

**Weekly School Counseling Log
Virginia Commonwealth University**

Name: _____ Site Supervisor: _____

Site: _____ University Supervisor: _____

Activity	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Individual Counseling						
Group Counseling						
Classroom Guidance						
Standardized Testing						
Consultation						
Referrals						
Educational Planning						
Career Development						
Program Evaluation						
Administration						
Professional Development						
Other:						
On-Site Supervision						
Total:						

Log time to the closest quarter (i.e. .25, .5, .75)

On-Site Supervisor: _____ Date: _____

NOTE: The weekly logs are designed to emphasize Standards for School Counseling Programs in Virginia Public Schools and to emphasize clinical contact hours required by the Department of Counselor Education. When you prepare your logs to be submitted for the semester, transfer weekly totals from the weekly logs to the semester log. Attach the weekly logs behind the semester log and submit both the semester log and weekly logs as a packet.