Mendocino College Cooperative Work Experience Education

Alcohol and Other Drug Studies (AOD 197a) Practicum
LEARNING OBJECTIVES

Last Name **First Name** **Date**

Units: _____ (worth up to 3 units) **Hours Required: _____**

OBJECTIVE: WHAT I AM ATTEMPTING TO LEARN OR IMPROVE

1. **To further enhance interpersonal and professional communication and problem solving skills while integrating and applying knowledge and counseling skills within my scope of practice.**
2. **To adhere to the agency's code of ethics while dealing with ethically challenging situations.**

EXPECTED OUTCOMES – what would indicate I've achieved my objective:

- ☐ I will score a 75% or higher rating on the AOD Internship Evaluation form
- ☐ I will complete a journal describing my internship activities and my feelings experienced along with the strengths and deficiencies in my abilities that I become aware of in the process.
- ☐ I will maintain an internship work schedule and manage my time effectively

MY LEARNING PROCESS – how I will go about gaining the knowledge and/or skills related to this objective:

- ☐ I will review any instructional materials recommended to me by my supervisor and/or instructor
- ☐ I will communicate effectively with my supervisors and co-workers to ensure I understand correctly their expectations of me
- ☐ I will observe my supervisor and/or skilled co-workers perform tasks and complete duties that I will be assigned. I will ask questions as needed to ensure I adequately understand their expectations
- ☐ I will complete tasks and perform my duties under the observation of my supervisors and/or skilled co-workers and make adjustments in my approach based on the feedback I receive
- ☐ I will continue to practice tasks and duties as assigned, with periodic observation and feedback, until I achieve a desired level of proficiency
- ☐ I will attend all supervision meetings, and discuss issues that affect my ability to effectively apply my knowledge and skills

Expected Completion Date: _____

Student: Print Name Signature Date

Supervisor: Print Name Signature Date

By signing, I hereby recommend and approve this Learning Objective, the outcomes and learning process

Internship (College) Instructor: Signature Date