**Practicum Laboratory**

EPS 692 – Masters Practicum in Counseling

Documentation of Observation

Counselor-in-training Name:

**Course Requirement: 5 hours**

**Hour 1:** Date observation was done:

Counselor-in-training who was observed:

**Hour 2:** Date observation was done:

Counselor-in-training who was observed:

**Hour 3:** Date observation was done:

Counselor-in-training who was observed:

**Hour 4:** Date observation was done:

Counselor-in-training who was observed:

**Hour 5:** Date observation was done:

Counselor-in-training who was observed: