Fargo Public Schools Guidance & Counseling Practicum/Internship Information

Welcome

Greetings! Thank you for considering the Fargo Public Schools as a potential site for your Counseling & Guidance practicum or internship. We are committed to providing the students in our district with access to quality personal, social, educational, and career development counseling services. Our network of both elementary and secondary school counselors can be an excellent resource for you as you work your way through the educational process of becoming a school counselor.

To make this a quality experience for you, your counseling supervisor, and especially our students, it is important that we have a complete picture of you and of your expectations as an intern. It is with this in mind that the following intern application materials must be submitted.

Application Overview

To be considered as a practicum/intern in the Fargo Public Schools, applicants must:

- 1. Submit a *letter of request* to be a practicum student/intern in the Fargo Public Schools. (include your graduate program's required total hours for the practicum or internship experience).
- 2. Complete and submit the attached School Counseling Practicum/Internship Application.
- 3. Submit two Letters of Recommendation.
- 4. Submit an updated resume.
- 5. Provide to the district Human Resource Department a completed *background check*.

These materials should be submitted to:

Associate Superintendent Fargo Public Schools 700 7th Street South Fargo, ND 58103

Fax: 701.446-1200

Deadlines to submit application materials:

To start Fall Semester: February 15th
To start Spring Semester: October 15th

School Counseling Practicum/Internship Application Fargo Public Schools

| Name: | | | Address: | _ |
|--|-------------------------------------|------------------------|---|---|
| | | | | _ |
| Phone: day: | cell: | | Email: | |
| Graduate Counseling prog | gram: NDSU | MSU-M | Other: | |
| Position you are applying (Note: If applying for an i | | | Internship a practicum experience? If so, where?) | |
| Educational level you are K-5 | requesting (check all Middle Scl | | High School (9-12) | |
| Fargo School(s) and/or C | ounselor(s) you are re | equesting (if appl | olicable): | |
| Term(s) you are requesting | g practicum/internshi | p: School year: _ | Semester: Fall Spring bot | h |
| Counselor Intern's Liabil Membe | ity Company & numb ership: ASCA | er (if applicable) ACA | e): Other | |
| Counselor Intern's Gradu | ate Supervisor: | | Phone: | |
| Number of hours of <i>Inter</i> . Number of hours of <i>Prace</i> | | | | |
| Goal Statements : Prioriti internship: | ze the top three learn | ing goals that yo | ou have identified for yourself as part of this | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |