

FORM R1 SUPERVISION SESSION LOGBOOK

COMPLETE ONE PER SUPERVISION SESSION

Submit collated sheets to Board when applying for full registration

INTERN _____

Reg # _____

SUPERVISOR _____

Reg # _____

Hours: _____

Circle One: INDIVIDUAL GROUP

Cumulative Hours: _____

Circle One: FACE-TO-FACE PHONE VIDEO CONFERENCE

Areas of Supervision

Evaluative Comments (Supervisor)

Evaluative Comments (Intern)

Agenda for next meeting and follow-up work to be done by then

Signed Supervisor _____ Date: ____/____/____

Signed Intern _____