

# Master of Arts in Counseling Saint Martin's University

## MAC 598 PRACTICUM INFORMATION FORM

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

Practicum Placement On-site Supervisor: \_\_\_\_\_

On-site Supervisor Phone #: \_\_\_\_\_ On-site Supervisor Email: \_\_\_\_\_

Name \_\_\_\_\_ Gender (optional) \_\_\_\_\_ Age (optional) \_\_\_\_\_

Ethnicity (optional) \_\_\_\_\_ Email \_\_\_\_\_ Phone Number: (best) \_\_\_\_\_

Presently employed? \_\_\_\_\_ Place of Employment \_\_\_\_\_

*Please be as thorough and specific as possible.*

1. What do you hope this course will help you accomplish? What is your curricular /learning agenda? What are your learning goals? (Please be specific.)
2. Please describe yourself as a learner. How do you learn best? What is your learning style? Have you taken the Myers-Briggs test? (If so, please list type.)
3. Please describe your previous exposure, training, or education regarding mind-body approaches in counseling.
4. How will you know, at the end of the semester, if you have reached your goals for this course? (Please be as **specific** as you can).
5. What do you bring to this course? What will you contribute?
6. Self-care is an important part of a good learning experience. Are you prepared to monitor your levels of challenge and support?
7. Are you willing to commit to being a supportive learning partner with all of us in this class?
8. There may be a class assistant offering support in this class. Will you take the opportunity to talk with them and the faculty about any concerns, challenges, or support that you might need? Is there anything you want faculty to know?