

MEMORANDUM OF UNDERSTANDING

Texas A&M International University Master of Arts in Counseling Psychology Program And Counseling Practicum/Internship Clinical Sites

I. Term of Agreement

The term of this agreement is _____ through _____.

II. Parties

_____, is a local agency that provides mental health services for _____ in Laredo, TX. _____ has the resources (space and qualified supervisors) and case load to be able to support the development of graduate students in the Master of Arts Counseling Psychology Program (MACP).

Texas A&M International University's Master of Arts in Counseling Psychology (MACP) program focuses on developing culturally competent counselors. Our students are trained to work with children, adolescents, young adults, older adults, couples and families. To graduate, students must complete a 60-hour program plan that prepares them to qualify for licensure in the state of Texas as Licensed Professional Counselors (LPCs) or Licensed Psychology Associates (LPA). For students to be eligible for licensure they must complete a minimum of 600 supervised hours during their graduate training as follows:

Course	Direct Hours	Indirect Hours	Total Hours
PSYC 5350 Counseling Practicum	80	120	200
PSYC 5352 Counseling Internship I	60	100	160
PSYC 5354 Counseling Internship II	100	140	240
			600 Total

III. Purpose

The purpose of this agreement is to establish parameters for the collaboration between your agency and TAMIU's MACP program to ensure our students continue to get outstanding training experience. In addition, we would like to detail some of the ways your agency can benefit from accepting our students.

IV. Services from students

TAMIU-MACP students will be committed to completing clinical training hours at your site each week. The number of hours completed will be determined collaboratively based on the student's academic schedule, site needs, and availability, but will typically average approximately 10-12 hours per week. During this time, students may provide one-on-one services to clients, facilitate groups, conduct psychoeducational presentations, attend trainings, complete documentation, and/or prepare for sessions.

As part of the TAMIU-MACP training program, students are required to video and audio record individual and group counseling sessions for supervision and educational purposes. Recordings will only occur with signed parent/guardian/client consent, and the program can provide consent forms for site use.

V. Services requested from sites

Practicum/Internship sites commit to providing TAMIU–MACP students with the following:

- Opportunities to maintain an ongoing caseload each semester (cases may include individuals, couples, groups) as well as other opportunities for direct hours (mental health presentations, psychoeducational outreach activities, mental health screenings, etc.)
- One hour of face-to-face individual supervision conducted by a licensed professional at your clinical site

VI. Services from faculty to sites

In appreciation for the support your site will provide to our students, MACP faculty commit to:

- Respond promptly to any concern raised by a supervisor about any of our students
- Supplement instruction in practicum or internship seminars to support your sites' requirements for practice (i.e. intake procedures, handling of crisis, etc.)

VII. TEXAS LAW TO APPLY

This agreement shall be constructed under and in accordance with the laws of the State of Texas and all obligations of the parties created hereunder are performable in Webb County, Texas.

VIII. MODIFICATION & TERMINATION

This memorandum of understanding constitutes an agreement between the parties hereto and may only be modified, altered, revised, extended or renewed by mutual written consent of all parties, by the issuance of written amendment, signed and dated by all the parties.

Either party to this MOU may terminate their participation in this MOU by providing reasonable written notice of intent to terminate with no less than 30 days notice. In such case, termination by one or more of the parties to this MOU does not alter the terms or obligations of the other parties to this MOU.

IX. AUTHORIZATION

The signers of this agreement hereby represent and warrant that they have authority to execute this agreement on behalf of each of their respective entities.

IN WITNESS THEREOF, the parties have duly approved this Memorandum of Understanding, executed in duplicate originals on this _____ day of _____, 2026.

Signature of Authorized Agency Representative: _____

Name: _____ *Title:* _____

Organization: _____ *Date:* _____

Signature of Authorized Agency Representative: _____

Name: _____ *Title:* _____

Organization: _____ *Date:* _____