UNIVERSITY OF CENTRAL ARKANSAS
COUNSELING PSYCHOLOGY
PRACTICUM LOG

Student Name _____ **COUN 6381 6382** (circle one)

UCA Instructor _____ **Semester _____**

Site Supervisor _____ **Site _____**

Directions: Document the date, type of activity (individual, group, marital, family, assessment, intake, charting, workshops, training, supervision, etc.), client description (ex: substance abuse, depression, juvenile delinquent, etc), and time spent in that activity (round to nearest half hour). Be sure to have both the UCA instructor and the site supervisor initial each page.

Date	Activity	Client Description	Time Spent

This Page: Client Contact Hrs. _____ Supervision Hrs. _____ Other Hrs. _____

Cumulative: Client Contact Hrs. _____ Supervision Hrs. _____ Other Hrs. _____

Instructor Init. _____ Site Supervisor Init. _____

Practictum Log (cont.)			
Date	**Activity**	**Client Description**	**Time Spent**

This Page: Client Contact Hrs. _____ Supervision Hrs. _____ Other Hrs. _____

Cumulative: Client Contact Hrs. _____ Supervision Hrs. _____ Other Hrs. _____

Instructor Init. _____ Site Supervisor Init. _____