

Documentation of Impact of COVID 19 on Internship Training

ACADEMIC Program Reporting

This form was developed to help programs keep track of the decisions made about the completion of internships that may have been impacted by COVID-19. Use of this form is voluntary and does not guarantee that regulators in any jurisdiction will automatically accept the decisions made. Regardless, this form may be useful for Directors or interns to use to recall what was decided and why, in order to answer any questions raised by a regulator.

Name of Student:				
Degree program:	Masters	Doctoral		
Type of Program:	PhD	PsyD		
Type of Training:	Clinical	Neuro	Counseling	School
Year of Internship training	ng:			
Date of completion of th	nis form:			
Form completed by:				
DESCRIPTION O	F IMPACT AND RESPO		COMPLETING INT	TERNSHIP
	•	out for each intern)		
Did the student successfully complete their internship?		Yes	No	
	ully complete their in	ternship?	165	No
If no, how many hours d		ternship?	163	INO
	id they obtain?	·	Yes	No
If no, how many hours d	id they obtain? modifications to their	internship training?		
If no, how many hours d Did they experience any If yes, what was the nate	id they obtain? modifications to their	r internship training?	Yes	No
If no, how many hours d Did they experience any If yes, what was the natu Minimal Modificati	id they obtain? modifications to their ure of these modificat	internship training? ions? halted briefly as servi	Yes ces were moved	No online)
If no, how many hours do Did they experience any If yes, what was the natu Minimal Modificati Moderate Modifica	id they obtain? modifications to their ure of these modificat ons (e.g., training was	internship training? ions? halted briefly as serving activity cut short be	Yes ces were moved efore completion	No online)
If no, how many hours do Did they experience any If yes, what was the natu Minimal Modificati Moderate Modifica	id they obtain? modifications to their ure of these modificat ons (e.g., training was tions (e.g., core training or Disruptions (e.g.)	internship training? ions? halted briefly as serving activity cut short be , entire training comp	Yes ces were moved efore completion	No online)

What approach did the academic institution take to demonstrate that this student met
competencies that are required to graduate with their degree? (select all that apply):
Reviewed the modifications made by the internship program
Yes No
Reviewed past practicum experiences (specifically within the area of anticipated competence) and
confirmed training standards were met when considered across practicum and internship training
Yes No
Created new practicum experiences for any required final practicum or training hours needed for
successful completion of the program
Yes No
What other modifications did the program make that are not captured above?
In what ways did the rapid adjustment to COVID-19 afford the intern new learning opportunities?
what mays and the rapid dayastinent to do the 125 and a the intermited featuring opportunities.
FINAL COMMENTS
Please summarize any deviations from your student's original trajectory for degree completion that
did not impact their ability to have their degree conferred, but did impact their stated goals.
Any other comments?