

Progress Report for Mental Health Therapy

Date: [Insert Date]

Client Name: [Insert Client Name]

Therapist Name: [Insert Therapist Name]

Session Date: [Insert Session Date]

Progress Summary

[Insert summary of the client's progress, highlighting improvements, challenges faced, and strategies used during therapy.]

Goals and Objectives

- [Insert goal 1]
- [Insert goal 2]
- [Insert goal 3]

Recommendations

[Insert recommendations for future sessions, activities, or follow-up strategies.]

Next Steps

[Insert information on upcoming sessions or any additional support needed.]

Therapist Signature

[Therapist Name]