

Practicum/ Internship Weekly Time Sheet
Valparaiso University
Clinical Mental Health Counseling

Name: _____ Week of: _____

Activity: _____ Mon Tue Wed Thurs Fr Sat Sun Totals

I. DIRECT SERVICE:

A. Counseling

Individual

Group

Family

Couples

B. Intakes

C. Assessment Conducted

D. Shadowing

E. Other (specify)

II. SUPERVISION:

Individual

Class

Triadic

III. CLINICAL DOCUMENTATION (Indirect)

Case Notes

Client Interven.

Preparation

Assess. Scoring and Interp.

Correspondence

Report Writing

Other (specify)

IV. PROFESSIONAL DEVELOPMENT (Indirect)

Conferences/Seminars

Reading

Staff Meetings

Tape Review

Case Conferences

V. OTHER (specify):

(Record clock hours to the nearest half hour)

Activity

Total Hours for the CURRENT WEEK

Total Hours: SEMESTER

Direct Service Counseling

Sup.Provided/Assm/Teach/Other

Direct

Indirect

Supervision

Total=

Student _____

Site Supervisor _____

University Supervisor _____