

FORM 1: PRACTICUM PLACEMENT READINESS FORM

To: Practicum Coordinator
UBC Counselling Psychology Program

From: _____ faculty advisor or thesis supervisor

RE: _____ student name, in () MA () MEd

As the above student's faculty advisor or thesis supervisor, I certify that the student has successfully completed all the pre-requisites for enrolling in CNPS 598.

The above student has a plan to complete, as co-requisites with CNPS 598, a **maximum of nine credits** from the following list of acceptable courses:

- | | |
|------------------------------|---------------------------------|
| () CNPS 532 (Assessment) | Expected completion date: _____ |
| () EPSE 528 (Measurement) | Expected completion date: _____ |
| () CNPS 584 (Program Dev't) | Expected completion date: _____ |
| () CNPS 579 (Thesis Prep) | Expected completion date: _____ |

The above student is expected to meet successfully all the pre-requisites for enrolling in CNPS 598 by Date: _____

I hereby certify that the above student:

- **has completed all required course work or has a clear plan to complete the required courses described above as co-requisites with CNPS 598**
- **has sufficient clinical competencies, professionalism, emotional stability, and personal maturity for engaging in clinical work.**

I consider that the above student is ready to enroll in CNPS 598 and commence their field practicum.

Date: _____ **Signature:** _____
Faculty Advisor or Thesis Supervisor