



School Counseling Supervision Contract

KENT STATE
UNIVERSITY

College of Education,
Health and
Human Services

This contract serves as verification and description of the counseling supervision provided by

_____ (supervisor) to _____ (supervisee), Counselor Trainee
enrolled in _____ (course title & #) at Kent State University for the _____ (semester & year).

PURPOSE, GOALS & OBJECTIVES

- Monitor and ensure welfare of clients seen by supervisee
- Promote development of supervisee's professional counselor identity and competence
- Fulfill academic requirement for supervisee's practicum and internship
- Fulfill requirements in preparation for supervisee's pursuit of counselor licensure (when applicable)

CONTEXT OF SERVICE

- One (1) clock hour of individual supervision weekly
- Supervision will revolve around counseling conducted with students seen at _____ (name of school)
- Individual supervision will be conducted on _____ (day of the week), from _____ - _____ (time)
- The supervisor will be adhering to specific models of supervision along with using progress notes and tape review

METHOD OF EVALUATION

- Feedback will be provided by the supervisor during each session, and a formal evaluation, using the program's standard evolution of student client skills, will be conducted at mid-term and at the end of the semester. A narrative evaluation may also be provided at mid-semester and at the end of the semester as an addendum to the objective evaluations completed.
- Specific feedback provided by supervisor will focus on supervisee's demonstrated counseling skills, professional behavior, and documentation.
- Supervisee will evaluate supervisor at mid-semester and at the end of the semester, using the programs standard evaluation from for evaluating supervisors. A narrative evaluation may also accompany the objective evaluations.

DUTIES AND RESPONSIBILITY OF SUPERVISOR

- Examine students presenting complaints and intervention methods
- View tapes of supervisee's counseling sessions outside of regularly scheduled supervision sessions
- Sign off on all student documentation
- Challenge supervisee to justify approach and techniques used
- Monitor supervisees basic attending skills
- Support supervisee's development as a counselor
- Present and model appropriate directives
- Intervene when student welfare is at risk
- Ensure that ethical guidelines are upheld
- Maintain weekly supervision case notes

DUTIES AND RESPONSIBILITIES OF SUPERVISEE

- Uphold ethical guidelines
- Review counseling session tapes in preparation for weekly supervision
- Be prepared to discuss all student cases; have student files, current and completed student case notes, and counseling session tapes ready to review in weekly supervision sessions
- Justify case conceptualizations made and approach the techniques used
- Complete case notes and place in appropriate student files
- Consult with field placement staff and supervisor in case of emergency
- Implement supervisor directives in subsequent sessions

SUPERVISORS SCOPE OF COMPETENCE (if applicable)

PROCEDURAL CONSIDERATIONS

- Supervisee’s written case notes, treatment plans, and videotapes will be reviewed and evaluated in session
- Issues related to supervisee’s professional development will be discussed
- Sessions will be used to discuss issues of conflict and failure of either party to abide by directives outlined here in contract. If concerns of either party are not resolved in supervision, the instructor and/or Dr. Lynne Guillot-Miller will be consulted.
- In the event of emergency, supervisee is to contact supervisor at _____.

SPECIFIC GOALS FOR THE SUPERVISEE

1. _____

2. _____

3. _____

4. _____

5. _____

We agree to the best of our ability to uphold the directives specified in this supervisor contract and to conduct our professional behavior according to the ethical principles of our professional association.

Supervisee: _____ Date: _____

Supervisor: _____ Date: _____

VERIFICATION OF SUBMISSION OF FEDERAL/STATE BACKGROUND CHECKS

School Administrator (Principal, Vice-Principal, Etc.): _____ Date: _____

My signature serves as verification that the student above (supervisee), has submitted a copy of their Federal/State Background Checks to our school.