

## APPENDIX A-II

### Clinical Mental Health Counseling Graduate Student Professional Development Review (PDR) St. Cloud State University

Student Name	Advisor Name	Semester (i.e. 2019_Fall_Year 1)

1. Professionalism (ACA, Section C)
2. Relational (ACA, Section C)
3. Science (ACA, Section G)
4. Application (ACA, Sections A, B and I)
5. Educational/Supervision (ACA, Section F)
6. Systems (ACA, Section D)

#### A. Areas Identified as Strengths in Professional Practice Development

No.	Identify up to 3 areas of strength
1	
2	
3	

#### Areas Identified in need of Development for Professional Practice Development

No.	Identify areas of development (1-6)
1	
2	
3	

**B. Professional Learning Goals and Activities**

Area No.	Professional Learning Goals	Activities	Completion Date
1			
2			
3			

**III. Additional Areas of Focus**

CMHC Program/SCSU/Internship Agency/Community/Other

*My signature below indicates that I have received a copy of this Professional Development Review and that I understand and contributed to its contents.*

Students Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_