

For Office Use Only	
Approved _____	Date _____
Not Approved _____	Date _____
Approval Pending _____	Date _____
Date Processed _____	

NOTIFICATION OF CLINICAL PLACEMENT

Due within 2 weeks of acceptance

STUDENTS MUST HAVE MALPRACTICE INSURANCE THAT INCLUDES CAMPBELLSVILLE UNIVERSITY AS AN ADDITIONAL NAMED INSURED. This placement will not be approved until the student provides evidence of Malpractice Insurance. Contact AAMFT or CAMFT for Malpractice Insurance. See *Clinical Training and Placement Handbook* for more information.

Student agrees to defend, indemnify, and hold harmless the Phillips Graduate Institute, Los Angeles Education Center of Campbellsville University and its officers, employees, and agents, from all acts, claims, liabilities, costs, expenses, and losses (including reasonable attorney’s fees), or claims for injury or damage (collectively “**Claims**”) by whomever asserted arising out of Student’s performance of services during Clinical Placement, but only in proportion to and to the extent such Claims are caused by or result from the negligent or intentional acts or omissions of the Student.

Student’s Name _____ Current Term _____
PLEASE PRINT SEMESTER

Practicum Course Enrolled in: MFC 523 MFC 529 MFC 533 MFC 535 MFC 596

Name of Agency/Treatment Program _____

Address _____

City _____ Zip Code _____ Phone _____

Clinical Director _____
NAME DEGREE LICENSE#

Primary Supervisor _____
NAME DEGREE LICENSE#

PHONE EMAIL

Does the agency lawfully and regularly provide mental health counseling/psychotherapy? Yes No

Student will be scheduled _____ hours per week. The student will average _____ hours of direct client care. Student will receive _____ hour(s) of individual and/or group supervision per week. The student will be a volunteer or paid employee and begins on ___ / ___ / ___ and will end ___ / ___ / ___.

Student Signature _____ Date _____

Agency Representative’s Signature _____ Date _____

Phillips Clinical Training Office Signature _____ Date _____

Return completed form with proof of malpractice insurance to the Clinical Training and Placement Co-Director(s)