

Clinical Internship (PSY 363) Proposal

Student's Name: _____

Faculty Member: _____

Agency: _____

Address: _____

Agency Supervisor: _____ Phone: _____

Activities and Responsibilities: The course requires that students spend 16 hours per week at the agency, during the weeks that the university has regular classes. The specific activities vary depending on the agency. List the primary activities and responsibilities at your site:

1. _____
2. _____
3. _____

Products expected:

1. Paper describing the organizational structure of the agency, the population served, the role of the agency in the community, referral sources, etc.
2. Activities log.

Method of evaluation: The overall grade will depend on the quality of the paper, evaluations provided by the agency supervisor, and the intern's overall progress as determined by the faculty member.

Student's Signature

Date

Faculty Member's Signature

Date

For Students who have a QPA less than 2.5:

The above student has my permission to take the practicum course (PSY 363)

Faculty Member's Signature