

# ***School Psychology Internship Documentation***

*This document is primary source verified. It is **to be completed by the Director of Internship Training and returned directly to the LSBEP** at 4334 S. Sherwood Forest Blvd., Suite C150, Baton Rouge, LA 70816. This document will not be accepted if sent by the applicant.*

## **SUPERVISOR INFORMATION:**

Supervisor Name: \_\_\_\_\_

Professional License and/or Certification at the time of Supervision: \_\_\_\_\_

Address: \_\_\_\_\_ Office phone number: \_\_\_\_\_

\_\_\_\_\_ License/Certification number: \_\_\_\_\_

\_\_\_\_\_ State granted: \_\_\_\_\_

Supervisors Experience: Prior to the start of the supervisee's (applicant's) internship, did you have at least 3 years work experience in school psychology?     YES (list below)                       NO

| Date(s) | School/Institution | Supervisor |
|---------|--------------------|------------|
| _____   | _____              | _____      |
| _____   | _____              | _____      |
| _____   | _____              | _____      |

## **APPLICANT/SUPERVISEE INFORMATION:**

Supervisee Name: \_\_\_\_\_

Educational level: \_\_\_\_\_

Internship site: \_\_\_\_\_

Supervision site: \_\_\_\_\_

Dates of supervision covered in this report: From       /      /       To       /      /        
mm/dd/yymm/dd/yy

Total number of internship hours: \_\_\_\_\_ No. Mos. \_\_\_\_\_

Total number of practice client contact hours: \_\_\_\_\_ No. Mos. \_\_\_\_\_

Number of one-to-one supervisory hours per week: \_\_\_\_\_

\*Number of learning activities hours per week: \_\_\_\_\_

Supervisee's area of emphasis: \_\_\_\_\_

Assessment of supervisee's performance: \_\_\_\_\_

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Do you see any areas of practice that are beyond this applicant's competence or experience? \_\_\_\_\_ If so, explain \_\_\_\_\_

## *Internship Requirements*

(Completed and returned by Director of Internship Training)

I hereby verify on behalf of \_\_\_\_\_ (Applicant) that his/her Internship training program at \_\_\_\_\_ (Internship site) met the criteria in the Louisiana Administrative Code Title 46 §3403.A.1 through A.10 , at the time of their participation, and included a comprehensive, supervised, and carefully evaluated internship in school psychology that included the following:

|                                                                                                                                                                                                                                                                                                                                                            |                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1. a culminating experience in the program’s course of study that is completed for academic credit or otherwise documented by the program;                                                                                                                                                                                                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. a primary emphasis on providing breadth and quality of experiences, attainment of comprehensive school psychology competencies, and integration and application of the full range of domains of school psychology;                                                                                                                                      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. completion of activities and attainment of school psychology competencies that are consistent with the goals and objectives of the program and emphasize human diversity, and provision of school psychology services that result in direct, measurable, and children, families, schools, and/or other consumers;                                       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. inclusion of both formative and summative performance-based evaluations of interns that are completed by both program faculty and field-based supervisors, are systematic and comprehensive, and insure that interns demonstrate professional work characteristics and attain competencies needed for effective practice as school psychologists;       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. a minimum of 1200 clock hours, including a minimum of 600 hours of the internship completed in a school-based setting;                                                                                                                                                                                                                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. at least nine-month internship under the supervision of a certified school psychologist in a school setting or by a licensed psychologist in a community setting;                                                                                                                                                                                       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. completion in settings relevant to program objectives for intern competencies and direct oversight by the program to ensure appropriateness of the placement, activities, supervision, and collaboration with the placement sites and intern supervisors.                                                                                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. provision of field-based supervision from a school psychologist holding the appropriate state school psychologist credential for practice in a school setting or, if in a program approved alternative setting, field-based supervision from a psychologist holding the appropriate state psychology credential for practice in the internship setting; | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. an average of at least two hours of field-based supervision per full-time week or the equivalent for part-time placements; and                                                                                                                                                                                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 10. a written plan specifying collaborative responsibilities of the school psychology program and internship site in providing supervision and support ensuring that the internship objectives are achieved. ( <b>ATTACH DOCUMENTATION</b> )                                                                                                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Director of Internship Training: \_\_\_\_\_

Print Name

Signature \_\_\_\_\_ Date \_\_\_\_\_

*\*Learning activities are in addition to one-to-one supervision and may include such activities as: case conferences involving a case in which the intern is actively involved, clinical seminars, co-therapy with a staff member, group supervision, and additional supervision.*