**APPLICATION TO EARN FIELDWORK HOURS AT EMPLOYER SITE**

Please review the [Policy for Earning School Counseling Fieldwork Hours at Employer Site](http://www.redlands.edu/study/schools-and-centers/school-of-education/advising-fieldwork--credentialing/fieldwork/) before proceeding. Then complete the following fillable form and return to the [Office of Student Success](mailto:oss@redlands.edu?subject=Request%20to%20earn%20School%20Counseling%20Fieldwork%20Hours%20at%20Place%20of%20Employment). Include written documentation from your employer as outlined in the policy mentioned above.

**Student Information**

Date       Student ID       Student Name

Address       Phone       UofR email

**Program Information**

Master’s in School Counseling  PPS Credential Program Start Term (ie. Fall 2018):

School Counseling, K-12  School Counseling, College  School Counseling, Combo

**Employment Information**

Employer       Employer website

Employer Address       Employer Phone

Title       Normal work schedule (days/hours)

How long have you been employed at this site?      in this profession?

**Direct Supervisor Information**

Direct Supervisor’s Name       Title

Direct Supervisor’s Phone       Email

**Placement Information**

Proposed weekly fieldwork schedule (days/hours)

Name of Proposed On-Site Supervisor       Title of Proposed On-Site Supervisor

Proposed On-Site Supervisor Phone:       Email:

Does proposed On-Site Supervisor hold PPS Credential?

Number of years On-site Supervisor has been a Counselor?

**REQUEST TO EARN FIELDWORK HOURS AT EMPLOYER SITE (cont’d)**

**Student Acknowledgement of Understanding**

I understand I must provide documentation of the following to the Office of Student Success in order for this request to be considered:

* Confirmation that my employer has an agreement on file with the University of Redlands and is on the approved list of field placement sites.
* Confirmation that my training environment will have clear boundaries between work and counseling training experiences.
* Confirmation that fieldwork hours will be conducted with students/clients who are different from the interaction that occurs during my normal duties as an employee at the site.
* Confirmation that my fieldwork schedule will be outside of my normal workday, unless written permission of release time is provided by my employer.
* Confirmation that I will be supervised by someone other than a person who has line authority to me.

I understand my request to earn fieldwork hours at my employer site will be reviewed by the Office of Student Success and the Department of Counseling and Human Services and that an incomplete application will result in an immediate denial.

I understand I will be notified of the decision by the Office of Student Success within 14 business days of receipt of application and that all decisions are final.

I agree not to start any fieldwork hours until approval is granted and assume responsibility for any delays related to the start of fieldwork hours. For this reason, I also understand that I have to seek sites other than my employment in case of application denial so that delays may not be substantial.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

***For Internal Use Only:***

**Request/documentation received on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Complete on: \_\_\_\_\_\_\_\_**

**Reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approved \_\_\_\_ Denied \_\_\_\_\_\_**

**Student Notified via email on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_**