University at Buffalo Counseling Services (UBCS)

Application for: Advanced Practicum/Externship Training Position

1. Name		2. Date of Application
3. Address		Phone
		E-mail
4. Name of university/c	legree program in whici	h you are currently enrolled:
Entry Date into the Program		Expected Completion Date of Program
Current GPA		
(Please answer questi	ons 5-8 on separate p	aper)
5. Describe previous pr	actica experiences in ter	rms of:
a) Agency settingb) Client populationc) Nature of your cod) Supervisor(s) and	ontact (group, individua	al, vocational, testing, case management, etc.)
6. Briefly describe the re	easons for your interest	in a training position at UBCS and your overall goals for this experience.
7. Describe what you be	elieve are the needs, cha	allenges, and experiences unique to a college population.
8. Describe your orienta	ation to psychotherapy	and your expectations for supervision.
9. Signature of Advisor:		
10. Please submit:	a) Completed application from (including your responses to questions 5-8)b) Two (2) letters of reference, with at least one (1) from a clinical supervisorc) Current clinical vita	
Application deadline: M	larch 11, 2022	
Send completed applica	As Co 12 Ur Bu Ph	manda Tyson-Ryba, Ph.D. ssistant Clinical Director bunseling Services 0 Richmond Quadrangle niversity at Buffalo uffalo, NY 14261-0053 none: (716) 645-2720 mail: atyson@buffalo.edu

Additional information about this placement is available on-line at: www.buffalo.edu/studentlife/counseling