CPS Practicum/Internship

APPLICATION

Counselor Education

# Counseling and Psychological Services

Hudson Health Center, 3rd Floor

Ohio University

2021-2022

**COUNSELOR EDUCATION TRAINEESHIP APPLICATION**

**Counseling and Psychological Services**

**Ohio University**

We are pleased that you are considering a Counselor Trainee placement at Counseling and Psychological Services (CPS). The following information may be of assistance to you in your consideration of CPS:

1. You must have completed an introductory course or its equivalent in interviewing skills before beginning your CPS placement. Please identify your relevant course work including number of credit hours taken, and prior experience in interviewing.
2. You must have completed an introductory course or its equivalent in diagnosis prior to a CPS placement. Please identify your relevant course work including number of credit hours taken, as well as your prior experience in diagnosis.
3. CPS placements are for a full academic year, starting in the summer. The summer will serve as practicum experience. Fall and Spring semester will constitute the internship experience.
4. All students will need to participate in a 1.5 hour, once a week Graduate Professional Seminar (GPS) seminar/group supervision as part of their placement. These will most likely be held on Wednesday mornings. Please contact the Counseling Department representative at CPS, Rinda Scoggan, 740 593-1616 or [scoggan@ohio.edu](mailto:scoggan@ohio.edu) for details.
5. In compliance with university standards, an iBT no less than one year old, with an overall minimum of 80, and a speaking portion score of 24-30 OR a SPEAK test score of 230 or above.

A placement at CPS includes seeing Ohio University student clients from a variety of backgrounds and with a variety of concerns. Clients are seen in individual and occasionally, couples counseling. The opportunity to participate in emergency work and/or co-facilitate a group is available. Outreach Counseling Center experience is included as part of your traineeship. We at CPS believe that training future practitioners is part of our mission and therefore encourage you to participate in whatever activities we are engaged and which meet your own interests and/or career plans. We provide up to two hours of weekly one to one supervision per trainee. We also provide trainees with two hours of weekly group supervision and continuing education through our Professional Training and Development program.

Candidates for placement at CPS should complete a Counselor Education Traineeship Application and **return it** (1) in person “ATT: Rinda Scoggan” to the **Front Desk staff** on the **third floor of Hudson Health Center**, or (2) **via email** to Rinda Scoggan. ([scoggan@ohio.edu](mailto:scoggan@ohio.edu)). Additional packets can be obtained at CPS or by e-mailing Rinda Scoggan ([scoggan@ohio.edu](mailto:scoggan@ohio.edu)). Your application should include:

* Application Form
* Departmental Permission Form
* Academic Experience Worksheet
* Your current Vita
* Two Letters of Reference (one preferably from your Foundations of Counseling professor),
* An Unofficial Transcript

You may include any other material that you think may assist us in considering your application. If you meet the basic criteria for placement, you will be asked to interview with one or more CPS staff. Unfortunately, the number of students we can accommodate is limited and varies from year to year. **Applications for a placement beginning Spring 2021 will be due November 1st, 2020.** Applications will be reviewed and candidates interviewed on a first come basis until our available placement slots are filled.

If you have questions or concerns, please contact:

* Rinda Scoggan, LPCC-S., Assistant Training Director ([scoggan@ohio.edu](mailto:pride@ohio.edu))

The staff at Counseling and Psychological Services wishes you the very best in your chosen profession.

Thank you for your interest in CPS!

**Application Form**

**Counselor Education Traineeship**

**Counseling and Psychological Services**

**Ohio University**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Local Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Local or Cell# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree Sought\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the names of two Counseling professionals who are familiar with your work, one of whom must be an OU Counseling Department Faculty member:

1. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do we have your permission to contact other faculty members as well?

Yes\_\_\_\_\_\_No\_\_\_\_\_\_\_\_ If no please explain:

Please respond to the following questions on a separate sheet: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Why would you like a placement at Counseling and Psychological Services (CPS)?

2. Please describe past experiences, excluding coursework, relevant to a placement at CPS.

Your application should include the application form, permission from your department to apply, the academic worksheet, a Vita, two letters of reference (with one preferably from your Foundations of Counseling professor), and an unofficial transcript. You may include any other material that you think may assist us in considering your application. Unless indicated otherwise your application submission indicates your willingness to allow CPS reviewers to discuss your application with Counseling Department Faculty.

**Departmental Permission Form**

**Counselor Education Traineeship**

**Counseling and Psychological Services**

**Ohio University**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please print.

has my permission to apply to Ohio University Counseling and Psychological Services (CPS), 3rd Floor, Hudson Health Center as a potential traineeship site for a placement which would begin, Summer 2018.

**Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_**

**Advisor Program Director**

Please circle one

This form must be signed by either your advisor or the program director before submitting your completed application. Thank you.**Academic Experience Worksheet**

**Counselor Education Traineeship**

**Counseling and Psychological Services**

**Ohio University**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Required for placement at CPS:

Course Number Course Title Date Taken

EDCE 6620 Diagnosis & Treatment \_\_\_\_\_\_\_\_\_

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

Recommended: Date

Course Number Course Title Date Taken Planned to Take

(Or Equivalent)

EDCE 7600 Addictions Counseling \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

EDCE 6500 Groups I \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

EDCE 7320 Personality Appraisal \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

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

Optional Listing of Other Courses Relevant to Placement at CPS:

Course Number Course Title Date Taken