
CALIFORNIA STATE UNIVERSITY, FULLERTON
DEPARTMENT OF COUNSELING

Course: 584____ 590____ 591____ Semester: Spring____ Fall____ Sum____ Year:_____

CWID # _____

Student's Name _____

Community Agency Site _____

Site Supervisor _____

University Practicum Instructor _____

I. Direct Client Contact (DCC) Hours-

MINIMUM 280 hrs. required for graduation

1. Individual Adult Hours: _____

2. Individual Child Hours: _____

3. Conjoint Couple Hours: _____

4. Conjoint Family Hours: _____

5. Group Hours: _____

Types of Groups _____

TOTAL SEMESTER HOURS IN CATEGORY I: _____

Client Demographics:

Ethnic Groups Served:

Age Groups Served: (0-5) # _____ (6-10) # _____ (11-17) # _____ (18-64) # _____ (65+) # _____

Gender of Clients: Adult Women # _____ Adult Men # _____ Girls # _____ Boys # _____

Non-DCC Hours - Categories II & III Combined - MINIMUM 420 hrs. required for graduation

II. Non-DCC - Supervision Hours:

1. Individual Supervision Hours: _____

2. Group Supervision Hours: _____

TOTAL SEMESTER HOURS IN CATEGORY II: _____

Non-DCC – Other Hours:

1. Writing Case Notes & Reports/Recordkeeping: _____
2. Staff Meetings/Interdisciplinary Team Meetings: _____
3. Intake/Case Conference Meetings: _____
4. Community Outreach Activities: _____
5. Staff Development/Staff Training: _____
6. Reading & Multimedia Use for Professional Development: _____
7. Professional Conferences/Continuing Education Seminars: _____
8. Consuming and/or Conducting Research: _____
9. Agency Service: _____
10. Other (please specify on reverse): _____

TOTAL SEMESTER HOURS IN CATEGORY III: _____

III. TOTAL NUMBER OF PRACTICUM HOURS:

Category	COUN 530*	COUN 584	COUN 590	COUN 591	Cumulative TOTALS (Sum of all semesters)	Minimum Requirements for Graduation
I. DCC						280 hrs.
II. Non-DCC Supervision						420 hrs. Combined (II & III)
III. Non-DCC Other						
Course Total						700 hrs. 280 DCC + 420 Non-DCC

*Maximum 100 hrs. for COUN 530: 40 hrs. DCC + 60 hrs. Non-DCC (Categories II & III)

NOTE: Please retain a copy of this form in order to compute your cumulative totals for future practicum logs.

DATE: _____ Student's Signature: _____

Supervisor's Signature: _____ Credential/License#: _____