I. BACKGROUND INFORMATION
[Current/refer to previous report date]

II. CURRENT SEMESTER’S ASSESSMENT
The following assessment procedures were administered:
A. Pretesting
B. Posttesting

III. INTERVENTION GOALS AND PROGRESS

IV. IMPRESSIONS

V. RECOMMENDATIONS

NOTE:
- Please type reports in the above format and adhere to standard outline form.
- The report should be single-spaced. Number all but the first page.
- Provide lines for signatures of supervisor and student clinician.
- For sample reports, please see your clinic supervisor for recommendations/examples.
- Previous reports may not be in the required format (as shown above).
- Do not use the terms “able” or “unable.” Either the client did or did not do something.
- Grammar: Do not “tense shift.”