

**INTERNSHIP PROJECT FORM - COUNSELING TRACK  
DEPARTMENT OF PSYCHOLOGY  
THE UNIVERSITY OF WEST FLORIDA**

Student: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Practicum Location: \_\_\_\_\_

Internship Location: \_\_\_\_\_

**COMMITTEE:**

\_\_\_\_\_  
Chairperson

\_\_\_\_\_  
Member

\_\_\_\_\_  
Chairperson

\_\_\_\_\_  
Member

**INTERNSHIP PROJECT COMPLETION AND ORALS:**

Objective 1 – 1000 Hour Clinical Placement \_\_\_\_\_  
Date Achieved

Objective 2 - Internship Paper & Portfolio \_\_\_\_\_  
Date Achieved

**COMMITTEE APPROVAL SIGNATURES:**

\_\_\_\_\_  
Chairperson

Date

\_\_\_\_\_  
Department Chair

Date

\_\_\_\_\_  
Member

Date

\_\_\_\_\_  
Member

Date

\_\_\_\_\_  
Member

Date

**COMMENTS:** \_\_\_\_\_

Note: There must be a minimum of two members from the Department of Psychology (includes joint appointees and faculty associates, but not adjuncts) on the committee. All members must be informed of any changes in committee membership.