



**Board of Behavioral Sciences**  
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## Associate Professional Clinical Counselor

### SAMPLE LETTER OF AGREEMENT FOR SUPERVISION

*Required when the Associate's supervisor is working as a volunteer*

Date:  
 Associate's name:  
 Supervisor name:  
 Employer name:

This letter serves as an agreement between the employer, (Employer's name), the Professional Clinical Counselor Associate, (Associate's name), and the Associate's supervisor, (Supervisor's name).

(Supervisor's name) is employed by (Employer's name) on a VOLUNTARY basis. (Employer's name) agrees to allow (Supervisor's name) to supervise (Associate's name). (Supervisor's name) agrees to supervise (Associate's name) for (Employer's name).

(Supervisor's name) agrees to take supervisory responsibility for the clinical counseling services provided by (Associate's name) as required by Chapter 16 of the California Business and Professions Code and Title 16, Division 18, Article 3 of the California Code of Regulations. (Supervisor's name) shall ensure that the extent, kind and quality of services performed is consistent with (Associate's name) training, education, and experience and is appropriate in extent, kind and quality.

(Employer's name) is aware of the licensing requirements that must be met by (Associate's name) and agrees not to interfere with the supervisor's legal and ethical obligations to ensure compliance with those requirements; and agrees to provide the supervisor access to clinical records of the clients counseled by (Associate's name).

\_\_\_\_\_  
 Supervisor's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Associate Professional Clinical Counselor's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Employer's Authorized Representative Name

\_\_\_\_\_  
 Employer's Authorized Representative Signature

\_\_\_\_\_  
 Date

#### NOTE:

**This is a SAMPLE letter.** It should be written on the letterhead of the employer and signed and dated prior to gaining hours of experience. See Title 16, California Code of Regulations section 1820(e)(3).