

Faculty Supervisor Sign-Off Sheet

The purpose of this sheet is to document that a practicum or internship student has received individual and group supervision from a faculty member. Indicate the date and whether individual or group supervision occurred.

<u>Date/Type of Supervision</u>	<u>Tape Critique?</u>	<u>Supervisor Signature</u>
1. _____	<input type="checkbox"/> Video	_____
2. _____	<input type="checkbox"/> Video	_____
3. _____	<input type="checkbox"/> Video	_____
4. _____	<input type="checkbox"/> Video	_____
5. _____	<input type="checkbox"/> Video	_____
6. _____	<input type="checkbox"/> Video	_____
7. _____	<input type="checkbox"/> Video	_____
8. _____	<input type="checkbox"/> Video	_____
9. _____	<input type="checkbox"/> Video	_____
10. _____	<input type="checkbox"/> Video	_____
11. _____	<input type="checkbox"/> Video	_____
12. _____	<input type="checkbox"/> Video	_____
13. _____	<input type="checkbox"/> Video	_____
14. _____	<input type="checkbox"/> Video	_____
15. _____	<input type="checkbox"/> Video	_____
16. _____	<input type="checkbox"/> Video	_____
17. _____	<input type="checkbox"/> Video	_____
18. _____	<input type="checkbox"/> Video	_____