



Date	Speech	Audiology	Code	Age	Observation Site	Supervisor's Signature	Supervisor ASHA #	Minutes

**SUMMARY INFORMATION:**

- \_\_\_\_\_ Total Hours
- \_\_\_\_\_ Total Number of Different Observation Sites
- \_\_\_\_\_ Total Number of Different Supervisors

ACTIVITY CODE: Check either (SP) for Speech Pathology or (A) for Audiology for each Observation.

Identify the specific type of Observation using one of the following:

**SPEECH PATHOLOGY**

- (A) Articulation
- (L) Language
- (AP) Aphasia
- (V) Voice Response
- (F) Fluency
- (D) Diagnostic
- (S) Screening

**AUDIOLOGY**

- (HA) Hearing Aid
- (AR) Aural Rehabilitation
- (ENG) Electronystagmography
- (BSER) Brainstem Evoked
- (CAT) Central Auditory Testing
- (SL) Site of Lesion Testing
- (S) Screening
- (O) Otolaryngological
- (IV) Initial Evaluation