

SUMMARY LETTER

Summarize clinical experience pre and post licensure.

Description of the experiences (where practicum experience obtained: client load: who supervisor was; what supervision looked like)

Dates	Experience	Clinical Hours (face-to-face hours)	Supervision Hours	Other Hours (following NV requirements as per the NAC)	Totals
Graduate Program (up to 500 direct hours)					
Internship in (____ State)					
Post License Work Experience					
GRAND TOTALS					