

# PSY 1900 SUPERVISED FIELD PLACEMENT LEARNING AGREEMENT

University of Pittsburgh

Department of Psychology

**PSY 1900 enrollment is limited to Psychology Majors Only**

## **PSYCHOLOGY ADVISOR AUTHORIZATION IS REQUIRED TO REGISTER FOR THIS COURSE.**

Parts A-C are to be completed by the student prior to presenting it to the field placement site supervisor for completion of parts D-F. Both the student and site supervisor must sign in part G.

Once the learning agreement has been signed by the Site Supervisor, the **student must make two copies of the completed, signed agreement BEFORE coming to the Advising Office for a permission number:**

one copy is for the Site Supervisor and one is for the student's records and the original remains in the Advising Office. **After** making copies, the student **THEN** brings the 2 copies **and** the original to the Psychology Advising Office in 3113 Sennott Square during walk in times to obtain a permission number. Walk-in hours are available on our website: <http://www.psychology.pitt.edu/undergraduate-advising>, or by calling the Advising Office, 412-624-4540. *You will not be able to register for this course, and thereby receive credit for this course, without a permission number from the Psychology Advising Office.*

### **PARTS A-C: To Be Completed by Student**

#### **Part A: Student Information (please print clearly)**

Student Name: \_\_\_\_\_ PeopleSoft ID : \_\_\_\_\_

PITT E-mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

<http://www.psychology.pitt.edu/undergraduate/experiential-learning/supervised-field-placement/supervised-field-placement-sites>

#### **Part B: Prerequisites**

Overall GPA\*: \_\_\_\_\_ Total # of Psychology Credits (\*Need 12 or more including current term): \_\_\_\_\_  
\*(Students must have a **2.75 GPA** or higher to enroll in this course)

I have met site specific requirements (circle one): YES \*NO (Requires site supervisor's signature in Part D)

#### **Part C: Registration Information**

Term (i.e., Fall 2009): \_\_\_\_\_ Number of Credits (1-3)\*: \_\_\_\_\_  
(1 credit=55 hours/2 credits=85 hours/3 credits=120 hours)

\* 3 credits maximum per term with the exception of the Allegheny County Medical Examiner's Office for 6 credits.

Have you completed an internship at this site in the past? (circle one) YES\*\* NO If YES, which term? \_\_\_\_\_

This course is offered on an **S/N basis only**.

**\*Students must be registered for PSY 1900 during the semester in which the Supervised Field Placement hours are begun. Hours completed prior to the registered semester will be considered volunteer hours and are not to be counted in hours completed for credit.**

\* Credit hours are determined by the number of hours the student successfully completes at the site. See the *Supervised Field Placement Guidelines* for more details.

\*\* A student may register for a maximum of 3 credits in any one term. A maximum of 6 credits may be earned at any one field placement site.

**Parts D-F To be Completed by Site Supervisor**

**Part D: Site information**

Site Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Agency: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**A minimum Overall GPA of 2.75 is required by the Dept. of Psychology (see part B). Site Supervisors may waive this requirement by signing below:**

*\*The student has apprised me of having an Overall GPA of \_\_\_\_\_ and I hereby waive the minimum GPA requirement.*

\_\_\_\_\_  
Signature of Site Supervisor / Date

**Part E: Supervision**

Supervisor: Describe the extent of your supervision, including frequency of meetings and method of evaluation\*:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Site supervisors will verify that students have completed the required hours at the end of the term. Forms will be sent to supervisors near the end of the term for evaluation.

**Part F: Evaluation criteria**

Student Responsibilities (What the student will do, who the student will work with, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Part G: To Be Signed by both the Student and Site Supervisor**

Student: By signing below, I agree to 1) fulfill the internship hours and duties listed above, and 2) submit a mid-term and end-of-term evaluation and required journals to the Psychology Advising Office by the published semester deadline.

\_\_\_\_\_  
*Student Signature*

Site Supervisor: By signing below, I agree to 1) provide direction/feedback to this student over the course of term, 2) monitor the student's hours, and 3) submit hours verification/evaluations to the Psychology Advising Office by the requested end-of-term deadline.

\_\_\_\_\_  
*Supervisor Signature*

REGISTRATION AUTHORIZATION:

\_\_\_\_\_  
*Psychology Advisor Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Class Number*

\_\_\_\_\_  
*Permission Number*