

CLINICAL PSYCHOLOGY PROGRAM MANUAL:  
GUIDELINES AND PROCEDURES

WASHINGTON STATE UNIVERSITY

Fall 2011

## Table of Contents

	Page
Philosophy of the Clinical Training Program	3
Program Objectives	4
People	4
1. Clinical Training Committee	4
2. Graduate Student Reps	4
3. Graduate Program Coordinator	5
4. The Student's Advisor / Student Mentor	5
Research Training	5
Clinical Training	6
Interest Areas	6
1. Adult Psychopathology	6
2. Health Psychology	7
3. Clinical Child & Adolescent Psychology	7
4. Neuropsychology	8
5. Diversity	9
6. Advanced Quantitative Methods	9
Clinical Psychology Program Requirements	9
Year-by-Year Course Guide	12
Clinical Practica	15
Clinical Work Outside the Program	15
Clinical Internships	16
Filing Your Program	17
Masters Degree	18
The Doctoral Degree	19
1. The Preliminary Examination	19
2. The Dissertation	22
Preparation and Evaluation of Thesis and Dissertations	23
Funding	26
Student Evaluations	27
Leaves of Absence	29
Graduate Students' Obligation to Ethical Behavior	30
Professional Behavior and Standards of Conduct	30
Grievance Procedures	31
Recommendations	32
Appendix	
a. Clinical Psychology Graduate Program Psychotherapy Supervision Evaluation Form	34
b. Clinical Psychology Graduate Program Psychological Assessment Supervision Evaluation Form	39
c. Clinical Psychology Graduate Student Evaluation Form	41
d. Program Timeline.	56

## SECTION 1: OVERVIEW

### INTRODUCTION

**Congratulations on your admission to the Clinical Psychology Program at Washington State University!** We are glad that you decided to pursue a doctorate with us. Expect a rigorous but exciting training experience during your tenure at WSU. This document summarizes some of the important procedures and regulations that will govern your activities as you proceed toward your degree. When you first read this document, you may feel overwhelmed by the many “rules” governing your graduate career. However, it is our experience that having clear goals, objectives, and procedures help to ensure that students complete the doctorate degree in a timely fashion. Indeed, in recent years, most of our students have completed the doctorate within five to six years of entering the program.

The material contained herein is not intended to substitute for or otherwise modify the regulations that are contained in the current Graduate Bulletin, the Graduate School Policies and Procedures Manual, or in other official University documents. Rather, this document supplements and extends more general University- and Departmental-level requirements as they might apply specifically to the graduate program in clinical psychology. This **Policy and Procedures Manual** will be updated periodically. Relevant policy memoranda that appear between publications will be incorporated into subsequent editions. If you judge a section of this **Manual** to be unclear, or if you identify additional topics that you believe warrant inclusion in the next edition, please inform the current Director of Clinical Training, Dr. David Marcus.

A copy of this document is always available on our program website, located at: <http://www.wsu.edu/psychology/graduateprograms/clinical/>. You will be asked to read this document in the first week of your training in the clinical psychology doctoral program, and to sign a form to indicate that you have read this document and have had the opportunity to ask questions about its contents. You will be notified (via e-mail on our listserv) annually whenever the document is updated. Please download and read the updated document as soon as possible after receiving notification of an update. A reread will get you up-to-date on changes and will serve as a good reminder of the general policies.

### PROGRAM PHILOSOPHY AND MISSION

The Clinical Psychology Program at Washington State University is based on the scientist-practitioner model of training. The Program is designed to integrate theory, research, and clinical practice in the training of students. Students are thus involved in research activities each semester in the Program and clinical practica beginning in the third semester until the start of the 12-month internship. The goal of the program is to train highly competent clinical psychologists who will obtain high quality APA-approved internships and, with graduation, make positive contributions to the field of clinical psychology. Given that our graduates can potentially make contributions to clinical psychology in academic, research, medical, clinical, or community settings dependent on their interests and goals, the Program provides broad, general clinical training during the four years students are at the University. Areas of interest within the Clinical Psychology Program include: Health Psychology, Neuropsychology, Adult Psychopathology, and Child and Adolescent Psychopathology. The Program is fully accredited fully by the American Psychological Association [750 First Street, NE, Washington, DC 20002; (202) 336-5979].

## **PROGRAM OBJECTIVES**

The Clinical Psychology Program has seven basic objectives. These objectives are to graduate clinical psychologists who will have: (1) outstanding knowledge of the field of scientific psychology; (2) outstanding knowledge of the scientific foundations for the practice of clinical psychology; (3) outstanding knowledge and skills in the assessment and diagnosis of dysfunctional behavior; (4) outstanding knowledge and skills in the design, implementation, and evaluation of psychological interventions for dysfunctional behavior; (5) sensitivity, knowledge, and skills in regard to the role of human diversity in the practice of clinical psychology; (6) an awareness that the field of clinical psychology involves a constantly evolving scientific and professional knowledge base and, as a result of this awareness, the motivation and skills to remain in contact with the evolving knowledge base across their professional careers; and (7) the theoretical and methodological skills to conduct and evaluate research.

### **Clinical Program Listserv**

A considerable amount of program information (e.g., notices of policy changes, program events, upcoming deadlines) will be communicated through our Clinical listserv. All students should subscribe to this listserv at <http://lists.wsu.edu/mailman/listinfo/clinical>. Once subscribed, please check your email regularly for any announcements. Students should also feel free to post relevant announcements to the listserv.

### **Membership in Professional Organizations**

Students are encouraged to join regional or national psychology organizations such as the American Psychological Association (APA), the Association for Psychological Science (APS), or other organizations with more specific missions such as the Association for Behavioral and Cognitive Therapies (ABCT), Society for Research in Child Development (SRCD), Society for Personality and Social Psychology (SPSP), National Academy of Neuropsychology (NAN), or the International Neuropsychological Society (INS).

## **PEOPLE**

### **Clinical Training Committee**

The Clinical Training Committee (CTC) consists of all core faculty members of the program, and is chaired by the Director of Clinical Training (DCT). Admissions, annual student evaluations, curriculum changes, and disciplinary actions, as well as other program-related issues, are all decided by the CTC. During the Fall and Spring semesters, the CTC generally meets weekly to discuss issues relevant to the clinical psychology training program. During the Summer semester, the committee meets as needed. All program decisions that require a vote are passed when a simple majority of the eligible faculty (not faculty present) votes in the affirmative.

### **Graduate Student Representatives**

Each year, two clinical psychology graduate students are elected by their peers to serve as representatives between the clinical students and the Clinical Training Committee. The representatives

are elected at the end of the Summer semester and serve a one-year term. One representative is elected from the rising second year class, and one is elected from the rising third year class and beyond. The representative from the second year class is also responsible for representing the first year students (e.g., soliciting input). The student representatives participate actively in all matters concerning the clinical program with the exception of the yearly evaluations of clinical students and tenure/promotion decisions regarding clinical faculty. Of course, the representatives will be excused for other discussions in which it would be inappropriate or unethical for them to be present (e.g., discussions of student performance). Additionally, student representatives are appointed each fall semester to serve on various committees in the department (e.g., Ethics Committee; Search Committees; Graduate Admissions Committee).

### **Graduate Program Coordinator**

The Graduate Program Coordinator (currently Ms. Kendra Cochrane) is located in the Psychology Department (JT 233F, 335-2633). It is important that all new clinical graduate students provide her with a local mailing address, telephone number(s), and e-mail address. All clinical students, new and continuing, should also keep her advised of any changes of local address, telephone number(s), or e-mail address that might occur.

### **The Student's Advisor**

Each student admitted into the program is initially assigned to the faculty member that most closely matches his or her research and clinical interests. This faculty member will assist the student in planning her or his program of study. Usually, but not always, the advisor serves as the chair of the student's master's project, preliminary examination, and dissertation committee. Students may change advisors as well as their research interests during their studies in the clinical program. In addition, it is possible for students to be involved in the research programs of more than one faculty member. If you have any questions about these issues, please discuss them with the Director of Clinical Training.

### **Graduate Student Mentor**

Once accepted to the clinical psychology doctoral program, you will be assigned a program mentor, typically someone in your designated major professor's lab. The program mentor will be available to answer general questions about the program as well as specific questions about your transition to Pullman and WSU. Although we want all new students to feel fully supported by the entire program, the program mentor readily provides students with a peer from whom to obtain information following admission.

## **SECTION 2: CLINICAL PSYCHOLOGY DOCTORAL PROGRAM CURRICULUM RESEARCH TRAINING**

The Clinical Program operates on the proposition that research training is an integral part of the education of clinical psychologists. Although the program admits only persons who expect to receive a Ph.D., each student who enters at the bachelor's degree level is expected to complete an empirical master's project while in progress toward the doctoral dissertation. Students may conduct research

under the supervision of either clinical or experimental faculty. In addition to the master's project and dissertation, clinical students are expected to be involved in research activity under the direction of a faculty member during each semester in residence.

Most of the clinical and experimental faculty have research teams which meet on a weekly or bi-weekly basis. These research teams are usually centered on the interests of the faculty member or members. Students select a research team (or teams) that best match their research interests. The faculty member who directs the research team will usually function as the student's advisor for the master's project and dissertation research.

## **CLINICAL TRAINING**

Exposure to professional clinical activities begins in the fall semester of the second year of graduate training and continues through the completion of the clinical internship. To provide broad clinical training for students, the Department of Psychology offers a variety of different clinical experiences. The Psychology Clinic in the Department of Psychology is staffed by faculty and clinical graduate students and provides assessment, diagnostic, and psychotherapy services for a fee to the University and surrounding communities. The University Counseling Services is staffed by clinical and counseling psychology graduate students and faculty psychologists, and provides ongoing counseling and emergency services to students. The University Health and Wellness Services provide assistance to students through the Behavior Medicine Service, which is staffed by clinical graduate students, physicians, and a psychiatrist. The University of Idaho Child and Adolescent Study Center provides assessment and therapy to children and adolescents.

## **INTEREST AREAS**

The clinical program has the goal of providing broad clinical training. Students thus receive training in a wide range of areas during their four years on campus prior to the 12-month internship in the fifth year. The program does, however, have several interest areas in which students can receive in-depth research and clinical training. These interest areas center on the research and clinical interests of the faculty. Not all of the faculty listed below chair dissertations, but they are available to serve on committees, to collaborate on research, or for other training activities. These areas are noted below.

### **Adult Psychopathology Interest Area**

This area provides students with research training in the general area of adult psychopathology and the more specific area of cognitive-behavioral approaches to adult psychopathology. In addition to research opportunities in this area, clinical opportunities exist in the Psychology Clinic and at Counseling Services.

Pullman clinical faculty associated with this area:

#### **Paul Kwon, Ph.D.**

Areas: Etiology of depression, integration of cognitive and psychodynamic perspectives, cross-cultural issues.

#### **David Marcus, Ph.D.**

Areas: Psychopathy, health anxiety, taxometrics, applying social psychology to clinical issues.

Regional campus clinical faculty associated with this area:

**Dennis Dyck, Ph.D.** (Spokane campus)

Areas: Clinical psychology; health psychology; serious and persistent mental illness (e.g., schizophrenia).

**John M. Roll, Ph.D.** (Spokane campus)

Areas: Developing, evaluating and disseminating evidence-based treatment of substance abuse disorders. Developing protocols for implementing evidence based treatment for substance use disorders and mental health concerns in rural areas.

**Sarah Tragesser, Ph.D.** (Tri-City campus)

Areas: Dimensional perspective on personality disorders; borderline personality disorder (BPD) Features of affective instability and impulsivity; personality and substance abuse (e.g., alcohol, non-medical use of prescription drugs)

**Health Psychology Interest Area**

This area provides students with training opportunities in health psychology. Primary clinical training in health psychology occurs at the Behavioral Medicine Service at the University's Health and Wellness Services. The Behavioral Medicine Service responds to referrals from University physicians. Typical referrals include headache, gastrointestinal disorders, sleep disorders, and pain syndromes. Additional opportunities for clinical work exist at Palouse Medical, a large local medical care clinic and the Benewah Medical Center, a medical clinic located on the Coeur d'Alene Tribal Reservation. Clinical training in health psychology is also available in Spokane, Washington. In addition to clinical training experiences, students may be involved in research in behavioral medicine and health psychology with the faculty as well as conducting their master's project/dissertation research in this area.

Pullman clinical faculty associated with this area:

**Bruce Wright, M.D.**

Director of the Behavioral Medicine Service at the University's Health and Wellness Services

Areas: General psychiatry; behavioral medicine; psychosocial factors in cardiovascular disease; psychopharmacology.

**Child and Adolescent Psychopathology Interest Area**

This area provides students with research opportunities in the areas of clinical child and adolescent psychology as well as pediatric psychology. Students also have the opportunity for clinical work with children and families in the Psychology Clinic as well as the University of Idaho Child and Adolescent Student Center.

Pullman clinical faculty associated with this area:

**Theodore Beauchaine, Ph.D.**

Areas: Biological predispositions toward impulsivity, trait anxiety, and negative affectivity, and how these interact with environmental experience to either amplify or mollify risk for psychopathology.

**G. Leonard Burns, Ph.D.**

Areas: Construct validity of the ADHD, Oppositional Defiant Disorder, and Conduct Disorder within and across cultures.

**Maria (Masha) Gartstein, Ph.D.**

Areas: Developmental psychopathology and early social-emotional development in a cultural context.

Branch campus clinical faculty associated with this area:

**Paul Strand, Ph.D.** (Tri-City campus)

Areas: School readiness and social skills development of children from culturally and linguistically diverse backgrounds. How shyness, social values, and emotion understanding relate to social skills development and school engagement. Verbal processes that emerge in cultural context and guide behavior, such as relational framing skills, social values, and religious practices.

**Neuropsychology Interest Area**

This area provides students with training opportunities primarily in adult neuropsychology. Students receive course training in the foundations of neuropsychological assessment, neurobehavioral syndromes, neuroanatomy, cognitive psychology, and the neurosciences. Primary clinical training in neuropsychological assessment and remediation occurs through the assessment services at the WSU Psychology Clinic and through externship placements at sites such as St. Luke's Rehabilitation Institute and Spokane VA Medical Center. Through these experiences, students are provided with a breadth of training in diagnostic, assessment, and rehabilitation issues in neuropsychology. These sites also provide students with the opportunity for exposure to neuroimaging, forensic issues and case conferencing. Referrals range from childhood neurodevelopmental disorders to dementia, and involve inpatient and outpatient settings. Additional in-depth knowledge of clinical and research practices are gained through involvement in research projects, including master's project/dissertation work, in the area of neuropsychology.

Pullman clinical faculty associated with this area:

**Maureen Schmitter-Edgecombe, PhD** (Pullman campus)

Areas: Adult neuropsychology; memory and executive abilities; ecological validity and everyday functioning; cognitive rehabilitation and use of smart technologies with aging and impaired populations (e.g., MCI, dementia, TBI).

Regional campus clinical faculty associated with this area:

**Dennis Dyck, Ph.D.** (Spokane campus)

Areas: Clinical psychology; health psychology; multi-family group interventions for schizophrenia, TBI and dementia.

Other clinical training faculty (neuropsychologists) associated with this area:

**Erin Baldwon, Ph.D.** (Spokane VAMC)

Areas: Seizures disorders, dementia, mild cognitive impairment, movement disorders and multiple sclerosis

**Lauren Warren, Ph.D.** (Pullman, Psychology Clinic)

Areas: Identification and non-pharmacological treatment of MCI, early detection of dementia, medical neuropsychology, and post-operative cognitive decline

**Elizabeth Ziegler, Ph.D.** (Spokane VAMC)

Areas: medical neuropsychology, malingering, forensic neuropsychology, traumatic brain injury, dementia, cerebrovascular disorders and psychiatric conditions

Pullman experimental faculty associated with this area:

Lisa Fournier, PhD (WSU, Pullman): Attention, perception, and action

John Hinson, PhD (WSU, Pullman): Cognitive neuroscience and decision-making

Paul Whitney, PhD (WSU, Pullman): Cognitive neuroscience and working memory

**Diversity Interest Area**

Drs. Burns, Gartstein, Kwon, and Strand have research and clinical interests in the area of the psychology of diversity. Please see the Diversity and Clinical Psychology link on the Clinical Psychology Program web page for a description of their interests and the training opportunities.

**Advanced Quantitative Methods in Psychology Interest Area**

The curriculum in the Department of Psychology at Washington State University provides students with the opportunity to acquire skills in advanced quantitative methods. In addition to the three courses that all clinical psychology graduate students are required to take in their first year (i.e., Analysis of Variance and Experimental Design; Correlation, Regression, and Quasi-Experimental Design; and Psychometrics), clinical students also have the opportunity to take two additional courses. These courses are: (1) Applied Structural Equation Modeling (path analysis, structural regression analysis; latent growth curve analysis; multilevel analysis; and mixture analysis); and (2) Multilevel and Synthesized Data (meta-analysis). Students apply the skills learned in this sequence of five courses to their particular research interests. The goal of this training is to prepare students for research careers. Applicants should contact Dr. Burns (clinical psychology) or Dr. Parks (experimental psychology) if they have questions about this area of training.

**CLINICAL PSYCHOLOGY PROGRAM REQUIREMENTS**

The courses required for the clinical program are noted below. Elective courses are listed as well. This curriculum was developed to be consistent with our training model and to meet APA accreditation requirements. Although it meets the licensure requirements for most state psychology boards, there is no guarantee that it will meet the requirements for all states. Information about specific licensure requirements by state may be found at the Association of State and Provincial Psychology Boards (ASPPB) website <http://www.asppb.org/>

**History and Systems of Psychology**

Psych 504: History of Psychology - Required

### **Research Methodology and Techniques of Data Analysis**

Psych 502: Research Design (fall and spring semester of first year) - Required

Psych 511: Analysis of Variance and Experimental Design - Required

Psych 512: Correlation, Regression, and Quasi-Experimental Design - Required

Psych 515: Multilevel and Synthesized Data - Elective

Psych 516: Applied Structural Equation Modeling - Elective

### **Social Aspects of Behavior**

Psych 550: Attitudes and Social Cognition - Required

### **Biological Aspects of Behavior**

Psych 575: Foundations of Neuropsychology - Required

Psych 574: Behavioral and Clinical Neuroscience – Elective

**Note:** Clinical students with interests in clinical neuropsychology should Psychology 574 and 575.

### **Cognitive and Affective Aspects of Behavior**

Psych 592: Cognition and Memory - Required

### **Developmental Aspects of Behavior**

HD 511: Theory and Substance of Human Development - Required

### **Professional Standards and Ethics**

Psych 530: Professional, Ethical, and Legal Issues - Required

### **Individual Differences in Behavior**

Psych 533: Adult Psychopathology - Required

Psych : Child Psychopathology --Required

### **Measurement Theory and Individual Assessment**

Psych 535: Personality Assessment and Diagnosis - Required

Psych 539: Intellectual and Neuropsychological Assessment - Required

Psych 514: Psychometrics – Required

### **Diversity Issues in Psychology**

Psych 552: Diversity Issues in Psychology - Required

### **Individual and Group Intervention**

Psych 520: Empirical Approaches to Adult Psychotherapy - Required

Psych 543: Clinical Child Psychology: Empirical Approaches to Assessment and Therapy - Elective

Psych 544: Medical Psychology - Required

Psych 534: Clinical Psychopharmacology - Elective

### **Clinical Practica**

Psych 546: Beginning Counseling Service Practicum (2 semesters)

Minimum of four additional semesters of practicum from:

Psych 545: Psychology Clinic Assessment and Therapy Practicum

Psych 546: Advanced Counseling Service Practicum

Psych 547: Medical Psychology Practicum

**Note:** If students are involved in clinical work at an off-campus agency (e.g., VA in Spokane, University Idaho Child and Adolescent Center), then students need to register for Psychology 545 (Psychology Clinic Assessment and Therapy Practicum). Most students take two practica each semester as well as practicum during the summer months in order to obtain the necessary hours for their internship applications. Students must also be involved in a psychotherapy practicum each semester in the program at the start of the second year.

**Independent Study**

Psych 600: Independent Study

You may sign up for 600 credits when you are working on research projects with a faculty member.

**Thesis**

Psych 702: Master's Project

Minimum of 4 credits. You must sign up for a minimum of 2 credits in the semester you have the final defense of the master's project. Also, please note that the number of credits that you list on your program of study will be the number for which you will be required to take by the graduate division. Students who enter the program with a non-empirical master's thesis also register for Psychology 702 and complete an empirical project.

**Dissertation**

Psych 800: Doctoral Research, Dissertation

You need to sign up for 20 credits of Psychology 800, and should begin accumulating these credits after completing your master's project. You do not need to complete your preliminary examination in order to register for 800 credits.

**Clinical Internship**

Psych 595: Clinical Internship in Psychology

Students enroll in two credits of Psychology 595 during the summer session prior to the start of the internship year. A grade of X will be assigned for the course until the student graduates from the internship.

**COURSE SCHEDULING**

Please remember that not all graduate courses are offered every semester. Furthermore, personnel changes and other scheduling considerations sometimes require modifications to the timetable of classes. It is important that you consult with your faculty advisor (major professor) to plan a schedule that will satisfy your program-of-study. Please respond promptly to feedback from your major professor and the DCT about your course schedule.

## **YEAR-BY-YEAR COURSE GUIDE**

The following information shows the courses which students typically take each year in the clinical program. Students who enter the program with a master's degree should consult with the Director of Clinical Training in regard to which of their previous non-clinical courses (e.g., statistics, social, developmental, history, physiological) will transfer into their Program of Study. Clinical students are required to take the clinical psychology courses.

Important note: The four courses listed below are usually taken in the third and fourth years of study.

1. Psych 504: History of Psychology
2. Psych 550: Attitudes and Social Cognition (Social Psychology)
3. Psych 592: Cognition and Memory
4. HD 511: Human Development

Clinical psychology graduate students are also strongly encouraged to take Counseling Psychology 529, Counselor Supervision. Please contact Professor Brian McNeill in the Department of Educational Leadership and Counseling Psychology ([mcneill@wsu.edu](mailto:mcneill@wsu.edu)) if you would like to take this course.

### **Year-by-Year Course Guide**

#### **Year 1: Fall Semester**

Psych 511: Analysis of Variance and Experimental Design  
 Psych 530: Professional, Ethical, and Legal Issues  
 Psych 535: Personality Assessment and Diagnosis  
 Psych 533: Adult Psychopathology  
 Psych 502: Research Design (2 credits)  
 Psych 506: Brown Bag Luncheon Series with Faculty (1 credit)

#### **Year 1: Spring Semester**

Psych 512: Correlation, Regression, and Quasi-Experimental Design  
 Psych 520: Empirical Approaches to Adult Psychotherapy  
 Psych 539: Intellectual and Neuropsychological Assessment  
 Psych 552: Diversity Issues in Psychology  
 Psych 505: Teaching Introductory Psychology (1 credit)  
 Psych 502: Research Design (2 credits)  
 Psych 506: Brown Bag Luncheon Series with Faculty (1 credit)

#### **Summer: Research on Thesis**

**Year 2: Fall Semester**

Psych 575: Foundations of Neuropsychology  
 or Psych : Child Psychopathology  
 Psych 546: Counseling Services Practicum  
 Psych 545: Psychology Clinic Assessment and Therapy Practicum  
 Psych 702: Master's Project

**Note:** Psychology 575 (or Psychology 574, Behavioral and Clinical Neuroscience) is a prerequisite for Psychopharmacology (Psychology 534).

**Year 2: Spring Semester**

Psych 544: Medical Psychology: Psychological and Pharmacological Interventions  
 or Psych 543: Clinical Child Psychology: Empirical Approaches to Assessment and Therapy  
 Psych 545: Psychology Clinic Assessment and Therapy Practicum  
 Psych 546: Counseling Services Practicum  
 Psych 702: Master's Project

Summer Practicum at one of the clinics

**Note:** The child and adolescent clinic at the University of Idaho Child and Youth Study Center requires students begin this agency placement on approximately June 1. This placement requires a two-year commitment.

**Year 3: Fall Semester**

Psych 534: Clinical Psychopharmacology  
 Psych 514: Psychometrics

**Practicum choices on campus:**

Psych 546: Advanced Counseling Services Practicum  
 Psych 545: Psychology Clinic Assessment and Therapy Practicum  
 Psych 547: Medical Psychology Practicum

**Year 3: Spring Semester**

Psych 800: Dissertation

**Practicum choices on campus:**

Psych 546: Advanced Counseling Services Practicum  
 Psych 545: Psychology Clinic Assessment and Therapy Practicum  
 Psych 547: Medical Psychology Practicum

Summer Practicum at one of the clinics

**Year 4: Fall Semester**

Psych 800: Dissertation

**Practicum choices on campus:**

Psych 546: Advanced Counseling Services Practicum

Psych 545: Psychology Clinic Assessment and Therapy Practicum

Psych 547: Medical Psychology Practicum

**Year 4 : Spring Semester**

Psych 800: Dissertation

**Practicum choices on campus:**

Psych 546: Advanced Counseling Services Practicum

Psych 545: Psychology Clinic Assessment and Therapy Practicum

Psych 547: Medical Psychology Practicum

Summer Practicum at one of the clinics

**Year 5: Twelve month APA approved clinical internship**

Psych 595: Clinical Internship in Psychology (2 credits)

Students enroll in Psych 595 for 2 credits in the summer prior to the start of the predoctoral internship.

**Course Grade Expectations and Consequences**

Only grades of A and B are considered acceptable for graduate courses in the Clinical Psychology Program at WSU. A grade of C is considered failing and will result in a formal warning letter from the DCT and the CTC will develop a remediation plan (e.g., the student may be required to retake the course). Students must also maintain a GPA of 3.0 or better to remain in good standing (see – p. 57 of <http://www.gradschool.wsu.edu/Documents/PDF/PoliciesandProceduresManual2011.pdf>). Practicum courses are graded S (satisfactory) or F (fail). A failure in practicum will likely result in the termination of clinical training.

## **SECTION 3: CLINICAL WORK**

### **CLINICAL PRACTICA**

Clinical training occurs in the following manner. In the second year, students see clients at the University Counseling Services in the fall and spring semesters (Psychology 546) as well as perform psychological assessments (e.g., ADHD and LD evaluations with college students) in the Psychology Clinic (Psychology 545). Students entering the program with a master's degree in clinical psychology may have the option of starting their practicum training in their first year, and should consult with the DCT about this option. In years three and beyond, students have some flexibility in tailoring their practicum training sites to their areas of interest. Beginning in the spring semester of the second year, students are asked to select one or more of the on campus practica (e.g., Psychology Clinic Assessment and Therapy Practicum, Medical Psychology Practicum, and Advanced Counseling Services Practicum) or the agency placement at the University of Idaho Child and Youth Center. Students nearly always receive their first choice.

Unless granted an exception, all students beyond the second year must be involved in one of these practica placements. Students must also be involved in at least one psychotherapy practicum each semester in years three and four.

Students in the fourth year can also select a secondary practicum at an externship site (e.g., Veterans Hospital in Spokane). Involvement at an externship site requires approval by the clinical faculty. Students who wish to take a secondary practicum at an externship site must write a formal letter to the clinical faculty detailing their anticipated time commitment and training plans (including plans for receiving supervision).

Students are required to be involved in summer practicum each summer starting in the summer after the second year. Students may request exceptions to this policy in order to take part in summer clinical externships or research activities in other cities.

The appendix provides a copy of the professional and psychotherapy skills that students are expected to demonstrate in years two, three, and four of their clinical training. The appendix also describes the assessment skills students are expected to master.

### **CLINICAL WORK OUTSIDE THE PROGRAM**

Since the clinical faculty have a responsibility to the profession of psychology to ensure that students show appropriate professional behavior during their training years, it is required that all work of a psychological nature outside of the Clinical Program by students be approved by the clinical faculty. Students should thus not engage in research, therapy, assessment, or the teaching of psychology without the prior approval of the clinical faculty. Students are required to make such requests in writing to the Director of Clinical Training who will then present the request to the clinical faculty.

## CLINICAL INTERNSHIPS

The completion of a full-time 12-month internship is a requirement for graduation from the clinical program. The Ph.D. degree is awarded only when both the internship and dissertation are completed. Students are expected to begin the internship at the start of their fifth year.

The clinical program fully conforms to the APPIC (Association of Psychology Postdoctoral and Internship Centers) procedures and requirements pertaining to doctoral clinical internship application and acceptance. You should be versed in those policies and procedures early in the academic year immediately preceding your internship year. These policies and procedures can be found online at <http://www.appic.org/> and <http://www.natmatch.com/psychint/> **The CTC requires that the internship agencies to which you apply be accredited by the American Psychological Association (APA).** If you wish to apply to an internship that is not APA accredited, you must receive approval from the CTC before submitting the application. Please provide a written justification to the CTC, who will then consider your request.

Students usually apply for internship in the fall semester of their fourth year. Students are not allowed to apply for internships until they have passed their preliminary examination and their dissertation proposal has been approved by their committee. In addition, the student's clinical readiness for internship is evaluated by the clinical faculty in the semester prior to the application process. You are not permitted to apply for doctoral internship until the CTC has judged you to be internship ready.

Early in the Fall semester, members of the CTC will meet as a group with the prospective interns for the purpose of discussing the internship application process and communicating guidelines. The DCT, as well as the other CTC members, will help you identify potential internship facilities that might be a good match for you and assist you with specific items on the internship application form. The CTC fully understands that the internship interviews will require that you be away from campus, and your schedules (e.g., clinic duty, assistantship hours) will be adjusted accordingly. On APPIC Phase I Match Day, the DCT and other members of the CTC will be available to consult with any student who receives notification that they did **not** match with an internship program. The DCT and CTC can provide further information and assistance with the application for APPIC Phase II Match, if the student decides to apply for the Phase II Match.

Your doctoral clinical internship agency may provide the DCT with periodic evaluations (e.g., mid-year) of your progress. These evaluations, in turn, will be made available to the CTC. We will not award credit for internship until the director of training at the internship site has informed us that you have fully completed all requirements. The Ph.D. in clinical psychology will not be awarded until all program requirements have been met, including completion of the doctoral clinical internship. **Thus, you will not graduate from the clinical program when even a small portion of your internship requirement remains to be completed.** The DCT will not certify to the Graduate School or Registrar's Office that your internship has been completed until confirmation of that fact has been provided by the appropriate authority.

## SECTION 4: STUDENT PROGRESS

## FILING YOUR PROGRAM

Students obtain the following forms from the Graduate School webpage with the exceptions of numbers 2 and 4. The Graduate School webpage will note the deadlines each semester for the completion of the scheduling forms for the final defense of the master's project, the preliminary examination, and the dissertation. Students should consult the webpage of the Graduate School for these deadlines ([www.gradsch.wsu.edu](http://www.gradsch.wsu.edu))

The Program of Study for the Master's Degree and the Program of Study for the Doctoral Degree must be submitted to the Director of Clinical Training for review and approval prior to seeking approval from the Departmental Chair.

1. Program for Master's Degree (Graduate School Form)  
This form needs to be completed during the second semester in the program.
2. Master's Project Proposal Approval Form (Departmental Form)  
The student's committee completes this form after the successful defense of the proposal.  
This form may be obtained from the Director of Clinical Training.
3. Master's Project Schedule Defense Form, (Graduate School Form)  
This graduate school form needs to be completed prior to the final defense of the project.
4. Program for Doctoral Degree (Graduate School Form)  
This form is completed after the completion of the master's degree.
5. Preliminary Examination Scheduling Form (Graduate School Form)  
This form is completed after the filing of the "Program for Doctoral Degree" form (see 3 above).
6. Dissertation Proposal Approval Form (Departmental Form)  
The student's committee completes this form after the successful defense of the dissertation proposal.
7. Dissertation Schedule Defense Form (Graduate School Form)  
This graduate school form needs to be completed prior to the final defense of the dissertation.

The graduate school Policies and Procedure Manual may be found at <http://www.gradsch.wsu.edu/CurrentStudents/PoliciesAndProcedures/>

## MASTERS DEGREE

All students are expected to obtain an M.S. degree on their way to the Ph.D., unless they come with an acceptable master's degree from another institution. M.S. theses from other institutions should be submitted to the Director of Clinical Training early in the first semester so that acceptability of the thesis can be determined as soon as possible.

The “non-thesis” M.S. program involves the completion of a publishable paper rather than a formal thesis. It includes at least 30 credit hours, including a minimum of 26 hours of graded course work plus a minimum of 4 credits of Master's Special Problems (Psychology 702). It also requires the completion of the year-long practicum at the University Counseling Services (Psych 546).

The “non-thesis” paper should be a report of an original piece of empirical research performed by the student. Although the demands for comprehensiveness of treatment, scope, and impact on the field are less than in the dissertation, the research should be original and of publishable quality. Every effort should be made by the student and his/her chairperson to publish the work. Normally it is better strategy in the planning and execution of master's research to address a single question in an elegant and clear manner than to attempt to answer several questions in an unclear and inconclusive manner. The usual emphasis should be on simplicity and elegance rather than on comprehensiveness.

Most decisions regarding format, length, and organization are up to the master's committee. Unless the intention is to publish in a non-APA journal, the non-thesis or thesis paper should be written in the style described in the Publication Manual of the American Psychological Association: <http://www.apa.org/>

### **Procedures for Non-Thesis Research Project**

During the first year of residence, the student selects a faculty member to chair her/his master's committee and direct the master's thesis or project. The chairperson must be a member of the Psychology Department faculty.

The master's committee consists of three or more faculty members, including the chairperson, with a minimum of three members from the Psychology Faculty (exceptions must be approved by the Clinical Faculty and the Department Chair). During the Spring semester of their first year, students complete a brief thesis prospectus (see Appendix) and make a brief presentation to the program faculty describing the study that they plan to do. When the student has finished a research proposal, a meeting of this committee is held (the T-1 meeting) to discuss and approve the research plan. With the approval of the master's project proposal by the committee, the members of the committee then sign the Proposal Approval form. This form is available from the Director of Clinical Training. This form is placed in the student's file.

With the successful defense of the proposal and approval from the Institutional Review Board, the student then begins the data collection process. Students do not begin the collection of thesis or dissertation data until their proposal has been approved by all of their committee. Students planning to use archival data should consult with their committee chairperson about the appropriate procedure for informing their committee.

**DATA COLLECTION MAY NOT BEGIN UNTIL THE APPROVAL FORM HAS BEEN RECEIVED FROM THE IRB AND PLACED IN YOUR FILE.**

After the research and paper are completed, an oral examination is conducted (the T-2 meeting). The oral examination is a public meeting. All Psychology Department members are encouraged to attend. Students are welcome but may not participate in the examination.

It is expected that the student will *complete the T-2 by the end of the second year* of residence.

A copy of the master's paper must be in the main office of the Psychology Department at least 1 week before the oral examination. An electronic copy of the final version of the thesis must be given to the Department of Psychology.

The student should consult the "Policies and Procedures" of the Graduate School (as described in the Graduate Study Bulletin; <http://www.gradsch.wsu.edu/policiesprocedures.html>) for university requirements. Since specific requirements change periodically, the student should contact the Graduate School early in the master's project for information about program, examination, and graduation forms to be filed and deadlines for each. Currently, for example, the forms to schedule the defense of the master's project must be turned into the Graduate School a minimum of ten days prior to the defense.

## **THE DOCTORAL DEGREE**

The Ph.D. program must include at least 72 credit hours of course work and research including a minimum of 34 hours of graded course work. In addition, a preliminary examination and dissertation are required. Preliminary examinations occur during the third year.

### **1. The Preliminary Examination**

Students will usually take their preliminary examination during the spring semester of their third year.

The purpose of the preliminary examination is for students to demonstrate their ability to independently master and integrate psychological knowledge in a manner that goes beyond the material taught in the clinical courses. This goal represents one way that the program attempts to meet the objective 3e from the Guidelines and Principles for Accreditation of Programs in Professional Psychology. This objective is:

3. In achieving its objectives, the program has and implements a clear and coherent curriculum plan that provides the means whereby all students can acquire and demonstrate substantial understanding of and competence in the following areas:

- (e) Attitudes essential for life-long learning, scholarly inquiry, and professional problem-solving as psychologists in the context of an evolving body of scientific and professional knowledge.

Since the knowledge domains of clinical psychology are constantly changing, it is considered important that students demonstrate their ability to master particular areas of clinical psychology in an independent manner that goes beyond the knowledge taught in the clinical courses. The program provides two ways for the students to demonstrate these skills

### Option 1: Specialty Examination

For the specialty examination the student will select three areas from the following areas for their examination:

1. Psychological Assessment
2. Adult Psychopathology
3. Child Psychopathology
4. Psychotherapy with Adults
5. Psychotherapy with Children
6. Neuropsychology/Neuropsychological Assessment
7. Cultural and Diversity Issues in Clinical Psychology
8. Professional, Ethical, and Legal Issues
9. Health Psychology
10. Clinical Research Design and Methodology (e.g., psychotherapy outcome research, program evaluation)

Students may also suggest an area for study to the clinical faculty for consideration. The area must be approved by the clinical faculty.

After the student has decided on the three areas, the student will then form a preliminary examination committee consisting of at least three faculty from the Department of Psychology. The student with guidance from his or her committee will create a reading list for each area. This reading list will be considered a framework to guide the student's preparation as the student will be expected to go beyond this reading list (e.g., current journals) in her or his preparation. When the student is ready, the student will take three, 4 hour examinations, one on each of the three areas. The number of questions on the examination will be determined by the student's committee and the student's committee will have the responsibility for the evaluation of the student's performance on the examination. Students may be given a second attempt to pass the examination. Failure to pass the examination on the second attempt results in dismissal from the program according to the rules of the graduate school.

### Option 2: Specialty Paper

For the specialty paper, the student will form a committee consisting of at least three faculty from the Department of Psychology. The purpose and format of this paper will be similar to the articles that appear in such journals as **Psychological Bulletin** and **Clinical Psychology Review**. Students who are considering this option may wish to review recent issues of these journals to obtain a better understanding of the purpose and format of the specialty paper. The paper must represent a scholarly review, integration, and/or theoretical analysis of a topic area that makes a contribution to the literature. The length of the paper should not exceed the length that would be publishable as a review article in a journal.

In conjunction with the chair of the committee, the student will first decide on the topic and prepare a tentative outline for the paper. Once the chair has approved this outline and the student has discussed

the outline with the other committee members, then the student will give an oral presentation (e.g., 20 min) on the framework of the paper to the committee. The outline should be approximately two to four pages. The outline should convey the sense that there is sufficient literature to support the paper, but does *not* need to include most or all of the references that will eventually be used.

Once the committee has approved the outline for the paper, the student will then write the paper. When the student has finished the paper, the student will give a copy to the major professor and once it is acceptable to the major professor, the other committee members will receive a copy of the paper. The committee will provide the student with written feedback on this version of the paper. The student will then prepare a revision of the paper. With the completion of the revision, the student will give the paper to the committee again. After each committee member has read the paper, the student and chair will schedule the balloting meeting (to schedule the ballot meeting requires the completion of a Graduate School Form, the Preliminary Examination Form). At this meeting the student will give a twenty-minute summary of the paper. After this summary, the student will be asked questions about the paper by the committee.

If the student's paper/presentation does not receive a passing vote at the balloting meeting, the student may be given a second attempt to rewrite the paper and prepare a second presentation. Failure to pass on the second attempt results in dismissal from the program according to the rules of the graduate school.

In many cases, it is most sensible and expeditious to write a specialty paper that will also serve as the bulk of the dissertation proposal. This is encouraged. In this case, the dissertation proposal largely overlaps with the specialty paper, with additional information regarding the proposed dissertation study, and the deletion of material that is not relevant to the proposed dissertation. It is also permitted to combine the preliminary examination defense with the dissertation proposal meeting, if the committee agrees to this format.

### Option 3: Grant Application

Students are also encouraged to submit their own extramural funding proposals (i.e., grant applications), which represents a third option for the preliminary exam. The experience of writing a grant application requires independent mastery and integration of psychological knowledge, and can be an invaluable training experience early in one's career. The prototypical graduate student grant application is the Ruth L. Kirschstein National Research Service Awards for Individual Predoctoral Fellows (F31). These applications are formatted similarly to faculty grant awards, and require sections in which existing scientific literature is reviewed. Other student funding mechanisms, such as the Graduate Council Research Fellowship from the National Science Foundation, though encouraged, are too limited in scope to meet requirements of the preliminary exam. Students who wish to consider applying for a fellowship from some other agency, and to use that application for the preliminary exam, must receive clearance from their committee in advance if the F31 (see above) is not their chosen mechanism.

The procedure for forming a committee and proposing the project is the same as for Option 2. However, because the grant review process takes a considerable amount of time, students who wish to pursue this option are encouraged to begin planning in advance (i.e., start discussing the project and forming a committee before completing the master's thesis).

## 2. The Dissertation

Following successful completion of the preliminary examination, the student officially becomes a candidate for the Ph.D. degree. Many of the considerations that define an appropriate dissertation and its approach, type of data, design, etc. are dictated by the nature of the problem chosen for study and cannot adequately be anticipated or delineated in a formal policy statement. However, in general, the dissertation is a scholarly, original study that represents a significant contribution to the knowledge base of psychology. It should be a major piece of research, comprehensive in scope. Generally, a dissertation should be designed with strong theoretical underpinnings, rather than being strictly exploratory.

### **Students cannot apply for internship until the dissertation proposal has been approved.**

The dissertation committee consists of a minimum of three faculty members from the Department of Psychology. The dissertation must deal with a problem that lies within the doctoral committee chairperson's direct expertise and not in an area with which he/she is only marginally acquainted.

After the chair has approved the student's proposal, the student then gives the other committee members a copy of the proposal. After the committee members have had an appropriate amount of time to read the proposal (i.e., at least 10 working days), the student then schedules a meeting for the oral defense of the proposal. This meeting is referred to as the D-1. The Dissertation Proposal Approval Form must be signed by the committee members after this meeting and placed in the student's file.

With the successful defense of the proposal and approval from the Institutional Review Board, the student then begins the data collection process.

### **DATA COLLECTION MAY NOT BEGIN UNTIL THE APPROVAL FORM HAS BEEN RECEIVED FROM THE IRB AND PLACED IN YOUR FILE.**

After the research and dissertation are completed, a final oral examination is conducted (the D-2 meeting). Primary responsibility for conducting this examination belongs to the doctoral committee, but it is a public meeting, open to any member of the public at large. Students also are welcome to attend the meeting.

At least 10 working days prior to the oral defense (D-2), the student must deliver a complete copy of the dissertation to the Department. This copy can serve as the public copy and be displayed at a public place designated by the department. Following the oral examination, a bound copy of the dissertation (including signature page) must be placed in the Psychology Department's permanent collection no later than the date of graduation. Binding and photocopy expenses will be borne by the student.

The student should consult the "Policies and Procedures" of the Graduate School (as described in the *Graduate Study Bulletin*; <http://www.gradsch.wsu.edu/policiesprocedures.html>) for university requirements. Since specific requirements change periodically, the student should contact the Graduate School early in the dissertation project for information about program, examination, and graduation forms to be filed and *deadlines* for each.

## **THE PREPARATION AND EVALUATION OF MASTER'S PROJECT AND DISSERTATION PROPOSALS**

As mentioned above, both the dissertation research and the master's research require a formal research proposal that is evaluated in a meeting of the doctoral or master's committee. The following is a guide to the preparation of such proposals and the conduct of the appropriate meetings. It is intended as a guide only, and the degree to which it is adhered may vary somewhat, depending on the chairperson of the relevant committee.

### **1. Orientation**

- a. The meeting at which the non-thesis research proposal is presented to the master's committee generally is referred to as the "T-1" meeting, and that at which the dissertation proposal is presented to the doctoral committee is referred to as the "D-1" meeting.
- b. The function of the T-1 or D-1 meeting is discussion and evaluation of the proposal, resulting in a judgment of feasibility and scientific merit and an action accepting the proposal, recommending changes, or rejecting the proposal.

### **2. Selection of the committee**

- a. The selection should involve faculty most knowledgeable in the area of the research.
- b. The student and the committee chair will develop a list of possible committee members. Thereafter it is the student's responsibility to contact these nominees to determine their willingness to serve and to prepare all necessary forms.

### **3. Preparation of the proposal**

- a. The relative involvements of student and chairperson may vary rather widely, depending on the people involved, the student's background, and the nature of the problem. It is of value to discuss relative contributions, responsibilities, and authorship at this stage. The American Psychological Association's *Ethical Principles of Psychologists* should be the guide.
- b. The student, under the direction of the chairperson, is responsible for a literature search, identification and contact with current researchers, preparation of the proposal, and ensuring the development of required skills and competencies. The student is also responsible for consideration and solution of logistical problems related to the research.
- c. Other members of the committee may be involved at this stage in a "consultant" capacity.
- d. The chairperson of the committee should edit and give preliminary approval of the proposal before it is submitted to the other committee members.

### **4. Format of the proposal**

- a. Title, name of investigator, and abstract.

- b. Statement of the major objectives of the work and its significance in relation to the present state of knowledge in the field and to other work in the field.
- c. Summary of relevant research literature, including details germane to the proposed research. Considerable care should be taken with this, for it is used as an index of scholarly preparation for the project.
- d. A step-by-step theoretical and/or empirical development of the questions of hypotheses to be investigated.
- e. Methods
  - 1. Participants, including relevant background information concerning development, health, age, sex, species, and the like.
  - 2. Measures.
  - 3. Equipment.
  - 3. Design.
  - 4. Procedure. This should include a step-by-step analysis of preliminary and experimental treatments, and a rationale for what is to be done, including controls. Procedural contingencies, depending on outcomes, also should be described.
  - 5. Principal procedures for data analyses should be described, and supplemental analyses where appropriate.
- f. A statement of expected results or whenever possible preliminary results. It is usually a good idea to consider other outcomes and show how something productive can be said about the problem regardless of outcome.
- g. A general statement of the significance of the potential outcome(s).

## **5. Preparation for the T-1 or D-1 meeting**

- a. The T-1 and D-1 meetings will include the student, his/her committee, and any other faculty who wish to attend the meeting.
- b. Multiple copies of the complete proposal should be prepared, one for each member of the committee. In the case of the D-1 proposal, a copy must be placed in the main office of the Psychology Department for other faculty members to read. This copy should be distributed at least 5 days prior to the meeting.
- c. It is the student's responsibility to determine the availability of committee members and to schedule a time and place for the meeting. The chair of the committee will notify the clinical faculty as to the time and location of the D-1 meeting.

## **6. Procedures in the T-1 or D-1 meeting**

- a. The meeting generally is informal, but the degree of formality varies with chairpersons and committees. The D-1 is more formal than the T-1.
- b. Regardless of the formality, the student usually is asked to cover most of the following list of topics in a presentation that lasts approximately 30 minutes. Most of these

admittedly concern what already is available in the proposal, but they remind the committee of details, help maintain a logical order, and permit the student briefly to summarize the proposal.

1. Statement of background, interests, and professional goals of the student (this should be very brief).
  2. Why do you have a particular interest in this problem area? How is it related to your goals?
  3. Theoretical or empirical background, leading to a precise statement of hypotheses or questions to be investigated.
  4. Statement of procedures, including subjects, apparatus, steps in procedure, and time schedule.
  5. Description of design, showing how the design will answer questions.
  6. Statement of predicted results.
  7. Description of proposed statistical treatment.
- c. Committee questions may relate to any of the above points, or to any other matters relevant to the dissertation and/or the student's graduate and professional experience.

#### **7. The committee's role and responsibility:**

- a. The committee members judge the significance, soundness, and feasibility of the proposed research and the ability of the student to carry it to a successful conclusion.
- b. The action of the committee at this meeting may be:
  1. To accept the proposal as presented.
  2. To suggest changes in the procedure.
  3. To suggest limitation or expansion in the scope of the research.
  4. To suggest a different emphasis or direction.
  5. To reject the proposal.
- c. Actions 2), 3), 4), or 5) above may or may not require additional meetings of the committee.
  1. If an additional meeting is scheduled, responsibilities for scheduling, distribution of materials, etc. should be as described above.
  2. If an additional meeting is not required but changes are needed, the student should prepare a statement of those changes and distribute a copy to each committee member.
- d. Rejection of the proposal generally results in the selection of a new problem. Depending on how much this deviates from the original problem, a change in committee or chairperson may be warranted.

#### **8. Relations with committee during conduct of research**

- a. The chairperson should be cognizant of progress in all stages of the research.

- b. Periodic informal reports of progress should be made to other committee members either by the student or the chairperson.
- c. Significant changes in design or procedure should be reported to each member of the committee. The determination of "significant" will be made by the student and his/her chairperson.
- d. Additional meetings of the committee may be called at the discretion of the chairperson. Otherwise, the other committee members serve in a consultant capacity.

## 9. **Grievances**

Grievances by the student, if not resolvable, may be discussed with one or more of the following: the committee chairperson, the Director of Clinical Training, and the department Chair. If the matter cannot not be resolved at the Department level, the student can seek resolution at the College or University level, as described in WSU policies for student conduct. Please see [www.gradsch.wsu.edu](http://www.gradsch.wsu.edu)

## **FUNDING**

There are a variety of financial assistance programs available within the Department of Psychology. The most common forms of support are teaching and research assistantships. Other forms of support are teaching and work-study stipends. Acceptance into the graduate program does not guarantee financial support, but the vast majority of the students in the program in recent years have received support. **You should become a state of Washington resident as soon as possible.**

### **Your Job as a TA or RA**

If you hold a teaching or research assistantship appointment, your duties will be determined after the class schedules and job preferences of all TAs and RAs are known. The assignment of TAs is a complex juggling act: trying to avoid requiring a TA to be two places at the same time and satisfying as many people's preferences as possible. Kendra Cochrane will be able to help you if you have questions or problems.

Your appointments are renewed annually, if funds are available. If you are a TA/RA, your appointment begins August 16. So plan your arrival in Pullman accordingly and be here in time to begin performing your duties.

The following is the departmental policy concerning financial (TA, RA, fellowship) assistance for graduate students. Note that eligibility is not meant to imply any guarantee of support. Other circumstances such as availability of funds must be considered in granting financial assistance.

Persons who enter the Ph.D. programs without prior graduate school experience will ordinarily be eligible for financial support during their first 4 years in residence. Under ordinary circumstances students will be eligible for 2 years of support prior to completion of the M.S. degree. Persons who have not completed all requirements (including an oral exam) for the M.S. degree by August 1 of their second year will have a lower probability for funding in their third year relative to students who have completed their master's project by this date.

The Department Chairperson has the responsibility of judging what circumstances are "extra-ordinary" when exceptions are appropriate and the level of support to be granted to individual students.

A couple of reminders: Students on TA appointments must be registered for 18 credit hours. You must maintain at least a 3.0 GPA, have no outstanding incomplete grades of more than one semester or summer session's duration, and be doing the job that is required of you. It is rare that a TA/RA appointment is revoked; however, it is your responsibility to see that neither the department nor you are put in an uncomfortable situation.

Application of these criteria, based on "normal" progress, is made difficult by the inevitable extenuating circumstances. In addition, state funds are allocated on the basis of teaching needs, so that specific departmental teaching needs must be taken into account. In general, a student's priority for departmental support each year will be increased by such factors as normal progress and the ability or experience required to meet specific departmental needs. A student's priority for departmental support will be reduced by lack of normal progress or by exceeding eligible years of support. The Chair does not make final decisions about "non-departmental" support, such as research assistantships supported by grants, or about positions outside the department.

### **Clinical Assistants (CA)**

The Psychology Clinic has three CA positions. Teaching assistantship monies funds these CA positions. Students may apply for these CA positions in their third and fourth years in the program.

## **STUDENT EVALUATIONS**

The Council of Chairs of Training Councils developed a model policy for the comprehensive evaluation of student competence in professional psychology programs. The clinical psychology program at Washington State University has adopted this policy (see [www.psychtrainingcouncils.org](http://www.psychtrainingcouncils.org)). The next three paragraphs describe this model policy with the final paragraphs in this section describing the implementation of this policy within the clinical program at Washington State University.

Students and trainees in professional psychology programs (at the doctoral, internship, or postdoctoral level) should know—prior to program entry, and at the outset of training—that faculty, training staff, supervisors, and administrators have a professional, ethical, and potentially legal obligation to: (a) establish criteria and methods through which aspects of competence other than, and in addition to, a student-trainee's knowledge or skills may be assessed (including, but not limited to, emotional stability and well being, interpersonal skills, professional development, and personal fitness for practice); and, (b) ensure—insofar as possible—that the student-trainees who complete their programs are competent to manage future relationships (e.g., client, collegial, professional, public, scholarly, supervisory, teaching) in an effective and appropriate manner. Because of this commitment, and within the parameters of their administrative authority, professional psychology education and training programs, faculty, training staff, supervisors, and administrators strive not to advance, recommend, or graduate students or trainees with demonstrable problems (e.g., cognitive, emotional, psychological, interpersonal, technical, and ethical) that may interfere with professional competence to other programs, the profession, employers, or the public at large.

As such, within a developmental framework, and with due regard for the inherent power difference

between students and faculty, students and trainees should know that their faculty, training staff, and supervisors will evaluate their competence in areas other than, and in addition to, coursework, seminars, scholarship, comprehensive examinations, or related program requirements. These evaluative areas include, but are not limited to, demonstration of sufficient: (a) interpersonal and professional competence (e.g., the ways in which student-trainees relate to clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (b) self-awareness, self-reflection, and self-evaluation (e.g., knowledge of the content and potential impact of one's own beliefs and values on clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (c) openness to processes of supervision (e.g., the ability and willingness to explore issues that either interfere with the appropriate provision of care or impede professional development or functioning); and (d) resolution of issues or problems that interfere with professional development or functioning in a satisfactory manner (e.g., by responding constructively to feedback from supervisors or program faculty; by the successful completion of remediation plans; by participating in personal therapy in order to resolve issues or problems).

This policy is applicable to settings and contexts in which evaluation would appropriately occur (e.g., coursework, practica, supervision), rather than settings and contexts that are unrelated to the formal process of education and training (e.g., non-academic, social contexts). However, irrespective of setting or context, when a student-trainee's conduct clearly and demonstrably (a) impacts the performance, development, or functioning of the student-trainee, (b) raises questions of an ethical nature, (c) represents a risk to public safety, or (d) damages the representation of psychology to the profession or public, appropriate representatives of the program may review such conduct within the context of the program's evaluation processes.

Within the Ph.D. program in clinical psychology at Washington State University, each student's professional competence and progress toward the Ph.D. are evaluated in a number of ways—course grades, practicum performance, professional behavior, progress on thesis, preliminary examinations, and on the dissertation. All aspects of a student's progress (completion of program requirements and acquisition of professional, clinical, teaching, and research skills) are evaluated annually by the clinical faculty.

At the end of the fall semester, the clinical faculty reviews each student's progress through the program. The primary purpose of this midyear review is to identify students having difficulties and to put in place a plan to aid the student with their continued advancement in the program. The Director of Clinical Training and the student's advisor are responsible for meeting with those students identified as of concern and documenting a course of remedial action. More formal evaluations are completed at the end of the spring semester each year. Prior to this evaluation meeting, students complete a form that summarizes their performance in their courses, practica, teaching, and research. Students provide the Director of Clinical Training and their advisor a copy of this form prior to the student evaluation meeting. Students also meet with their advisor prior to the meeting to discuss their progress. The Director of Clinical Training also obtains written evaluative information from students' clinical, teaching, and research supervisors prior to the student evaluation meeting.

The entire clinical faculty attends the evaluation meeting in the spring semester. In addition, experimental faculty who have input to provide are encouraged to attend or, if they cannot attend the meeting, are asked to provide their input in writing. Since many students see clients at the Counseling Services, the Director of the Counseling Services also attends this meeting. Other clinical supervisors

from the Counseling Services attend at times as well. At this meeting each student's progress toward graduation is discussed in detail on a number of professional competence dimensions:

- (1) quality of academic work;
- (2) overall clinical skills;
- (3) overall research skills;
- (4) progress through the program;
- (5) performance of assistantship duties;
- (6) openness to supervision and responsiveness to feedback;
- (7) interpersonal and professional competence;
- (8) self-awareness;
- (9) manifestation of appropriate professional and ethical behavior;
- (10) problem areas, if any, and suggestions for remediation; and
- (11) evaluation of overall professional competence and progress.

The student's advisor summarizes the comments of the faculty as these various areas are discussed for each student in this meeting. With the completion of the meeting, the student's advisor meets with the student to provide the student with verbal and written feedback (i.e., the student is provided with a copy of the evaluation form). If students have any questions about their evaluation, they may also meet with the Director of Clinical Training. In addition, whereas formal feedback is provided once per year, students should feel free to discuss all aspects of their progress through the program with their advisor or the Director of Clinical Training at any time. Significant deficits in the student's progress on the professional competence dimensions (see above) can result in the clinical faculty recommending to the Graduate School at Washington State University the dismissal of a student from the program.

The Appendix contains a copy of the yearly student evaluation form. This form is used by the faculty to evaluate the student's progress on the above eleven dimensions.

The Graduate School at Washington State University requires that all departments/programs conduct an annual review of each graduate student in the spring semester (see Academic Procedures and Standards at [www.gradschool.wsu.edu](http://www.gradschool.wsu.edu)). The spring evaluation of the clinical psychology graduate students covers all the requirements of the Graduate School (i.e., course work, research, examinations, and progress toward graduation). The evaluation of the clinical students also covers other aspects of professional competence as described above.

### **LEAVES OF ABSENCE**

Students who have personal difficulties (e.g., serious illness) that prevent them from participating in the program for a given period of time may request a leave of absence from the program for one year. Further requests for leave will be evaluated after that period. To request a leave of absence, the student submits a request for a leave to the Director of Clinical Training for consideration. The Director of Clinical Training will then forward the recommendation to the Department Chair who is responsible for Departmental approval. If approved at the Departmental level, the Chair forwards the request to the Graduate School for consideration. The Policies and Procedures Manual of the Graduate School provides additional information on the Leave of Absence Procedure.

### **GRADUATE STUDENTS' OBLIGATION TO ETHICAL BEHAVIOR**

## **Adherence to the Ethical Principles and Code of Conduct of the American Psychological Association**

You will be governed by the applicable principles of the current version of the American Psychological Association's **Ethical Principles and Code of Conduct** during the time you are in graduate school. The ethical principles and code of conduct can be obtained online from the following website: <http://www.apa.org/ethics/code/index.aspx>. You will be asked to read this document in the first week of your training, and to sign a form to indicate that you have read this document. You will abide by its standards throughout your training at WSU (and beyond!). Violations of these principles and standards may constitute grounds for dismissal from the program.

The APA Ethics Code will be discussed formally in Psych 530: Professional, Ethical, and Legal Issues, including implications and applications for graduate students in training. Students will also have many formal opportunities for discussion of ethical principles throughout their coursework, research, and clinical experiences as well as have the opportunity to apply these principles in a variety of settings.

### **Academic Honesty**

Plagiarism is scholarly theft, and it is defined as the unacknowledged use of secondary sources. More specifically, any written presentation in which the writer does not distinguish clearly between original and borrowed material constitutes plagiarism. Because students, as scholars, must make frequent use of the concepts and facts developed by other scholars, plagiarism is not the mere use of another's facts and ideas. However, it is plagiarism when students present the work of the other scholars as if it were their own. Plagiarism is a serious offense. *An act of plagiarism within a course may lead to a failing grade on the assignment, paper, or exam in the course as well as other sanctions. An act of plagiarism in a thesis, dissertation, or other research contribution will also be met with severe consequences that may include termination from the program.*

## **PROFESSIONAL BEHAVIOR AND STANDARDS OF CONDUCT**

Students are expected to attend all classes, TA/RA meetings, team meetings, and scheduled supervision sessions. Students must receive permission from their instructor for any absences except in the case of illness or other emergency. Students are also expected to respond to emails or other messages from the DCT, other program faculty, or their supervisors in a timely manner.

### **Public Professionalism - Websites, Blogs, Email, and Voicemail**

Increasingly, as information becomes more widely available through the internet, lines between public and private information are blurring. Many students have websites, blogs, email signature lines, and voicemail/answering machine messages that are entertaining and reflect their personal preferences and personalities. However, students should consider the potential impact of this information on their professional image. For example, if the student uses his/her telephone or email account for professional purposes, clients, research participants, and potential employers may view the student as less professional than desired. Also, according to information collected by the Council of University Directors of Clinical Psychology, clients, graduate and internship programs, and potential employers may all conduct internet searches and use the resulting information in decisions about therapy, or job interviews or offers. Legal authorities also view websites for evidence of illegal activities.

Students should also note that if they identify themselves as a graduate student in the program or reveal information relevant to the graduate program in their email signatures, voicemail files, or website/blog information, then this information becomes part of their program-related behavior and may be used in student evaluations. For example, if a student reports doing something unethical or illegal on a web blog, or uses the website to engage in unethical or unprofessional behavior (e.g., disclosing confidential client or research information), then the program may use this information in student evaluation, including decisions regarding probation or termination.

Thus, students are encouraged to consider the use of personal web pages and blogs, email, and other electronic media carefully. They should attend to what content to reveal about themselves in these forums, and whether there is any personal information that they would not want program faculty, employers, or clients to read or view. Anything on the World Wide Web is potentially available to all who seek. Students who use these media should also consider how to protect the security of private information.

### **Use of Laptops in Class**

Student use of laptop computers is permitted in class insofar as they are used for note-taking and in compliance with course syllabi and instructor guidelines. The use of laptops for other purposes (e.g., Facebook, instant messaging, video chat, playing games, internet browsing, etc.), except as explicitly authorized by the course instructor, constitutes unprofessional behavior. The use of other electronic devices during class is prohibited. Students misusing laptops or using other electronic devices during class (e.g., texting on cell phones) may be dismissed from class and may receive other disciplinary consequences at the discretion of the instructor and/or the CTC. Professional behavior constitutes an important domain in faculty evaluation of student performance.

## **GRIEVANCE PROCEDURES**

Grievances or problems should first be directed to the relevant faculty member or student's committee Chair. If there is a failure to resolve the matter at that level, the matter should be referred to the Director of Clinical Training. If there is a failure to resolve at that level, the matter should be referred to the Department Chair for resolution. If the matter cannot not be resolved at the Department level, the student can seek resolution at the College or University level, as described in WSU policies for student conduct. Please see [www.gradsch.wsu.edu](http://www.gradsch.wsu.edu)

## **METHODS USED TO FACILITATE PROGRESS OF STUDENTS EXPERIENCING DIFFICULTY IN THE PROGRAM**

When a student experiences difficulties in the training program, several steps may be taken. These include, but are not limited to: (a) reducing the student's course load, (b) approving a request for a leave-of-absence, (c) referring a student for medical treatment or psychological therapy, (d) requiring additional semesters of practicum or other clinical experience beyond the minimum normally required by the program, and (e) providing additional faculty mentoring and encouragement.

## **POLICIES AND PROCEDURES TO TERMINATE THE ENROLLMENT OF STUDENTS**

The attrition rate in the clinical program is low. When a student does leave, it is usually for a personal reason (e.g., incompatible program fit) rather than an academic reason. There have been a few

instances in the past, however, when students have been counseled out of the program, and there have been instances when students were terminated for academic reasons. Failure to meet Program, Departmental, or Graduate School requirements (e.g., timeline on research, passing the comprehensive exam) is grounds for termination. Unethical behavior, such as plagiarism and other forms of academic dishonesty, is also grounds for termination.

### **RECOMMENDATION TO RETAIN YOUR SYLLABI**

It is recommended that you permanently retain a copy of the course syllabus for each of the graduate courses you take during your program-of-study at WSU, as well as a copy of the **Graduate Bulletin**. Such information is occasionally useful to various state licensing boards, to the National Register of Health Service Providers in Psychology, or to other agencies as they review your application for licensure or other credentialing.

### **A DATE YOU MAY NEED TO KNOW IN THE FUTURE**

Our graduates occasionally call to obtain the date the clinical psychology program at WSU was initially accredited by the American Psychological Association. Such information is sometimes called for on various application forms. The WSU doctoral program in clinical psychology has been fully accredited by the American Psychological Association since February 14, 1956.

### **A FINAL REQUEST**

**Please keep your address, e-mail, and telephone number current with the DCT, the Psychology Department, and the WSU Alumni Office after you graduate!** The program or the department occasionally finds it necessary to contact its graduates, and it is important that we maintain up-to-date contact information, particularly to gather information from our past graduates that is needed for reaccreditation.

## Appendix

**WASHINGTON STATE UNIVERSITY  
CLINICAL PSYCHOLOGY GRADUATE PROGRAM  
SUPERVISION EVALUATION FORM**

Note: This form evaluates clinical micro skill performance as appropriate for the student's practicum year of training.

Student:

Supervisor:

Current Semester/Yr:

Date:

Student's Practicum Yr:                      1<sup>st</sup>                                      2<sup>nd</sup>                                      3<sup>rd</sup>                                      4<sup>th</sup>                                      5<sup>th</sup>

**Progress:** VG (Very Good), G (Good), S (Satisfactory), NW (Needs Work), US (Unsatisfactory), N/O (Not Observed).

1.	<b>Professional Standards:</b>	<b>Progress</b>
<b>All Years</b>	a. Works within the guidelines of APA, state, and federal regulations for practicing psychology (requires appropriate consultation and supervision)	
	b. Openness to supervisory feedback which includes accepting direction, willingness to acknowledge and correct errors, and follow through on recommendations	
	c. Prepares for supervision (tapes, files, self awareness, understanding, and reflection)	
	d. Works collegially and collaboratively with fellow professionals, peers, and staff	
	e. Timeliness – completing notes, reports, arriving promptly for meetings and appointments	
	f. Completes client files at the end of the semester in accordance with clinic policy	
	g. Maintains an organized, disciplined approach to writing and maintaining notes and records	
<b>2.</b>	<b>Diversity:</b>	
	a. Knowledge of self (worldview including beliefs, values, attitudes, biases, stereotypes, stimulus value, and related strengths/limitations) and how this effects clinical work with diverse others	
	b. Knowledge about the nature and impact of diversity in different clinical situations (e.g., clinical work with specific racial/ethnic populations)	
	c. Multicultural competence in assessment and treatment by seeking appropriate consultation, research/reading, and supervision	
<b>3.</b>	<b>Skills in the Application of Theory and Research:</b>	
	a. Development of skills and habits in seeking and applying theory and research knowledge relevant to the practice of psychology in a clinical setting	
	b. Outside of class reading of clinical theory and treatment to broaden framework and skill sets	
<b>4.</b>	<b>Psychological Assessment Skills:</b>	
	a. Systematically gathers data to inform clinical decision making	
	b. Integrates assessment data from different sources to inform clinical decision making	

	c. Formulates and applies diagnoses, understanding the strengths and limitations of diagnostic approaches	
	d. Writes integrative reports that answer a clear and concise testing referral question	
	e. Can identify and select a testing battery (with consultation) that provides diagnostic clarification and informs the referral question	
<b>1.</b>	<b>Clinical Interviewing, Treatment Planning, and Intake Report Writing Skills:</b>	
<b>1<sup>st</sup> Year</b>	a. Establishes rapport (working alliance including mutual goal setting)	
<b>Practicum</b>	b. Conducts an initial structured clinical interview gathering client information and symptoms	
<b>(2<sup>nd</sup> Year</b>	c. Formulates and applies diagnoses	
<b>Students)</b>	d. Formulates basic conceptualizations using an empirically supported clinical orientation(s)	
	e. Writes concise, grammatically correct reports without pejorative language/overpathologizing	
	f. Develops treatment plans according to the needs of the client.	
	g. Assesses treatment progress and outcome.	
	h. Links concepts of therapeutic process and change to intervention strategies and tactics.	
<b>2.</b>	<b>Attending and Expanding Skills</b>	
	a. Uses eye contact	
	b. Uses vocal qualities	
	c. Uses verbal tracking skills	
	d. Uses body language	
	e. Uses open ended questions	
	f. Uses observation skills	
<b>3.</b>	<b>Empathy Skills</b>	
	a. Encourages and validates	
	b. Paraphrases	
	c. Summarizes	
	d. Reflects	
	e. Connects content to emotions	
	f. Makes meaningful empathic statements	
<b>4.</b>	<b>CBT Skills</b>	
	a. Conducts psychoeducation, coping skills training, and stress management	
	b. Conducts assertiveness and boundary setting training	
	c. Conducts social skills training	
	d. Identifies and confronts maladjusted thinking (distortions, automatic thoughts, core beliefs, etc.)	
	e. Identifies and confronts inflexible schemas	
	f. Uses daily thoughts, feelings, and behavioral monitoring logs/journals	
	g. Identifies triggers to maladjusted behaviors/coping	
	h. Develops effective homework(s)	

	i. Develops and conducts hierarchical exposure treatment	
<b>5.</b>	<b>Insight Building Skills</b>	
<b>2<sup>nd</sup> Year</b>	a. Connects family of origin dynamics with current thoughts, feelings, and behaviors	
<b>Practicum</b>	b. Uses interpretation	
<b>(3<sup>rd</sup> Year</b>	c. Uses bridging statements	
<b>Students)</b>	d. Identifies and explores patterns of behavior	
	d. Comfortable with difficult and intense emotions	
	e. Expands and elaborates affect	
	f. Explores and processes affective triads (primary and secondary emotions)	
<b>7.</b>	<b>General Therapy Skills</b>	
	a. Differentiates between process and content and can appropriately use both	
	b. Differentiates between problem solving and exploration and can appropriately use both	
	c. Deals with conflict and negotiates differences with clients	
	d. Understands and maintains appropriate professional boundaries with clients	
	e. Awareness and understanding of transference and counter transference.	
	f. Effectively triages suicidal and/or homicidal symptoms	
	g. Develops richer and more meaningful conceptualizations	
<b>3<sup>rd</sup> Year</b>	h. Brings self into the session while maintaining professional boundaries	
<b>Practicum</b>	i. Deepening of authentic client – therapist relationship	
<b>(4<sup>th</sup> &amp; 5<sup>th</sup></b>	j. Sexual boundary skill management that maintains the therapeutic framework	
<b>Year</b>	k. Works with maladjusted behaviors in-vivo	
<b>Students)</b>	l. Identifies resistance and/or defenses	
	m. Appropriately uses mild confrontation / challenging skills to work through defenses	
	n. Conducts multi-modal treatment planning	
	o. Develops rich and meaningful conceptualizations	
	p. Has some mastery in a clinical orientation	

Please use this space for further comments and observation. Attach additional sheets if necessary.

Student is to receive one of the following grades:

Satisfactory (S) \_\_\_\_\_

Unsatisfactory (F) \_\_\_\_\_

Additional general guidelines and expectations regarding the developmental progression of **broad skills** and **characteristics** appropriate for the student's practicum year of training.

### **First year practicum (2<sup>nd</sup> year students)**

#### BROAD SKILLS:

- Ability to begin clearly defining and analyzing clinical problems
- Knowledge of basic interventions
- Ability to begin developing and understanding when to implement various techniques/interventions, although the flexible use of these skills is limited by the student's beginning level of experience.
- Understanding the role of therapist versus the client
- Ability to use assessment information to shape diagnostic decisions
- Knowledge of administration and scoring of various assessment measures

#### \*CHARACTERISTICS:

- Significant anxiety
- Highly motivated
- Dependent on supervision
- Focuses predominantly on the self, particularly on performance of technique or following guidelines
- Fearful of evaluation

### **Second year practicum (3<sup>rd</sup> year students)**

#### BROAD SKILLS:

- Identification of meaningful therapy components
- Treatment viewed as a process that is guided by a treatment plan
- Increasing complexity of cases and conceptualization
- Able to distinguish meaningful situational factors that impact treatment
- Beginning to draw from previous clinical experiences
- Generalization of diagnostic and intervention skills
- Supervision involves a mix of interventions and conceptual work
- Beginning to integrate assessment information into treatment plans
- Uses therapeutic self in interventions

#### \*CHARACTERISTICS:

- Goes through a "trial and tribulation" period
- Experiences dependency – autonomy conflicts
- Has fluctuating confidence and motivation levels
- Shifts focus to the client, with increased empathy
- Links mood to success with clients
- Has an increased understanding of own limitations
- Demonstrates uneven theoretical and conceptual integration
- Is sensitive and possibly anxious about evaluation

### **Third year practicum (4<sup>th</sup> and 5<sup>th</sup> year students)**

#### BROAD SKILLS:

- Views actions/interventions as part of long-term therapy goals
- Ability to develop a treatment plan based on conscious, abstract, and analytic contemplation of the problem
- Flexible use of interventions

- Focus of therapy beyond techniques
- Feelings of mastery and the ability to cope with a variety of clinical contingencies
- Supervision primarily conceptually focused
- Ability to write a comprehensive integrated assessment report
- Ability to use assessment results to guide therapy

\*CHARACTERISTICS:

- Exudes an attitude of “calm after the storm”
- Stable motivation
- Secure with autonomy
- Focuses on client, process, and self
- Professional identity at the core of his/her treatment
- Not disabled by remaining doubts
- Accepts own strengths and weaknesses
- High empathy and understanding
- Uses therapeutic self in interventions
- Integrates client information, personal responses, theoretical information, and empirical information
- May find it a challenge to be flexible in approach
- Accurate empathy tempered by objectivity and processing of reactions, feelings, and thoughts
- High level of insight into personal strengths and weaknesses
- Addresses areas of weakness with increased confidence and nondefensiveness

---

\*Stoltenberg, McNeill, and Delworth (1998). *IDM Supervision: An Integrated Developmental Model for Supervising Counselors and Therapists*. San Francisco, CA, US: Jossey-Bass. (1998).

WASHINGTON STATE UNIVERSITY  
CLINICAL PSYCHOLOGY GRADUATE PROGRAM  
PSYCHOLOGICAL ASSESSMENT SUPERVISION EVALUATION FORM

**Note:** This form evaluates performance as appropriate for the year of training that the student is in. Therefore, a second year student will be evaluated differently than a third or fourth year student. THE LAST PAGE OF THIS FORM LISTS CLINICAL EXPECTATIONS FOR EACH YEAR OF TRAINING.

Student:

Supervisor:

Semester and Year:

Date:

Semester doing  
therapy: (circle)

1<sup>st</sup>

2nd

3rd

4th

5th

6th

7th

8<sup>th</sup>

After each statement, please note in the appropriate space: **VG** (Very Good), **G** (Good), **S** (Satisfactory), **NW** (Needs Work), **US** (Unsatisfactory), **N/A** (Not Applicable). Ratings are relative to peers at the same level of training.

<b>1.</b>	<b>Relationship/Interpersonal Skills:</b>
	a. Ability to form a working alliance with clients.
	b. Ability to deal with conflict and negotiate differences with clients.
	c. Ability to understand and maintain appropriate professional boundaries with clients.
	d. Ability to work collegially with fellow professionals, peers, and staff.
	e. Ability to work collaboratively with the supervisor.
	f. Ability to prepare for supervision.
	g. Ability/willingness to accept supervisory input, including direction; ability to follow through on recommendations; ability to negotiate needs for autonomy from and dependency on supervisors.
	h. Ability to self-reflect and self-evaluate regarding clinical skills and use of supervision, including using good judgment as to when supervisory input is necessary.
	i. Ability to communicate professionally and work collaboratively with community professionals.
<b>2.</b>	<b>Basic Report Writing Skills:</b>
	a. Writes clearly and concisely
	b. Ability to convey conceptualization of case in a written document
	c. Ability to integrate historical and behavioral observations with testing data
	d. Ability to accurately document and interpret test measures utilized
<b>3.</b>	<b>Basic Intake and Feedback Skills:</b>
	a. Ability to develop rapport with people in a session; to be present, focused and receptive.
	b. Listening skills: ability to hear and reflect the client's needs.
	c. Ability to generate hypotheses and ask appropriate follow-up questions.
	d. Sensitivity: ability to understand client and convey assessment results according to the needs of the client.

<b>4.</b>	<b>Diversity – Individual and Cultural Differences:</b>
	a. Knowledge about the nature and impact of diversity in different clinical situations (e.g., clinical work with specific racial/ethnic populations).
	b. Ability to work effectively with diverse others in assessment, treatment and consultation.
<b>5.</b>	<b>Ethics:</b>
	a. Knowledge of ethical/professional codes, standards and guidelines; knowledge of statutes, rules, regulations and case law relevant to the practice of psychology.
	b. Recognize and analyze ethical and legal issues across the range of professional activities in the practicum setting.
	c. Seek appropriate information and consultation when faced with ethical issues.
<b>6.</b>	<b>Professional Development:</b>
	a. Timeliness: completing professional tasks in allotted/appropriate time (e.g., evaluations, notes, reports); arriving promptly at meetings and appointments.
	b. Developing an organized, disciplined approach to writing and maintaining notes and records.
	c. Time management.
	d. Self- awareness, understanding, and reflection
	e. Self-care.
	f. Willingness to acknowledge and correct errors.
	g. Ability to recognize and analyze emotional reactions to clients in order to differentiate their source (client issues vs. one's own issues); ability to respond appropriately to emotional reactions to clients (further understanding of client's issues, or keeping one's own issues from interfering with the practice of therapy).

Please use this space for further comments and observation. Attach additional sheets of paper if necessary.

Student is to receive one of the following grades: Satisfactory (S) \_\_\_\_\_  
Unsatisfactory (F) \_\_\_\_\_

**CLINICAL GRADUATE STUDENT  
EVALUATION FORM  
EVALUATION BY CLINICAL FACULTY**

NAME OF STUDENT: \_\_\_\_\_ DATE OF EVALUATION \_\_\_\_\_

1. Quality of academic work.

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

---



---



---

2. Overall clinical skills.

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

---



---



---

3. Overall research skills.

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

---



---



---

4. Progress through the program.

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Performance of assistantship duties.

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Openness to supervision and responsiveness to feedback.

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Interpersonal and professional competence

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

---

---

---

8. Self-Awareness

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

---

---

---

9. Manifestation of appropriate professional and ethical behavior

Acceptable \_\_\_\_\_ Unacceptable \_\_\_\_\_

COMMENTS: \_\_\_\_\_

---

---

---

10. Problem areas, if any, and suggestions for remediation:

Problem 1: \_\_\_\_\_

\_\_\_\_\_

Problem 2: \_\_\_\_\_

\_\_\_\_\_

Problem 3: \_\_\_\_\_

\_\_\_\_\_

Problem 4: \_\_\_\_\_

\_\_\_\_\_

11. Evaluation of overall performance and progress.

1	2	3	4	5	6
Poor	Below Average	Good	Very Good	Excellent	Don't Know

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I have read this evaluation:

\_\_\_\_\_  
Student Advisor's Signature  
(Director of Clinical Training's signature,  
if advisor is unavailable to sign)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Director of Clinical Training

**Routing: 1) advisor signs, 2) student signs, 3) submit to Director of Clinical Training, 4) copy will be made and given to student**

**CLINICAL PSYCHOLOGY DOCTORAL PROGRAM TIMELINE**

Requirement	Deadline	Consequence if Missed
Thesis Prospectus Approved	End of Spring of first year	<b>WARNING</b> The student will receive a letter that documents that he/she did not meet the expected deadline for the thesis prospectus, which also will be reflected in the student's annual evaluation.
	Start of second year	<b>NOT MEETING EXPECTATIONS</b> The student will receive a letter that documents that he/she failed to meet expectations for research for the year, which will be documented in the student's annual evaluation for the research category. A written <b>remediation plan</b> will be developed in collaboration with the student, the major professor, and the DCT.
Thesis Proposal Approved (T1)	Jan 31 of second year	<b>WARNING</b> The student will receive a letter that documents that he/she did not meet the expected deadline for the thesis proposal, which also will be reflected in the student's annual evaluation.
	End of Spring of second year	<b>NOT MEETING EXPECTATIONS</b> The student will receive a letter that documents that he/she failed to meet expectations for research for the year, which will be documented in the student's annual evaluation for the research category. A written <b>remediation plan</b> will be developed in collaboration with the student, the major professor, and the DCT.

## Program Timeline (continued)

Requirement	Deadline	Consequence if Missed
Thesis Final Defense Approved (T2)*	End of Summer of second year	<b>SUGGESTED GUIDELINE</b> Guideline for the student, but no consequence if not met.
	January 31 of third year	<b>WARNING</b> The student will receive a letter that documents that he/she did not meet the expected deadline for thesis defense, which will be reflected in the student's annual evaluation.
	End of Spring of third year	<b>NOT MEETING EXPECTATIONS</b> The student will receive a letter that documents that he/she failed to meet expectations for research for the year, which will be documented in the student's annual evaluation for the research category. A written <b>remediation plan</b> will be developed in collaboration with the student, the major professor, and the DCT. The CTC may modify the student's schedule (e.g., no practicum or reduced client load) to free up time to complete the thesis.
	End of third year	<b>TERMINATION REVIEW</b> Depending on the circumstances, the CTC will (a) develop another remediation plan, (b) counsel the student from the program, or (c) terminate the student from the program.
	December 1 of fourth year	<b>TERMINATION REVIEW/FUNDING WITHDRAWN/NO CLASS REGISTRATION</b> Unless the thesis defense is imminent, the student will be (a) counseled from the program, (b) terminated from the program, or (c) allowed to continue in the program but only allowed to register for 1 hr. The student will not be allowed to participate in practicum or externship and will receive no funding. Another remediation plan will be developed in collaboration with the student, the major professor, and the DCT.
	End of Fall of fourth year	<b>TERMINATION</b> Barring extraordinary circumstances, the student will be terminated from the program at this time.

## Program Timeline (continued)

Requirement	Deadline	Consequence if Missed
Preliminary Exam  P1  P2	Third year  Spring of Third Year  Beginning of fourth year	<b>Suggested Guideline</b>  The student cannot apply for internship until the preliminary exam is passed. Also, the D1 cannot be defended until the P2 is completed. If the P2 is failed after the first administration the student will be deemed as on <b>NOT MEETING EXPECTATIONS</b> . The student will receive a letter that documents that he/she failed to meet expectations for coursework (specifically the preliminary exam) for the year, which will be documented in the student's annual evaluation for coursework. A written <b>remediation plan</b> will be developed in collaboration with the student, the major professor, and the DCT.
Dissertation Proposal D1 (to apply for internship)	September 15 of fourth year	<b>Suggested Guideline</b>  The student cannot apply for internship until the dissertation is successfully proposed.
Dissertation Final Defense D2	One year post-internship	<b>NOT MEETING EXPECTATIONS</b> The student will receive a letter that documents that he/she failed to meet expectations for research for the year. A written <b>remediation plan</b> will be developed in collaboration with the student, the major professor, and the DCT.
	Two years post-internship	<b>TERMINATION REVIEW</b> Depending on the circumstances, the CTC will (a) develop a remediation plan, (b) counsel the student from the program, or (c) terminate the student from the program.

\* With respect to the thesis deadlines, if the major professor indicates that there is a special justification for the delay and that the student is making good progress, these deadlines may be pushed back and the student will remain in good standing.