Externship Site

Name
Address

Site:
- Outpatient
- Inpatient
- Community Mental Health
- Hospital
- Government
- School Placement
- University Counseling Center
- Private Practice

Population

- Adult
- Child
- Both

Special Population: If special population, please use this space to specify. Delete if not applicable.

Clinical Experiences

Extern Opportunities:
- Individual Therapy
- Group Therapy
- Couples Therapy
- Assessment
- Research

Therapy Model: Please use this space to describe site’s primary theoretical orientation and intervention modalities. Delete if not applicable.

Assessment: Please use this space to describe the types and names of assessments used. Delete if not applicable.

Supervision

Primary Supervisor/Training Director Name: Kristen Zygalas, PsyD - Supervisor
Leila Ford, PhD, Externship Training Coordinator
Primary Supervisor/Training Director Qualifications:

Supervision:  ✓ Individual (Frequency: Please list.)
              ___ Group (Frequency: Please list.)

Application

Deadline: Type here

Application Requirements:  ✓ CV
                          ✓ Cover Letter
                          ✓ Letters of Recommendation
                          ___ Phone Interview
                          ✓ In-Person Interview
                          ___ Other (Please specify.)