

**PART 1: Completed by Student Trainee**

<b>General Information</b>	Student Trainee LAST Name	Student FIRST Name (Given)	ID Number	Date YYYY-MM-DD
	Student Email	START Date YYYY-MM-DD	END Date YYYY-MM-DD	
	Director Name (Training / Program)	Clinic Name (Dept/Service/Unit)	Institution / Organization Name	
	Supervisor Name	Supervisor Degree, Qualifications	OPQ Registered Member <a href="http://www.ordrepsy.qc.ca/en/forms/tab_membres.sn">www.ordrepsy.qc.ca/en/forms/tab_membres.sn</a>	
	Supervisor Email	Supervisor Office Phone	Supervisor Fax	

<b>Supervision Received</b>		Individual (regular schedule, one-on-one, face-to-face)	Group (regular schedule, face-to-face, multiple trainees)
	Licensed Psychologist		
	Licensed Allied Mental Health Professional (social worker, marriage/family therapist, psychiatrist)		
	Other Supervision (advanced grad student under supervision of licensed psychologist)		
	Supervision Format (Choose ALL that apply)		
	Audio Tape	Video Tape / Digital Recording	Live / Direct Observation by Supervisor

<b>Training Site</b>	Training Description	(Describe nature of training. Include target population, clinical activities, and learning experiences.)		
	Training Setting (Choose ALL that apply)			
	APC Department Clinic	Community Mental Health Center	University Counseling Centre	Residential / Group Home
	Inpatient Psychiatric Hospital	Medical Clinic / Hospital	Outpatient Psychiatric Clinic / Hospital	Partial Hospitalization / Intensive Outpatient
	Private Practice	School	Forensic / Justice Setting	Child Guidance Clinic
	VA Medical Centre	Other (specify):		
	Primary Theoretical Orientation (Choose up to 3)			
	Behavioural	Biological	Cognitive Behavioural	Eclectic
	Interpersonal	Integrative	Humanistic / Existential	Psychodynamic / Psychoanalytic
	Systems	Other (specify):		

<b>Indirect Clinical Hours</b>	Intervention	Chart review, DVD review, Session planning, Readings	<b>Total Hours</b>
		Writing: Progress notes, Intake, Discharge / Termination	
		Scoring, interpretation standardized measures	
		Observation of another's therapy session	
		Other (phone calls, case management)	
	Assessment	Chart review, DVD review, Session planning, Readings	
		Scoring, interpretation assessment testing	
		Writing: Assessment reports	
		Observation of another's assessment testing	
		Other (phone calls, collateral contacts)	

		Total Hours (face-to-face)	# Different Individuals (groups, families, couples)	
<b>Intervention Experience</b>	Individual Therapy	Older Adults (65+)		
		Adults (18-64)		
		Adolescents (13-17)		
		School-Age (6-12)		
		Pre-School Age (3-5)		
		Infants/Toddlers (0-2)		
	Career Counseling	Adults		
		Adolescents (13-17)		
	Group Counseling	Adults		
		Adolescents (13-17)		
		Children (12 and under)		
	Family Therapy			
	Couples Therapy			
	School Counseling Interventions	Consultation		
		Direct Intervention		
	Other Psychological Interventions	Sport Psychology / Performance Enhancement		
		Medical / Health Related Interventions		
		Intake Interview / Structured Interview		
		Substance Abuse Interventions		
		Consultation		
Other Interventions (milieu therapy, treatment planning with patient present)				
Other Psychological Experience	Supervision of other students			
	Program Development / Outreach Programming			
	Outcome Assessment			
	Systems Intervention / Organizational Consultation / Performance Improvement			

This information may not be known for all clients. Indicate only when known.		Intervention (# clients)	Assessment (# clients)
<b>Diversity Experience</b>	Race / Ethnicity	African-Canadian / Black / African	
		Asian-Canadian / Asian / Pacific Islander	
		Latino(a) / Hispanic	
		Inuit / Indian / Native / Aboriginal Canadian	
		European Origin / White	
		Biracial / Multiracial	
		Other	
Sexual Orientation	Heterosexual		
	Gay		
	Lesbian		
	Bisexual		
	Other		
Disabilities	Physical / Orthopedic Disability		
	Blind / Visually Impaired		
	Deaf / Hard of Hearing		
	Learning / Cognitive Disability		
	Developmental Disability (mental retardation / autism)		
	Serious Mental Illness (psychosis, major mood disorder)		
	Other		
Gender	Male		
	Female		
	Transgender		
	Other		
Language	French (Francophone)		
	English (Anglophone)		
	Other		

Psychological Assessment			Total Hours (face-to-face)	# Different Individuals
	Psychodiagnostic Test Administration	Symptom assessment, projectives, personality, objective measures, achievement, intelligence, career assessment, providing feedback		
	Neuropsychological Assessment	Multiple cognitive, sensory, and motor functioning (include intellectual assessment only when in context of neuropsych)		
	Other (specify):			

Reports	Integrated Psychological Reports (synthesized comprehensive report including history, interview, and two standardized tests)	
	Adults	Children / Adolescents

Assessment Instruments	Adult		Child & Adolescent	
		#		#
	Symptom Inventories		Parent / Youth-Report Measures	
	Beck Depression Inventory		Behavior Assessment System BASC	
	Hamilton Depression Scale		Achenbach / CBCL	
	Beck Anxiety Inventory		Other:	
	Adult Manifest Anxiety Scale		Symptom Inventories	
	Other:		Barkley-Murphy Checklist ADHD	
	Diagnostic Interview Protocols		Conner's Rating Scales	
	SADS		Self-report Measure Symptoms / Disorders	
	SCID		Other:	
	DIS		Diagnostic Interview Protocols	
	Other:		DISC	
	General Cognitive Assessment		Kiddie-SADS	
	Stanford-Binet 5		Other:	
	TONI-3		General Cognitive Assessment	
	WAIS III and WAIS IV		Bayley Scales III	
	Other:		Differential Abilities Scale II	
	Visual-Motor Assessment		Mullen Scales of Early Learning	
	Bender Gestalt		Stanford-Binet 5	
	Other:		WPPSI III	
	Neuropsychological Assessment		WISC IV	
	Boston Diagnostic Aphasia Exam		Other:	
	Brief Rating Scale of Exec Fxn (BRIEF)		Visual-Motor Assessment	
	Dementia Rating Scale II		Bender Gestalt	
	California Verbal Learning Test		Berry Develop Test VMI	
	Continuous Performance Test		Other:	
	Delis Kaplan Executive Function System		Neuropsychological Assessment	
	Finger Tapping		Brief Rating Scale Exec Fxn (BRIEF)	
	Grooved Pegboard		Children's Memory Scale	
	Rey-Osterrieth Complex Figure		Continuous Performance Test	
	Trailmaking Test A & B		Delis Kaplan Executive Function System	
	Wechsler Memory Scale III		NEPSY II	
	Wisconsin Card Sorting Test		Rey-Osterrieth Complex Figure	
	Other:		Other:	

Assessment Instruments cont'd.	Adult		Child & Adolescent	
	Academic Functioning	#	Academic Functioning	#
	Strong Interest Inventory		Wechsler Individual Achievement Test (WIAT)	
	Wechsler Individual Achievement Test (WIAT)		Wide Range Assessment Memory & Learning	
	Wide Range Assessment Memory & Learning		Woodcock Johnson III	
	Woodcock Johnson III		WRAT-4	
	WRAT-4		Other:	
	Other:		Behavioural and Personality Inventories	
	Behavioural and Personality Inventories		Millon Adolescent Personality Inventory	
	Millon Clinical Multi-Axial III (MCMI)		MMPI Adolescent	
	Minnesota Multiphasic Personality Inventory		Other:	
	Myers-Briggs Type Indicator		Projective Assessment	
	Personality Assessment Inventory		Human Figure Drawing	
	Other:		Kinetic Family Drawing	
	Malingering Measures		Roberts Apperception Test Children	
	Structured Interview of Reported Symptoms		Rorschach	
	Miller Forensic Assessment of Symptoms Test		Other:	
	Rey 15-Item Test		Other Measures:	
	Test of Memory Malingering (TOMM)			
	Other:			
	Forensic and Risk Assessment			
	Psychopathy Checklist-Revised; Static 99			
	Violence Risk Assessment Guide			
	History-Clinical-Risk 20			
Validity Indicator Profile				
Other:				
Projective Assessment				
Human Figure Drawing				
Kinetic Family Drawing				
Sentence Completion				
Thematic Apperception Test				
Rorschach				
Other:				
Other Measures:				

Additional Training	Total Hours	
	Case Conferences	
	Grand Rounds	
	Clinical Seminars (didactics, lectures, instruction, demonstration)	
	Team / Unit / Ward Meetings (non-supervision)	
	Research	
Other:		

**Print this last page as often as needed. For observation cases, list patient demographics and indicate 0 for direct hours. For direct supervision of others, list patient demographics and indicate supervision under treatment modality.**

Direct Contact Hours - Demographics	Patient / Client Demographics	Presenting Problem	Intervention / Assessment	Treatment Modality	Face-to-Face Direct Hours
	Male, 9 y.o.	Learning Disability	Assessment	IQ & Achievement Testing	5
	Female, 47 y.o.	Chronic Pain	Individual Therapy	CBT	12
	Group (Male, 36; Female 28; Female, 40, Female 32; Male 47; Female 37)	Major Depressive Disorder	Group Therapy	Supportive Therapy	8

Total Direct Contact Hours:

Clinical Supervisor		
I certify that all of the clinical hours information documented above was completed under my supervision.		
Clinical Supervisor Name PRINT	Clinical Supervisor Signature	Date
Student Signature		
I certify that all of the clinical hours information documented above is true to the best of my knowledge and belief.		
Student Trainee Name PRINT	Student Trainee Signature	Date

**Send HARDCOPY ONLY:**  
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