



**Board of Behavioral Sciences**  
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**ASSOCIATE MARRIAGE AND FAMILY THERAPIST OR TRAINEE  
 WEEKLY SUMMARY OF EXPERIENCE HOURS  
 OPTION 1 – NEW STREAMLINED METHOD**

|   |                 |       |  |  |        |  |  |                    |
|---|-----------------|-------|--|--|--------|--|--|--------------------|
| Name of Trainee/Associate: Last   |                 | First |  |  | Middle |  |  |                    |
| Supervisor Name   |                 |       |  | Date enrolled in graduate degree program |        |  |  |                    |
| Name of Work Setting (use a separate log for each)  |                 |       |  | Address of Work Setting                  |        |  |  |                    |
| Indicate your status when the hours below are logged: <input type="checkbox"/> Trainee<br><input type="checkbox"/> Post-Degree / Associate Application Pending - BBS File No (if known): _____<br><input type="checkbox"/> Registered Associate - AMF Number: _____ |                 |       |  |  |        |  |  |                    |
| <b>YEAR</b> _____   | <b>WEEK OF:</b> |       |  |  |        |  |  | <b>Total Hours</b> |
| <b>A. Direct Counseling with Individuals, Groups, Couples or Families</b>   |                 |       |  |  |        |  |  |                    |
| <i>A1. Diagnosis and Treatment of Couples, Families, Children*</i>  |                 |       |  |  |        |  |  |                    |
| <b>B. Non-Clinical Experience**</b>   |                 |       |  |  |        |  |  |                    |
| <i>B1. Supervision, Individual*</i>   |                 |       |  |  |        |  |  |                    |
| <i>B2. Supervision, Group*</i>  |                 |       |  |  |        |  |  |                    |
| <b>C. Total Hours Per Week</b><br>(A + B = C) (Maximum 40 hours / week)   |                 |       |  |  |        |  |  |                    |
| <b>Supervisor Signature</b>   |                 |       |  |  |        |  |  |                    |

\* Line A1 is a sub-category of "A" and Lines B1 and B2 are subcategories of "B." When totaling weekly hours do NOT include the subcategories - use the formula found in box "C."

\*\*Non-Clinical Experience includes: Supervision, psychological testing, writing clinical reports, writing progress or process notes, client-centered advocacy, and workshops, seminars, training sessions or conferences.