

School Name: _____ Intern: _____

Internship Hour Log						
WEEK OF:						
DIRECT Service Activities	Monday	Tuesday	Wednesday	Thursday	Friday	<i>Add your rows and put totals in this column</i>
Individual counseling						
Group counseling						
Classroom guidance						
Other direct service (describe on back) Write descriptions/data/details (no names) on the back. Was it family counseling? Assessment? Crisis response?						
					WEEK TOTAL:	
Diverse populations- <i>Within your time above, how much was spent working with diverse populations (i.e., race, gender, ability, sexual orientation, religion, etc.)? Do not double count this number in your total hours.</i>						
INDIRECT Service Activities	Monday	Tuesday	Wednesday	Thursday	Friday	<i>Add your rows and put totals in this column</i>
Individual supervision-with site supervisor <i>MUST average 1 hour per week</i>						
Group supervision/seminar						
Prep Time-case notes, prep for individual, small group, classroom work						
Professional development meetings						
Other indirect activities <i>support student academic, career, and social-emotional success?(e.g., staff meetings, etc.)</i>						
					WEEK TOTAL:	

TOTAL SEMESTER DIRECT HOURS: _____ TOTAL SEMESTER INDIRECT HOURS: _____

Site Supervisor Signature: _____ Date: _____