ATTENTION
Potential Practicum Students
Human and Social Services Program

IMPORTANT REQUIREMENTS REMINDER

In order to be eligible to begin your practicum you must fulfill all the prerequisites, complete all requirements, and submit paperwork.

**PREREQUISITES:** Must be enrolled in Human and Social Services program; have a minimum of 30 credit hours with a C or better in every course completed from the plan of study; and **must be entering final year of Human Services program with a definitive plan to graduate by the end of Spring Semester**; plus permission of practicum instructor.

1. **Practicum Self-Assessment form** – Complete and submit to Angie Devilbliss at Mt Orab campus or Darlene Thacker on North campus prior to beginning the practicum course.

2. **Waiver of Responsibility form** – Complete and submit to Angie Devilbliss at Mt Orab campus or Darlene Thacker on North campus prior to beginning the practicum course.

3. **Purchase Liability Insurance** – First-time students enrolled in their first practicum course pay a $18 premium (subject to increase). The professional coverage extends from the beginning of the first semester of practicum for a one year period. At that time, another $18 premium, (subject to increase) will be charged if all required practicums have not been completed.

   **To purchase the insurance** – Log into MyRecords and go to Student > Account Information. Click on the "Make a Miscellaneous Payment" link, From the “Description” drop-down menu, choose ‘Human Services Insurance’ from the payment options listed, Then click on the “Submit” button, "Credit Card" will automatically be selected for you on the next screen. Click “Continue.” After you have entered your **credit card information, billing address, and e-mail address**, click on the “Continue” button, A receipt containing your transaction information will be emailed to you. It will be ‘From: Auto-Receipt [mailto:noreply@mail.authorize.net]’ and have ‘Subject: Transaction Receipt from Southern State Community College for $... (USD).’ **provide a copy of the receipt(s) to Angie Devilbliss at adevilbliss@sscc.edu.** Keep a copy of the receipt(s) for your records.

   ***If you are unable to pay via the web you can use the automated Pay by Phone option. You will need to have your Student ID# and the amount you want to pay ready. Call 1-800-628-7722. When asked if you know your party's extension, hit the # key, you will be transferred to the automated line.***

4. **Practicum Site Approval form** – Complete and submit to Angie Devilbliss at Mt Orab campus or Darlene Thacker on North campus prior to beginning the practicum course.

5. **Practicum Handbooks** – Pick up one copy of the handbook from either Angie Devilbliss at Mt Orab campus or Darlene Thacker on North campus when you register for the practicum class. Study the handbook carefully before selecting your practicum site. Important practicum details and policies are described in this handbook. You will give this copy of the handbook to your site supervisor after you have selected your practicum agency site. If you wish to have a copy for your records, you can print a copy from https://www.sscc.edu/academics/associate/assets/hssr-practicum-handbook.pdf

**Forms 1 – 4 must be completed and returned to either Angie Devilbliss at Mt Orab campus or Darlene Thacker on North campus prior to beginning your first practicum course.**
Directions for Completion

This completed document must be submitted to the practicum faculty before your practicum site can be approved. Please thoroughly answer each of the following questions. Your practicum site supervisor may request a copy of your responses.

Students must undergo meaningful self-assessment before they can select appropriate field placements beyond such thoughts as, “I like kids,” etc. this form provides a structured method for you to conduct this self-assessment and will assist in making an appropriate match between your expectations, needs, and educational goals and the agency in devising a meaningful practicum experience. REMEMBER! Practicum is not training for a specific job but continuation of your professional education!

Name ____________________________ Date of birth ______________________
Address ____________________________ Phone ____________________________

1. Name courses taken to date that have prepared you for placement. Include courses in sociology and psychology as well as human and social services. (List accurate titles for classes.)

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

2. List the main characteristics of your personality (e.g. passive, aggressive, easily intimidated, eager, anxious, shy creative, etc.)

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
3. List at least five (5) things about you that you consider to be your assets – your strongest points. Be very specific and personal; do not just say, “I think I have good casework skills,” but comments such as “I learn quickly” or “I can handle a lot of pressure” are much more meaningful responses.

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

4. List at least five (5) things about you that you consider to be your weak points – things you need to work on improving. Do not be general like “I need more training.” Be specific.

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

5. What kind of climate is necessary in a practicum placement for you to learn or to be really productive and so forth?

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

6. What do you want from a site supervisor?

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
7. What do you need from a site supervisor?

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

8. The following list describes client groups that might be found in some settings. Put an “X” by the ones you would feel most comfortable or most skilled working with; put an “O” by the ones you would feel less comfortable working with; and an “N” by the ones you would rather not work with. Be honest. (All human services workers have some client groups they would rather work with.)

___ Infants  ___ Lower income groups
___ Children       ___ Middle income groups
___ Adolescents   ___ Transgendered
___ The aged       ___ Rural clients
___ Physically handicapped ___ People who lack education
___ Mentally handicapped ___ Blacks
___ Emotionally/mentally disturbed ___ Hispanics
___ Hostile client (involuntary) ___ Whites
___ Law offenders   ___ Asians
___ Unwed mothers   ___ Native Americans
___ Homosexuals/lesbians/gays ___ Dying patients
___ Drug abusers    ___ Women having abortions
___ Child abusers   ___ Grossly obese persons
___ The disfigured   ___ Appalachian descent
___ Non-English Speakers

Use the following space to identify other client groups you would feel comfortable or uncomfortable with.

_______________________________________________________________________________________
_______________________________________________________________________________________
9. What are your short-range goals?
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

10. What do you see yourself doing two to three years from now?
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

11. Is there anything that might interrupt your practicum experience during this semester?
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

12. Considering your responses to the previous questions and your current situation and desires, what kind of setting would you want for your practicum placement? List several types of agencies.
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

13. In question #12 you indicated the kind of agency setting you want. Is that the same as what you need for your development? If so, state this. If not, answer the question again substituting the word need for want.
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
14. Review your answers to all the previous questions. Is there anything you expect from your practicum placement that has not been covered? If so, list below and comment on each.

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

15. What are your specific goals for practicum?

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

16. List below your human services related job experience and volunteer work.

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

17. List below any previous work experience and volunteer work that is unrelated to the human services field.

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

I am aware that this information may be released to prospective practicum site agencies.

Signature ___________________________________________ Date ______________________
PRACTICUM
Site Approval Form

Completed form must be submitted to practicum instructor for approval of practicum site.

Student’s Name ________________________________ Date ________________________

Planning to begin practicum experience: Semester __________________ Year ________

Potential practicum site: _______________________________________________________

Address ______________________________________________________________________

City, State, Zip ________________________________________________________________

Phone number: ______________________________

Student’s major: ☐ Human and Social Services (generalist) ☐ Chemical Dependency

NOTE: Students majoring in Chemical Dependency must complete the entire practicum experience at a chemical dependency counseling/treatment facility.

Is this site a chemical dependency counseling/treatment facility? ☐ Yes ☐ No

Faculty use only:

Requested site: ☐ approved ☐ not approved

Signature of Practicum Instructor: ________________________________________________

Date: ______________________________

NOTE: Requested practicum site has not been approved until indicated and signed by practicum instructor.
APPENDIX I

Southern State Community College
Human and Social Services Program

Student Professional Liability Insurance Program

Coverage Required:

Students enrolled in the Human and Social Services Technology program are required to purchase professional liability insurance before beginning the practicum experience. Contracts for student clinical experience with outside agencies and institutions require this insurance coverage before a student is allowed to participate in a practicum or clinical experience.

Why You Are Covered Under the Student Liability Insurance Program

Over the past several years, there have been a number of claims nationwide involving students. These claims include error, negligence, and omission. As a student, you have a definite personal responsibility for your own activities in your contact with clients, even though you are not yet licensed, registered, or otherwise accredited for your profession.

Coverage *

Payment is made by the insurance company on claims arising out of a “medical incident.” That is any act or omission in the furnishing of professional services. Coverage terminates upon graduation.

Cost

First-time students enrolled in their first practicum course pay a $18 premium (subject to increase). The professional coverage extends from the beginning of the first semester of practicum for a one year period. At that time, another $18 premium, (subject to increase) will be charged if all required practicums have not been completed.

Students must pay the premium to the College Business Office representative on any SCC campus.

No refunds will be made for unexpired coverage due to drop-outs.

Limits of Professional Liability

Pay up to $1,000,000 for each incident; up to $3,000,000 aggregate.

You Are Not Covered for

1. Operation of a motor-driven vehicle
2. Engaging in an unrelated business or profession
3. Act, errors or omissions of any insured that are dishonest, criminal or malicious

*It is not possible in this format to include all of the benefits and limitations of the policies referred to in this summation. In the event of a loss or claim, the specific terms and limits of the policy will apply. For further information regarding these policies and actual benefits, limitations, exclusions or reductions, please contact the College Business Office.
APPENDIX J

Southern State Community College
Waiver of Responsibility

Professional Experience
Human and Social Services Program

The undersigned student acknowledges and agrees that:

1. He or she has undertaken practicum at a site (or sites) assigned by the College during the student’s enrollment at Southern State community College, and that this experience is a requirement of the program.

2. 
   a. The student IS NOT covered under worker’s compensation attributable to Southern State Community College on account of the program or the experience.
   
   b. The student IS NOT covered by medical insurance attributable to Southern State Community College on account of the program or the experience.
   
   c. The student IS covered by professional liability insurance attributable to Southern State Community College on account of the program or experience with limits and exclusions as noted on the descriptive page attached hereto.

3. While Southern State Community College has no knowledge of any condition with respect to the employment which could cause injury to the student while exercising reasonable care, Southern State Community College makes no other representations of any kind involving the experience.

_____________________________________
Date

_____________________________________
Student’s Signature

_____________________________________
Printed Name

_____________________________________
Social Security Number