

## **Supervision Agenda and Note Sheet**

Intern Name: Date:

|  | earning Contract and Tasks U            | nder Competencies)         |  |
|--|---|----------------------------|--|
| Check-off which  | Competencies                            |                            |  |
| competencies were  | □ Professionalism                       | ☐ Informed Research &      |  |
| addressed.   | ☐ Ethics                                | Evidenced Based            |  |
|  | ☐ Critical Thinking &                   | Practice                   |  |
|  | Judgment                                | □ Person in                |  |
|  | ☐ Diversity & Cultural                  | Environment                |  |
|  | Competency                              | □ Policy                   |  |
|  | ☐ Advocacy & Social                     | ☐ Responding to            |  |
|  | Justice                                 | Contexts                   |  |
|  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ☐ Practice Skills          |  |
|  | Content                                 |                            |  |
| Individuals: review cases/sessions, goals, next steps, concerns. Bring one case to |   |                            |  |
| discuss in detail and review file.   |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
| Groups: review cases/sessi   | ons, goals, next steps, concer          | ns, Bring some group notes |  |
| to review.   |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
| Concerns, struggles, challenges:   |   |                            |  |
| , 30 , 3   |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |
| Review: hours, due dates, d  | locumentation, upcoming pro             | jects, process recordings. |  |
| follow up  |   |                            |  |
|  |   |                            |  |
|  |   |                            |  |

| A Success:    |           |                     |
|---------------|-----------|---------------------|
|               |           |                     |
|               |           |                     |
| Follow up on: | Due Date: | Who is responsible: |
|               |           |                     |
|               |           |                     |
|               |           |                     |
|               |           |                     |
|               |           |                     |

Based on a form created by Field Instructor Kelly Kochert, LCSW, UT School of Social Work