

# Wisconsin Department of Safety and Professional Services

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## MARRIAGE AND FAMILY THERAPY, PROFESSIONAL COUNSELING, AND SOCIAL WORK EXAMINING BOARD

### EMPLOYMENT FORM FOR SUPERVISED MARRIAGE AND FAMILY THERAPY PRACTICE (To be completed by applicants applying for a training license.)

Last Name	First Name	MI	Former / Maiden Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I am in a position or have an offer for a position in a supervised Marriage and Family Therapy practice and will receive supervision exercised by:

#### Check supervisor's qualification(s):

- A licensed Marriage and Family Therapist with a Doctorate degree in Marriage and Family Therapy.
- A licensed Marriage and Family Therapist who has engaged in the equivalent of five (5) years of full-time Marriage and Family Therapy practice.
- A Psychiatrist licensed under Wis. Stat. § 455.
- A Psychologist licensed under Wis. Stat. § 455.
- A person who holds an “**Approved Supervisor**” certificate from American Association for Marriage and Family Therapy (AAMFT) or an AAMFT supervisor-in-training.
- Another qualified professional approved by the Marriage and Family Therapy Section in advance of the supervision of the practice of Marriage and Family Therapy. Please attach a written request for approval to this form.

The request must state the educational and practice credentials of the supervisor; the reason you are requesting this individual rather than the approved supervisors as allowed under Wis. Admin. Code § MPSW 16.05(1)(a-d); and the steps you have taken to obtain supervision from an individual pre-approved under Wis. Admin. Code § MPSW 16.05(1)(a-d).

The supervisor may not permit a supervisee to engage in any Marriage and Family Therapy practice that the supervisor cannot competently supervise. The supervisor shall be legally and ethically responsible for the activities of the Marriage and Family Therapy supervisee. Supervisors shall be available or make appropriate provision for emergency consultation and intervention. Supervisors shall be able to interrupt or stop the supervisee from practicing in given cases and to stop the supervised relationship if necessary.

The person whose practice is being supervised shall receive a minimum of 1 hour of face-to-face supervision for each 10 hours of client contact.

Name of Employer:

Supervisor's Name:

Supervisor's Position Title:

Supervisor's Credential Number:  -