**CLINICAL OBSERVATION HOURS RECORD**

**STUDENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PRINT NEATLY

The American Speech-Language-Hearing Association (ASHA) requires students in training to obtain 25 clock hours of observation of clinical evaluation and treatment. The 25 observation hours are a portion of the total number of clock hours that students who end up completing an MA in SLP must complete as part of their degree program. This Clinical Hours Observation Record Form may be used to record observation hours at any site. Depending on the number of hours observed, a second copy of this form may be necessary. Some sites may have their own record form. Students may also use this form for accruing hours using Master Clinician (MC). Again, students must obtain a signature from a certified SLP for any MC observation hours (e.g., instructor of CSD pre-professional course). Students are responsible for maintaining their own documentation of all observation hours.

**Key: Age: A = Adult (19 + years old); C= Child**

**Disorder: Articulation Fluency Voice Language Swallowing Cognitive**

**Social Aspects Comm. Modality Hearing**

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| **DATE** | **DISORDER(s)** | **AGE** | **LIVE/VIDEO** | **TIME (hr:min)** | **SUPERVISOR(S) INTITALS** |
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| **Supervisors Name (Print Neatly)** | **Supervisor Signature/Credentials (corresponding to each set of above initials)** | **ASHA Certification #** | **Ohio License # (or other State)** |
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**Total time (hours: minutes)**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**