; APPIC – Half Time; APPIC – Full Time APA Accredited
Half Time Interns: First Half Time Internship; Second Half Time Internship
Contract: Initial Contract; Updated Contract **Student ID #** _____

Student Name: _____ Phone _____ email: _____
 Address _____ City _____ Zip _____

Name of Agency: _____ County _____
 Address _____ City _____ Zip _____
 Mailing Address (if different): _____ City _____ Zip _____

Primary Supervisor Name: _____ Degree _____ License _____ License # _____
 Phone _____ email: _____

Note to Supervisors/Directors: If this student is completing a half time internship at your site, you will be contacted by the Director of Clinical Training to review an individualized strategic plan for the 24 month internship experience. The goal is to ensure overall breadth, depth and focus if the internship years.

****Please verify: will students receive Supervision in Collecting Outcome Data on some services they provide?** YES NO (see pg. 2)

Practicum Activities: Please specify number of hours PER WEEK for each activity:

Half

Intervention Hours	↓	Assessment Hours	↓	Supervision Hours:	↓	Training Hours:	↓	Indirect Services:
Individual		Psych Testing/Assessment		Individual Supervision		Seminars		Admin/Paperwork
Group Therapy		Other:		Group Supervision		Cotherapy		Other:
Intake Interviewing				Case Conference		Didactic Trainings		
Other:						Other:		
TOTAL Intervention:		TOTAL Assessment:		TOTAL Supervision:		TOTAL Training:		TOTAL Indirect:

GRAND TOTALS:	↓
Total Hours Per Week for All 5 Activities:	
Number of weeks of contract:	
Total Proposed Hours for Year:	

Type of setting (e.g. hospital, school, outpatient, etc.) _____
Populations served: _____
Primary Theoretical Orientation: _____

Stipend? YES NO \$ Amount _____ per _____ **Contract Start Date:** _____ **Contract End Date:** _____
m/d/y m/d/y

Agreement to Contract: The student has reviewed all relevant training program information and agrees to fulfill the responsibilities and terms as outlined here and on the 2nd page. The agency agrees to provide training and supervision as indicated (see 2nd page). The primary supervisor will complete a midyear and final written evaluation of the student and the student will complete a written evaluation of the intern experience. Please print name, sign and date.

Student: _____ Signature _____ Date _____
 Primary Supervisor/Agency Director: _____ Signature _____ Date _____
 Argosy Training Director: _____ Signature _____ Date _____

Argosy University Clinical Psychology Internship Policies

The ARGOSY UNIVERSITY/SFBA Training Department is pleased that you have accepted our student for your Internship site. We are committed to facilitating a positive relationship between you and our student, and believe there is a mutual responsibility in insuring that this happens. Below are minimum standards that we have identified for each student and for the Internship site. By signing this *Internship Agreement*, the student, the Internship site Director, Primary Supervisor, and the Director of Training at ARGOSY UNIVERSITY/SFBA are committing to abide by these standards of practice and training.

This student agrees with the following:

- **Academics:** Is in good academic standing, has taken required courses, and is maintaining the required grade-point average for ARGOSY UNIVERSITY/SFBA students.
- **Conflicts:** Is currently not employed at the Internship site (please notify us if this is the case).
- **Malpractice:** Is fully covered under the ARGOSY UNIVERSITY malpractice liability insurance policy.
- **Commitment:** Makes a professional and ethical commitment to the site and to its personnel and clients in accepting this Internship placement.
- **Ethics:** Abides by a code of ethics and conduct as delineated by the American Psychological Association and other relevant mental health professions, such as counseling, social work, psychiatry, etc.
- **Requirements:** Is on site to meet the required number of hours for the Internship, as specified by the student's program at ARGOSY UNIVERSITY/SFBA. The minimum required hours for Half Time Internship is 750 per year, 1500 hours completed within 24 months. The minimum required hours for full Time Internship is 1500 to be completed with 12 months.
- **Communications:** To notify the Internship site Director and the ARGOSY UNIVERSITY/SFBA Clinical Training Director about any concerns, problems, or changes in his/her status as a student or intern.

The Internship site Director agrees to the following:

- **Supervisors:** Provide supervision by a licensed Psychologist that adheres to the CAPIC and/or APPIC membership Criteria.
- **Clinical Contact:** Provide the number of hours for Interns that adheres to the CAPIC and/or APPIC membership Criteria. **Other Training and Service:** In adherence to both the CAPIC and APPIC membership Criteria the Internship is an organized training program which, in contrast to supervised experience or on-the-job training, is designed to provide the Intern with a planned sequence of training experiences. The primary focus and purpose is assuring breadth and quality of training.
- **Evaluation Form:** Complete an *Internship Evaluation Form* at midyear and at the conclusion of the training (i.e., December and June) on the student's training progress. Review the student's *Internship Experience/Hours*, at the end of each evaluation which documents the hours the student performed in essential training activities.
- **Communication with Argosy:** Please be in contact with the Clinical Training Director at the Argosy Clinical Training Office to coordinate the training of the student and to communicate important information. We are committed to working with Internship sites to address concerns or problems regarding our students. We encourage you to contact us if significant problems exist with the student so we can work out solutions asap.
- **Overall:** a) provide a training program that is supported and understood by the administration and staff at the agency; b) provide a training milieu that is safe, supportive and challenging, with appropriate space to conduct clinical work; c) have agency personnel who emphasize responsiveness to cultural diversity, e.g., gender, race, sexual orientation, disability, and religion; and, d) abide by a code of conduct and ethics as delineated by mental health professions (e.g. psychology, counseling, social work, psychiatry etc.).

Student's Signature

Date

Primary Supervisor/Agency Director Signature

Date