## REQUEST FOR INTERNSHIP PLACEMENT

TO:	Director of Student Services or Human Resources located in the
	school district.
FROM:	Camille J. Odell, M.S., Director Professional School Counselor Education Program
RE:	School Counseling Internship Placement for [Name]
DATE:	[ Date ]
[ Name ] has qualified for participation in an internship in school counseling and college and career readiness support by completing the course work required by the Utah State Office of Education and the Department of Psychology at Utah State University. The student has passed the Utah Educator Background Check required by the Utah State Office of Education for K-12 education. Your assistance in identifying and approving an appropriate site or sites in your district for this student would be greatly appreciated.  This document of eligibility is to be presented to you by the prospective intern. The	
	gible to work under the supervision of a level 2 licensed school counselor in
The student i activities.	s to complete 600 clock hours, and will be required to keep a log of
Student Name:	
Student Phone Number:	
Student Email Address:	
If you have any questions about the qualifications of this candidate, please contact me at (435) 797-5576 or by email at <a href="mailto:camille.odell@usu.edu">camille.odell@usu.edu</a> .	