SUPERVISION NOTES

Date:

Supervisor: Counselor:

First name(s) of client(s) discussed:

1. For the names of clients listed, indicate whether you heard/saw a portion of the counseling session:

2. Pre-session goals for the supervision session:

3. Extent to which pre-session goals were met: (Comment)

4. Major topics that emerged during the supervision session (either initiated by supervisor or supervisee):
5. List any supervision interventions (including a rationale for each) having to do with your supervisee’s work with a particular client:

6. List area(s) where your supervisee needs to grow that you attended to in this session:

7. Goals for next supervision session:

8. For each Practicum supervisee, please identify how many progress note you reviewed in the past week.

9. For each Practicum supervisee, please report if case notes were submitted in a timely fashion.
10. Comments for practicum instructor:

11. Comments for supervision instructor:

12. **Risk management review.** Note any concerns based on review of supervisee’s entire caseload. Include (a) 1st name [or case number] of client, (b) nature of the concern, and (c) supervision intervention at this time.

Signature  Faculty Signature/Date