SESSION NOTES

Client: Date:
Counselor: Session:

1. **Intention(s) for This Session:**

2. **Reported** (What was said and reported? This is content):

3. **Observed** (What was observed? include self and client, THE HAPPENING TRUTH):

4. **Assessment:** (What does the content above “mean”):

5. **Plan** (plan for future sessions, e.g. themes, objectives, techniques):
   a. **Short term:**
   
   b. **Long term:**

Counselor’s Signature: _______________________________ Date: __________

Supervisor Review: _______________________________ Date: __________