

PACIFICA GRADUATE INSTITUTE

Weekly Summary of Hours of Experience 2017 - New Streamlined Method

TRACK:
MA-L
MA-W
MA-C
MA-D

Name of Trainee/Student: Last			First				Middle			
upervisor Name License number		Date enrolled in gra					duate degree program			
Name of Work Setting (use a separate log for ea	ich) A	ddres	s of W	/ork S	etting					
Indicate your status when the hours below are	logge	ed: Tra	inee/	Stude	nt		· - · · · · · · · · · · · · · · · · · ·			
YEAR WEEK OF:									Total Hours	
A. Direct Counseling with Individuals, Groups, Couples or Families							Barrier and the second			
A1. Diagnosis and Treatment of Couples, Families, Children*										
B. Non-Clinical Experience**										
B1. Supervision, Individual*									10 m	
B2. Supervision, Group*							eri di			
C. Total Hours Per Week (A + B = C) (Maximum 40 hours / week)										
Signature Signature										

^{* &}lt;u>Line A1 is a sub-category of "A" and Lines B1 and B2 are subcategories of "B."</u> When totaling weekly hours do NOT include the subcategories - use the formula found in box "C."

^{**}Non-Clinical Experience includes: Supervision, psychological testing, writing clinical reports, writing progress or process notes, client-centered advocacy, and workshops, seminars, training sessions or conferences.