SAN JOSÉ STATE UNIVERSITY

Connie L. Lurie College of Education · Department of Communicative Disorders and Sciences
One Washington Square · San José, CA 95192-0079 · Main: (408) 924-3688 · Fax: (408) 924-3641

COUNCIL ON ACADEMIC ACCREDITATION
ACCREDITED | SPEECH-LANGUAGE PATHOLOGY

CHRONOLOGY FORM

Client Name: _____ Phone No.: ( ) _____

Semester therapy was initiated: _____ Semester Therapy concluded:_____

Client received therapy during the following semesters: *(please list term and year, i.e.: Spring 2010)*

Please list dates of examination, therapy, changes of status, communications, etc. in the space provided below.

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

SAN JOSÉ STATE UNIVERSITY

Connie L. Lurie College of Education · Department of Communicative Disorders and Sciences
One Washington Square · San José, CA 95192-0079 · Main: (408) 924-3688 · Fax: (408) 924-3641

Council on Academic Accreditation
Accredited | Speech-Language Pathology

CHRONOLOGY FORM (CONT.)