SUMMARY OF TRAINING AND CLINICAL SERVICE HOURS

TRAINING (Past 3 Years)

Title	Hours
TOTAL	***40***

CLINICAL HOURS (Past 3 Years)

Service	Hours
Individual	
Group	
Family	
Couple	
Psycho-ed	
Staffing	
Court	
Case Notes	
Reports	
Case Supervision	
Collateral Contacts	
File Maintenance	
Other	
TOTAL	***1000***

I certify that the information provided is current and accurate to the best of my knowledge. I also acknowledge that NOJOS may request supporting documentation as needed for this application process.

_____ _____

Signature Date