SLP-A Clinical Fieldwork Log

University of Vermont

<u>Child Treatment Hours: younger than age 16</u>

SLP-A Name: ______________________ Semester: ______________
(e.g., Fall 2006)

Site Name and Address: ______________________________________
(e.g., Main Street School, Montpelier, VT)

Instructions:

1. Please use ink and record the number of hours (in decimals) in the appropriate speech and language columns.
2. Check (X) appropriate column for group sessions or culturally diverse clients (Cult. Div.).
3. Check (X) if the session was directly supervised by certified SLP.
4. Add totals from all sheets for the semester and transfer sums to Fieldwork Summary Sheet.

Date	Client Age	Group (X)	Cult. Div.	Artic.	Fluency	Voice	Lang.	Directly Super (X)	Supervisor Signature	ASHA Number
				Artic	Fluency	Voice	Total Lang.			
Total Hours in Each Category:										
Total Adult Speech:										

Minutes observed: Decimal Equivalent			
05: .08	20: .33	35: .58	50: .83
10: .17	25: .42	40: .67	55: .92
15: .25	30: .50	45: .75	60: 1.0

Keep original form. Make a copy and submit to: SLP-A Program Coordinator