LEWIS & CLARK COLLEGE SCHOOL COUNSELING INTERNSHIP (SCED 516) PRE-AGREEMENT FORM

This Form Must Be Submitted As Soon As Placement Is Made.

Please Print Clearly - All Fields are Required

Student				
Address				
City	Zip Code	Phone	Phone	
Placement Level (choose only or	ne): Elementary	Middle School	High School	
Internship Site				
Site Address				
City	Zip Code	Phone		
School Principal				
On-Site Mentor				
Mentor's Degree/Discipline				
License and/or Certification(s)				
Years of Post-Master Counseling	g Experience			
This agreement is made on	by and between			
	(Date)		(Field site)	
	and Lewis & Clark Co	llege. This agreen	nent will be in effect from	
to)	for	per week.	
(Start date-mm/dd/yy)	(End date-mm/dd/yy)	(Number o		
(Intern Signature)			(Phone Number)	
(Site Mentor Signature)			ne Number)	

Your signature on this form indicates that all parties have read and understand in its entirety the information in the Macro Intern Manual.

This agreement form must be signed by the student and site mentor. One copy, along with a site mentor's resume, is returned to the student's Lewis & Clark Instructor no later than two weeks after placement at the internship site. The Lewis & Clark Instructor will bring the copy to the department for inclusion in your student file. The on-site mentor and the student should also keep copies of the signed agreement.