Peer Tape Review Format

Intern: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tape #: 1 2

Date of Counseling Session: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Session number with this client: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Background information (client description, demographics, presenting issue or concern):
2. Your focus on the session (What is your goal for the session? How were you attempting to accomplish your session goal? Is there a particular time segment?)
3. Supervision needs (What questions do you have for your peer supervisor? What were the strengths/needs for improvement for the counseling session? What would you like to learn/accomplish in the supervision meeting?). Please be specific