

INTERNSHIP SUPERVISION AGREEMENT

Certified Alcohol and Drug Counselor Intern (CADC-I) ☐

Certified Licensed Clinical Alcohol and Drug Counselor Intern (CLCADC-I) ☐

Certified Problem Gambling Intern (CPGC-I) ☐

This agreement is made by and between the below parties:

Intern/Intern Candidate Information (Please print):	
Name	
Home Address	
Email	
Phone #	

Supervisor Information (Please print):				
Name				
Email				
Phone #				
Credentials	CADC#	LADC#	LCADC#	CPGC#
	CADC-S#	LADC-S#	LCADC-S#	CPGC-S#
Co- Supervisor Information (if applicable):				
Name				
Email				
Credentials	CADC#	LADC#	LCADC#	CPGC#
	CADC-S#	LADC-S#	LCADC-S#	CPGC-S#

Place of Practice			
Agency Name		Agency Phone #	
Agency Address		Position Title	
		Counseling Hours per week	

This agreement will begin on _____ with the understanding that ***the intern/intern candidate is prohibited from practicing or accruing hours until an official internship certificate is issued. Once issued, that will be the start date of the internship.*** This agreement will continue until terminated by either party, the intern is issued a Provisional Certificate and is no longer under supervision, or the intern has passed *both* the written and oral exam and is fully credentialed.

Intern/Intern candidate agrees to:	Intern Initials	Supervisor agrees to:	Supervisor Initials
Review and abide by NAC & NRS 641C		Review and abide by the Supervisor duties outlined in NAC 641C.285	
Review, understand, and abide by all ethical guidelines as outlined in NAADAC/NCC AP Code of Ethics		Provide a minimum of one hour each week of individual supervision	
Complete all documentation as required		Observe client sessions at least one time per month	
Provide informed consent to clients, including information regarding trainee's supervised status		Maintain access to and review files of any client receiving services from the intern	
Meet with supervisor at least one time per week for supervision in order to accrue hours for that week		Review and co-sign all clinical documentation made by the intern in the client record	
Review and complete the Intern Progress Report form with supervisor		Document all supervision and observation sessions accurately on the Intern Progress Report and initial/sign as required	
Complete 10 CEUs within each six-month reporting period in accordance with NAC 641C.040, NAC 641C.300, and NRS 641C.450		Review Intern Progress Report prior to initialing and signing to ensure accurate reporting	
Notify the Board within 5 business days of any supervision changes		Refrain from engaging in a close personal relationship or friendship with the intern	
Cease practicing if no longer under supervision, unless a Provisional Certificate has been issued		Notify the Board within 5 business days of <u>any</u> supervision changes including transfers, leaves, or terminations	
Other activities as prescribed by supervisor:		Maintain active status with both credentials (CADC/LADC/LCADC and Supervisor Certification)	
		Complete Clinical Supervisor training as required by the Board in order to renew my Supervisor credential	
		Be available to consult with the Board about a certified intern being supervised concerning the clinical record, competence in practice, emotional and mental stability, and professional and ethical conduct of the certified Intern	

	YES	NO
Are you employed/contracted at the intern's place of practice with access to client files?		
Are you related to the intern?		
Have you ever provided treatment services to the intern?		
Number of interns currently under your supervision?		

GENERAL PROVISIONS

This agreement supersedes any and all other agreements, oral or written, between Intern and Supervisor hereto with respect to the rendering of supervision of Intern by Supervisor. This document contains all the covenants and agreements between Intern and Supervisor with respect to representations, inducements, promises or agreements, orally or otherwise, made by any party, or anyone acting on behalf of any party, which are not embodied herein, and that no other agreement, statement or promise not contained in the agreement will be void.

Any modification of this agreement will be effective only if in writing, submitted to and approved by the Board of Examiners for Alcohol, Drug and Gambling Counselors. Such modifications must be in compliance with applicable Nevada Revised Statutes and Nevada Administrative Code and submitted within **five business days** of any changes.

If any action at law or in equity, including an action for declaratory relief, is brought to enforce or interpret the provisions of this agreement, the prevailing party will be entitled to reasonable attorney's fees, which may be set for that purpose, in addition to any other relief that the party may be entitled.

This agreement will be governed by and constructed in accordance with the laws of the State of Nevada.

As an intern, I understand that:

- All progress reports may be shared with future supervisors and the Board in the event that I apply to the Board for a different supervisor in the future.
- I can only accrue hours for direct client care as well as activities that support direct client care and can only accrue 1000 hours in a six-month period regardless of multiple internship sites/supervisors.
- I have **five years** from the start of my internship to accrue the required hours. This includes when my credential may be inactive, delinquent, or expired.
- Once my required hours are completed, if I am still practicing, I must either remain an intern or request a Provisional Certificate in the application for full credential which will allow for practicing for six months without supervision while working on passing the exams.

My signature below indicates I have read and understand this agreement in its entirety.

Intern Signature

Date

As a Supervisor, I understand that:

- I may be subject to disciplinary action by the board for non-compliance of supervisory duties and/or held civilly liable by the courts for the practice of interns under my supervision.
- If the Board is not notified when the supervisory relationship has ended, the intern is still considered under my supervision and I am still liable for the intern's activities.
- I am only allowed to supervise five interns and must request to go before the Board to add any additional interns

My signature below indicates I have read and understand this agreement in its entirety.

Supervisor Signature

Date

Co- Supervisor Signature (if applicable)

Date