



**CLINICAL MENTAL HEALTH COUNSELING PROGRAM LOGSHEET**

Please check: Practicum  Internship

Student Name: \_\_\_\_\_

Site where these hours were worked: \_\_\_\_\_

Supervisor Name and Credentials: \_\_\_\_\_ Page # \_\_\_\_\_

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
Subtotals of columns					Column totals from the left should equal the total to the right.	

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Previous Totals					Column totals from the left should equal the total to the right.	
<b>CURRENT GRAND TOTAL</b>					Column totals from the left should equal the total to the right.	

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_