MID-OHIO PSYCHOLOGICAL SERVICES, INC.
PREDOCTORAL PSYCHOLOGY INTERNSHIP
SUPERVISION LOG

Supervisor:_____ Intern: _____

Date/Time: _____

Client Name	Activity*	Notes

Activity Codes: Dx= Diagnosis Review, CR= Case Review, CS= Case Study, ISP=ISP Review, Prof Dev=Professional Development

*** Ohio Law dictates that you retain these records for 5 years.***