BA (Hons) Counselling and Psychotherapy

**Diary of Supervision**

| **START OF SUPERVISION CONTRACT** |
| --- |
| **Date** | **Supervisor** | **Supervisee** |
|  |  |  |

| **Date** | **Length (mins)** | **Supervisor’s signature** | **Client hours** **(running total)** | **Supervision hours** **(running total)** |
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| **Signed by EHU Supervisor (every 15 hours client work)** |  | **Date** |  |

**Please submit completed form to Placement Co-Ordinator Applied Health and Social Care or alternatively email it to** **AHSCplacements@edgehill.ac.uk**