



Department of Speech-Language-Hearing Sciences  
Supervisory Agreement for Externship Placement

Semester:  Fall  Spring  Summer Year: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Placement Site: \_\_\_\_\_

Placement Address (midterm visit location):  
\_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Supervisor#2: Name: \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Supervisor #3: Name: \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Student's Weekly Schedule (days and times):

**Midterm Conference Scheduling**

Best Day/ Time to schedule a midterm site visit:

Do not schedule a conference at these days/ times:

Check your preference for conference method.

no preference/  in person/  video conference (Check Preference: \_\_\_ Facetime, \_\_\_ Skype, \_\_\_ Google Chat) / or \_\_\_ phone or conference call (Number to Use \_\_\_\_\_)

**Supervisor Affirmations: Check All and Sign**

- I have received information about the Loyola supervisor website and semester resources contained there.
- I have reviewed the schedule, facility policies/ procedures and my supervisory expectations with my student. (*Externship expectations checklist provided as a guideline*).
- I am aware to report any incidents or injuries involving the student directly to the Loyola Externship Director Dede Matrangola [dede@matrangola.com](mailto:dede@matrangola.com) 410-340-2409
- I affirm that my ASHA certification and state licensure will be valid and active throughout my supervision of the graduate student named above.
- If in Maryland only, I affirm that I meet the MD state requirement that SLPs engaged in student supervision have a minimum of 3 years of clinical experience (CFY plus 2 more years).

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\*Please return to Ms. Aguilar 1 week after placement start.

Email: [ejaguilar@loyola.edu](mailto:ejaguilar@loyola.edu), or Fax: (410) 617-7737 or hand delivered by student

## Clarifying Expectations for Supervisor and Student

<b>Logistics/Practicalities</b>	<b>Student Initial</b>	<b>Supervisor Initial</b>
1. Facility policies: start/end times, dress code, illness policy, calendar (days off), emergency procedures, safety concerns, etc.		
2. Use of down time – What are your expectations? Can it be used for planning, research, and/or personal time?		
3. Technology – Use of cellular phone, ipad, etc. Can it be used as a therapeutic tool, research tool, and/or for personal use during down time?		
<b>Intellectual Support</b>		
1. Observation – Expected length of time		
2. Teaching – What area(s) does the student feel (s)he might need more guidance or resources? What goals do the supervisor and student have for the semester?		
3. Level of independence – What does the supervisor expect of the student in terms of how much caseload they take over by which weeks of the semester?		
<b>Emotional Support</b>		
1. Open communication		
a. Mode – How will you communicate (phone, e-mail, text)? How quickly will you be able to respond?		
b. Questions – Student initiated or Supervisor prompted?		
c. Concerns – How should issues be resolved?		
2. Skill development		
a. Critical thinking – How can I challenge you?		
b. Experience – How can I enhance your learning?		
3. Career Development – How can I help? –Networking, interviewing (excused absence?)		
<b>Feedback</b>		
1. Type – Verbal, written, combination?		
2. Frequency – After each session, daily, weekly?		
3. Format – notebook, e-mail, etc.		
4. Manner – What will the feedback include? Positive/constructive feedback, suggestions/techniques, opportunities for self reflection, etc.		
<b>Work Responsibilities</b>		
1. Time management – What is expected to be done after hours?		
2. Written work – When should paperwork be completed? When/how do you expect evaluations to be completed?		