AFFILIATION AGREEMENT

This Affiliation Agreement ("Agreement") is executed between the University of West Florida, for and on behalf of the University of West Florida Board of Trustees, a public body corporate, ("University"), 11000 University Parkway, Pensacola, Florida, 32514 and Cordova Counseling Ctr. ("Agency") located at 4400 Bayou Blvd Ste 8, Pensacola FL 32503.

WHEREAS, the University is desirous of using the Facilities at the above Agency to implement its graduate Counseling Psychology Internship Program ("Program"), and

WHEREAS the Agency wishes to cooperate with the Department of Psychology to implement its Program, recognizes the need for and desires to aid in the educational development of the counselor-trainees and is willing to make its premises available for such purposes.

NOW THEREFORE, in consideration of the mutual covenants herein, the parties agree as follows:

A. UNIVERSITY PROGRAM RESPONSIBILITIES

1. The University will advise the Faculty and counselor-trainees that they will be subject to all applicable policies and procedures established by the Agency.

2. Maintain professional liability insurance for counselor-trainees and general liability insurance for the faculty.

Specifically, it is agreed that the Counseling Program Faculty will execute the following:

3. Advise counselor-trainees as to the program-related requirements (time commitment, seminars, reports, evaluations) involved in the Practicum or Internship.

4. Cooperate with the Agency regarding the selection, number and distribution of counselor-trainees assigned to the Agency by the University.

5. Provide campus-based supervision meetings to discuss common problems and experiences, as well as assist in case study presentation and other areas of concern.

6. Adhere to applicable rules and regulations of the agency.

7. Maintain periodic contact with the agency field supervisor and the counselor-trainees to discuss academic and professional progress; this contact may include site visits, phone, and e-mail correspondence from the student’s university.

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8. Confer with Agency staff at such times as may be mutually agreed upon to evaluate the specific arrangements outlined in this agreement, and cooperate in providing a quality training environment for the counselor-trainees while maintaining effective care of the agency's clients.

Additionally, the Counseling Program Faculty will advise counselor-trainees that they must execute the following responsibilities:

9. Attend weekly group supervision classes at the University's main campus, as well as regularly scheduled individual supervision meetings with the course instructor.

10. Complete and submit paid or volunteer application and any paperwork required by the agency. Attend Agency orientation and trainings as assigned.

11. Report for practicum/internship training experiences on time, and assume the cost and responsibility for transportation and meals.

12. Adhere to applicable rules and regulations of the Agency, including dress code.

13. Maintain professional standards as outlined in the American Counseling Association's code of ethics.

14. Keep a log of time spent in clinical and professional activities, which will be periodically reviewed by the agency field supervisor(s).

B. AGENCY RESPONSIBILITIES

Specifically, it is agreed that the above-named agency or community-based training location will provide the following services and supervision:

1. Provide an orientation of the Agency's policies and procedures for faculty and counselor-trainees of which they are expected to comply, and define specific duties for counselor-trainees.

2. Provide adequate space and use of available facilities such as parking, secure storage/locker space, office space, or eating areas as needed.

3. Retain full responsibility for care of agency clients.

4. Provide and maintain administrative and professional supervision of counselor-trainees by an experienced (preferably licensed) mental health counselor, social worker, or psychologist; A weekly review of the counselor-trainee's performance through one-hour individual supervision meetings is expected.
5. Confer at such times as may be mutually agreed upon to evaluate the specific arrangements outlined in this agreement, and cooperate in providing a quality training environment for the counselor-trainees while maintaining effective care of the agency's clients.

Specific expectations for supervision format and processes include the following:

6. Agency field supervisors will not transfer regular supervision duties to another person without discussion with the pertinent counselor-trainee, and approval of the Counseling Program Coordinator. The counselor-trainee may seek additional supervision by qualified supervisors or other staff. However, this is additional supervision, not substitute for the weekly, individual supervision provided by the approved agency field supervisor.

7. Agency field supervisors will work with the counselor-trainees to develop a Supervision Plan and conduct weekly, individual, structure, regularly scheduled supervision experiences relative to the plan.

8. If an emergency necessitates that the agency field supervisor cancel the regularly scheduled supervision session, the appointment should be rescheduled within the same week if possible to make up the time with the counselor-trainee.

9. Agency field supervisors will provide counselor-trainees with supervision at all times in case of emergency or crisis in the practicum/internship setting. If the primary supervisor is not available, a substitute supervisor should be appointed.

10. Agency field supervisors will monitor the counselor-trainees direct and indirect counseling hours via a weekly training log kept by the counselor-trainees. A minimum of 30% of the required practicum/internship hours must be in direct counseling or client contact (e.g., individual, group or family counseling; assessment; co-therapy; etc.).

11. Agency field supervisors will contact or meet with the university practicum/internship supervisor immediately should any problems arise in the field that might affect a counselor-trainee's performance or grade, such as lack of skill development, unethical, unprofessional, or illegal behaviors.

12. Agency field supervisors will provide weekly live observation or tape review of the counselor-trainee's counseling skills whenever possible. This is the preferred and optimal training format.

13. Agency field supervisors will match counselor-trainee's with clients (e.g., screen clients for the appropriateness and level of competence of the student), and will assist counselor-trainees in obtaining client contacts especially at the beginning of the practicum experience.
14. Provide the university course instructor with appropriate information related to
counselor-trainee interventions and behaviors in the practicum/internship setting,
and complete and return counselor-trainee evaluations to the psychology
department's Counseling Program Coordinator near the completion of the
semester.

C. MUTUAL RESPONSIBILITIES

1. The assigned personnel of the agency and the UWF Counseling Program faculty
will confer at such times as may be mutually agreed upon to evaluate the
program, and cooperate in providing a sound educational environment for
counselor-trainees while maintaining effective care of clients.

2. It is the expectation of the parties involved that the above conditions be met.
Should it become apparent that they are not being met by any of the parties, it is
imperative that the appropriate parties discuss why these expectations have not
been met at the earliest possible date.

3. Term. This agreement will commence on May 12, 2008 and will
continue for a period of 2 years, ending May 12, 2010. This
agreement may be terminated by either party on written notice to the other at
least 90 days in advance of the next academic semester. However, counselor-
trainees already assigned to the program shall be permitted to complete any
previously scheduled clinical assignment then in progress at the Agency.

The following signatures verify agreement of the stated conditions:

University of West Florida

[Signature]                     Date: 5/19/08
Provost or President

Agency

[Signature]                     Date: 5-7-08
(Signature of Agency Representative)

[Signature]                     [Printed name and title]

Approved as To Form And Legality:

[Signature]
UWF Attorney