**PPTP SUPERVISION FORM**

Every PPTP student seeking a graduation certificate from the program must complete a minimum of 60 hours of supervision. Hours can be done with one or more supervisor, however one form must be completed for each supervisor.

**Prairie Care Students**: Students entering the program in Year Two have already certified their first 30 hours of supervision as a prerequisite for their acceptance, and only need to complete this form for the 30 hours of supervision during or after Year 2.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date supervision began: \_\_\_\_\_\_\_\_\_\_\_

Number of supervision sessions:\_\_\_\_\_\_\_

Length of Supervision Sessions\_\_\_\_\_\_\_\_

Frequency of supervision: \_\_\_1 \_\_\_\_2 \_\_\_\_3 \_\_\_\_4 times per month

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Signature Date

Please return this form by email to :

[admin@mpsi.info](file:///C:\Users\kimberlyrorie\Desktop\Download%20Point\admin@mpsi.info)