

## Practicum Site Information Page

Site Name: \_\_\_\_\_  
Site Director's Name : \_\_\_\_\_  
License Type: \_\_\_\_\_  
Site Director's Phone: \_\_\_\_\_  
Site Director's Email: \_\_\_\_\_  
Site Street Address: \_\_\_\_\_  
Site City: \_\_\_\_\_  
Site State: \_\_\_\_\_ Site Zip Code: \_\_\_\_\_

### Site Supervisors:

Name: \_\_\_\_\_  
C.V. and License (included): \_\_\_\_\_  
Name: \_\_\_\_\_  
C.V. and License (included): \_\_\_\_\_

### Type of Practicum Accepted: *please mark all that apply*

M.A. Counseling \_\_\_\_\_ M.A. Clinical \_\_\_\_\_ Supplemental \_\_\_\_\_  
Psy.D. Diagnostic \_\_\_\_\_ Psy.D. Therapy \_\_\_\_\_ Psy.D. Advanced \_\_\_\_\_

### Info for Applicants:

Number of Applications Accepted per year: \_\_\_\_\_ Positions Available: \_\_\_\_\_  
Vitae: \_\_\_\_\_ Cover Letter: \_\_\_\_\_ Letter(s) of Recommendation: \_\_\_\_\_  
Transcript: \_\_\_\_\_ Writing Sample: \_\_\_\_\_  
Start and End Dates: \_\_\_\_\_

### Distance and Transportation:

Distance From Chicago: <15 miles \_\_\_\_\_ 15-30 \_\_\_\_\_ 30-60 \_\_\_\_\_ >60 miles \_\_\_\_\_  
Car Needed (Y/N): \_\_\_\_\_ Public Transportation Available (Y/N): \_\_\_\_\_

### Training:

Type of Setting: \_\_\_\_\_  
Training in evidence-  
based practices? \_\_\_\_\_  
Training Emphasis: \_\_\_\_\_

Population Served: \_\_\_\_\_

Previous Experience Needed: \_\_\_\_\_

