



CLARK UNIVERSITY

GUIDE TO THE CLINICAL PSYCHOLOGY PROGRAM Clark University

A Companion to the Doctoral Student Handbook

2015-2016

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The clinical psychology program is accredited by the American Psychological Association (APA). For more information, contact the APA Commission on Accreditation at 750 First St., NE, Washington, DC 20002-4242 or (202) 336-5979. For further information, contact the Director of Clinical Training (DCT), Dr. Abbie Goldberg, at agoldberg@clarku.edu.

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Overview

Program Mission and Goals

The mission of the Clark University Clinical Psychology Program is to train scientist-practitioners as socially engaged clinical scholars. In keeping with the motto of Clark University to “Challenge Convention and Change Our World,” the Clinical Program aims to train scholars who will be actively engaged in the world and use their work to improve the quality of the world in which we live and the lives of the people in our communities. Thus, the Clark University Clinical Psychology Program adheres to the Scientist-Practitioner model in which our students are trained to be skilled scientists and clinicians who can integrate the science of psychology with its professional practice.

We train scientist-practitioners who think critically about the assumptions underlying their work, the theory guiding it, and the evidence supporting it. This process includes the careful identification and definition of a particular issue or problem, the conceptualization of the problem from one or more multiple theoretical viewpoints, and the specification of how to choose appropriate research or clinical interventions in order to approach the problem. This particular emphasis enables our graduates to skillfully use their clinical and research training, and to actively contribute to the creation of new models of intervention and inquiry.

This educational philosophy and training model is consistent with the mission of the larger Psychology Department and University as a whole. The Department emphasizes theoretically-guided research training that orients knowledge and inquiry to how it can be put to use. This use-based approach is connected to Clark University’s long-standing tradition of innovative and transformative research that addresses important social issues through the integration of theoretical, basic, and applied scholarship.

Given this educational philosophy and adherence to the Scientist-Practitioner training model, the Clinical Program emphasizes strong training in both research methods and clinical practice. Moreover, the integration of science and practice is built deeply into the core of the program. We aspire to train graduates who can function as competent scientists and competent clinicians, and who understand the mutually supportive relationship that psychological practice and psychological science have with each other.

In keeping with the Scientist-Practitioner model, the Clinical Training Program at Clark has three broad goals:

Goal #1: To produce competent scientists whose work is theoretically driven, and who are able to critically evaluate the role of assumption, theory, and evidence.

Goal #2: To produce competent clinicians whose work is theoretically driven, who are able to critically evaluate the role of assumption, theory, and evidence.

Goal #3: To produce competent professionals whose clinical work is informed by psychological science, and whose research and scholarship is informed by clinically-based knowledge.

Overview of Training

To achieve our goals, we provide training in research methods, clinical practice, and their integration. This training is sequential, cumulative, and graded in complexity, and it occurs through a variety of integrated and coherent educational experiences in the class, laboratory, and practicum settings.

In order to produce competent scientists, the Clinical Program provides training in a range of research methods and statistical approaches, the conduct of independent, empirical research that is theoretically driven, and a range of general professional research skills. This training occurs through both close mentoring and coursework. The core clinical faculty are all active in research, and all clinical graduate students are expected to join in this activity with their primary mentor. Moreover, we mentor students in the development of independent, theoretically-driven research. This research is supported programmatically through coursework, the first- and second-year independent research projects, the research portfolio system, and the dissertation. Overall, the research training builds cumulatively from foundational and more heavily mentored experiences (e.g., introductory courses, first- and second-year research) to the more independent activities (e.g., completion of research portfolio and dissertation research). The formal research competencies which students develop are as follows:

Competency 1: The student can demonstrate basic knowledge of research methods and an understanding of the appropriate analytic tools to use when conducting research.

Competency 2: The student can conceptualize, conduct, analyze, and present independent research.

Competency 3: The student can successfully engage in an array of scholarly activities such as presenting at conferences, authoring journal articles, book chapters, and review papers, and applying for grants.

In order to produce competent clinicians, the Clinical Program provides training in the basic principles and processes of psychological assessment, evidence-based psychotherapy, and an array of general professional skills. This training occurs in coursework and clinical practica and is provided by both core clinical faculty and affiliated faculty. As with the research training, the clinical training is sequential and cumulative. During their first three years in the program, students receive close supervision and broad-based training from core clinical faculty in adult and child assessment (Years 01 and 02), individual therapy (Year 02), and couples therapy (Year 03). In addition, during their third and fourth years, students participate in off-site clinical practica and externships where they receive more focused training in particular areas of interest. The final stage of the student's clinical is the completion of an APA-approved clinical internship. The formal clinical competencies which students develop are as follows:

Competency 4: The student can think critically about psychological assessment and has basic assessment skills necessary for entry into the field.

Competency 5: The student can think critically about the conduct of psychotherapy, evaluate the evidence-base for different theoretical approaches, and use basic psychotherapy skills necessary for entry into the field.

Competency 6: The student possesses an array of professional skills and knowledge, including professional ethics, diversity issues, case conceptualization and presentation skills, and peer-supervision.

Because of the importance the Clinical Program places on the integration of science and practice, this emphasis is interwoven throughout the research and clinical training activities, including in coursework, clinical placements, and research. The formal competencies in science-practice integration which students develop are as follows:

Competency 7: The student can integrate scientific literature into his/her clinical decision-making, empirically evaluate outcomes of his/her clinical cases, and present this information as part of a case formulation.

Competency 8: The student can use clinically-based knowledge in developing and conducting his/her research and can articulate the clinical implications of his/her findings.

A guiding principle of the Clinical Psychology Program (and the Psychology Department in general) is that the graduate experience be relatively flexible to permit a program of study tailored to the individual's interests. The formal requirements are minimized to maximize time for developing a close working relationship with faculty, and for establishing one's own scholarly specialty and research program. Moreover, the program of study is sequential and cumulative, building on foundations set in the early years.

While our training model is relatively simple, there are a number of rules and requirements in place to ensure that (1) students receive the top-quality training; (2) training conforms to the guidelines of the department, university, and American Psychological Association (APA); and (3) students satisfactorily complete coursework and required experiences in a timely fashion. The purpose of this manual is to clarify the content of the Clinical Psychology Program, as well as to provide the rationale for its structure and content. This guide emphasizes the requirements and procedures unique to doctoral training in clinical psychology, and is intended to supplement the Graduate Student Manual, which describes the general rules and regulations of the doctoral graduate program in Psychology at Clark University. We hope that this information clarifies the pathway to completion of the doctoral training in the Clark University Clinical Psychology program.

Typical Program for Clinical Students

Year 1

Year 01 Fall	Year 01 Spring
Course	Course
Theory and Method: Research Design (301)	Ethics (387)
Statistical Methods (302)	Statistical Methods (302)
Adult Assessment (303)	Child Assessment (304)
Clinical Workshop (389)	Clinical Workshop (389)
ONE OF THE FOLLOWING:	ONE OF THE FOLLOWING:
Theories of Psychotherapy (310)	Historical Backgrounds (393)
Psychopathology (311)	Affective Aspects of Behavior Elective
Additional Activities	
First-year Independent Research Project	
Research Portfolio	

Note: These are *sample* schedules for the completion of yearly coursework. Please note that course offerings are subject to change due to faculty leaves and other considerations.

Requirements Specific to Year 1

- Work on independent research project; present work-in-progress as poster presentation at the end of year departmental Graduate Research Festival
- Satisfactory progress on portfolio (e.g., 1- 2 portfolio elements)

Overview of Year 1

In their first year, students spend much of their time in formal coursework designed to provide a strong foundation in clinical psychology. Students also receive their first formal clinical training, through the adult and child assessment courses. Students begin the process of getting involved in research and develop a first-year independent research project that is presented at the end of the year.

Mentoring Program

To assist first-year students with the transition to graduate school, the Clinical Program has instituted a mentoring program whereby each first-year student is matched with a student in the third-year of the program. This mentoring relationship is designed to provide support to first-year students as needed, and may include giving students information about particular aspects of the program, relevant institutional programs and services, and social and extracurricular activities.

Description of Courses

Required courses in the first year.

The coursework for the first year involves intensive exposure to many facets of psychology as a science in general, as well as to clinical psychology as a specialty field. This provides much of the breadth

necessary for the student's background as a psychologist, and is in accord with the APA guidelines for accredited training in clinical psychology.

- **Theory and Method: Research Design (301)** is a research methods course taken by all first year students in the department. This course is a graduate level survey of psychological research methods as they relate to philosophies of science, "micro"-theories, and substantive conceptual or pragmatic issues in psychology. Special emphasis is placed on developing useful and logically consistent links between different areas of inquiry and different methods. Students will apply concepts and methods to the development of their own programs of research.
- **Statistics (302)** is a year-long sequence covering statistical analysis. The first semester is devoted to a brief review of basic statistical concepts, parametric tests, and linear regression, non-parametric statistics, and an introduction to ANOVA. The second semester focuses on multivariate statistics, including various regression, ANOVA, and factor analytic techniques, and an introduction to structural equation modeling.
- **Adult Assessment (303)** provides an introduction to the fundamentals of assessment with adults. Topics include diagnostic interviewing, and intellectual and personality assessment. It includes a didactic component and a practicum component in which students administer, score, and interpret a battery of tests on volunteer examinees.
- **Child Assessment (304)** provides an introduction to the fundamentals of assessment with children, including intellectual and personality assessment. As with adult assessment, the course includes a didactic and practicum component, in which students administer, score, and interpret a battery of tests on volunteer examinees.
- **Ethics (387)** covers ethical decision-making in a variety of professional contexts, including therapy, assessment, research, teaching, consultation, and supervision. Students gain an in-depth understanding of the APA ethical principles, as well as practice applying them in a variety of situations, via discussion, role playing, and vignettes.
- **Clinical Workshop (389)** provides an opportunity for all clinical students and faculty to hear outside speakers present on topics of clinical relevance (first semester) and for students to present and get feedback on their clinical cases (second semester). The agenda for the series is organized by the Associate Director of Clinical Training (Associate DCT) in collaboration with the Director of Clinical Training (DCT). This seminar is required of all clinical students throughout the first four years of their program.

Other Required Courses.

Because many courses are offered on an alternate-year basis, students select requirements in accordance with the schedule, completing some requirements in each of the first three years. During their first two years, students take Psychopathology, Theories of Psychotherapy, and Historical Backgrounds. Each course is typically offered every other year, so students take one in each of the first two years, depending on which are offered.

- **Psychopathology (310)** examines the difficulties of defining psychopathology and reviews the major diagnostic categories from phenomenological, theoretical and research perspectives. Special attention is given to gender, class, and diversity.

- **Theories of Psychotherapy (311)** provides an overview of the major theoretical approaches to conducting psychotherapy. Throughout this course there is a strong emphasis on multicultural issues in psychotherapy, as well as ongoing consideration of the evaluation of therapy outcomes and process.
- **Historical Backgrounds (393)** provides an appreciation of the generative ideas and world hypotheses underlying contemporary psychological approaches and traces the earlier manifestations of these ideas and world hypotheses in intellectual history or history of ideas.

Affective, Biological, Cognitive, Developmental, and Social Aspects of Behavior courses.

During the first three years, students must take one course that fulfills each of five categories (biological, cognitive, affective, social, and developmental). Specific courses meet different requirements and are listed below. Please see the course catalogue for a description of the individual courses.

There exists flexibility in the courses students may choose for each of the requirements; however, students are strongly encouraged to take the courses in the designated semester. For example, in their second or third year students may choose among several courses that meet the cognitive and social bases of behavior requirement. Notably, some courses may meet more than one requirement.

Occasionally, students may choose to postpone a particular bases course in order to focus more on their research. However, because bases courses are only offered every two years, any such plan requires the prior approval of the student's advisor and the DCT.

Affective Aspects of Behavior	Social and Emotional Development (323)
Biological Aspects of Behavior	Human Neuropsychology (361)
Cognitive Aspects of Behavior	Early Symbolism in Ontogenetic Development and History (318) Societal Approaches to Thinking (375)
Developmental Aspects of Behavior	Social and Emotional Development (323) Morality and Culture (280/383) Culture and Human Development (384)
Social Aspects of Behavior	Advanced Topics in Social Psychology (319)* Societal Approaches to Thinking (375) Culture and Human Development (384)

*Note: Topics offered for PSYC 319 vary by semester and instructor. Check with the DCT and course instructor before enrolling to ensure that the topic offered satisfies the Social Aspects of Behavior requirement (for example, when it is offered as "An Overview of Social Psychological Literature" or similar)

Summer

Formal coursework does not occur during the summer, but students are expected to be productively engaged in their research during these months. Some students receive summer funding from faculty grants to work as research assistants. Please see the Graduate Student Manual for more information.

Typical Program for Clinical Students

Year 2

Year 02 Fall	Year 02 Spring
Course	Course
Psychotherapy Practicum (338)	Psychotherapy Practicum (338)
Assessment Practicum (313)	Research/Second Year Project (317)
Clinical Workshop (389)	Clinical Workshop (389)
REMAINING ONE OF THE FOLLOWING:	REMAINING ONE OF THE FOLLOWING:
Theories of Psychotherapy (310)	Historical Backgrounds (393)
Psychopathology (311)	Affective Aspects of Behavior Elective
ONE OF THE FOLLOWING:	ONE OF THE FOLLOWING:
Cognitive Aspects of Behavior Elective	Diversity Issues (364)
Human Neuropsychology (361)	Social Aspects of Behavior Elective
Additional Activities	
Second-year Independent Research Project	
Research Portfolio	

Requirements Specific to Year 2

- Complete and present second-year project at end-of-year departmental Graduate Research Festival
- Satisfactory progress on portfolio (e.g., 2-4 portfolio elements)

Overview of Year 2

The second year is another relatively intense year devoted to fulfilling required coursework, but students also receive more advanced clinical experiences via the two clinical practica (assessment and psychotherapy). Students continue their research progress and are expected to complete and present their second-year independent research project at the end of the year.

Towards the middle of the second year, students may choose to apply to an external site for their 3rd-year mini-practicum. Interested students consider their interests and work with their advisors and the Associate DCT to apply to one of five Worcester-based sites (see below for more info). These sites differ in their application requirements (e.g., some have more formal procedures than others), so students need to take the time to explore each potential site individually. Although the mini-practicum is an optional activity, many students choose to engage in it.

Description of Coursework

Again, because many courses are offered on an alternate-year basis, students continue to complete requirements in accordance with the schedule and requirements not yet completed.

- **Diversity Issues (364)** examines the sociocultural context of human behavior with a particular focus on issues of diversity in the clinical setting. This course fulfills the Massachusetts State Licensing Board requirement for training in issues of cultural diversity. This course is typically offered every other year so students take it in either their second or third year.
- **Courses Fulfilling Affective, Biological, Cognitive, Developmental, and Social Aspects of Behavior.** During the first three years, students must take one course that fulfills each of five categories (biological, cognitive, affective, social, and developmental). Specific courses meet different requirements and are listed on Page 8.
- **Clinical Workshop (389)** provides an opportunity for all clinical students and faculty to hear outside speakers present on topics of clinical relevance (first semester) and for students to present and get feedback on their clinical cases (second semester). The agenda for the series is organized by the Associate DCT in collaboration with the DCT. This seminar is required of all clinical students throughout the first four years of their program.

Description of Practica

During the second year, students begin intensive clinical involvement through participation in clinical practica. In their second year, students take a one-semester assessment practicum, along with a year-long Psychotherapy Practicum.

- **Assessment Practicum (313)** provides students with the opportunity to apply the knowledge gained in the adult and child assessments courses in a clinical setting. Students typically complete and write-up two test batteries, one with an adult clinical case and one with a child clinical case.
- **Adult Psychotherapy Practicum (338)** provides students with the opportunity to conduct psychotherapy with clients drawn from the Clark University undergraduate and non-psychology graduate student population. Students generally carry a two client caseload and are supervised with a combination of both individual and group supervision.

Typical Program for Clinical Students

Year 3

Year 03 Fall	Year 03 Spring
Course	Course
Couples Therapy Practicum (342)	Couples Therapy Practicum (342)
Clinical Mini-Practicum (340)	Clinical Mini-Practicum (340)
Elective course	Elective Course
Clinical Workshop (389)	Clinical Workshop (389)
REMAINING ONE OF THE FOLLOWING:	REMAINING ONE OF THE FOLLOWING:
Cognitive Aspects of Behavior Elective	Diversity Issues (364)
Human Neuropsychology (361)	Social Aspects of Behavior Elective
Additional Activities	
Complete Research Portfolio	
Work on dissertation proposal	

Requirements Specific to Year 3

- Completion of portfolio (i.e., 6 portfolio elements)
- Formation of Doctoral Dissertation Committee and dissertation proposal preparation
- Apply for fourth year externships

Overview of Year 3

During this year, students are expected to complete their formal course requirements and begin to pursue a more independent line of study. Students are encouraged to seek specific experiences that complement their evolving research specialty.

Toward the middle of the year, students work with their advisors and the DCT to identify and apply to externship sites for the fourth year practicum. As with the mini-practicum, students consider their interests and areas in which they require further experience in their externship choices. The clinical office keeps information on many of the externship sites where our students have worked; more advanced students are also excellent sources of information. Externship sites differ in their application requirements (e.g., some have more formal procedures than others), so students need to take the time to explore each potential site individually.

It is also wise for students to begin surveying information on clinical internships during the summer prior to the fourth year. For students who plan to apply in the fall of their fourth year, the applications for internship are due as early as the end of October in the Fall Term, and the process of applying can require a good deal of time. **In addition, students must have successfully defended their dissertation proposal prior to November 1 of the year that they wish to apply for internship.** Thus, students who wish to apply for internship in their 4th year would need to successfully defend their proposal by

November 1 of that year. There is a file of information available in the clinical administrator's office that contains information on specific internship sites, as well as the Association of Psychology Postdoctoral and Internship Centers (APPIC) manual (a compendium of internship and postdoctoral training agencies). The APPIC website (appic.org) is an excellent source of information on internships and includes an online directory.

Description of Coursework

Again, because many courses are offered on an alternate-year basis, students continue to complete requirements in accordance with the schedule and requirements not yet completed.

- **Courses Fulfilling Affective, Biological, Cognitive, Developmental, and Social Aspects of Behavior.** During the first three years, students must take one course that fulfills each of five categories (biological, cognitive, affective, social, and developmental). Specific courses meet different requirements and are listed on Page 7.
- **Clinical Workshop (389)** provides an opportunity for all clinical students and faculty to hear outside speakers present on topics of clinical relevance (first semester) and for students to present and get feedback on their clinical cases (second semester). The agenda for the series is organized by the Associate DCT in collaboration with the DCT. This seminar is required of all clinical students throughout the first four years of their program.
- **Advanced Qualitative/Quantitative Methods (Electives).** These courses are offered on a rotating basis every spring semester, and students are encouraged to take either or both courses as their schedule allows. Students should discuss these options with their faculty advisor.

Description of Practica

Students continue their clinical experiences with two primary experiences: the Couples Therapy practicum and the community-based Mini-Practicum.

- **Couples Therapy Practicum (342).** In this practicum clients are drawn from the greater Worcester community and screened by students and the clinical supervisor for their appropriateness as training cases for beginning couples therapists. Clients seen in the Couples Therapy Practicum present with a diverse array of relationship and individual issues. Students are trained in specific empirically supported Couples Therapy models.
- **Optional Clinical Practicum (340; "Mini-Practicum").** In this optional practicum, students gain additional clinical training outside of the Psychology Department. This training experience is limited to 5-10 hours per week of clinical work. During the second semester of Year 2, students competitively apply for positions at one of five possible placements. Students provide regular feedback about their practicum experiences both by means of official evaluation surveys and through regular meetings with the DCT. A description of mini-practicum sites can be found below.

- **AdCare Hospital**: AdCare Hospital treats individuals with substance use disorders, including patients with complex medical or psychiatric needs. Mini-practicum students have the opportunity to work in the inpatient, partial hospital, and outpatient services, and gain experience in individual and group therapy, in addition to consultation.
- **Children's Friend**: The Ellsworth Child and Family Counseling Center is the largest program at Children's Friend. It provides high quality mental health services to children ages 0 – 22 and their families to address a wide range of emotional and behavioral problems, from depression to severe behavioral disorders. Mini-practicum students participate in individual, group, and family therapy. Trainees also have the opportunity to gain additional child assessment experience.
- **Community HealthLink**: Community Healthlink, which is affiliated with UMass Medical School, provides a variety of outpatient services to individuals in Worcester and Worcester County with serious mental illness. Mini-practicum students participate in individual, family, and group psychotherapy, and are able to work with Spanish-speaking clients (and receive supervision in Spanish) if so desired. Students interested in working at Community Healthlink must have completed all of the requirements for a master's degree.
- **UMass Medical School**: Family Medicine and Community Health: This practicum experience involves training with a clinical health psychologist in a primary care setting conducting brief assessments, consultations, and psychoeducation. Trainees work with children and adults in a context of collaborative, team-based patient care.
- **UMass Medical School**: Outpatient Psychiatry: UMass Medical provides outpatient group therapy to chronic mentally ill patients in the community. Cognitive-behavioral group therapy is provided three days per week. Mini-practicum students co-lead CBT groups and interested trainees can gain additional individual therapy experience.

Typical Program for Clinical Students

Year 4

Year 04 Fall	Year 04 Spring
Course	Course
Clinical Externship (344)	Clinical Externship (344)
Research (Dissertation) (317)	Research (Dissertation) (317)
Elective Course	Elective Course
Clinical Workshop (389)	Clinical Workshop (389)
Additional Activities	
Dissertation	

Overview of Year 4

The fourth year primarily involves work on the doctoral dissertation and the clinical externship. Some students will apply to internships during the fall of their fourth year to do the internship in their fifth year. Others will elect to wait another year and apply in the fall of the fifth year. This strategy often allows the student to complete more clinical hours during the externship before applying and also to complete the dissertation prior to leaving for internship. Since the program requires students to have a formally defended dissertation proposal prior to applying for internship, students who are applying in the fourth year must have successfully defended their proposal by November 1. Students are strongly encouraged to not wait until the deadline. The committee for the doctoral dissertation must include at least one tenure-track clinical faculty member. All on-campus requirements must also be completed by this time, or a reasonable plan proposed for their completion by the departure date for internship.

In the fall of the internship application year, students should arrange to have the appropriate letters of recommendation sent. Most internships also require a statement by the DCT regarding the student's standing in the program and suitability for undertaking the internship. It is advisable for the student to assemble packets of information pertaining to the (1) requirements met for the program; (2) practica completed; (3) assessment experiences; and (4) other information of potential relevance (e.g., specialization interests) for all faculty providing recommendations.

Description of Coursework

Clinical Workshop (389) provides an opportunity for all clinical students and faculty to hear outside speakers present on topics of clinical relevance (first semester) and for students to present and get feedback on their clinical cases (second semester). This seminar is required of all clinical students throughout the first four years of their program. Please communicate with externship supervisors that attendance at Clinical Workshop is non-negotiable, as this is a core element of the graduate training curriculum.

- **Advanced Qualitative/Quantitative Methods (Electives).** These courses are offered on a rotating basis every spring semester, and students are encouraged to take either or both

courses as their schedule allows. Students should discuss these options with their faculty advisor.

Description of Practica

Students continue their clinical experiences with the community-based externship.

- **Clinical Externship (344)** involves a half-time placement (~20 hours/week) at one of several affiliated training sites. Students work with more complicated clinical cases under close supervision in the context of working clinical agencies. These external practicum sites are reviewed to assure that our training sites are clearly committed to training and supervising our students. Students provide regular feedback about their practicum experiences both by means of official evaluation surveys and through regular group meetings with the Associate DCT. See Appendix E: the Externship Manual.

Typical Program for Clinical Students

Years 5+

Year 05 Fall	Year 05 Spring
Course	Course
Internship (398)	Internship (398)
Additional Activities	
Dissertation	

Overview of Years 5+

Students are required to spend a minimum of one year on clinical internship at an **APA-accredited facility** (approximately 2000 hours). In rare and highly unusual circumstances, the student may petition the clinical faculty to apply to nonaccredited internships. Nonaccredited internships are discouraged as many states required an APA-accredited internship for licensure, and the APA is moving towards requiring accredited training at the doctoral level **and** at the internship level in order to be certified as a health service psychologist. The type of the internship selected should be based upon the student's research and clinical specialty (e.g., child or adult; particular types of psychopathology; neuropsychology specialty).

Please note that, as indicated previously, students must have completed all on-campus requirements and have an approved dissertation proposal by November 1 of the previous year to qualify for internship attendance.

The internship must be completed before the Ph.D. degree is awarded.

If the student has not yet finished the dissertation, it should be completed during this year.

In this year, students on internship should register each semester for 3 credits of internship (398) with the DCT as the instructor. Students who have completed all required coursework but are not on internship and who wish to retain full-time status should register for a total of 3 credits between advanced clinical practicum (346) and/or research (317) with your advisor as the instructor.

Optional Practica for students not on internship

- **Advanced Clinical Practicum (346).** As with the Clinical Externship in Year 4, all students provide regular feedback about their practicum experiences both by means of official evaluation surveys and through regular group meetings with the Associate DCT. See Appendix E: the Externship Manual.

General Information

Program and Professional Participation

All students are expected to participate in the various activities of the Clinical Program and the Department. These activities include the Clinical Workshop series, departmental colloquia, informal research talks by Department or Visiting faculty, and job candidate colloquia. These experiences provide students with excellent opportunities to be exposed to a broad range of research and clinical activities inside and outside of the department.

In addition, students are strongly encouraged to join various regional and national organizations that promote various aspects of psychological theory, research, and clinical work. Many of these organizations hold regular conferences where research findings are communicated, workshops on various clinical and methodological topics are covered, and other important professional activities take place (e.g., continuing education activities, policy and position statements developed). In addition to exposing students to cutting-edge information related to their own research and clinical interests, conferences afford students the opportunity to network with professionals in the field, both established and junior. Moreover, conferences provide students with valuable experiences in presenting findings from their own research programs.

In order to learn which organizations would be most relevant, students are encouraged to speak with their advisor as well as senior graduate students. Commonly attended conferences in the clinical program include those of the American Psychological Association (APA), the Association for Behavioral and Cognitive Therapies (ABCT), the Society for Prevention Research (SPR), the Society for Research on Adolescence (SRA), and Society for Research in Child Development (SRCD). There are funds in the Department and the Graduate School to help support student involvement with such activities. Currently, students are provided with \$500 per year to help defray the cost of conference attendance if they are presenting a first authored paper. See the Graduate Manual for more information in this regard.

In addition to attending and participating in conferences, students should make efforts to keep abreast of scientific developments through regular reading of various scholarly journals of psychology and psychiatry that bear upon their particular research issues. The University has subscriptions to various online and in-print journals that students would likely find relevant. In addition, there are a number of publications, particularly by the American Psychological Association, that pertain to current issues in psychology (e.g., the *APA Monitor*; *APA Standards for Providers of Psychological Services*; *APA Standards for Educational and Psychological Testing*; *APA Ethical Principles*).

Waiving Program Courses

Please note that the clinical program has a general policy of not waiving courses simply because an incoming clinical student has taken a similar course at a prior university. A student must demonstrate a substantial background in a given area (e.g., statistics) in order to have a course waived. That student must submit prior course syllabi, as well as a letter explaining their reasons for petitioning to have a course waived, in order to be considered for a waiver. Please note that (a) we will only accept such transfer credits in very rare cases, (b) we will not accept transfer credit for any clinical or research courses, and (c) the maximum number of courses that a student can transfer is 2.

Clinical Program Governance

Governance of the Clinical Program is overseen by the Clinical Faculty. One student representative from each of the first four classes is elected yearly at the beginning of each academic year, and actively participates in monthly Clinical Program meetings. Whenever important program changes are considered, feedback and input are sought from current students via the student representatives. While responsibility for the program ultimately rests with the Clinical Faculty, the system is designed to be open for student awareness and sensitive to student input.

Malpractice Insurance

All clinical students need to have malpractice insurance starting in the first year. Students can obtain malpractice insurance from several sources. The most frequently used is APA (American Psychological Association) Trust (<http://www.apait.org/apait/products/studentliability/>). To obtain malpractice insurance, students must first become an APA student affiliate. For more information on becoming a student affiliate of APA, go to <http://www.apa.org/membership/student/index.aspx>, or you can write to the address below:

American Psychological Association
Membership Department
750 First Street, N.E.
Washington, D.C. 20002-4242
Phone: (800) 374-2721 (US & Canada Toll Free)

Clinical Supervision

Clinical supervision is handled through each individual practicum. In all cases, however, it is critical that students recognize the importance of close communication with the supervisor, which entails full disclosure of information relevant to case conceptualization, treatment plan, and the client-therapist process. Within each practicum, communication channels should be clarified, and there should be no questions or confusion regarding availability of supervision. Should the student feel that he or she is not receiving adequate supervision, it is the student's responsibility to let his or her concerns be known to the supervisor or practicum director. For any off-site clinical practica, a Clinical Training Agreement must be signed by the trainee, supervisor, and DCT before clinical work commences.

Clinical supervision must be provided by a doctoral level psychologist. It is recognized that supervision on site can be provided by pre-doctoral interns or post-doctoral fellows under the supervision of a psychologist appropriately credentialed. Supervision should include ongoing weekly meetings, with a minimum of one hour of individual or small group (< 4 trainees per group) supervision for every 16 hours of clinical work.

Clinical Documentation and Record-Keeping

All client contact and services should be appropriately documented and should reflect the clinician's status as a trainee. For onsite practica, evaluations and termination reports are stored in a locked filing cabinet in a locked office directly across from the office of the Clinical Psychology administrative assistant. Inactive files will be kept for at least 10 years after the termination report has been filed. The Associate DCT reviews active client files to confirm that records are complete, timely, and adhere to record-keeping policies.

Progress notes should be completed on an on-going basis and should reflect each clinical encounter with the client – including phone contact and cancelled sessions. Ideally, each progress note should be completed at the end of each session, but under no circumstances should it be completed more than two weeks after the session date. To protect confidentiality, no identifying information should be included in progress notes. Additionally, all confidential documents (including assessments, progress notes, etc.) should be password protected and/or encrypted when working on personal and university computers. Trainees are discouraged from using email correspondence with clients, as email is not considered a secure or confidential means of communication. Facsimiles may be used with written authorization from the client.

Recording Clinical Hours

Currently, most clinical internships require that students document the number of clinical hours they have conducted during their time in graduate school. Students are responsible for keeping track of the various clinical experiences they conduct, including the modality of clinical work (e.g., assessment versus therapy, individual vs. group), the type of client (e.g., age, gender, race/ethnicity), and the problem being addressed (e.g., diagnosis). Most internships require students to distinguish between face-to-face clinical hours and other forms of clinical work. Internships vary in the number of clinical hours they require.

Students should also keep records on the types and number of assessments used with clients, both in assessment experiences and therapy. It is also important for students to keep records of their supervision hours, both individual and group. In counting assessment hours for the AAPI online application (i.e., the application for internship), only the full integrated reports that are conducted as a part of the Adult/Child Assessment (PSYC 303/304) sequence can be reported. All other assessment activity conducted during the Adult/Child Assessment sequence is considered “practice,” and therefore is not sanctioned by the Clinical Psychology Program. Assessment hours that are supervised during the Assessment Practicum (313), Clinical Mini-Practicum (340), and Clinical Externship (344) can also be reported on the AAPI online application.

A sample log for recording practicum hours can be found in Appendix C. Also, there are some software programs that students can purchase that help tabulate clinical hours in the format requested by the APPIC internship application (e.g., <http://time2track.com> or www.mypsychtrack.com). Please note that Clark University does not endorse any products used for this purpose.

Additional Clinical Work Outside of the Structure of the Clinical Program

Because Clinical Psychology is a profession as well as an academic program, the Clinical Faculty has a responsibility to the public and the profession of psychology to ensure that students demonstrate responsible professional behavior. *As a consequence, no student should engage in any work of a psychological nature (e.g., psychotherapy or counseling, testing, teaching psychology, or research) without adequate faculty consultation and prior approval of the Clinical Faculty.* This includes any part-time or full-time position of a psychological character until the doctorate is awarded. A Clinical Training Agreement must be signed by the trainee, supervisor, and DCT before any additional clinical work commences.

Any student interested in outside volunteer or paid work should discuss this with the DCT and the student’s advisor prior to beginning such work, and formally request approval from the Clinical Faculty.

Students must not portray themselves to the public as psychologists or as someone offering psychological services; they must work only under proper supervision. Supervision outside of the Clinical Program must comply with the Massachusetts licensing laws and so must come from a licensed psychologist, or by an arrangement for dual supervision involving a Clinical Faculty member.

Licensing Requirements

The requirements needed to obtain a license to practice clinical work vary from state to state. Most states, however, require a minimum of one-year postdoctoral clinical experience (i.e., after the completion of the internship) as well as successful completion of the national licensing exam. It is important to recognize that states often have different licensing requirements including different course requirements. Students should consider where they might live following the completion of the Clark Ph.D. program and take the time to investigate the relevant licensing requirements. In general, Massachusetts has very strict licensing requirements, and it is likely that students who meet the requirements for licensure in Massachusetts will also meet the requirements of other states. Students are ultimately responsible for acquiring this information; however, they can find more information about licensure requirements in Canada and the United States through the following link:

<http://www.kspope.com/licensing/index.php#US>. Please note that in order to practice in the state of Massachusetts, it is necessary to apply for both Licensure as a Psychologist and a Certification as a Health Service Provider. The application for Massachusetts licensure can be found at: <http://www.mass.gov/ocabr/licensee/dpl-boards/py/>.

As of April 2011, the following Clark University courses meet the Massachusetts Licensing Board academic course requirements. Please note that while some courses meet the requirements for more than one content area, applicants may not count one course for more than one content area in the application.

Ethics	PSYC 387: Ethics
History of Psychology	PSYC 393: Historical Backgrounds
Research Design and Methods	PSYC 301: Theory and Method: Research Design
Statistics and Psychometrics	PSYC 302: Statistics
Biological Bases of Behavior	PSYC 261/361: Human Neuropsychology
Cognitive-Affective Bases of Behavior	PSYC 275/375: Societal Approaches to Thinking PSYC 296/396: What Children Know PSYC 318: Early Symbolism in Ontogenetic Development PSYC 290/350: Motivation and Self-Regulation PSYC 280/383: Morality and Culture
Social Bases of Behavior	PSYC 323: Social and Emotional Development PSYC 319: Advanced Topics in Social Psychology PSYC 275/375: Societal Approaches to Thinking PSYC 384: Culture and Human Development
Individual Differences	PSYC 311: Psychopathology PSYC 323: Social and Emotional Development
Racial / Ethnic Bases of Behavior	PSYC 364: Diversity Issues

Expectations for Professional Conduct

As described in the University Student Handbook, all Clark students are expected to behave in ways that demonstrate their care, respect, and responsibility for the personal dignity, rights, and freedoms of all members of the community, including faculty, students, and staff. The clinical program, and the Psychology Department more generally, is committed to sustaining a diverse and inclusive community of faculty, students, and staff. As a result, we expect graduate students to reflect this active engagement with varied perspectives and constituencies in their own research, teaching, and clinical work. When students' attitudes, beliefs, or values create tensions that negatively impact the training process or their ability to effectively work with members of the public, the program faculty and supervisors are committed to a developmental training approach that is designed to support the acquisition of professional competence. We support graduate students in finding a belief- or value-congruent path that allows them to work in a professionally competent manner with all. Professional competencies are determined by the profession for the benefit and protection of the public; consequently, students do not have the option to avoid working with particular populations or refuse to develop professional competencies because of conflicts with their attitudes, beliefs, or values.

All students are expected to behave in ways consistent with the University Student Code of Conduct (<http://www.clarku.edu/offices/dos/pdfs/undergraduatestudenthandbook.pdf>) and the APA's Ethics Code (<http://www.apa.org/ethics/code/index.aspx>). This expectation for professionalism applies to student behavior, attitudes, attire, and personal hygiene, and encompasses the various roles that students take on (i.e., student in class, researcher, clinician, teaching assistant). It is also expected that clinical students apply this professionalism when outside of the program structure. For example, students need to take care to demonstrate professionalism with respect to the internet, social media, and electronic communications. Even with privacy settings at the highest level, anything posted on the internet is available for public consumption. Students, clients, future employers, and even licensing boards may be able to access information that students had intended to remain private. Students are encouraged to discuss any questions they might have regarding professional conduct with their advisors or the DCT.

In addition, students are expected to treat and use the clinical environment, equipment, and testing material in a professional manner. Testing materials and equipment are intended for *course* use only (i.e., Assessment, Assessment Practicum, Individual Therapy, Couples Therapy). Students who wish to use the equipment for other purposes (e.g., research, off-site practicum, etc.) must contact the DCT or Associate DCT. Because non-Clark clinical sites should have their own materials, off-site practicum use is not an acceptable use of testing materials and equipment, except under special circumstances.

Evaluation of Student Performance

At the end of each semester, the clinical faculty meet to evaluate the clinical progress of each clinical student. All affiliate faculty are present at this meeting and provide their assessment of the student's performance in their respective clinical practica. For evaluations from the external clinical sites (i.e., third-year mini-practicum and fourth-year externship, as well as any other student who has been given permission to participate in additional clinical training outside of the department), the DCT presents the written evaluations received from those placements. Using all relevant information, the clinical faculty determine what level of performance the student should receive in each activity (i.e., coursework, clinical practica, research). Student performance is evaluated on the following scale: 0=unsatisfactory, 1=marginal, 2=satisfactory, 3=excellent. The expectation is that students will achieve a satisfactory evaluation. Student performance that is deemed marginal in any activity is regarded as concerning and is a signal to the student that improved performance is required. A remediation plan may be required. Student performance that is deemed unsatisfactory will require a meeting with the DCT and will likely require a formal remediation plan (see below).

The different student activities are subsumed under the eight research and clinical competencies (see Competency Evaluation Form below). Students who successfully complete all of the required activities for a particular competency will receive an overall evaluation of that competency. This evaluation will be made by the DCT, who will assign an overall evaluation based on the recorded performance scores for the items constituting that competency and in consultation with the student's advisor. If the rating cannot be readily determined (e.g., due to missing data), the DCT will consult with the clinical faculty as a whole to come to a final evaluation.

In addition, the faculty also evaluate student progress on the eight competencies. This progress is evaluated on the following scale: 0=below expectation for year in the program, 1=marginally at expectation for year in program, 2=solidly at expectation for year in program, 3=above expectation for year in the program. The expectation is that students will demonstrate progress *solidly at expectation for their year in the program* (evaluation =2). Students whose progress on any competency is deemed marginal may require a remediation plan, and students whose progress on any competency is deemed below expectation for year in the program will require a meeting with the DCT and will likely require a formal remediation plan.

Following the faculty meeting, each student's faculty advisor will provide that student with a summary of the faculty's feedback. This summary need not be written; indeed, it will often take the form of a verbal conversation with the faculty advisor in an individual meeting. Concurrent with the faculty advisor's summary, the DCT will also provide an updated copy of the student's Competency Evaluation Form that documents the student's progress to date. This form will be accompanied by a letter from the DCT indicating the student's overall performance that year. This evaluation will be either satisfactory or unsatisfactory. **Following the end-of-the-year meeting only, the Competency Evaluation Form must be signed by both the student and the faculty advisor and then returned to the DCT.**

Students can receive an overall unsatisfactory review for the clinical work for a variety of reasons. Some of these problems include, but are not limited to, the student's inability or unwillingness to follow directions, to accept and respond appropriately to feedback, to engage in professional conduct, or to work effectively with others. Extreme social insensitivity or personal situations that interfere with ability to conduct clinical work may also lead to an unsatisfactory review.

An overall unsatisfactory review is a serious matter and any student who receives this review will be required to meet with the DCT. In this meeting, the student and the DCT will outline a plan of action by which improvement in clinical performance will occur (see section below on Remediation Procedures). Both the student and DCT will sign the action plan. After receiving an unsatisfactory review, the student will be considered on probation for clinical work until the following faculty evaluation meeting.

Any student who receives two consecutive unsatisfactory reviews will be temporarily suspended from conducting clinical work (see below).

Suspension of Clinical Work

Because clinical psychologists often work with vulnerable individuals, it is critical that students take their clinical responsibilities seriously, fulfill their clinical obligations, and generally comport themselves in a professional manner. Repeated failure to do so could lead to suspension of clinical work and/or termination from the clinical program. In general, there exist three ways in which students may be suspended from conducting clinical work. These cases are not common, but they are important enough to warrant description.

First, any student who is found to engage in unethical behavior will immediately be suspended from conducting clinical work. These include, but are not limited to, the student's use of inappropriate language or actions with clients, unprofessional behavior, or violation of university rules or violation of state laws, all of which demonstrate the student is not meeting professional standards. Please see Appendix E for more information regarding ethical issues as they pertain to clinical training.

Second, students who receive two consecutive unsatisfactory reviews may be suspended from conducting clinical work for one semester. During this semester, the student will meet regularly with the DCT and the clinical supervisor to chart a corrective course of action (see section below on Remediation Procedures). Should the DCT deem that the student is eligible to return to clinical work following the suspension, the student will be considered on clinical probation. Clinical probation is a status under which any further unsatisfactory reviews will result in permanent prohibition of clinical training. In such extremely unusual cases, the clinical faculty will meet with the Department Chair to discuss subsequent steps, which may include requiring the student to withdraw from the clinical program and/or the overall program (see below).

Third, students who have demonstrated poor performance in their academic work by virtue of having been assigned Probationary Status by the department may not conduct clinical work until such status has been corrected. This Probationary Status can be assigned to students for a variety of reasons, including receiving a failing grade in any class, making poor progress in the completion of their portfolio, presenting an inadequate or incomplete independent research project, or making poor progress in their dissertation research. Please see the Departmental Graduate Manual for more information in this regard.

Remediation Procedures

Students who receive an *unsatisfactory review* or who have been suspended from conducting clinical work are required to meet with the DCT in order to identify a specific set of remediation procedures that must be followed. On some occasions, a student may be asked to meet with the DCT to set up remediation procedures to address concerns about a student's behavioral, academic, or ethical performance even if they do not reach the level of warranting either an *unsatisfactory review* or suspension of clinical work. For example, a student who receives a marginal evaluation in a particular course or who is making marginal progress on a competency may be asked to set up a remediation plan to address the concerns about that particular performance. In all cases, due process is utilized in resolving concerns about a student's behavioral, academic, or ethical performance. The general remediation procedure is outlined below:

1. The DCT reviews the concerns regarding the student.
2. The DCT requests and receives, where appropriate, further written evaluations from faculty and supervisors.
3. The DCT convenes, when necessary, a meeting in order that the faculty member(s) and student may share concerns and arrive at a specific program of remediation.
4. The DCT provides written notification to the student should remedial action be deemed appropriate, including possible probation, suspension of clinical work, leave of absence from the program, or dismissal. Should the student's status change, specific expectations that the student must meet before the student is reconsidered for reinstatement to full status in the program will be clearly outlined in the letter.
5. The letter will be written by the DCT, in consultation with the student's faculty advisor, and the Department Chair. The letter will include:
 - a. A description of the issues to be addressed
 - b. A plan for addressing each issue

- c. A description of any previous efforts to address or prevent each issue
 - d. Criteria for determining that the issues have been remedied or resolved
 - e. A timeline for review
6. The DCT, in conjunction with the student, determines the nature, type, and frequency of subsequent reviews.
 7. If the student, having notification of the faculty member(s)'s recommendations, believes the procedure to be unjust or the decision to be unfair, or that new information could lead to a different decision, he/she may present an appeal in writing to the DCT (see section on Grievance Procedures below).
 8. If a student is to be suspended from participation in training, he/she must be notified in writing. The letter will state the time frames and limits of the temporary suspension and its rationale. A copy of the letter is to be maintained in the student's permanent file.

Student Termination from Clinical Program

Student termination from the clinical program could occur for one of the following two reasons:

1. Inability or unwillingness to satisfactorily address concerns raised in an unsatisfactory review through the remediation process (see above)
2. Conduct that is deemed so egregiously unprofessional or unethical that remediation is not appropriate

When such situations arise, program faculty must review the student's behavior at the next available program meeting. Prior to this meeting, the faculty member involved (e.g., advisor, supervisor, or DCT) will notify the affected student as to the issues and concerns. The student may choose to work with this faculty person, or another faculty person, to present information to the faculty. Information may be presented in verbal or written form. Upon request through the DCT, the student may be invited to appear before the Clinical Faculty to present her/his side of the issues.

After presentation of information by all parties involved, the Clinical Faculty and Department Chair will then determine whether the student's behavior warrants dismissal. If the student is not dismissed, the faculty must specify the specific contingencies for retention including the behavioral change necessary (see section on Remediation Procedures), the criteria and process to be used in evaluating progress, and the dates by which change must be evidenced. The student's advisor will be responsible for monitoring the remediation program and bringing information back to the faculty within the guidelines and timelines established. Failure to satisfactorily complete the remediation program will result in dismissal from the program.

Grievance Procedures

In general, students who feel that they have not been treated fairly should follow the departmental grievance procedures as outlined in the Graduate Manual. Students are encouraged to make efforts to resolve the problem with the relevant faculty member through informal discussion. In the event that the student feels that such discussions have not led to a fair outcome, the student should then consult with the DCT. If the student remains unsatisfied, he or she may ask the Department Chair to convene a meeting of the Grievance Committee for resolution (see Graduate Manual for procedures). Students who believe that they have not been treated fairly through such procedures may bring their grievance to the Dean of the Graduate School.

Appendix A: Checklist and Timetable of Completion for Non-coursework Requirements

First Year:

- Fall: Assemble Portfolio committee
Consult with primary research advisor on developing program of research
- Spring: Develop first year project plan and present in poster format at Departmental Graduate Research Festival
Work on portfolio

Second Year:

- Fall: Work on 2nd year project and portfolio
- Spring: Continue working on portfolio
Present 2nd year project as a talk at Departmental Graduate Research Festival

Third Year:

- Complete Portfolio requirements
Form dissertation committee
Develop dissertation proposal
Defend dissertation proposal by end of year

Fourth Year:

- Form dissertation committee, develop and defend dissertation proposal (if not already completed)
Conduct, complete, and defend dissertation
Apply to clinical internships

Fifth Year+:

- Conduct, complete, and defend dissertation (if not already completed)
Apply to clinical internships (if not already completed)
Complete APA-approved clinical internship

Note: Students should also review the Graduate Student Manual regarding residence and time requirements for the doctorate degree. Currently, all students are limited to seven years in the program. Thus, clinical students are required to have completed both the internship and dissertation no later than the end of the seventh year.

Appendix B: Clinical Program Course Requirements Checklist

Below are courses that comprise the Clinical Psychology Program Curriculum. Please note that there are other non-course requirements for the clinical program (e.g., portfolio, number of clinical hours, etc.) that are important to track. These other requirements are described in detail in this manual.

Remember to keep copies of your course syllabi. Many state licensure boards require copies of syllabi as a part of licensure applications.

Class	Completed (☑)
Theory and Method: Research Design (301) (1 semester)	<input type="checkbox"/>
Statistical Methods (302) (2 semesters)	<input type="checkbox"/>
Assessment (303) (2 semesters: Adult and Child)	<input type="checkbox"/>
Ethics (387)	<input type="checkbox"/>
Theories of Psychotherapy (310)	<input type="checkbox"/>
Psychopathology (311)	<input type="checkbox"/>
Historical Backgrounds (393)	<input type="checkbox"/>
Diversity (364)	<input type="checkbox"/>
Clinical Workshop (389) (Yr 1 through Yr 4)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Assessment Practicum (313) (1 semester)	<input type="checkbox"/>
Adult Psychotherapy Practicum (338) (2 semesters)	<input type="checkbox"/>
Couples Therapy Practicum (342) (2 semesters)	<input type="checkbox"/>
Clinical Mini-Practicum (340) (Optional; 2 semesters)	<input type="checkbox"/>
Clinical Externship (344) (2 semesters)	<input type="checkbox"/>
Research/Second Year Project (317) (1 semester)	<input type="checkbox"/>
Research (Dissertation) (317) (2 semesters)	<input type="checkbox"/>
Internship (398) (2 semesters)	<input type="checkbox"/>

Appendix C: Aspects of Behavior Classes

Students are required to complete at least one course from each of the five categories below. Notably, most of the Developmental Bases of Behavior courses also fulfill at least one other requirement.

Class	Completed (☑)
Affective Bases of Behavior	
Social and Emotional Development (323)	<input type="checkbox"/>
Biological Bases of Behavior	
Human Neuropsychology (261/361)	<input type="checkbox"/>
Cognitive Bases of Behavior	
Early Symbolism in Ontogenetic Development and History (318) OR Societal Approaches to Thinking (275/375)	<input type="checkbox"/>
Developmental Bases of Behavior	
Social and Emotional Development (323) OR Morality and Culture (280/383) OR Culture and Human Development (384)	<input type="checkbox"/>
Social Bases of Behavior	
Advanced Topics in Social Psychology (319) *with approved topic OR Culture and Human Development (384) OR Societal Approaches to Thinking (275/375)	<input type="checkbox"/>

Appendix D: Practicum Therapy Training Log

PRACTICUM THERAPY TRAINING LOG													
Name: _____					Semester: Fall ____ Spring ____ Summer ____ Year ____								
PATIENT INFORMATION					SERVICE INFORMATION / INTERVENTION						SUPERVISION INFORMATION		
Case #	Age	Sex	Race	SES	Presenting Problem	Type of Treatment	Theoretical Orientation	Special Procedures	face-to face hours	support hours	Supervisor	# Individ. Hours	# Group Hours

Total individual supervision hours	0	Total face-to-face therapy hours	0
Total group supervision hours	0	Total support hours	0

Appendix E: Guidelines for Professional Ethics at Clark University

An integral component of training and preparation for entry into the professional realm of clinical psychology is familiarity with and adherence to guidelines set forth by the American Psychological Association (APA). The APA publication *Ethical Principles of Psychologists and Code of Conduct* (2000) provides both aspirational goals for psychologists as well as a set of enforceable rules. While not designed to be exhaustive, the Ethics Code was written broadly so as to apply to conduct in a variety of contexts (i.e., research, teaching, clinical, public service, supervision) with the aim of protecting the intended recipients of psychologists' work and educating psychologists, students, and the public regarding ethical standards and behavior.

It is the responsibility of each student, upon entry into the program, to review the APA Ethics Code and to discuss questions and/or concerns with members of the faculty, clinical supervisors, research mentors, and fellow students (the APA Ethics Code may be accessed and downloaded from the APA website <http://www.apa.org/ethics/code/index.aspx>). During the Fall semester of the first year in the program, students will also have the opportunity to engage with the Ethics Code as a part of required coursework (Ethics (387); see p. 6 for a course description) and grapple with the ethical dilemmas professionals routinely face as clinicians, researchers, and educators.

Ongoing interaction with the Ethics Code is expected as students transition back and forth between clinical, research, and teaching roles. Specific expectations and policies will be reviewed by research mentors and clinical supervisors; however, several general issues are highlighted here.

Academic Honesty & Scholarly Integrity

In General Principle C, the APA Ethics Code addresses psychologists' responsibility to proceed honestly and to avoid fraudulent activities (e.g., cheating, stealing, misrepresentation) in work-related activities. In addition, Clark University's policy on academic integrity (<http://www.clarku.edu/offices/aac/integrity.html>) explicitly covers the consequences for violations including plagiarism, cheating, and other intentional misrepresentations.

Confidentiality, Protected Health Information, and HIPAA

Federal guidelines, state law, and the APA Ethics Code all offer protections for the security and confidentiality of the client's Protected Health Information (PHI) as well as other client information acquired during the course of professional services.

To be in accordance with these guidelines, students should take the following precautions:

- 1) At the outset of a professional relationship, clients should be notified of the limits of confidentiality:
 - a. The therapist may share confidential information in the service of preventing a client from hurting him/herself and others when there is "clear and present danger."
 - b. The therapist is a mandated reporter and must make a report of suspected child abuse or neglect, elder abuse, and abuse of a disabled person to the Department of Children and Families.

- 2) Client information should not be stored on personal computers or PDAs. Consult with your clinical supervisor regarding specific record keeping policy and always remain cognizant of your responsibility to safeguard client information.
- 3) The Clark University email program is not a confidential means of communication. As such, students should not include PHI in emails to clients, supervisors, faculty, or other students. The client should also be made aware that any emails they choose to send to the student therapist are not ensured to be confidential.
- 4) Professional consultation is often an integral component of providing high quality services to clients. When consulting with appropriate professionals, students should make every effort to protect the client's privacy by disclosing only those details necessary for a successful consultation and should do so only in a private setting (i.e., not in a public setting where conversations may be overheard).

Human Relations

In General Principle E, the APA Ethics Code (2002) addresses the psychologists' mandate to recognize the dignity of all people; to respect differences resulting from cultural background, race, ethnicity, country of origin, gender, gender identity, socioeconomic status, sexual orientation, religion, and disability among others; to avoid bias in their work; and to refrain from participation in activities that may be prejudicial.

Because Clark is a small university, the potential for multiple relationships is increased. The APA Ethics Code defines multiple relationships as occurring when "a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person" (p. 6). For example, student therapists may find that they have been assigned a client for whom they also serve as a Teaching Assistant. Multiple relationships should be avoided in so far as they are likely to impair the psychologist in fulfilling his/her role in a competent manner or risk harm or exploitation to the client. Should such situations arise, the student is encouraged to seek consultation from a clinical supervisor or other relevant professional (e.g., research mentor in the case of a dual relationship with a study participant).

In general, it is expected that students and faculty will refer to the APA ethics code for guidance when confronted with questions regarding professional and ethical behavior while engaged in their work, whether clinical, research, coursework or teaching. Consultation on ethical issues among students and faculty are also encouraged, as these conversations can help students resolve ethical dilemmas as well as contribute to the growth of students in the program. In addition, students are encouraged to contact the APA's ethics hotline (202-336-5930) for specific consultation.

Appendix F: Externship Manual

Externship Program Description

Clinical Externship (PSYC 344) involves a half-time placement at one of several affiliated training sites. Students work with more complicated clinical cases under close supervision in the context of working clinical agencies. These external practicum sites are reviewed to assure that our training sites are clearly committed to training and supervising our students. Students provide regular feedback about their practicum experiences both by means of official evaluation surveys and through regular meetings with the Associate DCT. Although there is a list of established externship site placements, trainees can work with the Associate DCT and the DCT to identify other potential sites that may be more appropriate fits with their clinical interests.

There are several factors to consider when choosing externship sites: (1) approval by the DCT, (2) appropriate fit, and (3) history of working with Clark externs.

First, the Clinical Psychology training committee has several requirements and preferred characteristics of externship sites. Trainees must be supervised by a licensed, doctoral-level Clinical Psychologist, workload should not exceed 20 hours per week, and externship supervisors must be willing to release trainees to attend Clinical Workshop. It is the preference of the Clinical Program that externship placements show a commitment to training, provide supervision within the context of a cohesive theoretical model, and provide additional training experiences (e.g., didactics, grand rounds, etc.) that augment the trainee's clinical experiences.

Second, selected externship sites should provide clinical opportunities that are consistent with trainees' professional goals. For instance, if a trainee's goal is to work in a large hospital setting, that trainee should look for opportunities in that setting. Relatedly, attractiveness as an internship candidate can be influenced by where the trainee completed externship. For example, most internship directors at college counseling centers prefer that candidates have had prior college counseling experience. Other factors to consider are caseload and number of hours per week, as well as predominant model, amount of supervision, amount of assessment, diversity, networking opportunities, paperwork, and educational opportunities such as workshops and clinics.

Finally, there are several sites that have a long history of working with Clark trainees. There are some advantages to pursuing these opportunities. For example, the application process for these sites may be easier to negotiate since Clark has already established working relationships with these sites and is familiar with application procedures. Also, previous externs have provided evaluations of these externship experiences that are available for review. Prospective externs can learn additional information about sites that may not be present in the site's own literature. That said, trainees have a great deal of flexibility in pursuing externship opportunities that best fit their clinical training needs and are able to choose new placements pending approval by the DCT.

The Application Process

For most practicum sites, the application process involves submitting a CV, a letter of interest, and letters of recommendation in the Fall of the third year of training. Some externship placements require writing clinical writing samples as well as the completion of particular forms. Moreover, application deadlines vary by site, and so it is important to contact the externship site directors prior to submitting

applications to confirm the site's applications procedures. Interviews typically are conducted in late Winter, and range in format from a single one-on-one interview with a supervisor to group interviews. Prior to beginning clinical work at the externship site, the Clinical Training Agreement must be completed and signed by the trainee, the clinical supervisor, and the DCT.

Sample List of Externship Placements

Child, Adolescent, and Family Placements

- **Children's Friend:** The Ellsworth Child and Family Counseling Center is the largest program at Children's Friend. It provides high quality mental health services to children ages 0 – 22 and their families to address a wide range of emotional and behavioral problems, from depression to severe behavioral disorders. (www.childrensfriend.org)
- **Community Healthlink, Youth and Family Services:** Worcester Youth Guidance Center merged with Community Healthlink, Inc., a local non-profit behavioral healthcare organization that provides mental health, substance abuse, and homeless services. Interns provide outpatient individual and family therapy to children and adolescents at Community Healthlink. (www.communityhealthlink.org/htmlpages/Internships.html)
- **SPARK Center – Boston Medical Center:** The SPARK Center is a medically-therapeutic childcare facility and day program. SPARK serves children and families whose lives are affected by complex medical needs (i.e.: neurological complications, failure to thrive and HIV/AIDS); emotional and behavioral challenges related to trauma (i.e.: child abuse, domestic violence and caregiver loss and separation); and developmental delays and special educational needs. (www.bmc.org/pediatrics-sparkcenter/education/internshipprogram.htm)
- **UMass Medical School Family Health Clinic:** The training philosophy and model is based on a supervised experiential approach in which externs receive training in evidence-based clinical health psychology through didactics, clinical observations, clinical supervision, and by training side-by-side with family medicine residents. Externs learn to recognize behavioral needs and use psychosocial knowledge and behavioral health skills in a primary care setting. (<http://www.umassmed.edu/fmch/fellowships/clinical-health-psychology-in-primary-care/> for information about site, but not specifically externship opportunity)
- **Worcester Recovery Center – Adolescent Unit:** The UMass Adolescent Continuing Care Units are comprised of two 15-bed inpatient facilities sited on the grounds of Worcester Recovery Center and Hospital in Worcester, Massachusetts. Patients range in age from thirteen to eighteen. This population is culturally, ethnically, racially and socioeconomically diverse. Assessment and treatment of clients is provided using a multidisciplinary approach. (<http://www.umassmed.edu/psychiatry/clinicalservices/child-adolescent-clinical-services/Adolescent-Treatment/Adolescent-Continuing-Care-Units/>)

Adult Placements

- **AdCare Hospital:** AdCare Hospital treats individuals with substance use disorders, including patients with complex medical or psychiatric needs. Externs have the opportunity to work in the

inpatient, partial hospital, and outpatient services, and gain experience in individual and group therapy, in addition to consultation. (800alcohol.com)

- **Boston Consortium Predoctoral Practicum Training Program:** externs can apply to work at one of several sites in the Boston Consortium, including the Worcester VA Outpatient Clinic. The Outpatient Services site provides clinical training in triage, anger management, Neuropsychology, Smoking Cessation, and individual and group psychotherapy. (www.boston.va.gov/psychologytraining.asp)
- **Edith Nourse Rogers Memorial VA:** This practicum placement is a VA medical center. There are three tracks of practicum training: Center for Integrative Psychotherapy (CIP); a split track involving CIP and the Domiciliary program for homeless veterans; and the neuropsychology program. The CIP provides a range of short-term and longer-term individual and couples psychotherapy, incorporating dynamic, cognitive, behavioral, experiential, and humanistic/transpersonal perspectives in an integrative approach to treatment. (www.psychologytraining.va.gov/bedford/)
- **Fenway Health:** Fenway Health primarily serves the LGBT community, as well as the Fenway neighborhood of Boston. The practicum program offers an interdisciplinary approach with staff, which is comprised of social workers, mental health & HIV counselors, psychologists, psychiatrists, psychiatric nurses, victim advocates, substance abuse case managers/counselors, health promotion educators, and acupuncturists. The theoretical orientation is predominantly psychodynamic; however, with active substance abusing and acute PTSD clients the emphasis may be on cognitive behavioral and psychoeducational approaches. (www.fenwayhealth.org/site/PageServer?pagename=FCHC_srv_services_mentalhealth)
- **Hampshire College:** Externs gain experience in a wide range of psychological counseling, career and consulting services to college students at Hampshire College. The majority of the training is based on psychodynamic and object-relations theory. (www.hampshire.edu/studentlife/10799.htm)
- **Holy Cross College Counseling Center:** Externs gain experience in a wide range of psychological counseling, career and consulting services to college students at Holy Cross. (<http://www.holycross.edu/health-wellness-and-access/counseling-center>)
- **McLean Hospital:** Externs gain experience leading groups and providing brief consultation to patients in the Behavioral Health Partial Hospital Program. (www.mclean.harvard.edu/education/professionals/practicum/bhp.php)
- **UMass Lowell Counseling Services:** Externs gain experience in a wide range of psychological counseling, career and consulting services to college students at UMass Lowell. The majority of training is in cognitive-behavioral therapy. (www.uml.edu/student-services/Counseling/Internships-Practicums.aspx)
- **Wellesley College's Stone Counseling Center:** Externs gain experience in a wide range of psychological counseling, career, and consulting services to students at Wellesley College (a women's college). Externs participate in individual clinical supervision, group supervision, several training seminars, clinical team meeting, a trainee support group, and additional

opportunities for participation in larger activities of the Stone Center and the Wellesley Centers for Women. (www.wellesley.edu/counseling/clinicaltrainingprogram)

- **Worcester Recovery Center – Adult Program:** Each trainee is assigned to a multidisciplinary team on one of the hospital’s continuing care units where, under the supervision of the unit psychologist, the trainee conducts admission assessments, specialized risk evaluations, and individual and/or group therapy. Trainees also spend one or two hours per week in the hospital’s Cognitive Rehabilitation Lab helping patients progress through a series of computer-based tasks designed to remediate cognitive deficits often associated with schizophrenia and other major mental illnesses. Trainees are expected to provide full batteries of cognitive and personality/projective tests to patients throughout the hospital. (<http://www.mass.gov/eohhs/gov/departments/dmh/worcester-recovery-center-and-hospital-.html>)

Externship Application Checklist

Action	Date	Complete
Identify potential externship sites (typically 4-5 sites)	October	<input type="checkbox"/>
Contact the “contact person” to inquire about new deadlines, openings, required application materials, etc.	October	<input type="checkbox"/>
Ask references for letters of recommendation: Provide letter-writers with a CV, list of sites being applied to, and due dates	October/November	<input type="checkbox"/>
Submit applications	Varies (Nov 1 – Jan 15)	<input type="checkbox"/>
Interviews	Varies (Dec-Feb)	<input type="checkbox"/>
Choose placement	January/February	<input type="checkbox"/>

Note. Due dates and application procedures may change from year to year at some externship sites. Be sure to verify information regarding the application process and due dates with the contact person.

Sample Cover Letter

Date

Jane Director, Ph.D.
Chief Psychologist
Fantastic Externship Site
95 Igot Drive
Worcester, MA 01610

Dear Dr. XX,

I am writing to express my interest in a practicum placement on the adult team at XX for the 2013-14 academic year. My clinical interests center on working with diverse adults with a range of psychopathology and utilizing a variety of treatment modalities. I hope to continue my clinical training at XX where I would have the opportunity to work with a team of top-quality professionals who treat a diverse client population.

Currently, I am in my third year in Clark University's clinical psychology doctoral program. While studying at Clark, I have acquired a variety of clinical experience. I began my training by conducting intellectual and personality assessments with adults. I continued with intellectual and emotional assessments with children in my second-year assessment practicum. This experience included providing feedback to parents and teachers. In my second year, I worked with individual undergraduates in psychotherapy with presenting issues ranging from college adjustment to chronic depression and identity development. I am currently conducting couples therapy using an acceptance and change model. I believe that there are several strengths of my training thus far. First, it has allowed me to utilize a variety of models and treatment modalities. Second, I have been exposed to multiple theoretical frameworks through my participation in different research groups that has strengthened my ability to conceptualize cases from diverse perspectives. Third, as part of my coursework, I was exposed early on to the strengths of empirically-supported treatments.

I am particularly interested in working with adults within both psychodynamic and cognitive-behavioral frameworks. I have sought opportunities to learn more about each of these approaches but am excited about the potential to refine my clinical skills by working with clients in a setting where community mental health is done well. Your site has a long and impressive history of providing needs-sensitive mental health services to the diverse clients in the surrounding community. I am looking to augment my clinical experience by treating a diversity of psychopathology and by collaborating with talented mental health professionals. I am also excited about working in a hospital setting because of the opportunity for enhanced learning through seminars, workshops, and outside speakers. In addition, I am attracted to the potential for unique training experiences, such as incorporating behavioral medicine and psychological testing into my work.

In sum, I am excited about your training program because it involves working with a diverse population, being a part of an interdisciplinary treatment team, and because there is a wide range of unique training opportunities available. I would love to visit your site and learn more about the center and your adult outpatient treatment. I can be contacted at myemail@clarku.edu or by phone at (508) xxx-xxxx. I have enclosed my curriculum vitae and 3 letters of reference. Clinical writing samples are available upon request. Thank you in advance for considering my application and I look forward to speaking with you.

Sincerely,

Externship Evaluation: Evaluation of Supervisor

Externship Site: _____ Supervisor: _____

Trainee: _____ Inclusive Dates: _____

Amount of supervision: Average number of hours of supervision with supervisor named above

Individual: _____ hrs/week

Group: _____ hrs/week

Please rate the following dimensions (quality, teaching, relationship) using the scale below:

1	2	3	4	5
Poor	Fair	Satisfactory	Good	Excellent

Qualities:

- _____ Reliable (e.g., had regular supervision meetings; arrived in a timely manner)
- _____ Available in emergencies
- _____ Able to appropriately challenge the trainee to advance his/her understanding and skills
- _____ Promotes a sense of acceptance and support
- _____ Models appropriate professional and ethical behavior

Teaching:

- _____ Interest and enthusiasm for teaching
- _____ Offers suggestions appropriate to trainee's level of training
- _____ Instructs trainee in how to integrate different techniques
- _____ Raises ethical and legal considerations
- _____ Assists therapist in making theoretical case formulations

Relationship:

- _____ Accepts disagreement well
- _____ Establishes clear and reasonable expectations of therapist performance
- _____ Processes any conflicts that arise in the supervisory relationship
- _____ Gives criticism constructively
- _____ Is aware of trainee's objectives

Overall: _____ Overall quality of supervision

What are the supervisor's primary strengths? (Please list at least two.)

What changes could the supervisor make to improve the training experience? (Please list at least two.)

Additional comments or other remarks:

Trainee Name

Date

Appendix G: Annual Student Competency Evaluation Form

Student Name:
 Advisor:
 Year of Entry:

Annual Progress toward Competencies

Rate the trainee's overall progress on each competency according to the following scale:

- 0 = Below expectation for year in program (needs to repeat elements) 2 = Solidly at expectation for year in program
 1 = Marginally at expectation for year in program 3 = Above expectation for year in program

Please note that a minimum score of 1 is required in each competency in order to advance to the next stage of training

Scientist Training								
	Year 01	Year 02	Year 03	Year 04	Year 05	Year 06 (if needed)	Year 07 (if needed)	Course-based Competency met?
Competency 1								
Competency 2								
Competency 3								
Overall progress								
Practitioner Training								
	Year 01	Year 02	Year 03	Year 04	Year 05	Year 06 (if needed)	Year 07 (if needed)	Course-based Competency met?
Competency 4								
Competency 5								
Competency 6								
Overall progress								
Science-Practice Integration								
	Year 01	Year 02	Year 03	Year 04	Year 05	Year 06 (if needed)	Year 07 (if needed)	Course-based Competency met?
Competency 7	n/a							
Competency 8								
Overall progress	n/a							

Signatures	Trainee Signature	Date	Advisor Signature	Date	DCT Signature	Date
Year 1						
Year 2						
Year 3						
Year 4						
Year 5						
Year 6 (if needed)						
Year 7 (if needed)						

All Requirements for Graduation Met
 Date _____
 DCT Signature _____

Course Completion and Competency Entry Form

0 = Unsatisfactory 1 = Marginal (minimum) 2 = Satisfactory 3 = Excellent

		Date Completed	Rating (0, 1, 2, 3)
Practica			
338	Individual Psychotherapy Practicum		
340	Mini-Practicum (optional)		
342	Couples Therapy Practicum		
344	Clinical Externship		
346	Advanced Clinical Practicum (optional)		
389	Internship		
Clinical Workshop			
389	Clinical Workshop Year 01		
389	Clinical Workshop Year 02		
389	Clinical Workshop Year 03		
389	Clinical Workshop Year 04		
Research			
	Independent research project Year 01		
	Independent research project Year 02		
	Portfolio Year 01		
	Portfolio Year 02		
	Portfolio Year 03		
	Dissertation Research (Defense)		
Core Courses			
301	Theory & Method: Research Design		
302	Statistics, Semester 1		
302	Statistics, Semester 2		
303	Assessment, Adult		
303/304	Assessment, Child		
310	Theories of Psychotherapy		
311	Psychopathology		
313	Assessment Practicum		
361	Human Neuropsychology		
364	Diversity Issues Seminar		
387	Ethics in Clinical Psychology		
393	Historical Backgrounds		
Electives			
318	Early Symbolism in Ontogenetic Development		
323	Social and Emotional Development		
354	Social and Personality Development		
375	Societal Approaches to Thinking		
383	Morality and Culture		
384	Culture and Human Development		
	Advanced Qualitative Methods		
	Advanced Quantitative Methods		
Others (Enter course Name and number in this column--will auto-fill in form)			
Other Cognitive?			
Other Affective?			
Other Social?			

First Last

Competency 1: Demonstrates basic knowledge of research methods and an understanding of the appropriate analytic tools to use when conducting research.		
Training Domain	Date Completed	Performance
Theory & Method: Research Design		
Statistics, Semester 1		
Statistics, Semester 2		
Year 1 Independent Research Project		
Year 2 Independent Research Project		
Overall Competency 1		
Optional Comments:		

Competency 2: Can conceptualize, conduct, analyze, and present independent research.		
Training Domain	Date Completed	Performance
Year 1 Independent Research Project		
Year 2 Independent Research Project		
Dissertation Research		
Overall Competency 2		
Optional Comments:		

Competency 3: Can successfully engage in an array of scholarly activities such as presenting at conferences; authoring journal articles, book chapters, and review papers; and applying for grants.		
Training Domain	Date Completed	Performance
Research Portfolio Year 1		
Research Portfolio Year 2		
Research Portfolio Year 3		
Overall Competency 3		
Optional Comments:		

Competency 4: Can think critically about psychological assessment and have basic assessment skills necessary for entry into the field.		
Training Domain	Date Completed	Performance
Adult Assessment		
Child Assessment		
Assessment Practicum		
Overall Competency 4		
Optional Comments:		

First Last

Competency 5. Can think critically about the conduct of psychotherapy, evaluate the evidence-base for different theoretical approaches, and use basic psychotherapy skills necessary for entry into field.		
Training Domain	Date Completed	Performance
Theories of Psychotherapy		
Psychotherapy Practicum		
Couples Therapy Practicum		
Externship		
Internship		
Overall Competency 5		
Optional Comments:		

Competency 6. Possesses an array of professional skills and knowledge, including professional ethics, diversity issues, case conceptualization and presentation skills, and peer-supervision.		
Training Domain	Date Completed	Performance
Ethics in Clinical Psychology		
Theories of Psychotherapy		
Diversity Issues		
Psychotherapy Practicum		
Couples Therapy Practicum		
Externship		
Internship		
Clinical Workshop (Year 2)		
Clinical Workshop (Year 3)		
Clinical Workshop (Year 4)		
Overall Competency 6		
Optional Comments:		

Competency 7. Can Integrate scientific literature into their clinical decision-making, empirically evaluate outcomes of their clinical cases, and present this information as part of a case formulation.		
Training Domain	Date Completed	Performance
Psychotherapy Practicum		
Couples Therapy Practicum		
Externship		
Clinical Workshop (Year 2)		
Clinical Workshop (Year 3)		
Clinical Workshop (Year 4)		
Overall Competency 7		
Optional Comments:		

First Last

Competency 8. Can use clinically-based knowledge in developing and conducting research and can articulate the clinical implications of research findings.		
Training Domain	Date Completed	Performance
Year 1 Independent Research Project		
Year 2 Independent Research Project		
Dissertation Research		
Overall Competency 8		
Optional Comments:		

Broad Aspects of Behavior Competencies		
Training Domains and Courses	Date Completed	Performance
Biological Aspects Human Neuropsychology		
Cognitive Aspects (any 1 course) Early Symbolism in Ontogenetic Development and History Societal Approaches to Thinking		
Affective Aspects (any 1 course) Social and Emotional Development		
Social Aspects (any 1 course) Societal Approaches to Thinking Culture and Human Development		

Comments:

First Last

Additional Curriculum-based Competencies			
Area of Competency	Specific Course	Date Completed	Performance
Ethics	Ethics in Clinical Psychology		
Psychological Measurement (all 5 courses)	Theory & Method: Research Design		
	Adult Assessment		
	Child Assessment		
	Statistical Methods (2 semesters)		
	Diversity Issues		
Individual Differences (all 3 courses)	Adult Assessment		
	Child Assessment		
	Psychopathology		
Cultural Diversity	Diversity Issues		
Human Development (any 1 course)	Social and Emotional Development		
	Morality and Culture		
	Culture and Human Development		
Psychopathology	Psychopathology		
History and Systems	Historical Backgrounds		
Consultation (both courses)	Psychotherapy Practicum		
	Externship		
Supervision (both courses)	Psychotherapy Practicum		
	Externship		
Lifelong learning (all 4 years)	Clinical Workshop Year 01		
	Clinical Workshop Year 02		
	Clinical Workshop Year 03		
	Clinical Workshop Year 04		

 Comments: