



College of Arts, Humanities, and Social Sciences  
Department of Family Therapy

## **Supplementary Field Placement**

1. The Supplementary Field Placement Agreement shall be for interns to gain professional experience in the practice of marriage and family therapy which is in addition to their regular field placement sites, and which is generally brief in duration.
2. Interns will provide individual, couple, family, group, and organizational consultations. Interns may work in co-therapy formats, but only as a minority of their client contact hours.
3. Clients may include parents, children, couples, families, and where relevant, others such as service providers. Clients may represent a range of gender, age, class, religious, ethnic, and racial groups. The nature and type of services offered by the organization responsible for the Supplementary Field Placement site shall be clearly publicized. Clients shall be informed that the intern is a student from the graduate Marriage and Family Therapy program of Nova Southeastern University.
4. Initially, interns will receive orientation to the placement site as needed, and interns will have an appropriate location in which to see clients. On-site supervision will be provided. In addition, students will have individual supervision with a faculty supervisor.
5. Interns shall keep complete records of their clinical hours, and on-site supervisors will evaluate each intern for the period of the supplemental placement. Supervisors will evaluate students according to standard forms used by the faculty of Nova Southeastern University. Supervisors shall evaluate the interns' achievements and need for improvements in the areas of professionalism, clinical pragmatics, integration of theory and practice, and teamwork. These evaluations will be used to assist the faculty supervisor.
6. NSU faculty will be available at all times to discuss urgent needs or pressing situations. Placements may be discontinued at the discretion of either the on-site supervisors or NSU faculty. All professional activity will be conducted according to the laws of the state of Florida, and the rules of the Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling.



## Supplementary Field Placement

Contract Specifications (Please complete ALL information)

Student Status:

M.S.

Ph.D.

D.M.F.T

**Intern Name** \_\_\_\_\_ N# \_\_\_\_\_

Intern Phone (    ) \_\_\_\_\_ NSU Email address \_\_\_\_\_

Nova Southeastern University, Department of Family Therapy

3301 College Avenue Fort Lauderdale, Florida 33314

**Internship Site (Organization)** \_\_\_\_\_

Internship Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Internship Website \_\_\_\_\_

Contact Person: \_\_\_\_\_

Site Phone: (    ) \_\_\_\_\_ Email address \_\_\_\_\_

**Duration of Contract** From: \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Site Supervisor's Name, Degree(s), and Credentials: \_\_\_\_\_

Additions or modifications to contract: \_\_\_\_\_

### Signatures

\_\_\_\_\_  
Intern Name (Please Print Clearly)

\_\_\_\_\_/\_\_\_\_\_  
Signature /Date

\_\_\_\_\_  
Site Supervisor Name (Please Print Clearly)

\_\_\_\_\_/\_\_\_\_\_  
Signature /Date

\_\_\_\_\_  
Faculty Supervisor Name (Please Print Clearly)

\_\_\_\_\_/\_\_\_\_\_  
Signature: Date:

\_\_\_\_\_  
Program Director

\_\_\_\_\_/\_\_\_\_\_  
Signature /Date