

APPENDIX 3

Student Name _____ Date _____

Appendix 3

Wright State University

College of Education and Human Services, Department of Human Services 108 Allyn Hall, 3640

Colonel Glenn Highway, Dayton, OH 45435

Phone: 937.775.2075 Fax: 937.775.2042

Site Supervisor Information Sheet

***Please attach a copy of the site supervisor's most recent renewal license card

***Please submit 2 copies

Dr., Ms., Mr., Mrs. _____

_____ Site

Name _____

Site Address _____ City _____ St _____ Zip _____

Work Phone _____ Preferred Email Address _____

Present Position/Title _____

Professional Certification No. (if applicable) _____ Area _____

Authorizing State Board or State Dept. _____ Expiration Date _____

Counselor License No. (if applicable) _____

Authorizing State Board or State Dept. _____ Expiration Date _____

Number of years experience as Licensed/Certified Counselor _____

Have you supervised WSU counseling students in the past? Yes _____ No _____

Name of WSU student you will be supervising at this time _____

For PCC's only: Do you have current supervising counselor status with the Ohio Counselor,
Social Worker, Marriage & Family Therapist Board? Yes _____ No _____

Education: (please begin with the most recent)

Institution _____

Major _____

Degree/Year _____

Institution _____

Major _____

Degree/Year _____

Institution _____

Major _____

Degree/Year _____

Other Related Educational Experiences: (please begin with the most recent)

1 _____

2 _____

3 _____

Professional Experience: (please begin with the most recent)

Current Employer _____

Employer Address _____

Dates of Employment _____

Job Title _____

Please describe duties _____

Employer _____

Employer Address _____

Dates of Employment _____

Job Title _____

Please describe duties _____

Employer _____

Employer Address _____

Dates of Employment _____

Job Title _____

Please describe duties _____

Professional Affiliations:

1 _____

2 _____

3 _____

Supervisor Signature _____ Date _____

For your assistance with the education and training of Wright State University students, we would like to show our appreciation with a \$100 stipend, which is to be distributed the following semester. If the student has two supervisors, the stipend will be split between the two. If you are able to receive this stipend, please email our Practicum and Internship Graduate Assistant at hs10@wright.edu and he/she will send you the appropriate W-9 and OPERS forms for you to fill out and email back to her/him in order to receive payment for your supervisee. The Practicum and Internship Graduate Assistant will send several emails throughout the semester regarding requirements for individual versus organizational stipends. If at any time you need assistance, please feel free to call or email her/him: 937-775-3916 OR hs10@wright.edu.