Clinical Supervision Agreement

One supervisor, one supervisee: how you will work, what is expected, and how it ends

If your board has its own required form, complete that too. This outline covers the rest.

Supervisor and supervisee

Supervisor: name, license type

License no. and expires

Supervisee: name, license or registration

Registration no. and expires

Board and state

Start date

Board form signed on

1. Setting, schedule and format

Practice or agency (employer)

Your role (primary, other, site)

Employer oversight agreement

Day and time

Length

Minimum required by the board

Cancel and reschedule

- [ ] In person
- [ ] Video (live, two way)
- [ ] Individual or triadic
- [ ] Group

2. Methods and preparation

- [ ] Case presentation
- [ ] Progress note review
- [ ] Recordings (client consent)
- [ ] Live observation
- [ ] Co-therapy
- [ ] Role play or rehearsal

Supervisee brings to each session

Video privacy (both locations)

3. Goals and evaluation

Learning goals for this period

Formal evaluation: when, and form used

Feedback on supervision itself

4. Risk, emergencies and backup

Reach the supervisor: how, and when

Backup supervisor and contact

- [ ] Suicide or violence risk: same day
- [ ] Abuse or neglect report: tell me same day
- [ ] Subpoena or record request: tell me first
- [ ] Complaint, incident or error: within 24 hours

5. Clients, confidentiality and records

- [ ] Clients told I am supervised, and by whom
- [ ] Supervisor named in the consent form
- [ ] Supervision notes kept apart from client files
- [ ] Billing shows supervision, if required

Supervision records: where kept, how long, who sees them

Limits of supervisee confidentiality

6. Concerns, fees and ending

If we disagree or there are concerns: steps and appeal

Fee, if any, and who pays

Notice to end, and what happens to hours and records

Next review of this agreement

Supervisor signature

Date

Supervisee signature

Date

Review this agreement at every formal evaluation and whenever the setting, license or supervisor changes.

An outline to adapt, not legal advice. Your licensing board's rules and required forms come first.

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Clinical Supervision Agreement

One supervisor, one supervisee: how you will work, what is expected, and how it ends

FILLED EXAMPLE · fictional practice, people, numbers and dates

Supervisor and supervisee

Supervisor: name, license type: M. Castillo, LMFT (fictional)

License no. and expires: On file, exp. 08/31/2028

Supervisee: name, license or registration: J. Park, Associate MFT (AMFT)

Registration no. and expires: On file, renews 05/31/2027

Board and state: California BBS

Start date: 02/01/2027

Board form signed on: 03/10/2027

1. Setting, schedule and format

Practice or agency (employer): Seabright Family Therapy, Inc.

Your role (primary, other, site): Primary supervisor

Employer oversight agreement: Not needed (same employer)

Day and time: Tuesdays 9:00 am

Length: 60 min

Minimum required by the board: 1 hr/week; 2 if over 10 client hrs

Cancel and reschedule: Same week makeup

- [x] In person
- [x] Video (live, two way)
- [x] Individual or triadic
- [ ] Group

2. Methods and preparation

- [x] Case presentation
- [x] Progress note review
- [x] Recordings (client consent)
- [ ] Live observation
- [ ] Co-therapy
- [x] Role play or rehearsal

Supervisee brings to each session: Agenda, 2 cases, 1 recording clip, risk updates

Video privacy (both locations): Assessed 02/08/2027: OK, private rooms

3. Goals and evaluation

Learning goals for this period: Couples assessment; risk assessment with teens; DAP notes signed within 48 hours

Formal evaluation: when, and form used: Written, every 6 months and at end

Feedback on supervision itself: Short check in, monthly

4. Risk, emergencies and backup

Reach the supervisor: how, and when: Cell, 8 am to 7 pm; after hours, backup

Backup supervisor and contact: R. Ellery, LCSW, on call, (831) 555-0148

- [x] Suicide or violence risk: same day
- [x] Abuse or neglect report: tell me same day
- [x] Subpoena or record request: tell me first
- [x] Complaint, incident or error: within 24 hours

5. Clients, confidentiality and records

- [x] Clients told I am supervised, and by whom
- [x] Supervisor named in the consent form
- [x] Supervision notes kept apart from client files
- [ ] Billing shows supervision, if required

Supervision records: where kept, how long, who sees them: Locked EHR folder, 7 years, the two of us

Limits of supervisee confidentiality: Risk to clients; ethics or legal duties

6. Concerns, fees and ending

If we disagree or there are concerns: steps and appeal: Talk first; then clinical director; written note of outcome

Fee, if any, and who pays: None: part of employment

Notice to end, and what happens to hours and records: 1 week written notice; hours signed to last day

Next review of this agreement: 08/01/2027 (6 month review)

Supervisor signature: M. Castillo

Date: 03/10/2027

Supervisee signature: J. Park

Date: 03/10/2027

Review this agreement at every formal evaluation and whenever the setting, license or supervisor changes.

An outline to adapt, not legal advice. Your licensing board's rules and required forms come first.

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Supervision Session Log

Ten things to settle in the first session, plus a log of every supervision session

In the first supervision session

- [ ] 1. Read your board's rules and any required form together, line by line.
- [ ] 2. Verify both licenses or registrations online, and save the printout.
- [ ] 3. Agree the schedule, format and the minimum hours the board requires.
- [ ] 4. Write down how to reach the supervisor, and a backup, in a crisis.
- [ ] 5. Agree what must be reported the same day: risk, abuse, complaints.
- [ ] 6. Update the client consent form: supervised, by whom, and what is shared.
- [ ] 7. Decide how recordings are made, stored, reviewed and deleted.
- [ ] 8. Set the evaluation dates and show the form that will be used.
- [ ] 9. Agree how concerns are raised, written down and appealed.
- [ ] 10. Set up the hours log and who signs it, and how often.

Supervision session log

Date	Format and length	Cases or recordings (codes)	Risk or ethics issues	Directives and follow up	Initials

One line per session. Format: I (individual), T (triadic) or G (group), in person or video. Use client codes, not names. Record any directive you gave or received, and check it was done at the next session. Keep this log with the agreement.

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