

**Department of Counselor Education**

**2039 Kennedy Boulevard, Rossey Hall 536**

**Jersey City, NJ 07305-1597**

**Phone 201-200-3400/Fax 201-200-3405**

**Health Resources and Services Administration (HRSA)   
Behavioral Health Workforce Education and Training (BHWET) Stipend Program**

**Agency Verification Form**

Student’s Name:

Name of Internship Site:

Supervisor’s Name:

Phone Number: Email:

Supervisor’s Credentials (please attach a copy of resume/certification/licensure):

Agency Verification (please check (√) if applies):

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| --- | --- |
|  | Clinical work with clients across the lifespan to meet the increasing demand for behavioral health care services (mental health and/or substance abuse) in medically underserved communities (MUC) |
|  | Provide inter-professional learning experiences (learning experiences among a group of individuals from two or more profession such as nursing, psychiatry, social work, psychology) |
|  | Internship Placement for Spring 2019 and Fall 2019 |
|  | Internship Placement for Fall 2019 and Spring 2020 |