

PACIFICA GRADUATE INSTITUTE

REQUEST FOR PRACTICUM/TRAINEESHIP FILE CLOSURE

Before submitting this form, please review the checklist of supervised practicum requirements toward degree completion in the Supervised Practicum Guidelines

- Please permanently close my practicum/traineeship file and forward it to the Registrar's Office in preparation for my degree posting.*

Please be advised that I, _____
Print Student Name Track

will **no longer be accruing any pre-degree practicum hours**; please close my file as of ____/____/____.
Mo/Day/Yr

I have submitted all required closure forms (if applicable) including:

- Final Personal Therapy Documentation
 Final Supervisor's Evaluation
 Student Evaluation of Supervised Practicum Site
 Final Log of Hours
 An Updated Copy of Mal-Practice Insurance Certificate

*I am aware all practicum hours accrued prior to the posting of my degree must be documented by Pacifica and any practicum hours accrued during a lapse in either my Affiliation Agreement or Mal-Practice Liability Insurance do not count.

Student Signature

Date

Please submit completed form and supporting paperwork to:
Counseling Psychology Practicum Office
249 LAMBERT RD • CARPINTERIA, CA 93013 • TEL: 805-879-7379