



SUPERVISOR SUMMARY

In the table below, summarize information from each supervisor's current vita. Please provide information on each supervisor currently supervising in your program, including supervisors at off-site practicum and internship placements. If the program is submitting a Self-Study, vitae for ALL supervisors must be included and must be located in the on-site resource room during the Site Visit.

Supervisor's Name and Location	Credentials			Supervisory Credentials (List all that apply)			Experience		
	Gender	Ethnicity	State License ¹	CF ² (Yes/No)	- AAMFT Approved Supervisor (AS) - AAMFT Approved Supervisor Candidate (SC) - State Approved Supervisor (SS) - Supervisor Equivalent (SE) - Other	Expiration Date (AS/SC)	Years of experience as an MFT Supervisor ³	Years of experience as an MFT ⁴	Currently engaged in clinical practice? (Yes/No)
Name: Michelle Cawn Placement Site: Pfeiffer University	Female	Caucasian	LMFT	Yes	SC	06/2022	15	20	Yes
Name: Byron Coley Placement Site: Pfeiffer University	Male	African American	LMFT	YES	SC	06/2022	1	6	Yes
Name: Adam Fadel Placement Site: Pfeiffer University	Male	Caucasian	LMFT	Yes	SC	06/2022	2	3.5	Yes
Name: Sylvia Jessup Placement Site: Pfeiffer University	Female	African American	LMFT	Yes	AS	06/2022	1	10	Yes
Name: Matthew Pace Placement Site: Pfeiffer University	Male	Latino	LMFT	Yes	AS	06/2022	7	17	Yes
Name: Sarah Wolford Placement Site: Pfeiffer University	Female	Caucasian	LMFT	Yes	AS	06/2022	2	9	Yes
Name: Placement Site:									
Name: Placement Site:									

¹State License=LMFT, LCSW, LPC, etc.

²CF=AAMFT Clinical Fellow

³MFT Supervisor=supervising students in their work as MFTs

⁴Experience as an MFT=practicing as a marriage & family therapist

State of North Carolina

Marriage and Family Therapy Licensure Board

MICHELLE CAWN

has met the education, examination and other qualifying requirements as specified in the MARRIAGE AND FAMILY THERAPY LICENSING ACT and is hereby authorized to engage in the practice of marriage and family therapy, as a

LICENSED MARRIAGE AND FAMILY THERAPIST (LMFT)

In the state of North Carolina in witness thereof

THE STATE BOARD OF MARRIAGE AND FAMILY THERAPY LICENSURE GRANTS

License Number 943 Originally Issued On 05/31/2002 Expires On 07/01/2022

EXPIRES THE 1ST DAY OF JULY EACH SUBSEQUENT YEAR FROM DATE OF ONE YEAR OF ORIGINAL LICENSURE DATE AND IS SUBJECT TO ANNUAL RENEWAL IN ACCORDANCE WITH APPLICABLE NORTH CAROLINA STATUTES and ADMINISTRATIVE CODES.

Sandra K. VanderLinde

Sandra K. Vander Linde, LMFT (Chair)

Stacey Kolomer

Stacey Kolomer, PhD (Vice-Chair)

SUPERVISOR CANDIDATE VERIFICATION FORM

This _____ verifies _____ he _____ currently working towards the requirements- AAU VT designation. This form may be submitted to _____ emg-loers, _____ programs.

agencies, supervisees, or anyone who needs _____ that the is _____ under mentoring with AAUFT Approved Supervisor and is actively training to be an AAUFT form to be completed and _____ by an Approved Supervisor mentor, 11/9/20 via _____ the supervisee retain the _____ in event of a future N"licatio.n for licensure AAUFT

Name of supervisor candidate _____

AAUFT_1X741_

Name of Approved Supervisor who is Dr. -
James PhAt

AQ.MFT'O* 8/18/20

I, James W. PhAt (Approved Supervisor mentor), verify that the supervisor candidate has a graduate degree, or is a student in a COAMFTE accredited doctoral program.

Further, I verify that the above named candidate is actively engaged in fulfilling the requirements to become an AAUFT Approved Supervisor and is current with ongoing supervision mentoring with me. The candidate has been under my mentoring since:

Start date: 09/20 (mm/yy)

We anticipate that he/she will complete the training requirement and apply to be an AAUFT Approved Supervisor on:

Expected completion date: 01/21 (mm/yy)

James W. PhAt
AAUFT Approved Supervisor mentor

9/10/20
Date

Supervisor Candidate Initials/Date: _____ 09/20

State of North Carolina

Marriage and Family Therapy Licensure Board

BYRON COLEY

has met the education, examination and other qualifying requirements as specified in the
MARRIAGE AND FAMILY THERAPY LICENSING ACT and is hereby authorized to engage in the practice of
marriage and family therapy, as a

LICENSED MARRIAGE AND FAMILY THERAPIST (LMFT)

In the state of North Carolina in witness thereof

THE STATE BOARD OF MARRIAGE AND FAMILY THERAPY LICENSURE GRANTS

License Number 1810 Originally Issued On 02/03/2017 Expires On 07/01/2022

EXPIRES THE 1ST DAY OF JULY EACH SUBSEQUENT YEAR FROM DATE OF ONE YEAR OF ORIGINAL
LICENSURE DATE AND IS SUBJECT TO ANNUAL RENEWAL IN ACCORDANCE WITH APPLICABLE
NORTH CAROLINA STATUTES and ADMINISTRATIVE CODES.

Sandra K. VanderLinde

Sandra K. VanderLinde, LMFT (Chair)

Stacey Kolomer

Stacey Kolomer, PhD (Vice-Chair)

SUPERVISOR CANDIDATE VERIFICATION FORM

This form verifies that the supervisor candidate is currently working towards the requirements for AAMFT Approved Supervisor designation. This form may be submitted to employers, educational programs, agencies, supervisees, or anyone who needs verification that the supervisor candidate is currently under supervision mentoring with an AAMFT Approved Supervisor and is actively training to be an AAMFT Approved Supervisor. This form is to be completed and signed by an AAMFT Approved Supervisor. If provided to a supervisee, the supervisee should retain the form in the event it is needed to support a future application for licensure or AAMFT membership.

Name of supervisor candidate Byron Coley AAMFT ID# _____

Name of AAMFT Approved Supervisor who is mentoring the candidate:

Adam Mathews, PhD, LMFT

AAMFT ID# 114967

I, Adam Mathews, PhD, LMFT (Approved Supervisor mentor), verify that the supervisor candidate has a graduate degree, or is a student in a COAMFTE accredited doctoral program.

Further, I verify that the above-named candidate is actively engaged in fulfilling the requirements to become an AAMFT Approved Supervisor and is current with ongoing supervision mentoring with me. The candidate has been under my mentoring since:

Start date 6/17/2020 (mm/yy), and we anticipate that he/she will complete the training requirement and apply to be an AAMFT Approved Supervisor on: Completion date 12/17/2020 (mm/yy).


AAMFT Approved Supervisor mentor

6/17/2020

Date

Byron Coley, Ph.D., LMFT
Supervisor Candidate

06/20/2020

Date

State of North Carolina

Marriage and Family Therapy Licensure Board

ADAM FADEL

has met the education, examination and other qualifying requirements as specified in the
MARRIAGE AND FAMILY THERAPY LICENSING ACT and is hereby authorized to engage in the practice of
marriage and family therapy, as a

LICENSED MARRIAGE AND FAMILY THERAPIST (LMFT)

In the state of North Carolina in witness thereof

THE STATE BOARD OF MARRIAGE AND FAMILY THERAPY LICENSURE GRANTS

License Number 1981 Originally Issued On 11/01/2018 Expires On 07/01/2022

EXPIRES THE 1ST DAY OF JULY EACH SUBSEQUENT YEAR FROM DATE OF ONE YEAR OF ORIGINAL
LICENSURE DATE AND IS SUBJECT TO ANNUAL RENEWAL IN ACCORDANCE WITH APPLICABLE
NORTH CAROLINA STATUTES and ADMINISTRATIVE CODES.

Sandra K. VanderLinde
Sandra K. VanderLinde, LMFT (Chair)

Stacey Kolomer
Stacey Kolomer, PhD (Vice-Chair)

SUPERVISOR CANDIDATE VERIFICATION FORM

This form verifies that the supervisor candidate is currently working towards the requirements for the AAMFT Approved Supervisor designation. This form may be submitted to employers, educational programs, agencies, supervisees, or anyone who needs verification that the supervisor candidate is currently under supervision mentoring with an AAMFT Approved Supervisor, and is actively training to be an AAMFT Approved Supervisor. This form is to be completed and signed by the AAMFT Approved Supervisor. If provided to a supervisee, the supervisee should retain the form in the event it is needed to support a future application for licensure or AAMFT membership.

Name of supervisor candidate: Adam T. Fadel AAMFT ID# 167474

Name of AAMFT Approved Supervisor who is mentoring the candidate: Dr. Francis Morgan Enright AAMFT ID# 133032

I, Morgan Enright (Approved Supervisor mentor), verify that the supervisor candidate has a graduate degree or has completed at least two years of a doctoral program in marriage and family therapy.

Further, I verify that the above named candidate is in current and ongoing supervision mentoring with me. The candidate has been under my mentorship since:

Start date 4/2018 (mo/yr), and we anticipate that he/she will complete the training requirements and apply to be an AAMFT Approved Supervisor on:
Completion date 4/2022 (mo/yr).

At the end of their training, the above mentioned supervisor candidate will have:

- Completed a 30-hour supervision fundamentals course that has been pre-approved or offered by AAMFT.

As of this date the candidate:

- ☒ Has completed this course.
☐ Has not yet completed this course.

- Provided at least 180 hours of supervision over a minimum of two years. At this point, the candidate has provided 139.5 hours of supervision under my mentorship.

- Received a minimum of 36 hours of supervision mentoring over a minimum period of two years. As of this date, the candidate has received 24.5 hours of supervision mentoring.

I verify that the above mentioned supervisor candidate is actively engaged in fulfilling the requirements to become an AAMFT Approved Supervisor.

Dr. Francis Morgan Enright 8/21/2021
AAMFT Approved Supervisor mentor Date

Supervisor candidate

Date

State of North Carolina

Marriage and Family Therapy Licensure Board

SYLVIA JESSUP

has met the education, examination and other qualifying requirements as specified in the
MARRIAGE AND FAMILY THERAPY LICENSING ACT and is hereby authorized to engage in the practice of
marriage and family therapy, as a

LICENSED MARRIAGE AND FAMILY THERAPIST (LMFT)

In the state of North Carolina in witness thereof

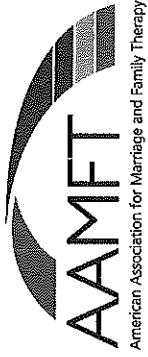
THE STATE BOARD OF MARRIAGE AND FAMILY THERAPY LICENSURE GRANTS

License Number 1770 Originally Issued On 07/29/2016 Expires On 07/01/2022

EXPIRES THE 1ST DAY OF JULY EACH SUBSEQUENT YEAR FROM DATE OF ONE YEAR OF ORIGINAL
LICENSURE DATE AND IS SUBJECT TO ANNUAL RENEWAL IN ACCORDANCE WITH APPLICABLE
NORTH CAROLINA STATUTES AND ADMINISTRATIVE CODES.

Sandra K. VanderLinde
Sandra K. Vander Linde, LMFT (Chair)

Stacey Kolomer
Stacey Kolomer, PhD (Vice-Chair)



February 12, 2021

Sylvia D. Jessup, MA
Sylvia Jessup Counseling Services PLLC
Highland Creek
Charlotte, NC 28269-7187

To Whom it May Concern:

This letter is to verify that Sylvia D. Jessup, MA (membership ID# 131526) is an Approved Supervisor in good standing of the American Association for Marriage and Family Therapy.

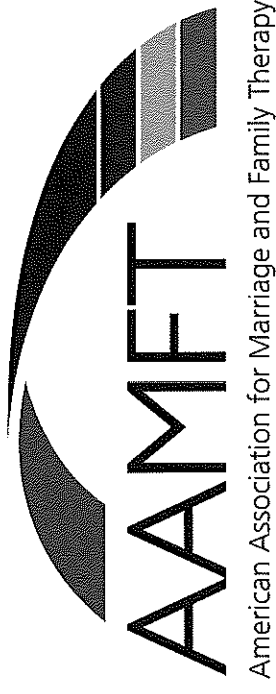
Approved Supervisor since:
Designation expires:

12/31/2020
12/31/2025

Approved Supervisor Designation is maintained through upholding our ethical standards, payment of annual dues, and completion of an AAMFT supervision refresher course at the end of every five-year term. Information in this letter may be verified by contacting AAMFT Membership Services at 703-838-9808.

Sincerely,

Dorothy Bose
Manager, Approved Supervisor
Designation



Sylvia D. Jessup, MA

IS DESIGNATED AS AN

APPROVED SUPERVISOR

FOR THE TERM EXPIRING

Designation first granted: December 31, 2020

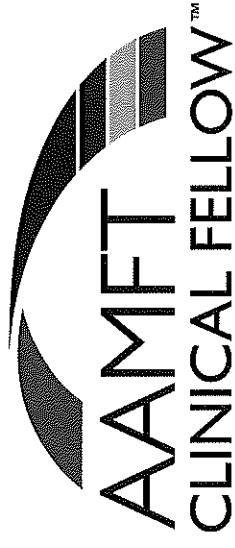
Current Designation Expires: December 31, 2025

131526

AAMFT Membership ID

A handwritten signature in black ink, appearing to read 'Timothy Dwyer', is positioned above the printed name.

Timothy Dwyer, PhD, President



Certifies that

Sylvia D. Jessup, MA

Has met the rigorous educational and training requirements necessary to be designated as a Clinical Fellow of the American Association for Marriage and Family Therapy.

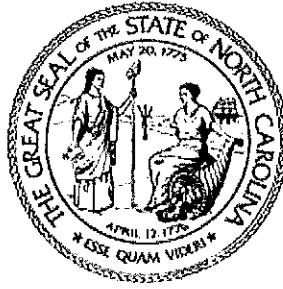
Member Since: 11/4/2016

Membership Expires: 11/30/2021

A handwritten signature in black ink, appearing to read "Timothy Dwyer". The signature is fluid and cursive, with the first name "Timothy" and last name "Dwyer" clearly distinguishable.

Timothy Dwyer, Ph.D., President

Membership ID: 131526



North Carolina Marriage and Family Therapy Licensure Board

Mailing Address: 1135 Kildaire Farm Road, Suite 200 Cary, NC 27511
Phone: (919) 654-6914 • Fax: (919) 336-5156 • Email: verify@ncbmft.org • Web: www.ncbmft.org

License Verification

The verification information provided on the NC Marriage and Family Therapy Licensure Board website is a primary source verification. It is electronically secure and licensure information is directly maintained by the Board. This certificate is generated at the time of annual license renewal using data from the date listed below.

Any changes after the renewal date are reflected at www.ncbmft.org/verify.

If 'YES' appears in the Public Record column, this means disciplinary action has been taken against the licensee and you may contact the Board for more information at ethics@ncbmft.org.

Name: Matthew Pace

License Type: LMFT

License Number: 2025

Initial License Date: 05/01/2019

License Active Until: 07/01/2021

Public Record (Disciplinary Action): ☒ No ☐ Yes

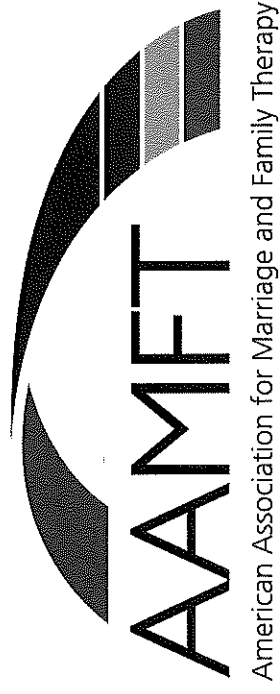
Record Updated: 2020-08-31 15:41:16

LMFT - Licensed Marriage and Family Therapist (unrestricted license)

LMFTA - Licensed Marriage and Family Therapist Associate

(restricted license, must practice under approved supervision)

All information provided by the NCMFTLB on this website is made available as a service to the public. While every attempt is made to ensure that the information contained herein is both accurate and current, the Board makes no guarantee or warranty, either expressed or implied, concerning the accuracy or reliability of the content of this website or the content of any other website link. It is the responsibility of the user to assess the accuracy and reliability of the information obtained from this website. The Board shall not be liable for errors contained herein.



Matthew M.S. Pace, PhD

IS DESIGNATED AS AN

APPROVED SUPERVISOR

FOR THE TERM EXPIRING

Designation first granted: April 01, 2014

Current Designation Expires: April 30, 2024

97845

AAMFT Membership ID

A handwritten signature in black ink, which appears to read 'Shelley A. Hanson', is positioned to the left of the printed name.

Shelley A. Hanson, MA, President

State of North Carolina

Marriage and Family Therapy Licensure Board

SARAH WOLFORD

has met the education, examination and other qualifying requirements as specified in the
MARRIAGE AND FAMILY THERAPY LICENSING ACT and is hereby authorized to engage in the practice of
marriage and family therapy, as a

LICENSED MARRIAGE AND FAMILY THERAPIST (LMFT)

In the state of North Carolina in witness thereof

THE STATE BOARD OF MARRIAGE AND FAMILY THERAPY LICENSURE GRANTS

License Number 2093 Originally Issued On 11/20/2019 Expires On 07/01/2022

EXPIRES THE 1ST DAY OF JULY EACH SUBSEQUENT YEAR FROM DATE OF ONE YEAR OF ORIGINAL
LICENSURE DATE AND IS SUBJECT TO ANNUAL RENEWAL IN ACCORDANCE WITH APPLICABLE
NORTH CAROLINA STATUTES and ADMINISTRATIVE CODES.

Sandra K. VanderLinde
Sandra K. VanderLinde, LMFT (Chair)

Stacey Kolamer
Stacey Kolamer, PhD (Vice-Chair)

Authenticity and Official Verification of current licensure status is available at www.ncbmtfl.org

SUPERVISOR CANDIDATE VERIFICATION FORM

This form verifies that the supervisor candidate is currently working towards the requirements for AAMFT Approved Supervisor designation. This form may be submitted to employers, educational programs, agencies, supervisees, or anyone who needs verification that the supervisor candidate is currently under supervision mentoring with an AAMFT Approved Supervisor, and is actively training to be an AAMFT Approved Supervisor. This form is to be completed and signed by an AAMFT Approved Supervisor mentor. If provided to a supervisee, the supervisee should retain the form in the event it is needed to support a future application for licensure or AAMFT membership.

Name of supervisor candidate Sarah Wolford AAMFT ID# 162864

Name of AAMFT Approved Supervisor who is mentoring the candidate:

Dr. Beverly Rodgers AAMFT ID# LMFT 427 LMFTS 16896
I, Dr. Beverly Rodgers (Approved Supervisor mentor), verify that the supervisor candidate has a graduate degree, or is a student in a COAMFTE accredited doctoral program.

Further, I verify that the above named candidate is actively engaged in fulfilling the requirements to become an AAMFT Approved Supervisor and is current with ongoing supervision mentoring with me. The candidate has been under my mentoring since:

Start date 3/1/2020 (mm/yy)

We anticipate that he/she will complete the training requirement and apply to be an AAMFT Approved Supervisor on:

Expected completion date 1/8/2022 (mm/yy)

Dr. Beverly Rodgers Date 1/8/2020
AAMFT Approved Supervisor mentor

Sarah Wolford Date 1/8/2020
Supervisor Candidate

To: Wolford, Sarah <Sarah.Wolford@pfeiffer.edu>

Subject: [EXTERNAL]Congratulation on achieving the AAMFT Approved Supervisor Designation

CAUTION: This email originated from outside of Pfeiffer University. Do not click links or open attachments unless you recognize the sender and know the content is safe.



To: Sarah N. Wolford PhD

Membership ID# : 162864

Congratulations on achieving the AAMFT Approved Supervisor designation! Your Approved Supervisor application has been approved and AAMFT is pleased to welcome you to the designation. As an AAMFT Approved Supervisor you will serve a very important role – a mentor for the next generation of marriage and family therapists.

As you embark on your work as an Approved Supervisor, don't forget that a number of resources – and access to thousands of other Approved Supervisors – is at your fingertips through AAMFT's Approved Supervision Network. Available at networks.aamft.org/approvedsupervision or via the Engage tab on the AAMFT website, the AS Network is your portal to forms and resources, current research and news, and our AS Network Community where you can engage with your fellow Approved Supervisors.

Digital Badge: We are committed to providing you with the tools necessary to achieve your professional goals and we understand that communicating your credentials in an ever-expanding online marketplace can be challenging. That is why we have partnered with Credly to provide you with a digital version of your credentials. Digital badges can be used in email signatures or digital resumes, and on social media sites such as LinkedIn, Facebook, and Twitter. This digital image contains verified metadata that describes your qualifications and the process required to earn them. You will receive an email notification from Acclaim (admin@credly.com) with instructions for claiming your badge and setting up your account. In the meantime, please visit our website for FAQs regarding the digital badge.

Speaker Bureau: AAMFT is launching a brand new program, where MFT speakers and educators can highlight their areas of interest and unique presentation abilities and modalities. Speakers for SFTC and future AAMFT events will be selected. The AAMFT Speakers' Bureau will also be available for AAMFT engagement programs and other family therapy and mental health associations to access our dynamic MFT speakers. Interested in developing your profile? Please contact learning@aamft.org for more information.

Approved Supervisor Directory: Please take a moment forget to expand your personal listing on the Approved Supervisor directory to include practice description, biographical information, and office location. You can even your photograph. By adding your personal listing you are increasing your exposure to potential marriage and family therapy trainees and supervisor candidates. Your listing once updated will be listed on the directory within two business days. Here's how to expand your listing:

1. Go to www.aamft.org. Log in with your Member ID and Password.
2. Once you are logged in, look in the upper right side of the page, hover over the "Membership" tab and click on "My Account."
3. Choose "Preferences" from the tabs at the top. You'll then be able to access both your Therapist Locator Profile as well as your Approved Supervisor Profile. On each, you need to click the small box that is labeled "Include me in Therapist Locator/Approved Supervisor Directory." You'll also need to input your contact and professional information in each of the required fields.

The award of the Approved Supervisor designation constitutes a change in your membership status. Starting with your next annual renewal, when you renew your membership, there will be an additional \$100 annual fee to maintain the designation.

The Approved Supervisor designation is granted for five-years (provided that you also pay the annual renewal fee). At the end of your five-year term, you must apply for renewal of the designation. To renew you must complete a six hour Approved Supervisor refresher course, no sooner than within two years of your renewal date. The course is offered at AAMFT Institutes for Advanced Clinical Education, at AAMFT's Annual Conference, and now online as well. For information about our online refresher course, please visit:

www.aamft.org/imis15/AAMFT/Content/Supervision/supervisor_training.aspx

Once again congratulations on achieving the AAMFT Approved Supervisor designation. If you have any questions, please contact us via email at central@aamft.org or via telephone at (703) 838-9808.

Sincerely,



Dorothy Bose M.Ed. MFT
AS Designation Manager

Phone: 703-253-0535

Main: 703-838-9808 ext 0535

Fax: 703-838-9805

112 S Alfred St. Ste 300
Alexandria, VA 22314

www.aamft.org



The Handbook of Systemic Family Therapy is now available to order. A first of its kind, this 4-volume set redefines the profession and practice of systemic therapy, organizing material by presenting issue rather than intervention. Particular attention is paid to cultural and family diversity throughout the work. [Click here](#) to order this authoritative handbook and groundbreaking reference work on both the profession and the practice of systemic family therapy.