
Non-Primary Supervisor to Primary Supervisor Candidate Evaluation

A minimum of 30 hours of supervision must be obtained by each Candidate:

- **Session Type Requirements:** A minimum of 5 hours must be face to face (individual or group, in person or webcam)
- **Session Format Requirements:** A minimum of 10 hours must be individual

Candidate Name: _____ Date: _____

Supervisor Name: _____

Session Format	Session Type		
	Telephone	In Person	Webcam
Individual			
Group			
Total			
Total Hours to Date			

A. Candidate's progress to date:

B. Progress on Supervisor goals:

C. Proposed future intervention strategies:

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D. Recommendations to Candidate regarding areas of deficiency or concern:

1. Additional training or education:

2. Additional supervision hours:

3. Personal Therapy *(If this recommendation is made, it is optimal for the Supervisor to contact the Candidate in order to present the issues of concern):*

E. Other

Non-Primary Supervisor must submit this form directly to the Primary Supervisor.

Supervisor's Printed Name

Supervisor's Signature Date

Supervisor	If submitted electronically, by typing my initials and providing the current date, I attest to the above information.	Initials:	Date:
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