University of Vermont

Clinical Psychology Ph.D. Program

Policies and Procedures Manual
(Blue Book)

2024-2025

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<u>Welcome</u>

…to the Ph.D. Program in Clinical Psychology at the University of Vermont and to a new academic year! We are so glad you have decided to come learn with us and to experience the beautiful surroundings Vermont has to offer! Please read this document carefully as it serves as your "road map" to a successful journey through our program's requirements and academic milestones. It helps to re-read it at least once a year. The forms/policies included here represent the most recent versions available at the time you entered the program. The most recent versions of Department- and program-level policies can be found on the Department's website under the menu "For Current Graduate Students" (see https://www.uvm.edu/cas/psychology/graduate-forms).

Be sure to contact me if you need support or have any questions or concerns. Thanks, and have a great year.

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Program Philosophy

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The program in clinical psychology at the University of Vermont is based on the scientist-practitioner model of training originally outlined at the 1949 Boulder Conference. The program is designed to develop competent professional psychologists who can function in applied, academic, or research positions. We emphasize clinical practice that is empirically based, research that is clinically relevant, and a balance in clinical and research training.

In order to train clinical psychologists who are scientist-practitioners, our program emphasizes the <u>integration</u> of research and clinical training and some exposure/training in teaching. Our model of training stresses the simultaneous early exposure to clinical activities, research training relevant to clinical problems, and course work to learn the fundamentals of research and clinical interventions. In addition, gaining some experience in teaching occurs during your educational experience. Please see the Doctoral Portfolio for the <u>minimum</u> expectations in clinical, research, and teaching areas and see the Graduate Student Record of Courses and Requirements for course requirements.

In many graduate programs, clinical students' service delivery activities are divorced from their research activities. It is therefore not surprising that upon their departure from an academic setting, many clinical graduates stop doing research. Clearly, one reason for this is that the student has not had the opportunity and training to develop research skills relevant to clinical issues and populations. We provide opportunities to conduct research with clinical problems and help students resolve in a realistic fashion the administrative and design problems associated with such clinical research.

Research and clinical training, along with course work, begins in the first year of our program. Students are expected to become involved in research with their faculty mentor immediately upon entering graduate school, often through a funded research assistantship. Research training at a more advanced level occurs through the Master's Thesis Project, which involves a proposal, and final written document, and a formal defense before a committee and continues with the dissertation research in subsequent years. Clinical training begins with course work in psychopathology, assessment, and intervention in students' first year. Also in their first and second years, students are involved in a vertical practicum supervision team, beginning with exposure to advanced students' clinical work in the first semester of their first year and taking increasing responsibilities over the next year and one-half. This is followed by more advanced training in the form of at least two years of a 10-hour per week clinical placement in their third and fourth year in our clinic, Vermont Psychological Services (VPS), and culminating in an APA-approved internship in the sixth (or much less commonly fifth) year. Thus, both research and clinical training are carefully sequenced in increasing complexity throughout the program.

The "learning to teach" experience is less structured; however, all students have to be involved in a teaching activity at some point in their graduate training. Teaching activities may include being a teaching assistant for a course, teaching your own course after completing your Master's Thesis, or any of several other activities (see Doctoral Portfolio).

<u>Aims, Objectives, and Competencies</u>

Consistent with the philosophy of an integration of research, clinical, and instructional training, the University of Vermont Clinical Psychology Program espouses four integrated training aims:

<u>Aim #1: Knowledge in Basic Psychology, Research Methodology, and Clinical Psychology.</u>

Objectives for Aim #1: a) exposure to and understanding of the foundations of psychology including the scientific literature and theories on which it is based; b) exposure to and understanding of and use of scientific approaches to psychology including rigorous methodologies; c) exposure to and understanding of the development and causes of psychopathology and empirically supported approaches to assessment and therapy; and d) integration of basic psychology, research methodology, and clinical psychology.

Competencies Expected for these Objectives: a) quality written and oral presentations on the scientific literature and underlying theories; b) application of principles and techniques from psychometric theory, experimental design, and inferential statistics to design one's own work and to critically examine the literature; c) quality written and oral presentations on psychopathology, its assessment, and its treatment; d) development of quality written documents and oral presentations that integrate basic psychology, research methodology, and clinical psychology.

<u>Aim #2: Development of Strong Clinical Skills:</u>

Objectives for Aim #2: a) assess clients; b) formulate case conceptualizations; c) implement evidence-based treatment strategies; d) develop competencies in ethics, cultural diversity, and professional behavior; 3) write reports; and f) make oral case presentations.

Competencies Expected for these Objectives: a) learn and use standardized assessment instruments; b) use of a framework for understanding the causes and maintaining conditions for psychopathology; c) use of evidence-based intervention strategies; d) develop an understanding of the role of social, cultural, and individual variables in the assessment and treatment of psychopathology; e) work effectively with clients from a variety of socio-cultural backgrounds; f) write clear, detailed and conceptually framed case notes and reports; g) ability to organize and present clear and conceptually framed oral case presentations.

<u>Aim #3: Development of Strong Research Skills:</u>

Objectives for Aim #3: a) critique the scientific literature; b) conceptualize and design research; c) conduct research; d) analyze research data; e) present research data in written and oral formats; and f) exposure to the grant funding process.

Competencies Expected for these Objectives: a) apply research skills to conduct all phases of the research process; b) quality oral and written presentations; and c) apply for research funding and/or gain knowledge about grant funding.

<u>Aim #4: Develop Teaching Skills:</u>

Objectives for Aim #4: a) organize material for imparting information; b) effectively communicate to students (junior graduate students, undergraduates); c) provide feedback to students.
Competencies Expected for these Objectives: a) develop a syllabus or organized approach; b) impart information in a clear and caring manner to students; c) utilize an organized, systematic way to provide feedback on student performance.

Policies and Procedures

Annual Review of Graduate Students

Each year in the fall (October), there is a clinical faculty meeting to evaluate all graduate students who are beyond their first year in the program. Students will complete an annual report prior to this meeting. Our main purpose is to see whether each student is "in good standing" given her/his/their year in the program. The results of the annual evaluation are given to the student and placed in her/his/their file. (Also see section titled Evaluations).

Mentor-Based Research Training Model: Who Is Your Advisor? What if you have problems and/or wish to change labs?

Our program is based on a mentor-based research training model; therefore, you are accepted into the program to work with a specific faculty member. You are expected to remain part of this faculty member's lab or team throughout graduate school. This faculty member will serve as your academic advisor and your research advisor who will supervise your Master's Thesis research project, your dissertation, and other research projects. The mentor-based research model ensures that students begin work on relevant research during their first year with the support of a faculty member who is involved in helping them make career choices immediately upon graduate school entry. Occasionally, a student or the faculty member may decide the "fit" is not a good one or a student's interests change as they progress through the program. In such cases, options may be available to change research mentor, depending on a variety of factors, including the student's source of funding and the availability of an alternative mentor. The student in this situation should start by having a conversation with the research advisor about the difficulty to problem-solve ways to address it. In the event that a student wishes to pursue changing labs, they should follow the program's grievance policy, going first to the Director of Clinical Training (DCT) and progressing to higher levels (second, the Department Chair; third, the Graduate College, etc.) only if there is unsatisfactory resolution at lower levels of intervention. Students cannot skip stages of this policy, unless the student in question is a student in the DCT's or Chair's lab. (See The Appeal and Grievance Process, below).

Some clinical students do their research with a member of the General/Experimental faculty, with a faculty member who has a joint appointment with our department, or with an adjunct faculty member. If that is the case, this faculty member is your "research advisor" and you will be asked to identify a member of the core clinical faculty to be your "academic advisor."

You should meet with your advisor on a regular basis to make sure you are progressing through the program. It is your responsibility to check in with the research advisor before making plans for UVM breaks and administrative closures (when UVM is closed) to resolve any conflicts with research duties before traveling.

What Does It Mean To Be "In Good Standing?"

Because we meet early in the fall semester to evaluate student progress, the clinical faculty considers all first-year students in good standing in the program. After that, we consider the following criteria:

1. Coursework. Has the student completed the standard courses for their year in the program with no incompletes? What was the quality of coursework?

2. Clinical work. Did the student receive a positive evaluation from their clinical supervisor(s)? What was the quality of their clinical work?

3. Teaching: Did the student receive a positive evaluation from teaching supervisors (if serving as a GTA) and/or from faculty observers of any guest lectures? Is the student progressing on Doctoral Portfolio teaching requirements in a timely fashion? Ideally by the end of their third year, students should have completed the teaching experience requirement (see Doctoral Portfolio). Students *must* complete the Doctoral Portfolio, including teaching requirements, prior to preliminary orals being held on the dissertation proposal.

4. Research. Did the student receive a positive evaluation from their research mentor? What is the quality of their research? Is the student progressing on program and Doctoral Portfolio research requirements in a timely fashion? By the end of their first year, we expect students to be starting their Master's research project. By the end of their second year, we expect students to have completed this project or, if not, to complete it in the third year. In the third year, we expect students to begin their dissertation proposal. By the fall of the fourth year (at the latest, fall of the fifth year), students should have proposed their dissertation so that they can complete all or most of their research before starting their internship. Students *must* complete the Doctoral Portfolio, including research requirements, prior to preliminary orals being held on the dissertation proposal. In addition, it is expected that students will be involved in other research activities throughout their graduate school education.

5. Professional and ethical behavior. Students should engage in professionally appropriate and ethical behavior at all times.

Importantly**, NO STUDENT CAN APPLY FOR INTERNSHIP** (that is, they will not receive endorsement of their application from the Director of Clinical Training) **IF THEY HAVE NOT HAD THEIR DISSERTATION PROPOSAL FORMALLY APPROVED BY OCTOBER 15 OF THAT YEAR.** There are no exceptions to this rule.

Retention and Notification Policy

For students who fall behind schedule in meeting program milestones, or do not engage in professionally appropriate and ethical behavior, the program developed several levels of action, which are communicated to students at the beginning of their first semester of residence and in the annual evaluation letter. It is not necessary to progress through the levels of action sequentially as an initial behavior may warrant an advanced level warning or decision.

"Level 0: Cautionary Pre-warning": A level 0 warning may be issued to a student who is slightly behind schedule and/or if there are concerns in the following areas:

- emotional stability and maturity to handle the challenges of graduate training to the point they have reached in the program.

- theoretical/academic foundation's necessary for effective counseling/clinical work.

- skills necessary for translating theory into integrated practice.

- awareness of, and practices according to, the current ethical guidelines for psychologists.

- participating in supervision constructively and modifying behavior in response to feedback.

These domains are the criteria by which students are evaluated for internship readiness and thus are continually reviewed during a student's time in the program. The issuance of a level 0 warning for any of these reasons outlined above would require majority support by the clinical psychology faculty. The specific domains that need to be corrected are delineated in the letter as well as recommendation for an action plan.

"Level 1 Warning": When a student is clearly "behind schedule", or does not engage in professionally appropriate and ethical behavior, a higher level of warning takes place. The following would constitute "clearly behind schedule"

- Has not proposed the Master's Thesis project by end of second year.
- Has not defended the Master's Thesis project by end of third year.
- Has not fulfilled doctoral portfolio requirements by end of third year.*
- Has incompletes in courses that have not been removed in one year.
- Has not completed course work by end of fourth year (unless the necessary courses have not been offered).
- Has not passed the Comprehensive Exam by the end of the fourth year.
- Has not proposed dissertation by the end of the fourth year.
- Is not fulfilling clinical training contract with the Director of the VPS (or other clinical placements).
- Has not engaged in professionally appropriate and ethical behavior.**

Any of these would result in a Level 1 warning, specifying guidelines on how to avoid progressing to Level 2; asking the student, in conjunction with the major professor, to develop a plan with a timeline within three weeks for addressing the problem areas; and stating clearly that "failure to meet these guidelines within the time period stated in the Level 1 warning will result in a Level 2 warning, the formal notice of probation." The warning will be communicated in writing and in person by the Director of Clinical Training.

"Level 2 Warning": A notice of probation. If the student still does not make significant progress, the evaluation letter states that: "Given that you did not meet the requirements outlined in the Level 1 Warning letter, which are stated again below, you are being given a Level 2 warning, which is a notice that you are considered on probation within the Clinical Program. You will need to make the progress within the time period specified in this letter or you will be placed on inactive status in the Clinical Program. You need to develop a plan in conjunction with your major professor and the Director of Clinical Training (DCT) within three weeks. The plan should specify steps to take to address problem areas and a timeline for each of the steps. The major professor and the DCT will monitor progress and report to the clinical faculty. During the period of probation, you remain eligible to take courses, and are considered for funding with the same priority as other students in your class year, but we strongly encourage you to focus on meeting the departmental milestones outlined below. Failure to do so will result in your being placed on inactive status." A Level 2 Warning may also be issued immediately (without a prior Level 1 Waring) in the case of serious violations of academic/professional and ethical standards, to be determined on a case-by-case basis by the clinical faculty.

"Level 3 Warning": A notice to the student that we now consider him or her as "inactive", usually by virtue of not producing the work that was required to be removed from probation. The subsequent evaluation letter, that may be issued at the point in which the goals in the plan were not met, then says: "Because you did not meet the requirements outlined in the Level 2 Warning letter, which are stated again below, you are now officially on inactive status within the Clinical Program. Students on inactive status may petition the clinical faculty to return to active status by presenting a detailed plan and timetable for meeting departmental milestones, along with justification for its feasibility. The decision to grant the petition, however, will be at the discretion of the clinical faculty."

*Note: The teaching requirement may not be met in this time frame as students may be waiting for the opportunity to teach their own course, which is acceptable.

**Note: As an APA accredited program, we adhere to the ethical principles articulated by APA. This code can be found on the internet at http://www.apa.org/ethics/code/index.aspx. In general, it is expected that students and faculty will refer to the APA ethics code for guidance and problem solving when confronted with questions regarding professional and ethical behavior while engaged in clinical training, including clinical work, research, coursework, and teaching, at the University of Vermont. Legal/ethical factors may include, but are not limited to, the student's use of inappropriate language or actions, violation of university rules, or violation of state laws, all of which demonstrate the student is not meeting professional standards.

<u>The Appeal and Grievance Process</u>

        In situations of grievance or conflict, students are generally expected to first try to work out the situation with the department member(s) involved, relying on assistance from the student's advisor as appropriate. If necessary, three additional steps of a grievance process would be as follows: (1) The complaint would be presented first to the Director of Clinical Training (DCT) who would develop an action plan in conjunction with input from the remainder of the core clinical faculty. (2) If this fails, the grievance would be presented to the Department Chair who would develop an action plan with appropriate input from the general psychology faculty as well as the clinical faculty. This might include the appointment of a select committee to investigate the matter. (3) Issues that cannot be resolved within the Department are referred to the Graduate College for the formal student grievance appeal. While the Dean of the Graduate College is the final arbiter of Graduate College regulations, a student grievance procedure applicable to all students at the University of Vermont may have jurisdiction where the student alleges one of the following: a violation of due process; no rational basis for a decision or an abuse of discretion; sexual harassment; or a violation of fundamental rights. This policy also applies to student/advisor conflicts where the student is considering changing labs (see also the section, "Who is your Advisor?" above).

<u>The Nine-Year Rule</u>

        The Graduate College accepts coursework that is nine or fewer years old. Most students complete the program in five years plus their internship year, so this is not an issue. The nine-year rule becomes a problem when (a) students come in with a master's degree from another program and transfer credits that are already several years old; or (b) students do not complete their dissertations on time, and remain ABD ("all but dissertation") for several years after their internship.

<u>Transfer Credits</u>

        If you came in with graduate coursework from another program, you need to work with the Director of Clinical Training (not your advisor) to receive transfer credit. There are three ways courses can transfer. If the course is the same as a required course we offer, you will receive credit for a specific required course. If the course is not one we require (e.g., adolescent psychology), you will receive credit for an elective. Finally, we can "waive" requirements. In that case, you do not get credits for taking the course, but you don't have to take the course. For example, if you took graduate statistics ten years ago, we might waive the graduate statistics requirement (this means you don't have to take statistics again, but you won't get transfer credit for such an old course). We waive the Master's Thesis project requirement for students who completed a research-based master's thesis that meets our program's criteria (see policy).

The Graduate College will not give more than 24 transfer credits, and you will still need to take at least 60 credits in our program (20 hours of this 60 are dissertation research credits). If we have waived several courses, you may need to take extra electives to meet the minimum course credits required for graduation. You have to have received a grade of B or better for a course to transfer, and you cannot receive transfer credit for courses that were taken pass/fail or satisfactory/unsatisfactory (however, the Graduate College will accept letters from your former professors indicating what grade you would have received had the course had a letter grade). The Director of Clinical Training will submit a transfer request form to the Graduate College and they will eventually let us know if they confirm the transfer credits. Remember that licensing boards will examine your list of required courses very carefully. That means you are better off taking a course again if the title of the course you took is not exactly what APA requires.

International Students

International students on student visas (this includes Canadian students) must take care not to jeopardize their student status. Student visas limit international students to no more than 20 hours of work per week at a university-related setting, plus one year of 40 hours per week (it is important to save that year of full-time work for the internship). International students may, however, work full time during the summer (defined as the day after the UVM graduation takes place until the day before classes start in the fall) in university-related settings.

The 20-hour weekly limit may become a problem because of the requirements of our program that students should be actively involved in research and clinical work, and our recommendation that students obtain teaching experience. The INS makes exceptions to the 20-hour rule when students' extra hours are an integral part of "curricular requirements." Thus, it is extremely important that you check with me and with the Office of International Education before you begin any paid research, clinical, teaching, or other paid activities. The Office of International Education is an important resource for any questions related to international student status. Be sure to contact that office before you leave the U.S. for any reason (e.g., visiting Montreal, taking a leave of absence that requires leaving the U.S., international travel to psychology conferences) and also before you change your visa status in order to complete your clinical or research post-doctoral fellowships).

International students and students who have green cards must notify the INS whenever they move (including within Burlington). The Office of International Education has forms that you can fill out for this purpose.

International students who conduct any clinical practicum work outside of Vermont Psychological Services (VPS) will need to submit a CPT (curricular practicum training) request to the DCT to authorize this work.

Required Courses

Every few years, we change our courses to meet APA requirements or improve the program. Your requirements are those listed for 2022 and beyond. Be sure you have a copy of the appropriate course list. These lists are entitled Graduate Student Record of Courses and Requirements, and consist of a checklist.

First-year clinical students typically take statistics, adult (or child) assessment, adult (or child) psychopathology, and introduction to clinical practicum (a 0.5-credit course) in the fall semester. During the spring semester they take statistics, adult (or child) assessment, adult (or child) (cognitive-) behavior therapy, and introduction to clinical practicum (a 0.5-credit course). These courses are required in the first year unless not offered. Second year students typically take child (or adult) psychopathology, child (or adult) (cognitive-) behavior therapy, proseminar, advanced clinical practicum

(one-credit course per semester), and full clinic meeting (one-credit of PSYS 6200 per semester). These courses are required in the second year unless not offered. Other advanced courses, including research methods, professional affairs and ethics, cross-cultural issues, history of psychology, and elective courses, are usually offered every two years.

Some notes about courses:

- Proseminars meet the APA requirements for discipline-specific knowledge in the biological bases of behavior, affective bases of behavior, cognitive bases of behavior, developmental bases of behavior, and social bases of behavior. Each of these courses also meets the APA requirement for course work that demonstrates and evaluates integration between at least two of these areas.

- Advanced clinical practicum is a 0.5-credit required introductory course in the first year and subsequently a one-credit course that students are required to take each semester when seeing clients in the second year and beyond, as long as they are seeing clients in our clinic or at another site. What does this course accomplish? This course documents your practicum training on your transcript. By the time you have completed your first and second year of this course (at a minimum of 500 hours as part of the vertical team supervision model) and completed two years of a half-time clinical placement (10-hours per week) when enrolled in this course, your clinical hours should position you to apply for an APA internship. Students in Year 2 and beyond also register for one-credit of PSYS 6200 Full Clinic Practicum Sequential Series each semester, which involves required attendance at monthly clinic meetings where case presentations, orientations, safety trainings, and special topic presentations occur. First-year students attend full clinic meetings as part of their introduction to clinical training, but do not register for PSYS 6200.

- Electives consist of any courses offered in the Psychological Science Department. We sometimes give permission for courses offered in other departments (such as the College of Education) that are relevant to your program of study. Be sure to check with the DCT if you plan to sign up for a course outside our department to ensure that you can count it toward course requirements. Requirements for taking a course outside the department include: (1) taught by an instructor with a Ph.D. or equivalent degree; and (2) has a textbook (if not a comprehensive list of readings from a professional journal). Electives can be 1, 2, or 3 hour courses but must add up to a total of 9 credits.

- Students need to take a total of 6 Master's Thesis research credits. You will typically receive a grade of "SP: (satisfactory progress) until all of the following occur: you defend your Thesis, your mentor approves the final version including all required revisions), and you upload the final copy to the Graduate College. Then it is considered passed.

- Students need to take a total of 20 dissertation credits. You will typically receive a grade of "SP" (satisfactory progress) for these until all of the following occur: you defend your dissertation, your mentor approves the final version (including all required revisions), and you upload the final copy to the Graduate College. Then it is considered passed.

- In our program, we have a comprehensive exam to advance to Masters candidacy and a separate comprehensive exam to advance to doctoral candidacy. See the specific sections of the manual for details about these requirements.

- The year you are on internship, you need to sign up for the 0-credit course (PSYS 6991) Internship in Clinical Psychology for both academic semesters. Note that zero-credit courses do you not cost you anything.

- The <u>total credits</u> required by the Graduate College to earn a doctorate is a minimum of 75. Our own list of requirements adds up to more required credits than this.

Course Credits

At UVM, funded grad students are required to enroll in at least 9 credits per semester in order to be considered full-time students. This refers to students funded on teaching, research, or clinical assistantships. Unfunded grad students also need to take 9 credits/semester to be considered full-time students, although we don't usually have students without funding. **Our funded students can take up to 12 credits/semester with tuition remission (effective Fall 2022).**

Credits with Tuition Remission

- GTAs (graduate teaching assistantships) come with 12 credits of tuition remission per semester. GTA work is done during the 9-months of the academic year <u>and</u> over the 3 summer months.

- GRAs (graduate research assistantships) also come with 12 credits of tuition remission per semester.

- All funded students (GTA or GRA or combination) can take 5 credits during the summer as part of their funding. These can be used for 391 Master's Thesis Research or 491 Dissertation Research.

- If you get a bill for out-of-state tuition, call the Graduate College at 656-1467, and explain that you are funded and should receive the in-state tuition reimbursement.

- If students are at the end of their program and no longer have courses to take, they need to sign up for <u>GRAD 901 (less than half-time), 902 (half-time), or 903 (full-time) (Continuous Registration)</u> and pay a continuous registration fee each semester in which they are still in the program (GRAD 901, 902, & 903 cost $100, $200, and $300, respectively. Please see Clinical Students: Graduate College Rules for more information). They need to do this if they still have incompletes, haven't completed their dissertation, or have loans and are on internship. Registering for GRAD Continuous Registration also defers repayment of bank loans, because it implies active student status and it maintains eligibility for student health insurance. Students who are funded need to enroll for at least 9 hours/semester to keep their funding. On internship, students with loans likely need to enroll for at least 5 credits/semester of GRAD 902 (half-time status) to defer loan repayment, but please check with Student Financial Services (SFS) to find out the enrollment requirement for your specific loans.

Placements (Funding)

Along with the General/Experimental Program, the Clinical Program is committed to funding every graduate student in our department each year that he or she is in the program and on campus for the first 5 years, and we have been successful in doing so every year since 1969. We want to ensure that students from all socioeconomic backgrounds apply to the graduate programs in our department, and also that funded placements provide meaningful training in teaching, research, clinical work, or prevention services.

Graduate student placements are designed: (a) to provide the student with training that contributes in a meaningful way to her/his/their overall educational and professional objectives; (b) to partially fulfill teaching, research, or clinical training requirements of the doctoral program; (c) to provide the student with funding; and (d) to provide services to Department faculty, the University, and the State of Vermont. Because student placements are designed to satisfy more than one objective, some

compromise is unavoidable. For example, if training was the only goal, we would be able to match students to placements that are completely compatible with their training needs. Only placements that are dedicated to graduate training would be utilized. And if funding was irrelevant, many other potentially excellent training sites that cannot afford to hire a graduate student could be included in the placement system. However, in reality, the types of placements and freedom to match students are significantly constrained by our desire to fund all students.

Let the Director of Clinical Training know if there are any problems with your placement. You will be evaluated by your placement supervisor at the end of the fall semester and at the end of the year. (See section titled Evaluations).

The Graduate College does not allow you to have placements totaling over 20 hours unless you are in your third year or beyond, are making satisfactory academic progress, and the additional placement will enhance your education. In this case, with faculty approval, the student can petition the Graduate School for a one-time exception for placements totaling at maximum 30 hours. Please note that CE (Continuing Education) courses are considered an outside source; you do not have to petition the Graduate School to teach a CE course and hold a 20-hour placement. The student must complete the Graduate College's additional work request form and get Grad College approval for the work.

Clinical Experience

Psychological Work Outside of Placements: Work of a psychological nature outside of the Clinical Program and the VPS is only allowed when it is determined to enhance the clinical training of students, and must meet the following conditions: (a) have prior approval of the clinical faculty (the Director of Clinical Training will take a vote), the VPS Director, and the student's major professor/advisor; (b) be supervised by an appropriately credentialed psychologist (e.g., licensed in the case of clinical work) who is a faculty member (e.g., Clinical Educator status) or adjunct faculty member in the UVM Psychological Science Department; and (c) have training as the primary objective.

The rationales for this policy are as follows: (a) being a student in the UVM Clinical Program is considered a full-time position; (b) outside work of a psychological nature can open the University to possible litigation; and (c) students are provided placements through the Psychological Science Department.

Students cannot moonlight without the clinical faculty's awareness and they cannot set up a practicum for themselves without formally requesting the clinical faculty's permission even if their mentor knows about it. Doing so is not a program-sanctioned training activity and therefore invalidates their student malpractice insurance (setting them up for personal liability) and does not count as hours towards internship. Students should submit a written request describing the work they wish to do, where, who will supervise (must be a licensed psychologist), and that their mentor supports their decision to do the extra work in light of their academic progress (assuming that is true). If the faculty approves, the supervisor needs an appointment as Clinical Educator, which requires support of the full faculty.

A student who gains formal faculty approval for extra clinical work (beyond any 20 hours/week placement) must complete the Graduate College's additional work request form and get Grad College approval for the work.

Other Information about Clinical Experience: By the time clinical students in our program apply for internship, they have accumulated clinical experience with a variety of clinical populations through our clinic Vermont Psychological Services (VPS) and, for some students, other placements.

- Students are required to take out <u>malpractice insurance</u> via APA each year that they are involved in any clinical activities, which is every year for most students. You need to become a student member of APA and then the Department will cover the cost of malpractice insurance. When you have completed the form (see me if you need copies), give it to the secretaries and they will handle the cost.

- Be sure that you are being <u>supervised by a doctoral-level licensed psychologist</u> with a UVM faculty appointment (e.g., Clinical Educator). This is our agreement with each placement.

- IMPORTANT—keep track of all your clinical hours/activities beginning in your first year of graduate school. This is now required for internship training. There are a number of great resources available, some at no charge, for dealing with exactly this issue. See the APPIC.org site for details.

- Internship Preparation: Clinical hours toward internship are accumulated beginning in your first year in graduate school. Each year in May, you are asked to report these hours (please see Internship Preparation: Reporting Year Data and Timeline for Final Six Months).

- Assessment Hours: One of the things that has come to the attention of the faculty is that it is important to have adequate clinical hours conducting assessments. When you apply for internship, you are asked not only about intervention hours but about assessment/testing hours. Obviously, you do assessments with every clinical case. These hours, as well as other hours that you do any assessment work, should be documented. In addition, it is important that you do some comprehensive assessments, which include multiple cognitive and/or personality testing instruments as well as write-ups of these data in an integrated report. In general, it appears that students who have applied successfully for internship have had a minimum of 100-150 face-to-face assessment/testing hours as well as at least 10 comprehensive evaluation reports. Please see Internship Preparation: Reporting Yearly Data and Timeline for Final Six Months and also Integrated Reports.

<u>The Internship Year</u>

Our Clinical Program requires a one-year clinical internship year at an APA-approved program (Please see written document titled "Internship Placement Policy"). This is required no matter how many clinical hours students have accumulated beforehand. Students should complete all on-campus requirements by the end of their fourth or fifth year. We urge you to complete your dissertation before internship. At a minimum, you must have proposed your dissertation before October 15th if you are applying for internship. And, prior to proposing your dissertation, you must have completed the doctoral portfolio.

While on internship, you must register both semesters for the zero-credit course PSYS 6991 (Internship in Clinical Psychology). In order to maintain active student status so that loans are deferred, you also need to register for continuing registration (GRAD) and pay the associated fee while on internship. (Please see written document titled "Clinical Students: Graduate College Rules). IMPORTANT NOTE: As just mentioned, you <u>must</u> pass your dissertation proposal defense before you can apply for internship. October 15th is the deadline.

<u>Working 50/50 in the Clinic during the Fifth Year</u>

Students who already have a full-time funded placement and wish to see clients at 50/50 in the clinic will need to get formal approval of their primary research mentor to do this and to set a limit on how much is permitted. The rationale is that this work is extra work on top of your 20-hours/week funded placement, and your top priority should be staying on track with academic milestones. At the

start of a new contract year (July 1), discuss this with your mentor and the clinic director. See Clinical Program Policy on Advanced Students working 50/50 in the VPS Clinic for more details.

Teaching Experience

The Doctoral Comprehensive Portfolio delineates the minimum teaching experience requirements in the Clinical Program. You may well want experiences beyond these requirements. Some of the formal teaching options are delineated below.

Graduate students can serve as GTAs (graduate teaching assistants) for some courses (e.g., Introductory Psychology, Abnormal Psychology, Statistics, Research Methods).

Our department requires that you have a Master's degree or equivalent in order to teach your own course. If you came in with a Master's degree, you can apply to teach any time. Students must have completed the Master's degree at the time they apply to teach. Typically, a call for applications to teach summer courses comes out the preceding fall. Therefore, if your Master's Thesis project is still in process, you cannot apply to teach, even if you expect to defend it before the summer term begins.

Graduate students usually teach courses via CE (continuing education) in the summer. You will receive a memo early in the fall about summer courses. The department committee responsible for CE courses gives first priority to faculty, followed by graduate students, and last to members of the community who want to teach courses. Few faculty members typically teach CE courses, which means that graduate students have opportunities to teach. CE will cancel a course if there is not enough enrollment. Courses that are typically needed are introductory psychology, social psychology, abnormal psychology, developmental psychology, research methods, introduction to clinical psychology, and behavior disorders of childhood, but graduate students have taught many specialty courses over the years as well. Because CE courses are considered an outside source, you do not need to petition the Graduate College to teach CE courses if you have a regular placement.

Research Experience

A major focus of our department is the training of scientist-practitioners. To be marketable for academic jobs (in psychology departments, medical schools, and other research institutions), students need to become actively involved in the science of psychology throughout their graduate school education. Talk to your advisor about your research trajectory, including current research projects, grant funding, publications, and professional organizations to join that are most relevant to your area of research. Take a look at the CV's (curriculum vitae, or resumes) of advanced students who are applying for academic jobs—you will see that they have numerous publications, reflecting research typically conducted with their major advisor and occasionally with other members of the department and adjunct faculty.

The Doctoral Comprehensive Portfolio is designed to help you meet minimum standards in terms of research skills and to prepare you for undertaking a dissertation. Read the requirements delineated in the Portfolio and begin working on them immediately with your advisor.

Take advantage of opportunities in our department and in other settings to work on collaborative research and writing projects. There are numerous opportunities to work on grants and research projects funded by core faculty and other research settings at UVM. We encourage students interested in research careers to take advantage of such research activities. In addition, applying for small and larger grants on your own is not only a way to fund your research, but is something highly valued by academic search committees when you are applying for jobs. In the past several years, multiple students have applied for and received National Research Service Awards (NRSAs) from NIH.

Master's Thesis Project: Beginning in Fall 2018, our Program requires completing a Master's Thesis as part of the training program for the Ph.D. This project should be the equivalent of a publishable data-based research study manuscript in terms of the literature review, conceptual development, hypotheses, sample size, research design, data quality and analysis, and discussion of the findings. Of course, the findings do not have to support the hypotheses or be "significant."

You will work with your faculty advisor in terms of designing and completing the Master's project. In addition, you will formally propose the project to a 3-person committee and receive feedback and an evaluation. A successful proposal meeting completes the comprehensive examination for advancing to Master's degree candidacy. At least one member of the committee must be a core clinical program faculty member. Once the study is completed, you will submit the final project in manuscript form to your 3-person committee, do a formal presentation to the committee, and again receive feedback and an evaluation (see Master's Thesis Project Proposal and Defense Guidelines). Make sure to submit and follow the timeline on the Intent to Defend Form and abide by the timeline for when a student can schedule a defense.

The Dissertation: The Department has a set of guidelines for the Dissertation Committee, Dissertation Proposal, and Dissertation Defense, as well as a policy on when students can schedule a defense (see Intent to Defend Form and its preamble pages for the timeline). Please refer to these early in the dissertation process.

The dissertation requires a committee of five members. Note our Department's requirement for 5 members is higher than and supersedes the Graduate College's requirement for only four. At least three must be from the Psychological Science department, and at least one departmental member must be a core clinical program faculty member. The Committee Chair, who will run the meeting, must be from outside the Psychological Science department (with no appointment of any kind in Psychology, even a secondary one), hold UVM Graduate College faculty status, and must not be a core or affiliated faculty in the dissertation advisor's department. If your primary research mentor is in Psychiatry, your Chair cannot hold an appointment in Psychiatry. The fifth member can be either from the department or from outside the department. At least four dissertation committee members must be members of the Graduate College (check the Graduate College website if you're not sure about someone's status, or check the list in the back of the Graduate College catalog), including the chair and your advisor. See the Department's Doctoral Dissertation Defense Committee policy.

Your advisor is in charge of reading early drafts of your dissertation proposal (this consists of the literature review, study goals and hypotheses, method, and proposed data analyses). When you have completed the final draft of your written dissertation proposal, give this to all committee members. They will need at least two weeks to read this proposal. Schedule a date, time, and room for the dissertation proposal meeting. The sectaries have the room schedule for John Dewey Hall. The outside member (who is called the "chair" of the committee) is in charge of facilitating the meeting.

When you have completed the dissertation research, you need to write up the final dissertation document. This consists of the introduction (literature review and research goals), method, results, and discussion, as well as a formal cover page, signature page, formal abstract, table of contents, list of tables and figures, acknowledgements, references, and appendices with your measures, consent forms, and other materials. The Graduate College has a software package that they require you to use for formatting, along with other requirements for the final document. There are many dissertations in the department library that can serve as models.

Once again, your advisor is in charge of reading early drafts of your completed dissertation. When you have completed the final "defense version" of your written dissertation, give this to all

committee members. They will need at least two weeks to read this. Schedule a date, time, and <u>room</u> for the dissertation defense meeting in accordance with the timeline specified our Intent to Defend form. IMPORTANT—the Graduate College requires a format check <u>in person</u> at least three weeks before your dissertation defense.

<u>No Summer Proposal or Defense Meetings, Except in Extreme Circumstances</u>: Our department requires that neither the Master's/dissertation proposal nor the Master's/dissertation defense meeting take place during the summer months. This is because faculty are paid on nine-month contracts. If you wish to schedule during the summer, contact the Psychology Department Chair and he/she will check with your committee members. <u>All</u> must agree to a summer meeting for the meeting to occur. See Psychological Science Department Policy on Students Scheduling Committee Meetings and Defenses during Summer.

<u>Evaluations</u>

Each semester you will be evaluated in terms of your academic courses (i.e., grades), research, clinical work, and, if you are a GTA, teaching. Evaluation forms are described before the end of each semester. Your supervisors in research, clinical, and teaching activities will complete the evaluation, review it with you in a meeting where you have the opportunity to provide input, and then turn in to me. These evaluations are examined by the DCT and considered at the Annual Review of Graduate Students. You also provide evaluations of your research, clinical, and teaching supervisors each semester. Your evaluations can be confidential or shared directly by you with your supervisor – this is your choice. In either case, the Director of Clinical Training will not share your individual comments/ratings with a supervisor but, instead, provide more general feedback based on all evaluations of the supervisor by graduate students.

<u>Graduation</u>

The Graduate College has a Graduate Hooding Ceremony that takes place during graduation weekend in May. As each student's name is called, their advisor (or another member of the department) places the doctoral "hood" over their head. It's a great occasion to wear academic regalia and be part of an important academic process. There are two types of students—those who love these kinds of events and those who hate them. Usually students complete their internship during the summer and then graduate in either August or October. The Graduate College has a Walk Policy specific to our clinical program (see section on Criteria for Doctoral Clinical Psychology Students Walking in May Commencement). Basically, they set criteria for students on internship who wish to walk in the May commencement ceremony.

<u>Licensing</u>

Each state of the U.S. has its own requirements for licensing. Many states accept a degree from an APA-approved clinical Ph.D. program and APA-approved clinical internship (plus passing the licensing exam and completing post-doctoral clinical experience) as adequate for licensing. Other states have very specific course requirements. There is no way that any one clinical program can offer enough courses to meet licensing requirements for all 50 states. If you already know the geographic area in which you want to locate after graduation, it helps to look at licensing requirements for that state early in your tenure as a graduate student.

Keep copies of all your graduate course syllabi, including the reading lists. Some states require this information for clarification of course content.

Note that most U.S. states require some post-doctoral supervised clinical experience before you can apply for licensing. You will not be considered a post-doc until you have defended your dissertation and submitted the final copy to the Graduate College. This is why it's best to do all of your dissertation work before going on internship. Many students continue working as post-docs at their internship site and others go elsewhere. These hours of clinical experience will not count for the post-doctoral period until the dissertation is completed—you cannot be a post-doc until you are a "doc!"

General Mentoring Issues

Our goal in the clinical program is to help you develop a sense of professional identity, which is vital for your future career as researcher, teacher, clinician, administrator, and/or consultant. If the rest of this section is self-evident to you, that's terrific—it means you already have a good understanding of how graduate school functions. One former student urged us to emphasize that the most important thing for graduate students is to keep asking questions. She felt that there was a lot she wasn't told, and it's important to ask lots of questions.

- Staying in touch. Students are sometimes reluctant to "bother" faculty or may not feel comfortable being around us. They may avoid the department as much as possible, or contact faculty only when it is absolutely necessary. Similarly, some students may rarely be in the department. Yet faculty expect students to be around the department, and often provide professional opportunities to those students who are most visible. Also, faculty are most sympathetic to students when they know them as real people, not just as names. Over and over again, I have heard faculty say someone must be a good student "because I always see him/her around."

  I urge you to spend substantial time in the department, and spend part of that time interacting with faculty, staff, and students. Faculty view you as junior colleagues; staff members know the answers to many questions; and other students can be friends, collaborators, and sources of support (see below). The reason this is so important is that your professional future will depend on your ability to get along with colleagues and in the greater academic community.

- Building a coalition of colleagues. The day of the scientist or practitioner working in isolation is gone. Most faculty in our department are networked into national and international groups in our disciplines. Graduate students should never be in a position where they don't know enough faculty well enough to form a dissertation committee, or can't ask graduate students for help with their research because they don't know any students well enough. It is important that faculty who serve on committees (e.g., to award mini-grants or student travel money) at least know who you are. Many graduate students in our department will go on to assume prominent leadership positions in psychology - they will be on licensing boards, APA committees, grant review committees, editorial boards of journals, etc., and so you will be valuable contacts for each other in the next decades.

- Finding sources of emotional support. I urge you to find friends for emotional support. Working on a dissertation brings up many issues for students, especially if you have concerns about evaluation, fear of rejection, writing blocks, insecurity about data analysis, etc. There have been many instances over the years where John Dewey graduate students have provided important sources of support for each other. No one knows your struggles better than other students.

- Gaining a professional identity. Although coursework and other requirements are important for you to complete in order to get your Ph.D. (and also for licensing), your real priorities in graduate school are developing your research, teaching, and clinical interests for your future career. The faculty wants you to be qualified for future jobs, and so it is important that you communicate your career goals to us. In this age of specialization, it is often too late to prepare for a career during the last year of graduate school. If you have specific clinical interests, you need to accumulate the necessary clinical hours,

network with clinicians in your field of interest, and possibly give workshops/write articles on this topic. If research and/or teaching is a career goal, you will need to have a number of publications (not just your dissertation and one other research project) by the time you graduate. It also helps to have grants and teaching experience.

Finally, please keep in mind that for most of your life, you will be asked to provide the names of 3-5 references for jobs, awards, promotions, etc. That will certainly be the case for any job you take after graduate school. Be sure to start thinking about your list of potential references, and keep these individuals in touch with your progress in graduate school.

The Clinical Training Program: Model Ph.D. Program Schedule

The Department recognizes that timelines may vary as a function of the nature of the individual's research. Note: After the first year, many courses are taught in alternating years; therefore, the model program will have to be adapted for when courses are offered.

Students entering the program with graduate course work in psychology from another university often can transfer credits to fulfill program requirements. Students with a completed Master's Degree from another university might complete their coursework one year sooner than those times indicated below. Guidelines for developing and completing the Master's thesis and dissertation are as follows:

- Begin to develop the Master's thesis research proposal during the first year, and formally propose the project at the beginning of spring semester of year two.
- Recommended: Defend the Master's project by the end of the third year of study.
- Formally propose the Ph.D. dissertation during the third or fourth year, and no later than October 15 of the year you intend to apply for internship.
- Recommended: Defend the Ph.D. dissertation during the fifth year of study.

Year	Semester	Research	Classes	Clinical Cases	GTA/GRA
1	Fall	MA work	Stats 1	V-Team (2 Hours)	20 Hours
1	Fall	Assist in Research Lab	Assessment	Full Clinic 1 Hour	
1	Fall		Psychopathology		
1	Fall		Clinical Skills		
1	Fall				
1	Spring	MA work	Stats 2	V-Team	20 Hours
1	Spring	Assist in Research Lab	CBT	Full Clinic	
1	Spring		ProSem		
1	Spring				
1	Spring				
2	Fall	MA work	ProSem (Bio)	3 Contact Hours (6 Hours)	20 Hours
2	Fall	Assist in Research Lab	Assessment	V-Team	
2	Fall		Psychopathology	Full Clinic	
2	Fall			Eval (3 hours per week)	
2	Fall				
2	Spring	MA work	CBT	Receive Peer Supervision 1 Hour	20 Hours
2	Spring	Assist in Research Lab	ProSem	Eval (3 hours per week)	
2	Spring		Elective	3 Contact Hours (6 Hours)	
2	Spring		History		
2	Spring				
3	Fall	MA work	Research Meth	6 Contact Hours (8 Hours)	20 Hours
3	Fall	Assist in Research Lab	Elective	V-Team	

3	Fall		Elective	Full Clinic	
3	Fall			Individual Supervisoin	
3	Fall			Eval (3 hours per week)	
3	Spring	Dissertation Work	Multi-Cultural	6 Contact Hours (8 Hours)	20 Hours
3	Spring	Assist in Research Lab	Ethics	V-Team	
3	Spring		Elective	Full Clinic	
3	Spring			Receive Peer Supervision 1 Hour	
3	Spring			Individual Supervisoin	
3	Spring			Eval (3 hours per week)	
4	Fall	Dissertation Work		6 Contact Hours (8 Hours)	20 Hours
4	Fall	Assist in Research Lab		V-Team	
4	Fall			Full Clinic	
4	Fall			Individual Supervision	
4	Fall			Eval (3 hours per week)	
4	Spring	Dissertation Work		6 Cases	20 Hours
4	Spring	Assist in Research Lab		V-Team	
4	Spring	Complete Doctoral Portfolio		Full Clinic	
4	Spring			Individual Supervision	
4	Spring			Eval (3 hours per week)	
5	Fall	Dissertation Work		50/50	20 Hours
5	Fall	Assist in Research Lab		V-Team	
5	Fall	Apply for Internship		Full Clinic	
5	Fall			Eval (3 hours per week)	
5	Fall				
5	Spring	Dissertation Work		50/50	20 Hours
5	Spring	Assist in Research Lab		V-Team	
5	Spring			Full Clinic	
5	Spring				
5	Spring				

Sixth Academic Year

If on internship, sign up for PSYS 6991 Internship in Clinical Psychology (0 hours credit) both semesters. Students on internship who have loans, should also register for 6 credits of GRAD 9020 to maintain half-time status and defer loans.

If not done already, complete and defend dissertation.

Notes

1. VPS = Vermont Psychological Services, our training clinic

2. A total of 6 Master's Thesis research credit hours is required for the Master's degree and (subsequently) a total of 20 dissertation research credit hours is required for the Ph.D. degree. When the 20 hours of PSYS 7491 should be taken will vary depending on type of financial support, course requirements, and other factors. Taking as many of these hours as soon as possible is important!

3. All funded students can take up to 5 credits in the summer without paying for them. If you have Master's or dissertation credits left to take, use your summer credits towards those totals. If you have no remaining research credits to take, register for 5 credits of GRAD 9020 Continuing Registration.

4. Electives need to add up to 9 hours. Electives can consist of 1-, 2-, or 3-hour courses. One elective must be a 3-credit treatment course.

Record of Courses and Requirements

GRADUATE STUDENT RECORD OF COURSES AND REQUIREMENTS
CLINICAL PSYCHOLOGY PROGRAM
DEPARTMENT OF PSYCHOLOGICAL SCIENCE
(Entering 2024 or after)

Course	Credits	Semester/Year Completed
Statistics		
Statistics I: PSYS 6000	3	
Statistics II: PSYS 6005	3	
Proseminars		
Biobehavioral: PSYS 6400	3	
Social: PSYS 6500	3	
Developmental: PSYS 6600	3	
Assessment		
Child and Adolescent Psychological Assessment: PSYS 6710	3	
Adult Psychological Assessment: PSYS 6725	3	
Intervention		
Child and Adolescent Behavior Therapy: PSYS 6715	3	
Adult Cognitive-Behavioral Therapy: PSYS 6730	3	
Psychopathology		
Adult Psychopathology: PSYS 6720	3	
Child Psychopathology: PSYS 6705	3	
Research Methodology: PSYS 6010	3	
Ethics: PSYS 6740	3	
History of Psychology: PSYS 6900	3	
Cross-Cultural Clinical Intervention and Research: PSYS 6735	3	
Electives		
Therapy Elective: _____	3	
Elective 1: _____	3	
Elective 2: _____	3	
Supervision and Consultation: PSYS 6230	1	
Total Course Credits Thus Far:		
Master's Thesis Research Credit (Total Thus Far; 6 maximum)		
Dissertation Thesis Research Credit (Total Thus Far; 20 maximum)		
Total Credit Hours:		

	Pending	Completed	Date Completed
Proposed Master's Thesis (Master's Comprehensive Exam)			
Defended Master's Thesis			
Doctoral Portfolio Overall (If pending, complete next lines)			
Doctoral Portfolio – Research			██████████████
Doctoral Portfolio – Teaching			██████████████
Proposed Dissertation (Doctoral Comprehensive Exam)			
Defended Dissertation			

History of Psychology (PSYS 6900) Completion Policy:

The History and Systems of Psychology Course (PSYS 6900) is a required course for completion of all students in the clinical psychology doctoral program. This particular course differs in many ways from other courses that we offer as part of our doctoral program. It is offered as an online-only, self-guided, 3-credit course. You will review materials and complete assignments through Brightspace that will be graded by the DCT.

- For students who began the program in or after the Fall of 2023, PSYS 6900 is expected to be completed, with a passing grade, by the end (close of Spring semester) of the student's second year in the program.
  - It is anticipated that students will formally enroll in and formally submit their assignments in the Spring semester of their second year.

- Students will be granted access to the course at the start of their first year in the program. Their role will be as an Observer. This role will allow students to access all materials for the course.

- Students can complete the assignments for the course at any time during the first 2 years of their time in the program, including the summer between their first and second years. **Assignments should not be submitted until the student is formally enrolled in the course**, which will likely occur in the Spring of their second semester.

- Assignments must be submitted when the student is formally enrolled in the course, which will likely occur in the Spring semester of their second year.

- All assignments must be submitted by the Wednesday of Finals Week of the semester in which the student is enrolled.

- If assignments are not submitted by the established due date, the student will receive an incomplete for the semester. They will have one additional semester + corresponding semester breaks (winter/summer) to complete the remaining assignments. If assignments are not completed in that time, then the student will receive a failing grade and have to complete a remediation plan in addition to repeating the work of the entire course.
  - Students enrolled in the Fall would have until the start of the following academic year (Winter Break -> Spring Semester -> Summer -> Assignments Due) to complete all remaining assignments.
  - Students enrolled in the Spring would have until the start of the next spring semester (Summer -> Fall Semester -> Winter Break -> Assignments Due) to complete all remaining assignments.

- Students who do not complete PSYS 6900 by the end of their second year must submit a written explanation and completion plan to the DCT. The plan must include a timeline for taking the course and receive DCT approval.

Summer and Academic Credit Hours You Can Take

1. If you are on a Graduate College Graduate Teaching Assistantship (GTA) at full-time (20 hours/week), you can take a maximum of 12 credit hours per semester during fall and spring (24 credits for the year). Dissertation credit hours can count within these hours and will be fully covered. In some cases, it may be possible to borrow from that award of 24 hours if you wish to take any courses or research credits during the summer preceding your appointment as a GTA.* GTAs can take a maximum of five (5) credit hours in the summer as part of their funding.

2. If you are on a Graduate Research Assistantship (GRA on someone's research grant) at full-time (20 hours/week), everything listed under (1) also applies to you.

3. If you are on a GRA ½-time and a College of Arts and Sciences GTA ½-time, you also get 12 credits per semester covered by your placement and can take up to five (5) credit hours in the summer as part of your funding.

4. Clinical placements (for example, VPS and Champlain Valley Physicians Hospital; CVPH) currently come with the same stipend and level of tuition remission as GTAs and GRAs do.

5. Please note that cases above referring to the summer refer to the summer before the next academic year.

6. Different rules apply to those who are on fellowships, traineeships, and NRSA awards. Those awards are dependent on the terms of the specific grant. Your principal investigator should send Student Financial Services an email at sfs@uvm.edu with the following information: Your name, student ID number, semester, amount to pay directly from the grant, and respective chartstring. The College may pick up tuition beyond what is included in the grant, but those cases are determined on an individual basis.

*You must request special permission for this from the Graduate College and let them know how you will be funded for the coming year to have these paid. Please inform the Director of Clinical Training.

When to Register
The Graduate College recently received a new policy from the Registrar's Office that you need to be aware of. Effective Spring 2014, a student must be registered for courses (including dissertation research credits) by the end of the add/drop period or they will be deactivated and need to be reactivated. If students are deactivated, they will lose the accesses their CAT Card currently provides (library, labs, bus, etc.). Students should also register for fall courses before the end of June, as we've run into cases where students temporarily lost their health insurance in August because they weren't yet registered for fall credits.

<u>Graduate College Forms and Requirements for Masters and Dissertation Defenses</u>

**Psychological Scieance MA Thesis, PhD Dissertation Timeline and Intent to
Defend Form**

☐Note that some Graduate College deadlines begin early in the semester in which you plan to graduate, so plan ahead!

____Beginning of the semester of your <u>expected defense</u>
> Submit Intent to Graduate Form to the Graduate College (also
> submit to Cyn Sullivan)
> https://www.uvm.edu/sites/default/files/IntenttoGraduateFillable_3.p
> df
>
> Submit Defense Committee Membership Approval Form to the Graduate College
> (also submit to your Program Director)
> https://www.uvm.edu/sites/default/files/defensemembershipform_0.pdf

____3 weeks before your defense
> Schedule a format check with the Graduate College at least three weeks prior to your
> defense date
>
> Submit a Defense Notice to the Graduate College at least three weeks prior to your
> defense date (also submit to Cyn Sullivan). Please go to
> http://www.uvm.edu/graduate/resources to get the Defense Notice Template (see
> section on "Thesis/Dissertation Forms").

Follow Guidelines, including the timeline, provided by the Graduate College at the Fall Information Session. For review, see
p. 4 https://www.uvm.edu/sites/default/files/Electronic_Thesis_and_Dissertation_Guidelines.pdf

Your thesis/dissertation must meet the Graduate College formatting. This means that there will be two different formats for your thesis/dissertation. One format is the Psychological Science format (APA) and one is the Graduate College format. The thesis/dissertation template for the Graduate College format is available at http://www.uvm.edu/graduate/resources (see section on "Thesis/Dissertation Forms").

Psychological Science Department Forms and Requirements

☐In addition to the Graduate College requirements, the Department of Psychological Science has the following requirements for Master's and Dissertation defenses.

- Defenses must take place during the academic year, which spans the week before classes start in fall semester through the week after spring commencement. A request must be made to the Department Chair for a defense outside of these dates and will only be approved in exceptional circumstances and with the unanimous support of the defense committee.
- Form your master's and dissertation committees well in advance of the defense. Your committee is meant to serve as an important resource for you as you develop your research ideas. At least 1 committee member must have a primary appointment in Psychological Science and be a member of the cluster in which you are specializing (i.e., biobehavioral, clinical, developmental, or social cluster).
- Note that the initiation of departmental processes cannot begin until your advisor has seen a **complete** draft of your thesis and anticipates that the thesis will be ready to submit to the committee for review at least 2 weeks before the defense date. **This means that, at a minimum, a high quality and complete draft should have**

DEPARTMENT OF PSYCHOLOGICAL SCIENCE INTENT TO DEFEND FORM
MA THESIS -- Ph.D. DISSERTATION

This form has a lot of formatting and cannot be cut-and-pasted here. Please see the most up-to-date version at:
https://www.uvm.edu/cas/psychology/graduate-forms

Psychological Science Department Policy on Students Scheduling Committee Meetings and Defenses during Summer

Note: This policy applies to scheduling Master's Thesis and dissertation proposal meetings and defenses and to comprehensive examination committee meetings.
Updated 5/13/2021

Thesis and Dissertation proposal meetings, and defenses, and comprehensive examination committee meetings (including the initial proposal review) shall not occur during the summer months, defined as the period beginning 1 week after commencement and ending 1 week before the start of fall semester classes, except in extraordinary circumstances, because of which a summer meeting or defense cannot be avoided.

Under these circumstances, the student may request a waiver of this policy from their Program Director (Director of Clinical Training for clinical students; General/Experimental Director for G/E students). This request must include a description of the extenuating circumstances that make a summer meeting or defense necessary. This request should be made to the Program Director as soon as the student anticipates the need for a summer meeting or defense. The Program Director will poll the committee and grant a waiver only if each member of the committee agrees to the meeting.

In the rare circumstance that a defense is approved by the committee, the student must still follow the Department's Intent to Defend process and form (this form is not required for proposals). This includes a signature from the research mentor indicating that he/she has reviewed and approved a high quality and complete draft at least 6 weeks before the earliest possible defense date. Approval for a summer defense does not imply permission to schedule the actual defense date before the mentor has approved a high quality and complete draft.

Comprehensive Exam to Advance to Master's Candidacy

In our Clinical Psychology Ph.D. program, students are expected to earn a Master's degree "en route" to the doctoral degree, unless this requirement is waived for a student who entered the program with a Master's degree. The Graduate College requires a "comprehensive exam" to advance to Master's candidacy in the same way they require a comprehensive exam to advance to doctoral candidacy (See Ph.D. Comprehensive Exam in Clinical Psychology).

In our Clinical Psychology doctoral program, the comprehensive exam to advance to Master's candidacy consists of (1) a written examination (i.e., a Master's Thesis proposal that is deemed satisfactory by the 3-person Master's Thesis committee) and (2) an oral examination (i.e., a committee decision of "pass" at the Master's Thesis proposal meeting).

When the Graduate College asks you for the date upon which you passed your Master's comprehensive examination, which they will do when you complete your intent to graduate form for conferral of your Master's degree, you should report the date upon which you held a successful proposal meeting or the date upon which your Committee approved any required changes to your written proposal—whichever comes last.

The official UVM Graduate College Catalog description of this requirement is much more succinct and follows:

Comprehensive Examination

A written thesis proposal and an oral examination of the proposal serves as the comprehensive examination. The Comprehensive Examination requirement should be completed by the end of the first semester of the second year in the program.

Requirements for Advancement to Candidacy for the Degree of Master of Arts

Satisfactory completion of the comprehensive examination.

Documented Completion of Comprehensive Exam to Advance to MA Candidacy:
If a student receives a Pass, they must complete the "Proof of Successful Completion of Comprehensive Exam" form from the Graduate College. Form available at:
https://www.uvm.edu/sites/default/files/compexammemo.pdf

Effective September 2018.

Master's Proposal/Defense Committee

The committee consists of three members, and both the advisor and chairperson must be members of the Graduate Faculty. The chairperson must not be a core faculty (i.e., have a primary appointment) or affiliated faculty (i.e., have a secondary appointment) in the Department of Psychological Science (see the department website for a list of core and affiliated departmental faculty) and must not be a core or affiliated faculty in the thesis advisor's department. At least one person must be a core faculty member in the student's academic cluster (i.e., clinical, social, developmental, or biobehavioral*).

Proposals for Master's research must be approved by the full committee in advance of substantive work on the project. Changes in plans following the proposal are to be discussed with the committee for approval as the research is in progress. It is the responsibility of the student to keep her/his/their committee up to date.

Master's thesis defenses are publicly held. The student must complete the department Intent to Defend Form at least six weeks prior to the defense. The student must follow all Graduate College requirements and deadlines. Defenses must take place during the academic year, which spans the week before classes start in fall semester through the week after spring commencement. A request must be made to the Department Chair for a defense outside of these dates and will only be approved in exceptional circumstances and with the unanimous support of the defense committee.

*A core faculty member from any of the academic clusters in the Department of Psychological Science (i.e., clinical, social, developmental, or biobehavioral) will fulfill this requirement for students in the Human Behavioral Pharmacology subprogram.

Approved 9/28/18; Revised 2/7/19

Master's Thesis Proposal Guidelines
Approved 09/26/2018

Preamble: The purpose of a Master's thesis is for a graduate student to demonstrate her/his/their ability to conceptualize, design, and analyze a meaningful piece of research with guidance from a mentor. A knowledge of the relevant literature and theory, the ability to integrate the proposed study into the existing literature and theory, and an ability to recognize the limitations, strengths, and implications of the study also are critical parts of the second-year project proposal. Publication of the project in a peer reviewed journal is typically a goal.

A student who enters with a Master's degree where an empirical thesis has been completed and defended before a committee may be deemed exempt (see Policy to Waive Masters Requirement for Students in the Clinical Psychology Doctoral Program).

1. A Master's Thesis proposal and oral defense of the project should be the work of a graduate student with the guidance of a faculty mentor. Students who work with existing data are expected to conceptualize a novel research question as opposed to addressing the primary question(s) the Principal Investigator designed the original project to answer (i.e., the study aims).

2. The proposal should be in the best shape possible prior to submission to a 3-person committee (consisting of the faculty mentor, a chairperson, and one other). See the Department's Master's Defense Committee policy for committee member requirements and roles.

3. The candidate should know her/his/their data analytic plan and be able to justify it.

4. The Master's Thesis proposal should be submitted to the committee two weeks before the proposal meeting unless <u>all</u> committee members agree to waive the two week period. The proposal should consist of the following: (a) a 4-6 page introduction, rationale, and hypotheses; (b) a Method section; and (c) proposed data analyses.

5. The candidate should present an oral overview of the proposal that should last approximately 10-15 minutes. A brief literature review, rationale for and hypotheses of the study, methods, and data analytic strategies should be presented.

6. The great majority of the proposal meeting should focus on committee member questions for the candidate.

7. A final meeting among committee members without the candidate present should occur to make one of the following decisions:

    a. Proceed with the study;
    b. Proceed with the study with a list of changes to the proposal;
    c. Re-write aspects of the proposal and re-submit to committee members.
    d. Re-write aspects of the proposal and hold another proposal meeting;
    e. Hold another proposal meeting;
    f. Start on a new proposal.

8. The proposal meeting should be no longer than one hour.

9. Timeline: We encourage students to begin on the Master's Thesis during their first year in graduate school. The proposal and oral defense <u>cannot</u> occur during the summer, defined as beginning one week after commencement in May and ending one week before classes start in August.

Master's Thesis Defense Guidelines

Preamble: The Master's Thesis defense is an opportunity for the candidate to demonstrate her/his/their knowledge of the study she/he has conducted. In the defense presentation, the candidate should be fully versed in the empirical and theoretical basis for the study, the methods used, the data analytic procedures used, whether the hypotheses were or were not supported, and the limitations, strengths, and implications of the study.

The final Master's Thesis should be submitted to the committee two weeks before the defense date unless all committee members agree to waive the two week period. The document should consist of the following: (a) an abstract; (b) an introduction, including the rationale and hypotheses; (c) a methods section, including data analyses, (d) results, and (e) a scholarly discussion. The document should resemble a research report in a peer-reviewed journal.

1. The defense consists of two parts: (1) a 15 to 20 minute presentation, and (2) a question and answer part. Others beside the committee are welcome to attend the presentation but should leave before the second part of the defense.

2. Following the question and answer period, the committee will meet without the candidate to decide one of the following:

    a. Pass with no revisions to the document.
    b. Pass with minor revisions to the document.
    c. Orals and/or question and answer section not passed.
    d. Document is not acceptable.

3. The defense meeting should be no longer than one hour.

4. Timeline: The Master's Thesis should be completed no later than the end of the second academic year (one week after commencement in May).

5. Students must use and follow the timeline on the Intent to Defend form for the Master's Thesis defense, including the requirement to submit the form to the Director of Clinical Training, the Intent to Graduate Form to the Graduate College, and the Defense Committee Membership Approval Form to the Graduate College no later than 6 weeks prior to the defense date.

6. Students must submit a Defense Notice to the Graduate College at least three weeks prior to their defense date (also submit to Cyndi Snyder). Please go to http://www.uvm.edu/graduate/resources to get the Defense Notice Template (see section on "Thesis/Dissertation Forms").

Approved 09/26/2018

**Policy to Waive Masters Requirement for Students in the
Clinical Psychology Doctoral Program**

Drafted: 9/11/2019
Approved: 9/12/2019

Students with a Masters degree who are admitted to the clinical psychology doctoral program may waive the requirement to complete a Masters Thesis if the following criteria are met:

- The student has successfully defended a master's thesis at the institution where they obtained their Masters degree.

- The thesis work is the product of a systematic and scholarly research study that includes at a minimum, an introductory literature review, a description of the research participants, methodological procedures, and results, a literature-informed discussion of the findings and their implications, and a list of references. Case-study theses will not be considered research, but single subject experiments may qualify.

- The thesis was written in APA style and defended orally in front of a faculty committee who graded the work (i.e., the original manuscript along with the masters-thesis guidelines or rules that were followed).

The student will submit the final thesis document, defined as the document that was successfully defended, the masters-thesis guidelines or rules that were followed, and evidence that the thesis was successfully defended (transcript, thesis defense form, and/or signed cover page) to the director of clinical training (DCT).

The DCT will review the submitted materials and determine whether or not to waive the Masters Thesis requirement. The DCT may consult with other faculty or request additional documentation from the student when making this determination. The DCT will strive to communicate the decision in writing within 30 working days of receiving the request and documenting evidence.

The possible outcomes of the review are:

- **Thesis Waived:** The prior thesis is sufficient. The current thesis requirement is waived.
- **Thesis Not Waived:** The prior thesis is not sufficient. The student is required to complete a Masters Thesis according to the guidelines within the clinical program. The DCT will provide the student a rationale for this decision in writing.

The Doctoral Comprehensive Portfolio

Revised November 2020.

The Comprehensive Portfolio is designed to insure that all students develop a minimum level of research and teaching skills/competencies. The third area (clinical skills) is developed and evaluated by students progressing through the training sequence delineated below, receiving satisfactory clinical evaluations, and a passing grade in Advanced Clinical Practicum (PSYS 6220).

1. First semester, first year: Participate on a vertical team.
2. Second semester, first year: Serve as a co-therapist on 2 to 3 cases.
3. Second year: Participate on a vertical team and carry 2 to 3 cases at most times.
4. Third year: Have a ½-time placement at VPS.
5. Fourth year: Have a ½-time placement at VPS or an external placement.

The goal is to have at a minimum the equivalent of one full-time placement over the course of years 3 and 4. The sequence is one that most, but not necessarily all, students will follow.

Purpose of Comprehensive Portfolio

The purpose of the Comprehensive Portfolio is to have students document how they have developed their research and teaching skills through their experiences in the clinical psychology doctoral program. They will integrate the knowledge they obtain from their courses and other experiences into the materials contained in the portfolio.   Publications, conference presentations, and teaching experiences are crucial skills in our field and for obtaining academic or non-academic positions following the completion of the doctoral degree; therefore all students should do these things as an integral part of their activities in the doctoral program. Through the materials assembled in the portfolio, students demonstrate their knowledge of the clinical psychology field and their specialized knowledge in a certain area of clinical psychology, their research skills, and their teaching promise. Because the ability to integrate knowledge in one's specialty area and the ability to conduct and report research are especially important, all students are required to complete research requirements 1 or 2 below. Students choose (in consultation with their advisor) other items to include in their portfolios to foster their own professional development.

Timeline for Completion of the Portfolio

1. During the student's first semester, one clinical faculty member (not the student's primary mentor) will be randomly assigned to each student to evaluate the portfolio when it has been completed.

2. The student will turn in to the Director of Clinical Training and to the assigned clinical faculty member by December 15th the checklist indicating items you plan to complete. These can be changed at any point in time.

3. Completion and approval of the portfolio should occur by the end of the third year at the latest and *must* occur prior to preliminary orals being held on the dissertation proposal.

REQUIREMENTS

One of the first two items is required. Choose three additional items (or 2 additional items if you complete 1 and 2) to complete the research part of the Portfolio. The choices should be made in consultation with your advisor. The faculty evaluation person will provide their evaluation on the Portfolio within 4 weeks of receiving it from the student.

Research

1. Interpretive or review article/chapter for field of specialization. This paper is expected to be longer than a typical seminar paper, and it should be of *publishable quality*. The review article must be first or sole authored by the student and submitted or accepted for publication. This paper may serve as the basis of the introduction to the dissertation but should be written as a review paper (e.g., integrative conclusions but no hypotheses for a proposed study).

2. First authored published journal article or article submitted for publication to a peer-reviewed journal. Note: Results must be viewed as publishable by mentor.

3. An additional first or co-authored article or chapter published or submitted for publication. Articles should be published in peer reviewed journals and chapters should be published in reputable academic publishing houses or university presses. Co-authorship means having one's name on the chapter or article. If the contribution is a chapter, it must be a full length.

4. First-author conference presentation or poster presentation. An abstract of the presentation or poster also should be provided.

5. First or co-authored paper designed to disseminate psychology to other disciplines or the public, published or submitted for publication. Co-authorship means having one's name on the paper.

6. Review of an article for a journal, or review of a published data-based paper. Submit the article reviewed and your review. (Note: This can be satisfied by co-reviewing an article with a faculty member as long as the student makes a substantial contribution to the content and writing of the submitted critique).

7. Submitted grant proposal (with the student as the PI/trainee) to the National Institute of Health (NIH) or the National Science Foundation (NSF) (or other mechanism if approved by the clinical faculty). Other external grant mechanisms that are typically processed through UVM'S Sponsored Projects Administration (SPA) and include an independent research strategy and/or training plan will be considered upon approval of the clinical faculty (direct a request to the Director of Clinical Training). CAPTR grants do not satisfy this requirement.

Teaching

Three of seven items is required. Either number 1 or 6, but not both, can be used to fulfill the teaching requirement.

1. Complete at least three (3) workshops at the Center for Teaching and Learning and type a separate half-page summary of what you learned for each workshop you attend. (If you also choose #7, you must select workshops that were not part of the Graduate Teaching Program).

2. Serve as a Teaching Assistant in a course offered by a faculty member. This can be a formal (receive a TA placement) or informal (not receive a TA placement) appointment. A course syllabus and a clear delineation of your responsibilities should be presented.

3. Teach a course, typically through Continuing Education. Include course number, title, syllabus, and number of students enrolled.

4. Guest lecture in a formal course at least 3 times.

5. Mentor two or more undergraduates in your lab by setting up a course of learning and a syllabus.

6. Take and pass a "Teaching Psychology" course, approved by the Director of Clinical Training.

7. Complete the University of Vermont's Graduate Teaching Program.

Submission of the Portfolio

Portfolios are first submitted to the advisor for initial approval, and then to the faculty member appointed to evaluate the portfolio.

The student should create a binder with dividers for each of their items, and should provide a cover letter describing the contents of the portfolio, how the portfolio reflects the student's content area, and a vita. ***Include the Portfolio checklist in the binder.*** Paper copies of all materials should be provided, along with citations for published papers, conference presentations, and chapters.

PROCEDURES

1. Student meets with advisor to plan comprehensive portfolio during the student's first semester of the first year of the program. The faculty member who will conduct the evaluation also will be assigned in the first semester of the first year.

2. The advisor and student decide on the set of items to go into the portfolio. They use the checklist to keep track of progress on the different items. Students should receive feedback from their advisor before submitting items to the faculty member who will conduct the evaluation. This is particularly the case for the literature review or journal article. It is expected that the advisor reads the literature review or journal article several times after revisions before it is included in the portfolio and submitted for evaluation.

3. Students compile the portfolio, which should include an up-to-date vita and the Portfolio checklist, for submission for evaluation. A paper copy of each item should be provided, along with citations for published papers, conference presentations, and chapters. Portfolios are first submitted to the advisor for initial approval, and then to the faculty member for full evaluation. The student should provide a cover letter describing the contents of the portfolio and how the portfolio reflects the student's content area.

4. The faculty evaluation person evaluates each item in the portfolio. Articles accepted for publication in reputable journals or books, papers presented at national conferences, grants submitted to reputable agencies or foundations, and reviews submitted to reputable journals do *not* have to be evaluated further. Articles submitted and other items not judged by outside agencies will be read and evaluated by the evaluator. The student's advisor determines the appropriateness of the specific journals and granting agencies for the portfolio requirements.

5. The faculty evaluation person evaluates each item separately, and decides if it meets the requirements or needs to be revised and resubmitted. For items judged as needing revision, a second faculty member will be asked by the DCT to provide a second opinion. If there is a difference of opinion, the two faculty members will resolve the difference of opinion. ALL items must meet the requirements for the portfolio to be judged acceptable.

    a. For all items except the required one, an item judged as needing revision can either be revised, or students can opt to submit another item in its place.
    b. If the required item is judged as needing revision, the student cannot replace it with another item but must submit a revised version.
    c. Students unable to revise item(s) successfully will not be allowed to complete the doctoral program.

Timeline for Completion of the Evaluation of the Portfolio

1. The faculty member will provide her/his/their evaluation on the Portfolio within 4 weeks of receiving it from the student.

<u>Monitoring of Student Progress</u>

As part of the annual evaluation which occurs in October, students shall complete a progress report that they submit to the DCT. This report will summarize their progress toward completing the portfolio.

EVALUATION

The faculty member reading the portfolio will assign one of the following recommendations:

A. PASS. Accept as is (no revisions).

B. PASS WITH REVISION. The faculty member has relatively minor comments and feedback that should be addressed by the student.

C. DOES NOT PASS. Reject and revise the portfolio according to comments from the faculty portfolio committee.

The faculty member sends her/his/their evaluation to the student (using the designed evaluation form on the next page), the student's Advisor, and the DCT.

Evaluation of Doctoral Portfolio by Faculty Reviewer

Student:

Faculty Reviewer:

Timeline: The faculty reviewer will provide her/his/their evaluation on the Portfolio within 4 weeks of receiving it from the student. The faculty reviewer will then send a copy of his/her/their evaluation to the student, the student's advisor, and the Director of Clinical Training.

<u>EVALUATION</u>

Recommendation of the faculty member reviewing the Portfolio:

_____PASS. Accept as is (no revisions).

_____PASS WITH REVISION*. The faculty member has relatively minor comments and feedback that should be addressed by the student (see below).

_____DOES NOT PASS*. Reject and revise the portfolio according to comments (see below).

Comments to be addressed:

*The Portfolio should be resubmitted to the faculty reviewer (along with a clean copy of this form) after revision in accord with the comments.

_____   _____
Faculty Reviewer Signature   Date

CHECKLIST

<div align="center">

Doctoral Portfolio Checklist

</div>

STUDENT'S NAME: ADVISOR:
DATE: FACULTY REVIEWER:

One of the first two Research items below is required. Choose <u>three</u> additional Research items (or 2 additional items if you complete numbers 1 and 2) to complete the portfolio. Choose three of seven Teaching items to complete. The choices should be made in consultation with your advisor. ***Consult the Portfolio Procedures and Portfolio Requirements documents for more details on the criteria for each item.*** Place a check next to the item that you are submitting. Please submit the checklist to your assigned faculty reviewer by December 15 of your first semester in graduate school to indicate items you plan to complete as part of your Portfolio. Advise the DCT of any changes in items you plan to complete as part of your Portfolio. Include the checklist in your submitted Portfolio.

Research

1. First authored interpretive or review article/chapter for field of specialization, accepted or submitted for publication.

___Completed. Title:

2. First authored published journal article, or article submitted for publication to a peer-reviewed journal.

___Completed. Title:

3. An additional first or co-authored article or chapter accepted or submitted for publication.

___Completed. Title:

4. First authored or co-authored conference presentation or poster presentation.

___Completed. Title:

5. First or co-authored published or submitted for publication paper designed to disseminate psychology to other disciplines or the public.

___Completed. Title:

6. Review of an article for a journal or review of a data-based published paper.

___Completed. Title:

7. Submitted grant proposal (with the student as the PI/trainee) to the National Institute of Health (NIH) or the National Science Foundation (NSF) (or other mechanism if approved by the clinical faculty). Other external grant mechanisms that are typically processed through UVM'S Sponsored Projects Administration (SPA) and include an independent research strategy and/or training plan will be considered upon approval of the clinical faculty (direct a request to the Director of Clinical Training). CAPTR grants do not satisfy this requirement.

___Completed. Title:

Teaching (Complete at least 3 of 7. Either number 1 or 6, but not both, can be used).

1. Complete three workshops at the Center for Teaching and Learning (CTL) and write a one-half page summary of what you learned in each workshop. (If you also choose #7, you must select workshops that were not part of the Graduate Teaching Program).

___Completed. CTL workshop titles (3):
___Completed: Summaries (provide a separate summary for each workshop):

2. Serve as a Teaching Assistant.

___Completed. Course:

3. Teach a course.

___Completed. Title:

4. Guest lecture in formal course at least 3 times.

___Completed. Courses lectured in: _____, _____, and _____.

5. Mentored 2 or more undergraduates in lab.

___Completed.

6. Complete a "Teaching Psychology" course, approved by the Director of Clinical Training.

___Completed.

7. Complete the University of Vermont's Graduate Teaching Program.

___Completed.

Evaluation of Doctoral Portfolio Checklist by Faculty Reviewer

Student:

Faculty Reviewer:

EVALUATION

Recommendation of the faculty member reviewing the Portfolio checklist:

____PRPOSED PLAN IS ACCEPTABLE. Checklist is acceptable as is (no revisions).

____PROPOSED PLAN IS UNACCEPTABLE. *The faculty member has comments and feedback that should be addressed by the student (see below).

Comments to be addressed:

*The Portfolio checklist should be resubmitted to the faculty reviewer (along with a clean copy of this form) after revision in accord with the comments.

Faculty Reviewer: Please submit a copy of this completed form to the student, the student's advisor, and the Director of Clinical Training.

_____   _____
Faculty Reviewer Signature   Date

Ph.D. Comprehensive Exam in Clinical Psychology
(Revised and adopted by the clinical faculty 2/16/2022)

The Comprehensive Exam is an opportunity for a student to develop expertise in an area of clinical psychological science. It also serves as a demonstration of a student's written and oral ability to review, integrate, and evaluate a large body of empirical research; to propose testable hypotheses that stem from that research; and to design a study to test those hypotheses, including appropriate statistical analyses. The purpose of this process is to determine that a student is prepared for a career as a doctoral-level clinical psychologist, wherein these skills constitute essential competencies.

In our Clinical Psychology doctoral program, the comprehensive exam to advance to Ph.D. candidacy consists of (1) a written examination (i.e., a written dissertation proposal document that is deemed satisfactory by the 5-person dissertation committee) and (2) an oral examination (i.e., a committee decision of "pass" at the dissertation proposal meeting).

Please see the Department of Psychological Science's "Dissertation Proposal Guidelines" for specific instructions to prepare for (1) and (2).

In accordance with Graduate College rules, should the candidate fail the examination, only one re-examination is permitted; and the comprehensive examination must be passed by the candidate at least 6 months before the final dissertation is submitted to the Graduate College.

Failure of the comprehensive examination is defined as the following scenarios, with one re-examination allowed at each step (written and oral exam components). Pass/fail is defined by consensus agreement by the committee members.

(1) Upon submitting the proposal to the committee, the committee deems that the proposal is not satisfactory and a meeting should not occur, commensurate with #5 in the Department's Dissertation Proposal Guidelines. This would mean the written exam was failed; the student has one more chance to submit a satisfactory document to the committee.

(2) Based on the Department's Dissertation Proposal Guidelines (#9) regarding committee deliberations after a proposal meeting:
  a. "Re-write aspects of the proposal and re-submit to committee members." (This would mean the written part of the exam was, in part, failed, but could be turned to a pass with revisions deemed satisfactory by the committee).
  b. "Re-write aspects of the proposal and hold another proposal meeting." (This would mean the written part of the exam, in part, was failed, but could be turned to a pass with revisions deemed satisfactory by the committee, and the changes were deemed substantial enough to warrant holding another oral exam, deferring the pass/fail decision on the oral exam until another meeting occurs).
  c. "Hold another proposal meeting." (This would mean the oral exam was failed; the student has one more chance to hold another meeting deemed successful by the committee).
  d. "Start on a new proposal." (This would mean the written and oral exam were both failed on the first attempt. In practice, the expectation is that this would be detected by the committee in advance of holding an oral exam, and the committee would inform the student not to proceed with a meeting. See (1), above. After rewriting the proposal, if the written product is deemed satisfactory (passed oral exam on second attempt), the student would still need to hold another proposal meeting on the revised proposal and pass the oral exam on the second attempt to pass the comp).

Documented Completion of Comprehensive Exam to Advance to Doctoral Candidacy
If a student receives a Pass, they must complete the "Proof of Successful Completion of Comprehensive Exam" form from the Graduate College. Form available at:
https://www.uvm.edu/sites/default/files/compexammemo.pdf

Doctoral Dissertation Defense Committee

The committee consists of five members, three of whom (including the dissertation advisor) must be members of the Graduate Faculty and the Department of Psychological Science. The fourth member serves as Chair of the Dissertation Defense Committee; the chairperson must not be a core faculty (i.e., have a primary appointment) or affiliated faculty (i.e., have a secondary appointment) in the Department of Psychological Science (see the department website for a list of core and affiliated departmental faculty) and must not be a core or affiliated faculty in the dissertation advisor's department. The chairperson must be a member of the Graduate Faculty.
The fifth member can be inside or outside of the Psychology Department and need not be a member of the Graduate Faculty. At least one person must be a core faculty member in the student's academic cluster (i.e., clinical, social, developmental, or biobehavioral*), and it is strongly recommended that one be from a department cluster other than the student's own.

Proposals for thesis or dissertation research must be approved by the full committee in advance of substantive work on the project. Changes in thesis or dissertation plans are to be discussed with the committee for approval as the research is in progress. It is the responsibility of the student to keep her/his/their committee up to date.

Thesis and dissertation defenses are publicly held. The student must complete the department Intent to Defend Form at least at least six weeks prior to the defense. The student must follow all Graduate College requirements and deadlines. Defenses must take place during the academic year, which spans the week before classes start in fall semester through the week after spring commencement. A request must be made to the Department Chair for a defense outside of these dates and will only be approved in exceptional circumstances and with the unanimous support of the defense committee.

*A core faculty member from any of the academic clusters in the Department of Psychological Science (i.e., clinical, social, developmental, or biobehavioral) will fulfill this requirement for students in the Human Behavioral Pharmacology subprogram.

Revised 2/7/2019

Dissertation Proposal Guidelines
Approved by Faculty: February 8, 2017; Revised March 9, 2018

Preamble: The purpose of a dissertation is the opportunity for a graduate student to demonstrate her/his/their ability to independently conceptualize, design, and analyze a meaningful piece of research. A knowledge of the relevant literature and theory, the ability to integrate the proposed study into the existing literature and theory, the ability to develop research hypotheses, and an ability to recognize the limitations, strengths, and implications of the study also are critical parts of the dissertation proposal.

1. A dissertation proposal should be the work of a graduate student with the guidance of a faculty mentor. It should include a *comprehensive* literature review leading to specific research hypotheses and a detailed method section. Because the length of the literature review can vary by topic, the scope of the literature review, including its length, should be determined though consultation with the student's advisor and dissertation committee as early in the process as possible. The Department of Psychological Science does not accept dissertation proposals (or dissertations) in manuscript/journal article format, even if appended with a full literature review.

2. The proposal should be in the best shape possible prior to submission to the committee. The role of committee members is to evaluate the proposal and the candidate, not to design the study, help write the proposal, or help design data analytic approaches.

3. The candidate should know her/his/their data analytic plan and be able to justify it.

4. The oral defense of the dissertation proposal is the task of the candidate, not the primary faculty mentor.

5. The dissertation proposal should be submitted to the committee two weeks before the proposal meeting unless all committee members agree to waive the two week period. Serious concerns about the readiness of the written proposal for a committee meeting must be shared, via email, with the committee at least 24 hours prior to the scheduled meeting. The meeting may be rescheduled at the discretion of the committee chair.

6. The dissertation proposal meeting should be scheduled for a 2-hour block, but may end early.

7. The candidate should then present an oral overview of the proposal that should last approximately 15 minutes. A brief literature review, rationale for and hypotheses of the study, methods, data analytic strategies, and preliminary data if available should be presented.

8. The great majority of the proposal meeting should focus on committee member questions for the candidate.

9. A final meeting among committee members without the candidate present should occur to make one of the following decisions:

    a. Proceed with the dissertation study;
    b. Proceed with the dissertation study with a list of changes to the proposal;
    c. Re-write aspects of the proposal and re-submit to committee members.
    d. Re-write aspects of the proposal and hold another proposal meeting;
    e. Hold another proposal meeting;
    f. Start on a new proposal.

Dissertation Defense Guidelines
Approved by Faculty: February 8, 2017

Preamble: The dissertation defense is an opportunity for the candidate to demonstrate her/his/their knowledge of the study she/he has conducted. In the dissertation defense presentation, the candidate should be fully versed in the empirical and theoretical basis for the study, the methods used, the data analytic procedures used, whether the hypotheses were or were not supported, and the limitations, strengths, and implications of the study.

1. The defense consists of two parts: (1) a 25 to 30 minute presentation and brief question and answer part that is open to the "public", and (2) a question and answer part limited to the candidate and the committee. The entire dissertation defense should be scheduled for 2 hours. Students should give careful consideration to whom they invite to the public part of the defense. See attached for issues to consider.

2. Following the question and answer period, the committee will meet without the candidate to decide one of the following:

   a. Pass with no revisions to the document.
   b. Pass with minor revisions to the document.
   c. Orals and/or question and answer section not passed.
   d. Document is not acceptable.

NOTE on public portion of defense: Based on the advice of students and faculty who have been through this process, we would like to offer a few thoughts to inform the decision of who to invite to the *public* portion of one's dissertation defense, with the caveat that there is no right or wrong decision. Some students may only wish to have the committee present and, perhaps, a few other colleagues within the department who have been involved in the student's training, research, etc. As has happened in the past, other students may also elect to invite significant others and/or family members from out of town to be present for the defense, which is then often followed by a small celebratory gathering after the "closed" portion of the defense. There are a number of reasons why this may appeal to some and we certainly want to make clear that we acknowledge that the support of family and friends is important throughout the process of obtaining an advanced degree. However, it is also important for candidates to know that the dissertation defense is not simply a formality; that is, there is a small possibility that the candidate's committee will need to see major revisions to the dissertation before it can be passed, thus postponing the time for celebration. We set these comments within the context that it is expected that the student's advisor will not allow them to defend when there are serious problems that might prevent the candidate from passing. In other words, the process leading up to the defense should preclude such a scenario from ever happening at all, but these are things that each student may want to consider in planning for the defense.

Based on the advice of students and faculty who have been through this process, we would like to offer a few thoughts to inform the decision of who to invite to the *public* portion of one's dissertation defense, with the caveat that there is no right or wrong decision. Some students may only wish to have the committee present and, perhaps, a few other colleagues within the department who have been involved in the student's training, research, etc. As has happened in the past, other students may also elect to invite significant others and/or family members from out of town to be present for the defense, which is then often followed by a small celebratory gathering after the "closed" portion of the defense. There are a number of reasons why this may appeal to some and we certainly want to make clear that we acknowledge that the support of family and friends is important throughout the process of obtaining an advanced degree. However, it is also important for candidates to know that the dissertation defense is not simply a formality; that is, there is a small possibility that the candidate's committee will need to see major revisions to the dissertation before it can be passed, thus postponing the time for celebration. We set these comments within the context that it is expected that the student's advisor will not allow them to defend when there are serious problems that might prevent the

candidate from passing. In other words, the process leading up to the defense should preclude such a scenario from ever happening at all, but these are things that each student may want to consider in planning for the defense.

Internship Placement Policy

The University of Vermont Clinical Psychology Program has a requirement that all students complete an APA-accredited clinical internship or CPA-accredited clinical internship. However, we recognize the increasing difficulty of obtaining such an internship. Therefore, while we maintain our requirement of an APA/CPA-accredited internship, we will consider requests to apply to a non-APA/CPA-accredited (but APPIC member) internship. These will be considered by the clinical faculty on a case-by-case basis for individuals who do not match in Phase I of the second year of internship application.

Please Note: Completing an internship at a CPA-accredited, but not APA-accredited, internship may impact one's ability to obtain licensure in the United States. When choosing an internship site, students should check the licensure requirements for locations in which they may choose to work to inform their decision making.

Internship Match Registration Policy

The Clinical Faculty adopted this policy to ensure that our graduate students who register for the internship match end up participating in the match rather than withdrawing. To register to participate in the APPIC Match, Clinical Psychology graduate students must have already successfully defended their dissertation proposal before their committee by October 15th of the year they intend to apply. The October deadline recognizes that many internship sites have early application deadlines.

Internship Preparation: Reporting Yearly Data and Timeline for Final Six Months

Date:

Name:

Finishing _____ year in Program; applying for internship in fall of _____ year in program

Total # of Intervention hours (face-to-face with actual clients; includes individual/group/family therapy, intake interviews, parent training, and consultation):

Total # of Assessment hours (face-to-face with actual clients; includes administering test instruments and feedback; full tests only):

Total # of integrated reports (complete write-up of intake, history, and 2+ cognitive/personality tests designed to answer specific referral question[s]):

Total # of Supervision Hours:

Return to the Director of Clinical Training

Internship Application Timeline

1. Total intervention and assessment hours and number of integrated reports each May.

2. April/May (before October you are applying for internship):
    a. Attend internship meeting
    b. Begin to identify sites
    c. Review your total hours/number of reports

3. End of July
    a. Have primary sites identified
    b. Begin on essays (pass them back and forth with your mentor)

4. Month of September
    a. Determine who will write your letters of recommendation (ask them by September 1)
    b. Attend internship meetings
    c. Finalize site list by ~ September 15
    d. Complete application form
    e. Complete essays; submit complete drafts to Keith and DCT by September 30

5. Early October
    a. Attend internship meetings
    b. Complete online application (other than essays and cover letters) by October 5, so DCT can fill out required form and letter writers can submit letter of reference

6. Mid-October
    a. Finalize essays and cover letters; proof and submit online application

Policy on Integrated Reports

The definition of an integrated report is a report that includes a history, an interview, and at least two tests from one or more of the following categories: personality assessment (objective, self-report, and/or projective), intellectual assessment, cognitive assessment, and neuropsychological assessment.

Please carefully review this definition as it answers the question of what should be included in a report to have it satisfy the requirement of an integrated report.

A decision about whether a report meets the criteria for an integrated report will be made by the clinical supervisor and graduate student.

Psychological Assessment Experience
(From APA Internship Application)

Psychological Assessment Experience
In this section, you will summarize your practicum assessment experience in providing psychodiagnostic and neuropsychological assessments. You should provide the estimated total number of face-to-face client contact hours administering instruments and providing feedback to clients/patients. You should not include the activities of scoring and report writing, which should instead be included in the "Support Activities" section.

Do not include any practice administrations. Testing experience accrued while employed should not be included in this section and may instead be listed on a curriculum vita. You should only include instruments for which you administered the *full* test. Partial tests or administering only selected subtests are NOT to be included in this accounting. You should only count each administration once.

Adult Assessment Instruments / Child and Adolescent Assessment Instruments
In this section, you should indicate all psychological assessment instruments that you used as part of your practice experiences with actual patients/clients (columns one and two) or research participants in a clinical study (column three) through October 15. If the person you assessed was not a client, patient, or clinical research participant, then you should not include this experience in this summary. Do not include any practice administrations.

You may include additional instruments (under "Other Measures") for any tests not listed. You can include as many instruments as you would like.

For each instrument that you used, specify the following information:

1. *Number Clinically Administered/Scored:* The number of times that you both administered *and* scored the instrument in a clinical situation (i.e., with an actual client/patient).

2. *Number of Clinical Reports Written with this Measure:* The number of these instruments for which you also wrote a clinically interpretive report.

3. *Number Administered as Part of a Research Project:* The number of instruments that you administered as part of a research project.

Integrated Reports
In this section, provide the number of integrated assessment reports you have written for adults and the number written for children and adolescents. The definition of an integrated report is a report that includes a history, an interview and at least two tests from one or more of the following categories: personality assessment (objective, self-report, and/or projective), intellectual assessment, cognitive assessment, and neuropsychological assessment. Please carefully review this definition as it answers the question of what should be included in a report to have it satisfy the requirement of an integrated report.

Our Program Requirements to Apply for Internship

In addition to the requirement that you defend your dissertation proposal by October 15 of the year you intend to apply, the UVM Clinical Psychology doctoral program enforces the following in order to apply for internship:

Minimum Number of Intervention Hours: **500**

Minimum Number of Assessment Hours: **100**

Minimum Number of Integrated Reports: **10**

TQCVL Verification Process

The Trainee Qualifications and Credentials Verification Letter (TQCVL) is a letter that DCTs are required to certify (i.e., sign) and submit to the VA on behalf of each health professions trainee (HPT) who will be working at the VA. The letter contains personal and medical information (e.g., vaccination status) to which the DCT is customarily not privy.

The following is a set of guidelines for handling this VA requirement to protect the privacy and respect the self-determination of clinical psychology students as they decide if they wish to pursue VA training opportunities. This process is also in place to ensure that the DCT feels comfortable signing a document that attests to information not appropriate for a DCT to review or evaluate. For this documented policy, the term "DCT" refers to the current Director of Clinical Training (Program Director of the Clinical Psychology Ph.D. Program at the University of Vermont) or an Acting DCT who has been appointed the role in the absence or unavailability of the current DCT.

The following are mandatory requirements set by the VA. The DCT has no ability to waive or modify them. Of course, the decision to pursue training at the VA is at the sole option of the student, and a student who does not wish to comply with these requirements may seek training at a non-VA facility.

It is the student's responsibility to notify the DCT of TQCVL requests and their deadlines and to supply the DCT with the information needed to certify the TQCVL. Students should get an early start on collecting relevant information and making doctor's appointments (if needed).

1. The TQCVL VA requirement will be made transparent to all program students, including the option not to pursue VA training if students wish not to disclose information required by the TQCVL letter; this information, including this written policy, will be included in detail in the
   a. clinical psychology program's policy and procedures handbook.
   b. practicum training orientation and materials (if VA externships are offered).
   c. clinical internship training orientation and materials.

2. Students pursuing VA training and for whom the VA has requested a DCT-endorsed TQCVL must, per the VA, provide the DCT with the following information so the DCT can certify each of the following:
   a. Evidence or self-certification of satisfactory physical condition based on a physical examination in the past 12-months (get the provider to write a letter stating your physical health is satisfactory to engage in a VA psychology internship);
   b. Evidence or self-certification of up-to-date vaccinations for healthcare workers as recommended by Centers for Disease Control (CDC) and VA
      https://www.cdc.gov/vaccines/adults/rec-vac/hcw.html to include:
      Hepatitis B
      Seasonal Influenza, before November 30 of influenza season
      Measles, Mumps, & Rubella
      Varicella
      Tetanus, Diphtheria, Pertussis
      Meningococcal
   c. Evidence of tuberculosis screening and testing per CDC health care personnel guidelines https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm;
   d. Identification documents to meet VA security requirements;
      https://www.oit.va.gov/programs/piv/_media/docs/IDMatrix.pdf; and
   e. Results of screening against the Health and Human Services' List of Excluded Individuals and Entities (LEIE). https://exclusions.oig.hhs.gov/. (You can also give the DCT permission to screen your name against this list).

3. Students who were born male and who are US citizens, immigrants to the US, or are otherwise required by law to register, must also provide the DCT with evidence that they have registered with the Selective Service System. https://www.sss.gov

4. Non-US citizen trainees must also
   a. Provide the DCT with documented proof of current immigrant or non-immigrant status. This may include visa status documents, permanent resident card, Deferred Action for Childhood Arrivals (DACA) trainee Employment Authorization Document (Form I-766), and other forms as requested by the VA during this process.
   b. Sign a statement that permits the DCT to provide this documented proof of current immigrant or non-immigrant status along with the TQCVL to the VA.

5. To protect the privacy and security of the information required to be collected for the TQCVL, the following protocols will be followed:
   a. Any information collected by the DCT for the purposes of completing your TQCVL will be reviewed only by the DCT for purposes of completing the TQCVL or verifying information on the TQCVL. No other faculty, staff, or students will have access to this information.
   b. The information for completing the TQCVL will be stored in a locked filing cabinet in the office of the DCT (if in hard copy) or in the DCT's password-protected folder on the UVM Network (if electronic copy). Other than the DCT, no other faculty, staff, or students will have access to the TQCVL information at the University of Vermont.
   c. Information for the TQCVL will be stored for 1 year passed the date of earning the Ph.D. or otherwise discontinuing from the program. At this time, the TQCVL will be destroyed (via secure shred if hard copy) or deleted (if electronic copy) by the DCT.

Effective June 1, 2021

Research Mentoring Guidelines

These are general guidelines for mentoring graduate students. The most important part of the mentoring process is a match between mentoring style and the graduate student. Therefore, one size does not fit all; as long as both the faculty member and the graduate student are effectively communicating and satisfied with progress, then mentoring is effectively occurring.

Our goals with research mentoring of graduate students are as follows: (1) To develop research skills and in-depth knowledge in selected areas of the literature; (2) to become collaborators with faculty and other students; (3) to be consumers and producers of research; (4) to be exposed to the grant process; and (5) to serve as mentors themselves for more junior students.

1. Research teams will generally meet once a week.

2. Faculty member will have individual meetings with each member of the team on at least an every-other-week basis. When meetings have to be cancelled, they will be made up as soon as possible. Progress toward research goals can be assessed and deadlines can be revisited during these meetings.

3. By the beginning of the second year, graduate students will be involved not only in conceptualization of conducting research but in writing papers for submission and presentations for conventions. Faculty members generally will provide extensive feedback on drafts of papers and convention presentations within two weeks (and earlier if possible).

4. Students will be encouraged to pursue and receive help developing: (1) NRSA applications when appropriate; (2) other internal and external grant funding; and (3) venues for participation in professional organizations.

5. As graduate students progress through the program, they should begin serving as mentors for junior members of their research team, including less advanced graduate students and undergraduate students.

Annual Evaluation

Each year in October, there is an annual evaluation of clinical students in their second year and beyond who are on campus. This is an opportunity for you to self-evaluate what you have accomplished and to receive feedback from the faculty on your progress.

Annual Self-Report of Clinical Psychology Graduate Students

University of Vermont

Name:_____ Research Advisor:_____

Month and Year:_____ Year in Program:_____

Clinical Supervisor:_____

Please attach a copy of your current CV to this reply

Research Milestones			

	Pending	Completed	Date Completed
Proposed Master's Thesis			
Defended Master's Thesis			
Doctoral Portfolio Overall (If pending, complete next lines)			
Doctoral Portfolio – Research			
Doctoral Portfolio – Teaching			
Proposed Dissertation			
Defended Dissertation			

Please include the number of:	Total	Since Arriving at UVM
First Author Publications		
Coauthored Publications		
Book Chapters & Non-Peer Reviewed Publications		
Conference Presentations		
Manuscripts Under Review at Peer-Reviewed Journals		
Manuscripts in Preparation		
	Total	Funding Agencies
Grants Funded		
Grants Submitted		

Please use this space to describe your current research project(s), research-related activities you have undertaken in the past year, or any other research-related information you would like to share.

Clinical Milestones

The following are the hours that will be requested on the AAPI (internship application).

Total Number of Intervention Hours: face-to-face with actual clients; includes individual/group/family therapy, intake interviews, parent training, and consultation	
Total Number of Assessment Hours: face-to-face with actual clients; includes administering test instruments and feedback; full tests only	
Total Number of Integrated Reports: complete write-up of intake, history, and 2+ cognitive/personality tests designed to answer specific referral question[s]	
Total Supervision Hours:	

Please list the clinical placements you have completed thus far:

Please share any additional clinical-related experiences including caseload, trainings attended, etc.:

Teaching Milestones

Please list the courses for which you have served as a GTA:

Please share any additional teaching-related experiences including guest lectures given and trainings/workshops that you may have attended:

Academic Progress

Please indicate your progress on the program course requirements

Course	Credits	Semester/Year Completed
Statistics		
Statistics I: PSYS 6000	3	
Statistics II: PSYS 6005	3	
Proseminars		
Biobehavioral: PSYS 6400	3	
Social: PSYS 6500	3	
Developmental: PSYS 6600	3	
Assessment		
Child and Adolescent Psychological Assessment: PSYS 6710	3	
Adult Psychological Assessment: PSYS 6725	3	
Intervention		
Child and Adolescent Behavior Therapy: PSYS 6715	3	
Adult Cognitive-Behavioral Therapy: PSYS 6730	3	
Psychopathology		
Adult Psychopathology: PSYS 6720	3	
Child Psychopathology: PSYS 6705	3	
Research Methodology: PSYS 6010	3	
Ethics: PSYS 6740	3	
History of Psychology: PSYS 6900	3	
Cross-Cultural Clinical Intervention and Research: PSYS 6735	3	
Electives		
Therapy Elective: _____	3	
Elective 1: _____	3	
Elective 2: _____	3	
Supervision and Consultation: PSYS 6230	1	
Total Course Credits Thus Far:		
Master's Thesis Research Credit (Total Thus Far; 6 maximum)		
Dissertation Thesis Research Credit (Total Thus Far; 20 maximum)		
Total Credit Hours:		

64

Academic Community Involvement and Service

Please use this space to describe ways in which you have been involved with and/or served your academic community (which can be the Psychology Department, the University, professional organizations related to your academic or clinical work, etc.). This could include (but is not limited to) such things as attendance of department colloquia or other university lectures, departmental committee membership, and involvement in other academic or professional organizations not already listed on your vita.

Please attach a copy of your current CV to this reply

UVM Clinical Graduate Program Competencies
Research Competencies

Valuing research – Student demonstrates behavior that is consistent with positively valuing the role of research as a component of their training in professional and scientific psychology. For example, the student completes assignments on time, is careful in his/her/their work (e.g., written assignments are free of typographical errors; data entry and management is done carefully), and takes the initiative on assignments (e.g., student seeks out research projects rather than waiting for them to be given to her/him).

Professional interaction – Interacts appropriately with other staff on a research team and with research participants. For example, collaborates well with others on joint projects and works well with other lab/staff members.

Ethical issues – Demonstrates knowledge of ethical principles when conducting research. For example, writes an IRB proposal (including a consent form), addresses HIPAA issues, displays familiarity with the ethics of research design, and maintains participant confidentiality.

Theoretically based – Uses theory to inform the conceptualization, design, and interpretation of research. For example, grasps the theoretical literature in relevant areas, discusses this literature in individual and lab meetings, and integrates theory and literature into scientific writing and presentations.

Research design – Generates novel hypotheses and designs a study that follows from those hypotheses. For example, skillfully critiques others' research, shows initiative/independence on thesis/dissertation.

Data analytic skills - Demonstrates familiarity and proficiency in basic data analytic procedures. For example, demonstrates knowledge and proficiency in conducting and interpreting correlational analyses, ANOVAs, MANOVAs, multiple regression, and procedures relevant to research area.

Critical thinking skills –Critically evaluates own and others' research. For example, identifies limitations in the research literature or design of a specific study, effectively critiques a manuscript, and "makes psychological sense" of own data.

Scientific writing – Demonstrates a scholarly writing style appropriate for journal submissions and thesis/dissertation write-up. For example, follows APA guidelines and style, skillfully integrates research findings, skillfully writes research and grant proposals, and writes in a clear and organized manner.

Manuscript preparation –Writes a manuscript suitable for publication in a peer-reviewed journal.

Presentation skills – Prepares and presents one's own research at a scientific conference, at brown bag presentations, and/or in lab meetings.

*Review an article – Writes a critique of a manuscript submitted for publication as a data-based paper.

*Prepare and submit a grant –Prepares and submits an application for grant funding.
*May only be relevant if selected as part of the Doctoral Portfolio research requirements.

Note: These research competencies represent a modification of those adopted by the clinical psychology training program at the University of North Carolina-Chapel Hill.

Clinical Competencies
UVM Clinical Graduate Program

Competency #1	**To develop effective communication and interpersonal skills.** *Training Objective for Competency #1:* A practicum student exhibits the ability to develop rapport and build professional alliances (with colleagues and communities). A practicum student works effectively with colleagues, supervisors, and mentors, and engages with feedback constructively.
Competency #2	**To incorporate research and theory in clinical practice***.* *Training Objective for Competency #2:* A practicum student can incorporate theory, scientific knowledge, and research when providing evidence-based techniques in clinical practice.
Competency #3	**To provide proficient and effective psychological interventions grounded in evidence-based principles.** *Training Objective for Competency #3:* A practicum student can formulate case conceptualizations, select appropriate interventions, and implement evidence-based treatment strategies in a flexible manner. A student can also effectively conduct oral case presentations regarding intervention.
Competency #4	**To complete comprehensive psychological assessments and accessible assessment reports.** *Training Objective for Competency #4:* A practicum student can develop and understand a referral question, choose appropriate, well-validated assessment tools, assess clients in a valid and reliable manner, write clear, useful, and accessible assessment reports, and disseminate assessment findings to appropriate parties.
Competency #5	**To practice psychology with sensitivity to diversity matters and diverse individual backgrounds.** *Training Objective for Competency #5:* Practicum students attend to a broad range of diversity dimensions (e.g., age, gender, gender identity, race, ethnicity, culture, national origin, religion, disability, sexual orientation, language, mental illness, socio-economic status), consider diversity matters when choosing assessment and intervention strategies, and adapt case conceptualization and services based on diversity considerations.
Competency #6	**To advance clinical research skills and scholarly inquiry.** *Training Objective for Competency #6:* Practicum students will develop and build upon their analytic and research skills, while contributing to the clinical research community.
Competency #7	**To gain knowledge regarding theories and methods of supervision and gain direct experience providing supervision***.* *Training Objective for Competency #7:* A practicum student understands models of supervision, and is able to supervise more junior doctoral-level graduate students.

Competency #8	**To gain knowledge regarding theories and methods of consultation and gain direct experience providing consultation.** *Training Objective for Competency #8:* A clinical VPS Practicum Student is able to provide professional assistance and consultation services to others in response to client, family, or community needs. A student also seeks out interdisciplinary consultation as needed.
Competency #9	**To develop a thorough understanding of ethical practice in the context of professional psychology and to implement such practice.** Training Objective for Competency #9: Practicum students develop ethical decision-making skills, conduct themselves in accordance with the APA "Ethical Principles of Psychologists and Code of Conduct," HIPPA, and uphold their primary ethical obligation to protect the welfare of the client/patient.
Competency #10	**To adhere to professional demeanor in interactions with clients, peers, supervisors, and allied professionals.** Training Objective for Competency #10: Practicum students maintain professional appearance, engage in appropriate interactions, and adhere to business practices of psychology (e.g., notes, billing, attendance).
Competency #11	**To develop and maintain self-care practices.** Training Objective for Competency #11: Practicum students understand the importance of self-care, maintain awareness of self-care practices and stressors, and engage in self-care practice.
Competency #12	**To develop and maintain appropriate clinical responsiveness.** Training Objective for Competency #12: A practicum student demonstrates strong relational skills, including empathy, maintenance of therapeutic alliance, goal consensus and collaboration, positive regard, and genuineness. A practicum student also exhibits self-reflection, understands the impact of the clinician on the therapeutic relationship, and responds appropriately to this knowledge.

Teaching Competencies
UVM Clinical Graduate Program

<u>Valuing teaching</u> – Student demonstrates behavior that is consistent with generally valuing teaching as a component of their training in professional and scientific psychology. For example, the student completes teaching-related assignments on time, is careful in their work (e.g., written work is free of typographical errors), and takes the initiative on teaching-related duties (e.g., student seeks out opportunities to teach rather than waiting for them to be given to her/him).

<u>Professional interaction</u> – Interacts appropriately with students who she/he is teaching, other teaching assistants, and professors.

<u>*Syllabus Design and Development</u> – Designs and develops a syllabus for a course (including a lab-based course).

<u>*Lecture Development</u> – Develops lectures for a course.

<u>Exam Development</u> – Develops exams for a course.

<u>Grading</u> – Grades exams/papers promptly, provides students with feedback and current standing in class.

<u>Responding to Questions</u> – Responds to questions posed by students and, if necessary, finds answers.

<u>Availability</u> – Sets office hours and responds to student requests within 48 hours.

<u>Facilitating Discussion</u> – Sparks class/lab discussions and keeps them going.

<u>Research Integration</u> – Integrates research into teaching activities, including lectures, readings, and class discussions.

Note: Some competencies may only be relevant if selected as part of the Doctoral Portfolio teaching requirements and/or if the student has engaged in formal classroom teaching activities (e.g., teaching one's own course, serving as a Graduate Teaching Assistant, or guest lecturing).

Competency-Based Evaluation Forms
Research Competencies Rating Form

Name of Student:

Date:

Research Supervisor:

Evaluation Criteria

PLEASE EVALUATE THE STUDENT IN YOUR LABORATORY USING THE SCALE BELOW. PLEASE CIRCLE THE NUMBER THAT BEST DESCRIBES THE TRAINEE'S COMPETENCE. CONSIDER THE TRAINEE'S LEVEL OF TRAINING (I.E., YEAR IN PROGRAM) WHEN MAKING YOUR RATINGS. EACH ITEM MAY INCLUDE SOME SPECIFIC BEHAVIORAL EXAMPLES OF THE COMPETENCE AREA IN QUESTION, WHICH WHILE NOT AN EXHAUSTIVE LIST, SHOULD PROVIDE GENERAL GUIDELINES TO FACILITATE YOUR RATINGS.

1. Competence is below expectations for level of training. Student's competence may be acceptable at times, but may be inconsistent or her/his skill set is below an acceptable level for her/his year in program. This rating should improve to an acceptable level with further training, remediation, and/or increased student effort.

2. Competence meets expectations for level of training. The student has shown some basic mastery of the competency or skill and is at a level expected for someone at her/his level of training.

3. Competence exceeds expectations level of training.

N. Not applicable. The competency or skill set is not applicable to the student or there was no opportunity to rate/observe.

COMPETENCY AREA   RATING

1. **Valuing research** – Student demonstrates behavior that is consistent with positively valuing the role of research as a component of their training in professional and scientific psychology. For example, the student completes assignments on time, is careful in his/her/their work (e.g., written assignments are free of typographical errors; data entry and management is done carefully), and takes the initiative on assignments (e.g., student seeks out research projects rather than waiting for them to be given to her/him).

☐ ☐ ☐☐
N 1 2 3

2. **Professional interaction** –Interacts appropriately with other staff on a research team and with research participants. For example, collaborates well with others on joint projects and works well with other lab/staff members. In rating, please consider your own observations of the student's behavior, which can include how well he/she collaborates with others on joint projects, as well as input from other lab/staff members.

☐ ☐ ☐☐
N 1 2 3

3. **Ethical issues** – Demonstrates knowledge of ethical principles when conducting research. For example, writes an IRB proposal (including a consent form), addresses HIPAA issues, displays familiarity with the ethics of research design, and maintains participant confidentiality.

☐ ☐ ☐☐
N 1 2 3

4. **Theoretically based** – Uses theory to inform the conceptualization, design, and interpretation of research. For example, grasps the theoretical literature in relevant areas, discusses this literature in individual and lab meetings, and integrates theory and literature into scientific writing and presentations.

☐ ☐ ☐☐
N 1 2 3

5. **Research design** – Generates novel hypotheses and designs a study that follows from those hypotheses. For example, skillfully critiques others' research, shows initiative/independence on thesis/dissertation.

☐ ☐ ☐☐
N 1 2 3

6. **Data analytic skills** - Demonstrates familiarity and proficiency in basic data analytic procedures. For example, demonstrates knowledge and proficiency in conducting and interpreting correlational analyses, ANOVAs, MANOVAs, Multiple Regression, and procedures relevant to research area.

☐ ☐ ☐☐
N 1 2 3

7. **Critical thinking skills** – Critically evaluates own and others' research. For example, identifies limitations in the research literature or design of a specific study, effectively critiques a manuscript, and "makes psychological sense" of own data.

☐ ☐ ☐☐
N 1 2 3

8. **Scientific writing** – Demonstrates a scholarly writing style appropriate for journal submissions and thesis/dissertation write-up. For example, follows APA guidelines and style, skillfully integrates research findings, skillfully writes research and grant proposals, and writes in a clear and organized manner.

☐ ☐ ☐☐
N 1 2 3

9. **Manuscript preparation** – Writes a manuscript suitable for publication in a peer-reviewed journal.

☐ ☐ ☐☐
N 1 2 3

10. **Presentation skills** – Prepares and presents one's own research at a scientific conference, at brown bag presentations, and/or in lab meetings.

☐ ☐ ☐☐
N 1 2 3

11. ***Review an article** – Writes a critique of a manuscript submitted for publication as a published data-based paper.

☐ ☐ ☐☐
N 1 2 3

12. ***Prepare and submit a grant** – Prepares and submits an application for grant funding.

☐ ☐ ☐☐
N 1 2 3

*Rate this only if it is selected as part of the research requirement of the Doctoral Portfolio. Otherwise, rate as N (not applicable).

Please comment below on the student's particular strengths in research:

Please comment below on any areas of development for the student in research (for example, as indicated by ratings of 1 in any area) and recommendations for the clinical program faculty on how this will be remediated:

Only complete the following section at the end of the academic year (end of Spring semester):
Contributes knowledge to the field: Below, please indicate how many presentations and the number of manuscripts submitted and published the student had the past academic year.

# of scientific presentations: Posters: Other:

# of publications: Submitted: Published:

_____
_____

Research supervisor's signature   Student's signature

The above signatures indicate that the student has read this feedback form and that the supervisor and student have discussed it verbally. The signatures do not necessarily imply total agreement on the student's performance.

Student: Supervisor:
Clinical Competencies Rating Form
<u>**Expected Competencies of Practicum Students**</u>

Competency #1	**To develop effective communication and interpersonal skills.** *Training Objective for Competency #1:* A practicum student exhibits the ability to develop rapport and build professional alliances (with colleagues and communities). A practicum student works effectively with colleagues, supervisors, and mentors, and engages with feedback constructively.
Competency #2	**To incorporate research and theory in clinical practice**. *Training Objective for Competency #2:* A practicum student can incorporate theory, scientific knowledge, and research when providing evidence-based techniques in clinical practice.
Competency #3	**To provide proficient and effective psychological interventions grounded in evidence-based principles.** *Training Objective for Competency #3:* A practicum student can formulate case conceptualizations, select appropriate interventions, and implement evidence-based treatment strategies in a flexible manner. A student can also effectively conduct oral case presentations regarding intervention.
Competency #4	**To complete comprehensive psychological assessments and accessible assessment reports.** *Training Objective for Competency #4:* A practicum student can develop and understand a referral question, choose appropriate, well-validated assessment tools, assess clients in a valid and reliable manner, write clear, useful, and accessible assessment reports, and disseminate assessment findings to appropriate parties.
Competency #5	**To practice psychology with sensitivity to diversity matters and diverse individual backgrounds.** *Training Objective for Competency #5:* Practicum students attend to a broad range of diversity dimensions (e.g., age, gender, gender identity, race, ethnicity, culture, national origin, religion, disability, sexual orientation, language, mental illness, socio-economic status), consider diversity matters when choosing assessment and intervention strategies, and adapt case conceptualization and services based on diversity considerations.
Competency #6	**To advance clinical research skills and scholarly inquiry.** *Training Objective for Competency #6:* Practicum students will develop and build upon their analytic and research skills, while contributing to the clinical research community.
Competency #7	**To gain knowledge regarding theories and methods of supervision and gain direct experience providing supervision**. *Training Objective for Competency #7:* A practicum student understands models of supervision, and is able to supervise more junior doctoral-level graduate students.

Competency #8	**To gain knowledge regarding theories and methods of consultation and gain direct experience providing consultation.** *Training Objective for Competency #8:* A clinical VPS Practicum Student is able to provide professional assistance and consultation services to others in response to client, family, or community needs. A student also seeks out interdisciplinary consultation as needed.
Competency #9	**To develop a thorough understanding of ethical practice in the context of professional psychology and to implement such practice.** *Training Objective for Competency #9:* Practicum students develop ethical decision-making skills, conduct themselves in accordance with the APA "Ethical Principles of Psychologists and Code of Conduct," HIPPA, and uphold their primary ethical obligation to protect the welfare of the client/patient.
Competency #10	**To adhere to professional demeanor in interactions with clients, peers, supervisors, and allied professionals.** *Training Objective for Competency #10:* Practicum students maintain professional appearance, engage in appropriate interactions, and adhere to business practices of psychology (e.g., notes, billing, attendance).
Competency #11	**To develop and maintain self-care practices.** *Training Objective for Competency #11:* Practicum students understand the importance of self-care, maintain awareness of self-care practices and stressors, and engage in self-care practice.
Competency #12	**To develop and maintain appropriate clinical responsiveness.** *Training Objective for Competency #12:* A practicum student demonstrates strong relational skills, including empathy, maintenance of therapeutic alliance, goal consensus and collaboration, positive regard, and genuineness. A practicum student also exhibits self-reflection, understands the impact of the clinician on the therapeutic relationship, and responds appropriately to this knowledge.

Self-Evaluation

PURPOSE:

The self-evaluation is conducted each semester in order to encourage students and supervisors to align clinical training efforts with clinical training goals. The self-evaluation is not used to make decisions about students' standing in the program, but rather is used to inform future training efforts with individual students and larger cohorts. Therefore, the self-evaluations will be reviewed only by the Clinic Director and each student's individual/vertical team supervisor(s). Self-evaluations will be retained only by the Clinic and will not be shared outside of the persons listed above.

Student's Self-Evaluation of Clinical Competencies

COMPETENCY #1: TO DEVELOP EFFECTIVE COMMUNICATION AND INTERPERSONAL SKILLS.

Training Objective for Competency #1: A practicum student exhibits the ability to develop rapport and build professional alliances (with colleagues and communities). A practicum student works effectively with colleagues, supervisors, and mentors, and engages with feedback constructively.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Establishes and maintains relationships with other professionals (e.g., individuals, groups, and/or communities).	1. Respectful and engaging communication with other professionals.	1 2 3 NA
2. Works effectively with colleagues.	2. Respectful and engaging communication with colleagues.	1 2 3 NA
3. Works effectively with supervisors and mentors.	3. Respectful and engaging communication with supervisors and mentors.	1 2 3 NA
4. Engages with feedback constructively.	4. Receives feedback without defensiveness and responds appropriately.	1 2 3 NA

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SELF-RATING:
Please indicate above the degree to which you believe you meet each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will identify some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on your current development as a trainee.
SELF-REFLECTION:
In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!
STRENGTHS:

Areas for improvement:

Competency #2: To incorporate research and theory in clinical practice.
Training Objective for Competency #2: A practicum student can incorporate theory, scientific knowledge, and research when providing evidence-based techniques in clinical practice.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency	3 = Exceeds competency
1. Knowledge of core psychological science.	1. Demonstrates advanced level of scientific knowledge of human behavior.	1 2 3 NA
2. Independently applies scientific knowledge to practice.	2. Discusses theory and research with clinical supervisors and develops treatment plans and intervention strategies based on theory, research and measurable outcomes.	1 2 3 NA
3. Independently pursues continued knowledge of advances in clinical science.	3. Reads and remains up-to-date on relevant clinical research and applies scientific knowledge and skills appropriately and habitually to the solution of problems.	1 2 3 NA

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SELF-RATING:
Please indicate above the degree to which you believe you meet each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will identify some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on your current development as a trainee.

SELF-REFLECTION:
In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #3: To provide proficient and effective psychological interventions grounded in evidence-based principles.

Training Objective for Competency #3: A practicum student can formulate case conceptualizations, select appropriate interventions, and implement evidence-based treatment strategies in a flexible manner. A student can also effectively conduct oral case presentations regarding intervention.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency	3 = Exceeds competency
1. Applies knowledge of evidence-based practice in treatment and case presentation.	1. Writes clear case notes and summaries grounded in evidence-based practice and provides rationale in notes, supervision, and formal clinical case presentation for intervention strategies utilizing empirical support.	1 2 3 NA
2. Conducts thorough and sensitive initial assessment with attention to functional assessment, treatment goals, and valid measurement.	2. During initial assessment, builds rapport with client, conducts functional assessment, develops treatment goals, and utilizes valid and reliable assessment methods.	1 2 3 NA
3. Engages in independent intervention planning.	3. Independently conceptualizes case and selects appropriate intervention.	1 2 3 NA
4. Applies sound clinical judgment.	4. Uses good judgment in crises, consults with supervisors as needed, and appropriately refers clients to alternative or additional services.	1 2 3 NA
5. Implements effective intervention with fidelity to empirical principles, while being flexible as appropriate.	5. Independently implements a range of appropriate intervention strategies with sensitivity to each individual client's needs and progress.	1 2 3 NA
6. Evaluates treatment progress and modifies treatment plans as indicated.	6. Critically evaluates own clinical work and relevant client outcomes, and adapts treatment when necessary.	1 2 3 NA

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SELF-RATING:

Please indicate above the degree to which you believe you meet each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will identify some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on your current development as a trainee.

SELF-REFLECTION:

In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #4: To complete comprehensive psychological assessments and accessible assessment reports.

Training Objective for Competency #4: A practicum student can develop and understand a referral question, choose appropriate, well-validated assessment tools, assess clients in a valid and reliable manner, write clear, useful, and accessible assessment reports, and disseminate assessment findings to appropriate parties.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency 3 = Exceeds competency	
1. Independently selects and implements multiple methods and means of evaluation with responsiveness to diversity and context.	1. Demonstrates competent use of appropriate and culturally sensitive instruments, seeks consultation as needed, and acknowledges limitations of assessment data, as reflected in written reports.	1 2 3 NA
2. Independently understands strengths and limitations of diagnostic approaches and interpretation of results from multiple measures.	2. Accurately and consistently selects, administers, scores and interprets assessment tools with appropriate flexibility, such that diagnostic questions are addressed and the report leads to clinical formulation and appropriate treatment plan, while including limitations of measures.	1 2 3 NA
3. Demonstrates knowledge of psychometrics of measures and integrates data effectively from a variety of assessment methods.	3. Accurately reports psychometric properties of assessment instruments, when appropriate.	1 2 3 NA
4. Communicates results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner.	4. Writes an effective, comprehensive and conceptually framed report, and effectively communicates results verbally.	1 2 3 NA
5. Demonstrates the ability to base written evaluation on psychological assessment literature.	5. Writes report consistent with guidelines provided in Groth-Marnat (2009), Sattler (2008), and Sattler & Ryan (2009)[1]	1 2 3 NA

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SELF-RATING:

Please indicate above the degree to which you believe you meet each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will identify some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on your current development as a trainee.

SELF-REFLECTION:

In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!
STRENGTHS:

AREAS FOR IMPROVEMENT:
Competency #5: To practice psychology with sensitivity to diversity matters and diverse individual backgrounds.
Training Objective for Competency #5: Practicum students attend to a broad range of diversity dimensions (e.g., age, gender, gender identity, race, ethnicity, culture, national origin, religion, disability, sexual orientation, language, mental illness, socio-economic status), consider diversity matters when choosing assessment and intervention strategies, and adapt case conceptualization and services based on diversity considerations.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency	3 = Exceeds competency
1. Independently monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation.	1. Independently articulates, understands, and monitors own cultural identity in relation to work with others, and initiates consultation or supervision when uncertain about diversity issues.	1 2 3 NA
2. Independently monitors and applies knowledge of others as cultural beings in assessment, treatment, and consultation.	2. Independently articulates, understands and monitors other cultural identities in relation to work with others, and initiatives consultation or supervision when uncertain about diversity issues.	1 2 3 NA
3. Integrates diversity dimensions with case conceptualization, treatment plan, and case presentations.	3. Formulates and presents case conceptualizations and treatment plans with respect for and attention to diverse client background.	1 2 3 NA
4. Independently and creatively adapts intervention to match client's background and needs, and considers diversity when selecting evidence-based intervention.	4. Demonstrates adaptation of case formulation and intervention with responsiveness to diversity domains. Critically evaluates representation of diversity in clinical research and therefore appropriately modifies intervention.	1 2 3 NA

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SELF-RATING:
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SELF-REFLECTION:

In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!
STRENGTHS:

AREAS FOR IMPROVEMENT:

COMPETENCY #6: TO ADVANCE CLINICAL RESEARCH SKILLS AND SCHOLARLY INQUIRY.

Training Objective for Competency #6: Practicum students will develop and build upon their analytic and research skills, while contributing to the clinical research community.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency	3 = Exceeds competency
1. Applies a scientific approach to clinical work.	1. Applies scientific method and knowledge to the monitoring of client progress and outcomes.	1 2 3 NA
2. Participates in clinical research (e.g., clinical data collection).	2. Assists with clinical research efforts within VPS.	1 2 3 NA
3. Integrates clinical knowledge with own research program.	3. Applies clinical experiences and training to own research and dissemination.	1 2 3 NA

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SELF-REFLECTION:
In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!
STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #7: To gain knowledge regarding theories and methods of supervision and gain direct experience providing supervision.

Training Objective for Competency #7: A practicum student understands models of supervision, and is able to supervise more junior doctoral-level graduate students.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency	3 = Exceeds competency
1. Understands the complexity of the supervisor role, including ethical, legal, and contextual issues.	1. Prepares supervision contract (verbal or written) and demonstrates knowledge of limits of competency, and constructs plans to deal with areas of limited competency.	1 2 3 NA
2. Knowledge of procedures and practices of supervision.	2. Articulates a philosophy or model of supervision and reflects on how this model is applied in practice.	1 2 3 NA
3. Engages in professional reflection about relationship with supervisee, as well as supervisee's clients.	3. Articulates how to use supervisory relationships to enhance development of supervisees and clients.	1 2 3 NA
4. Understands other individuals and groups and intersection of diversity in the context of supervision practice.	4. Demonstrates integration of diversity and multiple identity aspects in conceptualization of supervision with clients, supervisees, and self as supervisor.	1 2 3 NA
5. Gains skills in providing monitored supervision to junior colleagues.	5. Provides supervision to less advanced trainees, with meta-supervision from licensed psychologists, and seeks consultation as needed.	1 2 3 NA

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SELF-RATING:

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SELF-REFLECTION:

In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #8: To gain knowledge regarding theories and methods of consultation and gain direct experience providing and obtaining consultation.

Training Objective for Competency #8: A clinical VPS Practicum Student is able to provide professional assistance and consultation services to others in response to client, family, or community needs. A student also seeks out interdisciplinary consultation as needed.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency	3 = Exceeds competency
1. Appropriately seeks consultation from interdisciplinary providers as needed.	1. Recognizes situations in which consultation is needed (e.g., from educators, psychiatrists, other medical professionals, lawyers, cultural consultants), contacts consulting professionals, and resolves consultation questions.	1 2 3 NA
2. Selects appropriate assessment/data gathering that answers consultation referral question(s).	2. Demonstrates ability to gather necessary information, and clarifies and refines referral questions based on analysis of question.	1 2 3 NA
3. Provides effective assessment feedback, articulates recommendations, and advocates for client as appropriate.	3. Provides clear consultation reports and verbal feedback to consultee and offers appropriate recommendations.	1 2 3 NA
4. Applies literature to provide consultation in routine and complex cases	4. Implements consultation based on assessment findings and meets consultee needs.	1 2 3 NA

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SELF-RATING:

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SELF-REFLECTION:

In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #9: To develop a thorough understanding of ethical practice in the context of professional psychology and to implement such practice.

Training Objective for Competency #9: Practicum students develop ethical decision-making skills, conduct themselves in accordance with the APA "Ethical Principles of Psychologists and Code of Conduct," HIPPA, and uphold their primary ethical obligation to protect the welfare of the client/patient.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency 3 = Exceeds competency	
1. Routine command and application of the APA Ethical Principles and Code of Conduct, HIPPA, and other relevant standards and guidelines in the profession.	1. Reliably identifies complex ethical and legal issues, analyzes and addresses them, and is aware of the obligation to confront ethical dilemmas.	1 2 3 NA
2. Commitment to integration of ethics knowledge into professional work.	2. Applies ethical principles and standards in writings, presentations, teaching, training and research when applicable.	1 2 3 NA
3. Determines when it is appropriate to seek information for an ethical issue.	3. Uses supervision to discuss ethical dilemmas.	1 2 3 NA
4. Independently and consistently integrates ethical and legal standards with all other clinical competencies.	4. Uses all domains of clinical competence to inform ethical/legal decision-making, and uses ethical/legal standards to inform all clinical decisions.	1 2 3 NA

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SELF-REFLECTION:

In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

COMPETENCY #10: TO ADHERE TO PROFESSIONAL DEMEANOR AND INTERACTIONS WITH CLIENTS, PEERS, SUPERVISORS, AND ALLIED PROFESSIONALS.

Training Objective for Competency #10: Practicum students maintain professional appearance, engage in appropriate interactions, and adhere to business practices of psychology (e.g., notes, billing, attendance).

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency 3 = Exceeds competency	
1. Understands and adheres to professional values such as honesty, personal responsibility, and accountability.	1. Proactively adheres to professional values and demonstrates ability to discuss failures and lapses in adherence to professional values with peers and supervisors as appropriate.	1 2 3 NA
2. Maintains professionally appropriate communication and conduct across settings including attire, language and demeanor.	2. Utilizes appropriate language and demeanor in professional setting and understands impact of these behaviors on clients, public, and profession.	1 2 3 NA
3. Adheres to business practices of psychology in a timely manner.	3. Maintains notes, billing, and other documentation.	1 2 3 NA

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SELF-RATING:

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SELF-REFLECTION:

In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #11: To develop and maintain self-care practices.

Training Objective for Competency #11: Practicum students understand the importance of self-care, maintain awareness of self-care practices and stressors, and engage in self-care practice.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency	3 = Exceeds competency
1. Understands the importance of self-care.	1. Demonstrates understanding of self-care across wellness domains.	1 2 3 NA
2. Monitors self-care and sources of stress.	2. Openly communicates with peers, supervisors, and/or appropriate others regarding (1) self-care practices and (2) clinical and other stressors and their impact on clinical work.	1 2 3 NA
3. Engages in self-care practices and intervenes early in response to stressors.	3. Openly communicates with supervisor regarding interruptions to self-care and seeks appropriate feedback.	1 2 3 NA
4. Proactively seeks support for self-care in response to major stressors.	4. Proactively responds to major stressors by seeking support personally and from clinical advisors as appropriate.	1 2 3 NA

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SELF-RATING:

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SELF-REFLECTION:

In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #12: To develop and maintain appropriate clinical responsiveness.
Training Objective for Competency #12*:* A practicum student demonstrates strong relational skills, including empathy, maintenance of therapeutic alliance, goal consensus and collaboration, positive regard, and genuineness. A practicum student also exhibits self-reflection, understands the impact of the clinician on the therapeutic relationship, and responds appropriately to this knowledge.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Develops strong relational skills, including empathy, maintenance of therapeutic alliance, goal consensus and collaboration, positive regard, and genuineness.	1. Exhibits strong relational skills, including empathy, maintenance of therapeutic alliance, goal consensus and collaboration, positive regard, and genuineness.	1 2 3 NA
2. Self-reflects on own emotions, cognitions, behavior, values, strengths, and challenges in the therapeutic context.	2. Discusses relationship between own emotions, cognitions, behavior, values, strengths, and challenges to treatment with supervisor.	1 2 3 NA
3. Monitors the impact of therapist behavior on client, therapeutic relationship, and treatment progress.	3. Discusses the impact of therapist behavior on client, therapeutic relationship, and treatment progress with supervisor and with client, as appropriate.	1 2 3 NA
4. Responds appropriately to knowledge gained from self-reflection and clinical assessment to further therapeutic relationship and treatment progress.	4. In the service of treatment progress and therapeutic relationship, appropriately maintains and modifies style, intervention, and other therapy-relevant behavior in response to supervision, self-reflection, and clinical assessment.	1 2 3 NA

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SELF-RATING:
Please indicate above the degree to which you believe you meet each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will identify some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on your current development as a trainee.
SELF-REFLECTION:
In the space below, please describe your strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Complete sentences and accurate grammar/spelling are discouraged, while honest self-feedback is strongly encouraged!
STRENGTHS:

Competency #2: To incorporate research and theory in clinical practice.
Training Objective for Competency #2: A practicum student can incorporate theory, scientific knowledge, and research when providing evidence-based techniques in clinical practice.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Knowledge of core psychological science.	1. Demonstrates advanced level of scientific knowledge of human behavior.	1 2 3 NA
2. Independently applies scientific knowledge to practice.	2. Discusses theory and research with clinical supervisors and develops treatment plans and intervention strategies based on theory, research and measurable outcomes.	1 2 3 NA
3. Independently pursues continued knowledge of advances in clinical science.	3. Reads and remains up-to-date on relevant clinical research and applies scientific knowledge and skills appropriately and habitually to the solution of problems.	1 2 3 NA

NOTE: Supervisor Evaluations are for training purposes only. They are retained by the Clinic and will be not be shared outside of the student, Clinic Director, individual and vertical team supervisor(s). Please reflect honestly.

RATING:
Please indicate above the degree to which you believe the student meets each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will display some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on the student's current development as a trainee.

REFLECTION:
In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #3: To provide proficient and effective psychological interventions grounded in evidence-based principles.

Training Objective for Competency #3: A practicum student can formulate case conceptualizations, select appropriate interventions, and implement evidence-based treatment strategies in a flexible manner. A student can also effectively conduct oral case presentations regarding intervention.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Applies knowledge of evidence-based practice in treatment and case presentation.	1. Writes clear case notes and summaries grounded in evidence-based practice and provides rationale in notes, supervision, and formal clinical case presentation for intervention strategies utilizing empirical support.	1 2 3 NA
2. Conducts thorough and sensitive initial assessment with attention to functional assessment, treatment goals, and valid measurement.	2. During initial assessment, builds rapport with client, conducts functional assessment, develops treatment goals, and utilizes valid and reliable assessment methods.	1 2 3 NA
3. Engages in independent intervention planning.	3. Independently conceptualizes case and selects appropriate intervention.	1 2 3 NA
4. Applies sound clinical judgment.	4. Uses good judgment in crises, consults with supervisors as needed, and appropriately refers clients to alternative or additional services.	1 2 3 NA
5. Implements effective intervention with fidelity to empirical principles, while being flexible as appropriate.	5. Independently implements a range of appropriate intervention strategies with sensitivity to each individual client's needs and progress.	1 2 3 NA
6. Evaluates treatment progress and modifies treatment plans as indicated.	6. Critically evaluates own clinical work and relevant client outcomes, and adapts treatment when necessary.	1 2 3 NA

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RATING:
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REFLECTION:
In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!
STRENGTHS:
AREAS FOR IMPROVEMENT:

Competency #4: To complete comprehensive psychological assessments and accessible assessment reports.

Training Objective for Competency #4: A practicum student can develop and understand a referral question, choose appropriate, well-validated assessment tools, assess clients in a valid and reliable manner, write clear, useful, and accessible assessment reports, and disseminate assessment findings to appropriate parties.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Independently selects and implements multiple methods and means of evaluation with responsiveness to diversity and context.	1. Demonstrates competent use of appropriate and culturally sensitive instruments, seeks consultation as needed, and acknowledges limitations of assessment data, as reflected in written reports.	1 2 3 NA
2. Independently understands strengths and limitations of diagnostic approaches and interpretation of results from multiple measures.	2. Accurately and consistently selects, administers, scores and interprets assessment tools with appropriate flexibility, such that diagnostic questions are addressed and the report leads to clinical formulation and appropriate treatment plan, while including limitations of measures.	1 2 3 NA
3. Demonstrates knowledge of psychometrics of measures and integrates data effectively from a variety of assessment methods.	3. Accurately reports psychometric properties of assessment instruments, when appropriate.	1 2 3 NA
4. Communicates results in written and verbal form clearly, constructively, and accurately in a conceptually appropriate manner.	4. Writes an effective, comprehensive and conceptually framed report, and effectively communicates results verbally.	1 2 3 NA
5. Demonstrates the ability to base written evaluation on psychological assessment literature.	5. Writes report consistent with guidelines provided in Groth-Marnat (2009), Sattler (2008), and Sattler & Ryan (2009)[1]	1 2 3 NA

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RATING:
Please indicate above the degree to which you believe the student meets each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will display some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on the student's current development as a trainee.

REFLECTION:

In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #5: To practice psychology with sensitivity to diversity matters and diverse individual backgrounds.

Training Objective for Competency #5: Practicum students attend to a broad range of diversity dimensions (e.g., age, gender, gender identity, race, ethnicity, culture, national origin, religion, disability, sexual orientation, language, mental illness, socio-economic status), consider diversity matters when choosing assessment and intervention strategies, and adapt case conceptualization and services based on diversity considerations.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Independently monitors and applies knowledge of self as a cultural being in assessment, treatment, and consultation.	1. Independently articulates, understands, and monitors own cultural identity in relation to work with others, and initiates consultation or supervision when uncertain about diversity issues.	1 2 3 NA
2. Independently monitors and applies knowledge of others as cultural beings in assessment, treatment, and consultation.	2. Independently articulates, understands and monitors other cultural identities in relation to work with others, and initiatives consultation or supervision when uncertain about diversity issues.	1 2 3 NA
3. Integrates diversity dimensions with case conceptualization, treatment plan, and case presentations.	3. Formulates and presents case conceptualizations and treatment plans with respect for and attention to diverse client background.	1 2 3 NA
4. Independently and creatively adapts intervention to match client's background and needs, and considers diversity when selecting evidence-based intervention.	4. Demonstrates adaptation of case formulation and intervention with responsiveness to diversity domains. Critically evaluates representation of diversity in clinical research and therefore appropriately modifies intervention.	1 2 3 NA

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RATING:
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REFLECTION:
In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!
STRENGTHS:

AREAS FOR IMPROVEMENT:

COMPETENCY #6: TO ADVANCE CLINICAL RESEARCH SKILLS AND SCHOLARLY INQUIRY.

Training Objective for Competency #6: Practicum students will develop and build upon their analytic and research skills, while contributing to the clinical research community.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Applies a scientific approach to clinical work.	1. Applies scientific method and knowledge to the monitoring of client progress and outcomes.	1 2 3 NA
2. Participates in clinical research (e.g., clinical data collection).	2. Assists with clinical research efforts within VPS.	1 2 3 NA
3. Integrates clinical knowledge with own research program.	3. Applies clinical experiences and training to own research and dissemination.	1 2 3 NA

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RATING:
Please indicate above the degree to which you believe the student meets each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will display some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on the student's current development as a trainee.

REFLECTION:
In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #7: To gain knowledge regarding theories and methods of supervision and gain direct experience providing supervision.

Training Objective for Competency #7: A practicum student understands models of supervision, and is able to supervise more junior doctoral-level graduate students.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING		
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds			
1. Understands the complexity of the supervisor role, including ethical, legal, and contextual issues.	1. Prepares supervision contract (verbal or written) and demonstrates knowledge of limits of competency, and constructs plans to deal with areas of limited competency.	1 NA	2	3
2. Knowledge of procedures and practices of supervision.	2. Articulates a philosophy or model of supervision and reflects on how this model is applied in practice.	1 NA	2	3
3. Engages in professional reflection about relationship with supervisee, as well as supervisee's clients.	3. Articulates how to use supervisory relationships to enhance development of supervisees and clients.	1 NA	2	3
4. Understands other individuals and groups and intersection of diversity in the context of supervision practice.	4. Demonstrates integration of diversity and multiple identity aspects in conceptualization of supervision with clients, supervisees, and self as supervisor.	1 NA	2	3
5. Gains skills in providing monitored supervision to junior colleagues.	5. Provides supervision to less advanced trainees, with meta-supervision from licensed psychologists, and seeks consultation as needed.	1 NA	2	3

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RATING:
Please indicate above the degree to which you believe the student meets each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will display some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on the student's current development as a trainee.

REFLECTION:
In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT

Competency #8: To gain knowledge regarding theories and methods of consultation and gain direct experience providing and obtaining consultation.

Training Objective for Competency #8: A clinical VPS Practicum Student is able to provide professional assistance and consultation services to others in response to client, family, or community needs. A student also seeks out interdisciplinary consultation as needed.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Appropriately seeks consultation from interdisciplinary providers as needed.	1. Recognizes situations in which consultation is needed (e.g., from educators, psychiatrists, other medical professionals, lawyers, cultural consultants), contacts consulting professionals, and resolves consultation questions.	1 2 3 NA
2. Selects appropriate assessment/data gathering that answers consultation referral question(s).	2. Demonstrates ability to gather necessary information, and clarifies and refines referral questions based on analysis of question.	1 2 3 NA
3. Provides effective assessment feedback, articulates recommendations, and advocates for client as appropriate.	3. Provides clear consultation reports and verbal feedback to consultee and offers appropriate recommendations.	1 2 3 NA
4. Applies literature to provide consultation in routine and complex cases	4. Implements consultation based on assessment findings and meets consultee needs.	1 2 3 NA

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RATING:
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REFLECTION:
In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #9: To develop a thorough understanding of ethical practice in the context of professional psychology and to implement such practice.

Training Objective for Competency #9: Practicum students develop ethical decision-making skills, conduct themselves in accordance with the APA "Ethical Principles of Psychologists and Code of Conduct," and uphold their primary ethical obligation to protect the welfare of the client/patient.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Routine command and application of the APA Ethical Principles and Code of Conduct and other relevant standards and guidelines in the profession.	1. Spontaneously and reliably identifies complex ethical and legal issues, analyzes and addresses them, and is aware of the obligation to confront ethical dilemmas.	1 2 3 NA
2. Commitment to integration of ethics knowledge into professional work.	2. Applies ethical principles and standards in writings, presentations, teaching, training and research when applicable.	1 2 3 NA
3. Determines when it is appropriate to seek information for an ethical issue.	3. Uses supervision to discuss ethical dilemmas.	1 2 3 NA
4. Independently and consistently integrates ethical and legal standards with all foundational and functional competencies.	4. Demonstrates awareness, integrates and understands that ethical-legal standards are informed by all competencies.	1 2 3 NA

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RATING:

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REFLECTION:

In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

COMPETENCY #10: TO ADHERE TO PROFESSIONAL DEMEANOR AND INTERACTIONS WITH CLIENTS, PEERS, SUPERVISORS, AND ALLIED PROFESSIONALS.

Training Objective for Competency #10: Practicum students maintain professional appearance, engage in appropriate interactions, and adhere to business practices of psychology (e.g., notes, billing, attendance).

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Understands and adheres to professional values such as honesty, personal responsibility, and accountability.	1. Proactively adheres to professional values and demonstrates ability to discuss failures and lapses in adherence to professional values with peers and supervisors as appropriate.	1 2 3 NA
2. Maintains professionally appropriate communication and conduct across settings including attire, language and demeanor.	2. Utilizes appropriate language and demeanor in professional setting and understands impact of these behaviors on clients, public, and profession.	1 2 3 NA
3. Adheres to business practices of psychology in a timely manner.	3. Maintains notes, billing, and other documentation.	1 2 3 NA

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RATING:
Please indicate above the degree to which you believe the student meets each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will display some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on the student's current development as a trainee.

REFLECTION:
In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #11: To develop and maintain self-care practices.
Training Objective for Competency #11: Practicum students understand the importance of self-care, maintain awareness of self-care practices and stressors, and engage in self-care practice.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency competency	2 = Meets competency 3 = Exceeds	
1. Understands the importance of self-care.	1. Demonstrates understanding of self-care across wellness domains.	1 2 3 NA
2. Monitors self-care and sources of stress.	2. Openly communicates with peers, supervisors, and/or appropriate others regarding (1) self-care practices and (2) clinical and other stressors and their impact on clinical work.	1 2 3 NA
3. Engages in self-care practices and intervenes early in response to stressors.	3. Openly communicates with supervisor regarding interruptions to self-care and seeks appropriate feedback.	1 2 3 NA
4. Proactively seeks support for self-care in response to major stressors.	4. Proactively responds to major stressors by seeking support personally and from clinical advisors as appropriate.	1 2 3 NA

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RATING:
Please indicate above the degree to which you believe the student meets each benchmark, as demonstrated by each behavioral anchor (1 = Does not meet competency, 2 = Meets competency, 3 = Exceeds competency). It is expected that students will display some areas where they do not yet meet benchmarks, so please take this as an opportunity to reflect on the student's current development as a trainee.

REFLECTION:
In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!
STRENGTHS:

AREAS FOR IMPROVEMENT:

Competency #12: To develop and maintain appropriate clinical responsiveness.

Training Objective for Competency #12: A practicum student demonstrates strong relational skills, including empathy, maintenance of therapeutic alliance, goal consensus and collaboration, positive regard, and genuineness. A practicum student also exhibits self-reflection, understands the impact of the clinician on the therapeutic relationship, and responds appropriately to this knowledge.

BENCHMARKS	BEHAVIORAL ANCHORS	RATING
1 = Does not meet competency	2 = Meets competency	3 = Exceeds competency
1. Develops strong relational skills, including empathy, maintenance of therapeutic alliance, goal consensus and collaboration, positive regard, and genuineness.	1. Exhibits strong relational skills, including empathy, maintenance of therapeutic alliance, goal consensus and collaboration, positive regard, and genuineness.	1　2　3 NA
2. Self-reflects on own emotions, cognitions, behavior, values, strengths, and challenges in the therapeutic context.	2. Discusses relationship between own emotions, cognitions, behavior, values, strengths, and challenges to treatment with supervisor.	1　2　3 NA
3. Monitors the impact of therapist behavior on client, therapeutic relationship, and treatment progress.	3. Discusses the impact of therapist behavior on client, therapeutic relationship, and treatment progress with supervisor and with client, as appropriate.	1　2　3 NA
4. Responds appropriately to knowledge gained from self-reflection and clinical assessment to further therapeutic relationship and treatment progress.	4. In the service of treatment progress and therapeutic relationship, appropriately maintains and modifies style, intervention, and other therapy-relevant behavior in response to supervision, self-reflection, and clinical assessment.	1　2　3 NA

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RATING:

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REFLECTION:

In the space below, please describe the student's strengths and areas for improvement within this competency domain. Please use the benchmarks and behavioral anchors above to guide your reflection. Honest feedback is strongly encouraged!

STRENGTHS:

AREAS FOR IMPROVEMENT:

_____   _____   _____
Student Signature   Supervisor Signature   Date

Teaching Competencies Rating Form

Name of Student:

Date:

Teaching Supervisor:

Evaluation Criteria

PLEASE EVALUATE THE STUDENT USING THE SCALE BELOW. PLEASE CIRCLE THE NUMBER THAT BEST DESCRIBES THE TRAINEE'S COMPETENCE. CONSIDER THE TRAINEE'S LEVEL OF TRAINING (E.G., YEAR IN PROGRAM) WHEN MAKING YOUR RATINGS. EACH ITEM MAY INCLUDE SOME SPECIFIC BEHAVIORAL EXAMPLES OF THE COMPETENCE AREA IN QUESTION, WHICH WHILE NOT AN EXHAUSTIVE LIST, SHOULD PROVIDE GENERAL GUIDELINES TO FACILITATE YOUR RATINGS.

4. Competence is below expectations for level of training. Student's competence may be acceptable at times, but may be inconsistent or her/his skill set is below an acceptable level for her/his year in program. This rating should improve to an acceptable level with further training, remediation, and/or increased student effort.

5. Competence meets expectations for level of training. The student has shown some basic mastery of the competency or skill and is at a level expected for someone at her/his level of training.

6. Competence exceeds expectations level of training.

N. Not applicable. The competency or skill set is not applicable to the student or there was no opportunity to rate/observe.

COMPETENCY AREA	RATING
1. **Valuing teaching** – Student demonstrates behavior that is consistent with generally valuing teaching as a component of their training in professional and scientific psychology. For example, the student completes teaching-related assignments on time, is careful in their work (e.g., written work is free of typographical errors), and takes the initiative on teaching-related duties (e.g., student seeks out opportunities to teach rather than waiting for them to be given to her/him).	⊠ ☐ ☐ ☐ N 1 2 3
2. **Professional interaction** – Interacts appropriately with students who she/he is teaching, other teaching assistants, and professors.	☐ ☐ ☐ ☐ N 1 2 3
3. **Syllabus Design and Development** – Designs and develops a syllabus for a course.	☐ ☐ ☐ ☐ N 1 2 3
4. **Lecture Development** –Develops lectures for a course.	☐ ☐ ☐ ☐ N 1 2 3
5. **Exam Development** – Develops exams for a course.	☐ ☐ ☐ ☐ N 1 2 3
6. **Grading** – Grades exams/papers promptly, provides students with feedback and current standing in class.	☐ ☐ ☐ ☐ N 1 2 3
7. **Responding to Questions** – Responds to questions posed by students and, if necessary, finds answers.	☐ ☐ ☐ ☐ N 1 2 3
8. **Availability** – Sets office hours and responds to student requests within 48 hours.	☐ ☐ ☐ ☐ N 1 2 3
9. **Facilitating Discussion** – Sparks class/lab discussions and keeps them going.	☐ ☐ ☐ ☐ N 1 2 3
10. **Research Integration** – Integrates research into teaching activities, including lectures, readings, and class discussions.	☐ ☐ ☐ ☐ N 1 2 3

Note: Some competencies may only be relevant if selected as part of the Doctoral Portfolio teaching requirements and/or if the student has engaged in formal classroom teaching activities (e.g., teaching one's own course, serving as a Graduate Teaching Assistant, or guest lecturing).

Please comment below on the student's particular strengths in teaching:

Please comment below on any areas of development for the student in teaching (for example, as indicated by ratings of 1 in any area) and recommendations for the clinical program faculty on how this will be remediated:

Involvement in Teaching:

Contributes knowledge to the field: Below, please indicate each activity during the past semester.

# of workshops on teaching:

Served as a TA: ___Yes   ___No

Taught a course: ___Yes ___No

# of guest lectures: ___

Mentored undergraduates in lab: ___Yes   ___No

Took and passed a "Teaching Psychology" course: ___Yes   ___No

_____

_____

Teaching supervisor's signature   Student's signature

The above signatures indicate that the student has read this feedback form and that the supervisor and student have discussed it verbally. The signatures do not necessarily imply total agreement on the student's performance.

General Information Related to Semester Evaluations and Other Forms
Research Evaluation Procedure, Goal-Setting, and Contracts

Preamble: The purpose of research evaluations is for the faculty member and graduate student to provide feedback to each other in a constructive format and in a systematic way across the Clinical Psychology Program. All graduate students should be involved in research every semester. The purposes of involvement in research are: (1) to learn research by doing research; (2) to become competent as a researcher; and (3) to complete, at a very minimum, a high quality second year/Master's Thesis project and a dissertation.

1. Research goals will be developed each semester for each clinical psychology graduate student. Use the Graduate Student-Advisor Expectations Agreement Form. The student will initiate the process by delineating her/his/their goals and then meet with the faculty supervisor to discuss and, if necessary, modify the goals. Both the graduate student and the faculty supervisor will sign the agreement and turn it in to the DCT.

2. At the end of each semester, the faculty member will complete an evaluation form on the graduate student. A meeting will occur between the graduate student and the faculty member in which the following occurs in the order specified:

   a. Use the Competency-Based Research Evaluation form. Goals are reviewed and goals for the upcoming semester developed;

   b. The faculty supervisor reviews the evaluation form she/he completed on the graduate student, both sign indicating they have reviewed the evaluation together, and the form is turned into the Director of Clinical Training.

3. At the end of each semester, the graduate student completes an evaluation form on the faculty supervisor and turns it in to the Director of Clinical Training. The Director of Clinical Training will tabulate the responses across all graduate students working with the faculty member and, as long as at least 3 graduate students complete the evaluation, provide feedback to the faculty member without identifying any individual student.

Graduate Student-Research Advisor Expectations Agreement

Date:_____   Semester & Year: _____

Advisor name:_____   Graduate student name: _____

Student's year in the program:_____   Student's placement: _____

The purpose of the Graduate Student-Advisor Expectations Agreement is to facilitate a productive, open conversation between graduate students and their faculty advisors regarding general expectations for the roles, duties, and goals of both parties.

General Considerations:

1. The purpose of this document is not to create strict or non-negotiable rules for either party. The content of this agreement will likely differ between labs, between students within the same lab, and between programs.

2. As a student progresses through the program, it is likely that their roles and duties will change, and expectations and general guidelines should be discussed and updated as needed. **Upon completion, this document may carry over into additional semesters, pending continued review and revisions as necessary. (This document should still be submitted each semester).**

3. Have non-laboratory related responsibilities that the student has this semester been discussed?

[   ]

Communication:

1. How often is the **student** expected to check and respond to emails during work hours? **2x/day**[ ] **1x/day**[ ] **other:**

[   ]

2. How often is the **advisor** expected to check and respond to emails during work hours? **2x/day**[ ] **1x/day**[ ] **other:**

[   ]

3. How often is the **student** expected to check/respond to emails on weekends and outside of work hours? **2x/day**[ ] **1x/day**[ ] **other:**

[   ]

4. How often is the **advisor** expected to check/respond to emails on weekends? **2x/day** ☐ **1x/day** ☐ **other:**

5. What is the minimum frequency with which the student and advisor will meet individually? (excluding lab meetings).

6. Is texting (and other forms of communication) an acceptable way to contact the graduate student or advisor? ? **Y** ☐ **N**

Are there any stipulations (e.g., business hours only, before/after a time of day, etc.)?

7.

Does the advisor and/or student have planned absences or anticipated scheduling conflicts this semester/year?

Is there an expectation to reschedule all missed meetings/lab time? ? **Y** ☐ **N** ☐

8. How should unplanned absences (such as illness) be communicated between student and advisor?

9. Are there any communication goals that the advisor and/or student would like to see improved on? ? **Y** ☐ **N** ☐

10. When and how will the advisor provide feedback to the student?

11. When and how will the student provide feedback to the advisor?

[ ]

12. How long should the advisor expect for completion of assignments from the student (such as drafts, proposals, and data analysis)?

[ ]

13. How long should the student expect to wait for feedback on such assignments?

[ ]

Lab-Related Duties

1. What are the graduate students' responsibilities in the lab?

[ ]

2. Approximately how many hours a week is the student expected to spend on lab-related tasks (including lab meetings)?

[ ]

3. Is the graduate student expected to be on site/in the building for specified hours?? **Y** ☐ **N** ☐

4. What are the expectations of the **student** regarding undergraduate RA training/supervision/project completion?

5. What are the expectations of the **advisor** regarding undergraduate RA training/supervision/project completion?

6. What roles will the student and advisor play in drafting/revising/submitting IRB/IACUC-related paperwork and other administrative tasks?

7. How often will lab meetings occur? What is the graduate student's role in these meetings?

[ ]

Career/Professional Development

1. How do students gain authorship on lab manuscripts, publications, and/or presentations? **[open field]**

[ ]

2. What is the minimum frequency that the student is expected to present at research conferences? Are there funding opportunities through the lab?

[ ]

3. Is the student looking for any teaching opportunities in the near future? **Y** [ ] **N** [ ]

In what ways could the advisor help facilitate this (e.g., guest lecture in a course the advisor is teaching, create a syllabus for undergrads in

[ ]

the lab)?

4. How could the advisor support networking opportunities or professional development for the student?

[ ]

5. Will the student be funded for the summer through the lab? ? **Y** [ ] **N** [ ]

6. Is the student expected to attend department colloquia? **Y** [ ] **N** [ ]

Graduate Student Goals:

Faculty Member's Goals for Graduate Student:

<u>Milestones</u>

Please give month and year that each milestone was completed, or is anticipated to be completed.

1. Master's Thesis Proposal Approved: _____

2. Master's Thesis Completed and Defended: _____

3. Comprehensive Exam/Prelim Completed: _

4. Dissertation Proposal Approved: _____

5. Dissertation Completed and Defended: _____

6. Teaching Requirements Fulfilled (please also specify how it was fulfilled): _____

Student Signature: Faculty Signature:

Date: Date:

Graduate Student Evaluation of Faculty Research Mentor

Name_____   (Check one)   Mid-Year_____
                                                                 End-of-Year_____

Research Mentor___ _____

Were Research Goals Set?   _____ Yes
                           _____ No

1. Were your research goals met?   _____ Yes   _____ No

2. What do you like about your research experience and supervision?

3. What do you not like about your research experience and supervision?

4. What are some changes which would improve your research experience and supervision (mid-year only)?

Please complete this form on the primary faculty member with whom you are doing research and leave in the Director of Clinical Training's box by _____.

Responses will be tabulated for all graduate students working with a faculty member and provided to the faculty member without identification of individual students.

Clinical Evaluations Procedure and Goal-Setting

Preamble: The purpose of clinical evaluations is for the supervisor and graduate student to provide feedback to each other in a constructive format and in a systematic way across the Clinical Psychology Program. The purposes of involvement in clinical work are: (1) to learn clinical skills by engaging in clinical work; (2) to become competent as a clinician; and (3) to offer services to clients.

1. Clinical placements are typically for 12 months. Clinical goals should be developed jointly by the graduate student and supervisor each six months. The goals should be signed by both the graduate student and faculty member and each should retain a copy of the goals.

2. Each semester, the supervisor will complete an evaluation form on the graduate student. A meeting will occur between the graduate student and the supervisor in which the following occurs:

    a. Use the Clinical Competency-Based evaluation form. Goals are reviewed and goals for the upcoming semester developed;

    b. The faculty supervisor reviews the evaluation form she (he) completed on the graduate student, both sign indicating they have reviewed the evaluation together, and the form is turned into the Director of Clinical Training.

3. Each semester, the graduate student completes an evaluation form on the faculty supervisor and turns it into the Director of Clinical Training. The Director of Clinical Training can choose to give feedback to the faculty member as long as anonymity of the student is maintained.

Clinical Goals and Expectations

Graduate Student Name:_____ Semester & Year:_____

Faculty Member Name:_____

Graduate Student Goals:

Faculty Member's Goals for Graduate Student:

Graduate Student Expectations of Faculty Member:

Faculty Member Expectations of Graduate Student:

Signatures:_____ and _____

Date:_____

Evaluation of Clinical Supervisor by Graduate Student
(Turn in to Director of Clinical Training)

Supervisor:_____   Intern:_____

Date: _____   (Check one) Mid-Year_____ or Final_____

Performance Ratings: 1 – poor; 2 – fair; 3 – average; 4 – very good; 5 – excellent
For Ratings of 1 or 2, please indicate how you attempted to address the issue with your supervisor.

Knowledge/skill base:

__ Knowledge in relevant areas
__ Has relevant clinical experience

Comments:

Rating:_____

Professionalism:

__ Maintains and models professional demeanor
__ Demonstrates an interest in and commitment to optimal clinical service
__ Models awareness of ethical issues
__ Maintains appropriate interpersonal distance

Comments:

Rating:_____

Supervision:

__ Interested in intern's professional development
__ Understands intern's professional goals
__ Helps intern develop own style
__ Has clear goals and expectations for intern's development
__ Promotes autonomy
__ Varies style
__ Gives regular, honest feedback

Comments:

Rating:_____

Teaching:

__ Imparts basic fund of knowledge
__ Teaches technical skills and psychotherapy skills
__ Brings together assessment and treatment
__ Promotes case/diagnostic formulation
__ Serves as clinical model

Comments:

Rating:_____

Interpersonal:

__ Available
__ Approachable
__ Supportive
__ Respectful when offering criticism

Comments:

Rating:_____

Overall, what is your rating of your supervisor/instructor　　　**Rating_____**

Overall, what is your rating of your practicum course?　　　**Rating_____**

Teaching Evaluations Procedure, Goal-Setting, and Contracts

Preamble: The purpose of teaching evaluations is for the supervisor and graduate student to provide feedback to each other in a constructive format and in a systematic way across the Clinical Psychology Program. The purposes of involvement in teaching are: (1) to learn teaching skills by engaging in teaching; (2) to become competent as a teaching; and (3) to provide knowledge to students.

1. Teaching placements are for 12 months (the 9-month academic year, plus an assignment to assist with teaching over the summer). Teaching goals should be developed jointly by the graduate student and supervisor each semester. Use the Supervisor-GTA Contract form, which is disseminated to GTA-funded students and faculty supervisors at the start of each semester. The contract should be signed by both the graduate student and faculty member and submitted to the DCT.

2. At the end of each semester, the supervisor will complete an evaluation form on the graduate student. A meeting will occur between the graduate student and the supervisor in which the following occurs:

    a. Goals are reviewed and goals for the upcoming semester developed;

    b. The faculty supervisor reviews the evaluation form she/he/they completed on the graduate student, both sign indicating they have reviewed the evaluation together, and the form is turned into the Director of Clinical Training.

3. At the end of each semester, the graduate student completes an evaluation form on the faculty supervisor and turns it into the Director of Clinical Training. The Director of Clinical Training can choose to give feedback to the faculty member as long as anonymity of the student is maintained.

Please Note: Teaching placements with faculty supervisors who are outside the Clinical Psychology program may be evaluated by other instruments or in other ways.

<div align="center">**Supervisor-GTA Contract**</div>

Course: Click or tap here to enter text.
Semester: Click or tap here to enter text.
Instructor(s): Click or tap here to enter text.
Graduate Teaching Assistant(s): Click or tap here to enter text.

Preamble: The goal of this form is to facilitate communication between supervisors and graduate teaching assistants (TAs) in the Department of Psychological Science.

General Guidelines

1. Prior to the start of the semester, the faculty member and graduate TA should meet to discuss the expectations outlined in this form and revise as needed. Discussion should also address issues related to specific semester schedules, including what times during the semester the TA and/or supervisor will be out of town or otherwise unavailable as well as which weeks the TA can expect to have a higher workload (e.g., after a writing assignment is due).

2. Faculty are encouraged to review the duties assigned by other professors who teach the same course, as well as other courses with graduate TAs to gain a sense of reasonable expectations for a graduate TA. Faculty should keep in mind that tasks will likely take a TA longer to complete than it would take to do it themselves when assigning duties. Faculty should be thoughtful about what duties are appropriate to ask TAs to complete, and for higher-level requirements (e.g., exam preparation; giving lectures; developing grading rubrics; running lab sections) should be sure to provide adequate scaffolding and support, such as examples (e.g., test bank access; prior exam questions or rubrics) and opportunities to discuss questions.

3. If duties need to be changed due to course needs or special circumstances, changes must be discussed together as soon as the faculty member or graduate TA anticipates them. The time needed to implement any changes should be negotiated between the TA and faculty member; faculty should generally take responsibility for dealing with workload increases due to any last-minute changes.

4. For written assignments, faculty supervisors are expected to develop grading rubrics. This can be done collaboratively with the TA, if desired, but faculty should at a minimum review and approve grading rubrics, and be available to address questions during grading. Faculty are encouraged to use Blackboard for student submission of written assignments and to use Blackboard rubrics to increase grading efficiency. Faculty should also plan to norm grading with TAs (e.g., grade the first few assignments together and discuss how to make grading decisions).

5. Faculty should regularly check in with their TAs regarding issues surrounding workload, particularly during relatively high workload weeks (e.g., grading a written assignment). TAs should keep track of their hours and let the faculty supervisor know if they are going over an average of 20 hours per week. Due to the nature of managing a large enrollment course, it is likely that TAs will go over their hours some weeks. However, if TAs are averaging more than 20 hours per week across the semester, or have weeks that greatly exceed 20 hours of work (e.g., more than 25 hours) in a given week, please speak with the faculty supervisor, Program Director, or Department Chair as soon as possible so that the issue can be addressed.

6. If either the professor or the TA have concerns about this agreement, or either party is not fulfilling their responsibilities as outlined here, they can either set up a time with their supervisor, the Department Chair, or their Program Director to meet to discuss these concerns. These meetings should be scheduled as soon as possible. The Program Directors and Department Chair are committed to addressing concerns in a timely manner.

Faculty: please answer the following questions regarding course expectations:

1. How should TAs access emails related to this class? Please check all that apply: ☐Class email address; ☐Personal email address; ☐other: Click or tap here to enter text.

2. How frequently do you expect the graduate TA to check and respond to class-related emails during the workweek? ☐2x a day; ☐1x a day; ☐ other: Click or tap here to enter text.

3. How frequently do you expect the graduate TA to check and respond to class-related emails over the weekend? ☐ weekend email is not expected; ☐1x on the weekend; ☐2x or more on the weekend, ☐with justification for why this frequency is necessary: Click or tap here to enter text.

4. How frequently can the graduate TAs expect YOU to check and respond to class-related emails during the workweek? ☐2x a day; ☐1x a day; ☐other (if less than once a day, please justify why): Click or tap here to enter text.

5. How frequently can the graduate TAs expect YOU to check and respond to class-related emails over the weekend? ☐weekend email is not expected; ☐1x on the weekend; ☐2x or more on the weekend; ☐, with justification for why this frequency is necessary: Click or tap here to enter text.

6. In case of issues or concerns that require immediate attention (e.g., a student in crisis), how should the graduate TA get in contact with the faculty supervisor? Click or tap here to enter text.

7. Will you have a regularly scheduled meeting reserved for your graduate TA to discuss course progress as needed? ☐Yes ☐No
   a. If yes, how often will you reserve time to meet with your graduate TA? Once every Click or tap here to enter text. days
   b. If no, what mechanism will be in place for discussions regarding course-related issues that cannot be managed via email? Click or tap here to enter text.

8. Will there be any undergraduate TAs for this course? ☐Yes ☐No (IF YES: have undergrad TA column below and supervision section)
   a. If yes, how many? ☐TBD, ☐1, ☐2, ☐3, ☐4, ☐other: Click or tap here to enter text.
   b. If TBD, when will this be decided? Click or tap here to enter text.

9. Will there be writing assignments for this course? ☐Yes ☐No
   a. If yes, how many? Click or tap here to enter text.
   b. Please detail the length of each assignment: Click or tap here to enter text.
   c. Are students restricted to this length? ☐Yes ☐No
      i. If yes, how? Check all that apply: ☐docked points for going over, but still graded; ☐TA allowed to stop reading after a certain page; ☐other: Click or tap here to enter text.
   d. Anticipated enrollment for this course: Click or tap here to enter text.
   e. How long do you anticipate grading each assignment to take? Click or tap here to enter text.
   f. What support is provided to assist new TAs in developing good grading strategies? Check all that apply: ☐rubrics, sample answers; ☐ norming meetings, faculty availability to address grading questions; ☐other: Click or tap here to enter text.
   g. What turnaround time do you expect for grading? Click or tap here to enter text. days

10. Is the graduate TA expected to attend class? ☐Yes ☐No

a. If yes, how often? Click or tap here to enter text.
11. How many hours per week are each of the following expected/contracted to spend on the course?
    a. Professor: = Click or tap here to enter text. hours/week
    b. Graduate TA = Click or tap here to enter text. hours/week
    c. Undergrad TAs = Click or tap here to enter text. hours/week

Below, the **faculty supervisor** should check who he/she anticipates will be responsible for each of the following tasks related to your course.

	Professor	Grad TA(s)	Undergrad TA(s)	Not Applicable
Developing Course Materials				
Lectures	☐	☐	☐	☐
Exams	☐	☐	☐	☐
Homework assignments	☐	☐	☐	☐
Study Guides	☐	☐	☐	☐
Grading Rubrics	☐	☐	☐	☐
Creating multiple versions of multiple choice exams	☐	☐	☐	☐
Other course material tasks: Click or tap here to enter text.	☐	☐	☐	☐
Lab Sections				
Running lab sections	☐	☐	☐	☐
Grading lab activities	☐	☐	☐	☐
Developing lab lectures, activities, and assignments	☐	☐	☐	☐
Other lab tasks: Click or tap here to enter text.	☐	☐	☐	☐
Grading and Grade Management				
Grading exam essays/short answer questions	☐	☐	☐	☐
Grading homework assignments	☐	☐	☐	☐
Scantron/Akindi Management	☐	☐	☐	☐
Responding to Grade Disputes	☐	☐	☐	☐
Management of iClicker points	☐	☐	☐	☐
Other grading tasks: Click or tap here to enter text.	☐	☐	☐	☐
Supervision				
Train undergraduate TA(s)	☐	☐	☐	☐
Grade undergraduate TA academic products	☐	☐	☐	☐
Other supervision: Click or tap here to enter text.	☐	☐	☐	☐
In-Class Management				
Delivering Lectures	☐	☐	☐	☐
Bring extra iClickers to class daily; register loaners for students	☐	☐	☐	☐

Sit randomly throughout the room and monitor laptop use and student behavior	☐	☐	☐	☐

Exam days: bring exam materials (e.g., exams, scantron/Akindi forms; pencils)	☐	☐	☐	☐
Exam days: proctor exams; answer student questions related to exams	☐	☐	☐	☐
Other in-class management tasks: Click or tap here to enter text.	☐	☐	☐	☐
Meeting with Students				
Holding regular office hours	☐	☐	☐	☐
By appointment meetings with students	☐	☐	☐	☐
Running review sessions prior to exams	☐	☐	☐	☐
Questions about Grading	☐	☐	☐	☐
Questions about Course Material	☐	☐	☐	☐
Questions about how to improve course performance	☐	☐	☐	☐
Go over exams with students	☐	☐	☐	☐
Make-up Exam Administration	☐	☐	☐	☐
Special Requests or Circumstances (e.g. extensions)	☐	☐	☐	☐
Other: Click or tap here to enter text.	☐	☐	☐	☐
Responding to Emails from Students				
Questions about missing class	☐	☐	☐	☐
Questions about special circumstances/extensions	☐	☐	☐	☐
Questions about course material	☐	☐	☐	☐
Other: Click or tap here to enter text.	☐	☐	☐	☐
Blackboard				
Posting Lecture Notes	☐	☐	☐	☐
Posting Study Guides	☐	☐	☐	☐
Posting Grades and Managing Gradebook	☐	☐	☐	☐
Setting up Blackboard Assignments/Tests	☐	☐	☐	☐
Other Blackboard tasks: Click or tap here to enter text.	☐	☐	☐	☐
Photocopying				
Syllabus, Exams	☐	☐	☐	☐
Other: Click or tap here to enter text.	☐	☐	☐	☐
Student Accessibility Services (SAS) Management				
Corresponding with students regarding accommodation implementation	☐	☐	☐	☐
Confirming receipt of SAS letters	☐	☐	☐	☐

Making determinations about accommodation requests and communicating these decisions to students	☐	☐	☐	☐
Emailing SAS exams to EPC at least 24 hours before exam	☐	☐	☐	☐
Serve as a class notetaker	☐	☐	☐	☐
Other: Click or tap here to enter text.	☐	☐	☐	☐
Student Athlete Management				
Collect, scan, and file letters	☐	☐	☐	☐
Submit athlete progress reports	☐	☐	☐	☐
Reschedule and give exams as needed	☐	☐	☐	☐
Other: Click or tap here to enter text.	☐	☐	☐	☐

Other duties or comments not specified above:
Click or tap here to enter text.

Faculty Member: What goals do you have to advance the graduate TA's training as a teacher? Click or tap here to enter text.

Graduate TA: What goals do you have to advance your training as a teacher? Click or tap here to enter text.

Signatures: Date:

Graduate Student Evaluation of Faculty Supervisor for Teaching Assistant

Name_____   (Check one)   Mid-Year_____
                                                                End-of-Year_____

TA Supervisor_____

Were Research Goals Set?   _____ Yes
                           _____ No

1. Were your teaching goals met?   _____ Yes   _____ No

2. What do you like about your teaching experience and supervision?

3. What do you not like about your teaching experience and supervision?

4. What are some changes which would improve your teaching experience and supervision (mid-year only)?

Please complete this form on the primary faculty member with whom you are doing research and leave in the Director of Clinical Training's box by _____.

Responses will be tabulated for all graduate students working with a faculty member and provided to the faculty member without identification of individual students.

Guidelines for the Pay Structure for Graduate Students in the VPS

First-year students: Learning experience – no pay.

Second-year students: Learning experience – no pay.

Third-year and fourth-year students: Typically one-half (10-hours/week) placement in VPS for
standard

placement pay.

Fifth-year students: Typically receive 50% of client-generated fees if mentor
approves the work.

Clinical Program Policy on Advanced Students Working 50/50 in the VPS Clinic

As a reminder, if you are a student in Year 5 or beyond, you need to obtain your research mentor's permission do any work over-time (beyond your regular placement) on the 50/50 arrangement in the Clinic, whereby you typically get to keep 50% of the revenue you generate. Your mentor must let both the Director of Clinical Training and the Clinic Director know if he/she approves this extra clinical work and how much of it is permitted. The reason we ask for mentor approval is because this is EXTRA work (beyond the 20-hours/week placement allowed by the Graduate College), and we want to ensure that the student stays on track with academic milestones, particularly dissertation progress. Students who gain approval for 50/50 work must submit the Additional Work Application to the Graduate College to proceed with the work.

Clinical Program Policy on Students doing External Clinical Practicum Placements

Students who are fully funded (for 20-hours/week) on an external clinical practicum placement (e.g., at Champlain Valley Physicians Hospital; CVPH) should not concurrently be seeing any clients in our training clinic (Vermont Psychological Services). The rationale for this is the external placement is a full-time clinical placement, and students should not be doing extra clinical work on top of it (beyond the 20-hours/week placement allowed by the Graduate College). We want to ensure that the student stays on track with academic milestones, particularly the comprehensive exam, completing the doctoral portfolio, and making dissertation progress. Once a student is assigned to an external practicum placement, they should work with the VPS Director and their immediate supervisor to transfer cases to other clinicians as quickly and efficiently as possible, so that arrangement is in place by the time they start the new placement.

Tuition and Student Health Insurance Information for Funded Graduate Students in Psychology

Graduate Student Tuition

Graduate students are charged tuition based upon their residency, in-state or out-of-state, and credit hour enrollment. Residency for tuition purposes is determined by the Residency Officer. The residency regulations are outlined in the online Graduate Catalog and are also available from the Office of the Registrar. Questions may be directed to the Residency Officer at 802-656-8515.

Receipt of a fellowship, traineeship, assistantship or other award in most cases it will provide tuition remission benefits, as outlined below for various types of awards.

Graduate Teaching Assistants

Full Graduate Teaching Assistants (20-hours/week appointments with a stipend at the Graduate College minimum or more/9 months) receive a tuition scholarship from the College of Arts and Sciences covering a maximum of 12 credit hours per semester during the term of the GTA appointment. If you decide to take more than 12 credits in a semester, you will pay for any additional credits out-of-pocket at the in-state tuition rate (even if your residency is out-of-state). Students funded as Graduate Teaching Assistants can also take up to 5 credits during the summer term, which can be used for Master's Thesis or Dissertation Research credits.

Graduate Research Assistants

Clinical program graduate students funded as Graduate Research Assistants (20-hours/week appointments at the Graduate College minimum or more for 9 months or 12 months) may take up to 12 credit hours per semester during the term of the GRA appointment. If you decide to take more than 12 credits in a semester, you will pay for any additional credits out-of-pocket at the in-state tuition rate (even if your residency is out-of-state). Students funded as Graduate Research Assistants can also take up to 5 credits during the summer term, which can be used for Master's Thesis or Dissertation Research credits.

Student Health Insurance

All funded students with an annual stipend of at least the Graduate College minimum for 9 months or 12 months are eligible to have the University pay 100% of the single UVM student health insurance premium. This is an increase (UVM used to cover 75% of the premium) and saves each graduate assistant enrolled in the plan over $700 annually. The health insurance premium is resourced through a fringe benefit rate on the stipend. This benefit rate is charged to the same budget (general fund, grant or gift, etc.) that pays the stipend. To receive this premium support, students must enroll in the Student Health Insurance Plan through the Center for Health and Wellbeing. You must enroll annually to receive premium support.

Fellowships, Traineeships, NRSA Awards

The details of the specific traineeship or fellowship grant will dictate how tuition is paid. These awards are handled differently than GRAs and GTAs because the fellow/trainee is considered an employee of the granting agency (such as NIH), not of UVM. If you are funded on a training grant, you will need to find out the specifics of the stipend level and financial aid package (e.g., tuition remission per semester, whether it covers a portion of the student health insurance premium) from the Principal Investigator on the grant. If you are funded on a National Research Service Award (NRSA), you will need to work with UVM's Sponsored Programs Office to set up your project budget in accord with current standards. There are times that the grant may not be finalized prior to tuition becoming due. In such cases, close communication with the Graduate College and Student Financial Services can often save students from late fees.

If you came to the State of Vermont to go to graduate school (that is, did not work in the State for one year preceding enrolling in graduate school), NRSAs may have tuition rates at the out-of-state rate. On the other hand, if you are a resident of the State of Vermont and have worked for a year preceding graduate school, then you are considered in-state and the NRSA pays tuition at the in-state rate. The Registrar's office determines your residency status upon your application to the program, and tuition is charged accordingly.

The University of Vermont

02/08/2021

Graduate College Forms and Policies

The Graduate College has its own policies and procedures that are beyond the scope of this clinical program-specific binder. Please visit the Graduate College's "General Forms and Policies" page for details:

https://www.uvm.edu/graduate/resources

There, you will find lots of important information, such as the final deadlines to be an August, October, January, or May graduate (e.g., deadlines for submitting the intent to graduate form, your format/record check, oral defense, and submitting your final dissertation to the Graduate College). These due dates change slightly each year. Last day of internship is also relevant for August and October graduation.

You will also find important forms, including the Intent to Graduate form, and the Electronic Thesis and Dissertation Guidelines.

Degrees are conferred in January, May, August, and October of every year. However, once you have met all of your program requirements and have turned in an acceptable dissertation, we can write a letter to a future employer or post doc entity confirming that you have met all the requirements and will be receiving your degree (if that helps).

Clinical Students: Graduate College Rules

1. Full-time graduate student status is 9 credit hours for each semester.

2. Funded students must be enrolled for at least 9 credits/semester.

3. If a student has completed enrollment in all course and research credits, but hasn't yet completed all degree requirements such as dissertation defense/internship (or a course that is not yet offered), the student should register for GRAD 9010 (1-4 credits), GRAD 9020 (5-8 credits), or Grad 9030 (9 credits) to reach the required number of credits and pay the associated continuous registration fee ($100 for 9010, $200 for 9020, and $300 for 9030).

Credits Needed	Course #	Fee
1-4	9010	$100
5-8	9020	$200
9-12	9030	$300

4. For example: <u>If you are taking 0-4 hours of classes in a semester and are funded</u>: You must enroll for 9 or more credits. Only students in Year 3 or beyond would possibly be in this situation, and you will need one credit of 6220 Practicum and one credit of 6200 Full Practicum Sequence (if you are still seeing clients), then you should take any remaining 7491 Dissertation credits, and fill in the rest with GRAD 9010/9020/9030 to reach 9 total.

5. While on internship, sign up for PSYS 6991 (0 credits) <u>both</u> semesters and, if you need to defer payment on any student loans, you will probably also need to register for 5 credits of GRAD 9020 so you can maintain half-time status. Federal regulations usually require 5 credits (half-time status) to defer loan repayment, even during internship. However, we recommend that you ask Student Financial Services (SFS) how many credits/semester you need to be enrolled in for your particular loans not to go into repayment based on federal regulations.

6. Is it necessary to sign up for GRAD 9010, 9020, or 9030 in summer if you are not taking any course credit hours?

   YES – FICA comes out of your paycheck if you are not registered for at least 5 credits during the summer. So, you can pay FICA in June, July, and August or take GRAD 9020 ($200 fee) or take five (5) 7491 Dissertation credits if you have not reached 20 total yet. Note: International Students should always clarify their summer registration requirements with the Office of International Education.

Procedures and Criteria for Doctoral Clinical Students Walking in May Commencement

Effective 3/16/2016

Clinical Psychology students who have completed <u>all</u> other program requirements* for the Ph.D. except for completion of the internship, will be permitted to walk in the May graduation ceremony on the following conditions:

- Internship is to be completed prior to August 24th of the same year.
- Students receive an Incomplete for the second semester of Internship, which will be changed to passing upon successful completion.
- Students may not register for any credits or continuous registration in the summer in which they are completing the internship following walking in the ceremony.
- Student names will not be printed in the commencement booklet as they will officially be August graduates.
- If the internship is not completed, students will not graduate.

*Requirements include a successful dissertation defense and uploading a final revised copy of the dissertation to ProQuest and Graduate College approval of that submission by the published deadline of the Graduate College for the May graduation date that term.