

School Name: _____ Practicum Student: _____

Practicum Hour Log						
WEEK OF:						
<u>DIRECT</u> Service Activities <ul style="list-style-type: none"> Note your time on this table, using .25 increments. (.25= 15 minutes) Write descriptions/data/details (no names) on the back. Was it family counseling? Assessment? Crisis response? 	Monday	Tuesday	Wednesday	Thursday	Friday	<i>Add your rows and put totals in this column</i>
Individual counseling- <i>For how long did you meet with individual students?</i>						
Group counseling- <i>For how long did you facilitate/ co-facilitate small groups?</i>						
Kids Club- <i>For how long were you with students in Kids Club?</i>						
Classroom guidance- <i>For how long did you lead/ co-lead a classroom lesson?</i>						
					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>						
<u>INDIRECT</u> Service Activities <ul style="list-style-type: none"> Note your time on this table, using .25 increments. (.25= 15 minutes) Write descriptions/data/details (no names) on the back. What did you do? 	Monday	Tuesday	Wednesday	Thursday	Friday	<i>Add your rows and put totals in this column</i>
Individual supervision- <i>For how long were you observed, discussed feedback, did case consultation, reviewed your evaluation, etc.? MUST average 1 hour per week</i>						
Group supervision- <i>For how long did you do the above supervision activities, but with a small group of student peers plus supervisor?</i>						
Seminar/Class						
Prep Time- <i>For how long did you spend preparing lessons, case notes, providing peer feedback on Canvas, completing hour logs, etc.?</i>						
Professional meetings- <i>For how long did you attend professional development workshops, conferences, etc.?</i>						
Other indirect activities- <i>For how long did you do other indirect activities to 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:** _____