Mentor Form (Minimum of 6 hours)

Pre-Practicum Student __________________________ Semi- er ________________

Name of Practicum Mentor __________________________

Pre-Practicum Student should fill out the Date and Time when Module was completed.
Practicum Student, after each Module, should sign and add comments when necessary.
(Must complete the first four modules, in any order, to go on to Module 5 and 6)

Module 1: TheraNest Appointments and Recording in Vault
Practicum student shall go over how to Schedule, Re-Schedule, Reserve Room in TheraNest and how to schedule recordings in Vault.

Date: __________ Time Spent: __________ Mentor: __________

Module 2: Intake and First Session
Practicum student shall go over all paperwork included in first session, and discuss the intake process from greeting client to going over paperwork with client, to ending the session. Initial Assessment in TheraNest.

Date: __________ Time Spent: __________ Mentor: __________

Module 3: SOAP Notes and Treatment Plans
Practicum Student shall go over the correct way to do SOAP notes, when and how to do a proper Treatment Plan, as well as going over a diagnostic impression. All sections of Notes in TheraNest.

Date: __________ Time Spent: __________ Mentor: __________

Module 4: Other Forms and Archiving (Termination), Time2Track
Practicum student shall go over all the other forms that are not in other Modules, and go over how, when and why to Archive and the process of closing notes and deleting future appointments before Archiving. Short introduction into Time2Track.

Date: __________ Time Spent: __________ Mentor: __________

Module 5 and 6: Live Observation
Pre-Practicum student shall watch a live session of mentor and after session speak with the Practicum about the session.

Date: __________ Time Spent: __________ Mentor: __________

Date: __________ Time Spent: __________ Mentor: __________