

ART 453: Art Therapy Field Experience Agreement

This course is a requirement for the BA degree. This form needs to be typed and is available on Canvas. The student is responsible for completing this form and its submission to the professor one week before the first day on site. Only signed contracts are included in your electronic portfolio.

Fall 2022

Field Experiences are collaborations among Converse University, School of the Arts, Department of Art and Design, Art Therapy Program, the professor, the student, and the Spartanburg Regional Housing & the Archibald Rutledge Apartment Residents.

Course Information:

Professor: Laura Zeisler ATR-BC, LISW-CP

Email: laura.zeisler@converse.edu,

Phone: 864-596-9314

Course Credits: 3

Required visits on-site: 6

Academic Requirements: See ART 453: Art Therapy Field Experience syllabus for course assignments and expectations.

Student Contact Information:

Name:

Email and Phone:

College Address: 580 E. Main Street, Spartanburg, SC 29302

Address during the semester, if different:

All goals are written using the MAPS format and in behavioral terms. Use the midterm and final skills worksheets and the AACU rubric to reference your learning objectives.

Learning Objectives:

- 1.
- 2.
- 3.
- 4.

Site Information:

Company Name: Spartanburg Housing, Archibald Rutledge Hi-Rise Apartments

Address: 764 N. Church St., Spartanburg, SC, 29303

Site Supervisor Name and Title: Jayne Floyd, Public Housing Elderly and Disabled Case Manager

Contact information: jfloyd@shasc.org, phone 864.598.6127, fax 864.598.6127, mobile 864.809.4390

Spartanburg Housing Mailing Address: PO Box 2828, Spartanburg SC 29304.

Note: Professor Zeisler will be on site each week with the students. Jane Floyd supervisor obligates to inform the professor of any undue activities brought to her attention during the field experience.

To ensure a productive field experience internship, below is a list of the student's roles and responsibilities. These guidelines will help you to provide the necessary structure for the service-learning experience.

- Create developmentally and accessible art-making opportunities for seniors and adults with various variations and possible disabilities.
- Follow all required safety standards, orientations, organization policies, documentation, and procedures.
- On the days you are the lead facilitator, students will complete experiential paperwork and email a copy to all participants by 11:00 a.m.
- Create marketing materials to advertise the program.
- Prepare all art materials on Wednesday by 1:30 p.m. Buckets can be filled and left in Milliken #207.
- Create an inclusive environment for all.
- Be on time and professional throughout the sessions.
- Contribute to the setup and clean-up of all activities.
- Speak loud enough so those with hearing challenges can follow the directions and fully participate.
- Take direction and feedback to improve Art Mentorship skills.
- Report any elder abuse concerns or other mental health emergencies immediately to Professor Zeisler.
- Adhere to all agency, CDC, and University policies regarding COVID-19.
- Maintain the privacy and confidentiality of each resident.
- If a student has any concerns regarding the site, it will be their responsibility to seek individual supervision from Professor Zeisler. Failure to address concerns immediately will negatively impact your grade and your safety.

Student Agreement to abide by the AATA Code of Ethics and Multi-Cultural Competencies

The art therapy major at Converse University is guided by the American Art Therapy Association's Code of Ethics and the Multi-Cultural Competencies. The tenets of these documents are found throughout the curriculum and field experience, and a copy is available on Canvas.

I recognize, without reservation, the field of art therapy's notion— that a client's values, beliefs, and actions are influenced by race, ethnicity, nationality, gender, religion, socioeconomic status, political views, sexual orientation, geographic region, physical capacity or human variation, and historical or current experiences with the dominant culture. I understand my obligation to engage with respect and dignity all individuals, regardless of our cultural similarities or differences. By signing this agreement, I acknowledge having read both documents, I understand the required expectations and meet the expected codes of conduct.

Initial _____

**STATE OF SOUTH CAROLINA) ACKNOWLEDGMENT AND RELEASE OF
COUNTY OF SPARTANBURG) INTERNSHIP PROGRAM PARTICIPANT**

The undersigned student of Converse University (Intern) is participating in the University's internship program during _____ 20 _____. The intern understands that neither Converse University nor its staff is liable for injuries or damages sustained by the intern while they are participating in the internship program. Interns are not covered under the University's insurance policies for any injury they may receive at the internship site. Further, there is no coverage by the University's insurance policies for any damages sustained by the internship site as a result of the intern's conduct.

The intern acknowledges receiving adequate and satisfactory information concerning the internship site and the risks associated with working at said internship site and represents that they know of no reason why they should not be placed as an intern at said internship site. Intern acknowledges their obligation to reveal to the University the existence of any condition which might result in injury or damage to themselves or to the internship site as a result of their participation in the University's internship program.

In consideration of receiving permission from Converse University, a corporation, to participate in internships or any activities related to course work the undersigned hereby releases Converse University, its agents, officers, servants and employees, of and from all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage or injury of the undersigned in connection with the participation set forth above.

**I give the University permission to release information contained in a background check and/or SC Sex Offender Registry to the internship site, if required by said internship site.*

This Release shall be binding upon the heirs, executors, administrators and assigns of the undersigned.

PRINTED NAME: _____

Student Signature: _____

**IN WITNESS WHEREOF, the undersigned has executed this Acknowledgement and Release this*

_____ day of _____, 20_____.

Witness Signature: _____

Professor Signature: _____ **Date:** _____.