

COUN 239 Folder Completion Checklist (Inventory)

**-- SELF-CHECK PRIOR TO SUBMISSION --
COMPLETE SEPARATE FORM FOR EACH PLACEMENT**

(To be completed by **YOU** prior to submitting your COUN 239 folder)

Trainee: _____	Date: _____
Field Site: _____	Semester: _____

How many sites/settings are providing your hours AND supervision? 1 2 3

Field Placement Data File	In Folder?	Notes
LEFT SIDE OF FOLDER		
1. Field Placement Information (contact info)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Folder Completion Checklist (inventory)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Site - Supervisor - Terms of Experience Form	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Supervised Fieldwork Clinical Agreement <input type="checkbox"/> 5 Initials <input type="checkbox"/> 4 Signatures <input type="checkbox"/> B/E dates?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
5. Supervisor License	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current
6. Supervisor Responsibility Statement (Copy)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Field Supervisor On-Line Tutorial Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Not Needed
RIGHT SIDE OF FOLDER		
8. COUN 239 Attendance/Activity Log	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current
9. CSUF Experience Log (Paper/Excel Original)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current
10. BBS Experience Log (Copy)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Current
11. Case Write-up (1 each grading period)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12. Student Malpractice Insurance (Copy)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Expires:
13. Supervisor Correspondence/Email	<input type="checkbox"/> Yes <input type="checkbox"/> No	(if any)

Who is your CSUF Supervisor? _____

Who is your site Supervisor? _____