

15800 Calvary Road  
Kansas City, MO 64147-1341

**Course:** CO6930 A,B Counseling Internship I, II  
**Semester:** Available Every Semester  
**Credit:** 3 Semester Hours Each Semester  
**Instructor:** Doug Geiger, MA, LPC, NCC (douglas.geiger@calvary.edu)

Counseling internship is designed to facilitate refinement of counseling and interviewing skills and the development of new skills. Through closely supervised one-to-one and group counseling experiences, the student can expand counseling techniques, intervention and interpersonal relationship skills with opportunities to experience direct and specific feedback from the supervisors through video and/or audio recording and direct supervision. The focus of the field component of the course is to provide students with the opportunity to practice counseling skills in a supervised setting. Students are expected to meet with their site supervisor for individual supervision (one student & one supervisor) one hour each week. Students are expected to turn in a Weekly Supervision Report to their site supervisor each week. Site supervisors must meet the following criteria: a) minimum of a masters degree in counseling or closely related field; b) appropriate certification and/or licenses; c) 2 or more years of experience.

## I. DESCRIPTION

**CO6930 A Internship: Part I** - This course combines supervision, class work, and the practical utilization and critique of individual and group counseling techniques learned in CO614 – The Helping Relationship: Counseling Methods & Techniques. These will be demonstrated through fieldwork, case conference, and student video recordings. (Fee: \$250; Prerequisite: CO601, CO603, and CO639)

**CO6930 B Internship: Part II** This course combines supervision, class work, and the practical utilization and critique of individual and group counseling techniques learned in CO614 – The Helping Relationship: Counseling Methods & Techniques. These will be demonstrated through fieldwork, case conference, and student video recordings. (Fee: \$250; Prerequisite: CO601, CO603, CO639, and CO693A)

## II. OBJECTIVES

Upon successful completion of the course, students will be able to:

- A. Practice the elements of biblical counseling (PLO 1, 3, 4, 5).

- B. Explain their rationale for the counseling decisions used in a given case (PLO 1, 3, 4, 5).
- C. Demonstrate the basic skills needed to counsel others biblically (PLO 1, 3, 4, 5).
- D. Determine an appropriate biblical agenda and carry it out in counseling (PLO 1, 3, 4, 5).
- E. Examine their counseling experience and note areas of strength and weakness (PLO 1, 3, 4, 5).
- F. Demonstrate the process of biblical counseling under supervision and mentoring (PLO 1, 3, 4, 5).
- G. Practice basic interviewing and assessment skills (PLO 1, 3, 4, 5).
- H. Practice interpersonal skills required in effective counseling (PLO 1, 3, 4, 5).
- I. Plan counseling-related procedures in the areas of preparation, record keeping, materials used, homework assigned, follow-up, evaluation, referrals, etc. (depending on the kind of ministry) (PLO 1, 3, 4, 5).
- J. Produce a personal method of counseling as the foundation for a future counseling ministry (PLO 1, 3, 4, 5).

### III. REQUIREMENTS

1. **Clinical Documents as Prerequisite:** Students are required to have: current liability insurance, affiliation agreements, background check completed, child abuse registry check completed, supervision contract signed, Release of Information for faculty/site supervisor communication signed, and any other pertinent materials. (**Obj. A, B, C, D, E, F, G, H, I, J**)
2. **Clinical Policies:** Students are required to abide by the Affiliation Agreement, the Supervision Contract, ethics standards by the ACA. (**Obj. A, B, C, D, E, F, G, H, I, J**)
3. **Professional Membership & Liability Insurance:** Students are required to maintain professional membership in ACA and to renew their yearly membership in a timely manner in order for the membership not to lapse. Maintaining active membership is required in order to maintain the malpractice insurance provided by ACA. (**Obj. A, B, C, D, E, F, G, H, I, J**)
4. **Emergency Response Plan:** Students are required to document the policies and procedure for emergencies at any additional placement sites they have since Practicum. Student will document these plans on the form provided in class. (**Obj. A, B, C, D, E, F, G, H, I, J**)
5. **Case Presentations:** Students are expected to present cases as scheduled for group supervision and feedback. Students will present cases during Internship I, II, III with accompanying written presentation and an audio-video recording. Keep in mind that all client identifying information needs to be removed from paperwork. The recording is a professional presentation and will be audible and the contents easily understood to receive full points. The presentation should be 30-45 minutes in length. Presentation

outline documents are attached to this syllabus. **Students will be expected to present an intervention/ technique to the class during their presentation time.** Choose a theory to work with and demonstrate a technique consistent with that theory. **(Obj. A, B, C, D, E, F, G, H, I, J)**

6. **Students will also be expected to present an intervention to the class during their presentation time.** The intervention should include a written outline of intervention name, steps, and identified outcomes. Make sure the intervention is explained or demonstrated in a way that others can replicate it. **(Obj. A, B, C, D, E, F, G, H, I, J)**
7. **Demonstration of Documentation Skills.** Students are required to turn into their course instructor the following: **2 Diagnostic Intake Assessments, 2 Treatments plans, and 1 Termination Summary.** The first Diagnostic Intake Assessment and Treatment plan is due as outlined in the course schedule. The first set should use the forms attached to this syllabus. Students will turn in the additional Diagnostic Intake Assessment and Treatment plan with their case presentations. Since terminating with clients is unpredictable, students should turn in a termination summary at their earliest opportunity in order to receive feedback. All identifying information should be removed. Students may use the Internship site forms or the forms attached to this syllabus when turning in paperwork with their case presentations. **(Obj. A, B, C, D, E, F, G, H, I, J)**
8. **Self- Reflective Journaling:** Students are required to write on average one-half to one full page of written reflection (single spaced). Journals should focus on personal/professional impact of internship experience. **(Obj. A, B, C, D, E, F, G, H, I, J)**
9. **Attendance & Professionalism:** Students are expected to be consistent in their attendance of class and all required supervision. Students are to conduct themselves in a professional manner at their site, in supervision and for case presentations including being helpful and supportive of other students. **(Obj. A, B, C, D, E, F, G, H, I, J)**
10. **Site Supervision:** Students are expected to meet with their site supervisor for individual supervision (one student & one supervisor) one hour each week. Students are expected to turn in a Weekly Supervision Report to their site supervisor each week. Site supervisors must meet the following criteria: a) minimum of a masters degree in counseling or closely related field; b) appropriate certification and/or licenses; c) 2 or more years of experience. **(Obj. A, B, C, D, E, F, G, H, I, J)**
11. **Complete a minimum of 600 Internship hours:** Students are expected during their Internship experience to complete 600 Internship hours to include 240 of direct client contact in addition to the 100 Practicum hours previously completed for a total of 700 hours. If students completed more than 100 Practicum hours (but no more than 200 hours) students would complete the remainder of the 700 total required hours by the end of Internship III. **If students do not complete their hours at the end of Internship III they will be required to enroll in Internship IV.** **(Obj. A, B, C, D, E, F, G, H, I, J)**
12. **Internship Logs:** Student will be responsible for tracking their clinical activity each

week and then handing in their internship logs to their course instructor each month as marked on the syllabi schedule. Site supervisor must sign off on the Logs prior to turning them in. **(Obj. A, B, C, D, E, F, G, H, I, J)**

13. **Satisfactory demonstration of theory integration:** Students must satisfactorily demonstrate the ability to articulate and translate their theory of choice to the client population they work with. Use the language of your theory. **(Obj. A, B, C, D, E, F, G, H, I, J)**

14. **Evaluations:** Site and faculty supervisors will evaluate students at the end of the internship course. Students will also evaluate themselves, their placement site & site supervisor, and their faculty supervisor.

### **Final Grade**

The Final Grade will be based on the following criteria:

| Assignment                                    | Points | Percentage |
|---|--------|------------|
| 2 Diagnostic Intake Assessments (15 pts each) | 30     |            |
| 2 Treatment Plans (15 pts each)               | 30     |            |
| 1 Termination Summary (15 pts)                | 15     |            |
| 2 Case Presentation (60 pts per presentation) | 120    |            |
| 3 Logs (15 pts each)                          | 45     |            |
| 6 Journals (5 pts each)                       | 30     |            |
| Attendance & Participation                    | 30     |            |
| Total Points                                  | 300    |            |

### **Grading Scale:**

- A 93-100%
- A- 90-92%
- B+ 87-89%
- B 83-86%
- B- 80-82%
- C+ 77-79%
- C 73-76%
- C- 70-72%

\* a grade of a C or lower in this course is a failing grade and this class will need to be retaken\*

### **Required Text:**

Baird, B.N. (2014). *The Internship, Practicum, and Field Placement Handbook* (7th ed.). London: Routledge. ISBN: 978-1138478701. Price \$62.42

### Personal Evaluation Questions

**Directions:** Answer questions 1-16. The questions should be in bold font, with the answers in regular font below (5 pages double-spaced). This is to be done **after** your Internship Evaluation Form by your supervisor is complete.

1. I was satisfied with my total internship performance.

Yes \_\_\_\_\_ No \_\_\_\_\_ Somewhat \_\_\_\_\_

2. As a result of this internship, what concerns do you now have about your future career opportunities, abilities, attitudes, awareness, and relationships with others?

3. List areas you would have liked to have become involved in during your internship but were not able to:

4. What did you discover about your abilities and gifts?

5. What did you discover were difficulties in the internship?

6. What did you learn about relating to people?

7. What were the most fulfilling and joyful aspects of the internship?

8. List areas you need to review and rebuild.

9. Describe the relationship you had with the supervisor and/or team.

10. Do you feel more or less inclined to this career? Explain briefly why or why not.

11. Did you receive adequate supervision at the internship?

Yes \_\_\_\_\_ No \_\_\_\_\_

12. How could the experiences (responsibilities and supervision) be more effective and useful?

13. What did the supervisor and people with whom you worked appreciate most about you?

14. What did the supervisor and people with whom you worked appreciate least about you?

15. What do you think are your strengths?

16. What areas in your life need improvement?

**Note:** The student understands that he or she **MUST** complete all of the work to receive credit. **NO PARTIAL** credit is issued for this course. Upon satisfactory completion of the internship, the student receives 3 semester hours of credit issued in the semester of completion. **The student must register for this course the semester in which he/she is**

**working on the internship.** The student then pays for **all three hours** of credit. The counseling agency is to be approved by the instructor PRIOR to agreeing to do an internship for them.

### III. MATERIALS

#### A. Required Textbooks:

The Bible is a required textbook in every course at Calvary University. To facilitate academic level study, students are required to use for assignments and research an English translation or version of the Bible based on formal equivalence (*meaning that the translation is generally word-for-word from the original languages*), including any of the following: New American Standard (NASB), English Standard Version (ESV), New King James (NKJV), or King James (KJV). Other translations and versions based on dynamic equivalence (*paraphrases, and thought-for-thought translations like NLT and NIV*) may be used as supplemental sources. Please ask the professor if you have questions about a particular translation or version.

#### Required Text:

Baird, B.N. (2014). *The Internship, Practicum, and Field Placement Handbook* (7th ed.). London: Routledge. ISBN: 978-1138478701. Price \$62.42

#### Suggestions for Getting the Most from the Course

1. Read the contents of this syllabus. Ask necessary questions early in the semester, rather than later.
2. Respect confidentiality. Being actively involved in the class sessions in small groups entails some level of personal self-disclosure. Because of the nature of the vulnerability, trust, and openness needed to learn about counseling, it is extremely important that confidentiality be maintained.
3. Ask questions. The instructor is “user friendly”.
4. Participate in class discussions. What you have to say is important.

#### Expectations:

1. **Attendance and Participation:** It is expected that students will attend all class sessions except for serious illness or because of other unavoidable circumstances. They are responsible directly to the instructor to see that course requirements are met. **Excessive absence is defined as three per course** and will result in reduction of grade. Four or more absences will result in the student being withdrawn from the course and may delay completion of the program or lead to withdrawal from the program. Please see program manual for a full description of attendance policy. A student who is absent 30 minutes or more of the class (including late arrivals and/or early departures) may be counted absent. A

student who fails to exhibit a good faith effort of attention during the class may be counted as “absent”.

**Missing more than one week at the student's site(s) requires advanced notice and communication with their site supervisor and their practicum/internship instructor.**

2. **Classroom Behavior:** Important aspects of classroom behavior include the following:
  - Being on time, both at the beginning of class and after each break and remaining for the entire class.
  - Feedback to classmates must be respectful, delivered with sensitivity, and must be constructive.
  - Orderly and non-intrusive verbal exchange. This is especially important as conversations (verbal and non-verbal) between class members distract from a professional decorum and continuity of attention for class members, as well as the instructor.
3. **Cellular Phones and Computers:** Unless you are on call 24 hours a day for crises emergency, cellular phones and pagers must be turned off at all times. Those individuals who are required to be on call must have their cellular phones on a silent function. These individuals must also communicate this requirement to the faculty professor at the beginning of the semester. Internet or computer use while in class must be limited to course related content as directed and determined by the professor. Checking e-mail, instant messaging, and surfing the internet is unacceptable.
4. **Plagiarism:** Plagiarism is defined as copying any part of a book or paper without identifying the author. This also includes taking another person’s ideas and presenting them as your own. Any work that you turn in over the semester must be your own. All material that is taken from another source must be referenced. Individuals who do not comply with this will at a minimum receive a zero on the assignment and could be penalized as much as failing the class or being removed from the graduate program.
5. **Incompletes:** An incomplete (I) in a class can be given when, because of extreme circumstances, a student requires an extension of time to complete course work. [This will not include life difficulties such as malfunctioning equipment or technology or conflicting life commitments] An “I” grade may be granted only after having been arranged in conjunction with the instructor teaching the course. This will include working out the reason for the incomplete, filling out the necessary forms/paperwork and will include the grade to be given if the student fails to satisfy the requirements prior to the end of the following semester. In the event that the extreme circumstance continues, an extension can be granted at the discretion of the course professor.

#### IV. METHODS

- A. The internship will consist of counseling, observing, and hands-on practical experience under careful supervision.

**Writing Style**

All class papers *must* follow the APA style according to the revised 7<sup>th</sup> edition. For questions please consult the *Publication Manual of the American Psychological Association*, (7th ed.) or <http://owl.purdue.edu>.

**Late Work**

Papers, projects, etc. are due at the class period assigned. Late work will be accepted up to 1 week after the assignment is due. HOWEVER, there is a 1 letter grade reduction for each day the work is late. No late work will be accepted after 1 week.

**Disabilities Statement**

Students with disabilities have the responsibility of informing the Accommodations Support Coordinator ([aso@calvary.edu](mailto:aso@calvary.edu)) of any disabling condition that may require support.

**Learning Center**

The Clark Academic Center ([learning@calvary.edu](mailto:learning@calvary.edu)), located in the library building, is dedicated to providing free academic assistance for all students. Student tutors aid with all facets of the writing process, tutor in various subject areas, prepare students for exams and facilitate tests. Please take advantage of this service.



**CALVARY UNIVERSITY**  
**Supervisor Evaluation for Senior Internship—Field Education**

Student \_\_\_\_\_

Church or Agency \_\_\_\_\_

Supervisor \_\_\_\_\_

Date student began this position \_\_\_\_\_

**I. Describe the responsibilities assigned to this student this semester:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please rank this student by circling the number which is representative of your honest evaluation of his/her performance this semester.

**5 = Excellent, 4 = Good, 3 =Acceptable, 2 = Fair, 1 = Unsatisfactory, 0 = Not Applicable.**

**II. Personal Work Habits**

|                                  |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|
| Punctuality                      | 5 | 4 | 3 | 2 | 1 | 0 |
| Keeping appointments             | 5 | 4 | 3 | 2 | 1 | 0 |
| Handles absences responsibly     | 5 | 4 | 3 | 2 | 1 | 0 |
| Preparation for assignments      | 5 | 4 | 3 | 2 | 1 | 0 |
| Personal appearance              | 5 | 4 | 3 | 2 | 1 | 0 |
| Flexibility                      | 5 | 4 | 3 | 2 | 1 | 0 |
| Goes beyond minimal requirements | 5 | 4 | 3 | 2 | 1 | 0 |

Remarks: \_\_\_\_\_

\_\_\_\_\_

**III. Relation to Church or Agency**

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| Accepts setting limitations             | 5 | 4 | 3 | 2 | 1 | 0 |
| Meets agency obligations                | 5 | 4 | 3 | 2 | 1 | 0 |
| Understands agency goals and objectives | 5 | 4 | 3 | 2 | 1 | 0 |
| Committed to goals and objectives       | 5 | 4 | 3 | 2 | 1 | 0 |

Follows proper channels in functioning 5 4 3 2 1 0

Remarks: \_\_\_\_\_  
\_\_\_\_\_

**IV. Relationships with People**

|  |   |   |   |   |   |   |
|--|---|---|---|---|---|---|
| Able to relate with warmth and interest                  | 5 | 4 | 3 | 2 | 1 | 0 |
| Works comfortably with staff                             | 5 | 4 | 3 | 2 | 1 | 0 |
| Relates to individuals on a one-to-one basis             | 5 | 4 | 3 | 2 | 1 | 0 |
| Relates to individuals as a group                        | 5 | 4 | 3 | 2 | 1 | 0 |
| Relates to groups as a whole                             | 5 | 4 | 3 | 2 | 1 | 0 |
| Honest in feelings toward others                         | 5 | 4 | 3 | 2 | 1 | 0 |
| Assumes responsibility for his/her part in relationships | 5 | 4 | 3 | 2 | 1 | 0 |

Remarks: \_\_\_\_\_  
\_\_\_\_\_

**V. Functioning within Expected Role**

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| Exercises initiative in fulfilling assignments                              | 5 | 4 | 3 | 2 | 1 | 0 |
| Protects confidentiality  | 5 | 4 | 3 | 2 | 1 | 0 |
| Demonstrates ability to integrate classroom knowledge with field assignment | 5 | 4 | 3 | 2 | 1 | 0 |
| Understands the Christian ministry aspect of the program                    | 5 | 4 | 3 | 2 | 1 | 0 |
| Shows creativity in completion of tasks                                     | 5 | 4 | 3 | 2 | 1 | 0 |
| Displays good leadership qualities  | 5 | 4 | 3 | 2 | 1 | 0 |

Remarks: \_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_

Position \_\_\_\_\_

Date \_\_\_\_\_

Signature of Student \_\_\_\_\_

Date \_\_\_\_\_

**CALVARY UNIVERSITY**  
**Supervisor Evaluation for Counseling Internship—Field Education**

Student \_\_\_\_\_

Church or Agency \_\_\_\_\_

Supervisor \_\_\_\_\_

Date student began this position \_\_\_\_\_

**I. Describe the responsibilities assigned to this student this semester:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please rank this student by circling the number which is representative of your honest evaluation of his/her performance this semester.

**5 = Excellent, 4 = Good, 3 =Acceptable, 2 = Fair, 1 = Unsatisfactory, 0 = Not Applicable.**

**II. Personal Work Habits**

|                                  |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|
| Punctuality                      | 5 | 4 | 3 | 2 | 1 | 0 |
| Keeping appointments             | 5 | 4 | 3 | 2 | 1 | 0 |
| Handles absences responsibly     | 5 | 4 | 3 | 2 | 1 | 0 |
| Preparation for assignments      | 5 | 4 | 3 | 2 | 1 | 0 |
| Personal appearance              | 5 | 4 | 3 | 2 | 1 | 0 |
| Flexibility                      | 5 | 4 | 3 | 2 | 1 | 0 |
| Goes beyond minimal requirements | 5 | 4 | 3 | 2 | 1 | 0 |

Remarks: \_\_\_\_\_

\_\_\_\_\_

**III. Relation to Church or Agency**

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| Accepts setting limitations             | 5 | 4 | 3 | 2 | 1 | 0 |
| Meets agency obligations                | 5 | 4 | 3 | 2 | 1 | 0 |
| Understands agency goals and objectives | 5 | 4 | 3 | 2 | 1 | 0 |

|  |   |   |   |   |   |   |
|--|---|---|---|---|---|---|
| Committed to goals and objectives      | 5 | 4 | 3 | 2 | 1 | 0 |
| Follows proper channels in functioning | 5 | 4 | 3 | 2 | 1 | 0 |

Remarks: \_\_\_\_\_  
\_\_\_\_\_

**IV. Relationships with People**

|  |   |   |   |   |   |   |
|--|---|---|---|---|---|---|
| Able to relate with warmth and interest                  | 5 | 4 | 3 | 2 | 1 | 0 |
| Works comfortably with staff                             | 5 | 4 | 3 | 2 | 1 | 0 |
| Relates to individuals on a one-to-one basis             | 5 | 4 | 3 | 2 | 1 | 0 |
| Relates to individuals as a group                        | 5 | 4 | 3 | 2 | 1 | 0 |
| Relates to groups as a whole                             | 5 | 4 | 3 | 2 | 1 | 0 |
| Honest in feelings toward others                         | 5 | 4 | 3 | 2 | 1 | 0 |
| Assumes responsibility for his/her part in relationships | 5 | 4 | 3 | 2 | 1 | 0 |

Remarks: \_\_\_\_\_  
\_\_\_\_\_

**V. Functioning within Expected Role**

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| Exercises initiative in fulfilling assignments                              | 5 | 4 | 3 | 2 | 1 | 0 |
| Protects confidentiality  | 5 | 4 | 3 | 2 | 1 | 0 |
| Demonstrates ability to integrate classroom knowledge with field assignment | 5 | 4 | 3 | 2 | 1 | 0 |
| Understands the Christian ministry aspect of the program                    | 5 | 4 | 3 | 2 | 1 | 0 |
| Shows creativity in completion of tasks                                     | 5 | 4 | 3 | 2 | 1 | 0 |
| Displays good leadership qualities  | 5 | 4 | 3 | 2 | 1 | 0 |

Remarks: \_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_  
Position \_\_\_\_\_  
Date \_\_\_\_\_  
Signature of Student \_\_\_\_\_



## Case Presentation Format

### Written Presentation

- 1) Handout and review written case presentation as outlined in class
- 2) Peers and faculty are then given the opportunity to ask questions and or give feedback on quality and thoroughness of written work and presentation.

### Video Tape Presentation

- 1) The student first identifies questions that they would like their peers and faculty to pay extra special attention to in the video recording.
- 2) The student shows a fifteen to 20 minutes segment of their video recording. The faculty, student, or peers can stop the recording at any time if comments or clarifications are needed.
- 3) Discuss any multicultural considerations that impact this case to include gender, socioeconomic, ethnicity, and any other forms of diversity to be considered.
- 4) The student is then given the first opportunity to express personal feedback on him/herself.
- 5) The other students in the class and faculty are then given the opportunity to give feedback. It is important that the other students keep in mind the questions that were identified at the beginning by the student presenter. Other areas of potential feedback might include:
  - A) Observations of counselor/client non-relationship
  - B) Observations of techniques and skill in delivered in session
  - C) Observations of non-verbal behaviors
  - D) Observations of issues, both personal and professional, that might be barriers for the student
  - E) Observations of student strengths
- 6) The faculty member will act as the moderator and process observer.

### Wrap Up

- 1) The student will summarize the feedback and clearly identify what they have learned about themselves and their client.
- 2) The professor will also summarize the student's presentation and will re-emphasize areas of learning that can be applied to the entire class.

### INTAKE INTERVIEW

#### IDENTIFICATION DATA:

Name Leave Blank

Date of Intake 7/20/2014

DOB Leave Blank Age 43 Sex Male Place of Birth Leave Blank

#### PRESENTING PROBLEM:

(Description of Presenting Problem)

#### HISTORY OF THE PRESENTING PROBLEM:

(Symptoms, when began, stimulus, how long, previous occurrences, what have you done, prior treatment. Recent/anticipated losses, stress, or changes- relational/social/business?)

Family history of illness

Goals: How do you hope to be helped?

Is there any other information I should know?

Is there anything you are afraid of or anxious about regarding counseling?

### **ADDITIONAL HISTORY**

#### **FAMILY OF ORIGIN: GENOGRAM DRAWING**

Describe your father and mother and how you got along with them.

Father: (age, occupation, education, health, alcohol/drug use, deceased, personality)

Mother: (age, occupation, education, health, alcohol/drug use, deceased, personality)

Parents: Married/Separated/Divorced/Remarried: Which \_\_\_\_\_

Deceased: Which \_\_\_\_\_

Raised by parents? If not, by who?

Siblings: (age, occupation, education, health, alcohol/drug use, general description)

Describe family atmosphere while growing up:

|                                       |   |                                      |
|---------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> affectionate | <input type="checkbox"/> angry          | <input type="checkbox"/> cold        |
| <input type="checkbox"/> rigid        | <input type="checkbox"/> democratic     | <input type="checkbox"/> supportive  |
| <input type="checkbox"/> neglectful   | <input type="checkbox"/> overprotective | <input type="checkbox"/> frightening |
| <input type="checkbox"/> distant      | <input type="checkbox"/> trusting       | <input type="checkbox"/> competitive |
| <input type="checkbox"/> close        | <input type="checkbox"/> stable         | <input type="checkbox"/> other:      |

### **MARRIAGE/FAMILY**

Marital Status: Single/Married/Separated/Divorced/Widowed/Unmarried living together  
(Marriage date, ages when married, length of courtship and engagement, relationship, ever separated, ever file for divorce, either previously married, sexually satisfied, feelings re:



current/past sex experiences. Dating, how intimate is relationship, are they comfortable with present situation. If not dating, have they in the past, longest relationship.)

Spouse (Age, education, occupation, health, alcohol/drug use, general description)

Present living situation (where, with whom, how do they get along)

Children: (age, occupation, married?, who were parents, health, alcohol/drug use, general description)

### **MEDICAL:**

Rate your health, Recent weight changes? Eating/exercise/sleep habits. Current/past med. Conditions (illness/surgery/accidents)

Any current medications? (prescription or non, type, dosage, reason)

Have you experience any health problems in last 6 months?

|  |  |                                       |                                    |
|--|--|---------------------------------------|------------------------------------|
| <input type="checkbox"/> Abortions       | <input type="checkbox"/> Alcohol Use         | <input type="checkbox"/> Back Pain    | <input type="checkbox"/> Blackouts |
| <input type="checkbox"/> Chest Pain      | <input type="checkbox"/> Compulsive Dieting  | <input type="checkbox"/> Dizzy Spells |                                    |
| <input type="checkbox"/> Drug Use        |  |                                       |                                    |
| <input type="checkbox"/> Fainting        | <input type="checkbox"/> Stomach Discomfort  | <input type="checkbox"/> Hypertension |                                    |
| <input type="checkbox"/> Impaired Vision |  |                                       |                                    |
| <input type="checkbox"/> Miscarriages    | <input type="checkbox"/> Muscle Spasms       | <input type="checkbox"/> Numbness     |                                    |
| <input type="checkbox"/> Pregnancies     |  |                                       |                                    |
| <input type="checkbox"/> Seizures        | <input type="checkbox"/> Sexual Difficulties | <input type="checkbox"/> Headaches    | <input type="checkbox"/> Tobacco   |
| Use                                      |  |                                       |                                    |
| <input type="checkbox"/> Tremors         | <input type="checkbox"/> Vomiting            | <input type="checkbox"/> Weight Gain  | <input type="checkbox"/> Weight    |
| Loss                                     |  |                                       |                                    |

(Findings of recent medical exam, if applicable)

Prior hospitalizations: (physical, emotional, alcohol/drug)

### **MENTAL HEALTH**

(Mental health services utilization)

Present contact with person/agency providing psy./med./specialized personal assistance, e.g, MD, psychiatrist, psychol, social worker, counselor, speech therapist, pastor) (where/when/with who/ for what)

Previous contact with such persons? (where/when/with who/for what)

Any family history of: Depression/anxiety/mood swings/schizophrenia/suicide attempts/emotional illness

Physical violence/sexual abuse? (present/past)

Ever suffered a severe emotional upset?

**ALCOHOL/DRUG HISTORY:**

(age of first use, frequency, quantity/type)

Heaviest period of substance abuse

Reasons you abuse? (lonely/angry/frustrated/tired/tense/other)

Alcohol Symptoms:

Hangovers                       Complaints                       Futile attempts to stop  
 Pass outs                       Employment                       Personality Changes  
 Blackouts                       Morning Drinking                       Loss of Control (Drink more than planned)

Longest period of abstinence: (when? How start again?)

Describe relationship with alcohol?

(Normal/social/problem/abusive/dependent/addictive/alcoholic-chronic)

Drug Use

Marijuana                       LSD-Acid                       Mushrooms                       Coke-Crack  
 Opiates                       Crank-Amphetamines                       Tobacco                       Other: \_\_\_\_\_

**LEGAL STRESSORS:**

On probation? Yes    No    PO:

Reason:

How Long:

Current Litigation

History: Juvenile –MHP  
Adult: Assault:

Open Container:  
DUII:

Vandal Mischief:  
Other:

Military? (Type of discharge)

**EDUCATION/OCCUPATION:**

(Current year in school, major, present grades [GPA], grades in H.S. [GPA], other training, other schools attended)

**EMPLOYMENT AND ECONOMIC:**

(Occupation, place of employment, how long, previous jobs)

**SOCIAL:**

(friendships, quality and quantity, social activity, etc.)

**RELIGIOUS BACKGROUND:**

Do you consider yourself a religious/spiritual person? Yes No Denomination  
preference\_\_\_\_\_

Do you go to church? Yes No Church attendance/month 0 1-2 3-4 5-6 7+

Childhood church attended (baptized? Y  
N)\_\_\_\_\_

Do you believe in God? Y N Do you pray to God? Y N (never/occasionally/often/only when  
in trouble)

Any recent religious changes in your life?

**IS THERE ANY OTHER INFORMATION I SHOULD KNOW?**

**MENTAL STATUS:**

Mr/s/ \_\_\_\_ is a \_\_\_\_y.o (marital, race, sex) who is currently employed as a(n)\_\_\_\_\_.

Suicide/Homicide: Yes            No

GROOMING: neat/clean/casually dressed/ age appropriate/ dishelved/ body odor

POSTURE: erect/stiff/relaxed/slumped/guarded/restless

BEHAVIOR: late/walk/facial expression/odd

mannerisms/seductive/comfortable/gestures/tics/activity

EYE CONTACT: good/occasional/brief/minimal/avoids/none

ATTITUDE:

friendly/open/cooperative/reserved/aloof/indifferent/defensive/hostile/resistive/angry

SPEECH: normal/coherent/accent/impediments/slang/vulgar/relevant/cautious/neologisms/rate:

tone:

THOUGHT FLOW: normal/clear/blocking/indecisive/circumstantial/tangential/perseverative

THOUGHT CONTENT:

normal/logical/delusions/hallucinations/suspicious/hopeless/phobic/antisocial

MOOD: stable/situationally

appropriate/labile/elevated/flat/anxious/expansive/grandiose/depressed

ORIENTATION: 3-spheres/mild/moderate/severely disoriented

MEMORY: accurate/detailed/uncertain/vague/reliable/not reliable/less than reliable

INTELLIGENCE: below avg/avg/above avg/concrete

DEFENSES: humor/anger/passive-aggressive/denial/minimization/projection/dependence

INSIGHT/JUDGMENT: limited/minimal/good/poor/questionable/poor/ day to day

Serial 7's (Count backwards from 100 by 7's)

Prognosis \_\_\_\_poor    \_\_\_\_fair    \_\_\_\_good    \_\_\_\_excellent

As a result, it is concluded that the following is (not) a reliable evaluation of

Mr/Ms.\_\_\_\_\_

**CURRENT DSM-5 DIAGNOSIS:****DEVELOPMENTAL HISTORY: (optional)**

Mothers/Pregnancy and delivery? (Walking, talking, toilet training)

Family living situation at the time?

Outstanding event of preschool years

Grade school experiences (outstanding events from age 14-adult)

Jr. and Sr. high experiences (outstanding events from age 14-adult).

Age started dating: (Describe experience)

### **16-Week Accountability**

After the internship has been confirmed by the agency, the Biblical Counseling Department Chair will set dates for accountability. The student must turn in assignments via Canvas at each checkpoint. Work needs to be turned in by midnight on Monday each week. A new week begins Tuesday morning. **You are free to work ahead—just be sure to identify all work.**