



CLINICAL MENTAL HEALTH COUNSELING PROGRAM LOGSHEET

Please check: Practicum Internship

Student Name: _____

Site where these hours were worked: _____

Supervisor Name and Credentials: _____ Page # 1

Date M/D/Y	Direct		Direct—Group		Supervision		Indirect		Other Activity (specify what)	Daily Total	
	Hrs	/ Qtr Hrs	Hrs	/ Qtr Hrs	Hrs	/ Qtr Hrs	Hrs/Qtr Hrs	Hrs		/ Qtr Hrs	
1/6/15	1	.50	1	.50			2	.00	Staff meeting	5	.00
1/9/15	2	.00					1	.50	Documentation	3	.50
1/13/15	4	.00			1	.00	4	.50	In-service training	9	.50
1/15/15	3	.50	1	.50			3	.25	Treatment Planning	8	.25
1/19/15	3	.00			1	.00	1	.50	Documentation	5	.50
2/13/15	3	.50						.50	Documentation	4	.00
2/14/15	3	.00					1	.50	Documentation	4	.50
2/17/15	2	.00								2	.00
2/18/15					1	.00	3	.75	Treatment Planning	4	.75
2/22/15	3	.00					3	.00	Treatment Team Meeting	6	.00
3/1/15			1	.50						1	.50
3/3/15	2	.00					1	.00	Documentation	3	.00
3/4/15	2	.00								2	.00
3/5/15					1	.00				1	.00
3/7/15							4	.50	In-service training	4	.50
3/8/15	2	.50					1	.00	Documentation	3	.50
3/9/15							4	.00	Treatment Team Meeting	4	.00
3/10/15			1	.50						1	.50
3/11/15	1	.50					3	.00	Treatment Planning	4	.50
3/12/15					1	.00				1	.00
3/13/15	1	.00					4	.50	In-service training	5	.50
3/14/15	1	.50								1	.50
Subtotals of columns	36	.00	6	.00	5	.00	39	.50	Column totals from the left should equal the total to the right.	86	.50

Supervisor's Signature: _____ Date: _____

Previous Totals									Column totals from the left should equal the total to the right.		
CURRENT GRAND TOTAL	36	.00	6	.00	5	.00	39	.50	Column totals from the left should equal the total to the right.	86	.50

Student's Signature: _____ Date: _____



Please check: Practicum Internship

Student Name: _____

Site where these hours were worked: _____

Supervisor Name and Credentials: _____ Page # 2

Date M/D/Y	Direct Hrs / Qtr Hrs		Direct—Group Hrs / Qtr Hrs		Supervision Hrs / Qtr Hrs		Indirect Hrs/Qtr Hrs		Other Activity (specify what)	Daily Total Hrs/Qtr Hrs	
3/15/15	3	.50					1	.00	Staff meeting	4	.50
3/16/15	2	.00					4	.00	Treatment Team Meeting	6	.00
3/17/15	4	.00			1	.00	1	.00	Documentation	6	.00
3/18/15							2	.50	Documentation	2	.50
Subtotals of columns	9	.50	0	.00	1	.00	8	.50	Column totals from the left should equal the total to the right.	19	.00

Supervisor's Signature: _____ Date: _____

Previous Totals	36	.00	6	.00	5	.00	39	.50	Column totals from the left should equal the total to the right.	86	.50
CURRENT GRAND TOTAL	45	.50	6	.00	6	.00	48	.00	Column totals from the left should equal the total to the right.	105	.50

Student's Signature: _____ Date: _____