

LIU POST/LIU BRENTWOOD
DEPARTMENT OF COUNSELING AND DEVELOPMENT

INTERNSHIP PERMISSION FORM

Clinical Mental Health Counseling

_____ EDC 683 – Clinical Mental Health Counseling Internship I (300 hours)

_____ EDC 684 – Clinical Mental Health Counseling Internship II (300 hours)

_____ EDC 685 – Clinical Mental Health Counseling Internship III (300 hours)

_____ EDC 686 – Clinical Mental Health Counseling Internship IV (300 hours)

School Counseling

_____ EDC 690 – School Counseling Internship I (300 hours)

_____ EDC 691 – School Counseling Internship II (300 hours)

INTERNSHIP COURSE PROFESSOR: _____

*****Internship hours may not accrue until this signed Internship Permission form
is submitted to the Internship course professor*****

SEMESTER: Fall _____ Spring _____ Summer (CMHC only) _____ 20 _____

STUDENT INFORMATION

Name of Student: _____

Student's LIU Email Address: _____

The student listed above has received permission to complete his/her counseling placement at the following location:

SITE INFORMATION

NOTE: Students may not have two sites or two supervisors and split internship hours without the **prior** approval of the Chair, Department of Counseling and Development.

Name of Internship Site: _____

Address of Site: _____

Zip: _____ **Phone:** (_____) _____

SC Majors: Name of School District: _____

SITE SUPERVISOR INFORMATION

Name of Supervisor: _____

Credentials/Licenses/Certifications:

LMHC _____ **LCSW** _____ **Licensed Psychologist** _____ **Psychiatrist** _____ **RN** _____ **NP** _____

Permanent Certification SC _____ **Tenured SC** _____ **MS School Counseling** _____ **MA School Counseling** _____

Title: _____

Email Address: _____

Signature: _____ **Date:** _____

_____ **Site Supervisor: I have reviewed the power point presentation on supervision.**

(Site Supervisor's Initials) <http://ceit.liu.edu/CSD/MHSC.html> (right hand side of page)

- In a public school setting, the cooperating counselor must be tenured with permanent certification, or where there is no tenure track, have three years' experience and permanent certification in school counseling.
- In a mental health setting, an approved site supervisor must hold a license in one of the following categories:
 - LMHC (licensed mental health counselor)
 - LCSW (licensed clinical social worker) Please note LMSW is not acceptable
 - Licensed Psychologist
 - Psychiatrist
 - RN (registered nurse with 3 years mental health counseling experience)
 - NP (nurse practitioner with 3 years mental health counseling experience)