

Western Seminary Sacramento  
Department of Marital and Family Therapy

## Practicum Manual (Electronic Version)

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*This is the electronic version of the Practicum Manual. Official BBS forms are not included in this document; however, you will find hyperlinks to each official form.*

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## SECTION I: BECOMING A MARRIAGE AND FAMILY THERAPIST

This section provides a brief overview of the process of becoming a licensed Marriage and Family Therapist (MFT) with the State of California's Board of Behavioral Sciences (BBS).

### A. General Requirements for Licensure

In order to obtain licensure as an MFT, applicants must complete an accredited graduate degree program, complete 3,000 hours of experience under a qualified supervisor and pass written exams administered by the BBS.

1. Complete an Accredited Degree Program
  - a. Western Seminary is accredited through the Western Association of Schools and Colleges (WASC) and is recognized by the BBS as an accredited school.
  - b. For a complete listing of accredited schools, view "[Accredited Schools with MFT Programs](#)" on the BBS website.
2. Complete 3,000 Hours of Experience
  - a. These hours must be completed under a qualified supervisor.
  - b. A maximum of 1300 (and minimum of 250) hours may be completed as a student during the practicum experience.
  - c. These hours must meet the BBS requirements for experience. For a detailed breakdown of required hours for licensure, see "[Section V: Weekly Summary Hours of Experience](#)" or view the "[MFT Experience Categories: Summary of Hours Permitted/Required](#)" document on the BBS website.
3. Pass Written Exams
  - a. There are two sections of the MFT written exams:
    - [MFT Standard Written Examination](#)
    - [MFT Written Clinical Vignette Examination](#)
  - b. View detailed information under the "[Exam](#)" section on the BBS website.

### B. Job Descriptions Throughout the Licensing Process

Throughout the licensing process, a candidate will have several different titles. These titles each have unique "job descriptions":

1. MFT Trainee: An MFT Trainee is a student who is currently enrolled in an accredited MFT graduate program, is unlicensed, has completed a minimum of 12 units of coursework including practicum prerequisites (see [Section II](#)) and sees clients as an MFT Trainee under licensed supervision.
2. MFT Intern: An MFT Intern is an unlicensed person who holds a degree from an accredited MFT graduate program, is registered with the BBS and sees clients as an MFT intern under licensed supervision.
3. MFT: An MFT is a licensed Marital and Family Therapist who holds a degree from an accredited MFT graduate program, has fulfilled the experiential requirements (3,000 hours), has passed written exams administered by the BBS and has applied for and received a license from the BBS. A licensed

MFT is required to meet Continuing Education (CE) requirements each licensing period.

For more information, review the “[Navigating the Licensing Process](#)” article in the Appendix or visit the BBS website at [www.bbs.ca.gov](http://www.bbs.ca.gov).

## SECTION II: UNDERSTANDING PRACTICUM

### A. What is Practicum?

1. Practicum (I, II and III) is the name of a series of three required two-unit courses (CNS 530: Practicum I, CNS 531: Practicum II and CNS 532: Practicum III). These courses are designed to support and educate students who are completing hours as an MFT Trainee. **Please note: you are required to be enrolled in a Practicum course if you are seeing clients as a Trainee. If you have completed the required courses (Practicum I, II and III) you must be enrolled in Advanced Practicum (CNS 539) to continue seeing clients.**
2. Practicum is the graduate-level clinical experience required of all MFT students. This clinical experience must be performed at an approved Practicum Site with a qualified Supervisor (see "[Section III: Practicum Site Resources](#)" for requirements). All Practicum hours are logged for conferral of the MFT degree and most Practicum hours can be counted towards licensure as an MFT (See "[Practicum Hour Requirements](#)" below).

### B. Practicum Prerequisites

The BBS requires that MFT students complete at least 12 units of coursework before beginning Practicum. Western Seminary has designated the following courses as Practicum prerequisites:

|       |  |
|-------|--|
| _____ | CNS501: Clinical Foundations                 |
| _____ | CNS 502: Psychological Theory and Techniques |
| _____ | CNS 504: Psychotherapeutic Systems           |
| _____ | CNS 505: Psychopathology                     |
| _____ | CNS 506: Legal and Ethical Issues            |
| _____ | CNS507: Human Life Span Development          |

### C. Practicum Hour Requirements

1. Minimum Hour Requirements
  - a. All students are required by the BBS to complete three Practicum courses and a minimum of 250 hours (325 hours in the new program) of clinical experience at an approved site with a qualified supervisor (see "[Section III: Practicum Site Resources](#)").
  - b. Of these 250 hours the following requirements must be met:
    - A minimum of 150 hours of direct, face-to-face client contact
    - A minimum of 30 hours of personal psychotherapy (See "[Personal Psychotherapy Requirements](#)" below)
  - c. Students completing the new MFT program must complete 325 hours of clinical experience at an approved site with a qualified supervisor. The following requirements must be met:
    - A minimum of 225 hours of direct, face-to-face client contact
    - A minimum of 30 hours of personal psychotherapy (See "[Personal Psychotherapy Requirements](#)" below)

- d. Students may also count the following hours toward the minimum requirement:
  - Supervision
  - Administering and Evaluating Psychological Tests, Writing Clinical Reports, Writing Progress Notes or Process Notes
  - Workshops, Seminars, Training sessions or Conferences
  - Client-Centered Advocacy
2. Maximum Hours Accepted

In addition to the required minimum hours, students may receive a maximum of 1300 hours that will be counted by the BBS toward licensure. This may include a maximum of the following hours:

|     |   |
|-----|---|
| 750 | Counseling and Supervision  |
| 250 | Administering and Evaluating Psychological Tests, Writing Clinical Reports, Writing Progress or Process Notes             |
| 250 | Workshops, Seminars, Training Sessions or Conferences   |
| 300 | Personal Psychotherapy (maximum 100 hours which are triple counted as 300. See Personal Psychotherapy Requirements below) |

Client-Centered Advocacy

#### **D. Personal Psychotherapy Requirements**

1. All students are required to receive at least 30 hours of personal psychotherapy by a licensed psychotherapist before graduation.
2. Each 1 hour of personal psychotherapy is counted as 3 hours by the BBS towards licensure.

*Example: A student receives 50 hours of personal counseling. The BBS will count this as 50x3, or 150 total hours, toward licensure.*
3. Up to 100 actual hours (300 total hours) may be counted toward licensure.
4. You must be formally admitted into an MFT program for the BBS to count hours. Psychotherapy prior to formal admission cannot be counted.

#### **E. Practicum Checklist**

Use our "[Practicum Checklist](#)" (next page) to keep track of all Practicum deadlines and paperwork.

PRACTICUM CHECKLIST

Trainee Name \_\_\_\_\_

Site Name & Address \_\_\_\_\_

Practicum Semester Dates \_\_\_\_\_

**PAPERWORK TO BE SUBMITTED TO PRACTICUM PROF:**

*(We recommend submitting copies and saving all original forms unless otherwise specified.)*

**Prior to your first semester:**

*Due: First Practicum Session*

- \_\_\_\_\_ Practicum Site Approval form (if new site, submit PRIOR to registration)
- \_\_\_\_\_ Practicum Agreement Form
- \_\_\_\_\_ Responsibility Statement for Supervisor (BBS Form)
- \_\_\_\_\_ CAMFT Membership
- \_\_\_\_\_ Liability Insurance

**Practicum I, II, III (CNS 530, 531, 532):**

*Due: Ongoing Review- complete each form every semester of Practicum*

CNS 530   CNS 531   CNS 532

- \_\_\_\_\_   \_\_\_\_\_   \_\_\_\_\_   Weekly Summary Hours of Experience (BBS Form)
- \_\_\_\_\_   \_\_\_\_\_   \_\_\_\_\_   Trainee Performance Evaluation
- \_\_\_\_\_   \_\_\_\_\_   \_\_\_\_\_   Practicum Site Evaluation

**Practicum III (CNS 532)**

*Due: One week prior to the final day of the semester of Practicum III*

- \_\_\_\_\_ MFT Experience Verification Form (BBS Form)
- \_\_\_\_\_ Personal Therapy Hours (30 hours required)

## SECTION III: PRACTICUM SITE RESOURCES

### A. Requirements for a Qualified Practicum Site

1. Practicum Site Requirements
  - a. Trainees may not see clients in private practice settings, even as a volunteer.
  - b. Trainees may receive a salary but may not be paid directly by clients.
  - c. Trainees may work in a non-profit or charitable corporation, school, college or university, government entity or licensed health facility or other non-private practice sites that provide mental-health counseling or psychotherapy and qualified supervision.
2. Supervision Requirements
  - a. Trainees must receive “one unit” of qualified supervision for every five hours of psychotherapy or counseling performed.
    - **One unit equals one hour of individual supervision or two hours of group supervision.**
  - b. Group supervision sessions shall not include more than eight persons receiving supervision.
3. Supervisor Requirements (also see “[Requirements for Supervisors](#)”)
  - a. Supervisor must be a licensed mental health professional (Marriage and Family Therapist, Clinical Social Worker, Psychologist or Physician certified in psychiatry by the American Board of Psychiatry and Neurology)
  - b. Supervisor must maintain a valid California license
  - c. Supervisor must have held that license for at least two years and practiced psychotherapy or directly supervised as part of their clinical practice for at least two years within the last five year period immediately preceding supervision
  - d. Supervisor must complete a minimum of six hours of supervision training or coursework within two years immediately preceding supervision (or within 60 days of the commencement of supervision) and every renewal period thereafter (Psychologists and Physicians certified in psychiatry are exempt from supervision training)
  - e. In a setting that is not a private practice the supervisor may be employed by the registrant’s employer on either a paid or voluntary basis. An off-site supervisor must sign a letter of agreement with the agency employing the applicant.

### B. Finding a Practicum Site: The Process

**Western Seminary does not “place” students in a Practicum Site. It is your responsibility as a graduate student to find your own placement.** However, we are continuously expanding our resources to better assist you in this process. Read on for a general overview of the recommended process for finding a practicum site. If you have any additional questions, contact Dr. Travis Owens or Alyssa Welch.

1. Attend the Practicum Information meeting, usually held in February. At this meeting you will receive a Practicum binder, learn about prospective sites and deadlines and discuss any updated information and requirements by the BBS.
2. Do some research! Utilize the resources around you: the internet, your church, community, friends and fellow students may provide you with some site suggestions. You can also review the site listing provided by Western Seminary Sacramento. This list is composed of sites that have worked with our Trainees in the past. Narrow down your research by selecting three potential Practicum Sites.
  - **Please Note: your site must be approved by the MFT Program Director.** If your site has not worked with a Western Seminary MFT Trainee before, you will need to complete the [Site Approval Form](#) and receive approval before beginning Practicum.
3. If you haven't already done so, make contact! You can do this via phone or email (or both). Investigate whether the site takes Trainees and if they have any openings. Treat this like a professional job search- because that's what it is!
4. Prepare a professional resume and cover letter personalized for each site.
5. Arrange for an interview. Use the tips below to prepare for your interview.
6. Select your site. Fill out all paperwork (See "[Section IV: Prior to Starting Practicum](#)").

### C. Interviewing Tips

1. Before your interview, prepare yourself. Think through your strengths as a therapist, your theoretical stance and your personal preferences.
2. Prepare a list of questions for the Practicum Site that may influence your decisions. A few sample questions are listed here:
  - a. Supervisor: What type of experience does the supervisor have with trainees? What is the approach to supervision? Will supervision be done individually or in groups?
  - b. Practicum requirements: Verify that the Site meets the Practicum Site requirements discussed above.
  - c. Practicum hours: Will the site be able to provide the required hours for the Trainee?
  - d. Client population: What is the client population (age, life situation, psychological stability, income level, ethnicity and religious beliefs)?
  - e. Training: What kind of training does the site offer the trainee? Will there be training on treating particular client demographics? Is extra support offered for paperwork and logistics?
  - f. Client referral: How are clients referred to the Trainee? Will the site have clients "waiting" for the Trainee? Will the Trainee have to do marketing to get clients?
  - g. Logistics: What are the logistics of the site such as office space, telephone, supplies, etc.?

## SECTION IV: PRIOR TO STARTING PRACTICUM

Prior to beginning practicum, you must submit the following paperwork:

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### **Site Approval Form** (for new sites only)

This form must be completed and submitted to your Practicum Professor prior to registering for Practicum. All new sites must be approved by the MFT Site Director before Practicum begins.

---

### **Practicum Agreement Form**

Make 3 copies of this form and obtain original signatures on each from all three parties: the Trainee, the Practicum Supervisor and the Practicum Professor. Each party should retain a signed original form. **Do not fill out the Practicum Addendum unless you do not wish to credit your Practicum experience towards licensing requirements.**

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### **Responsibility Statement for Supervisors**

This form should be completed and signed by your supervisor. This form will be submitted to the BBS with your intern application after graduation. You must have a completed form from each supervisor you work with. Turn in a copy to your Practicum Professor and retain the original form for your intern application.

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### **Proof of CAMFT Membership**

Join CAMFT as a pre-licensed member. Visit [www.camft.org](http://www.camft.org) for more information on the benefits of joining CAMFT. Submit proof of registration to the Practicum Professor before starting Practicum.

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### **Proof of CPH Liability Insurance**

You MUST obtain liability insurance through CPH. Enroll online by visiting the CAMFT website ([www.camft.org](http://www.camft.org)) and clicking on the insurance link or enroll directly through the CPH website ([www.cphins.com](http://www.cphins.com)). You may also call 1-800-875-1911 for an application form. Allow plenty of time, as a copy of your liability insurance must be submitted to your Practicum Professor before you will be allowed to start Practicum.

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### **Proof of AACC and/or CAPS Membership (Optional)**

Membership in the AACC (American Association of Christian Counselors) and/or CAPS (Christian Association for Psychological Studies) is recommended. These are organizations of professional excellence with a Biblical foundation. The Western Seminary student chapter in the AACC entitles you to a discounted rate of \$39/year while in school. CAPS has a student rate of \$35/year. You can join online at [www.aacc.net](http://www.aacc.net) (AACC) and/or [www.caps.net](http://www.caps.net) (CAPS).

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Department of Marital and Family Therapy

Site Approval Form

Dates of Practicum Experience \_\_\_\_\_

**PERSONAL INFORMATION:**

Student Name \_\_\_\_\_

Prospective Site Name \_\_\_\_\_

Prospective Supervisor Name \_\_\_\_\_

Address \_\_\_\_\_

Phone (w) \_\_\_\_\_

**SUPERVISOR EDUCATION**

Graduate Degree \_\_\_\_\_

Graduate Major \_\_\_\_\_

Degree Granting Institution \_\_\_\_\_

**LICENSE INFORMATION (please complete all applicable)**

Psychology Lic. No. \_\_\_\_\_ Date Issued: \_\_\_\_\_

MFT Lic. No. \_\_\_\_\_ Date Issued: \_\_\_\_\_

Social Work Lic. No. \_\_\_\_\_ Date Issued: \_\_\_\_\_

Psychiatry Lic. No. \_\_\_\_\_ Date Issued: \_\_\_\_\_

**PROFESSIONAL MEMBERSHIP(S)**

- American Association of Marriage and Family Therapy
- California Association of Marriage and Family Therapy
- American Psychological Association
- American Psychiatric Association
- Other (please list): \_\_\_\_\_



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Department of Marital and Family Therapy

Practicum Agreement

This is the Practicum Agreement for:

\_\_\_\_\_ [print name]

This agreement is made on \_\_\_\_\_ by and  
between \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_

*Field Site Name, Address, & Phone Number*

& **Western Seminary**. This agreement will be effective for a period from

\_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_  
Trainee Signature Phone Number Date

\_\_\_\_\_  
On-Site Supervisor Signature Phone Number Date

\_\_\_\_\_  
Campus Practicum Supervisor Signature Phone Number Date

This agreement must be copied in triplicate with original signatures on each. One copy must be returned to the Trainee’s Campus Practicum Supervisor BEFORE the Trainee may begin practicum. The On-Site Supervisor and the Trainee will retain remaining copies of this agreement. This contract is for the entire practicum period unless the Trainee’s practicum responsibilities change significantly.

**Purpose**

The purpose of this agreement is to provide a qualified graduate student with a Practicum experience in the field of counseling.

***Western Seminary Agrees:***

1. to assign a Seminary faculty liaison (Campus Practicum Supervisor) to facilitate communication between Western Seminary and the site;
2. to provide the site with the following information about the Trainee named above: name of Trainee and level of academic preparation;
3. to notify the Trainee the he/she must adhere to the administrative policies, rules, standards, schedules and practices of the site;
4. that the Campus Practicum Supervisor shall be available for consultation with both the On-Site Supervisor and Trainee and shall immediately contact the site should any problem or change occur, in relation to Trainee, site, or Western Seminary;
5. that the Campus Practicum Supervisor is responsible for the assignment of a Practicum grade based, in part, on the recommendation of the Practicum on-site supervisor.

***The Practicum Site Agrees:***

1. to assign a practicum On-Site Supervisor who has appropriate credentials, experience, time and interest for training the student;
2. to provide opportunities for the Trainee to engage in a variety of counseling activities under supervision in sufficient amounts to allow an adequate evaluation of their level of competence in each activity;
3. to provide the Trainee with adequate work space, telephone, office supplies and support staff to conduct professional activities;
4. to provide supervisory contact which involves examination of the Trainee's work using audio/visual tapes, observation and/or live supervision;
5. to not hold Western Seminary liable for any injury or malpractice caused to or by any trainee on placement at their site.

***The On-Site Supervisor Agrees:***

1. to provide at least 2 hours of group supervision per week and individual supervision as needed. This supervision time requirement may increase if the student is participating in an intensified practicum;
2. to complete, at the end of each term, an evaluation of the Trainee's progress/work through completing evaluation forms and discussing the evaluation with the Trainee;

***The Campus Practicum Supervisor Agrees:***

3. to be the faculty liaison with whom the Trainee and practicum site communicate regarding progress, problems and performance evaluations;
4. to assist the Trainee and On-Site Supervisor in coordinating the Trainee's placement and fulfilling the graduate program requirements;
5. to meet with the Trainee as outlined in the graduate program course description.

***The Trainee Agrees:***

1. to spend \_\_\_\_\_ hours per week at the Practicum site. At least 50% of the hours spent will involve direct client contact;
2. to initiate individual supervision with the On-Site Supervisor as needed;
3. to meet weekly for 2 hours of group supervision or 1 hour of individual supervision. This supervision time requirement may increase if the student is participating in an intensified practicum;
4. to meet with the Campus Practicum Supervisor as required by the graduate program in which the student is enrolled;
5. if supervision time is missed, the Trainee must arrange make-up time with the appropriate supervisor;
6. to complete the Practicum Weekly Summary Forms as a means of accounting for hours spent in counseling, supervision, training and other professional activities and have the forms signed by the On-Site supervisor;
7. to obtain malpractice liability insurance prior to the start of Practicum, and be informed about personal injury liability provided by the agency or school site;
8. to provide a copy of the Liability Insurance to the Campus Practicum Supervisor;
9. to accept liability for his/her own actions during counseling practicum and not hold Western Seminary liable for any injury or malpractice caused to or by the Trainee;
10. to complete written evaluations of the site and supervision.

**Course Name/Number and # of Credits to be earned for this contracted period:**

|                          |       |       |
|--------------------------|-------|-------|
| 1 <sup>st</sup> Semester | _____ | _____ |
| 2 <sup>nd</sup> Semester | _____ | _____ |
| 3 <sup>rd</sup> Semester | _____ | _____ |

**Projected hours per week:**

|           |       |
|-----------|-------|
| Monday    | _____ |
| Tuesday   | _____ |
| Wednesday | _____ |
| Thursday  | _____ |
| Friday    | _____ |
| Saturday  | _____ |

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Department of Marital and Family Therapy

Practicum Agreement Addendum

(Fill out *ONLY* for Practicum Experience **NOT** approved by the BBS)

I/we are aware that the Practicum arranged between \_\_\_\_\_

and \_\_\_\_\_ from \_\_\_\_\_  
Field Site Name Date

until \_\_\_\_\_ does **not** meet the requirements of the Board of  
Date

Behavioral Science (BBS) for licensing as a Marriage & Family Therapist (MFT). These Practicum hours will **not** be counted towards the pre-degree requirements for licensure.

The Trainee understands that he/she will need to repeat the Practicum should he/she decide to pursue licensure in the future. The Trainee further understands that since the laws and BBS guidelines are constantly being updated, it may not be possible to pursue licensure in the future at all, due to the fact that this Practicum is not approved by the BBS.

***Projected client contact hours per week (50% of total hours):***

Individual \_\_\_\_\_ Group \_\_\_\_\_ Couple \_\_\_\_\_

Family \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
*Trainee Signature*

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

\_\_\_\_\_  
*On-Site Supervisor Signature*

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

\_\_\_\_\_  
*Campus Practicum Supervisor Signature*

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

[Responsibility Statement for Supervisors](#)

(place holder for page numbers- follow the link to print the original document)

[Responsibility Statement for Supervisors](#)

(place holder for page numbers- follow the link to print the original document)

## SECTION V: FORMS TO COMPLETE DURING PRACTICUM

The Trainee is required to complete the following forms during each semester of Practicum. These will be periodically reviewed by the Practicum Professor. The forms should be kept in the student's Practicum folder to be submitted to Dr. Travis Owens at the end of the Practicum experience. **The student should complete a new form for each semester of Practicum.**

### **A. Weekly Summary Hours of Experience (BBS Form)**

1. A copy of the completed form is due one week prior to the last day of the semester.
2. RETAIN THE ORIGINAL FOR YOUR INTERN AND/OR LICENSE APPLICATION.
3. This is a BBS form and must be completed using one column for each week and must be signed by your Supervisor. Use a separate form for each individual supervisor.
4. Maintain a separate list of training sessions, workshops, etc. (see below) as they will need to be specified in the MFT Experience Verification form.

### **B. Site Evaluation Form (Western form)**

1. The completed original form is due one week prior to the last day of the semester.
2. Retain a copy for your files.
3. This form is to be completed by you, the Trainee.
4. The information given in this form is used to monitor the quality of your Practicum Site and supervision. Anonymous data will be published for future Western Seminary MFT Trainees to assist in Practicum selection.

### **C. Trainee Performance Evaluation Form (Western form)**

1. The completed original form is due one week prior to the last day of the semester.
2. Retain a copy for your files.
3. This form is to be completed by the Practicum Supervisor.
4. Your Practicum grade (Satisfactory/Unsatisfactory) is based on this form and your participation in the Practicum class.

### **D. Trainee Workshops, Seminars and Training Sessions Form (Western form)**

1. This form is used to keep track of the workshops, seminars, training sessions and conferences that you attend in your professional capacity.
2. This form is for your personal records; the hours are officially recorded on the Weekly Summary Hours of Experience form.
3. All workshops, seminars and training sessions must be approved by your supervisor.

[Weekly Summary Hours of Experience](#)

(place holder for page numbers- follow the link to print the original document)

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Practicum Site Evaluation Form

(To be completed by the Trainee at the end of each term)

---

|                                   |  |  |  |  |
|-----------------------------------|--|--|--|--|
| Student Name                      | Date                                     | Phone Number                             |  |  |
| <b>Term</b>                       | <input type="checkbox"/> Fall            | <input type="checkbox"/> Winter          | <input type="checkbox"/> Spring          |  |
| <b>Term in Practicum Sequence</b> | <input type="checkbox"/> 1 <sup>st</sup> | <input type="checkbox"/> 2 <sup>nd</sup> | <input type="checkbox"/> 3 <sup>rd</sup> | <input type="checkbox"/> 4 <sup>th</sup> or more |
| <b>Final Term at Site?</b>        | <input type="checkbox"/> Yes             | <input type="checkbox"/> No              |  |  |

---

Field Site Name

---

Address

---

City State Zip

---

Phone Number Fax Number

---

Name of Site Contact Person Name of On-Site Supervisor (if different)

*Environment / Climate [check ALL boxes which apply for each question]*

Types of client problems with which you worked this term:

- a. Academic concerns (e.g., scholarship/financial aid, academic/career planning, scheduling, testing/placement, graduation issues, etc.)
- b. Adjustment disorders (e.g., adjusting to divorce, adjusting to new school or community, grief, transition issues)
- c. Adult-child conflicts (including parent-child and student-teacher conflicts)
- d. Anger/conflict management and resolution problems
- e. Anxiety disorders of adulthood (e.g., panic disorder, social phobia, post-traumatic stress disorder, etc.)
- f. Anxiety disorders of childhood and adolescence
- g. Bipolar disorders (including cyclothymia)
- h. Delusional (paranoid) disorder
- i. Depressive disorders of childhood and adolescence

- j. Depressive disorders of adulthood
- k. Developmental disorders (e.g., academic skills disorders, other learning disabilities, mental retardation)
- l. Disruptive behavior (e.g., hyperactivity, conduct disorder, disruptive classroom behavior, S.E.D.)
- m. Dissociative disorders (e.g., fugue, depersonalization, etc.)
- n. Eating disorders (e.g., anorexia, bulimia, severe dieting, excessive exercise or laxative use to control weight)
- o. Emotional abuse
- p. Gang-related problems
- q. Legal problems
- r. Physical abuse problems
- s. Psychoactive substance use disorders (e.g., alcohol, cocaine, etc.)
- t. Religion related issues
- u. Schizophrenia
- v. Self-esteem/self-worth issues
- w. Sexual abuse problems (e.g., incest, rape – includes date-rape)
- x. Sexual dysfunctions (e.g., sexual arousal disorders, etc)
- y. Sexuality or gender identity problems (including problems with sexually transmitted diseases)
- z. Sleep disorders
- aa. Special needs populations (IEPs, staffing/multi-disciplinary team meetings)
- bb. Social relationship problems with peers (including dating or friendship formation and maintenance)
- cc. Suicide
- dd. Unwanted pregnancy
- ee. Other \_\_\_\_\_

Environment / Climate [continued]

Formats in which you provided a MAJOR portion of counseling this term:

- Individual  Group  Couple  Family  Other \_\_\_\_\_

Formats in which you provided a MINOR portion of counseling this term:

- Individual  Group  Couple  Family  Other \_\_\_\_\_

Age group(s) to whom you provided a MAJOR portion of counseling this term:

- 0-5  6-12  13-15  16-19  20-25  26-35

- 36-45  46-55  56-65  66-75  75+

Age group(s) to whom you provided a MINOR portion of counseling this term:

- 0-5  6-12  13-15  16-19  20-25  26-35

- 36-45  46-55  56-65  66-75  75+

**Use the scale below to complete the following questions:**

**0 = Not Applicable    1 = Seldom True    2 = Sometimes True    3 = Often True**

- \_\_\_\_\_ The site has a professional atmosphere.
- \_\_\_\_\_ The staff is supportive & respectful of the Trainee's work.
- \_\_\_\_\_ The Trainee is treated respectfully by the staff.
- \_\_\_\_\_ The general atmosphere of the site provides a climate of trust and openness.
- \_\_\_\_\_ The Trainee is treated respectfully by the clients.

- \_\_\_\_\_ Physical facilities are available for Trainee use (e.g., office, supplies, etc.).
- \_\_\_\_\_ The Trainee receives clerical support.
- \_\_\_\_\_ Staff members act professionally and ethically toward clients.
- \_\_\_\_\_ Staff members act professionally and ethically toward the Trainee.
- \_\_\_\_\_ Staff members act professionally and ethically toward each other.

*Comments or Recommendations on Environment/Climate:*

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*Supervision*

How often did you meet with the On-Site Supervisor who was PRIMARILY responsible for providing you with one-to-one or group supervision?

- I did not have supervision, either one-to-one or group
- We met for less than one hour per week (or less than 2 hours for group)
- We met for approximately one hour per week (or 2 group supervision hours)
- We met for more than one hour per week (or more than 2 hours for group)

Overall quality of supervision with the On-Site Supervisor PRIMARILY responsible for providing you with one-to-one or group supervision:

- None                       Poor                       Adequate                       Good                       Excellent

Overall quality of supervision with the On-Site Supervisor PARTIALLY responsible for providing you with one-to-one or group supervision:

- None                       Poor                       Adequate                       Good                       Excellent

Assessment of number of seminars or other professional development experiences available through my placement site during this term:

- None                       Poor                       Adequate                       Good                       Excellent

**Use the scale below to complete the following questions:**

**0 = Not Applicable    1 = Seldom True    2 = Sometimes True    3 = Often True**

- \_\_\_\_\_ The site provides appropriate references, books, & materials
- \_\_\_\_\_ The site gives students adequate guidance on ethical issues
- \_\_\_\_\_ There are sufficient clients for trainees
- \_\_\_\_\_ The site appropriately uses various therapeutic approaches
- \_\_\_\_\_ The professional staff is readily accessible to the Trainee

**Trainee's Comments or Recommendations on Supervision:**

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**Use the scale below to complete the following questions:**

**0 = Not Applicable            1 = Seldom True    2 = Sometimes True            3 = Often True**

Communication

- \_\_\_\_\_ The staff provides opportunities for relevant feedback in a positive manner
- \_\_\_\_\_ The staff is sensitive to the Trainee's emotional/experiential state(s) and current personal and professional development.
- \_\_\_\_\_ Staff conflicts are discussed in an open, non-threatening manner

**Trainee's Comments or Recommendations on Communication**

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*Summary [please check the one answer that best applies]*

I rate the overall quality of my practicum experiences this term as:

- None                       Poor                       Adequate                       Good                       Excellent

**Additional Comments:**

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I am willing to talk with other students about this practicum placement:  Yes  No

I rate my preparation for this practicum experience as:

- None                       Poor                       Adequate                       Good                       Excellent

To what courses or experiences do you attribute your preparedness:

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What courses or experiences are needed to improve your professional preparedness for practicum placement?

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**WESTERN SEMINARY SACRAMENTO**

2924 Berra Way • Sacramento • CA • 95821  
(916) 488-3720 • FAX (916) 488-3735

Department of Marital and Family Therapy

Trainee Performance Evaluation Form

(To be completed by the On-Site Supervisor at the end of each term)

\_\_\_\_\_  
Student Name \_\_\_\_\_  
Date Submitted for Completion

\_\_\_\_\_  
Supervisor Name \_\_\_\_\_  
Date Received from Trainee

**Term**  Fall  Winter  Spring  
**Term in Practicum Sequence**  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  4<sup>th</sup> or more  
**Trainee's Final Term at Site?**  Yes  No

Five domains of trainee competence are listed below which include specific items in each domain. Using the scale provided, circle the number that best describes your perceptions of the Trainee's skills compared to all other people you have trained at the same level of professional development (the term "client" used herein refers to any person receiving services including students, parents, teachers or patients.)

**Signatures** (*indicates the information below has been discussed by Trainee and Supervisor*)

\_\_\_\_\_  
**Student Signature** \_\_\_\_\_  
**Date** \_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**Supervisor Signature** \_\_\_\_\_  
**Date** \_\_\_\_\_  
**Phone Number**

**Evaluation of Trainee**

Please rate each statement below on the following scale:

|           |                          |          |                 |          |                          |           |
|-----------|--------------------------|----------|-----------------|----------|--------------------------|-----------|
| <b>IO</b> | <b>1</b>                 | <b>2</b> | <b>3</b>        | <b>4</b> | <b>5</b>                 | <b>NA</b> |
|           | <i>Clearly Deficient</i> |          | <i>Adequate</i> |          | <i>Clearly Excellent</i> |           |

**IO = Inadequate Opportunity to Observe**

**NA = Not Applicable to the Setting**

**Counseling Skill Competency**

- 6. Establishes a working relationship with clients  
IO      1                  2                  3                  4                  5                  NA
- 7. Gathers client historical information  
IO      1                  2                  3                  4                  5                  NA

8. Specifies the client problems and goals in concrete terms  
 IO      1                      2                      3                      4                      5                      NA

**Assessment Skill Competency**

1. Uses current sources of information  
 IO      1                      2                      3                      4                      5                      NA

2. Appropriately utilizes methods of assessment to determine client concerns, problems, or characteristics  
 IO      1                      2                      3                      4                      5                      NA

3. Appropriately interprets and uses assessments with clients and others  
 IO      1                      2                      3                      4                      5                      NA

**Supervision Skill Competency**

1. Meets with supervisor as scheduled  
 IO      1                      2                      3                      4                      5                      NA

2. Forms working relationship with supervisor  
 IO      1                      2                      3                      4                      5                      NA

3. Handles feedback well  
 IO      1                      2                      3                      4                      5                      NA

**Professional Skill Competency**

1. Establishes and maintains facilitative working relationship with staff  
 IO      1                      2                      3                      4                      5                      NA

2. Knows legal and ethical aspects of counseling  
 IO      1                      2                      3                      4                      5                      NA

3. Participates in staff in-service training  
 IO      1                      2                      3                      4                      5                      NA

**Case Management Skill Competency**

1. Appropriately uses referral within and outside the site  
 IO      1                      2                      3                      4                      5                      NA

2. Responsibly schedules and meets with clients  
 IO      1                      2                      3                      4                      5                      NA

3. Keeps adequate and timely client records

IO      1                  2                  3                  4                  5                  NA

**Based on your knowledge, what would you consider the Trainee's major strengths?**

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**Suggestions for further professional development:**

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**Other Comments?**

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## SECTION VI: FORMS TO SUBMIT AT THE END OF PRACTICUM

At the end of Practicum, the Trainee is required to submit two forms IN ADDITION TO the forms listed in Section V. All forms must be submitted to the Practicum Professor one week prior to the student's graduate date. Degree conferral cannot occur until these forms have been received and processed.

### A. **MFT Weekly Summary of Psychotherapy Received Form** (Western form)

1. This form is used to track the Trainee's personal therapy hours for graduation and licensing.
2. This form should be submitted to Western as verification of the personal therapy hours needed for graduation. This is not a BBS form but we highly recommend you retain a copy for your files.
3. The BBS counts each hour of therapy with a licensed therapist as three hours toward licensure, up to 300 hours.

### B. **MFT Experience Verification Form** (BBS form)

1. This form is to be completed by the Trainee and the Trainee's Supervisor at the end of the Practicum experience. Complete a separate form for each supervisor.
2. This is a BBS form and you **must** retain the original for your intern and/or licensing application

### C. **Other Forms to be Submitted**

The following forms should be submitted at the end of your practicum experience. You must complete one for each semester of Practicum. These are due one week before graduation. For details on these forms, see Section V.

1. Weekly Summary Hours of Experience
2. Site Evaluation Form
3. Trainee Evaluation Form

**WEEKLY SUMMARY OF HOURS OF PSYCHOTHERAPY RECEIVED**

Suggested Log for Personal Psychotherapy

*The BBS currently has no official log for collecting hours of personal psychotherapy received by Interns and Trainees. Please use this form to record the hours of personal psychotherapy you receive and turn it into your Practicum Professor one week prior to the last week of your last Practicum semester.*

**Personal Psychotherapy:** Personal psychotherapy hours are not limited to individual hours. They may include group, marital or conjoint or even family psychotherapy received by an applicant.

**Qualified Psychotherapists:** Licensed Marriage and Family Therapists, Licensed Clinical Social Workers, Licensed Psychologists and Licensed Physicians certified in psychiatry by the American Board of Psychiatry and Neurology

**Weekly Summary of Psychotherapy Received**

**Year:** \_\_\_\_\_

Name of Trainee/Intern \_\_\_\_\_

Name of Psychotherapist \_\_\_\_\_ License No.: \_\_\_\_\_

| Week Of:                                      |  |  |  |  |  |  |  |  |  |  |  |  |  | <b>Total Hours</b> |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--------------------|
| Hours of Psychotherapy or Counseling Received |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |
| Psychotherapist's Signature                   |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |

Concept borrowed from a form which appeared in the November/December 1993 issue of *The California Therapist*.

## APPENDIX I: TRAINEE ADDITIONAL INFORMATION AND RESOURCES

These documents are provided here to give you additional resources during your Practicum experience. You can also find these documents online at the BBS website or the CAMFT website.

- A. Requirements for Supervisors (BBS Statutes and Regulations, §1833.1)
- B. Critical Reminders for Interns and Trainees and Supervisors Too! (CAMFT document)
- C. [Answers to Most Frequently Asked Questions Relating to Marriage and Family Therapist Trainees and Interns](#) (BBS Document)
- D. [MFT Student Handbook](#) (BBS Document)

## <sup>1</sup>§1833.1. REQUIREMENTS FOR SUPERVISORS

(a) Any person supervising an intern or trainee (hereinafter "supervisor") within California shall comply with the requirements set forth below and shall, prior to the commencement of such supervision, sign under penalty of perjury the "Responsibility Statement for Supervisors of a Marriage, Family, and Child Counselor Trainee or Intern" revised 1-00 requiring that:

(1) The supervisor possess and maintains a current valid California license as either a marriage, family, and child counselor, licensed clinical social worker, licensed psychologist, or physician who is certified in psychiatry as specified in Section 4980.40 (f) of the Code and has been so licensed in California for at least two years prior to commencing any supervision; or (A) Provides supervision only to trainees at an academic institution that offers a qualifying degree program as specified in Section 4980.40 (a) of the Code; and (B) Has been licensed in California as specified in Section 4980.40 (f) of the Code, and in any other state, for a total of at least two years prior to commencing any supervision.(2) If such supervisor is not licensed as a marriage, family, and child counselor, he or she shall have sufficient experience, training, and education in marriage, family, and child counseling to competently practice marriage, family, and child counseling in California.

(3) The supervisor keeps himself or herself informed of developments in marriage, family, and child counseling and in California law governing the practice of marriage, family, and child counseling.

(4) The supervisor has and maintains a current license in good standing and will immediately notify the intern or trainee of any disciplinary action, including revocation or suspension, even if stayed, probation terms, inactive license status, or lapse in licensure, that affects the supervisor's ability or right to supervise.

(5) The supervisor has practiced psychotherapy for at least two (2) years within the five (5) year period immediately preceding any supervision and has averaged at least five (5) patient/client contact hours per week. 80

(6) The supervisor has had sufficient experience, training, and education in the area of clinical supervision to competently supervise trainees or interns.

(A) Effective January 1, 2000, supervisors who are licensed by the board shall complete a minimum of six (6) hours of supervision training or coursework every two years. This training or coursework may apply towards the continuing education requirements set forth in Sections 4980.54 and 4996.22 of the Code.

(B) Supervisors who are licensed by the board who have completed a minimum of six (6) hours of supervision training or coursework between January 1, 1997, and December 31, 1999, may apply that training towards the requirement described in subsection (A).

(C) Supervisors who are licensed by the board who commence supervision on and after January 1, 2000, and have not met requirements of subsection (A), shall complete a minimum of six (6) hours of supervision training or coursework within sixty (60) days of commencement of supervision.

(7) The supervisor knows and understands the laws and regulations pertaining to both the supervision of trainees and interns and the experience required for licensure as a marriage, family, and child counselor.

(8) The supervisor shall ensure that the extent, kind, and quality of counseling performed is consistent with the education, training, and experience of the intern or trainee.

(9) The supervisor shall monitor and evaluate the extent, kind, and quality of counseling performed by the intern or trainee by direct observation, review of audio or video tapes of therapy, review of progress and process notes and other treatment records, or by any other means deemed appropriate by the supervisor.

(10) The supervisor shall address with the intern or trainee the manner in which emergencies will be handled.

(11) The supervisor agrees not to provide supervision to a trainee unless the trainee is a volunteer or employed in one of the following work settings permitted by law:

(A) a governmental entity

- (B) a school, college, or university
- (C) a nonprofit and charitable corporation
- (D) a licensed health facility (Health and Safety Code Sections 1250, 1250.2 and 1250.3)
- (E) a social rehabilitation facility or a community treatment facility (Health and Safety Code Section 1502(a))
- (F) a pediatric day health and respite care facility (Health and Safety Code Section 1760.2)
- (G) a licensed alcoholism or drug abuse recovery or treatment facility (Health and Safety Code Section 11834.02)

(12) The supervisor agrees not to provide supervision to an intern unless the intern is a volunteer or employed in one of

the following work settings permitted by law: 81

- (A) a governmental entity
- (B) a school, college, or university
- (C) a nonprofit and charitable corporation
- (D) a licensed health facility (Health and Safety Code Sections 1250, 1250.2 and 1250.3)
- (E) a social rehabilitation facility or a community treatment facility (Health and Safety Code Section 1502(a))
- (F) a pediatric day health and respite care facility (Health and Safety Code Section 1760.2)
- (G) a licensed alcoholism or drug abuse recovery or treatment facility (Health and Safety Code Section 11834.02)
- (H) a private practice as specified in Section 4980.43 (f)

(b) Each supervisor shall provide the intern or trainee with the original signed "Responsibility Statement for Supervisors of a Marriage, Family, and Child Counselor Intern or Trainee" revised 1-00 prior to the commencement of any counseling or supervision. The intern shall provide the board with his or her signed "Responsibility Statement for Supervisors of a Marriage, Family, and Child Counselor Intern or Trainee" revised 1-00 from each supervisor upon application for licensure. The trainee shall provide the board with his or her signed "Responsibility Statement for Supervisors of a Marriage, Family, and Child Counselor Intern or Trainee" revised 1-00 from each supervisor upon application for internship.

(c) A supervisor shall give at least one (1) week's written notice to an intern or trainee of the supervisor's intent not to certify any further hours of experience for such person. A supervisor who has not provided such notice shall sign for hours of experience obtained in good faith where such supervisor actually provided the required supervision.

(d) The supervisor shall obtain from any intern or trainee for which supervision will be provided, the name, address, and telephone number of the intern's or trainee's most recent supervisor and employer.

(e) In any setting that is not a private practice, a supervisor shall evaluate the site(s) where an intern or trainee will be gaining hours of experience toward licensure and shall determine that: (1) the site(s) provides experience which is within the scope of marriage, family, and child counseling; and (2) the experience is in compliance with the requirements set forth in this section.

(f) Upon written request of the board, the supervisor shall provide to the board any documentation which verifies the supervisor's compliance with the requirements set forth in this section.

(g) The supervisor responsibility statement required by this section shall be used for supervisory relationships commencing on or after 1-1-98.

(h) The board shall not deny hours of experience gained towards licensure by any supervisee due to failure of his or her supervisor to complete the training or coursework requirements in subsection (a) (6).

NOTE: Authority cited: Section 4980.35, 4980.40(f) 4980.60, Business and Professions Code. Reference: Sections 4980.35, 4980.40(f), 4980.42

## CRITICAL REMINDERS FOR INTERNS AND TRAINEES AND SUPERVISORS TOO

*The Therapist*

November/December 2009

Mary Riemersma, MBA (CAMFT Executive Director)

The information that follows has been compiled to assist interns, trainees, and applicants in navigating the sometimes complicated intricacies of the licensing law and regulations while pursuing licensure.

Understanding the law and regulations is critical to acquiring hours of experience and subsequently qualifying for the license as quickly and efficiently as possible. Use this resource as a guide to assure the protection of your hard-earned hours of experience. This information is likewise critical to supervisors to be able to provide the most accurate information and to not lead supervisees astray.

### **BBS' Current Address:**

Board of Behavioral Sciences

1625 North Market Blvd., Suite S-200

Sacramento, CA 95834

Phone (916) 574-7830 Fax: (916) 574-8625

Website: [www.bbs.ca.gov](http://www.bbs.ca.gov)

Requests for Applications and Forms can be printed from the BBS Website, which is likely the most expeditious way to acquire the forms. Requests for BBS forms and applications may also be made in writing to the above address or by telephone. If you request by telephone or in writing, be sure to make your requests for forms early so that you are prepared with forms when you need them. Generally allow at least two weeks for requests by mail or phone to be processed. Be sure to print an ample supply of forms since most forms sent to the BBS may not contain corrections. New forms should be used for hours gained on and after January 1, 2010, due to numerous changes in law. These new forms should be available on the BBS website by January 1st.

### **Communicating with the BBS**

When communicating with the BBS, especially when submitting forms and applications, it is recommended that you mail "certified, return receipt requested." Likewise, keep photocopies of all that you submit to the Board and attach the "certified return receipt" to the copy you retain. It is to your advantage to keep accurate records, as you may need these should there be any question about your hours of experience or supervision.

### **Retain Copies of Application Materials**

On another note, be sure to keep copies of any applications in perpetuity. One never knows what direction life events will take. Your application may get lost in the mail. You may need the application many years later when you, because of life events, wish to relocate to another state and need to apply for licensure within the new jurisdiction. Expecting to acquire copies of the forms from the BBS, after many years have passed, may be difficult if not impossible.

### **Be Truthful on Applications (Even if it Hurts)**

Be careful, cautious, and truthful on applications. Do not fail to disclose a past conviction even if you believe it is no longer accessible, or has been expunged. Providing a letter describing what happened, what you have accomplished to assure rehabilitation, and enclosing a copy of any disposition would be worthwhile.

### **Intern Registration**

Allow at least 60 days for processing your application for Intern Registration. Processing may be more rapid, but it could also be delayed, especially if something is inadvertently omitted from the application or not clear in the application. Unreadable fingerprinting may also cause a delay and sometimes resubmissions are necessary, which could significantly delay the processing of applications. In other words, apply as early as possible. If one submits an application for intern registration within 90 days of being granted a degree (regardless of how long it takes to process the application), the hours of experience

gained post-degree will count as long as lawfully employed and not employed in a private practice.

### **Intern/Post Degree Experience**

Applicants who are post-degree who did not apply for intern registration within 90 days of their degrees being granted will not be able to accrue any hours post degree until the intern registration numbers are actually granted. One should anticipate that application processing could take 60 days or in some cases even longer if there are unanswered questions, finger-printing difficulties, or other problems.

### **First-Time Examination Candidates**

Allow 90 days for processing your applications to take the written examination. This application is where you submit all hours of experience for the Board's review to qualify for the license.

### **Written Examinations**

Licensed Clinical Social Workers, Licensed Educational Psychologists, and Licensed Marriage and Family Therapists take written examinations that are administered continuously. When you are notified by the BBS of eligibility to take the written examination, you will need to schedule yourself with the entity with whom the Department of Consumer Affairs has contracted to administer the examinations.

### **Re-Examinees**

Candidates who do not pass either the regular written exam or the clinical vignette written exam will need to sign-up to be reexamined. Candidates being re-examined will be required to pay an additional examination fee in a timely manner. Reexaminations are required to be at least 180 days following the candidates' most recent examination date. Re-examinees must wait until the next examination cycle to retake a "failed" examination in order to take a new form of the examination. This "waiting" period also provides ample time to study and further prepare for retaking the examination.

### **Clinical Vignette Examination First Time Candidates**

Candidates are considered eligible for the clinical vignette examination after passing the written examination. Like the regular written examination, candidates schedule themselves to take the exams.

### **Taking Exams When Offered is Important**

**Caution**—Generally speaking, a person who does not take an examination or re-examination within one year of eligibility of examination will have his/her application abandoned, which will require reapplication.

If you must re-apply, you may possibly lose hours of experience that may be too old to be countable at the time of re-application.

**Recommendation**— Take exams whenever they are available to you even if you do not feel 100 percent prepared. There is no limit to the number of times one can take an exam.

### **Information for Trainees, Interns, and Applicants**

A "trainee" is a person who is in his/her graduate degree program to qualify for the license and has completed 12 semester or 18 quarter units of study.

An "intern" is a person who has been granted his/her degree to qualify for the license, has applied for and been granted his/her intern registration number from the BBS.

An "applicant" is either a person who has been granted his/her degree and applies for intern registration within 90 days of being granted that degree or has applied for the license and/or is in the process of being examined to qualify for the license.

### **Guidelines on Hours of Experience**

Following are requirements for collecting hours of experience for licensure as an MFT in the State of California. These requirements are paraphrased from the licensing law and regulations governing the marriage and family therapist profession. These requirements include changes effective January 1, 2010. A minimum of 3000 hours of experience is required. Such experience may be gained in no less than 104 weeks, which spans the period from being a trainee through being a registered intern.

### **Trainee Experience**

Not more than 750 hours of counseling and direct supervisor contact may be obtained prior to the granting of the qualifying degree. [This limitation on hours does not include professional enrichment activities such as workshops and personal psychotherapy received.] "Trainees" are unlicensed persons

enrolled in qualifying master's or doctor's degree programs who have completed no less than 12 semester units or 18 quarter units of coursework.

As a trainee, one can gain a maximum of 750 hours of counseling and direct supervisor contact, a maximum of 300 hours of psychotherapy [100 actual hours x 3 = 300] and a maximum of 250 hours of workshops, training sessions, seminars or conferences, as well as a maximum of 250 hours in administering and evaluating psychological tests of counselees; writing clinical notes; writing progress notes or process notes for a total 1300 hours. A minimum of 1700 hours must be gained subsequent to the granting of the master's or doctor's degree.

Trainees are not required to have completed 12 semester or 18 quarter units of study to receive personal psychotherapy for countable hours. These are the only hours that do not require supervision. Keep in mind, however, that such experience will only count if the psychotherapist is a licensed professional, but such licensee needs only a current and valid license and does not need to be two years licensed. The psychotherapist provides verification for these hours that do not require supervision. There is no BBS-specific form to record these hours.

#### **Maximum Hours Per Week For Interns and Trainees**

No more than forty (40) hours of experience may be credited for any seven consecutive days. These 40 hours are inclusive of all categories of experience (e.g., supervision, workshops, client contact hours, etc.).

#### **Minimum Hours for Couples, Families, and Children**

Not less than five hundred (500) total hours of experience shall have been gained in diagnosing and treating couples, families, and children. These hours may be in any combination, e.g., all children or a mix of couples, families, and children. The first 150 hours of treating couples and families the hours are double-counted.

#### **Psychological Testing, Process/Progress Notes**

Not more than two hundred fifty (250) hours of experience will be credited for administering and evaluating psychological tests of counselees, writing clinical reports, writing progress notes, or writing process notes. These hours are optional.

#### **Group Counseling or Therapy**

No more than five hundred (500) hours of experience will be credited for providing group therapy or group counseling. Group counseling hours are optional. When counseling groups of children, you may record the hours under "children."

#### **Telemedicine**

Not more than three hundred seventy-five (375) hours of experience may be counted toward providing psychotherapy, crisis or other counseling services via telemedicine (Telephone and/or Internet therapy). These hours are optional.

#### **Hours of Supervision— Individual and Group**

During each week in which experience is claimed and for each work setting in which experience is gained, an applicant shall have at least one (1) hour of direct supervisor contact or two (2) hours of direct supervisor contact in a group of not more than eight (8) persons receiving supervision. The intern/trainee shall have at least two hours of group supervision in every week in which group supervision is claimed. Group supervision is optional. Group supervision may be acceptable when gaining, for example, an hour on Monday and an hour on Wednesday, as long as the hours are both in the same seven day period making up the week. Supervision hours are actual sixty minute hours, not 45 to 50 minute therapy hours. Each hour of group supervision counts as an hour of experience. If less than two hours of group supervision are provided within the week, the supervision hours will not count and one's hours of experience may be jeopardized.

The intern/trainee shall receive at least one (1) hour of direct supervisor contact per week for a minimum of fifty-two (52) weeks. These weeks need not be consecutive. Individual supervision means one supervisor and one person being supervised.

Note: *In other words, there must be 52 separate weeks within which at least one hour of individual, faceto-face supervision has been provided.*

Direct supervisor contact means face-to-face supervision, which also includes contact via two-way, realtime video conferencing when working in a non-profit, governmental, or educational institution.

#### **Maximum Countable Supervision per Week**

Not more than five (5) hours of supervision, whether individual or group, shall be credited during any single week. Keep in mind, however, that it may be necessary to gain and record more than five hours of supervision in a week to be able to credit all hours of experience gained.

#### **Ratios for Interns, Trainees, and Applicants**

Trainees shall receive an average of at least one hour of direct supervisor contact for every five hours of client contact in each setting. While there must be supervision within each week, these ratios need not be accounted for within each week, they are calculated based upon the average gained over the entire period of time one works in a given work-setting. Interns shall receive at least one hour of direct supervisor contact for the first ten hours of client contact in each setting and one additional hour for any hours over ten in a work setting.

When the hours have been approved by the BBS (following the application to take the regular written examination), it is no longer necessary to meet the ratios of experience to supervision. However, at least one hour of individual supervision or two hours of group supervision continues to be required for each work setting until licensed.

#### **Supervision/Professional Enrichment Activities**

Not more than a total of 1250 hours of experience for related professional enrichment activities will be counted. Such activities include:

- Not more than 250 hours of workshops, training sessions, seminars, and conferences while under supervision and as approved by supervisor. Two hundred fifty hours is the maximum while as an intern, a trainee, or both. These hours are optional.
- Actual hours of supervision.
- Actual hours of client centered advocacy. These hours are optional.
- Not more than 300 hours (when 100 hours are triple-counted) of personal psychotherapy received from a California licensed mental health professional. These hours do not require supervision. One may not get psychotherapy from one's supervisor. Psychotherapy hours include group, marital or conjoint, family, or individual psychotherapy received. The two year license requirement applicable to supervisors is not applicable to this experience. These hours are optional. There is no BBS form for these hours. Have the mental health professional provide a letter or statement verifying hours.

Example: 175 hours of workshops, 650 hours of supervision, 125 hours of client centered advocacy, 300 hours of personal psychotherapy equals 1250 hours, which is the maximum of all the above combined. These hours could be in a multitude of configurations up to the 1250 hours.

#### **Practicum Hours of Experience**

Hours of experience gained during the practicum, as required within the educational program, may be counted as hours of experience (i.e., hours of experience gained doing therapy, as opposed to classroom instruction). Further, up to 500 hours of practicum experience is exempt from the "six-year-rule" (see next page). Even though all practicum hours may be countable as hours of experience, only 500 hours may be older than six years. Hours gained during practicum, like all other hours of experience, must be accounted for on the BBS Weekly Summary of Hours Forms.

The "new" practicum requirement will increase the practicum experience from a minimum of 150 hours to 225 hours of experience, of which 75 hours may be in client centered advocacy.

#### **Weekly Summary of Hours**

Each trainee and intern shall maintain a weekly summary of all hours of experience gained toward licensure. The weekly summary shall be signed by the supervisor on a weekly basis. An applicant shall retain all such logs until such time as the applicant is licensed by the board. The board shall have the right

to require an applicant to submit all or such portions of the weekly summary as it deems necessary to verify hours of experience. (These logs are generally not submitted to the Board with the application for licensure.) Interns and trainees should begin new forms on January 1, 2010.

**Note:** *Make sure your supervisor signs the logs each week. These documents provide verification that you actually gained experience during the periods indicated. Additionally, we would recommend that you retain these documents indefinitely. You never know when you might need them.*

### **Experience Verification**

Each Trainee and Intern shall submit to the BBS a completed and signed Experience Verification form with his/her exam eligibility application. The supervisor must complete and sign the form. Any changes should be initialed by the supervisor and the Board may verify such changes. A separate form should be used for each supervisor verifying hours of supervised experience and for each employment setting. A separate form should be used for pre-degree and post degree hours.

Due to the changes that will take effect on January 1, 2010, the BBS strongly recommends that MFT Interns and Trainees have their supervisors sign their weekly summary of hours of experience sheet(s) and experience verification form(s) on December 31, 2009 and begin using new forms on January 1, 2010.

### **“Six Year Rule”**

All 3,000 hours of experience, with the exception of the practicum hours described above, must have been gained in the six years immediately preceding the date the application for examination is filed. Thus, the maximum amount of time for which hours may be credited, with the exception of up to 500 qualifying practicum hours, is six years (This is affectionately known as the “six-year rule.”) This “six year rule,” provides that all experience shall be gained within the six years immediately preceding the date the application for licensure was filed, except that up to 500 hours of clinical experience gained in the supervised practicum shall be exempt from this six-year requirement. Another way to view the six-year rule is if you want to count the first hour you have gained and that hour is not an hour gained in practicum, you would have to apply for licensure/examination within six years of that first hour. For example, if you applied for licensure on January 1, 2020, all hours except for the 500 protected practicum hours would need to be completed between January 1, 2014 and December 31, 2019.

### **The Other Six Year Limit— Intern Registration**

Persons who do not complete their hours of experience within the initial six-year intern registration period must reapply for a new intern registration. Such persons may not work in private practice. Hours from one intern registration roll into another intern registration period; however, in no case may the hours submitted to qualify for licensure be older than six years, with the exception of up to the 500 exempt hours gained during the practicum.

**Note:** *The six year intern registration and the six year limitation on hours may totally or partially overlap, but they are separate and distinct periods of time that should not be confused. These two six-year periods of time are critical for applicants to understand. If the initial six-year intern registration is exhausted, one must apply for and qualify for a new intern registration number. The hours now carry forward into the next intern registration period (which was, at one time, not the case).*

### **Supervision Reminders**

#### **Current Valid License**

Make sure your supervisor holds a current, valid license, which is not under suspension or probation by a licensing board. Sometimes licensees neglect to notify the BBS, or other licensing board, of a move—consequently, they may neglect to renew their licenses in a timely manner. Also, be certain that the supervisor has been California licensed for two years prior to commencing supervision. The following licensed professionals may be supervisors: physicians certified in psychiatry by the American Board of Psychiatry and Neurology, psychologists, clinical social workers, and marriage and family therapists. Verify on the licensing boards’ website that the supervisor’s license is current, valid, and not under suspension or probation. Be sure to check again at the time of the supervisor’s next renewal to make sure that the license is subsequently renewed. A supervisor’s failure to renew his or her license will result in a

loss of hours to the supervisee.

**Note:** *The only exception to the two-year license requirement is supervisors who provide supervision only to trainees at an academic institution that offers a qualifying degree program, where the supervisor has been licensed in California and in any other state, for a total of at least two years prior to commencing any supervision.*

### **Supervisor Mandatory Continuing Education**

Supervisors, licensed by the Board of Behavioral Sciences who supervise MFT interns and trainees, are required to complete each license renewal period, six hours of continuing education in supervision. This coursework is to be taken either prior to or within sixty days after commencing the supervision of an intern or trainee. However, the supervisors' negligence in failing to take the required coursework will not result in the loss of hours for the intern or trainee.

### **Payment for Supervision**

The BBS has stated that it is the intent of Labor Law that MFT interns and trainees are not to pay their employers for supervision. However, that said, the BBS has indicated that it is not their responsibility to enforce the Labor Code. The MFT licensing law does not expressly prohibit paying for supervision and specifically condones paying for supervision when the supervisor is offsite and a letter of agreement has been executed between the involved parties. The BBS has also stated that there is no prohibition against volunteers paying for supervision. We, at CAMFT, do not find the Labor Code as definitive as the BBS claims it to be and our conclusion is that supervisees could be permitted to pay employers for supervision as long as there are explicit written agreements between employees and employers. For a more complete explanation, CAMFT has written other articles on paying for supervision that may be accessed on the CAMFT website. We would discourage interns employed in private practice from paying their employers for supervision. Since the employer collects all of the income generated by interns, the employer can factor the costs of supervision into other overhead costs before determining the wages to be paid to interns.

### **Offsite Supervision or Supervision Not Paid for by the Employer**

It is permissible to get offsite supervision in any work setting other than private practice. It is also permissible for MFT interns, trainees, and applicants to pay for supervision to their offsite supervisors, but only where an appropriately executed letter of agreement exists. This letter of agreement (the original) must be filed by the applicant with his/her application to take the examinations for licensure. A Sample Letter of Agreement For Offsite Supervision can be found at the end of this article. This letter of agreement should be typed onto the letterhead of the employer as it is the employer who is permitting the "offsite supervision," or permitting the supervisee to get supervision not provided by the employer.

### **Who May Not Supervise**

Interns and trainees are not to gain any experience under the supervision of a spouse, relative, or domestic partner. Any experience obtained under the supervision of a supervisor with whom the applicant has had or currently has a personal or business relationship that undermines the authority or effectiveness of the supervisor shall not be credited toward the required hours of supervised experience. Additionally, interns and trainees cannot receive supervision from anyone who has ever been their therapist.

### **Individual Supervision**

Individual supervision means one supervisor and one person being supervised. As regulation specifies, supervision is to be "one-on-one, individual, and face-to-face." One hour of individual supervision means sixty minutes of supervision.

### **Group Supervision**

Group supervision means a group of not more than eight persons being supervised by one supervisor.

Again, the supervision, according to regulation, is to be "face-to-face." Two supervisors for a

group of sixteen supervisees would not be acceptable. Two hours of group supervision means one hundred twenty minutes of supervision. Each hour of supervision may occur on different days as long as it occurs within the same week in which the hours are being claimed.

#### **Exception to Face-to-Face Supervision**

An exception to face-to-face supervision is where an intern is working in a government entity, a school, college, or university, or an institution that is both nonprofit and charitable, and such intern may gain supervision by two-way, real-time videoconferencing.

#### **Other Supervision Guidance**

Supervisees may have some weeks where they receive solely individual supervision and some weeks where they receive solely group supervision.

Separate supervision is required for each work setting in which one is gaining hours of experience. For example, intern in setting one gains three hours of experience and is therefore required to have one hour of individual or two hours of group supervision in that setting, and in setting two sees five clients and is also required to have one hour of individual or two hours of group supervision for this setting.

For hours of experience to count within a given week, supervision must occur within the same week that the hours are gained. However, for trainees the ratios are not necessarily required to be achieved within the same week as the hours of experience are gained.

A supervisor may supervise an unlimited number of interns and trainees in any appropriate work setting other than private practice, but is limited to supervising two MFT interns when those interns are employed in private practice. Supervisors are limited to supervising groups of no more than eight persons under supervision.

A supervisor shall give at least one week's written notice to an intern or trainee of the supervisor's intent not to sign for any further hours of experience for such person. A supervisor who has not provided such notice would be obligated to sign for hours of experience obtained in good faith where such supervisor actually provided the required supervision and the supervisee actually gained experience.

The supervisor is required to have practiced psychotherapy or provided direct supervision for at least two years within the five year period immediately preceding any supervision.

The supervisor is required to address with the intern or trainee the manner in which emergencies will be handled.

The supervisor is required to obtain from the supervisee, the name, address and telephone number of the prior supervisor and employer. The intent is that the supervisor will address with the prior supervisor and employer issues and concerns that will benefit the supervision of the intern or trainee.

The supervisor is required to verify that the site is appropriate for gaining hours of experience.

#### **Miscellaneous Reminders**

##### **Employment/Volunteer/ Independent Contractor**

Interns, trainees, and applicants may only perform services as employees (IRS Form W-2) or as volunteers, and not as independent contractors (IRS Form 1099). Interns, trainees, and applicants who have been hired and paid on an independent contractor basis will have their hours denied.

The BBS views independent contractor status as self-employment, which is the reason such hours are denied. One may only be self-employed following licensure. If employed, an applicant for the license shall provide the board with copies of the corresponding W-2 tax forms for each year of experience claimed when applying for the license. If volunteering, an applicant shall provide the BBS with a letter from his or her employers verifying the intern's employment as a volunteer when applying for the license.

##### **Payment for Expenses**

Trainees, interns, and applicants who provide volunteered services or other services, and receive no more than a total, from all work settings, of five hundred dollars per month as reimbursement for expenses actually incurred for services rendered in any lawful work setting other than private

practice, shall be considered employees and not independent contractors. The board may audit applicants who receive reimbursement for expenses, and applicants have the burden of demonstrating that the payments received were for reimbursement of expenses actually incurred.

#### **Disclosure**

Interns, trainees, and applicants are required to inform clients, prior to performing professional services that they are unlicensed and working under the supervision of licensed marriage and family therapists, licensed clinical social workers, licensed psychologists or licensed physicians certified in psychiatry by the American Board of Psychiatry and Neurology.

#### **Remuneration from Patients/Clients**

Interns, trainees, and applicants shall not receive any remuneration from patients or clients, and shall only be paid by their employers.

#### **Where Services May Be Provided**

Trainees, interns, and applicants shall only perform services at the place where their employers regularly conduct business, which may include performing services at other locations, so long as the services are performed under the direction and control of their employers and supervisors and in compliance with the laws and regulations pertaining to supervision. For example, an intern working in private practice may see a patient in the hospital. Or, a trainee may see a patient who is homebound, on behalf of the agency that employs him/her, in the home of the patient.

#### **Private Practice**

Interns must be “registered” at the time employment in a private practice begins. Interns must be in their initial six-year intern registration period while gaining any hours of experience in private practice.

#### **Supervision in Private Practice by Someone Other Than Employer**

The supervising licensee in a private practice shall either be employed by and practice at the same site as the intern’s employer, or shall be an owner or shareholder in the private practice.

#### **Supervision when Supervisor is on Vacation or Sick Leave**

Alternative supervision may be arranged during a supervisor’s vacation or sick leave if the supervision otherwise meets the requirements of the licensing law.

#### **Lawful Employment Settings for Trainees**

A trainee may gain experience as an employee or volunteer in any setting that lawfully and regularly provides mental health counseling or psychotherapy; provides oversight to ensure that the trainee’s work at the setting meets the experience and supervision requirements required by law, is within the scope of practice for the profession, and is not a private practice.

#### **Requirement for Hours Gained as a Trainee**

For all hours gained as a trainee, the school must have a written agreement with the employer where the hours are gained. If no agreement exists, such hours cannot be counted while a trainee.

#### **Lawful Employment Settings for Interns**

Registered interns may work in all of the settings in which trainees may work, and in addition, they may, during their initial six-year intern registration, be employed or volunteer in private practices.

#### **Lawful Employment Settings for Applicants for Intern Registration**

A person who is post degree, awaiting intern registration, may work in any setting appropriate for a trainee, and may not work in private practice. Persons who are in their second six-year intern registration period may likewise not work in private practice.

#### **Ownership of a Practice or Business**

Trainees and interns shall have no proprietary (ownership) interest in their employers’ businesses and shall not lease or rent space, pay for furnishings, equipment or supplies, or in any other way pay for the obligations of their employers. This means that interns and trainees will not be signers on joint checking accounts with employers, pay remodeling costs for office space, pay advertising costs, etc.

#### **Employee vs. Volunteer**

The requirements of law and regulation are applicable equally to persons who are employees and persons who are volunteers. Do not presume that if you are a volunteer and law or regulation says "employee," that it does not apply to you. You are bound by the same requirements whether you are an employee or a volunteer.

**Responsibility Statement for Supervisors**

This statement is to be signed by the supervisor prior to commencing supervision with an intern, trainee, or applicant. These forms are on the BBS website at [www.bbs.ca.gov](http://www.bbs.ca.gov). Interns are to submit Supervisor Responsibility Statements to the Board for all supervisors upon application to take the examinations for licensure.

**Notification of Change of Address**

Licensees, registered interns, and applicants are required to notify the BBS within 30 days of a change of address.

Enter Masters degree program  
12 Semester 18 Quarter Units required to collect hours  
Complete Masters degree program  
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Degree granted/  
confirmed/posted

Must apply for Intern

Registration within 90 days to be able to collect hours during this time. Employment in private practice not permitted.  
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Requirements for hours are the same as for Interns.

Maximum of six years as a Registered Intern however may reapply for a new intern number and hours roll forward.

Private practice employment not permitted in subsequent six year intern registration periods.

Application pending or hours approved and in examination process or passed exams and awaiting receipt of license.  
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When application approved, one hour of individual or two hours of group supervision required in each work setting.

*Congratulations!*

License granted as a Marriage and Family Therapist.

Supervision for first 10 hours of experience, one hour individual or two hours group plus one additional individual hour or two additional group supervision hours for hours over 10

Supervision Ratios

5 to 1 individual or 5 to 2 group

Trainee Applicant Registered Intern Applicant Licensed

Must complete 12 semester or 18 quarter units of study to collect hours.  
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Exception: hours for personal psychotherapy

Workshops, seminars, training sessions, and conferences approved by supervisor

Up to 500 of the practicum hours of experience (depending on the number actually gained) are exempt from the "six year rule."

**750 Hours Maximum** client contact and supervision

Masters Program (Maximum of 1300 total hours gained as a trainee)

**Minimum of 150 Hours** of client contact in practicum 300 hours

maximum personal psychotherapy received (100 x 3 = 300) do not require supervision

3,000 Hours Total

1,250 Hours Maximum 1,750 Hours Minimum

Administering and evaluating psych tests, writing clinical reports, writing process or progress notes  
Workshops, seminars, training sessions, and conferences approved by supervisor  
Personal psychotherapy received (100 x 3= 300 hours) do not require supervision

**250 Hours Maximum 300 Hours Maximum**

**250 Hours Maximum**

May be individual, or couples, families, and children Diagnosing and treating couples, families, and children. (First 150 hours with couples and families may be double-counted.) Group counseling or therapy Psychotherapy, crisis counseling, or other counseling by telemedicine (telephone or Internet)

**500 Hours Minimum**

**375 Hours Maximum**

**500 Hours Maximum**

**250 Hours Maximum**

**300 Hours Maximum**

**Hours Remaining**

Minimum of six semester or nine quarter units of practicum

**Minimum of 225 Hours** of client contact in practicum although 75 hours may be in client centered advocacy

Those beginning Graduate Study prior to August 12, 2012 Those beginning Graduate Study on or after August 1, 2012 or who are meeting the requirement of the new law

**250 Hours Maximum**

Administering and evaluating psychological tests of counselees, writing clinical reports, writing progress notes, or writing process notes

Individual and Group Supervision (no more than five hours per week)

Client centered advocacy

**Maximum Limited by 1250 Total Hours**

**Maximum Limited by 1250 Total Hours**

## APPENDIX II: AFTER YOU GRADUATE

This information is provided to assist you through the internship process. You can find additional information online at [www.bbs.ca.gov](http://www.bbs.ca.gov).

### A. Original Forms to Keep

It is important to keep track of your original paperwork. The BBS will require original documents of the following forms:

1. MFT Experience Verification form(s)
2. MFT Weekly Summary Hours of Experience form(s)
3. Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Intern form(s)

### B. [Navigating the MFT Licensing Process](#)

### C. [MFT Intern Registration Application Packet](#)