PACFA FORM



PACFA Training Standards Assessment: Client Contact Supervision – (To be completed by the Applicant's Supervisor)

Part 1— Supervisor's Contact Details	Part 3 — Supervision Arrangements
Name	
Address	» The details reported on this page give an accurate description of our supervision arrangements.
Phone / Mobile Email	Total supervision hours completed for individual sessions
Qualifications	Total supervision hours completed for individual and Group sessions (maximum 6 trainees per group) Total supervised client contact hours completed
Part 2 — Sessions and Duration	Declaration
	Supervisor's signature
Supervision was:	
Individual Group (max. 6 trainees)	
Individual sessions and duration	
Session duration (minutes)	Date Signed Day Month Year
Number of sessions	Applicant's signature
Group sessions and duration*	
Session duration (minutes)	
Number of sessions	
Mode of contact (face to face/online etc.)	Day Month Year Date Signed / / / / / / / / / / / / / / / / / / /
Number in group	
* At least 50% of the minimum requirement for supervision must be individual supervision	Please note: The template is a guide only. Verification
This report relates to the period:	forms issued by supervisors may vary from the prescribed format, but they must contain the required information (as above). Please refer to the PACFA Training Standard 2022 for further information.