INTERNSHIP INFORMATION SHEET

(to be submitted to college for approval)

Name of the Student: SHREYAS

Class and Register No of the student: II MSc. COUNSELLING PSYCHOLOGY (4MPC)

PC190038

Name of the college supervisor: Dr. Elizabeth Jasmine

Mr. Varghese Mathew

Name of the Organization interning: WINGS WITHIN

Name of the Onsite Supervisor: Ms. Tenzin

Ms. Sonika

Address of the Organization: No. 5, 2nd floor, 1st cross, ITPL main road, Opposite to

Total Environment Pursuit of a Radical Rhapsody, Rajpaliya, Hoodi, Bengaluru, Karnataka 560048

Designation of the onsite supervisor: Counselling psychologist &

Behavior Therapist

Phone/Email of the supervisor: wings.within.09@gmail.com

wings.within.04@gmail.com wings.within.07@gmail.com

Contact Details of the organization:

Website: wingswithin.in

Email id: info@wingswithin.in

Office Phone Number: +91-9945443210

Internship starting date and ending date: 03-05-2021

No of days of the week/hours you will be interning: 7 days a week / four hours a day

Nature of work that you will be undertaking: Training on counselling skills, Mock / practice sessions (different types of cases), Observing cases and Case discussions, Preparing case history and reports, handling real clients based on performance.

Any other information for college supervisor's reference:

Date: 24-05-2021

Shreya S

Signature of the student.