

## FACT SHEET

Internship site: ORU Music Therapy Clinic  
2448 E 81<sup>st</sup> Street, #124  
Tulsa, OK 74137  
918-493-8040

Contact information: Hayoung A. Lim, Ph.D., LPMT-BC  
Neurologic Music Therapy Fellow  
Director of the Music Therapy Clinic/Professor of Music Therapy  
Office: 918-495-7505 / [hlim@oru.edu](mailto:hlim@oru.edu)  
Clinic: 918-493-8040/ [musictherapy@oru.edu](mailto:musictherapy@oru.edu)

Alejandra Arevalo, LPMT-BC, MTA  
Neurologic Music Therapist  
Coordinator of Music Therapy Clinic/Clinical Supervisor  
[alearevalo@oru.edu](mailto:alearevalo@oru.edu)  
918-493-8040

Populations Served: Children with Developmental Disorders  
Children/Adults with Psychiatric Disorders  
Individuals with Neurologic Disorders  
Geriatric population with Dementia/Alzheimer's

Number of MT's: 3  
Number of interns: 3  
Stipend: None  
Start date: January/March/May/July/September

### Entry Level Requirements/Competencies:

Musical Skills: Proficiency in guitar, piano and voice  
Demonstrate ability to play and accompany three chord songs in at least two major keys and one minor key  
Demonstrate the ability to transpose on piano and guitar  
Demonstrate knowledge of repertoire for all populations

Clinical Skills: Demonstrate knowledge of appropriate music therapy goals for each population  
Demonstrate understanding of basic behavior techniques

Professional Skills:  
Computer proficiency  
Demonstrate professional writing ability for completion of assessments, treatment plans and SOAP notes and final evaluation

Have good verbal communication skills  
Demonstrate flexibility  
Good time management  
Knowledge of professional ethics  
Initiative

**Site specific Requirements:**

University affiliation agreement  
CPR certification (paid by intern); completed prior to beginning internship  
Proof of Professional Liability Insurance  
(through intern's university or HPSO)  
Background check (through intern's university);  
completed prior to beginning internship  
Signed ORU Honor Code and Confidentiality Agreement  
HIPAA Awareness Training  
\*Applicants should note that this is an out-of-pocket expense covered  
by the intern. This online training should be completed before  
starting internship and will be valid for 2 years after the training has  
been completed  
COVID-19 testing  
\*This should be completed no more than 72 hours before the  
internship start date

**Clinical/Musical Requirements:**

1. Prior to onsite Interview:  
Send A/V recording of student music therapist  
implementing 3 interventions (one for developmental, rehabilitation and  
geriatrics)  
Submit a written session plan of all 3 interventions including: session goals and  
objectives and step-by-step intervention procedures
2. Schedule Interview with Internship Director – preferably on-site
3. Repertoire: 1) perform 1 song on your primary instrument that exhibits your musical  
competency. It does not have to be a song that would be used in a music  
therapy session.  
2) be prepared to play 2 songs on piano and 2 songs on guitar, utilizing  
different keys, in each of the following populations: children,  
rehabilitation and geriatrics;  
3) transpose 2 additional songs on piano and guitar
4. Clinical documentation: submit a copy of the highest level of your clinical writing  
(i.e., final evaluation report, research paper). Must be at least 5 pages.

**Deadlines:** October 1 for January internship

December 1 for March internship  
February 1 for May internship  
April 1 for July internship  
June 1 for September internship

Interview is dependent on quality and timeliness of completed application.

### **Internship Expectations**

The music therapy internship experience is provided to guide the intern through the process from a student music therapist to a professional music therapist. Skills, knowledge and abilities will be challenged, critiqued and affirmed to reach that goal. The first step of the process is orientation to the ORU Music Therapy Clinic personnel, policies and procedures, documentation, emergency protocol and setting personal goals for the internship.

ORU Internship Handbook will be provided containing a Music Therapy Intervention Manual, samples of session plans, SOAP notes and final reports as well as orientation materials.

Team: 3 MT-BCs, caregivers, off-site facility staff (educators, assisted living personnel)

Hours: Hours can be accommodated for full-time or part-time internship experience. The music therapy intern will be required to complete a minimum of 1040 hours in clinical training. The ORU Music Therapy Clinic operates on a semester schedule. Starting dates will be in January or August. If needed, starting dates can flexible.

Schedule: 9:00-6:00, weekdays (times may vary)

Individual: Majority of clinical contact hours will be individual sessions

Groups: geriatric groups with/without dementia are available (on-site and off-site)

Time with MT-BC:

#### **Week 1-2: Orientation and Observation with Internship Director**

- A. Complete orientation paperwork – signatures on forms
- B. Introduce intern to MT Clinic Staff and Faculty
- C. Tour of ORU Music Therapy Clinic and ORU Campus
- D. Shadow the Internship Director and actively participate in individual and group music therapy sessions, as appropriate
- E. Orientation to AMTA Standards of Practice, AMTA Code of Ethics, Internship Guidelines, Professional competencies and CBMT Code of Professional Practice.
- F. Self-assessment – setting goals, strengths/weaknesses

**Week 3-8: Co-leading** – After orientation, the intern will begin to take a more active role in planning and implementing portions of the session. The intern will discuss with the

Internship Director which clients he/she would like to focus on and further develop the therapeutic relationship. The intern may then facilitate portions of the music therapy session, increasing the number of interventions as appropriate.

**Week 4, 12, 20: Self-exploration paper**

1. What are my strengths as a developing clinician? (musical skills, counseling skills, documentation, song writing, improvisation)
2. In which areas did I make the greatest improvements?
3. What helped me to make these improvements?
4. What are some skills I need to improve?
5. What strategies will I use to help me develop these skills?
6. How do my personal values, beliefs and past experiences influence my clinical work?

**Week 9-26: Leading (50/50 clinical/research)**

Clinical: Opportunities will be provided to facilitate individual and group music therapy sessions independently. Direct observation and constructive feedback will be provided. Internship Director will participate as observer or assistant to the intern.

The intern will also lead individual and group sessions independently. The intern will consult with families/caregivers regarding client progress, concerns and recommendations. The intern will be responsible for assessment, determining goals and objectives, designing appropriate music therapy interventions, writing SOAP progress notes, and final evaluations. The intern will also complete six week reports for the family.

Individual Music therapy – The majority of sessions will be direct 1:1 contact with clients.

Group Music Therapy – Procedure for delivery of music therapy for group sessions will follow the same format as individual music therapy sessions.

Research: opportunities will be provided to assist ORU Music Therapy faculty-led research studies/projects; to conduct the intern's own music therapy research study (i.e., single subject design, case study, experimental study, or qualitative study); and to present the effect of music therapy for various clinical populations to healthcare professionals in the greater Tulsa area.

Intern code of conduct

Adhere to AMTA Code of Ethics

RESPECT the culture of a Christian faith-based university

Weekly supervision meeting

A minimum of 1 hour of formal direct contact supervision meeting will be scheduled each week. Additional 1-2 hours of informal supervision will be available.

### Assignments

Single subject case study with literature review  
Assist ORU Music Therapy Faculty, as needed  
Community Presentations

### Professional staff:

Three (3) board-certified music therapists are on staff at ORU Music Therapy Clinic. The ORU Music Therapy Program and Clinic Director, Dr. Hayoung Lim, will be available for consultation and advice.

Caregivers/family members bring clients to the clinic. Consultation with caregivers/family members occurs each visit. The Intern will be responsible for communicating client progress to the caregivers both orally and through written six week reports.

Interns will also interact with the activity director, staff and/or caregiver(s) involved with sessions both on-site and off-site. The Intern may have opportunity to interact with ORU Music Department faculty.

### On-site education programs:

Practicum labs  
Music Therapy classes  
Ensembles (i.e., orchestra, choir, band, chamber ensembles, etc.) through ORU Music Department

### Site-specific administrative requirements

University affiliation agreement  
CPR training (paid by intern)  
Background check (paid by intern)  
Proof of Liability Insurance (paid by intern; through Intern's University or HPSO)

### **Philosophy of MT and training interns for applicant**

The mission of Oral Roberts University is to educate the whole person – mind, body and spirit, preparing students to be servant-leaders who are “spiritually alive, intellectually alert, physically disciplined and socially adept. The ORU Music Therapy Program and Clinic view music therapy as an established healthcare profession utilizing music to address physical, emotional, cognitive, spiritual and social needs of all individuals. The ORU Music Therapy Clinic is founded upon an integrated music therapy program of Cognitive-Behavioral Music Therapy and Neurologic Music Therapy (NMT).” (ORU Music Therapy Handbook, 2017-2018)

The purpose of an internship program is to train student music therapists by equipping them with competent clinical skills to provide a high-quality music therapy service for various clinical populations and supportive environment to further advocate and promote the music therapy profession.

Music therapy is an effective medium that motivates and encourages growth and change for each client, assisting them to discover their strengths and improve their weaknesses. Because music affects the whole person, it plays an important role in the daily life throughout the lifespan.

Music therapists enhance the quality of life for clients ranging from birth to end of life, improving cognitive, communication, social, emotional and sensorimotor skills. The inherent structure and qualities of music influence neurologic development and rehabilitation as supported by evidenced-based research.

This is accomplished through Cognitive Behavior and Client-Centered approaches using a variety of musical and non-musical techniques tailored to each individual in both one-on-one and group settings. Music can promote attention, active participation, motivation, encourage verbal and nonverbal responses as well as improve social interaction.

### **Philosophy for training interns**

Interns will effectively learn clinical skills by immersing themselves in the supportive therapeutic setting. A good supervisor/trainer is one who empowers interns, is able to both lead and delegate tasks appropriately and encourages initiation and involvement. The interns will be guided through the process of therapy by actively analyzing and engaging through the therapeutic process, asking insightful questions, ensuring adequate care and reflecting on the process of music therapy practice. The style of supervision will vary depending on the stage the intern is in and the level of progress the intern makes.

During the first phase, clear expectations and guidelines will be discussed. Supervision meetings will allow for positive and constructive feedback. As the intern gains knowledge of the clients and Music Therapy Clinic operating procedures, a democratic leadership approach is warranted. The Interns insight and ideas will be considered in designing appropriate therapeutic interventions for each client.

Phase 2 will include continued learning and development of therapeutic techniques and clinical and musical skills. Opportunities for observation, modeling and co-leading will be provided. While co-leading, the intern may need to quickly adapt to situations. The Internship Supervisor will monitor the situation and allow the intern to problem solve and struggle through the situation, providing support and suggestions. Should the Internship Supervisor deem it necessary, she may step in to maintain a high quality music therapy treatment and practice.

Independence is the goal of phase 3. The intern will be provided increased independent opportunities working with clients. Support, encouragement and validation will encourage growth of the intern's clinical/musical skills, communication skills and self-awareness.

Phase 4 will continue to prepare the intern for the real world. The intern will be encouraged to research the population with which she/he would like to work, consider private practice or employment at a facility, and begin networking with other professionals in the field.

While music is an effective and therapeutic tool when treating persons in clinical settings, music can also play an important role in the Intern's daily life. The Intern will be encouraged to take time to enjoy music by attending local music events, participating in an ensemble, performing in ORU Healing Concert Series or listening to music unrelated to the therapy setting. Music may be used as a psychotherapeutic tool to aid the Intern in processing stressful situations.

## MUSIC THERAPY INTERNSHIP APPLICATION

Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Permanent Home Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

College Mailing Address (if different): \_\_\_\_\_

\_\_\_\_\_

Preferred start date: January, March, May, July or September

Please attach/send the following:

Official Transcript – applicant must have a minimum 3.0 GPA

Resume or Curriculum Vitae with practicum experience

Letter of recommendation from academic director with contact information – email is acceptable.

Letter of recommendation from a supervising music therapist (other than the academic director) with contact information – email is acceptable.

Three personal references, not related to you, that we may contact. Please include the following: name, address, relationship, time they have known you.

Send A/V recording of the student music therapist implementing 3 interventions (one for developmental, rehabilitation and geriatrics)

Submit a written session plan of all 3 interventions including: session goals and objectives and step-by-step intervention procedures

Clinical documentation: submit a copy of the highest level of your clinical writing (i.e., final evaluation report, research paper). Must be at least 5 pages.

If selected, background check and liability insurance verification.

Please answer the following questions on a separate document.



What sets you apart from other applicants? Life skills, experience, philosophy?

Why did you choose this internship site? In what ways do you serve others?

Application process also requires an on-site (preferred) interview and musical skills demonstration, although arrangements may be made for an online interview.

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                     December 1 for March internship  
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Interview is dependent on quality and timeliness of completed application.

## Orientation checklist

Start date: \_\_\_\_\_

- \_\_\_\_\_ Orientation to ORU Music Therapy Clinic
- \_\_\_\_\_ Orientation to ORU Music Department Staff (Chair, Administrative Secretary, Music Therapy Professor)
- \_\_\_\_\_ Orientation to client records
- \_\_\_\_\_ Review of AMTA Standards of Practice (find copies in the internship binder)
- \_\_\_\_\_ Review of AMTA Code of Ethics (find copies in the internship binder)
- \_\_\_\_\_ Review of Professional Competencies (find copies in the internship binder)
- \_\_\_\_\_ Review of CBMT Code of Ethics (find copies in the internship binder)
- \_\_\_\_\_ Orientation to Time Keeping Log
- \_\_\_\_\_ Establishment of Tentative Schedule
- \_\_\_\_\_ Establishment of Initial Goals of Internship
- \_\_\_\_\_ Establishment of Initial Timeline for Internship
- \_\_\_\_\_ Introduction to documentation procedures
- \_\_\_\_\_ Training Required: CPR certification (prior to beginning internship)
- \_\_\_\_\_ Observation of session videos and discussion

### Completed by intern:

- \_\_\_\_\_ Background check
- \_\_\_\_\_ CPR certificate (prior to beginning internship)
- \_\_\_\_\_ Completion of HIPAA awareness training (certificate submitted)
- \_\_\_\_\_ Negative COVID test results
- \_\_\_\_\_ Signed internship initial contract
- \_\_\_\_\_ Intern dismissal policies and procedures
- \_\_\_\_\_ Completed University Internship Affiliation Agreement (if requested by university)
- \_\_\_\_\_ Confidentiality agreement on behalf of ORU
- \_\_\_\_\_ Confidentiality and liability agreement on behalf of ORU Music Therapy clinic
- \_\_\_\_\_ Signed Honor Code
- \_\_\_\_\_ Release and use of audio video recordings
- \_\_\_\_\_ Parking Permit/Facility use form
- \_\_\_\_\_ Liability release form on behalf of Cityplex
- \_\_\_\_\_ Received Eagle card
- \_\_\_\_\_ Liability Insurance Verification
- \_\_\_\_\_ Scan of driver's license

### Completed by supervisor:

- \_\_\_\_\_ Z# application send to Caryn Ballou
- \_\_\_\_\_ IT Access Form
- \_\_\_\_\_ IT request for: access to clinic computers (username/password), ORU email address, access to hard drives, VMware

### ORIENTATION CHECKLIST

My signature below signifies that I have completed the orientation tasks as initialed. I have been provided with a copy of evaluations to be used in assessing my performance. I have been provided with a copy of AMTA Standards of Clinical Practice, Code of Ethics, Professional Competencies, the CBMT Code of Professional Practice and the Patient's Policy and Procedures. I have reviewed AMTA Clinical Training Guidelines and the Program Requirements for this internship.

I have participated in orientation and have scheduled time for supervision (one hour per week) and observation (four hours per week for full-time students, two hours per week for part-time students), as well as time for administrative and educational projects. I have received orientation regarding documentation procedures.

Expectations for the completion of a 1040 hour music therapy internship have been reviewed in detail.

\_\_\_\_\_  
Music Therapy Intern

\_\_\_\_\_  
Date

\_\_\_\_\_  
Alejandra Arevalo, LPMT, MT-BC, MTA, NMT  
Coordinator of the Music Therapy Clinic

\_\_\_\_\_  
Date

### INTERNSHIP INITIAL CONTRACT

The indicated intern has been accepted for the Music Therapy Internship at ORU Music Therapy Clinic with supervision provided by: Alejandra Arevalo, LPMT, MT-BC, MTA, NMT and Dr. Hayoung Lim, Ph.D., LPMT, MT-BC, NMT Fellow.

\_\_\_\_\_ has been accepted for the internship beginning on  
Name \_\_\_\_\_.

Date \_\_\_\_\_  
Internship hours will be scheduled beginning with \_\_\_\_\_ 40 \_\_\_\_\_ hours per week and an anticipated completion date of \_\_\_\_\_.

A log of completed hours will be kept current on a weekly basis. Hours will reflect completion of 1040 hours total. Evaluations will be completed at mid-term and on completion of contracted hours. Interns keeping part-time hours will complete evaluation quarterly. Internship clinical training hours will reflect time spent on providing music therapy services (i.e., assessment, treatment planning, implementation, documentation, and evaluation), internship projects, supervision with internship coordinator, clinicians and director, clinical observation, research, and community service through music therapy. Following orientation, hours will reflect 50% direct client contact (i.e. from weekly sessions provided by at the clinic) and 50% administrative and research activities. All interns at the ORU Music Therapy Clinic will begin their clinical training by active observation, shadowing clinicians, and co-treating clients with senior intern(s) and clinicians. After midterm evaluation, they will be required to admit new clients to the clinic, conduct a music therapy assessment, and maintain a caseload of weekly sessions which they will lead. All interns also will be required to give at least one presentation/workshop about music therapy on behalf of the ORU music therapy clinic, develop a music therapy program proposal for the professional music therapy services at health care facilities. In order to implement a student-centered clinical supervision model in the internship training, each intern will be assigned a few different internship projects according to his/her learning goals.

Documentation of completed internship hours, evaluations, and letters of recommendation signifying completion of internship requirements will be submitted to \_\_\_\_\_ Alejandra Arevalo \_\_\_\_\_, MT-BC at \_\_\_\_\_ the ORU music therapy clinic \_\_\_\_\_.

\_\_\_\_\_  
Dr. Hayoung A. Lim, Ph.D., MT-BC, LPMT, NMT Fellow  
Director of Music Therapy Clinic

\_\_\_\_\_  
Date

\_\_\_\_\_  
Alejandra Arevalo, LPMT, MT-BC, MTA, NMT  
Coordinator of the Music Therapy Clinic

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Intern, Indicating Acceptance

\_\_\_\_\_  
Date

\_\_\_\_\_  
Z number

## AMTA PROFESSIONAL COMPETENCIES

### A. MUSIC FOUNDATIONS

#### 1. Music Theory and History

- 1.1 Recognize standard works in the literature.
- 1.2 Identify the elemental, structural, and stylistic characteristics of music from various periods and cultures.
- 1.3 Sight-sing melodies of both diatonic and chromatic makeup.
- 1.4 Take aural dictation of melodies, rhythms, and chord progressions.
- 1.5 Transpose simple compositions.

#### 2. Composition and Arranging Skills

- 2.1 Compose songs with simple accompaniment.
- 2.2 Adapt, arrange, transpose, and simplify music compositions for small vocal and non-symphonic instrumental ensembles.

#### 3. Major Performance Medium Skills

- 3.1 Perform appropriate undergraduate repertoire; demonstrate musicianship, technical proficiency, and interpretive understanding on a principal instrument/voice.
- 3.2 Perform in small and large ensembles.

#### 4. Functional Music Skills

- 4.1 Demonstrate a basic foundation on voice, piano, guitar, and percussion.
  - 4.1.1 Lead and accompany proficiently on instruments including, but not limited to, voice, piano, guitar, and percussion.
  - 4.1.2 Play basic chord progressions in several major and minor keys with varied accompaniment patterns.
  - 4.1.3 Play and sing a basic repertoire of traditional, folk, and popular songs with and without printed music.
  - 4.1.4 Sing in tune with a pleasing quality and adequate volume both with accompaniment and acapella.
  - 4.1.5 Sight-read simple compositions and song accompaniments.
  - 4.1.6 Harmonize and transpose simple compositions in several keys.
  - 4.1.7 Tune stringed instruments using standard and other tunings.
  - 4.1.8 Utilize basic percussion techniques on several standard and ethnic instruments.
- 4.2 Develop original melodies, simple accompaniments, and short pieces extemporaneously in a variety of moods and styles, vocally and instrumentally.
- 4.3 Improvise on pitched and unpitched instruments, and vocally in a variety of settings including individual, dyad, small or large group.
- 4.4 Care for and maintain instruments.

## 5. Conducting Skills

- 5.1 Conduct basic patterns with technical accuracy.
- 5.2 Conduct small and large vocal and instrumental ensembles.

## 6. Movement Skills

- 6.1 Direct structured and improvisatory movement experiences.
- 6.2 Move in a structured and/or improvisatory manner for expressive purposes.

## **B. CLINICAL FOUNDATIONS**

### 7. Therapeutic Applications

- 7.1 Demonstrate basic knowledge of the potential, limitations, and problems of populations specified in the Standards of Clinical Practice.
- 7.2 Demonstrate basic knowledge of the causes, symptoms of, and basic terminology used in medical, mental health, and educational classifications.
- 7.3 Demonstrate basic knowledge of typical and atypical human systems and development (e.g., anatomical, physiological, psychological, social.)
- 7.4 Demonstrate basic understanding of the primary neurological processes of the brain.

### 8. Therapeutic Principles

- 8.1 Demonstrate basic knowledge of the dynamics and processes of a therapist-client relationship.
- 8.2 Demonstrate basic knowledge of the dynamics and processes of therapy groups.
- 8.3 Demonstrate basic knowledge of accepted methods of major therapeutic approaches.

### 9. The Therapeutic Relationship

- 9.1 Recognize the impact of one's own feelings, attitudes, and actions on the client and the therapy process.
- 9.2 Establish and maintain interpersonal relationships with clients and team members that are appropriate and conducive to therapy.
- 9.3 Use oneself effectively in the therapist role in both individual and group therapy, e.g., appropriate self-disclosure, authenticity, empathy, etc. toward affecting desired therapeutic outcomes.
- 9.4 Utilize the dynamics and processes of groups to achieve therapeutic goals
- 9.5 Demonstrate awareness of the influence of race, ethnicity, language, religion, marital status, gender, gender identity or expression, sexual orientation, age, ability, socioeconomic status, or political affiliation on the therapeutic process.

## **C. MUSIC THERAPY**

### **10. Foundations and Principles**

Apply basic knowledge of:

- 10.1 Existing music therapy methods, techniques, materials, and equipment with their appropriate applications.
- 10.2 Principles and methods of music therapy assessment, treatment, evaluation, and termination for the populations specified in the Standards of Clinical Practice.
- 10.3 The psychological aspects of musical behavior and experience including, but not limited to, perception, cognition, affective response, learning, development, preference, and creativity.
- 10.4 The physiological aspects of the musical experience including, but not limited to, central nervous system, peripheral nervous system, and psychomotor responses.
- 10.5 Philosophical, psychological, physiological, and sociological basis of music as therapy.
- 10.6 Use of current technologies in music therapy assessment, treatment, evaluation, and termination.

### **11. Client Assessment**

- 11.1 Select and implement effective culturally-based methods for assessing the client's strengths, needs, musical preferences, level of musical functioning, and development.
- 11.2 Observe and record accurately the client's responses to assessment.
- 11.3 Identify the client's functional and dysfunctional behaviors.
- 11.4 Identify the client's therapeutic needs through an analysis and interpretation of assessment data.
- 11.5 Communicate assessment findings and recommendations in written and verbal forms.

### **12. Treatment Planning**

- 12.1 Select or create music therapy experiences that meet the client's objectives.
- 12.2 Formulate goals and objectives for individual and group therapy based upon assessment findings.
- 12.3 Identify the client's primary treatment needs in music therapy.
- 12.4 Provide preliminary estimates of frequency and duration of treatment.
- 12.5 Select and adapt music, musical instruments, and equipment consistent with the strengths and needs of the client.
- 12.6 Formulate music therapy strategies for individuals and groups based upon the goals and objectives adopted.
- 12.7 Create a physical environment (e.g., arrangement of space, furniture, equipment, and instruments that is conducive to therapy).
- 12.8 Plan and sequence music therapy sessions.

12.9 Determine the client's appropriate music therapy group and/or individual placement.

12.10 Coordinate treatment plan with other professionals.

### 13. Therapy Implementation

13.1 Recognize, interpret, and respond appropriately to significant events in music therapy sessions as they occur.

13.2 Provide music therapy experiences that address assessed goals and objectives for populations specified in the Standards of Clinical Practice.

13.3 Provide verbal and nonverbal directions and cues necessary for successful client participation.

13.4 Provide models for and communicate expectations of behavior to clients.

13.5 Utilize therapeutic verbal skills in music therapy sessions.

13.6 Provide feedback on, reflect, rephrase, and translate the client's communications.

13.7 Assist the client in communicating more effectively.

13.8 Sequence and pace music experiences within a session according to the client's needs and situational factors.

13.9 Conduct or facilitate group and individual music therapy.

13.10 Implement music therapy program according to treatment plan.

13.11 Promote a sense of group cohesiveness and/or a feeling of group membership.

13.12 Develop and maintain a repertoire of music for age, culture, and stylistic differences.

13.13 Recognize and respond appropriately to effects of the client's medications.

13.14 Maintain a working knowledge of new technologies and implement as needed to support client progress towards treatment goals and objectives.

### 14. Therapy Evaluation

14.1 Design and implement methods for evaluating and measuring client progress and the effectiveness of therapeutic strategies.

14.2 Establish and work within realistic time frames for evaluating the effects of therapy.

14.3 Recognize significant changes and patterns in the client's response to therapy.

14.4 Recognize and respond appropriately to situations in which there are clear and present dangers to the client and/or others.

14.5 Modify treatment approaches based on the client's response to therapy.

14.6 Review and revise treatment plan as needed.

### 15. Documentation

15.1 Produce documentation that accurately reflects client outcomes and meet the requirements of internal and external legal, regulatory, and reimbursement bodies.

15.2 Document clinical data.

15.3 Write professional reports describing the client throughout all phases of the music therapy process in an accurate, concise, and objective manner.



15.4 Effectively communicate orally and in writing with the client and client's team members.

15.5 Document and revise the treatment plan and document changes to the treatment plan.

15.6 Develop and use data-gathering techniques during all phases of the clinical process including assessment, treatment, evaluation, and termination.

#### 16. Termination/Discharge Planning

16.1 Assess potential benefits/detriments of termination of music therapy.

16.2 Develop and implement a music therapy termination plan.

16.3 Integrate music therapy termination plan with plans for the client's discharge from the facility.

16.4 Inform and prepare the client for approaching termination from music therapy.

16.5 Establish closure of music therapy services by time of termination/discharge.

#### 17. Professional Role/Ethics

17.1 Interpret and adhere to the AMTA Code of Ethics.

17.2 Adhere to the Standards of Clinical Practice.

17.3 Demonstrate dependability: follow through with all tasks regarding education and professional training.

17.4 Accept criticism/feedback with willingness and follow through in a productive manner.

17.5 Resolve conflicts in a positive and constructive manner.

17.6 Meet deadlines without prompting.

17.7 Express thoughts and personal feelings in a consistently constructive manner.

17.8 Demonstrate critical self-awareness of strengths and weaknesses.

17.9 Demonstrate knowledge of and respect for diverse cultural backgrounds.

17.10 Treat all persons with dignity and respect, regardless of differences in race, ethnicity, language, religion, marital status, gender, gender identity or expression, sexual orientation, age, ability, socioeconomic status, or political affiliation.

17.11 Demonstrate skill in working with culturally diverse populations.

17.12 Adhere to all laws and regulations regarding the human rights of clients, including confidentiality.

17.13 Demonstrate the ability to locate information on regulatory issues and to respond to calls for action affecting music therapy practice.

17.14 Demonstrate basic knowledge of professional music therapy organizations and how these organizations influence clinical practice.

17.15 Demonstrate basic knowledge of music therapy service reimbursement and financing sources (e.g., Medicare, Medicaid, Private Health Insurance, State and Local Health and/or Education Agencies, Grants).

17.16 Adhere to clinical and ethical standards and laws when utilizing technology in any professional capacity.

18. Inter-professional Collaboration

- 18.1 Demonstrate a basic understanding of professional roles and duties and develop working relationships with other disciplines in client treatment programs.
- 18.2 Communicate to other departments and staff the rationale for music therapy services and the role of the music therapist.
- 18.3 Define the role of music therapy in the client's total treatment program.
- 18.4 Collaborate with team members in designing and implementing interdisciplinary treatment programs.

19. Supervision and Administration

- 19.1 Participate in and benefit from multiple forms of supervision (e.g., peer, clinical).
- 19.2 Manage and maintain music therapy equipment and supplies.
- 19.3 Perform administrative duties usually required of clinicians (e.g., scheduling therapy, programmatic budgeting, maintaining record files).
- 19.4 Write proposals to create new and/or maintain existing music therapy programs.

20. Research Methods

- 20.1 Interpret information in the professional research literature.
- 20.2 Demonstrate basic knowledge of the purpose and methodology of historical, quantitative, and qualitative research.
- 20.3 Perform a data-based literature search.
- 20.4 Integrate the best available research, music therapists' expertise, and the needs, values, and preferences of the individual(s) served.

**Musical Competency Evaluation**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Supervising Music Therapist: \_\_\_\_\_

Grade: \_\_\_\_\_

Musical Instrument:

\_\_\_\_\_ Guitar

\_\_\_\_\_ Piano

\_\_\_\_\_ Autoharp

Rating Scale:

5 = Above Average

4 = Entry level competence

3 = Average

2 = Below Average

1 = Needs Much Improvement

Grading Scale:

21-25 = A

16-20 = B

11-15 = C

6-10 = D

0 – 5 = F

Name of Song(s) \_\_\_\_\_

\_\_\_\_\_ 1. Presentation of song (pitch, rhythm, words, etc.)

\_\_\_\_\_ 2. Singing Voice (audible, clear, pleasant)

\_\_\_\_\_ 3. Intro/Ending techniques

\_\_\_\_\_ 4. Implementation of instrument technique

\_\_\_\_\_ 5. Song and instrument techniques appropriate

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CLINICAL PRACTICE EVALUATION**

Intern: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Rating Scale:

1 = Not Acceptable

3 = Needs Improvement

5 = Excellent

2 = Weak

4 = Acceptable

X = Not observed

**I. Professional Behavior and Work Habits**

**Mid-term**

**Final**

1. Timeliness of written work.

\_\_\_\_\_

\_\_\_\_\_

2. Appearance and legibility of written work.

\_\_\_\_\_

\_\_\_\_\_

3. Follows procedures for use of keys, equipment, etc.

\_\_\_\_\_

\_\_\_\_\_

4. Arrives fully prepared with materials for session.

\_\_\_\_\_

\_\_\_\_\_

5. Arrives in time to prepare the room and needed materials.

\_\_\_\_\_

\_\_\_\_\_

6. Maintains professional appearance.

\_\_\_\_\_

\_\_\_\_\_

7. Collects and records accurate data without disrupting session.

\_\_\_\_\_

\_\_\_\_\_

***Subtotal Points Earned for Section I***

\_\_\_\_\_

\_\_\_\_\_

**II. Communication Skills**

8. Demonstrates an acceptable and professional relationship with clients and caregivers.

\_\_\_\_\_

\_\_\_\_\_

9. Makes needs known to others effectively and assertively.

\_\_\_\_\_

\_\_\_\_\_

10. Displays appropriate, professional interactions with other staff in clinical setting.

\_\_\_\_\_

\_\_\_\_\_

11. Displays appropriate, professional interactions with co-therapists.

\_\_\_\_\_

\_\_\_\_\_

	Mid-term	Final
12. Displays appropriate, professional interactions with Clinical Internship Supervisor.	_____	_____
<b><i>Subtotal Points Earned for Section II</i></b>	_____	_____
<b>III. Technical Skills (Music and Other Media)</b>		
13. Guitar Proficiency	_____	_____
14. Keyboard Proficiency	_____	_____
15. Autoharp/Q-Chord Proficiency	_____	_____
16. Proficiency on other accompanying instrument	_____	_____
17. Vocal Proficiency	_____	_____
18. Percussion Proficiency	_____	_____
19. Ability to improvise on chosen instrument	_____	_____
20. Movement Proficiency	_____	_____
21. Ability to provide a quality musical product while leading the group.	_____	_____
22. Ability to teach musical skills to clients.	_____	_____
23. Ability to conduct a group ensemble (vocal or instrumental)	_____	_____
24. Ability to select musical material that is appropriate to the age and functioning level of the clients.	_____	_____
25. Ability to select music that directly supports the treatment focus (both live and recorded).	_____	_____
26. Ability to select instruments and other materials that are appropriate to the needs of the client.	_____	_____

	Mid-term	Final
27. Ability to alter musical material to meet the needs of the client (i.e. transposing or lyric simplification).	_____	_____
28. Ability to arrange and compose music to address client's needs.	_____	_____
29. Provides client(s) with opportunities to produce the best musical product.	_____	_____
30. Uses a variety of musical elements in sessions (such as singing, movement, instruments, etc.).	_____	_____
<b><i>Subtotal Points Earned for Section III</i></b>	_____	_____
<b>IV. Therapeutic Uses of Music</b>		
<i>Music Performing Activities</i>		
31. Arrange and conduct vocal or instrumental performance.	_____	_____
32. Arrange and conduct vocal or instrumental improvisation.	_____	_____
33. Provide vocal or instrumental instruction.	_____	_____
34. Use of developmental music therapy techniques (for sensorimotor, speech/language, cognitive development)	_____	_____
35. Engage in "Music-Centered Psychotherapy" (use of music to Explore emotional and/or interpersonal issues) on group or individual level.	_____	_____
36. Use basic Neurologic Music Therapy Techniques (for sensorimotor, speech/language, cognitive rehabilitation)	_____	_____
37. Use "Music and Movement" (may include expressive movement, various dance forms, or exercise).	_____	_____
38. Use "Music Combined with other Expressive Arts" (may include drama, poetry, visual art, etc.)	_____	_____

	Mid-term	Final
39. Utilizes "Recreational Uses of Music" (games, music appreciation, and development of new leisure skills).	_____	_____
40. Ability to provide "Music and Relaxation"	_____	_____
41. Use "Music as an Educational Medium" (to teach age-appropriate academic skills).	_____	_____
42. Use "Music to Enhance Cognitive Functioning" (such as attention span, concentration, or memory).	_____	_____
43. Use music to stimulate interaction among group members.	_____	_____
44. Use music to reinforce or facilitate desired social behaviors.	_____	_____
45. Design interventions which relate directly to the client's goals and objectives.	_____	_____
<b><i>Subtotal Points Earned for Section IV</i></b>	_____	_____
<b>V. Treatment and Implementation Skills</b>		
46. Implements clear and well-sequenced instructions to clients.	_____	_____
47. Provides smooth transitions between interventions.	_____	_____
48. Effective length, pacing, and sequencing of activities.	_____	_____
49. Handles behavior problems effectively.	_____	_____
50. Provides reinforcement that is immediate, specific and meaningful to the client.	_____	_____
<i>Uses basic counseling skills such as:</i>		
51. Active listening (eye contact, body language)	_____	_____
52. Reflection and acceptance of feelings.	_____	_____

	Mid-term	Final
53. Response to client's expressions of feelings.	_____	_____
54. Ability to maintain poised confident appearance in front of group.	_____	_____
55. Minimal or non-existent repetitive motor or speech Mannerisms.	_____	_____
56. Approving and validating	_____	_____
<b><i>Subtotal Points Earned for Section V</i></b>	_____	_____
<b>Total Points Earned</b> (Add all subtotals for each section)	_____	_____
<b>Total Possible Points</b> (56 - number of "X") x 5	_____	_____
<b>Final Score</b> (Total points earned divided by total possible points)	_____	_____
 <b>Mid-term Internship Score</b> _____		
<b>Comments:</b> _____		
_____		
_____		
_____		
_____		
_____		
 <b>Mid-term Internship Signatures</b>		
Supervising Music Therapist	Date	Intern
		Date
 <b>End of Internship Score</b> _____		





## Oral Roberts University Music Therapy Clinic

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Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### End of Internship Signatures

\_\_\_\_\_  
Supervising Music Therapist      Date

\_\_\_\_\_  
Intern      Date

**INTERNSHIP SITE EVALUATION**

Intern: \_\_\_\_\_

Date: \_\_\_\_\_

Setting: \_\_\_\_\_

Please complete the following evaluation using the rating scale provided and add comments. This form is to be completed at Mid-term and Termination to provide feedback to Internship Director, academic director, and regional AIAC representative. This document will not affect the final grade of the intern.

Rating Scale:

1 = Not Acceptable    2 = Weak    3 = Needs Improvement    4 = Acceptable  
 5 = Excellent    X = Not observed

\_\_\_\_\_ Orientation provisions: Please comment on the effectiveness of orientation.

Did orientation include the following? (Please check areas that you feel need improvement):

- \_\_\_\_\_ 1. Facility and campus tours
- \_\_\_\_\_ 2. Observation
- \_\_\_\_\_ 3. Review of AMTA Standards of Clinical Practice
- \_\_\_\_\_ 4. Organizational Structure
- \_\_\_\_\_ 5. Review of CBMT Code of Ethics
- \_\_\_\_\_ 6. Clinical Training Guidelines
- \_\_\_\_\_ 7. Review of Professional Competencies
- \_\_\_\_\_ 8. CBMT Code of Professional Practice
- \_\_\_\_\_ 9. Review of Documentation Procedures
- \_\_\_\_\_ 10. Establishment of Internship Goals

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_ Provisions for observation of individuals, groups, co-leading and leading activities

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_ Provisions for records and progress notes

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Provisions for intern self-awareness and professional growth

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Provisions for observation of intern sessions and providing feedback

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Provisions for supervision of intern

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Provisions for administrative skills, i.e. budgeting, program proposals, etc.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Provisions for special requirements, i.e. case study, research projects, etc.

Comments: \_\_\_\_\_

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What are the strengths of this internship?

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What are the weaknesses of this internship?

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Would you recommend this internship to other students? \_\_\_\_\_

Why or why not: \_\_\_\_\_

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Additional Suggestions:

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\_\_\_\_\_  
Signature of Intern

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Internship Supervisor

\_\_\_\_\_  
Date

Evaluation Forms adapted from Carol Gardner, DA, LPC, MT-BC, NMT; Amarillo, Texas

### **INTERN DISMISSAL POLICY AND PROCEDURES**

An intern may be dismissed from the ORU Music Therapy Internship Program when his/her actions are not compliant with AMTA Standards of Clinical Practice, Code of Ethics, Professional Competencies, Internship Guidelines or ORU Internship Policy and Procedures. Interns will be notified in writing, outlining specific problem areas, and a course of action to resolve the issue(s) by a target date. When an intern fails to demonstrate positive change in behavior or skills within a specified timeframe after corrective measures have been taken, dismissal from the internship may be warranted. Notification of dismissal should occur by the twelfth week of internship, if possible.

When an intern's actions are non-compliant with the Internship Policies, the academic director will be kept apprised of the steps taken to correct the intern's actions. The academic director will be notified when dismissal procedures are implemented.

An intern may elect to withdraw from the internship with written notification to the Internship Supervisor and Director (if director is not supervising the intern) and academic director. When possible, two weeks' notice will be given to allow for appropriate termination with clients.

Upon notification of dismissal or withdrawal from the internship program, the academic director will also be notified.

\_\_\_\_\_  
Signature of Intern

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Internship Coordinator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Z number

# ORU

## HONOR CODE PLEDGE

In signing the Honor Code Pledge, I fully recognize that Oral Roberts University was founded to be and is committed to being a leading academic institution serving the interdenominational Body of Christ, offering a lifestyle of commitment to Jesus Christ of Nazareth as personal Savior and Lord. I further recognize that the university's ministry is that of providing a Whole Person education with a charismatic distinctive. It is therefore my personal commitment to be a person of integrity in my attitude and respect for what Oral Roberts University is in its calling to be a Christian university.

1. I PLEDGE to apply myself wholeheartedly to my work and to use the full powers of my mind for the glory of God.
2. I PLEDGE to grow in my spirit, by developing my own relationship with God.
3. I PLEDGE to earnestly strive to manifest God's love to others by following Christ's example to do unto others as I would have them do unto me.
4. I PLEDGE at all times to keep my total being under subjection from all immoral and illegal actions and communications, whether on or off campus. I will not take any illegal drugs or misuse any drugs; I will not engage in or attempt to engage in any illicit, unscriptural sexual acts, which include any homosexual activity and sexual intercourse with one who is not my spouse through traditional marriage of one man and one woman. I will not drink alcoholic beverages of any kind; I will not use tobacco; I will not engage in other behavior that is contrary to the rules and regulations listed in the Employee Handbook.
5. I PLEDGE to maintain an integrity of openness to God's claims on my life and to do my utmost to know and follow His will for my life.
6. I PLEDGE to attend a house of worship wherever God is honored and lifted up.
7. I PLEDGE to abide by the rules and regulations that may from time to time be adopted by the university administration. I understand Oral Roberts University is a private school that is governed by a Board of Trustees, which has final authority on all matters. I will commit myself to a lifestyle consistent with the Honor Code, both at work and away from work.

I will keep the HONOR CODE carefully and prayerfully. I understand that my signature below is my acceptance of the entire Honor Code and my commitment, with God's help, to embody the concepts of this pledge into my daily living.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

**ORAL ROBERTS UNIVERSITY  
CONFIDENTIALITY AGREEMENT**

I, \_\_\_\_\_ (print name), understand that in my capacity in one of the following:

- A. Independent Contractor—Initial, if applicable: \_\_\_\_\_
- B. Volunteer—Initial, if applicable: \_\_\_\_\_
- C. Temporary Agency, Name of agency if applicable: \_\_\_\_\_
- D. Vendor (except Pitney Bowes, Sodexo, or Follett)  
Vendor name, if applicable: \_\_\_\_\_
- E. Other, Explain: \_\_\_\_\_

I may have access to and/or knowledge of private, confidential, personally identifying, financial, banking or other sensitive information or records that relate to students, faculty, staff, alumni, donors and/or University ("Information"). I understand that under federal and state law, as well as the policies of Oral Roberts University (ORU), such Information is protected from disclosure to third parties. I have read and understand ORU's policies regarding confidential information as well as its policies and notices on student records and the Family Education Rights and Privacy Act.

I acknowledge that the Information may be in tangible form (including documents, reports, programs, software, directories, computers, discs and electronic mail) or in intangible form (including oral communications, voice mail and similar mediums). I understand and agree that the Information shall, at all times, remain the exclusive property of ORU. Upon request during my assignment at ORU and at the termination of my assignment at ORU, I shall deliver to ORU all Information and/or Company property in my possession, custody or control. This Agreement is binding upon me at all times both during and after my assignment at ORU.

I will exercise a high degree of care to maintain the confidential and private nature of the Information described above. I will only disclose the Information to those in an ORU supervisory capacity (or their designee) as is required for purposes of performing my assignment and in accordance with the written policies and procedures of ORU. I acknowledge that any act or disclosure in violation of the terms of this Agreement will be grounds for immediate termination of my assignment with ORU. Finally, I understand that under federal and/or state law there may also be criminal or civil consequences arising from a violation of the terms of this Agreement.

**Release, Waiver, Indemnity.** I HEREBY RELEASE, WAIVE, DISCHARGE, INDEMNIFY, DEFEND AND HOLD HARMLESS ORU, its Board of Trustees, officers, instructors, employees, agents, volunteers, and any students acting as leaders, organizers or employees, from and against any and all liability, claim, demand, suit, or cause of action of any kind, for any property damage, loss or theft, personal injury, death, or disability, or other loss or expense of any kind arising out of or in connection with the assignment by the undersigned. I understand that I am not eligible for Workers' Compensation benefits.

If my assignment includes traveling with the ORU travel group at my own request. My participation is wholly voluntary. No insurance coverage will be provided to me by ORU. I am totally responsible for all my expenses relating to travel, lodging, and accommodations and insurance. At all times, I agree to conduct myself in a manner consistent with the conduct required of the ORU travel group.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The following policies have been extracted from the ORU employee handbook and are applicable to all contractors, volunteers, visitors, and vendors/suppliers of/to ORU. The term “employee” should be replaced with your appropriate designation. This designation does not imply an employee/employer relationship with ORU.

## **Section VIII - A. POLICY FOR THE PRIVACY AND RELEASE OF STUDENT INFORMATION**

The Family Educational Rights and Privacy Act of 1974, as amended, sets forth requirements designed to protect the privacy of student education records. The law governs access to records maintained by educational institutions and the release of information from those records. All employees of Oral Roberts University or any of its affiliates are required to abide by the policies governing review and release of student education records. Each employee holds a position of trust and must recognize the responsibility entrusted to him/her in preserving the security and confidentiality of student information. Therefore, each employee should adhere to the following guidelines:

- Do not make or permit unauthorized use of any information.
- Do not seek personal benefit or permit others to benefit personally by any confidential information that has come to them by virtue of their work assignment and in accordance with University and office policies.
- Do not exhibit or divulge the contents of any record or report to any person, except in the conduct of his/her work assignment in accordance with University and office policies.
- Do not knowingly include or cause to be included in any record or report a false, inaccurate, or misleading entry.
- Do not remove any official record (or copy) or report from the office where it is kept, except in the performance of one’s duties.
- Do not aid, abet, or act in conspiracy with another to violate any part of this policy.
- Immediately report any violation of this policy to the supervisor.

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. These rights are as follows:

- The right to inspect, review, and obtain copies of certain education records within 45 days of the day the University receives a request for access
- The right to request the amendment of education records believed to be inaccurate or misleading according to established guidelines
- The right for currently enrolled students to withhold information contained in the education records, except to the extent that FERPA authorizes disclosure without consent
- The right to file a complaint with the U.S. Department of Education concerning alleged failures of the University to comply with the requirements of FERPA

ORU designates the following categories of student information as public or “Directory Information.” Under FERPA such information may be disclosed by the institution for any purpose at its discretion. ORU per policy



does not disclose name, address, telephone number, date/place of birth, email address or student identification number ("Z" number and/or SSN). Under no circumstances should an employee give student records information to any other person who has not been authorized to receive such information. Although directory information may be released without prior consent, any requests for this type of information should be referred to the Office of the Registrar.

- *Category I:* Name, address, telephone number, dates of attendance, classification
- *Category II:* Previous institution(s) attended, major field of study, awards, honors (including Dean's List), degree(s) conferred (including dates)
- *Category III:* Past and present participation in officially recognized sports and activities, physical factors (height, weight) of athletes, date and place of birth
- *Category IV:* Grade reports to parents or guardians of undergraduate students who are of dependent status

**Note:** No present or former Oral Roberts University employee shall disclose or use, without an appropriate authorization, any information acquired by him/her in the course of his/her official duties. Inappropriate disclosure of a student's educational record is grounds for disciplinary action up to and including dismissal, regardless of whether criminal or civil penalties are imposed. FERPA policy questions should be referred to the immediate supervisor or the Office of the Registrar.

## Section VIII - B. CONFIDENTIALITY AND PROPRIETARY POLICY

**Confidential and Proprietary Information:** Through the employment relationship with ORU and/or any affiliated entities, one may have access to certain information that is of special and unique nature and value to ORU. This may include, but is not limited to, business operations; internal structure and financial affairs; systems and procedures; confidential reports; lists of former, present, and prospective accounts, customers, vendors, suppliers, and employees; marketing and business strategy; contracts and agreements with persons or entities; information regarding students, partners, and other constituents; and other proprietary and confidential information.

**Nondisclosure:** While employed or after termination of employment, an employee shall not for any reason or purpose, directly or indirectly, divulge or disclose to any person or entity any of the proprietary and confidential information or any other information or knowledge respecting the business or affairs of ORU or its officers, directors, employees, or students learned or conceived by an employee while in the employ of ORU, but shall hold the information confidential and secret and use his/her best efforts to limit access to confidential and proprietary information to those who have a need to know the information for the business purposes of ORU. Any violation of the terms and conditions of the policy is grounds for immediate termination.

**Ownership and Return of Information:** All writings, records, instruments, documents, customer lists, data, reports, programs, software, computer-stored information, hardware, telephone and address books, card decks, listings, programming, customer files and records, and any and all other instruments, records, and documents recorded or stored on any medium whatsoever (regardless of whether the medium is owned by ORU or employee) relating or pertaining directly or indirectly to employment with ORU shall at all times be and remain the property of ORU. Upon the termination of employment, the employee shall return to ORU all records, along with all other property belonging to ORU. The employee shall return any copies of any such records at such time as his/her employment ceases. In the event the employee fails to return any records or other property of ORU, in addition to ORU's other legal remedies, ORU may deduct the value of the unreturned records or property from any compensation payable to the employee. -8/2007

<i>Date</i>											
<b><u>Direct Services:</u></b>	-	-	-	-	-	-	-	-	-	-	
<i>Sessions lead independently</i>											
<i>Sessions co-lead with MT-BC</i>											
<i>Sessions lead with intern</i>											
<b>Total DIRECT</b>	0	0	0	0	0	0	0	0	0	0	0
<b><u>Indirect services</u></b>	-	-	-	-	-	-	-	-	-	-	
<i>Observation or orientation</i>											
<i>Planning or Documenting</i>											
<i>Supervision with Clinical Supervisor</i>											
<i>Supervision with Director of Clinic</i>											
<i>Peer supervision</i>											
<i>Training/supervising junior intern</i>											
<i>Professional Development (Conference, workshops, accreditation preparation etc.)</i>											
<i>Professional Presentations</i>											

<i>Team Meetings</i>											
<i>Other</i>											
<i>Total INDIRECT:</i>	0	0	0	0	0	0	0	0	0	0	0
<i>Daily totals</i>	0	0	0	0	0	0	0	0	0	0	0
-	-	-	-	-	-	-	-	-	-	-	
<i>Total DIRECT</i>											
<i>Total INDIRECT</i>											
<i>TOTAL of page:</i>											
<i>Total Internship hours to date</i>											