

**PCI Health Training Center
Texas Commission on Alcohol and Drug Abuse
Supervised Field Work Practicum Documentation of Hours**

STUDENT EVALUATION FORM

To be completed by the Practicum Supervisor

A. Demonstration of Professional Practice Dimensions

1. Clinical Evaluation: Screening & Assessment

Above Average Average Below Average

2. Treatment Planning

Above Average Average Below Average

3. Referral

Above Average Average Below Average

**4. Service Coordination: Implementing treatment plan,
Consulting, Continuing assessment/treatment, planning**

Above Average Average Below Average

**5. Counseling: Individual, group, Family, couples &
significant others**

Above Average Average Below Average

6. Client, Family & Community Education

Above Average Average Below Average

7. Documentation

Above Average Average Below Average

8. Professional & Ethical Responsibilities

Above Average Average Below Average

B. Knowledge of:

1. Signs and symptoms of chemical dependency

Above Average Average Below Average

2. Counseling approaches

Above Average Average Below Average

3. Continuum of Care

Above Average Average Below Average

4. Federal, State and Local Statutes

Above Average Average Below Average

5. Understanding of Agency

Above Average Average Below Average

C. Professional Characteristics

1. Standard of Work Quality

Above Average Average Below Average

2. Professional Appearance

Above Average Average Below Average

3. Compliance with Code of Ethics

Above Average Average Below Average

4. Tolerance of differences/sensitivity

Above Average Average Below Average

5. Initiative

Above Average Average Below Average

6. Use of Supervision/Evaluation

Above Average Average Below Average

7. Use of Knowledge Sources/Resources

Above Average Average Below Average

D. Personal Characteristics

1. Commitment to Self-care

Above Average Average Below Average

2. Responsibility

Above Average Average Below Average

3. Flexibility/adaptability

Above Average Average Below Average

4. Conceptual Ability

Above Average Average Below Average

5. Clarity of ideas

Above Average Average Below Average

E. Relationship

1. Clients

Above Average Average Below Average

2. Peers Above Average Average Below Average

3. Professional Staff Above Average Average Below Average

**PCI HEALTH TRAINING CENTER
 TEXAS COMMISSION ON ALCOHOL AND DRUG ABUSE
 SUPERVISED FIELD WORK DOCUMENTATION OF HOURS**

To be completed by the Counselor Intern

CI name: _____ Social Security #: _____
 Date 270 Education requirement was completed: _____
 Name of Training Institution: _____

To be completed by the Practicum Supervisor

Practicum Start Date: _____ Practicum End Date: _____
 Total Number of Hours: _____

Practicum Provider Facility

Name: _____ Phone: _____
 Site Address: _____ City: _____ State: _____ Zip: _____
 Practicum Supervisor Name: _____ Title: _____
 Credentials: _____

<u>Professional Practice Dimensions</u>	<u>At least 20 hrs in each</u>	<u>Initials of Supervisor</u>
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Clinical Evaluation		
Screening	_____	_____
Assessment	_____	_____
Treatment Planning		
Referral	_____	_____
Service Coordination		
Implementing Treatment Plan	_____	_____
Consulting	_____	_____
Continuing assessment & Treatment	_____	_____
Planning	_____	_____
Counseling		
Individual	_____	_____
Group	_____	_____
Family, Couples, Sig.Others	_____	_____
Client, Family, Community Education	_____	_____
Documentation	_____	_____
Professional & Ethical Responsibilities	_____	_____

Total Number of Hours: _____