

Newfoundland and Labrador Psychology Board

P.O. Box 8275, Station A, St. John's, NL A1B 3N4

website: <http://nbep.info>

Yearly Supervision Report

Revised June 26, 1997

Year 1 Supervision report

Year 2 Supervision report

Final Supervision report

Date Year Begins: _____ **Date Year Ends:** _____

Supervisee: _____ **Registration No.** _____

Supervisor: _____ **Registration No.** _____

1.0 Record of Supervision

DATE	SPECIFIC NATURE AND CONTENT OF SUPERVISION SESSIONS (SEE GUIDE)	HOURS	INITIALS

DATE	SPECIFIC NATURE AND CONTENT OF SUPERVISION SESSIONS (SEE GUIDE)	HOURS	INITIALS

DATE	SPECIFIC NATURE AND CONTENT OF SUPERVISION SESSIONS (SEE GUIDE)	HOURS	INITIALS

2.0 Supervisee's Progress and Development

Supervisee's Strengths:

Supervisee's Weaknesses:

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Has the Supervisee performed through the year at a level appropriate to training and position held? Y N .

If "NO", does the Supervisee now require immediate improvement in any specific area(s) of knowledge or practice? Y N . If "YES", specify area(s):

3.0 Supervision

Has supervision taken place as proposed in the Conduct of Supervision section of the Supervision Plan? Y N . If "NO", please describe and account for any deviations from the Plan:

Does the Supervisor have any reservations about supervision? Y N .
If "YES", state your reservations:

4.0 Supervisee's Professional Experience

Has the Supervisee's experience been as defined in the Proposed Experience section of the Supervision Plan? Y N . If not, please describe and account for any deviations from the Proposed Experience:

5.0 Supervisee's Comments *(to be completed by Supervisee only)*

6.0 Certification

We certify that this report is complete and accurate

Supervisor

Date

Supervisee

Date