

Letter of Understanding Between the Student and Site

Student Name: _____ AND Site Name: _____

The purpose of this agreement is to establish the parameters of the practicum relationship between the student and the site (i.e., Facility), and in particular, whether the practicum is a paid or non-paid practicum and the mechanism for the payment of any stipend for the practicum experience. Beginning and ending dates should be listed on this agreement.

The Facility and the Student agree as follows:

1. to explicitly establish and state any remuneration paid to the student from the facility as part of the clinical education experience, the commitments involved, and mechanism for supervision, and
2. to act in a non-discriminatory fashion with respect to race, color, creed, national origin, gender, sexual orientation, class, age, disability, and marital status, and
3. to maintain confidentiality of Student records and performance and patient information, and
4. and to provide and maintain a work environment that is free from harassment, discrimination, and violence

Complete the following four questions and sign the bottom of the form.

1. The practicum will be designated as paid or unpaid as follows:
 - A. ☐ The practicum is a NON-PAID practicum experience, or
 - B. ☐ The practicum is a PAID practicum experience. The student will receive a stipend of \$_____ per [CIRCLE ONE: hour, week, or month}. This stipend is to be paid on the _____ of every week/month and will be paid directly to the student from the facility.

2. The student will be on site at least _____ hours per week (Note: minimum of 20-25 hours per week) **CAP RULE - Exceptional circumstances only, perhaps once per semester, the student may have more practicum hours, with maximums of more than 25 hours per week.** If a student would like to be onsite for more than 25 hours per week on a regular basis, the student must complete the General Clinical Petition to get program approval to work additional hours.

3. The supervisor will provide at least _____ hour(s) of direct supervision per week (MINIMUM requirement: one hour per week).

Methods of Feedback/Evaluation: Students are required to have a minimum of one hour of direct supervision/observation per semester. This observation can be direct-in vivo, or through the use of audio or videotapes, one-way mirror, or electronic methods, such as Zoom.

The supervisor will provide at least _____ observations per semester.

If the primary supervisor is not onsite, a back-up supervisor will be identified to oversee the student's work. Students and supervisors understand that students cannot provide services when a supervisor is not onsite.

Student and Supervisor, please initial: _____

Secondary Supervisor's name: _____

4. The student will begin practicum ____/____/____.
The practicum experience will end on ____/____/____.

Student and supervisor have discussed plans for vacation and academic breaks. A brief description of the plan for the major breaks (winter holiday, spring break, internship, or other major events) follows (list in space below):