AUBURN UNIVERSITY SYLLABUS

SPECIAL EDUCATION, REHABLITATION, COUNSELING/SCHOOL PSYCHOLOGY

Spring Semester 2010

COURSE NUMBER: RSED 4920

Course Title: Rehabilitation and Disability Studies Internship

Credit Hours: 9

Instructor: Nicholas C. Derzis Jr., M.Ed., CRC

Clinical Coordinator

Office: Haley Center 2056

Telephone: 844-2501

E-mail:<u>derzinc@auburn.edu</u>

Supervising Instructor: Dr. Rebecca S. Curtis, CRC

Assistant Professor

Office: Room 1224D, Haley Center

Telephone: (334) 844-2091 E-mail: <u>curtirs@auburn.edu</u>

Date Syllabus Prepared: January, 2009 **Updated:** May, 2009, August, 2009, January

2010

Schedule: This course will meet approximately seven times throughout the course of the semester. The meeting dates will be determined during the first class meeting. There will also be an internship site visit that will be scheduled after mid term.

I. Course Purpose and Objectives:

The purpose of this course is to provide the student with a supervised experience in a human service organization. This experience should expose the student to issues affecting the rehabilitation process and/or the delivery of rehabilitation services.

The internship experience is 600 hours at an approved rehabilitation site.

Objectives that each student must, at a minimum, accomplish are:

- 1. To become familiar with the organizational structure of the unit or agency including the role and function of staff.
- 2. To become familiar with the philosophy, mission, and goals of the unit or agency exclusive to the agency.

- 3. To become aware of potential legal issues that may affect the effective functioning of the unit or agency regarding delivery of services.
- 4. To become aware of unit or agency standards that assures quality of care and services provided.

II. Textbooks

There are no required textbooks for this course. Any supplementary readings will be provided by instructor.

III. Instructional Method

In addition to the 600 hours of field experience, the student must *attend all scheduled class meetings*. These class meetings will consist of discussing each student's internship experience and the course objectives relative to each individual's internship site.

IV. Course Requirements

A) Internship

To initiate internship, the student proposal form must be turned in with site information prior to the semester of the internship being proposed. This is to allow for proper approval of the internship site. The internship site selected must be approved by the course instructor. Submission of all requested information and forms must be completed before beginning internship hours at selected site.

B) Attendance Policy

It is expected that each student will attend the scheduled class meetings. The student will report to class on time, and be prepared with any assignments for that class meeting. This class will be meeting approximately 7 times during the semester. Only under extreme circumstances will an absence be excused, preferably with prior notice of absence requested and approved by the class Instructor.

C) Journal

As a part of the internship experience, each student will keep a weekly log or journal of their experiences for each week of the Internship. These entries should reflect on: new learning, experiences during the week, your personal thoughts on the activities you participated in or shadowed, and general thoughts regarding the week. **Journal entries should be approximately** one to two (1-2) pages in length and turned in weekly via e-mail or fax derzinc@auburn.edu, fax (334) 844-7677

D) Log of Hours

Each student will fill out a weekly log documenting the hours at the Internship site. The log of hours needs to be turned in on the last day of class, documenting your 600 hour experience.

E) Reflection

Each student will need to write and turn in a Reflection paper on their internship experience. This will be similar to the journal, but more comprehensive. This Reflection should be a minimum of *three to five (3-5) pages* in length and in APA style. This assignment is due on the last day of class.

V. CORE Accreditation

Auburn University's Rehabilitation Counseling program is fully accredited by the Council on Rehabilitation Education (CORE). This course meets the standards set for the supervised clinical internship experience.

VI. Liability Coverage

Student's officially registered and enrolled at Auburn University are covered by professional liability insurance in the amount of \$1,000,000. Students who may need to document this coverage may request such from the College of Education's Educational Services Office. The phone number for this office is (334) 844.4448

VII. Class Policy Statements

Classroom Attendance: RSED's attendance policy is that (a) only one (1) absence is permitted for a semester course that meets once a week, and (b) only two (2) absences are permitted for a semester course that meets two or more times a week. Failure to meet this standard will result in a grade of "FA" (failure for excessive absences) unless the student withdraws from the class prior to the withdrawal date (see university semester calendar). At the discretion of individual instructors, verified absences may be excused under unusual circumstances (see *Tiger Cub*). In order for the absence to be considered excusable, however, the instructor must be in receipt of the documentation within seven days from the class in which the absence occurred.

Auburn University Policy on Classroom Behavior: "... Behavior in the classroom that impedes teaching and learning and creates obstacles to this goal [learning] is considered disruptive and therefore subject to sanctions ... Students have the responsibility of

complying with behavioral standards... Examples of improper behavior in the classroom (including the virtual classroom of e-mail, chat rooms, telephone, and web activities associated with courses) may include, but are not limited to the following: \$ arriving after a class has begun \$ eating or drinking \$ use of tobacco products \$ monopolizing discussion \$ persistent speaking out of turn \$ distractive talking, including cell phone usage \$ audio or video recording of classroom activities or the use of electronic devices without the permission of the instructor \$ refusal to comply with reasonable instructor directions \$ employing insulting language or gestures \$ verbal, psychological, or physical threats, harassment, and physical violence." (See *Tiger Cub*).

Accommodations for Students with Disabilities: Students who need accommodations are asked to arrange a meeting during office hours the first week of classes, or as soon as possible if accommodations are needed immediately. If you have a conflict with my office hours, an alternate time can be arranged. To set up this meeting, please contact me by e-mail. Bring a copy of your Accommodation Memo and an Instructor Verification Form to the meeting. If you do not have an Accommodation Memo but need accommodations, make an appointment with The Program for Students with Disabilities, 1244 Haley Center at 844-2096 (V/IT).

Cheating: The Auburn Academic Honesty Code (Policy) is found in both the *Tiger Cub* and the Student Government Association's Code of Laws. Students are to read the honor code carefully, making sure they understand the policy, its implications for their work (e.g., tests, reports, papers, projects), and the consequences of code violation. Noncompliance with this policy will result in formal action with the university academic honesty procedures. Among other things, are responsible for understanding the definition of plagiarism. Individuals are to (a) reference materials they use, and (b) reference only material they access directly. Individuals who copy or use ideas from the works of others without properly acknowledging the author, risk grave consequences.

Assignments: All written assignments are expected to conform to the current style manual of the American Psychological Association (APA). Written assignments are expected to be typewritten, grammatically accurate, and free of spelling and typographical errors. Assignments are to be of a quality that would be expected of a professional.

Student Academic Grievance Policy: The purpose of this university policy is to "resolve academic grievances of students, which results from actions of faculty or administration. This resolution should be achieved at the lowest level and in the most equitable way. The burden of proof rests with the complainants." See *Tiger Cub* (page 96) for steps toward redress.

Professionalism: As faculty, staff and students interact in professional settings, they are expected to demonstrate professional behaviors as defined in the College's conceptual framework. These professional commitments or dispositions are · Engage in responsible

and ethical professional practices \cdot Contribute to collaborative learning communities \cdot Demonstrate a commitment to diversity, and \cdot Model and nurture intellectual vitality.

STUDENT INTERNSHIP PROPOSAL

To initiate internship, this form must be turned in with proposed site information three (3) weeks prior to the semester of the internship being proposed. This is to allow proper inspection and review of the internship site.

Name of Student:				
•	Last	First		Middle/Maiden
Proposed Start Date:				
Name of Supervisor:				
Name of Facility:				
Address:				
Phone:				
· ·	, d	lease describe the facilit	, ,	G 37
Date Received:			proved	☐ Declined
Received By:		Date	e:	

Please return form to:

Nick Derzis, M.Ed., CRC
Undergraduate & Graduate Clinical Coordinator
Special Education, Rehabilitation, Counseling/School
Psychology
2084 Haley Center
Auburn University, AL 36849
(334)844-7676
derzinc@auburn.edu

OBJECTIVES FORM

Student:____

Auburn University Practicum in Rehabilitation & Disability Studies Department of Special Education, Rehabilitation, Counseling/School Psychology

Site:	
Supervisor:	
Telephone:	
Mail:	-
Days/Hours Per Week:	-
Learning Objectives:	
Organizational:	
1. To become familiar with the organizational structure of the unit or agency inc and function of staff.	luding the role
2. To become familiar with the philosophy, mission, and goals of the unit or age policies and procedures of the unit or agency that affect the delivery of services.	ncy inclusive of

3. To become aware of potential legal issues that may affect the effective functioning of the unit

or agency regarding delivery of services.

4. To become aware of unit or agency stand	lards that assures quality of care.
Individual:	
5.	
6.	
7.	
8.	
0.	
Site Supervisor:	Date:
Student:	Date :
University Supervisor:	Date:

SUPERVISOR'S EVALUATION OF STUDENT OBJECTIVES

Auburn University Department of Special Education, Rehabilitation, Counseling/School Psychology Internship in Rehabilitation & Disability Studies

Student:	
Site:	
Supervisor:	
Telephone:	
Mail:	
Hours Completed:	
Please complete this form noting your judgment of the student's performance wit following organizational and individual learning objectives:	h regard to the
Organizational:	
1. To become familiar with the organizational structure of the unit or agency incand function of staff.	luding the role
2. To become familiar with the philosophy, mission, and goals of the unit or age policies and procedures of the unit or agency that affect the delivery of services.	ncy inclusive of
3. To become aware of potential legal issues that may affect the effective function or agency regarding delivery of services.	oning of the unit

4. To become aware of unit or agency standards that assures quality of care.

Individual:	
5.	
6.	
7.	
8.	
Site Supervisor:	Date:
Please return this form to:	Undergraduate Clinical Coordinator Nick Derzis, M.Ed., CRC Department of Rehabilitation and Special Education 2084 Haley Center Auburn University, Alabama 36849 (334) 844-7676 derzinc@auburn.edu

SUPERVISOR'S MONTHLY APPRAISAL FORM

Rehabilitation & Disability Studies Department of Special Education, Rehabilitation, Counseling/School Psychology 2084 Haley Center Auburn University, Alabama 36849

Date:			
Name of Student:	Last	First	Middle Initial/Maiden
Name of Supervisor:			
Name of Facility:			
	<u>R</u>	ating Standards	
Unacceptable (UN)		required for the position.	nd inferior to the standards of Performance at this level cannot be
Improvement Needed (IM)		erformance does not consist for the position.	stently meet the standards of
Meets Expectations (ME)			eets standards of performance for
Exceeds Expectations (EE)	Work performage position.	mance is consistently above	ve standard of performance for the
Outstanding (O)	Work perforation job.	mance is consistently supe	rior to standards required for the
Not Applicable (NA)	The intern is cannot be me		a specific rating factor, and it

Technical Skills (Effectiveness with which the intern applies job knowledge and skill to job assignments)

UN	IM	ME	EE	О	NA	RATING FACTORS
						Job Knowledge
						Analyze Problems
						Provides Suggestions for Work
						Improvement
						Employs Tools of the Internship
						Completely
						Follows Proper Safety Procedures

Quality of Work (Manner in which the intern completes job assignments)

UN	IM	ME	EE	0	NA	RATING FACTORS
						Accuracy or Precision
						Thoroughness/Neatness
						Reliability
						Responsiveness to Request
						For Service
						Follow-Through/Follow-up
						Judgment/Decision Making

Interpersonal Skills (Effectiveness of the intern's interactions with others and as a team participant)

UN	IM	ME	EE	О	NA	RATING FACTORS
						With Co-Workers
						With Supervision
						With Other Staff
						With Consumers/Patients
						Team Participation

Communication Skills (Uses Voice Effectively and acceptable writing)

UN	IM	ME	EE	0	NA	RATING FACTORS
						Written Expression
						Oral Expression
						Tact and Diplomacy

Appearance

UN	IM	ME	EE	0	NA	RATING FACTORS
						Clean
						Neat
						Appropriate Attire

Overall Performance Rating (please check one)

Unacceptable	☐ Improvement Needed	☐ Meets Expectations	Exceeds Expectations	Outstanding
Internship performance is inadequate and inferior to the standards of performance required for the position. Performance at this level cannot be allowed to continue.	Internship performance does not consistently meet the standards of performance for the position.	Internship performance consistently meets the standards of performance for the position.	Internship performance is consistently above standard of performance for the position.	Internship performance is consistently superior to standards required for the job.

Additional Observations or Comments:

	T . 4
Supervisor Signature:	Date:
Student Signature:	Date:

Please return form to:

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STUDENT INTERNSHIP APPRAISAL FORM

Rehabilitation & Disability Studies Internship

The purpose of this evaluation is to gather feedback information from you, the student consumer, about your field work experience. We would like you to provide us with information about the field work experience itself, offer an evaluation of your supervisor, and provide narrative/qualitative feedback.

Background Information:

Name of Student:			
N CC :	Last	First	Middle/Maiden
Name of Supervisor:			
Name of Facility:			
Address:			
Phone:			
Agency/ Organization			
Agency/ Organization	Mission. (Dife	i Description)	
Responsibilities: (Brief	Description)		

Evaluation of the Field Work Experience:

	Low			<u>High</u>
1. The pre-service training I received was useful and helped prepare me for my field work experience.	1	2	3	4
2. This placement enabled e to improve and expand my skills.	1	2	3	4
3. Overall, the field work experience was valuable.	1	2	3	4
Evaluation of Supervision:				
	Low			<u>High</u>
1. I received adequate orientation and direction from my supervisor	1	2	3	4
2. My supervisor is very knowledgeable.	1	2	3	4
3. Feedback from my supervisor was sufficient to meet my needs.	1	2	3	4
4. Supervisor's feedback and suggestions were helpful.	1	2	3	4
5. Support and assistance from my supervisor was useful	1	2	3	4
EVALUATIVE COMMENTS				
2. Indicate your reaction to your field experience.				

. What suggesti	ons do you have f	for improving	your field exp	perience?		
. What is your roould like to cha	eaction to the dailinge.	ly log requirer	ments? Indica	te good and ba	d features and wh	nat yo
. What piece of	advice would you	u like to give t	o any future i	ntern students?	,	

b. Any suggestions fo	r improving our und	ergraduate progra	am (things that yo	ou would like to see	e changed)

Please return form to:

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SUPERVISOR'S FINAL INTERNSHIP APPRAISAL FORM

Rehabilitation & Disability Studies Department of Rehabilitation & Special Education Auburn University

Date:			RSED Advis	sor:
Name of Student:	Last	Firm4		Middle Initial/Maiden
Name of Supervisor:				
Area(s) Supervised:				
Name of Facility:				
1. The above-named signal full days, of	tudent was or the equi	present from valent, in our	toto	, inclusive, and spent
2. The most valuable s	ervice ren	dered by the st	tudent to our facil	lity was:
3. In my opinion, the ofield of rehabilitation v				the student's preparation for the
4. Do you see any spec developed? If, so, plea			this student whic	h should be encouraged or
5. Do you see any specialleviated? If so, pleas		esses (persona	l or professional)	in this student which could be

Trait	Excellent	Satisfactory	Needs Improvement
APPEARANCE(clean ,neat, well-dressed and groomed)			
USES VOICE EFFECTIVELY (has sufficient range free from monotone, pleasing pitch, sufficient resonance and volume))			
USES ACCEPTABLE GRAMMER AND SENTENCE STRUCTURE IN SPEAKING AND WRITING			
DEPENDABILITY (prompt, willing to accept responsibility, generally carries job through to successful completion)			
INITIATIVE (often takes lead, eager to participate without being asked)			
WILLINGNESS TO COOPERATE WITH OTHERS			
HAS GENUINE LIKING FOR CLIENTS AND DESIRE TO WORK WITH THEM			
AWARENESS OF NEEDS OF CLIENTS			
PRACTICE OF PROFESSIONAL ETHICS			
ABILITY TO MOTIVATE INTEREST			
OVERALL POTENTIAL FOR DEVELOPING INTO A REHABILITATION PROFESSIONAL			

Additional Observations or Comments:		
Supervisor Signature:	Date:	
Student's Signature:	Date:	

Please return form to:

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Special Education, Rehabilitation, Counseling/School Psychology
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Auburn University, AL 36849
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REHABILTATION & DISABILITY STUDIES TIME LOG

Student's Name:	
Agency's Name:	

MONTH	WEEK	SUN.	MON.	TUES.	WED.	THURS.	FRI.	SAT.
	1.							
	2.							
	3.							
TOTAL	4.							
HOURS:	5.							
	1.							
	2.							
	3.							
	4.							
TOTAL HOURS:	5.							
	1.							
	2.							
	3.							
	4.							
TOTAL HOURS:	5.							
	1.							
	2.							
	3.							
	4.							
TOTAL HOURS:	5.							
	1.							
	2.							
	3.							
	4.							
TOTAL HOURS:	5.							

STUDENT S SIGNATURE.	
DATE:	
CLIDED VICOD & CLCN A TUDE	
SUPERVISOR'S SIGNATURE	
DATE:	