

FORM R3

SUPERVISION PROGRESS/COMPLETION REPORT

Submit to Board every six months and when changing placement or supervisor. Please ensure that you and your principal supervisor both sign the report and that every section of the report is completed. Unsigned and incomplete reports will be returned. Where minimum requirements are not met, provide an explanation in comments section.

INTERN _____ Reg # _____

EMAIL ADDRESS _____

PRINCIPAL SUPERVISOR _____ Reg # _____

REPORT Change of Placement 6 month report 18 month report Other
 (Circle as relevant) Change of Supervisor 12 month report Final report

Date of this report: _____ # months of provisional registration: _____

Date of last report: _____ # months since last report (enter "n/a" if first report): _____

PLACEMENT HOURS

- Minimum requirement - 20 hours per week

Placement hours completed during this reporting period:

| Name of Placement Organisation | Average number of hours per week | # of weeks |
|--------------------------------|----------------------------------|------------|
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| | | |
| | | |

INDIVIDUAL SUPERVISION – PRINCIPAL SUPERVISOR(S)

- Minimum requirement - 48 hours over 2 years, 12 hour per six months (assuming 24 weeks work and 2 weeks vacation)
- Please mark 0 hours on P2 if first report

| | | |
|-------------------------------------------------------------------------------------|--|----|
| Hours of INDIVIDUAL supervision with current PRINCIPAL Supervisor since last report | | P1 |
| Hours of INDIVIDUAL supervision with PRINCIPAL Supervisor(s) on previous reports | | P2 |
| Total hours of INDIVIDUAL supervision with PRINCIPAL Supervisor(s) to date (P1+ P2) | | P |

INDIVIDUAL SUPERVISION – SECONDARY SUPERVISOR(S)

- No minimum requirement
- Please mark 0 hours in S2 if first report and mark 0 hours S1 or S2 if no secondary supervision in S1 or S2

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----|--------|
| Hours of INDIVIDUAL supervision with current SECONDARY Supervisor (s) since last report | | S1 | |
| SECONDARY Supervisor hours since last report were completed with: _____ * hours with _____ (name) _____ (Reg #) _____ * hours with _____ (name) _____ (Reg #) | | | |
| Hours of INDIVIDUAL supervision with SECONDARY Supervisor(s) on previous reports | | S2 | |
| Total hours of INDIVIDUAL supervision with SECONDARY Supervisor(s) to date (S1+ S2)** | | S | Max 60 |

* Maximum 20 hours over 2 years for each Secondary Supervisor

** Maximum credit 60 hours over 2 years - Do not enter hours completed in excess of the maximum credit of 60 hours

FORM R3 SUPERVISION PROGRESS/COMPLETION REPORT (continued)

INTERN _____ Reg # _____

SMALL GROUP SUPERVISION

- No minimum requirement
- Please mark 0 hours in G2 if first report and 0 hours in G1 or G2 if no group supervision in G1 or G2

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----|--------|
| Hours of SMALL GROUP supervision since last report | | G1 | |
| SMALL GROUP Supervision hours since last report were completed with: _____ hours with _____ (name) _____ (Reg #) _____ hours with _____ (name) _____ (Reg #) _____ hours with _____ (name) _____ (Reg #) | | | |
| Hours of SMALL GROUP supervision on previous reports | | G2 | |
| Total hours of SMALL GROUP supervision to date (G1+ G2)*** | | G | Max 40 |

*** Maximum credit of 40 hours over 2 years - Do not enter any hours completed in excess of the maximum allowance of 40 hours

TOTAL SUPERVISION: Principal Supervisor + Secondary Supervisor + Small Group

- Minimum requirement- 25 hours per 6 months (assuming 24 weeks placement and 2 weeks vacation)
 - 100 hours over 2 years if 60 hours of workshops
 - 130 hours over 2 years if 30 hours of workshops

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|--------------------------------------------------------------|--|----|--|
| Total hours of supervision since last report (P1+ S1 + G1) | | T1 | |
| Total hours of supervision on previous reports (P2+ S2 + G2) | | T2 | |
| Total hours of supervision to date (T1+ T2) | | T | |

WORKSHOP HOURS

- Minimum requirement – 30 hours over 2 years (no limitations on how the hours are spread over the 2 years)
- Maximum credit – 60 hours over 2 years (no limitations on how the hours are spread over the 2 years)
- Please mark 0 hours in W2 if first report and 0 hours in W1 or W2 if no workshop attendance in W1 or W2

| | | | |
|-----------------------------------------------------------|--|----|--------|
| Weighted hours of WORKSHOP attendance since last report | | W1 | |
| Weighted hours of WORKSHOP attendance on previous reports | | W2 | |
| Weighted hours of WORKSHOP attendance to date (W1+ W2) | | W | Max 60 |

| | |
|--------------------------------------------------------------------|--|
| MY TOTAL SUPERVISION AND WORKSHOP HOURS TO DATE ARE (T + W) | |
|--------------------------------------------------------------------|--|

FORM R3 SUPERVISION PROGRESS/COMPLETION REPORT (continued)

INTERN _____ Reg # _____

PROGRESS TOWARDS GOALS & GOALS ACHIEVED

AREAS REQUIRING SPECIAL ATTENTION OR FURTHER DEVELOPMENT

SUBSTITUTIONS TO SUPERVISION PLAN

COMMENTS BY SUPERVISOR

COMMENTS BY INTERN

Signed Supervisor _____ Date: ____/____/____

Signed Intern _____