BETWEEN-SEMESTER SUPERVISION AGREEMENT
School of Counseling and Human Services
Department of Counseling

Name: _______________________________  Semester/Yr: ____________________________

Field Site: ____________________________  Site Supervisor: ____________________________

This agreement, made between ____________________ / __________ (name of field site/site supervisor) and ________________ (name of student counselor) permits the student counselor to accumulate between-semester supervised direct and indirect counseling service hours at the field site.

It is understood that the University of North Texas Dallas and the counseling program faculty will provide no regular supervision services during this time period. It is understood that the field site supervisor will provide supervision services on average of one hour per week during the between-semester time period.

The Counseling Internship student will continue documenting direct and indirect hours on the Weekly Log form and will submit signed originals to the UNT Dallas Instructor of Record for the previous or subsequent Internship course enrollment.

The time period covered by this agreement begins on ___/____/____ and ends on ___/____/____.

____________________________________________________________  ____/____/____
(Agency Administrator, as applicable) (Date)

____________________________________________________________  ____/____/____
(Field Site Supervisor Signature) (Date)

____________________________________________________________  ____/____/____
(Graduate Counseling Student Signature) (Date)

____________________________________________________________  ____/____/____
(Internship Instructor) (Date)

Date received by Internship Coordinator ___/____/____  Approved  Yes  No
Signature: _____________________________________________