

SAMPLE CONTRACT (SHOULD NOT BE HANDWRITTEN)



Student's Name: _____

Comment [NA1]: Do not forget to put your name

NEW JERSEY CITY UNIVERSITY M.A. IN COUNSELING PROGRAM

CLINICAL MENTAL HEALTH COUNSELING PRACTICUM/INTERNSHIP AGREEMENT

Comment [CB2]: Make sure you are using the correct form for your program (Clinical Mental Health or School Counseling)

This Practicum/Internship Agreement ("Agreement") is completed on _____ between _____ (the "Practicum/Internship Site") whose business address is _____ and New Jersey City University (the "University") M.A. in Counseling Program whose business address is 2039 Kennedy Boulevard, Jersey City, New Jersey 07305.

Comment [NA3]: The date you bring the document to site.

Comment [CB4]: Name of your site.

Comment [CB5]: Address of your site

Terms:

The terms of this agreement shall begin on _____, and end on _____. Either party has the right to terminate this Agreement on a thirty (30) days prior written notice to the other at the addresses set forth in the first paragraph of this Agreement, provided that with respect to any internship committed to or commenced at the time of such notice, this Agreement shall remain in effect until the completion of such internship, subject to the right of _____ to withdraw a student from the internship program set forth in this Agreement.

Comment [CB6]: The beginning date of the semester

Comment [CB7]: The ending date of the semester + one or two weeks. In this way, if you cannot finish the hours in the semester to complete the hours.

IF YOU ARE PLANNING TO DO YOUR PRACTICUM, INTERNSHIP, AND INTERNSHIP II AT THE SAME SITE AND YOUR SITE AGREED WITH IT, THE ENDING DATE YOU WRITE WILL BE THE END OF THE SEMESTER YOU TAKE INTERNSHIP II (Also add one or two more weeks to the ending date of Internship II semester for the same aforementioned reason).

Comment [CB8]: Name of Site

Purpose:

The purpose of this Agreement is to provide qualified graduate students with a Practicum/Internship Counseling experience in the field of counseling.

Students in COUN 690 (Practicum) must complete supervised Practicum experiences that total a minimum of 100 clock hours. Forty (40) of those hours in Practicum must be in direct service to clients.

Students in COUN 694/695 (Internship I & II) must complete supervised Internship experiences that total a minimum of 300 clock hours, for each Internship Course. One hundred twenty (120) of those hours, for each Internship Course, must be in direct service to clients.

The University Agrees:

1. To assign a University Faculty Liaison to facilitate communication between the University and the Practicum/Internship Site.
2. To notify the student that he/she must adhere to administrative policies, rules, standards, schedules, and practices of the Practicum/Internship site.
3. That the University Faculty Liaison shall be available for consultation with both the Practicum Site Supervisor and students and shall immediately be contacted should any problem or change in relation to the student, site, or college occur.

4. That the University supervisor is responsible for the assignment of a fieldwork grade.
5. Report Writing, Record Keeping, Treatment Planning, Counseling Summaries
6. Individual Supervision
7. Group Supervision, Peer Supervision
8. Case Conferences, Staff Meetings
9. Other: _____

HIPAA Compliance:

The University acknowledges that Practicum/Internship Site must comply with the applicable portions of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), and the requirements of any regulations promulgated there under including without limitation the federal privacy regulations and the federal security standards. The parties agree that protected health information, as defined in 45 *CFR* 164.504, or individually identifiable health information, as defined in 42, *USC* 1320d (collectively “PHI”), concerning Practicum/Internship Site clients will be disclosed to the University faculty and students pursuant to this Agreement. The parties agree to implement appropriate safeguards to prevent the use or disclosure of any PHI. The University agrees that it shall inform and emphasize to faculty and students that, as a condition of participation in any Practicum/Internship program, its faculty and students shall keep PHU strictly confidential in accordance with Practicum/Internship Site policies and the requirements of state and federal law, including HIPAA. Faculty and students shall not disclose any such information to anyone else unless the Practicum/Internship Site’s HIPAA policies and procedures are followed. The University shall take reasonable steps so that all students and faculty are aware that PHI is confidential and must be treated as such and understand their obligations under HIPAA. The University shall specifically advise all students, faculty and officials that breaches of HIPAA shall be sufficient cause to have that person removed from participation in any Practicum/Internship Site program. The University agrees to promptly report to the Practicum/Internship Site any improper or unlawful use or disclosure of any PHI. The parties agree to make their respective internal practices, books, and records relating to the use and disclosure of PHI available to the Secretary of Health and Human Services to the extent required for determining compliance with HIPAA. Continued violations of this provision shall be considered a material breach of this Agreement. The HIPAA obligations shall survive termination of this Agreement.

IN WITNESS WHEREOF, and with full authority, the Parties hereto have executed this Agreement effective the date first above written.

FOR AND ON BEHALF OF

Site Facility Name

FOR AND ON BEHALF OF
NEW JERSEY CITY UNIVERSITY
M.A. IN COUNSELING PROGRAM

Comment [CB9]: Site Facility Name

Site Supervisor’s Signature

NJCU Counseling Program Chair

Comment [CB10]: Site Supervisor Signs

Comment [CB11]: NJCU Counseling Faculty signs.