**CP FORM 3**

**CLIENT LOG FORM**

**SUMMARY OF CLIENT CONTACT HOURS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **CLIENT CODE** | **DATE:**  **FROM** | **DATE:**  **TO** | **No. OF SESSIONS** | **No. OF HOURS** | **PRESENTING CONCERNS AND MAIN ISSUES EXPLORED** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**TOTAL HOURS… COLLECTIVE HOURS…**

**STUDENT COUNSELLOR’S SIGNATURE… DATE…**

**SITE SUPERVISOR’S NAME… SIG… DATE…**

**UNIVERSITY SUPERVISOR’S NAME… SIG… DATE…**