# GRADUATE HANDBOOK

**PURDUE UNIVERSITY CLINICAL PSYCHOLOGY PROGRAM**

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>II. A BRIEF HISTORY OF THE CLINICAL PSYCHOLOGY PROGRAM IN THE DEPARTMENT OF PSYCHOLOGICAL SCIENCES</td>
<td>1</td>
</tr>
<tr>
<td>III. DESCRIPTION OF THE CLINICAL PSYCHOLOGY PROGRAM</td>
<td>2</td>
</tr>
<tr>
<td>IV. CLINICAL PSYCHOLOGY PROGRAM REQUIREMENTS</td>
<td>3</td>
</tr>
<tr>
<td>V. PROGRESSION THROUGH THE PROGRAM</td>
<td>9</td>
</tr>
<tr>
<td>VI. STUDENT EVALUATION PROCEDURES</td>
<td>14</td>
</tr>
<tr>
<td>VII. ACCREDITATION BODY</td>
<td>17</td>
</tr>
</tbody>
</table>

## APPENDICES

<table>
<thead>
<tr>
<th>Appendix A: Outline of Recommended Course Sequence</th>
<th>18</th>
</tr>
</thead>
<tbody>
<tr>
<td>APPENDIX B: Elective Courses That Students Should Consider</td>
<td>21</td>
</tr>
<tr>
<td>APPENDIX C: Additional forms relevant to the Clinical Program</td>
<td>22</td>
</tr>
<tr>
<td>Semester Activity Report</td>
<td>23</td>
</tr>
<tr>
<td>Course Equivalency Sheet</td>
<td>25</td>
</tr>
<tr>
<td>Faculty and Student Schedule</td>
<td>26</td>
</tr>
<tr>
<td>APPENDIX D: Example of a Contract for Outside Practica</td>
<td>27</td>
</tr>
<tr>
<td>APPENDIX E: Example of a Contract for Special On-campus Practica</td>
<td>28</td>
</tr>
<tr>
<td>APPENDIX F: A Sampling of Potential External Practicum Sites</td>
<td>29</td>
</tr>
<tr>
<td>APPENDIX G: Summary Evaluation of Practicum Performance</td>
<td>30</td>
</tr>
</tbody>
</table>

Contact information for the APA Committee on Accreditation             | 33   |

**Acknowledgements.** The previous draft of this handbook was put together in 1996 by a student committee consisting of Peter MacLean (chair), David Christoffersen, Amy Franklin, Teresa Mok, and Jason Robinson, under the direction of Professor Judy Conger. The word processing was done by Paula Kerkhove and Linda Newman. Updates were undertaken in 2002, 2003, and 2005 with substantial work by graduate student Rebecca Stump, and again in 2006, with clerical assistance from Dianna Batta, contributions from Professor Emeritus Clifford Swensen, and the direction of Professor David Rollock. The 2013 version was prepared by Professor Don Lynam in his role as DCT in order to reflect recent changes in the program.
I. INTRODUCTION (and where to find other basic resources!)

This handbook is designed to guide and facilitate your progress through the Clinical Psychology Program. It is a mixture of official policies, recommendations for making your life easier, and the accumulated wisdom of students and faculty. Other available resources for you are the *Graduate Handbook* [http://www.purdue.edu/hhs/psy/graduate/current_students/documents/WebPageVersionnew.pdf](http://www.purdue.edu/hhs/psy/graduate/current_students/documents/WebPageVersionnew.pdf) as well as primary Graduate School resources (regarding diversity, financial assistance, course information, and ombudsman/dispute resolution services, among others) available online [http://www.gradschool.purdue.edu/](http://www.gradschool.purdue.edu/). In addition, the University’s non-discrimination policies and related concerns (including equal opportunity and anti-harassment matters) are available online from the Office of the Vice President for Ethics and Compliance [http://www.purdue.edu/ethics/](http://www.purdue.edu/ethics/). The Clinical Area also has compiled a *Clinician Handbook* describing policies and procedures for the Purdue Psychology Treatment and Research Clinics. As a student in the Program, you are responsible for knowing the relevant policies and procedures from these sources and acting in accordance with them. Although many of these rules will not affect your everyday life, it is in your interest to read carefully through these materials, know the important points, keep them around for later reference, and obtain updates provided at the start of each year (or as announced at other times by the Department or the Clinical Program).

Policies change to respond to new challenges and needs. In most cases, policy changes will be instituted gradually, giving students already in the Program a choice to follow the old or the new policy. Less frequently, policy changes will be immediate. Students should attend to the timetables that accompany announced policy changes.

**Communications.** You sometimes will get memos, letters, or email that also contain information you will need to know and, if necessary, respond to. These communications will appear in your mailbox in the Clinical area, the Department lounge, or in your departmental email inbox. Students taking practicum will have another mailbox in the Clinic file room where confidential client information may be delivered and exchanged. In order to keep up-to-date, you should check all of these locations regularly.

II. A BRIEF HISTORY OF THE CLINICAL PSYCHOLOGY PROGRAM IN THE DEPARTMENT OF PSYCHOLOGICAL SCIENCES

Although Purdue University has been known as a natural science, engineering, technology, and agricultural university since its foundation as a land grant institution in 1869, the Clinical Psychology Program dates its history from the very beginnings of the subdiscipline of clinical psychology. In 1935, the American Psychological Association (APA) recommended that clinical psychologists receive specialty training. In 1948, the Clinical Psychology Program at Purdue University was accredited by the APA in its very first wave of visiting and evaluating doctoral training facilities in clinical psychology. Purdue’s Program thus antedates by more than a year the ground-breaking Boulder Conference on Graduate Education in Clinical Psychology of 1949, which concluded that a “scientist-practitioner” model be used to guide such training. Our Doctoral Program in Clinical Psychology has been accredited continuously by APA since 1948.

Clinical psychology at Purdue had its formal beginning as a program in 1946 with the appointment of John M. Hadley as an assistant professor and the first director of the clinical psychology program. (There is a slight dispute about this because E. Lowell Kelly, who was officially on the faculty roster until 1945, lists himself as being the first director of the Program in the APA Directory for 1968.) Hadley had been on the faculty at Utah State University until 1942 when he entered the Navy aviation program at Pensacola, Florida. He actually received his Ph.D. from the University of Iowa in 1949.
Beginning a clinical psychology program at Purdue was unique in several respects. Unlike the other programs accredited at the time, Purdue’s was the first not affiliated with a medical school. In fact, Purdue did not even have a psychology department. Psychology was a part of a Division of Education and Applied Psychology, which was located in the School of Science. A separate psychology department was not established until 1954. Finally, Purdue did not have an undergraduate major in psychology. An undergraduate major in psychology was not officially established until 1950. In spite of these unusual aspects, APA accredited the program on February 26, 1948.

The Purdue Psychology Department remained essentially a graduate department of Applied Psychology until the late 1960s. Clinical psychology and industrial psychology provided almost 200 graduate students. The undergraduate program did not count more than 30 to 40 undergraduate majors.

The Clinical Psychology Program rapidly became one of the largest in the U.S. (or world, for that matter), obtaining financial support for 96 graduate students. This support came from the Veterans Administration, the U.S. Public Health Service, and the Indiana Department of Mental Health. Typically, the Program had over 80 graduate students enrolled at any given time. The Program remained quite large until the 1980s.

At the beginning, and for many years thereafter, a formal one year predoctoral internship was not typical. Rather, students had to earn a certain number of supervised clinical hours prior to receiving the Ph.D. For most students, this approximated 3800 hours of supervised experience. Also, the only accreditation was of the university clinical training program itself. It was assumed that if the university’s program was accredited, then any clinical experience the university accepted was satisfactory. Students worked part time at a wide variety of facilities in the region. The V.A. program, for example, had 1st, 2nd, 3rd, and 4th year traineeships which provided the prescribed number of approved clinical supervised hours. The accreditation of internships did not come until the 1970s.

III. DESCRIPTION OF THE CLINICAL PSYCHOLOGY PROGRAM

The Program aims to turn out graduates who are first and foremost excellent researchers, involved in generating new knowledge in psychology. This skill is buttressed and informed by competence in the consumption and professional application of psychology for the prevention and remediation of clinical problems. The Program is designed to give each student a broad background in psychology, and within psychology a broad background in clinical psychology. The background in general and clinical psychology is provided by didactic courses and seminars. The clinical experience is provided by participation in clinical practica and courses. Research experience is provided by participation on a research team as well as a first-year project, M.S. Thesis, Preliminary Paper/Examination, and Ph.D. dissertation. The breadth and integration of academic work, research, and clinical training are consistent with standards set forth by the American Psychological Association (APA).

Students are expected to take courses in the various areas of psychology that will give them a sound foundation in statistics and experimental design, the biological bases of behavior, the cognitive-affective bases of behavior, and the social bases of behavior. Within the program, students take courses that give them the research and statistical methods commonly used in clinical and related area of psychology, an understanding of the assessment and evaluation of adults and children, the planning and execution of procedures for treatment and behavior change, an understanding of individual differences and the processes underlying individual behavior, the history and systems of psychological theory and application, and the ethics and codes of conduct for psychologists. Competence in the sociocultural foundations of human behavior provided throughout the curriculum.
IV. CLINICAL PSYCHOLOGY PROGRAM REQUIREMENTS

A. Academic Coursework

Students must take a range of courses that satisfies requirements of both the Department of Psychological Sciences and the American Psychological Association.

As described in the Department’s Graduate Handbook, the Department of Psychological Sciences requires each graduate student to (1) take one course from among PSY 63100, STAT 51100, and STAT 51200; and one course from among PSY 64600, STAT 51200, and STAT 51400, for a total of six credits, prior to receiving the Master’s degree; or students may take PSY 60000 and PSY 60100 as a 2-course sequence; and (2) complete three additional graduate courses outside of their major area of concentration, for a total of nine credits. These courses are in addition to any courses required by the student’s major Area. At least two of these three courses must be graduate courses offered within the Department, while the third course may be from outside of the Department. These three courses must be approved by the student’s Ph.D. Advisory Committee, as indicated by the Committee’s approval of the student’s Ph.D. Plan of Study. The student must earn a grade of “A” or “B” in order to fulfill this requirement, and must repeat any required course in which a grade of “C” or lower is received. Each student is responsible for reading, understanding, and meeting these requirements as laid out in the latest edition of the Handbook.

Students also must meet academic requirements set by APA. These specify that students show mastery of material in the following four basic content domains: (1) biological bases of behavior, (2) cognitive and affective bases of behavior, (3) social bases of behavior, and (4) individual bases of behavior. Clinical students meet the “individual bases” requirement simply by taking courses already required by the Area, including PSY 67300 Adult Behavior Disorders, PSY 67900 Child Behavior Disorders, PSY 66700/66800 Clinical Assessment, and PSY 67000 Principles and Techniques of Psychotherapy. Clinical students will also meet the affective bases of behavior by taking the module on affective bases of behavior in the clinical core course (PSY 69200: Clinical Psychology Seminar). Students usually demonstrate competence in each of the other domains by completing relevant courses successfully. Students have limited flexibility in meeting requirements for the other domains, although this may change depending on future course offerings. Current means of meeting the broad and general requirements in: (1) biological bases of behavior, (2) cognitive bases of behavior, and (3) social bases of behavior are given in Appendix B. Currently, the biological bases of behavior requirement may be met only by PSY 61500 Introduction to Psychobiology, and the social bases of behavior can be met only by PSY 64000 Survey of Social Psychology. Cognitive bases of behavior of behavior can be covered by a broader array of courses including

APA also requires that students receive instruction in three additional topics: scientific and professional ethics and standards, history and systems, and issues of human diversity (including ethnocultural issues) in psychology. Students meet these requirement by taking and passing three specific modules within the Clinical Psychology Seminar (PSY 69200) which is a four-semester course that provides coverage in core content across 8 half-semester modules including Clinical Ethics, History and Systems, and Multicultural Issues.

Overall, students have both a required sequence of courses to meet basic requirements, as well as a range of choices to tailor to meet their individual training needs. Despite this flexibility, all students are strongly encouraged to retain syllabi from every course taken. Licensing requirements vary significantly by state, and some state psychology boards may require particular courses over and above APA requirements; syllabi are the most common acceptable forms of evidence that students have studied that material. While the curriculum of the Area and Department does provide a solid grounding in graduate clinical psychology that is acceptable for
many jurisdictions, the Program does not (and cannot) guarantee offering all courses required by all states to meet their particular licensing requirements, since these requirements do vary. The Program consistently reminds all course instructors to select carefully and feature descriptions in their syllabi that reflect the particular domain of study for which the Program does not have required or regular courses, (e.g., issues of human diversity).

**Required Coursework**

Eighteen courses are required as a minimum in Purdue's Clinical Program. Students also are required to sign up for PSY 697: Clinical Internship near the end of their training, once they have been matched with and accept a predoctoral clinical internship. Although this is not a regular didactic course, students are required to register for this in order to receive credit and documentation on their official transcripts of this final phase of their clinical training.

A typical sequence is outlined in Appendix A. The “core” courses required by the Area are summarized below:

<table>
<thead>
<tr>
<th>COURSE</th>
<th>TITLE</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY 6920</td>
<td>Clinical Seminar: Methods module</td>
<td>Fall semester odd years</td>
</tr>
<tr>
<td>PSY 6920</td>
<td>Clinical Seminar: History &amp; Systems/ Affective Bases of Behavior</td>
<td>Spring semester even years</td>
</tr>
<tr>
<td>PSY 6920</td>
<td>Clinical Seminar: Ethnic Minority Issues/Supervision &amp; Consultation</td>
<td>Fall semester even years</td>
</tr>
<tr>
<td>PSY 6920</td>
<td>Clinical Seminar: Ethics/Special Topics</td>
<td>Spring semester odd years</td>
</tr>
<tr>
<td>PSY 6680</td>
<td>Intellectual Assessment</td>
<td>Fall semester every year</td>
</tr>
<tr>
<td>PSY 6670</td>
<td>Personality Assessment</td>
<td>Spring semester odd years</td>
</tr>
<tr>
<td>PSY 6700</td>
<td>Principles &amp; Techniques of Psychotherapy</td>
<td>Spring semester even years</td>
</tr>
<tr>
<td>PSY 6730</td>
<td>Adult Behavior Disorders</td>
<td>Fall semester odd years</td>
</tr>
<tr>
<td>PSY 6790</td>
<td>Child Psychopathology</td>
<td>Fall semester even years</td>
</tr>
<tr>
<td>PSY 6790</td>
<td>Assessment (practicum)</td>
<td>2\textsuperscript{nd}, 3\textsuperscript{rd}, and 4\textsuperscript{th} semesters</td>
</tr>
<tr>
<td>PSY 6790</td>
<td>Child Behavior Management (practicum)</td>
<td>Fall &amp; spring semester 3\textsuperscript{rd} year</td>
</tr>
<tr>
<td>PSY 6790</td>
<td>Adult Services (practicum)</td>
<td>Fall &amp; spring semester 3\textsuperscript{rd} year</td>
</tr>
<tr>
<td>PSY 6920B</td>
<td>Pro-seminar in Clinical Psychology</td>
<td>each semester</td>
</tr>
<tr>
<td>PSY 6970</td>
<td>Clinical Internship</td>
<td>(last year of training)</td>
</tr>
</tbody>
</table>

**EITHER:**

- one from PSY 63100, STAT 51100, and STAT 51200; and
- one from PSY 64600, STAT 51200, and STAT 51400,

or

- 60000 and PSY 60100 as a 2-course sequence;

The Department of Psychological Sciences requires all graduate students to take at least three courses outside of the student’s major Area. These remaining three courses are elective and should reflect a student’s individual training needs, but might be chosen to fulfill overlapping departmental and APA requirements. In general, it is expected that clinical students will take several more electives than the three that are required. This is because clinical students must meet additional APA requirements and will need to take additional methodological and statistical courses to become excellent researchers. Appendix B provides a listing of elective courses that student might want to consider taking.
**Other Recommendations for Coursework**

Students are encouraged to take courses that meet their specific research interests and training needs. For example, courses often are offered that focus on cultural and ethnic minority issues, specific psychological disorders, advanced assessment, specific populations such as children or the elderly, and advanced statistics and research methods.

Purdue’s Clinical Program is designed to be a “generalist” educational experience, providing a broad exposure to an array of clinical issues, populations, and research. Although the program previously offered separate “adult” and “child” tracks, changes in faculty have eliminated this formal track system. Currently, students are required to take courses and practica that provide coverage in both child and adult psychopathology, assessment, and intervention. Students who are more interested in clinical child psychology may obtain more advanced training and experience through a number of external child-focused practica, and child-focused elective coursework (e.g. from the Developmental Area).

**Course Waivers**

Some students have received graduate training elsewhere that might fulfill coursework requirements at Purdue. The student who would like credit for previous mastery of course requirements must obtain signed waivers from the Purdue professors responsible for the comparable courses here. (See the Appendix C for a copy of the waiver form.) The student first should consult with his/her Major Professor to determine the appropriateness of such requests, and then approach the course instructors about waivers, providing solid evidence (typically course syllabi) demonstrating the comparability of the Purdue and outside courses.

Students generally are counseled to consider very carefully waiving the Statistics or Research Methods requirements, since mastery of this material is crucial but often incomplete!

**Course Grades**

Only courses for which an “A” or “B” grade can be earned are acceptable as fulfilling academic requirements. Students are expected to repeat any required courses in which they receive a grade of “C” or lower. Students receiving a grade of “C” or lower in a required course typically are placed on academic probation until the deficiency is made up.

**B. Research**

Each student is involved continuously in an ongoing research program and in additional projects beyond the ones required by the program (e.g., first-year project, master’s thesis). Each research program is directed by a faculty member, and typically includes students at all levels of graduate study. At the beginning of a student’s graduate career, the student can expect to function as an observer and helper. As the student’s knowledge and skill develop, the student typically takes a more active role in research design and supervision.

Initially, a student's admission is sponsored by a faculty member with whom the student shares research interests. The student is expected to be a regular participant on the research team of her/his Major Professor. Participation on at least one research team continues throughout the student’s graduate career. Students are free to change their Major Professor and consequently their research teams at any time during their graduate career, and are encouraged to do so when and if their research interests change. Such changes should be made in consultation with the professors involved, and may require students to change research projects.
Students may attend the meetings or participate in the activities of other research teams whose research topics are of interest, with professors’ permission. In this way, exposure to the research interests of a variety of faculty and students is possible.

The student begins formal research training with a first-year research project. This project is intended as a practical exposure to psychological research. Although data will often be provided by the faculty, the student is required to conceptualize the problem, analyze the data, and write the results up for publication. During the first year, each student also begins to develop a proposal for Master’s thesis work, in conjunction with his/her Major Professor. The proposal typically is completed, and defended in front of the student’s Advisory Committee by the end of the second semester, first year (or, in some cases, within the first two weeks of the first semester, second year). The student is expected to complete M.S. thesis research and successfully defend the Master’s thesis before beginning the third year. Except under unusual circumstances, a student who has not completed Masters requirements by the beginning of the third year may not begin practicum training. The student should sign up for Master’s thesis research credits (PSY 69800) for each semester throughout the process, in order to provide time and credit for completion of this project, while remaining a “full-time” student.

During the third year, the student will propose to his or her Advisory Committee and write a Preliminary Examination. In the Clinical Area, this takes the form of a conceptual or empirical review of the literature on a particular subject. Successful completion of this project will advance the student to doctoral candidacy. All post-Masters students should register for PSY 699: Dissertation Research while doing this and subsequent formal dissertation work.

Purdue University requires graduate students to earn a total of 90 credit hours in order to be awarded the Ph.D. only; 30 of those credits can be from pre-Master’s work. Since Clinical students earn most credit for coursework prior to earning the Master’s degree, post-Masters students are strongly encouraged to register for as many PSY 699 credits as their schedules will allow, to insure that they have earned sufficient credits to graduate in a timeframe consistent with the completion of their other requirements.

In the fourth and possibly fifth year, the student will propose and conduct research for the doctoral dissertation. Given the time-consuming rigors of the predoctoral clinical internship, students are encouraged strongly to complete all doctoral research requirements before going on internship. In fact, students will not be approved to apply to internship unless they have successfully proposed their dissertations by the first of October.

Students should explore various sources of funding for their research. Students are encouraged to apply for outside support for their work, or utilize research funding associated with fellowships or scholarships. Some faculty members have grants that allow for funding of student research. In addition, the Arthur F. Krueger Scholarship Fund is designed to support the education and training of Clinical students. Funds are distributed in the form of scholarships distributed to individual graduate students, based on applications. Requests for funding typically are accepted at the beginning of each semester, and priority is given to students working on required research, particularly dissertations.

The faculty expects students to complete all work toward the Ph.D. (excluding internship year) within seven (7) years. Naturally, the speed of any individual student’s progress through the Program will vary with the nature of their individual research requirements and training needs. However, to assure that every student is making timely progress, each student approaching 7 years of enrollment is required to submit to the faculty in writing a copy of their plan for completing the Program. This plan must be endorsed by the student’s Major Professor, in order for the faculty to consider the acceptability of the plan. Failure to demonstrate timely progress – or a plan for maintaining it – can result in a faculty vote for placing a student on Probation or in Unsatisfactory standing, or for dismissal from the Program.
C. Practica

Students are required to be enrolled in at least seven semesters of practica from our in-house Purdue Psychology Treatment and Research Clinics (PPTRC). These clinics address clinical problems with empirically-supported assessment and intervention. In the second semester of their first year, following successful completion of the assessment course being offered, students will register and begin participating in the assessment practicum. They continue in this practicum through the end of their second year, and, if they wish to do so, may continue to enroll in this practicum in future years. In the third year, students take both an adult-focused and a child-focused practicum; as with the assessment practicum, students may continue to enroll in and see clients through these two practica. In the fourth and fifth years, students are encouraged to participate in external practica which generally provide more direct clinical hours and more-focused clinical experiences than what is offered in the in-house clinics. In order to ensure that students make adequate progress towards their requirements and in their research, students are only allowed to spend two days a week in external practica. Additionally, in order to provide integrated, hierarchical supervision teams and in-house oversight of external practica, students on external practica are expected to enroll in and participate in one of the two in-house practica.

The off-site experiences vary and change year-to-year. The Director of Clinical Training and advanced students who have taken outside practica are good sources of information about possible training sites. Students may initiate contact with an agency to pursue as a possible practicum site; however, the Program first must obtain a curriculum vita for the supervising psychologist, and draw up an agreement outlining the duties, number of hours or clients to be seen, hours of supervision, contact information, and parameters for evaluation. An example of this kind of agreement can be found in Appendixes D and E. A list and brief description of possible outside practicum sites, based on past student placements, is included in Appendix F.

Students should consult the Association of Predoctoral and Postdoctoral Internship Centers’ (APPIC) Directory of Internship and Postdoctoral Programs in Professional Psychology (copies are available from the Secretary for the Director of Clinical Training), review current trends in internship qualifications from the APPIC website (www.appic.org), and consult the head of the Area’s Internship Committee to decide how many clinical hours they need to be competitive at their preferred internship sites. They also should consult with their Major Professors about how their clinical experiences fit into their overall plan of study.

Students on PPTRC practicum teams will be expected to comply with the procedures established for the clinics and outlined in the PPTRC Clinician Handbook, available under separate cover.

Practicum experiences are graded (rather than “evaluated as “Pass/No Pass”). Not only does this permit finer-grained recognition of student performance, given the multiple facets of clinical work, but practicum experiences also will count toward credits required for graduation.

D. Other Requirements

1. Colloquium

The Clinical area sponsors a colloquium series on Fridays from 9:00 am to 10:00 am throughout the year. Students must sign up for, and are required to attend, PSY 692B: Proseminar in Clinical Psychology each semester, unless they have an excuse pre-approved by the Director of Clinical Training. Other Areas in the department also have regular colloquium series, often featuring presentations on topics of interest to Clinical Area students. The Department also hosts several departmental colloquia each year, usually on Friday afternoons. Announcements regarding colloquium times, places, and titles are posted around the Department, and sent via email to faculty and graduate students. Clinical students are urged to attend these events as well.
2. **Semester Activity Form**  
At the end of each semester, each student must file a form summarizing the student's activities for that semester. This form includes a summary of hours of supervised clinical experiences undertaken during that time frame academic milestones, and professional activities. A copy of this Semester Activity Form must be filed with the Area Secretary, for review by the Area faculty.

3. **Format of Required Written Work**  
As of January 1, 2007, all major required written projects (first year paper, Master’s thesis, Preliminary Examination, and dissertation) must be completed in a length and form suitable for submission to a journal. This is both to complete the educational experience of creating projects that reflect professional standards in the field, as well as to facilitate actual manuscript submission and publication. Final documents should be approximately manuscript length—very roughly 20 to 40 pages, depending on the type of document. Students should examine papers in the *Psychological Bulletin* and *Psychological Review* as examples for review articles, and the *Journal of Abnormal Psychology* for original empirical work. (Longer works, such as dissertation, might span two such documents.)

4. **Deadlines for Master’s Proposal**  
A student must have an approved Master's proposal by the beginning of their third semester. Students who have not defended their Master’s proposals successfully by this date may be placed on Probation status, and may be directed to delay registering for courses other than Master’s research. This delay is designed to insure that students have the time to make progress on their research. Of course, delayed entry on to second-year coursework potentially can delay progress through the Program, and may result in a faculty vote to place a student on Probation status.

5. **Completion of Master’s Project**  
The faculty strongly encourages every student to conduct his/her Master's research and write up the thesis during the second year. At the very least, students are expected to defend the Master’s thesis successfully near the beginning of the first semester of the third year. Failure to defend the Master’s thesis by this time may prevent the student from beginning work on practicum teams. This restriction is designed to allow students the time to make progress on this important aspect of their research training, without the necessarily time-consuming responsibilities of clinical work. At the same time, late entry into practicum training can delay earning the minimum clinical experiences needed to apply for internships later on, ultimately slowing clinical progress through the Program. Therefore, students are advised strongly to complete their research and remain on the recommended time schedule. Of course, some research projects may require more time than usual, or than anticipated. A student may petition his/her Advisory Committee through the Major Professor to take credit hours of coursework and practica, depending upon extenuating circumstances. If a student’s Advisory Committee agrees that the student is making satisfactory progress, the student may be allowed to continue with a course schedule appropriately modified to support their research progress. However, if the Advisory Committee concludes that the student's progress is being delayed or is otherwise unacceptable, the student may be prevented from registering for any coursework except M.S. thesis credit until the M.S. degree requirements are met. The Area faculty also may vote to place the student on Probation status for such performance.

6. **Ethical and Professional Conduct**  
All graduate students in the Program are required to be familiar with and conduct themselves in accordance with the latest version of the *Ethical Principles for Psychologists and Code of Conduct* put forth by the American Psychological Association. This means that behavior in the classroom, in conducting research, in written work, in relationships with students and peers, and in work with clients, should be guided by the highest moral and ethical criteria set forth by the profession. Each student is provided with a copy of the most recent version of
these principles at the beginning of their first year, and is expected to review and comply with revisions as APA puts new versions into effect. (Copies of the current Ethical Principles can be downloaded from www.apa.org/ethics/code/principles.pdf). Students also should become familiar with Purdue’s approach to the responsible conduct of research, which is summarized in documents available online at http://www.gradschool.purdue.edu/rcr/.

7. Area Communications
Students should check regularly for important announcements from the Clinical Area, on hardcopy or electronic form. Each student will have a physical mailbox in the area, as well as an email account provided by the Department.

V. PROGRESS THROUGH THE PROGRAM

A. The First-Year Project

The First-Year project is designed to facilitate the immediate involvement in research of incoming students in collaboration with their faculty mentors. These typically involve analysis and reporting on data previously collected by the major professor but can involve primary data collection. The project should ideally be capable of completion within the first year in the program. Thus, a student must begin, early in the first semester, to meet regularly with his/her major professor to discuss and complete the broad outlines of the project. Discussions with and reading materials provided by the major professor should provide the student with the background necessary for identifying a relevant question and developing a coherent introduction. Course work during the first year should provide the student with the necessary methodological and statistical basics to complete the project. Working with the major professor, students are expected to develop a final manuscript that can be submitted for publication. Students are not required to defend this work in front of a committee, however.

B. The Master's Thesis

A student is expected to have defended his/her master’s thesis by the beginning of the third year (within the first two weeks of that fall semester). This means that the student should begin to formulate the master’s thesis, in collaboration with the major professor, at the same time he/she is conducting the first-year project. Ideally, by the end of the first year and no later than the end of the third semester, the student will have identified faculty members willing to serve on the Advisory Committee, proposed the thesis project to that committee, and received Institutional Review Board (IRB) approval to begin collecting data (if necessary). Some types of research take longer than others (e.g., working with hard-to-recruit populations, conducting multiple studies, undertaking labor-intensive data analyses), so the Area allows for some limited flexibility in deadlines for completion, and allows the student with unusual circumstances to petition for extensions as the needs arise, as described above.

Although the area does not require that the master’s thesis involve original data collection, it is expected that students will develop competence in such research. Thus, it is anticipated that either the thesis or dissertation will involve collection of such data. If both the thesis and the dissertation are based on previously collected data, the student may show competence through a separate project that does involve such data collection.

The student and Major Professor discuss and decide on the composition of the student’s Advisory Committee. The student's Advisory Committee has the formal responsibility of overseeing the student's graduate education. The Advisory Committee is composed of faculty from within as well as outside the Clinical Area. A Master's Advisory Committee, which has a minimum of three (3) members, must have two clinical faculty members (one of whom is the student’s Major Professor) and one nonclinical faculty member. The members should bring a range of expertise
that can inform the student’s work. The student should approach faculty members about their willingness and availability to serve on the Committee.

Although the Clinical Area requires a formal meeting of the Student’s Advisory Committee to approve the plan for the student’s Master’s thesis, the proposal meeting is not a formal requirement of the Purdue’s Graduate School. That is, no formal papers are signed and there is nothing like a “pass” or “fail” recorded on the student’s academic record. The proposal meeting is designed to encourage a “contract” between the Committee members and the student, so that everyone knows what is being proposed to be done and that everyone agrees. The student typically consults with Advisory Committee members in developing and finalizing a thesis proposal, and the proposal itself may contain some elements requiring further thoughtful Committee input. The proposal defense meeting is arranged once the student’s Major Professor agrees that the student’s thesis research proposal is substantially ready for discussion. Time and place are arranged by the student based on the mutual consent and availability of Committee members. Discussing the project at the proposal meeting helps the student by having Committee members suggest solutions to existing problems, identify potential future problems and ways to avoid them, and avenues to future research and publication. Following this type of detailed discussion, the reaches a decision on whether the student should proceed with the project, taking into account any changes required by the Committee. Thus, the proposal meeting is designed to be a productive work session that results in an improved research project. The student also should come away from the meeting with a clear sense of how to consult with and update the Committee throughout the work on the project.

Students are urged to form their Advisory Committees as soon as it is practical. This typically is done in conjunction with forming a committee for the Master’s Thesis. It is at this time that a Plan of Study is submitted. The Plan of Study is a list of courses that constitutes the student’s program of study in graduate school. It must satisfy Area, Departmental, and Graduate School requirements, and be approved by all members of a student’s committee.

When the Student and Major Professor believe that the project is ready for final evaluation, the student arranges a mutually acceptable time for Committee members to meet for a formal defense of the thesis. The student should submit a complete final draft of the thesis to Committee members to review two weeks prior to the meeting. At the meeting, the student typically makes a formal presentation, and an oral defense of the thesis. Committee members ask questions and make comments. The Committee then decides on whether the thesis and defense have been of acceptable quality, and what changes, if any should be made for the final version of the document.

C. Preliminary Examination Paper

Successful completion of the Preliminary Examination advances the student to doctoral candidacy. The Preliminary Examination consists of written and oral portions, and is intended to assess the student's ability to organize and integrate a fund of information, in order to answer a particular question rather than to explore mere breadth of information. Students schedule these examinations in consultation with their Advisory Committees.

The Doctoral Advisory Committee must have a minimum of four (4) members, two of whom are faculty members in the Clinical Area. A typical arrangement consists of two clinical and two nonclinical faculty. The Area encourages the participation of nonclinical faculty as it brings breadth to the student's research training. It is possible, however, to form a Doctoral Advisory Committee with three clinical and only one outside faculty member. The composition of the Committee should be discussed with and approved by the student's Major Professor. The Chair must be a member of the Clinical Area faculty. In special circumstances, the Committee may have co-chairs, one Clinical and one non- Clinical. Clinical faculty members who have an affiliation with another Area of the Department may serve as either an outside or a Clinical
Persons who are not members of the Purdue faculty may serve on a student’s Committee, but must be approved by the Graduate School first.

At or near the completion of the Ph.D. Plan of Study and at least two semesters before the award of the Ph.D. degree is expected, the student must complete the Ph.D. Preliminary Examination. Usually these examinations are undertaken during the third or fourth year of graduate study, right after the completion of the Master’s thesis.

**Written Portion of the Preliminary Examination**

The written portion consists of a theory or review paper that summarizes a relevant area of research. It is assumed that a review of the literature will cover exhaustively research and clinical literature written on a particular topic over a particular period of time. The paper should arrive at conclusions concerning what the literature indicates, and should point out the directions future research in the area should take. In areas in which there has been extensive research, the student may find it wise to confine the literature review to studies focusing upon a specific aspect of a topic, or studies utilizing particular research techniques or designs. The document should review the relevant literature, discuss problems, inadequacies and/or contradictory findings, and make recommendations by proposing a different theoretical perspective, new hypotheses, a different methodology, different data analytic techniques or a different program of research designed to remedy the problems in the area. Although the Examination is a review, some students and their Committees may decide that a meta-analysis of published findings would be useful to conduct and report. The final product should be a document suitable for submission to a journal publishing reviews of the particular literature or a journal publishing theoretical articles. As such, the final document should be close to publishable length: a maximum of 35-40 pages. All students are encouraged to publish these products, and some Committees may require that the paper be submitted. Students should examine papers in the *Psychological Bulletin* and *Psychological Review* as examples.

Because the Preliminary Examination can take very different forms across departments—and even across Areas within this Department—there is no Purdue requirement for a Preliminary Examination proposal meeting. However, the Clinical Area expects that the student assemble a committee meeting early in the process to discuss the direction of the proposed area of study. This meeting may be held any time after having passed the Master’s thesis defense and prior to defending the Preliminary Examination. This meeting may be assembled whenever the student feels ready to negotiate the content and direction of his/her Preliminary Examination project. Such a meeting benefits both the student and the Committee by clarifying what is expected from the student in terms of the project and for feedback from the Committee members. It is not necessary at any time, however, for the Committee to help the student shape the project.

At such a meeting, the student may present a short proposal of the project; target page length will depend on preferences of the Major Professor and recommendations of the Committee. The student may include in a proposal the research questions, a detailed justification of the project, a plan for how the project will be conducted, a tentative outline of the final paper, expected outcomes, and a tentative timeline. The proposal typically describes the range of literature that will be reviewed, as well as evidence that it is of sufficient breadth and quality to answer the research questions posed. The student and Major Professor may choose to use a different proposal format, but the purpose of this meeting is for the student and the Committee to agree on what the student will accomplish, defining the “Prelim process” itself.

Once the Advisory Committee agrees to a proposed project, the student may begin work on the Preliminary Examination. The student may consult with members of the Committee, or other professors and students. The limits of consultation, however, are defined by the Committee. Perhaps the most common approach Committee members take is to agree to converse with the student on ideas, scope, critical insights, and the identification of significant liter sources, but will
not read or revise drafts. In every case, though, the nature and limits consultation needs to be clarified by each individual with his/her Committee.

**Oral Portion of the Preliminary Examination**

The Advisory Committee conducts an oral examination of the student, once the student has submitted the written Preliminary Examination document to the Committee. At least two weeks before the Oral Examination, the student must submit a form to the Graduate School to schedule the meeting and submit the document to the Committee. The Oral Examination Committee ordinarily is composed of the members of the student's Advisory Committee; however, permission may be granted for persons to be added to or substituted for members of the Advisory Committee to serve on the Examination Committee. This typically occurs only when a member of the original Advisory Committee is unable to participate in the oral examination.

At the conclusion of the oral examination, the Committee may judge the student (1) to have passed the examination, (2) to have failed, or (3) to have passed pending necessary revisions. The Committee will require that the student revise the paper only if the deficiency in the answer is judged by the Committee to be minor. The student is required to make these minor revisions within two weeks. If revisions are so extensive as to require more than two weeks’ work, then the student has not passed the exam, and must schedule a second oral exam and resubmit the paper to the Committee. Departmental policy states that a student who fails a Preliminary Examination may not schedule a re-examination until the following semester or later.

The student who fails the Preliminary Examination may repeat the examination. Should the examination be failed a second time, a third examination is not be permitted, except upon recommendation of the Examining Committee and with special approval by the Graduate School. Along with an evaluation of the written and oral performance, the Examining Committee also must recommend whether the student should be advanced to doctoral candidacy, kept on for further preparation, or discontinued from the Program. As described in the Psychological Sciences Graduate Handbook and the Policies of the Graduate School, the student who fails the Preliminary Examination and is not recommended to continue will not be advanced to doctoral candidacy. That student effectively is dismissed from further study in the Clinical Program. (Discontinuation from the Clinical Program under those circumstances does not necessarily preclude pursuing graduate study in the Department of Psychological Sciences, as provided by the Psychological Sciences Graduate Handbook and the Policies of the Graduate School.)

When the student successfully completes the Preliminary Examinations, the student becomes a candidate for the Ph.D. degree. A copy of the final written version of the Preliminary Examination must be filed with the Department’s Graduate Coordinator.

**D. Ph.D. Dissertation**

The Ph.D. candidate must present a written dissertation based upon a major research investigation that makes an original contribution to knowledge in psychological science. This research requirement is the most distinctive characteristic of the Doctor of Philosophy degree, and is the culmination of the student's graduate school research career. The work on the dissertation ordinarily occupies most of the student's last year of residence on campus, but the preparation and planning for the dissertation research should have been an integral part of the student's work throughout the graduate career. Thus, the dissertation represents the fruit of the student's maturation as a research scholar.

Research for the dissertation may be in any field of psychology and on any topic for which a satisfactory design can be established. The student works closely with the Major Professor on the doctoral research. When a problem is selected and a design is conceived, the dissertation proposal (including the design) must be presented to the student's Advisory Committee for formal
approval. The research is carried out in continued consultation with the student’s Advisory Committee, and under the supervision of the Major Professor.

The student may appear for the final doctoral examination after at least two semesters have elapsed since the successful defense of the Preliminary Examination, and the dissertation research has been completed. The student must submit the written dissertation to the Advisory Committee, and then defend the dissertation orally before the Committee. The final dissertation oral examination may be scheduled prior to the time that the student leaves campus for the predoctoral clinical internship, although the student is not eligible to graduate until the internship is completed. The dissertation must be submitted to the Committee at least two weeks in advance of the Ph.D. defense. Forms scheduling the oral examination need to be filed with the Graduate School a minimum of two weeks prior to the defense.

Consistent with the research orientation of the Clinical Program, students are expected to take initiative to submit this and other research projects for publication—and may be required to do so by their Major Professor. This often is a joint effort by the student and one or more members of the Advisory Committee.

E. Internship

The predoctoral clinical internship is the capstone of the student’s clinical training, in the same way that the dissertation is the capstone of the student’s research training. The Ph.D. degree in clinical psychology requires the completion of an internship of at least 1,900 hours of supervised clinical work. This internship usually is taken in a one-year block of full-time work; however, with the approval of the Clinical Area faculty, it may be completed in two years of half-time work. The student selects the internship in consultation with his/her Major Professor, his/her Advisory Committee, and the Clinical Area’s Internship Committee. The internship is chosen in order to provide supervised experience in the area of the student's major interest, as well as breadth of clinical training in this last pre-doctoral practical experience. Since 1999, internship selections have been based on computer matching sponsored by the Association of Predoctoral and Postdoctoral Internship Centers (APPIC). Except in unusual circumstances approved by the Area, the student will complete the internship in an APA-approved internship program. For most internships, students are required to submit a standard application summarizing their clinical experience, a curriculum vita, a statement of training interests and goals, three or four letters of recommendation from clinical supervisors, and a letter from the Director of Clinical Training certifying their eligibility.

The internship could be completed as early as the fifth year of graduate study, assuming the student has followed the time line described to this point, and that the student has amassed sufficient clinical experience to earn offers from desirable internship sites. Depending on progress to this point, and the nature of the dissertation project, the student may opt to complete dissertation work before embarking on internship, which means that the internship could take place during the sixth year of study. The Ph.D. Preliminary Examination must be completed and the Ph.D. dissertation proposal must be approved before the student can apply for internship. All course requirements—including at least two years of clinical practica—must be completed before the student may begin the internship.

It is the policy of the Clinical Area that students must have their doctoral dissertation proposal approved by their Advisory Committee to be eligible to apply for internship. Students must defend the proposal successfully by October 1 in order to have the Director of Clinical Training certify their qualifications. Students interested in internship sites with application deadlines earlier than November 15 should plan to defend their dissertation proposals accordingly early, to allow the Director of Clinical Training to certify their qualifications in a timely fashion.
At the time of acceptance of internship offers, students may not have completed all of the requirements for the Ph.D. Although the Clinical Area recognizes that individual students’ research demands vary widely, all students are urged to complete all requirements for the Ph.D. degree, including the dissertation, before beginning the internship. Students who are enrolled in practica and courses usually satisfactorily complete these requirements prior to the beginning of the internship in the following summer. Students who do not complete satisfactorily the minimum requirements outlined here within the time frames stipulated will be required to withdraw from any internship proceedings.

A copy of the student’s final letter of internship offer must be filed with both the Psychological Sciences Graduate Office, and the Clinical Area Secretary, for the Area’s records.

F. Proposed Course Sequence and Time for Completion of the Program

The considerations outlined above practically result in a 6-year program (5 years of coursework and practica, and 1 year of internship). Although students taking the standard complement of courses outlined above will earn sufficient credits to earn the Master’s degree at Purdue University, students are advised to take the maximum number of research credits for which they are eligible (up to 18 credits total per semester) after the Masters is awarded, to insure they have earned the 90 credits necessary for the Ph.D. This recommendation stems from the University allowing a maximum of 30 pre-Master’s credits to apply toward the Ph.D. The average time to completion for recent classes is approximately 6.5 years (including the one-year internship).

A suggested course sequence and outline of related experiences is included in Appendix A.

G. Post-Doctoral Work

Note that post-doctoral training is becoming common – and, in many cases, necessary – for an increasingly competitive job market, such experiences are arranged by the student on an individual basis. Post-doctoral fellowships, 1) can help hone very specialized research skills; 2) can provide time for manuscripts based on predoctoral research to go to press; and, 3) can be an excellent source of post-doctoral supervised clinical experiences required for licensing in many states.

VI. STUDENT EVALUATION PROCEDURES

Students are evaluated semi-annually by Clinical Area faculty in the following three areas:

A. Academic Coursework

A student's performance will be considered to be competent if his or her GPA is at least 3.0 (on a 4.0 scale) and all core course grades are ‘B’ (3.0) or better. A student will be considered to be deficient academically if his/her overall GPA is below 3.0 or if a ‘C’ or lower is received in a core course or any course taken in Psychological Sciences or a comparable department (e.g., the Department of Child Development and Family Studies, or departments in the College of Education). This requirement does not apply to advanced courses taken in other specialties, such as math or biology.

B. Research

A student will be considered to be performing competently in research if he or she is making progress in completing research tasks in a satisfactory and timely manner. A student can be found deficient by not meeting the stated deadlines (including for the Master’s thesis proposal and final defense), or by otherwise not making timely or competent progress on required research (including significant movement on the Preliminary Examination). Since research projects differ
widely according to individual interests, complexity, and requisite skills, decisions about research competence necessarily must be based on the judgments of faculty with regard to these factors in individual cases.

C. Practica

Beginning with the Fall 2007, a student will be considered to be competent in a clinical practicum only if he/she receives a grade of “A” or “B”. Supervisors assign grades based on work quality (including documentation and paperwork), and grades below “B” are considered to be deficient in the Clinical Program. Written feedback should be provided to the student each semester by the practicum supervisor, a copy of which should be provided to the Director of Clinical Training. A copy of the Summary Evaluation of Practicum Performance form can be found in Appendix G.

D. Addressing Clinical/Performance Issues

Practicum performance will be graded, according to specified criteria.

All clinical work must be supervised, with student performance expectations in outside placements enumerated in formal written agreements (see Appendixes D and E), and in in-house work described in syllabi. Any student having performance difficulties in practicum or other clinical work should be made aware of this, so that the situation can be handled clearly, swiftly, and fairly. Common difficulties might involve clinical judgment, managing required documentation, or skills in implementing interventions. If the student is not making sufficient progress in the judgment of the supervisor, then the following steps should be taken:

1. The student underperforming in practicum should be informed by the supervisor in writing by mid-semester—or preferably before, if possible. It is important that the student receive written feedback from the supervisor, even when performance is "borderline," so that the student is adequately informed about directions for required improvement. A copy of the feedback also should be sent to the student's Major Professor. The Director of Clinical Training should be notified if the problem is likely to require some administrative action, such as transferring the clients to other student clinicians, or limiting the student’s caseload.

2. Assuming that the practicum student will continue to see clients, a plan should be devised to address the student's deficits. This can be negotiated with the student alone or in conjunction with his/her Major Professor, depending on the nature of the deficiency and the extensiveness of the proposed remediation. The plan should be documented, and the student's progress should be monitored closely thereafter.

3. In the event that the student continues to perform poorly or jeopardizes the welfare of his/her client(s) to the degree that the supervisor believes it necessary to remove the student from the case, then arrangements should be made for a smooth transition to a new student clinician. Such a transfer ideally should be presented to the affected client(s) by the original student clinician, who provides an explanation to the client(s) that minimizes confusion and helps the client(s) not take the transfer personally. It may be most helpful in many cases to have the original student clinician introduce the new student clinician to the client. In the event that the student clinician is removed from the case and is unable or is prevented from handling the transition personally, then it is the responsibility of the clinical supervisor to explain the circumstances to the client in an appropriate way.

4. Students normally carry more than one case, and may function well in some cases but not in others. A supervisor may elect to remove a student from a case where the student’s performance is poor, but keep the student on the others. However, if it becomes necessary to remove the student from all cases, then the Director of Clinical Training and Major Professor should be consulted, as well as other relevant parties.
5. If a supervisor concludes that supervision cannot proceed productively because of conflict in the supervisory relationship, but believes that the student might work better with another supervisor, then arrangements should be made to transfer that student and case to another supervisor.

6. If the student has not remedied identified performance deficits in the time and manner previously outlined, then the supervisor should give the student a grade below “B.” Such deficient grades may warrant placing a student on “Clinical Probation,” requiring remedial action.

The timeline for giving this type of practicum feedback might differ depending on the student’s experience level. For example, with a new student, the supervisor might wait until the end of the first semester before giving formal written feedback, in order to separate normal growth and development from serious problems requiring specific intervention. Some supervisors will give a "satisfactory" evaluation the first semester problems are identified, with the provision that the student will receive an “unsatisfactory” second semester if needed improvements are not made.

E. Performance Deficiency and Student Status

A deficiency in any of these areas can lead to a vote by the Clinical Area faculty to place a student on “Probation” status. Individual circumstances, recommendations by the student's Major Professor, and the student's overall record all would be considered in such a decision. A majority vote by the faculty to place the student “On Probation” would be relayed to the student in the semi-annual feedback letter. Besides notifying the student of his/her status, the feedback letter also would specify the requirements for removal from probation status and a time frame for their completion. Students on probation have at least until the next evaluation meeting as a minimum working period to correct deficiencies. If the student does not correct deficiencies within the specified time frame, then a second vote would be taken by the clinical faculty to determine the student's suitability for continuation in the Program. Other details about student status and their determination are covered in the Department of Psychological Sciences’ Graduate Handbook.

Regardless of whether a student’s difficulties warrant a formal change in his or her status, any deficiency the student is exhibiting should be targeted and addressed with specific plans for remediation.

F. Procedure for Student Appeals

This procedure provides for hearing student appeals of faculty decisions regarding the student’s status in the Clinical Program. The procedure first establishes a small investigating/hearing committee. The committee is charged to make findings and recommendations about a student’s alleged behavior that may have warranted changing the student's standing in the Program. This committee's recommendations are then sent to the Clinical Area teaching faculty for a vote.

The following specific steps are to be taken:

1. The student must be informed of allegations that result in a change of standing (including dismissal), in writing by a Clinical teaching faculty member. The Director of Clinical Training is informed of allegations and of their communication to the student.

2. Following a faculty vote to change the student’s status, and formal notification of the student, the student may request from the Director of Clinical Training an investigation/hearing to review the faculty decision.
3. The investigating/hearing committee shall be formed by three (3) members of the Clinical Area teaching faculty as follows: the student shall select a member, the Director of Clinical Training shall select another member, and the Director of Clinical Training shall serve as the third member. (In case the Director of Clinical Training cannot serve due to conflict of interest or unavailability, he or she shall appoint an alternate).

4. The Committee will review evidence related to the allegation and make appropriate findings that will inform its ultimate recommendation to the Clinical Area teaching faculty. While the Committee does not have statutory or legal status, it will attempt to follow due process procedures, to provide a fair hearing if necessary, and to protect the rights of both the student and the Program. It can review physical evidence and talk with the parties involved, including the student.

5. The Committee should use its findings to develop a recommendation to uphold the faculty vote on the change in the student’s status, to reverse the vote, or some other appropriate alternative. A majority of the Committee must favor the recommendation in order to forward it to the Clinical Area faculty. A recommendation regarding the disposition of the case will be sent from the Committee to all Clinical Area teaching faculty. Faculty members are encouraged to confer with members of the Committee regarding its recommendation.

6. The Clinical Area teaching faculty vote on the recommendation of the Committee. A majority vote by the faculty is required to accept the recommendation of the Committee.

The student may appeal the decision of the Clinical Area faculty by following procedures established by the Graduate Council published in both the Department’s and Graduate School’s Handbooks (e.g., http://www.gradschool.purdue.edu/downloads/Graduate%20School%20Policies%20and%20Procedures%20Manual.pdf) concerning graduate students’ appeal rights. Additional options can be discussed with the Graduate School’s Ombudsman (http://www.gradschool.purdue.edu/peerombuds/index.cfm), whose responsibility it is to help resolve concerns of graduate students, faculty, and staff with respect to graduate education and the graduate school experience at Purdue University.

VII. ACCREDITATION BODY

The Clinical Psychology Program is accredited by the American Psychological Association. Questions or concerns can be directed to:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002
http://www.apa.org/ed/accreditation
(202) 336-5979
(202) 336-5978 FAX
APPENDIX A

OUTLINE OF RECOMMENDED COURSE SEQUENCE

First Year for Student Entering in Odd Year

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Cred</th>
<th>Spring Semester</th>
<th>Cred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statistics I(a)</td>
<td>3</td>
<td>Statistics II(b)</td>
<td>3</td>
</tr>
<tr>
<td>PSY673: Adult Behavior D/Os(a)</td>
<td>3</td>
<td>PSY670: Principles &amp; Techniques of Psychotherapy(a)</td>
<td>3</td>
</tr>
<tr>
<td>PSY668: Intellectual Assessment</td>
<td>4</td>
<td>PSY 679: Assessment Clinic</td>
<td>3</td>
</tr>
<tr>
<td>PSY692: Clinical Psych Seminar--Research Methods(a)</td>
<td>3</td>
<td>PSY692: Clinical Psych Seminar--Affective Bases &amp; Hist and Syst(a)</td>
<td>3</td>
</tr>
<tr>
<td>Elective Course(c)</td>
<td>3</td>
<td>Elective Course(c)</td>
<td>3</td>
</tr>
<tr>
<td>PSY692: Proseminar</td>
<td>1</td>
<td>PSY692: Proseminar</td>
<td>1</td>
</tr>
<tr>
<td>PSY 698: MS Research Credits</td>
<td>1-2</td>
<td>PSY 698: MS Research Credits</td>
<td>1-2</td>
</tr>
</tbody>
</table>

Additional First Year Tasks
- File a Plan of Study for the M.S. degree
- Develop and complete a first year research project, supervised by Major Professor.
- Investigate ideas for the Master’s research project; propose Masters by end of year
- Begin record of all clinical activities.

Second Year for Student Entering in Odd Year

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Cred</th>
<th>Spring Semester</th>
<th>Cred</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY692: Child Behavior D/Os(a)</td>
<td>2</td>
<td>PSY667: Personality Assessment(a)</td>
<td>4</td>
</tr>
<tr>
<td>PSY 679: Assessment Clinic</td>
<td>3</td>
<td>PSY 679: Assessment Clinic</td>
<td>3</td>
</tr>
<tr>
<td>PSY692: Clinical Psych Seminar--Supervision &amp; Multicultural(a)</td>
<td>3</td>
<td>PSY692: Clinical Psych Seminar--Ethics &amp; Special Topic(a)</td>
<td>3</td>
</tr>
<tr>
<td>Elective Course(c)</td>
<td>3</td>
<td>Elective Course(c)</td>
<td>3</td>
</tr>
<tr>
<td>PSY692: Proseminar</td>
<td>1</td>
<td>PSY692: Proseminar</td>
<td>1</td>
</tr>
<tr>
<td>PSY 698: MS Research Credits</td>
<td>1-3</td>
<td>PSY 698: MS Research Credits</td>
<td>1-3</td>
</tr>
</tbody>
</table>

Additional Second Year Tasks
- Defend thesis proposal by end Fall semester
- Carry out Master’s research
- Take 1-2 elective courses each semester—seminars, advanced statistics, and courses and courses to cover Social, Biological and Cognitive bases of behavior

Third Year for Student Entering in Odd Year

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Cred</th>
<th>Spring Semester</th>
<th>Cred</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY679: Child Behavior Management Clinic</td>
<td>3</td>
<td>PSY679: Child Behavior Management Clinic</td>
<td>3</td>
</tr>
<tr>
<td>PSY 679: Adult Services Clinic</td>
<td>3</td>
<td>PSY 679: Adult Services Clinic</td>
<td>3</td>
</tr>
<tr>
<td>Elective Course(c)</td>
<td>3</td>
<td>Elective Course(c)</td>
<td>3</td>
</tr>
<tr>
<td>PSY692: Proseminar</td>
<td>1</td>
<td>PSY692: Proseminar</td>
<td>1</td>
</tr>
<tr>
<td>PSY 698: MS Research Credits</td>
<td>1-3</td>
<td>PSY 698: MS Research Credits</td>
<td>1-3</td>
</tr>
</tbody>
</table>
Additional Third Year Tasks
- Complete Master's Thesis and oral defense by first two weeks in Fall semester, in order to begin practicum training
- Select a doctoral Advisory Committee
- File a Plan of Study for the Ph.D. degree
- Propose, complete, and defend a Preliminary Examination paper
- Begin plans for the Ph.D. dissertation
- Continue taking electives.

Fourth Year for Student Entering in Odd Year

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Cred</th>
<th>Spring Semester</th>
<th>Cred</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY679: (in house practica)$^d$</td>
<td>1-3</td>
<td>PSY679: (in house practica)$^d$</td>
<td>1-3</td>
</tr>
<tr>
<td>PSY 679: Outside Practicum$^e$</td>
<td>3</td>
<td>PSY 679: Outside Practicum$^e$</td>
<td>3</td>
</tr>
<tr>
<td>Elective Course$^c$</td>
<td>3</td>
<td>Elective Course$^c$</td>
<td>3</td>
</tr>
<tr>
<td>PSY692: Proseminar</td>
<td>1</td>
<td>PSY692: Proseminar</td>
<td>1</td>
</tr>
<tr>
<td>PSY 699: PhD Research Credits</td>
<td>1-11</td>
<td>PSY 699: PhD Research Credits</td>
<td>1-11</td>
</tr>
</tbody>
</table>

Additional Fourth Year Tasks
- Continue with electives
- Complete the Ph.D. Plan of Study
- Complete Preliminary Examination
- Propose, complete, and defend dissertation proposal

Fifth Year for Student Entering in Even Year

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Cred</th>
<th>Spring Semester</th>
<th>Cred</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY679: (in house practica)$^d$</td>
<td>1-3</td>
<td>PSY679: (in house practica)$^d$</td>
<td>1-3</td>
</tr>
<tr>
<td>PSY 679: Outside Practicum$^e$</td>
<td>3</td>
<td>PSY 679: Outside Practicum$^e$</td>
<td>3</td>
</tr>
<tr>
<td>Elective Course$^c$</td>
<td>3</td>
<td>Elective Course$^c$</td>
<td>3</td>
</tr>
<tr>
<td>PSY692: Proseminar</td>
<td>1</td>
<td>PSY692: Proseminar</td>
<td>1</td>
</tr>
<tr>
<td>PSY 699: PhD Research Credits</td>
<td>1-11</td>
<td>PSY 699: PhD Research Credits</td>
<td>1-11</td>
</tr>
</tbody>
</table>

Additional Fifth Year Tasks
- Collect dissertation data (complete, and defend dissertation, if possible)
- Apply for Pre-doctoral Clinical Internship; due-dates for applications begin in November
- Dissertation proposal must be approved before October 1 to be eligible to apply
- Identify early 3-4 letter-writers for Clinical internship recommendations
Sixth Year for Student Entering in Odd Year

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Cred</th>
<th>Spring Semester</th>
<th>Cred</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY697: Clinical Internship</td>
<td>5-9</td>
<td>PSY697: Clinical Internship</td>
<td>5-9</td>
</tr>
<tr>
<td>PSY 699: PhD Research Credits</td>
<td>9-13</td>
<td>PSY 699: PhD Research Credits</td>
<td>9-13</td>
</tr>
</tbody>
</table>

Additional Sixth Year Tasks
- Complete Pre-Doctoral Internship
- Complete and defend dissertation
- Begin to look early for Post-Doctoral positions, if needed to enhance research skills and/or record, as well as to earn post-doctoral supervised clinical experience needed for licensure in particular jurisdictions.

Notes:

a. A student entering in an odd-numbered year would have the clinical courses which are taught on an every-other year basis in be opposite sequence to the student outlined here. These courses are denoted with a superscript and include PSY673: Adult Behavior D/Os, PSY670: Principles & Techniques of Psychotherapy, PSY692: Clinical Psych Seminar--Research Methods, PSY692: Clinical Psych Seminar--Affective Bases & History and Systems, PSY692: Clinical Psych Seminar--Supervision & Multicultural Issues, PSY692: Clinical Psych Seminar--Ethics & Special Research Topic, PSY692: Childhood Behavior Disorders, and PSY667: Personality Assessment.

b. To fulfill the Statistics sequence, students may do either of the following:
   1. One of these: PSY 63100 (Applied Regression), STAT 51100 (Statistical Methods), or STAT 51200 (Applied Regression Analyses), AND one of these: PSY 64600 (Statistical Approaches to Social Psychology Data), STAT 51200 (Applied Regression Analysis), or STAT 51400 (Design of Experiment)
   2. PSY 60000 and PSY 60100 as a 2-course sequence

In recent years, all students have been referred to the in-house PSY 631/PSY 646 sequence.

c. Electives refer to courses that meet Department requirements (i.e., for any three non-Clinical courses), APA requirements (i.e., in social, cognitive, and biological bases of behavior), or further advance a student’s training (i.e., advanced statistical methods).

d. When students are enrolled in external practica, they are required to register for at least one credit hour in either the adult or child practicum. They may register for more if they intend to see more clients through those practica.
APPENDIX B

ELECTIVE COURSES THAT WILL FULFILL APA REQUIREMENTS

**Cognitive Bases of Behavior**

PSY 624 - *Human learning and memory*

**Biological Bases of Behavior**

PSY 615 - *Introduction to Psychobiology/ Introduction to Behavioral Neuroscience*

**Social Bases of Behavior**

PSY 640 - *Survey of Social Psychology*

*If this course is not offered regularly, students may petition the area to allow one of the following courses to count towards the cognitive bases of behavior course:

- PSY 625 - *Complex cognitive processes*
- PSY 637 - *Human information processing*
- PSY 692 – *Introduction to Cognitive Neuroscience*
APPENDIX C

ADDITIONAL FORMS RELEVANT TO THE CLINICAL PROGRAM

SEMESTER ACTIVITY REPORT Page 23
COURSE EQUIVALENCY SHEET Page 25
FALL/SPRING GRADUATE SCHEDULE Page 26
SEMESTER ACTIVITY REPORT

Please return to Dianna. This is very important in keeping our files current and for the Annual APA Report. Please return by XXXXXXX.

Name _______________________________

Year you entered ____________________

Please put a check mark or circle those items that apply to you from January 2xxx – May 2xxx.

Presented a Paper at a Conference? (list conference[s]: ________________________)

Presented a Poster at a Conference? (list conference[s]: ________________________)

Presented an Area Colloquium? ________________________________

Presented at a Workshop? (list workshop[s]: ________________________________)

Submitted an Article to a Journal? (number of submissions: ________________)

Had an article published? (list journal[s] ________________________________)

Had a book chapter or other work published? ________________________________

TA’d for a course or Taught a course (Circle one that applies) __________________;

Established MS, Prelim, PHD (Circle one) (indicate month: ____________________)

Completed MS, Prelim, PHD (Circle one) (indicate month: ____________________)

Submitted an Internal Grant (if grant awarded, list source ____________________)

Submitted an External Grant (if grant awarded, list source ____________________)

Belonged to a professional society: (APA, AABT, ETC) (list: ____________________)

Did you receive any awards? (list: ________________________________)

Did you receive any Funding (list Krueger, etc. ________________________________)

If so, please explain how you used the money ________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Please list any conference presentations, publications, courses taught, degree requirements, grants or awards you expected. ________________________________

List anything else that you feel may be important…. ________________________________

4/6/06

SEE OTHER SIDE ►
Have you done a Practicum during January 2xxx – May 2xxx?

YES  NO

Please enter your Practicum hours:

#1 Site

Site -
Supervisor -
Total Intervention and Assessment Hours =
Total Support Hours =
Total Supervision Hours =

#2 Site

Site -
Supervisor -
Total Intervention and Assessment Hours =
Total Support Hours =
Total Supervision Hours =

#3 Site

Site -
Supervisor –
Total Intervention and Assessment Hours =
Total Support Hours =
Total Supervision Hours =

If you have received research funding (Krueger, etc.) during this time, please explain how you have used the money.
# COURSE EQUIVALENCY SHEET

Student’s Name ________________________________

Date ________________________________

Courses taken where: ________________________________

<table>
<thead>
<tr>
<th>Course as listed on transcript from other university</th>
<th>Purdue equivalent</th>
<th>Purdue Instructor’s signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This form must be submitted with your plan of study or be placed in your file until the plan is submitted.
To: Clinical Graduate Students
From: Dianna L. Batta
Date:
Re: Schedule for

Please mark off below your classes, practicum, seminars, research meetings, or any other times you are regularly NOT AVAILABLE. **Please include course and room #’s.** This will be useful in arranging meetings or taking phone messages when necessary, so please keep me posted as to any changes. Please return by (DATE). Please **Print** and fill out completely. Thanks!

Name: ________________________________

<table>
<thead>
<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30 – 8:30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:30 – 9:30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:30 – 10:30</td>
<td></td>
<td></td>
<td>Clinical Area Colloquium</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:30 – 11:30</td>
<td></td>
<td></td>
<td></td>
<td>9:00-10:00 (required)</td>
<td></td>
</tr>
<tr>
<td>11:30 – 12:30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:30 – 1:30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:30 – 2:30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:30 – 3:30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:30 – 4:30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4:30 – 5:30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Other schedules or information: ___________________________________________________________
APPENDIX D
EXAMPLE OF CONTRACT FOR OUTSIDE PRACTICA

Practicum Contract – Off-Campus
(to be used for non-PPTRC practica conducted off-site)

Purdue University
Department of Psychological Sciences
703 Third Street, West Lafayette, IN 47907-2081 (765) 494-6977
Clinical Psychology Practicum Placement Agreement

This agreement specifies the conditions of a clinical psychology practicum for (student) to be provided through (supervisor/agency/placement), located at (practicum site/primary location).

Length of Experience and Hours
This experience will involve approximately ________ hours per week during the __________ semester of 200__, beginning (date) and ending (date).

On-Site Supervisor and Contact
Supervision of clinically relevant activities will be provided by (Onsite Supervisor), Ph.D., a licensed psychologist, for at least one hour per week. The supervisor can be contacted at the following
Address: ____________________________________________________________
Phone/fax: __________________________________________________________
E-mail: _____________________________________________________________
The contact for the Clinical Program will be (Director of Clinical Training or designee for Program).

Student On-Site Responsibilities
The student’s primary responsibilities will include, but are not necessarily limited to

☐ Direct services to clients including ________
☐ Documentation, including treatment plans & progress notes
☐ Consultation with other professionals & teachers
☐ Supervision of __________________________
☐ Testing & Assessment including __________
☐ Participation in required training exercises
☐ Consultation with families
☐ Observations

Insurance
Purdue University will carry malpractice and liability insurance for the student during the period covered by this experience.

Evaluation
The student will be evaluated by the onsite supervisor at the end of the practicum experience. This evaluation will include an overall grade, and a written appraisal of the student’s clinically relevant skills, execution of agreed-upon duties, and general professional and ethical behavior and approach. The evaluation also will certify the total number of direct client contact and supervision hours obtained. Copies of this evaluation will be given to the student, supervisor, and the Director of Clinical Training.

______________________________  ____________________________
Graduate Student signature     Date
______________________________  ____________________________
(Onsite Supervisor)            Date
______________________________  ____________________________
Director of Clinical Training   Date
______________________________  ____________________________
Major Professor                Date
APPENDIX E
EXAMPLE OF CONTRACT FOR SPECIAL ON-CAMPUS PRACTICA

Practicum Contract – On Campus

(to be used for non-PPTRC practica supervised by clinical faculty, or clinically relevant activities within the Department of Psychological Sciences or elsewhere on the Purdue campus)

Purdue University
Department of Psychological Sciences
Clinical Psychology Practicum Placement Agreement

This agreement specifies the conditions of a clinical psychology practicum for _____ (student) ______ to be provided through _____ (Department/Unit/Program) ______, located at ___ (practicum site) _____.

Length of Experience and Hours
This experience will involve approximately ________ hours per week during the __________ semester of 200 __, beginning ____ (date) ____ and ending _____ (date) ______.

On-Site Supervisor and Contact
Supervision of clinically relevant activities will be provided by ______ (onsite supervisor) _____. Ph.D., a licensed psychologist, for at least one hour per week. The contact for the Clinical Program will be ______ (Director of Clinical Training or designee for Program) _______.

Student On-Site Responsibilities
The student’s primary responsibilities will include, but are not necessarily limited to

☐ Direct services to clients including __________
☐ Testing & Assessment including ___________
☐ Documentation, including treatment plans & progress notes
☐ Participation in required training exercises________
☐ Consultation with other professionals & teachers
☐ Consultation with families
☐ Supervision of __________________________
☐ Observations
☐ Office hours including __________________
☐ ______________________________________

Insurance
Purdue University will carry malpractice and liability insurance for the student during the period covered by this experience.

Evaluation
The student will be evaluated by the onsite supervisor at the end of the practicum experience. This evaluation will include an overall grade, and a written appraisal of the student’s clinically relevant skills, execution of agreed-upon duties, and general professional and ethical behavior and approach. The evaluation also will certify the total number of direct client contact and supervision hours obtained. Copies of this evaluation will be given to the student, supervisor, and the Director of Clinical Training.

______________________________ Date
Graduate Student signature

______________________________ Date
(Onsite Supervisor)

______________________________ Date
Director of Clinical Training

______________________________ Date
Major Professor
APPENDIX F  

A Sampling of Possible Outside Practicum Sites, Based on Past Student Placements

1. **Riley Hospital for Children, Indianapolis.** Dr. William Kronenberger is a pediatric psychologist and assessment specialist, Dr. Ann Lagges works with adolescents and children, and Dr. Eric Scott oversees treatment in Riley’s Child and Adolescent Anxiety Clinic. They each have provided intensive summer training, as well as opportunities for assessment and intervention practica during the academic year. They can be reached in central Indianapolis at (317) 274-8162.

2. **Adult Anxiety Practicum.** Dr. Susan Ball directs the Anxiety Clinic at Indiana University School of Medicine, in Indianapolis, and can be reached at (317) 274-7422.

3. **Wabash Valley Hospital.** Wabash Valley Hospital (WVH) is the local community mental health center (CMHC). Licensed clinical psychologists see a broad clientele from Lafayette-West Lafayette and surrounding counties on outpatient basis and can be approached about acting in a supervisory role. Some paid opportunities may be available. Also, practicum opportunities may be available for WVH’s inpatient facility in West Lafayette. Contact Dr. Dale Crowder at (765) 362-2852.

4. **Alpine Clinic.** Dr. Kelly Earnst and Dr. Jill Salem of the Alpine Clinic in West Lafayette (446-9394) offer neuropsychological assessment practicum placements for those interested in this area and in obtaining further testing experience with both adults and children. Typically, students do a year of unpaid practicum work, followed by a year of more advanced, paid practicum work.

5. **White River Psychology.** Depending on government contracts, this Indianapolis practice offers practica to clinical students. Opportunities include training in crisis intervention and advanced adult and family work. Contact Dr. William Shipley at (317) 684-7171.

6. **Danville Veteran's Administration (VA) Center.** Paid summer traineeships are usually offered at this site in Danville, Illinois (roughly an hour’s drive from campus) for students seeking advanced inpatient work with adults. Applications are due in the late spring, although practica also may be available during fall and spring semesters. Students interested in these positions should contact Dr. Tressa Cook (217) 442-8000, ext. 5171.

7. **Head Start--Mental Health Consultant Assistant.** Several paid positions typically are available each year to clinical students. Opportunities include providing workshops on mental health topics to parents and teachers, parent training with selected Head Start parents, and screening for possible mental health problems. A commitment is required for the duration of the school year, and considerable driving may be required (although Head Start pays for mileage). Students interested in these positions should contact Professor Jean Dumas for more information. (765) 494-0119.

8. **Dr. Shari Stembel** (765) 884-1506 may be willing to supervise students interested in working with children and adolescents at her practice in Fowler, IN, as well as consulting in a rural high school.

9. **Greater Lafayette Area Special Services (GLASS).** Opportunities are available for testing school-age children in the Lafayette area. Contact Damon Krug at (765) 771-6012.

10. **Christian Sarkine Autism Treatment Center** at Riley Children's Hospital in Indianapolis offers a multidisciplinary approach to assessment and parent training for children with problems in the pervasive developmental disorders spectrum. Contact Dr. Naomi Sweizy at (317) 274-8162.

Other opportunities may be available at Indianapolis Veteran's Administration Hospital and LaRue Carter Hospital in Indianapolis. See the Director of Clinical Training if you are interested in pursuing these or other opportunities.
APPENDIX G

Summary Evaluation of Practicum Performance

Graduate Student: ____________________________________________

Practicum Site: ______________________________________________

Dates/Semester of Practicum: __________________________________

Practicum Supervisor: _________________________________________

Practicum Supervisor Signature: ________________________________

Summary Evaluation:
(Overall, how would you rate this graduate student’s performance, relative to stated goals for practicum and expectations as laid out at the beginning of the experience, given their level of previous training?)

☐ SUPERIOR/EXCELLENT….. (5) (Exceptional talent & skill overall)
☐ ABOVE STANDARD……… (4) (Performance above basic levels in some areas)
☐ STANDARD/AVERAGE…… (3) (Basic competent, appropriate, effective performance in most areas)
☐ BELOW STANDARD……… (2) (Shows significant deficits requiring attention)
☐ WELL BELOW STANDARD.. (1) (Shows pronounced and unacceptable performance deficits)

Narrative Evaluation:
(Please comment below in more detail about the student’s strengths, weaknesses, and areas for further growth. Please feel free to attach your own comments separately on your letterhead and include with the rest of this form.)
SUPERVISEE PERFORMANCE EVALUATION

Supervisee: ______________________________________________________________

Period Rated: ____________________________________________________________

Supervisor: ______________________________________________________________

Please rate the supervisee's performance for the period indicated. Rate the supervisee in comparison with the average supervisee at the same level of training. Include comments at the bottom when assigning Below or Well Below standard ratings. Review this evaluation with the supervisee and have the supervisee sign at bottom.

Circle one:
1 = Well below standard   2 = Below standard   3 = Standard   4 = Above standard
5 = Well above standard   NA = Not applicable

Professional Practice
a. Attendance/punctuality 1 2 3 4 5 NA
b. Responsiveness to supervision 1 2 3 4 5 NA
c. Relations with staff 1 2 3 4 5 NA
d. Relationships with clients 1 2 3 4 5 NA
e. Ethical practice 1 2 3 4 5 NA
f. Verbal communication 1 2 3 4 5 NA
g. Written communication 1 2 3 4 5 NA
h. Treatment team participation 1 2 3 4 5 NA
i. Understanding of multicultural issues/individual differences. 1 2 3 4 5 NA
j. Seeks supervision when needed 1 2 3 4 5 NA
k. Seeks consultation when needed 1 2 3 4 5 NA
l. Initiative/independence 1 2 3 4 5 NA
m. Judgment/maturity 1 2 3 4 5 NA
n. Open to personal development 1 2 3 4 5 NA

Assessment Skills
a. Knowledge of instruments and methods 1 2 3 4 5 NA
b. Formulation of referral questions 1 2 3 4 5 NA
c. Test administration:
   Intellectual 1 2 3 4 5 NA
   Neuropsychology 1 2 3 4 5 NA
   Personality 1 2 3 4 5 NA
   Projectives 1 2 3 4 5 NA
d. Test interpretation:
   Intellectual 1 2 3 4 5 NA
   Neuropsychology 1 2 3 4 5 NA
   Personality 1 2 3 4 5 NA
   Projectives 1 2 3 4 5 NA
e. Rapport with clients 1 2 3 4 5 NA
f. Report writing 1 2 3 4 5 NA
g. Provides feedback to client 1 2 3 4 5 NA
### Intervention Skills

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Individual therapy skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>b. Group therapy skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>c. Rapport/empathy in therapy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>d. Developing a clear treatment plan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>e. Intervention based on theory/research</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>f. Intervention based upon client needs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>g. Evaluates progress regularly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>h. Addresses termination issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
</tbody>
</table>

### Other

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA</td>
</tr>
</tbody>
</table>

### Overall Performance

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
</table>

### COMMENTS:
The Clinical Psychology Program is accredited by the American Psychological Association. Questions or concerns can be directed to:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
http://www.apa.org/ed/accreditation
(202) 336-5979
(202) 336-5978 FAX

Revised 4/2013