

MEDICAID "Under the Supervision of" Documentation for Social Workers

Limited licensed SSW:					District:		School Year:
Supervising Master SSW:					Buildings:		
under the s	upervisio	n of a lice	ensed master's social	worker. The "under the s	upervision of" includes	ial worker in Michigan or a limit supervising the limited licensed al basis. Document the dates of	-
Conferen	ice with	SSW:					
Meeting Date	Start Time	End Time	Type of Supervision: phone, email, individual, group, review of work		oic		Notes
Master Social Worker's Signature				Date	Limited Licensed Social Worker's Signature Date		
Approved Records Electronically in PSSE Social Worker: Please submit a copy of this log to your Spec. Ed office at the end of the school year							

LEA Spec. Ed office: Please forward a copy to the Medicaid SBS office.