



---

Sample Contract

**SUPERVISION CONTRACT**

This SUPERVISION CONTRACT (the "Contract") executed to be effective the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by and between \_\_\_\_\_ ("Supervisor") and \_\_\_\_\_ ("Supervisee").

***SUPERVISION:*** The above named Supervisor agrees to provide supervision as required by the Texas Behavioral Health Executive Council to \_\_\_\_\_. The Supervisee will provide proof of having passed the NBCC Exam/ AMFTRB and the Texas Jurisprudence Exam prior to entering into this agreement. Supervision shall be conducted a minimum of four hours per month, face-to-face supervision and or via telehealth. Experience and supervision accumulated shall be documented in a log or other written record acceptable to the Supervisor. It is understood that the Supervisor will conduct his/her counseling services at \_\_\_\_\_ and that the services will comply with the rules and regulations of the agency/practice in which the Supervisee is completing his/her internship hours.

***FEES:*** For and throughout the term of this contract the Supervisee shall pay the supervisor the sum of \$80 per regular supervision hour.

***MAKE-UP SESSIONS:*** In the event the supervisee is unable to attend the regularly scheduled supervision session, the supervisee will be responsible for scheduling a make-up session with the supervisor. The make-up session will be scheduled in the current month and at a time that is not during other supervisee's regular supervision hours.

For and throughout the term of this contract the supervisee shall pay the supervisor the sum of \$80 per make-up supervision hour.

In the event the supervision make-up session is not completed before month end, the direct and indirect hours accumulated for the unsupervised hours will not be included in the total of the supervisee's final hours for their licensing.

***PROFESSIONAL RESPONSIBILITY:*** For and throughout the term of the contract, the full professional responsibility for the service of Supervisee shall rest with the Supervisor.

***TERMINATION:*** This contract shall terminate upon the earlier to occur: (1) the completion by a Supervisee of the herein above-referenced 3,000 clock hours of services and receipt of license from the licensing board, or (2) notice of termination (with or without cause) at any time given by either party to the other. Upon such termination, the Supervisor shall be entitled to fees for services up to the effective date of such termination. Supervisee shall be entitled to a copy of the records kept by the Supervisor for services rendered up to the effective date of such termination.

***PROFESSIONAL LIABILITY INSURANCE:*** Supervisee shall purchase and maintain at Supervisee's sole cost and expense professional liability insurance in the minimum amount of \$1,000,000.00 per occurrence and \$3,000,000 in the aggregate. Applicant shall provide proof of coverage upon the request of the Supervisor.

**STANDARDS:** The Supervisor and the Supervisee shall adhere to the Licensed Professional Counselor Act, and the Rules of the board of Examiners of Professional Counselors, and the code of Ethics of the Texas Counseling Association and/or the rules of the board of Examiners of Marriage and Family Therapists, and the code of Ethics of the American Association for Marriage and Family Therapists (AAMFT).

**DOCUMENTATION:** The supervisee will maintain a supervision log that documents the date of each supervision conference and the total number of hours of supervised experience accumulated up to the date of each supervision session. The record shall reflect the approved site where the hours were accrued and the content of the supervision. The supervisee will present this document (up-to-date) at each session.

**CLIENT EMERGENCIES:** The Supervisee shall notify the Supervisor immediately of any client emergency. A "client emergency" is any circumstance which a reasonable person would believe that:

- a. The client represents a serious threat to himself or others; or
- b. Immediate therapeutic contact is reasonably necessary for the well-being of the client.

**MODIFICATION TO THE AGREEMENT:** This agreement may be modified provided:

- a. the modification is evidenced in writing, with signatures
- b. the modification is agreeable to both parties and
- c. the new agreement satisfies all Board requirements.

This agreement is entered into as of the date and year first above written.

**SUPERVISOR:**

**SUPERVISEE:**

\_\_\_\_\_  
Name (Please print) & License #

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Phone

