

PACIFICA GRADUATE INSTITUTE
M.A. COUNSELING PSYCHOLOGY
TRAINEESHIP TUTORIAL REQUEST and CONTRACT FORM

Student Name: _____
Please print

Track: ___ C ___ D ___ L

I am requesting a traineeship tutorial for the following time period:

_____ January 2 – January 31, 2010 [for CP 610 Clinical Practice I]

_____ April 1 – April 30, 2010 [for CP 611 Clinical Practice II]

_____ July 1 – August 15, 2010 [for CP 612 Clinical Practice III]

in order to extend the time period for attaining direct service hours within my traineeship at the following site:

I will accomplish these objectives by the following methods: _____

I understand that direct service hours consist of face-to-face individual, conjoint, family, or group psychotherapy, and that I must receive supervision on a weekly basis in order for my hours to qualify.

Student Signature: _____ Date: _____

Director of Clinical Training: _____ Date: _____

OR

Clinical Coordinator: _____ Date: _____

Registrar: _____ Date: _____

Business Office: _____ Date: _____

Procedure:

1. Complete and sign this form and submit it to the Counseling Psychology Traineeship Office.
2. The Director or Coordinator will sign the form and submit it to the Registrar.
3. The Registrar will send a copy of the contract to the Business Office and place the original in the student's file.
4. The Business Office will apply the traineeship tutorial fee to the student's account.