

SUPERVISION LOG FOR THE LICENSED ASSISTANT IN SPEECH-LANGUAGE PATHOLOGY
[NOT TO BE USED DURING THE CLINICAL DEFICIENCY PLAN (CDP)]

Assistant:	License #:	Direct Activity Codes: 1. Conduct speech, language, hearing screening 2. Implement treatment program or IEP 3. Provide carry-over activities 4. Administer routine tests 5. Other
Supervisor:	License #:	Indirect Activity Codes: 1. Collect data 2. Maintain clinical records 3. Prepare clinical materials 4. Participate in research or staff development 5. Review lesson plans 6. Other
As the supervisor of the assistant that is listed above, I have provided direct/indirect supervision of my assistant working with <u>only my</u> caseload as mandated in Title 22 TAC §111.154.		

Date of Session	Length of Session (Minutes)	Activity Code <small>(See Tables Above)</small>	Supervision D or I*	On-site or via Telepractice (O or T)	Comments on Assistant's Performance Session <small>(Must provide comments on the licensed assistant's performance.)</small>	SLP's & Asst's Signatures

Total Number of Minutes of Direct Supervision: _____ Total Number of Minutes of Indirect Supervision: _____

* Indicates Direct and/or Indirect Supervision