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OVERVIEW OF GRADUATE TRAINING

DEPARTMENT OVERVIEW & HISTORY

The University of North Dakota (UND) is the state’s oldest and largest institution of higher learning with an enrollment of about 13,000 students. UND was founded in 1883, six years before North Dakota became a state, and it currently is the largest post-secondary educational institution in the Dakotas, Montana, Wyoming, or Idaho. UND supports 243 fields of study, including 56 master’s programs, 29 doctoral programs, and North Dakota’s only law and medical schools. UND’s main campus is located on 570 acres in the heart of Grand Forks (population approximately 54,000) on the North Dakota-Minnesota border on the eastern edge of the northern plains. UND is accredited by the North Central Association of Colleges and Schools.

The Psychology Department has a multidimensional mission to provide quality undergraduate and graduate education, student advisement at both the baccalaureate and post-baccalaureate levels, teacher education for graduate students pursuing higher education positions, and a high level of faculty and student scholarship. The department also commits to efforts to enhance mental health care service delivery in underserved populations by underrepresented emerging professionals via our Indians in Psychology Doctoral Education (INPSYDE) clinical training program. We ultimately assume broad commitments to both university general education (providing service courses for between 1,800 and 2,000 students each semester) and psychology undergraduate training (>400 majors and 150 minors). We maintain large graduate training commitments to our clinical Ph.D. (n = 38), general/experimental Ph.D. (n = 10), forensic M.S. (n = 8), and forensic M.A. (n > 60) students.

Students are admitted into one of four different training tracks in the Department of Psychology: Clinical Ph.D. program, General/Experimental Ph.D. program, Forensic M.S. program, or Forensic M.A. distance program. For a listing of the core faculty in each area, see Appendix A.

UND does not offer a terminal master’s degree in clinical or general experimental psychology. However, the department awards a MA degree in general psychology after completion of the thesis (and remaining curriculum requirements) for students enrolled in one of our two Ph.D. programs. The department’s graduate programs are designed for residential students who are enrolled full-time (part-time students are not admitted). Both Ph.D. programs are scientifically-oriented and offer intensive training in the scholarly research and applied aspects of their areas. They are designed to produce respected scholars in the field as manifested in the generation of high quality research which is disseminated in lecturing, writing, and presentations. We also expect students to apply scientific findings in their respective area of specialization and to integrate scientific and applied activities as a method of further enhancing the quality of each.
GRADUATE ADMISSIONS

The Ph.D. program in clinical psychology typically admits 8 new students each year. The Ph.D. program in General/Experimental psychology and the M.S. program in Forensic psychology typically admits 2-3 new students each year. All department faculty are involved in admissions decisions for both programs. The Psychology Department Admissions Policy is described in Appendix B. Guidelines for clinical students who are admitted with advanced degrees are described in Appendix C.

SEQUENTIAL STEPS IN GRADUATE TRAINING (CLINICAL & G/E)

First Year Summary

1. Form Master’s Committee
2. Develop and get approval for Master’s Program of Study
3. Propose a Master’s Thesis Project

Second Year Summary

1. Collect Master’s Thesis data
2. Prepare Thesis
3. Obtain Preliminary Approval of Thesis
4. Master’s Oral Examination (Grad School and newsletter notification of preliminary approval must occur at least a week before the final defense and within Graduate School semester deadlines if you wish to participate in the graduation ceremony for that semester)
5. Final Approval of Master’s Thesis
6. Department vote on Student Continuation in the Doctoral Program.

Third Year Summary

1. Form Doctoral Committee
2. Develop and obtain approval for Program of Study (see Appendix D)
3. Comprehensive Examination (should begin in September)
4. Advisory Committee approval for admission to doctoral candidacy
5. Propose Doctoral Project

Fourth Year Summary

1. Dissertation Outline Approval necessary to stand for an internship readiness vote
2. Gain IRB approval
3. Complete Data Collection & Analysis
4. Complete dissertation draft with approval by advisor for committee circulation
5. Get signatures on preliminary approval form for dissertation
6. Ph.D. Oral Examination (Grad School and newsletter notification of preliminary approval must occur at least two weeks before the final defense and within Graduate School semester deadlines if you wish to participate in the graduation ceremony for that semester)
7. Final Approval of Dissertation

Fifth Year Summary

1. Successfully Complete the Clinical Internship (Clinical Students Only)

THE PH.D. CLINICAL PSYCHOLOGY PROGRAM

The UND clinical psychology training program resides in a Department of Psychology which has a multidimensional mission to provide quality undergraduate education, graduate clinical training, student advisement at both the baccalaureate and post-baccalaureate levels, teacher education for graduates assuming higher education positions, faculty and student scholarship which advances psychology as a behavioral science, and mental health service providers in rural Native American communities via our Indians in Psychology Doctoral Education (INPSYDE) program. The Ph.D. program in clinical psychology has been accredited by the American Psychological Association since 1969 (750 First Street, Washington, D.C. 20002, 202-336-5979). Consistent with this mission, the Department of Psychology strives to meet its extensive commitments to university general education (providing service courses for between 1800 and 2000 students each semester), psychology undergraduate education (serving about 400 majors and 150 minors), and psychology graduate training (serving over 50 graduate students in clinical and general/experimental psychology).

CORE, ASSOCIATED & ADJUNCT FACULTY

The clinical psychology program is served by Core, Associated, and Other faculty members.

Core faculty members are centrally involved in program development, decision-making, and student training. Core faculty activities directly related to the doctoral program include program-related teaching, research, scholarship, and/or professional activities; supervision of students’ research, students’ dissertations, and students’ teaching activities; mentoring students’ professional development, providing clinical supervision; participating in program-level evaluation of clinical competencies; monitoring of student outcomes; Developing and grading clinical comprehensive exams; and developing, evaluating, and maintaining the program. The clinical program’s core faculty membership includes Drs. Miller (Director of Clinical Training), Bradley (Director of the Psychological Services Center), McDonald (INPSYDE Director), Holm, King, Wise, Legerski, Looby, and DeYoung.
1) Appointment: Core faculty are appointed by an absolute 2/3 majority of the current core faculty.
   a) Eligibility criteria for a membership vote by the core faculty include:
i) A Ph.D. in Clinical Psychology (or a closely related discipline within Psychology).
ii) Full time employment at UND
iii) Membership in the Psychology Department
iv) Licensure, or eligibility for licensure, by the North Dakota Board of Psychologist Examiners, excluding Industrial-Organizational Psychologists.

2) Removal: Faculty may be removed from core faculty by an absolute 2/3 majority of the core faculty.
   a) Reasons for removal. Faculty may be removed from core status for any reason and at any time, but, in particular, if they fail to:
      i) Comply with comps grading assignments made by the DCT.
      ii) Provide clinical supervision of clinical students as requested by the DCT.
      iii) Participate in semiannual evaluation of students’ clinical competencies.
      iv) Attend regular program meetings.
      v) Serve on program-level committees as assigned.
      vi) Chair or serve on a clinical student’s thesis or dissertation committee within the past three years.
      vii) Meet the eligibility criteria listed above.
      viii) Treat students and faculty in accordance with professional ethics.

Associated: In addition to our core faculty the program is supported by a number of associated faculty who have doctoral degrees in other areas of psychology and make substantial contributions to the program in some of the areas identified above.

1) Appointment: Associated faculty are appointed by an absolute 2/3 majority of the core faculty.
   a) Eligibility criteria for a membership vote by the core faculty include:
      i) Full time employment at UND
      ii) Membership in the Psychology Department
      iii) A Ph.D. in Psychology, irrespective of the specialty.

2) Removal: Faculty may be removed from associated faculty by an absolute 2/3 majority of the core faculty.
   a) Reasons for removal. Faculty may be removed from associated status for any reason and at any time, but, in particular, if they fail to:
      i) Treat students and faculty in accordance with professional ethics
      ii) Meet the eligibility criteria above.
      iii) Comply with requests from the DCT to grade comps.
      iv) Meet at least one of the following criteria:
      v) Teaches one or more courses from the Clinical PhD curriculum, or has taught one of these courses in the past five years.
      vi) Chairs the thesis or dissertation of a clinical student within the past 5 years.
      vii) Co-authors, with a clinical student, a funded grant or publication in a peer-reviewed journal within the past 5 years.
      viii) Provides clinical supervision, in accordance with program standards for practicum (PSYC 580, 587 or 594), to a clinical student within the past 5 years.
“Other”: Finally, the program also benefits from the contributions of a number of other faculty (see Appendix E) who provide clinical supervision and research opportunities outside of the department on an adjunct basis. In the majority of cases, these faculty have either adjunct or clinical adjunct appointments. The DCT has the discretion to add or remove “other” program faculty.

**INSTRUCTIONAL SKILLS TRAINING TRACK (“TEACHING TRACK”)**

The Clinical Psychology Program and UND is augmented by the Department’s Instructional Skills Training Track which was established to increase the emphasis on training graduate students to be effective instructors. The program consists of two content courses, a supervised teaching experience, and a teaching placement. The intent is to provide experiences that develop necessary skills for effective instruction and allow the faculty to document a student’s progress in obtaining these skills. The Instructional Skills Training Track provides our clinical program with a vehicle to enhance student interest and ability in teaching psychology at the college level.

**QUENTIN N. BURDICK AMERICAN INDIANS IN PSYCHOLOGY PROGRAM**

Our department was selected by the American Psychological Association and subsequently mandated by federal legislation (Indian Health Care Improvement Act, 1992) to be the home of the Quentin N. Burdick American Indians in Psychology Program. As a response to this legislation, our department has supported the INPSYDE (pronounced, inside) Program (Indians in Psychology Doctoral Educations) as a vehicle for meeting the objectives of the Quentin N. Burdick legislation. INPSYDE’s objectives include: a) increasing awareness of, interest in, and motivation for training and careers in mental health among Native American students, b) building and maintaining pipelines between tribal colleges and the University of North Dakota, c) recruiting Native American students for undergraduate and graduate study in psychology (the clinical psychology program has committed to admitting two INPSYDE students each year and there are currently 9 such students enrolled), d) providing academic, financial, personal, and cultural support for Native American students, e) providing psychological services to underserved Native American communities, and f) developing new, and enhancing current, culturally-relevant courses and field-based experiences in clinical psychology. The INPSYDE program is an integral part of our clinical program and provides unique opportunities for all of our students. Financial support is available for undergraduate and graduate education in psychology for American Indian students showing interest and aptitude. INPSYDE also has available a number of tuition scholarships for students enrolled at tribal colleges.

The INPSYDE Program also aims to increase the number of non-Native psychologists who have at least an elementary knowledge of issues pertinent to rural, reservation American Indian communities. The program works with UND’s Psychology Department to increase awareness, knowledge, and sensitivity of ALL clinical psychology doctoral students (Native and non-Native) to issues pertinent to the mental health of rural, reservation American Indian community members. Efforts are routinely made to develop new, and enhance current, culturally-relevant
courses and field-based training experiences in clinical psychology. The program assists UND and other universities and colleges to develop course work on psychological development, mental health issues, behavior problems, and assessment and therapy issues pertinent to Native Americans. As part of this goal, we hope to be able to increase the knowledge base pertinent to mental health issues in Native American communities. The existing literature pertaining to psychology, mental health, and Native Americans is minimal and often inappropriately done. Most of the literature has been created by non-Native scholars, some of whom have little understanding of tribal differences and of the historical context which permeates Native American communities. The program encourages Native students and Native faculty to contribute to a greater understanding of psychology and mental health in specific Native American communities.

CLINICAL PROGRAM PHILOSOPHY, GOALS, & OBJECTIVES

The UND clinical psychology program endorses a scientist-practitioner model of training that prepares students for careers as academicians, researchers, and/or clinicians. The program faculty have specifically endorsed the formulation of the scientist-practitioner model that emerged from the Gainesville Conference in 1990. Cynthia Belar and Nathan Perry (1992) provide an excellent synopsis of the basic philosophy underlying the scientist-practitioner model as described at the Gainesville Conference:

“The scientist-practitioner model of education and training in psychology is an integrative approach to science and practice wherein each must continually inform the other. This model represents more than a summation of both parts. Scientist-practitioner psychologists embody a research orientation in their practice and a practice relevance in their research. Thus, a scientist-practitioner is not defined by a job title or a role, but rather by an integrated approach to both science and practice. The model entails development of interlocking skills to foster a career-long process of psychological investigation, assessment, and intervention” (Belar and Perry, 1992, p. 72).

It is our belief that the integration of science and practice is crucial to the maintenance and advancement of clinical psychology as a science and a profession. Accordingly, the clinical faculty have adopted and communicated a number of training goals and specific objectives. A general description and formal statement of each of our five program goals and related objectives are presented below:

The clinical psychology graduate program is designed to prepare students to function as scientist-practitioners in a variety of employment settings. Accordingly, emphasis is placed on the routine application of the scientific method, the acquisition of empirically-supported clinical assessment and intervention skills, and the integration of science and practice in addressing problems facing individuals, families, and communities. We encourage students to seek careers which support the application of behavioral science research in the delivery of psychological services. Although our program has the flexibility to allow students to tailor their training toward careers emphasizing either the science or practice of psychology, the faculty emphasizes the integration of science and practice (i.e., applying science to practice and practice to science) as the defining feature of our training model. Graduates are expected to manifest their scientist-practitioner identities in all aspects of their professional behavior no matter the career choices,
job titles, role responsibilities, and/or daily activities that they subsequently embrace. Our program educates scholars, researchers, and clinicians who serve the people of North Dakota as well as the rest of the nation and world through our teaching, research, and application of behavioral science. We have been accredited by the APA since November 1st of 1969.

Clinical students in our program should anticipate and welcome exposure to a broad spectrum of issues and topics in the field of psychology that extend beyond their clinical specialization. Their level of knowledge regarding the field of general psychology should parallel that of graduates in other experimental specializations, and each student is expected to establish a firm theoretical and academic foundation that will support the later pursuit of more specialized clinical interests. First and foremost, graduates of our program should view themselves as behavioral scientists in the academic tradition.

**Table 1. Clinical Psychology Program Competencies: Goals & Objectives**

<table>
<thead>
<tr>
<th>GOAL I: students and program graduates will behave in an ethical and professional manner when meeting their responsibilities as scientist-practitioner clinical psychologists; e.g. demonstrate professionalism, have effective relationships, &amp; practice reflectively.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I.A. Professionalism:</strong> Professional values &amp; ethics as evidenced in behavior &amp; comportment that reflects the values &amp; ethics of psychology, integrity, &amp; responsibility.</td>
</tr>
<tr>
<td>• I.A.1. <strong>Integrity:</strong> Work as psychologist-in-training infused with adherence to professional values. Recognizes situations that challenge adherence to professional values</td>
</tr>
<tr>
<td>• I.A.2. <strong>Deportment.</strong> Professionally appropriate communication &amp; physical conduct, including attire, across different settings</td>
</tr>
<tr>
<td>• I.A.3. <strong>Accountability.</strong> Consistently reliable; consistently accepts responsibility for own actions</td>
</tr>
<tr>
<td>• I.A.4. <strong>Concern for the Welfare of Others.</strong> Consistently acts to understand &amp; safeguard the welfare of others</td>
</tr>
<tr>
<td>• I.A.5. <strong>Professional Identity.</strong> Emerging professional identity as psychologist; uses resources (e.g., supervision, literature) for professional development</td>
</tr>
</tbody>
</table>

**I.B. Effective Relationships:** Relate effectively & meaningfully with individuals, groups, and/or communities.

• I.B.1. **Interpersonal Relationships.** Forms & maintains productive & respectful relationships with clients, peers/colleagues, supervisors & professionals from other disciplines
• I.B.2. **Affective Skills.** Negotiates differences & handles conflict satisfactorily; provides effective feedback to others & receives feedback nondefensively
• I.B.3. **Expressive Skills.** Clear & articulate expression

**I.C. Reflective Practice/Self-Assessment/Self-Care:** Practice conducted with personal & professional self-awareness & reflection; with awareness of competencies; with appropriate self-care.
Table 1. Clinical Psychology Program Competencies: Goals & Objectives

- **I.C.1. Reflective Practice.** Broadened self-awareness; self-monitoring; reflectivity regarding professional practice (reflection-on-action); use of resources to enhance reflectivity; elements of reflection-in-action
- **I.C.2. Self-Assessment.** Broadly accurate self-assessment of competence; consistent monitoring & evaluation of practice activities
- **I.C.3. Self-Care (attention to personal health & well-being to assure effective professional functioning).** Monitoring of issues related to self-care with supervisor; understanding of the central role of self-care to effective practice

**GOAL II: Students and program graduates will recognize and appreciate the importance of cultural diversity and individual differences in understanding human psychological functioning:**

**II.A. Ethical Legal Standards & Policy:** Application of ethical concepts & awareness of legal issues regarding professional activities with individuals, groups, & organizations

- **II.A.1. Knowledge of ethical, legal & professional standards & policy.** Intermediate level knowledge & understanding of the APA Ethical principles & Code of Conduct & other relevant ethical/professional codes, standards & guidelines; laws, statutes, rules, regulations
- **II.A.2. Awareness & Application of Ethical Decision Making.** Knows & applies an ethical decision-making model & is able to apply relevant elements of ethical decision making to a dilemma
- **II.A.3. Ethical Conduct.** Knowledge of own moral principles/ethical values integrated in professional conduct

**II.B. Individual & Cultural Diversity:** Awareness, sensitivity & skills in working professionally with diverse individuals, groups & communities who represent various cultural & personal background & characteristics defined broadly & consistent with APA policy.

- **II.B.1. Self as Shaped by Individual & Cultural Diversity** (e.g., cultural, individual, & role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, & socioeconomic status) & context. Monitors & applies knowledge of self as a cultural being in assessment, treatment, & consultation
- **II.B.2. Others as Shaped by Individual & Cultural Diversity** (e.g., cultural, individual, & role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, & socioeconomic status) & context. Applies knowledge of others as cultural beings in assessment, treatment, & consultation of others
- **II.B.3. Interaction of Self & Others as Shaped by Individual & Cultural Diversity** (e.g., cultural, individual, & role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, & socioeconomic status) & context. Applies knowledge of the role of culture in interactions in assessment, treatment, & consultation of diverse others
- **II.B.4. Applications Based on Individual & Cultural Context.** Applies knowledge, sensitivity, & understanding regarding ICD issues to work effectively with diverse others in assessment, treatment, & consultation
Table 1. Clinical Psychology Program Competencies: Goals & Objectives

GOAL III. Graduates of our program will demonstrate knowledge in psychopathology and competency in the delivery of a wide range of clinical assessment and psychotherapy services that are theory-based and empirically-supported.

III.A. Assessment: Assessment & diagnosis of problems, capabilities & issues associated with individuals, groups, and/or organizations

- III.A.2. Evaluation Methods. Awareness of the strengths & limitations of administration, scoring & interpretation of traditional assessment measures as well as related technological advances
- III.A.3. Application of Methods. Selects appropriate assessment measures to answer diagnostic question
- III.A.4. Diagnosis. Applies concepts of normal/abnormal behavior to case formulation & diagnosis in the context of stages of human development & diversity
- III.A.5. Conceptualization & Recommendations. Utilizes systematic approaches of gathering data to inform clinical decision-making

III.B. Intervention: Interventions designed to alleviate suffering & to promote health & well-being of individuals, groups, and/or organizations.

- III.B.1. Knowledge of Interventions. Knowledge of scientific, theoretical, empirical & contextual bases of intervention, including theory, research, & practice
- III.B.2. Intervention Planning. Formulates & conceptualizes cases & plan interventions utilizing at least one consistent theoretical orientation
- III.B.4. Intervention Implementation. Implements evidence-based interventions that take into account empirical support, clinical judgment, & client diversity (e.g., client characteristics, values, & context)
- III.B.5. Progress Evaluation. Evaluate treatment progress & modify treatment planning as indicated, utilizing established outcome measures

GOAL IV. Students and program graduates will demonstrate an appreciation of the scientific method and applicable knowledge in the areas of research methodology (including techniques of data collection and analysis) and the biological, developmental, cognitive-affective, and social bases of behavior:

IV.A. Scientific Knowledge & Methods: Understanding of research, research methodology, techniques of data collection & analysis, biological bases of behavior, cognitive-affective bases of behavior, & development across the lifespan. Respect for scientifically derived knowledge.

- IV.A.1. Scientific Mindedness. Values & applies scientific methods to professional practice
Table 1. Clinical Psychology Program Competencies: Goals & Objectives

IV.B. Research/Evaluation: Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities

- IV.B.1. Scientific Approach to Knowledge Generation. Development of skills & habits in seeking, applying, & evaluating theoretical & research knowledge relevant to the practice of psychology
- IV.B.2. Scientific Foundation of Professional Practice. Apply scientific methods to evaluating own practice

GOAL V. Students and program graduates will show competency in assuming roles that extend beyond the direct delivery of mental health services as a scientist-practitioner clinical psychologist:

V.A. Supervision: Supervision & training in the professional knowledge base & of evaluation of the effectiveness of various professional activities.

- V.A.1. Knowledge of Supervisory Responsibilities. Knowledge of purpose for & roles in supervision
- V.A.3. Skills Development / Communication Effectiveness / Receptiveness to Feedback. Knowledge of the supervision literature & how clinicians develop to be skilled professionals
- V.A.4. Awareness of Factors Affecting Supervisory Relationship. Knowledge about the impact of diversity on all professional settings & supervision participants including self as defined by APA policy; beginning knowledge of personal contribution to therapy & to supervision
- V.A.5. Ethical & Legal Standards. Knowledge of & compliance with ethical/professional codes, standards & guidelines; institutional policies; laws, statutes, rules, regulations, & case law relevant to the practice of psychology & its supervision

V.B. Consultation: The ability to provide expert guidance or professional assistance in response to a client's needs or goals.

- V.B.1. Understanding of Role of Consultant. Knowledge of the consultant’s role & its unique features as distinguished from other professional roles (such as therapist, supervisor, teacher).
- V.B.2. Addressing Referral Question. Knowledge of & ability to select appropriate means of assessment to answer referral questions
- V.B.3. Communication of Findings. Identifies literature & knowledge about process of informing consultee of assessment findings

NORMAL PROGRESS REQUIREMENTS FOR CLINICAL STUDENTS

Appendix F presents the clinical curriculum. To maintain good standing in the clinical program you must continue to meet all of the following normal progress expectancies:
1. Cumulative GPA > 3.5 at all times in the program;
2. Satisfactory grades in all PSYC 580 & 587 credits;
3. Master’s Thesis proposal by September 7th of fall semester, second year;
4. Master’s Thesis defense before first day of fall semester, third year;
5. ** Master’s Thesis and degree completed within three years of enrollment;
6. Comps completed by March 1st of third year;
7. Dissertation proposed before first day of fall semester, fourth year;
8. Internship match before March 1st of fourth year;

* Once benchmark met then student returns to normal progress.
** A failure to meet this requirement would preclude enrollment past the M.A. degree.

*Note. A student must petition the faculty to apply for a third year placement if his or her thesis has not yet been successfully proposed. A student must petition the faculty to apply for a fourth year placement if his or her thesis has not yet been successfully completed.*

**Comps Eligibility**

You will not be eligible to take comprehensive exams until you successfully complete all of your M.A. degree requirements and are permitted by the program to continue on for your Ph.D. degree. A cumulative graduate grade point average of 3.5 and timely completion of the thesis (within three years of enrollment) are prerequisites for the faculty vote which must earn majority support from both the core and combined core + associated faculty. You would be permitted to remain enrolled in either thesis or continuing enrollment credits to complete your M.A. degree in general psychology if unsuccessful in meeting this Ph.D. continuation requirement.

**Internship Readiness Eligibility**

Before you can stand for an internship readiness vote in your fourth year you will need to meet the PSY 580 and 587 practicum requirements established below (or see Appendix F), successfully complete all areas of your doctoral comprehensive examination, and have an approved dissertation outline filed with the School of Graduate Studies. Prior to the readiness vote (or before October 15th of your application year, whichever comes first), you must have uploaded your AAPI materials to the department shared drive for review by the program faculty.

**CLINICAL COMPREHENSIVE EXAMS**

Clinical students are required to complete comprehensive exams that evaluate knowledge and critical thinking in five areas (Assessment, Applied Methods, Therapeutic Interventions, Psychopathology, and Ethics & Professional Issues).

There are two broad requirements for comps. First, students prepare a detailed written clinical case summary, which is reviewed and approved by a committee of three core faculty (distinct from the student’s thesis/dissertation committees), and then defends their case before this same committee, members of which may ask questions relevant to any of the five comps areas.
Second, the student demonstrates their ability to produce meaningful research by presenting evidence (a) of having presented research at a professional conference, and (b) that an empirical article, submitted to a peer-reviewed journal, has been under review by that journal.

*The Clinical Comprehensive Exam Procedure is detailed in Appendix G.*

The clinical faculty also provides individualized tutoring (COPE: Comps Optional Preparation Exercises; see Appendix H) for students who need assistance in preparing for comprehensive exams. COPE individualized faculty tutoring hours should be documented by the student to the DCT on a weekly basis using the form including in Appendix I.

**CLINICAL RESEARCH TRAINING**

Faculty research interests and specializations are presented in Appendix A. Graduate students are expected to work closely with at least one faculty member on research throughout their five years at UND, and programs of study typically require substantial thesis, dissertation, and sometimes individual research (PSYC 596) credit hours. All students complete an empirical thesis and dissertation that represents original work of a quality the faculty considers worthy of publication in a national or international peer-reviewed publication. A detailed prospectus of all thesis and dissertation projects must be presented orally and accepted by the advisory committee prior to data collection.

Final oral defenses are also mandatory, and open to the public as advertised in the campus newsletter. Thesis and dissertation defenses are predominantly focused on the results and interpretation of the completed project, but committee members do have the liberty to examine the student in regard to any aspect of their academic preparation. By Graduate School policy, advisors are required to assign satisfactory or unsatisfactory grades for incomplete thesis or dissertation credits at the end of each semester. Students are encouraged to discuss suitable progress on their thesis or dissertation project with their advisors at the beginning of each semester to assure satisfactory grades for all credits for which he or she enroll. Clinical students should similarly secure the approval of their thesis and dissertation advisor prior to committing to work on peripheral projects with other researchers in or out of the department.

The program has committed itself in recent years to a renewed focus on completion of the thesis and dissertation in a timely manner. While we maintain a strong related interest in student scholarly productivity (publications and presentations), normal progress is essential with oversight responsibility falling heavily on the committee chairperson.

**Thesis/Dissertation Committee Selection**

Thesis committees must be comprised of three clinical program faculty with at least one core member. Dissertation committees are comprised of at least four program faculty with at least two core members (plus one “outside” member appointed by the School of Graduate Studies). Thesis and dissertation committee can be chaired by either core or associated clinical program
members (assuming appropriate membership on the Graduate School faculty). Although admissions are determined partially by the applicant’s match with faculty research interests, students are not required upon admission to work with a specific advisor. Incoming students are also expected to carefully investigate the research and mentorship opportunities made available by faculty members within the department. Students typically speak with faculty members about their research and professional interests, and it is common for them to also consult with upper-level peers who have had experience working with particular faculty members.

The Psychology Department and School of Graduate Studies have traditionally allowed students maximum latitude in selecting committee memberships. By the end of the Fall semester of their first year, most students have secured the commitment of a faculty member to serve as a thesis committee chairperson and mentor for their professional development. In most cases this mentor-student match is established during the admissions process, but students are encouraged to consider their decision early in the Fall semester of their first year prior to making a formal request to the School of Graduate Studies Dean (via the department chair) that a particular thesis committee be assigned. The department chairperson or DCT may occasionally suggest alternatives as a method to balancing committee memberships within the department. Thesis and dissertation committees are usually, but not always, chaired by the same faculty member. Dissertation committees are assigned through the same process described above, and students are at liberty to change to an alternative advisor once they are advanced into the doctoral program. Outside committee members are usually assigned at the discretion of the School of Graduate Studies Dean, but student preferences can also be advanced and are usually satisfied. About 20% of the thesis and dissertation committees formed since our last self-study have been chaired by non-program faculty members. The DCT communicates closely with non-program committee chairs to alert them of policies or issues raised which may affect the welfare of their advisees.

Students are expected to present and publish their research. A majority of the clinical students present their research at local (e.g., North Dakota Psychological Association), regional (e.g., Midwest Psychological Association), and national (e.g., Association for Behavioral and Cognitive Therapies) conferences each year. At the end of each semester students are asked to provide citations of their scholarly achievements which are used by the DCT to generate the Clinical Performance Summary Document for each semester. This document summarizes both applied work and research accomplishments for each student. It is important that you keep the program informed regarding all of your presentation and publications. This information is also used for our annual accreditation reports to APA.

PROFESSIONAL DEVELOPMENT SEMINAR (PDS) SERIES

All enrolled students, prior to internship, are required to attend our professional development series which is held on Fridays from 4:00-5:00pm in CL 302. Compliance with the PDS requirement falls under the Practicum Readiness competency of Accountability, Item I.A.3.p4; i.e., each student is “aware of & follows policies & procedures of institution”, and the Internship Readiness competency of Professional Identity, Item I.A.5.i1., i.e., each student “attends colloquia, workshops, conferences” (see Appendix J). As such, compliance is evaluated at the
semester clinical evaluation meeting, and bears on the faculty evaluation of readiness for practicum work and/or clinical internship.

**Attendance & Remediation.**

Attendance is mandatory, and absences must be remediated.

- **Remediation for Absence(s).** All absences, excused, “allowable” (see below), or otherwise, must be made up by reviewing materials (video, audio, PowerPoint, etc.) from the session which can be found on the Graduate Students in Clinical Psychology Blackboard page, usually under Tegrity Classes in the left-hand menu. All absences described below must be remediated.
  - Note that supervisors are at liberty to require additional make up activities, such as summary reports; as a result, requirements for remediation of missed sessions will differ from team-to-team, but will include, at a minimum, review of materials from the session.
- **Allowable Absences.** A student may miss up to 2 sessions in a semester (Fall or Spring) without explanation. The program considers internship interviews, formal professional conferences, and comprehensive exams as excused absences that will not count toward this maximum number of missed sessions. All other circumstances such as illness, family problems, personal travel, or other routine scheduling conflicts do not constitute excused absences.
- **Petitions for Additional Absences.** Students retain the option of petitioning the faculty for more than 2 absences per semester in unavoidable circumstances, e.g., needing to travel more than 100 miles to a remote 587 placement). Supporting materials—e.g., a letter from a placement supervisor—may be required by faculty in order to approve a petition.
- **Timeframe for Remediation:** All remediation must be completed before reading and review day of the semester in which sessions were missed.
- **False reports of attendance or remediation** would be viewed as academic dishonesty, and appropriate action will be taken by faculty in such cases.

**CLINICAL PRACTICUM TRAINING**

**Eligibility for Assessment & Intervention Practica**

While supervised clinical practice is essential to development of future scientist-practitioners, the program is obliged to safeguard the public throughout the provision of these services, consistent with ethics and law, while offering a set of clinical experiences that progress logically with respect to complexity and difficulty, consistent with each student’s classroom training, developing skill base, and competence. Thus, the program specifies sequential levels of eligibility for more increasingly complex and independent clinical work throughout the student’s training.

Students entering the program with a BA or BS, or with a MA or MS that did not include a supervised clinical practicum (BAC/MAC), are automatically considered to be training at the “Pre-Practicum” level, and are not allowed independent supervised practice, except under conditions specified in the table below. These students are evaluated twice yearly until they
have demonstrated all Pre-Practicum competencies (see APPX J), usually at the end of the fall semester of year two. Once the student has been declared “Practicum Ready” by the program, they enter the “pre-Internship stage of training, and are allowed to practice under supervision as specified below and by other program policies and practicum syllabi.

Students entering the program with a MA/MS and some graduate-level supervised clinical practica (MAC-P) may be considered “Practicum-Ready” if their pre-practicum competencies can be formally verified by their prior clinical supervisor(s); otherwise, they enter the program at the Pre-Practicum level until they can demonstrate all Pre-Practicum competencies (usually at the end of fall semester of year one), at which point the program will begin to evaluate them at the Pre-Internship level of training (see the relevant section of this handbook for information on “Internship Readiness”).

Summary of Readiness/Eligibility Timeline

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Fall</td>
<td>Spring</td>
<td>Sum</td>
<td>Fall</td>
</tr>
<tr>
<td>BAC/</td>
<td>CA I</td>
<td>CA II</td>
<td>580 (1)</td>
</tr>
<tr>
<td>MAC</td>
<td></td>
<td></td>
<td>594 (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MAC-P</td>
<td>580 (1)</td>
<td>580 (1)</td>
<td>580 (1) &amp; maybe</td>
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<td></td>
<td>580 (1) &amp; maybe</td>
<td>587 (1)</td>
<td>580 (1) &amp; maybe</td>
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</tbody>
</table>

1 MAC-P student could immediately practice as “practicum ready”, if former supervisor from MA/MS program endorses all pre-practicum competencies. If not, then the student defaults to “pre-practicum” status, while outstanding pre-practicum competencies are evaluated.

### Competency Level

<table>
<thead>
<tr>
<th>Pre-Practicum</th>
<th>Pre-Internship/Practicum-Ready</th>
<th>Internship-Ready</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allowed only with direct supervision.</td>
<td>Allowed with or without direct supervision.</td>
<td>Allowed with or without direct supervision.</td>
</tr>
</tbody>
</table>

**“Direct Supervision”** occurs only if the supervised contact is approved by the licensed supervisor, and either or both of the following conditions apply:

- **Co-Therapy/Co-Assessment**, where the co-therapist or co-assessor is both (a) an approved senior student or clinical supervisor, and (b) present throughout all client contacts. An approved senior student co-therapist is designated by the clinical supervisor, and must also (a) be concurrently designated as “practicum-ready” or “internship-ready” by the program, and (b) have completed graduate-level coursework in clinical supervision.

- **Direct Observation**; the student is directly observed, in real time, throughout all clinical contacts by a designated peer supervisor or team/placement supervisor. Direct observation could include live viewing of the intervention or having the supervisor present in the room throughout the contact. Peer supervisors would be designated by the clinical supervisor, and must also (a) be concurrently designated as “practicum-ready” or “internship-ready” by the program, and (b) have completed graduate-level coursework in clinical supervision.
PSYC 580: Psychological Services Center (PSC).

Each year you will be assigned to one of the four PSC supervision teams. These teams are primarily supervised by program faculty, and students should expect to work with as many different PSC supervisors as possible during their time in the program. You will be assigned to a team during your first year, but, in subsequent years, your preferences will be taken into consideration during team assignments (see Appendix K). This process usually occurs late in the Spring semester. PSC teams ideally consist of one or two students from each class. Student responsibilities, duties, and opportunities will vary from team to team.

The clinical curriculum provides requirements regarding the number of Clinical Practice (PSY 580) credit hours in which you should enroll each semester. In total, 8 credits are required for the Ph.D. (see Appendix F). In special cases (see “Practicum Course Enrollments”, below) students will not serve on a PSC team for all of these semesters. Even in these cases, an absolute minimum of 6 semesters’ service on a PSC team is required.

PSC Privileges

The importance of earning and maintaining privileges to work at PSC and other facilities in the future warrants close attention. You will be given an opportunity to apply for annual privileges at PSC during the orientation meeting held on the Monday that precedes the first day of fall classes. During that orientation meeting you will be given training in PSC policy with special emphasis on federal HIPAA (Health Insurance Portability and Accountability Act) and FERPA (Family Educational Records Privacy Act) laws, with all of the associated privacy and confidentiality requirements. Professional privileges can be rescinded at any time by the PSC or program director, with deferral to the clinical faculty, in response to concerns about service delivery quality, professionalism, or ethical lapses, should they occur.

First-Year PSC Service

First year clinical graduate students are also required to schedule two hours of their time a week to PSC as a method to effectively orient and integrate students into clinic responsibilities and functions. The program has been making recent efforts to initiate training in direct service delivery to students as early as summer of their first year. This first year PSC orientation is essential to support this program initiative. Incoming clinical graduate students accepted with advanced standing (Master’s degree with an accepted empirical thesis) are permitted to complete this PSC orientation requirement in one rather than two semesters.

PSYC 587: External Placements

The clinical program also maintains agreements with a variety of institutions within and beyond the Grand Forks community to provide more extensive training opportunities. Upper-level students compete for these positions in April and May of each year. Clinical students are required to complete at least 7 PSYC 587 credits (one full year at 16-20 hrs/wk) placement prior
to internship with most students completing two years to enhance their internship competitiveness (see PSYC 587 syllabus in Appendix L). We have established the following guidelines which are used to direct the assignment process:

1. Only upcoming third and fourth year clinical students will be allowed to compete for a paid ½-time placement. This rule will apply to upcoming second and third year students who enroll with a Master’s degree and advanced standing (empirical thesis). The program will therefore provide opportunities for students to compete for a paid ½-time placement for only these two successive years*. No additional first or second round opportunities will be provided for any reason including, but not limited to, an unsuccessful attempt to land a paid placement in one of the two years, sitting out for a year to meet other personal or career objectives, insufficiency in the number of available paid placements, restrictions in ability to accept offers from distant sites, complaints about inadequate prior or future department GTA/GSA/GRA/tuition waiver support, or other factors that might contribute to any loss of funding during these two years of practicum training. Students unable to secure a funded ½-time rotation may petition the program to commit to an unfunded placement with PSYC 587 credits as specified in our policy statement below (Practicum Course Enrollments). They may also be given an opportunity to compete for a paid placement as a third round applicant if excess positions are available.

   a. Hours of practicum training that were completed as additional (either paid or unpaid) supervised practicum experience (graded as PSYC 580 credits) do not affect the eligibility of applicants during their third and fourth year. This policy only applies to pay opportunities to apply for funded ½-time rotations graded as PSYC 587 credit.

2. Students will provide the DCT with one copy of their vita by April 1st for each of the placement sites to which they wish to apply. The DCT will inform the clinical faculty of the student preferences and with program approval will forward the names of interested students to each of the placement supervisors on April 15th. Students can apply to additional sites at a later date through the DCT but they will assume responsibility for any competitive disadvantage that occurs due to possible further delays in gaining program approval and forwarding their vita.

3. Students will not usually be allowed to compete for a placement at a site where a year of practicum was previously completed. Students must petition the clinical faculty if they wish to apply to a particular placement for a second year.

4. Placement supervisors will make all decisions regarding interviews and job offers based on their own criteria.

5. Once accepted, placement offers cannot be withdrawn without the approval of the placement supervisor and DCT.
6. Students are not permitted to hold more than one offer at a time. If a second offer is extended they must reject at least one of the two that they are holding.

7. Hiring decisions are always left entirely to the discretion of the site supervisor with no explanation required. Placements that remain open after the eligible third and fourth year students have been considered may be made available to clinical students who are beyond the fourth year. The DCT will decide when it is acceptable for upper-level students to apply for remaining open placement position(s).

These external practica do change from year to year, and the descriptions provided below are also modified annually by the assigned student. Placement positions also vary in their pay scale, and non-UND positions do not provide tuition waivers which can detract from their appeal for some students. Students should remember that tuition waivers never include semester fees which usually run in the hundreds of dollars. These student fees are essential for maintenance of computer labs and other technology advancements, the full-service wellness center on the north end of campus, and other expenses. Those fee obligations are not effected by practicum placement decisions. Our list of approved paid practicum placement assignments and additional supervised clinical experiences (see below) is provided as a document on our community (Psychology Graduate Students) web page. It is essential that students work only in approved practicum or additional supervised rotations. Students must keep the DCT informed of any changes in their status regarding practicum assignments. Practicing in a site without formal program approach is grounds for potential dismissal from the program.

**Additional Supervised Clinical Experiences (ASCE)**

All clinical program PSYC 587 practicum placements pay students for supervised direct assessment and/or therapy services for 16 to 20 hours a week. Students often wish to supplement their PSC (PSYC 580) and external practicum (PSYC 587) training experiences with additional hours of supervised work in other settings. Students are allowed to petition the clinical program to permit a commitment to do additional outside work that extends beyond PSC or our placements. For example, clinical students are presently earning additional supervised practicum training hours at a number of sites around the region.

First year students are permitted to petition the faculty for additional supervised practicum work to begin as early as the summer of their first year. Faculty consideration of student petitions will be restricted to assessment work with intervention experiences precluded until all pre-practicum competencies have been met. Please refer to the above section, *Summary of Readiness/Eligibility Timeline*, for more general eligibility requirements for all students.

**Petitions and Program Approval**

Petitions for these additional rotations are considered and approved for up to one year at a time. The DCT will be authorized to approve additional supervised practicum work for second year students (and above) without a petition assuming that none of the following conditions are evident:
(a) A paid PSYC 587 placement remains available and unfilled;
(b) The setting and/or supervisor have not been approved previously by the program
(c) Workload does not exceed ¾-time
(d) The student has not yet reached the fall semester of his or her second year
(e) The student is not in normal progress
(f) The student’s thesis or dissertation chair does not approve the assignment
(g) The student’s knowledge of the APA code of ethics has not been assured by successful completion of PSYC 579 or a written statement of confirmation from a core faculty member
(h) The student is not willing to commit at least 2-3 hrs/wk for the rotation.

The program must approve all requests that involve one or more violations of these above criteria. The core faculty will review the following information provided by the student:

(a) One paragraph description of the hours and activities required in the rotation;
(b) Written notice from supervisor (if requested) indicating awareness of the student’s training history and range of competence;
(c) Written student petition making a case as to why one or more exceptions should be made in regard to the above standards.

“Finders Keepers” Policy

Eligible students are encouraged to make initial overtures and try to seek out potential new ½-time practicum placement opportunities for themselves and future students. The DCT should be kept informed of anticipated contacts and will get actively involved in closing any deals (e.g., seeking program approval, memoranda of agreement, etc.) that emerge with outside institutions. In the past our placement assignment policy required that a student who successfully initiated the development of a new placement would still have to compete with peers who may also be interested in applying for the new position. This policy has now been changed to permit the DCT to assign, assuming approval by the new supervisor, the entrepreneurial student for the first year of the new rotation. This reward system has been referred to as our “finders keepers” policy.

Practicum Course Enrollments

Students must be enrolled in at least one credit hour of PSYC 580 or 587 for all practicum work completed during their time in the program (paid or unpaid, ½-time placement or additional supervised experience). On occasion (e.g., students allowed to complete practicum work during their first summer in the program) the DCT might authorize enrollment in PSYC 594 (special topics) credits to sanction and grade the applied activity. It is ultimately the responsibility of the student, however, to assure proper enrollment each semester in the practicum credit hours that are required in the curriculum.
Enrollment in PSYC 580

**PSC Team.** Students serving on a PSC clinical team beyond their first year in the program must register for one credit of PSYC 580 in each semester they serve (Spring, Fall, or Summer). Appendix F displays the required 8-credit sequence for students entering with various prior graduate training experience, e.g., students entering with a graduate degree and prior supervised clinical experience may enroll in 580 earlier than other students, and may therefore move more quickly through the clinical training sequence.

**Substitutions for PSC-Related PSYC 580 Credits/Experiences.** The program considers PSC team participation the primary and training-essential goal of PSYC 580 enrollments, because this experience, distinct from any external practica, facilitates direct oversight and evaluation of clinical competencies by core program faculty. However, exceptions to the required 8-semester PSC team experience are possible, up to a maximum of 2 credits/semesters (i.e., under no circumstances will a student be permitted to serve on a PSC team for fewer than six semesters):

- In cases of hardship (e.g., remote 587 placements) students may petition faculty for up to a two-semester release from PSC team responsibilities. In such cases, the student will engage in additional clinical activity at their placement site to make up for the lost PSC clinical activity, and will register for the usual 1 cr of 580 to reflect this additional work. A majority of core faculty must approve the substitution, and the release from PSC team obligations.
- Students entering the program with advanced standing may transfer up to two semesters of 580-equivalent practicum course credits as substitution for PSC-related 580 activities. As the entire core faculty “grade” these experiences, a majority of core faculty must approve the transfer.

**Additional Supervised Clinical Experiences (ASCE).** Additional supervised clinical experiences will usually be evaluated as part of the student’s PSYC 580 semester enrollment. Thus, students enrolled in PSYC 580 for their PSC team experience need not register for any additional credits if they also participate in an ASCE. Students who are not concurrently enrolled in PSYC 580 for their PSC team activities must register for 1 cr of 580 to cover their ASCE participation.

Enrollment in PSYC 587

Enrollment in PSYC 587 is limited to students serving on ½-time (16-20 hours per week) paid placements. Students on these placements (usually procured through the annual placement selection process) should enroll in 3 cr of 587. Placements that are less than ½ time or unpaid generally require enrollment in PSYC 580 (see above).

A subset of third and fourth year students each year may be unsuccessful in competing for one of our approved paid ½-time placement positions. Students in that position may, however, be able to find ½-placement work elsewhere that would be acceptable to the program. In that event, the program may authorize for one year enrollment in PSYC 587 credits for that unpaid
placement activity. PSYC 587 enrollment would not be permitted for unpaid placement work if one of our paid ½-time placements remained unfilled and the student could not justify, to the satisfaction of a majority of clinical faculty, refusal to accept that assignment.

### Examples of Typical Enrollment by Practicum Type

<table>
<thead>
<tr>
<th>Practicum Experience</th>
<th>Time/Week</th>
<th>Years</th>
<th>Course</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSC Clinical Team (Unpaid)</td>
<td>Variable</td>
<td>Fall &amp; Spr: Years 2-4</td>
<td>580</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Summer: Years 2&amp;3</td>
<td>(1cr)</td>
</tr>
<tr>
<td>Supervised Field Work (Paid)</td>
<td>16-20 hours (1/2-time)</td>
<td>Fall &amp; Spr Years 3&amp;4</td>
<td>587</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(3 cr)</td>
<td></td>
</tr>
<tr>
<td>Optional: Additional Supervised Clinical Experience (Paid or Unpaid)</td>
<td>2-15 hours (1/4 Time)</td>
<td>Years 2-4</td>
<td>580</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(1cr)*</td>
<td></td>
</tr>
<tr>
<td>Optional: First Year Summer Assessment (Paid or Unpaid)</td>
<td>2-15 hours (1/4 Time)</td>
<td>Summer: Year 1</td>
<td>594</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(1cr)</td>
<td></td>
</tr>
<tr>
<td>Optional: 5th Year 587 Placement Procured via 2nd-Round Application</td>
<td>16-20 hours (1/2-time)</td>
<td>Fall &amp; Spr Year 5+</td>
<td>587</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(1 cr)</td>
<td></td>
</tr>
</tbody>
</table>

* Note that one credit of 580 “covers” any ASCE; 2 cr are not necessary where the student both serves on a PSC and participates in an ASCE.

A student may take a ½-time paid placement after their 4th year, e.g., they find a paid placement to fill an unanticipated fifth year following an unsuccessful internship match in year 4, or procure a surplus 587 paid placement through the 2nd round of practicum application in the spring. Assuming that the student has already completed the required number of 587 credits, they may enroll in 1 credit of 587, rather than the usual 3 credits.

### Weekly Practicum Monitoring Requirement

Please note that the clinical program requires all students to submit clinical hours for review on a weekly basis. There are two options for doing this (you need only do one):

- **Time2Track Software**: Enter clinical hours earned during the week into your Time2Track account. If you have set up your account to identify you as a student in our program, the DCT can access your data as needed to review clinical activities. Subscriptions to Time2track may be purchased annually for about $30 (slightly cheaper, per year, if you subscribe for more than one year), and you may contact Time2Track for
an additional group discount when you subscribe. Clinical hours should be updated on a weekly basis.

- **Weekly Practice Monitoring Forms**: Alternatively, you may print out and fill in the Weekly Practice Monitoring Form (see APPX F), available on the GSICP Bb page. These must be submitted weekly to the DCT.

A failure to comply with this requirement will result in Unsatisfactory midterm and/or final grade assignments for your respective PSYC 580 and/or 587 credit hours. The routine compliance with this requirement will enhance program oversight of practicum activities while facilitating your eventual completion of internship applications. Each student is encouraged to develop a weekly routine that allows for compliance.

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**CLINICAL INTERNSHIP TRAINING**

The clinical program has historically enjoyed a great deal of success in matching our intern applicants with accredited internship on APPIC uniform notification day. Within the past two years this rate of success has varied along with the supply/demand ratio for the annual APPIC competition, though, to date, no student has failed to graduate from the program because they were unable to procure an internship on their first or second attempt. Programs around the nation continue to consider ways to adapt to this reality of too many intern applicants applying for too few accredited positions. Our faculty believes it important that our students continue to complete an APPIC internship to meet our requirements for the Ph.D. We recognize, however, that many fine APPIC internships have not pursued accreditation or are not presently accredited. Some have declined to pursue accreditation while others remain in pursuit at different stages of the process (e.g., too early to apply, under review, attempting to improve compliance with selected standards in anticipation of reapplication, etc.).

**Unaccredited Internships**

The risks of taking an unaccredited internship are summarized nicely in the APPIC clearinghouse web page (www.appic.org). Completion of an unaccredited internship may preclude employment in certain sectors, particularly the federal government, and there is a probability that licensing boards will look more closely at internship training experiences when they are not accredited. Otherwise, the program believes that an unaccredited internship, under some conditions, would meet our curriculum requirement for completion of the clinical doctorate.

We have established a set of five stipulations for authorization to apply for an unaccredited internship:

1. Must be second year application;
2. Must be an APPIC member and/or CPA accredited;
3. Must be outside of UND;
4. Must be accompanied by a signed statement that the Clearinghouse warnings regarding unaccredited internships have been read;
5. Each application site must be approved by his or her advisor.

In addition, the applying student must demonstrate to the program that the unaccredited internship meets CoA standards by describing the following, in writing, and in detail:

1. the nature and appropriateness of the training activities;
2. frequency and quality of supervision;
3. credentials of the supervisors;
4. how the internship evaluates student performance;
5. how interns demonstrate competency at the appropriate level;
6. documentation of the evaluation of its students in its student files.

We believe that this policy provides a few more degrees of latitude for students trying to meet the challenges posed by Ph.D. training in contemporary clinical psychology. The program will continue to provide mock interview practice and other individualized support in future years to enhance applicant success in the internship competition. We will remain receptive to any other ideas as well regarding ways to maintain and expand our program's track record of success.

WORKLOAD RESTRICTIONS

Students enrolled in the clinical program must balance competing coursework, research, and practicum demands. Students in the first two years are usually assigned a ½ GTA which requires up to 15 hours a week. Upper-level students will be afforded equivalent ½ community placements. PSC supervision team requirements can range from 1 to 5 or more hours a week depending on circumstances. These obligations often leave limited remaining time to meet other academic and research requirements of the program. Additional training opportunities are often afforded clinical students above and beyond these basic expectations. The program discourages the tendency for students to become overextended with obligations that detract from student progress in meeting program requirements. UND Legal Counsel also requires the program to formally identify all training activities that are eligible for university malpractice insurance.

The DCT must be clearly informed of all of your paid or unpaid clinical and assistantship activities. The program accepts responsibility to restrict time commitments that are under our control (assistantships and/or practicum work) when a determination is made that they are detracting from the student’s ability to maintain normal progress in completing all of our program requirements. The conditions and approval process described in this section do not apply to work commitments that extend beyond those under department and program control, e.g., non-clinical work is viewed a personal matter that falls beyond program control.

The program has developed an application form for additional supervised clinical experiences (see Appendix M) to assist in the oversight process. It is available on the clinical program’s Blackboard site for download. The clinical faculty have authorized the DCT to approve requests for up to ¾ time (25 hours a week) of combined GTA/GRA/GSA/practicum work providing that the following conditions are met:
(a) The student is presently maintaining normal progress (thesis defended past the second year and proposed past the first);  
(b) The request is supported by the student’s advisory chair; and  
(c) There appears to be salient training value to the activity.

The clinical faculty must approve work hours provided by the program or department that extend beyond these limits.

**CLINICAL STUDENT FINANCIAL SUPPORT**

The psychology department is committed to funding all of our incoming and second year clinical students with ½-time Graduate Teaching Assistantships as well as tuition waivers. Our department secretary and/or the School of Graduate Studies can be consulted about the amount of the GTA stipend for an upcoming year. An attempt is made to cover all tuition expenses (with the exception of enrollment fees which must always be paid by the student) for *credit hours included* in the student’s Program of Study (see Appendix D). We have a record of success in waiving all tuition costs for all of our first and second year students from our department budget, but out-of-state students should recognize that their tuition costs disproportionately tap our fund. Second year students assist the program *greatly* and maximize the chance of tuition relief for all first and second year students by securing state residency which is a relatively simple process that can occur after one year of possessing a state driver’s license and home address. Tuition waiver relief will be limited after the first year to that required to cover North Dakota state residents.

Financial support for third and fourth year clinical students is more uncertain. The program has had a high success rate (> 90%) of assigning paid ½-time placements to students in their third and fourth year. We place a high priority on assisting students to find both financial support and practicum training hours in external placements during the third and fourth year.

There are limits, however, on our control of practicum funding leading us to caution incoming students that no assurance can be given that *funded* practicum training will be available during the third and fourth years. It is also important to note that funded placements do not always extend through the summer months, and recent program policy changes permitting additional unpaid supervised work in the community *may* over time gradually diminish the availability of *funded* placements. Thus, uncertainties regarding program financial support during the third and fourth year are inevitable, and students are encouraged to plan ahead in the event that support is lacking in those final pre-internship years. We are pleased to note that the department has been able to provide third and fourth year tuition waivers (excluding enrollment fees) in recent years for *credit hours included* in the doctoral Program of Study (see Appendix D). Third or fourth year clinical students have sometimes been provided GTA support when extra assistantships were available. Students past the fourth year can sometimes find teaching work, other forms of employment, or even an approved funded placement through our Finders Keepers policy.
CLINICAL PROGRAM DOCTORAL GRADUATION REQUIREMENTS

The PhD is awarded when all program requirements are met. This includes (at a minimum) all coursework, the dissertation, and the doctoral internship (UNIV 994). The Commission on Accreditation specifies that accredited programs include “a minimum of 3 full-time academic years of graduate study (or the equivalent thereof) plus an internship prior to receiving the doctoral degree” (Standards of Accreditation, p. 10, Section C.2.a; emphasis added).

At the University of North Dakota, degrees are conferred three times each year, at the end of Spring, Summer and Fall Semesters. The conferral of a degree refers to the date of commencement for a given semester. The award or completion of a degree indicates that all degree requirements have been successfully completed.

All PhD candidates must apply for graduation at the beginning of the term in which they plan to graduate. This can be done online, through the link on the School of Graduate Studies webpage: https://apps.und.edu/graduationonline/. All graduate students must be enrolled in at least one credit during the semester in which they will graduate.

There are several points pertinent to doctoral graduation that you should keep in mind as you near this point in our program…

Enrollment in UNIV 994

First, it is necessary that you enroll in one credit hour of UNIV 994 (internship, see clinical curriculum) for the fall, spring and summer (total of 3 credit hours). This one credit course will constitute full academic enrollment. Ensure to verify your enrollments to avoid delays and/or additional expense prior to graduation.

You Must Be Continually Enrolled

Second, students who have completed all credit hours in their M.A. or Ph.D. program of study other than the thesis/dissertation or internship must enroll in Continuing Enrollment (CE) credits each semester until they officially complete the graduate degree that is in progress. You could potentially be dismissed by the School of Graduate Studies if you fail to enroll each semester throughout your time in the M.A. or Ph.D. program. You could not legitimately represent yourself as a graduate student in the program without continued enrollment. Note that enrollment may, in some cases, be necessary after the summer semester in which your internship concludes (e.g., if continuing enrollment is necessary while you complete your dissertation, etc.).

Enrollment in CE credit hours should reflect your level of effort in research or other essential activity necessary to complete the degree track in which you are enrolled, e.g., you and your advisor should be able to justify your enrollment as essential in the advancement of your completion.
Your Internship Director Must Verify Completion

Third, to officially graduate, your internship will need to provide official verification of completion, in the form of an official letter mailed to the program. A preliminary FAX or email verification may be provided to the DCT if you are facing any urgency regarding Graduate School deadlines for commencement, etc., but must be followed-up by a mailed verification letter. Upon verification of internship completion, the DCT notifies the School of Graduate Studies which then directs the Registrar to update the official transcript to indicate successful completion of the internship.

*Verification from the internship director must include* (a) the name of the internship placement, (b) the location of the internship placement, (c) the accreditation status of the internship completed, and (d) the start and end date of the internship completed.

August Graduation Caveats

It is frequently the case that students will have completed all requirements for graduation except internship. Internship dates are not always consistent with the end dates of semesters. Therefore, the following timelines and procedures apply for students who have completed all requirements (including successful defense of the dissertation) but the internship (UNIV 994).

1. When internship is successfully completed shortly before and up to 30 days after a conferral date, the student will be identified as having graduated in the most recent semester. For example, if commencement is on August 1 and internship is completed on August 31, the student’s diploma and transcript will indicate that the student graduated on August 1. This action will require only that the student has applied for graduation by the deadline for August graduation – no additional forms or applications are necessary.
   a. Although the conferral date for the student in the above scenario is August 1, the student’s individual file will indicate that the degree was completed and awarded on or shortly after August 31 (the date on which their final degree requirement, the internship, was met). This may be verified if needed by an employer, licensure board, the Commission on Accreditation, or other qualified inquiries.

2. When internship is successfully completed more than 30 days after commencement, the student will be identified as having graduated on the following commencement day. For example, if a student completes internship on September 30, the student’s degree will be conferred at Winter graduation, typically mid-December.
   a. In this instance, the student may have a post-doctoral or employment position that requires that the degree be verified prior to December. For example, the student may be scheduled to start a post-doc on October 5. The Training Director is authorized to write a letter verifying that the student has completed all degree requirements and is eligible to start accruing post-doctoral hours. The student should contact the DCT to request this verification letter be sent.
   b. In rare instances, students may need to have a degree actually conferred in order to meet the needs of employment or licensure. This necessitates a formal request for early graduation, which involves the university setting up a special term for the individual student. The university will entertain these requests ONLY when students provide evidence that an employer or licensure board requires conferral of a degree. If this is the case, the student must complete the Doctoral
Student Request for an Early Graduation Date (available via the School of Graduate Studies) and submit it, along with a letter from the employer, licensure board, or similar entity, for consideration by the University Senate Executive Committee. This process can take 4 – 6 weeks to complete, so it should be initiated as soon as the requirement is confirmed.

“Walking” vs. Official Graduation

Students participating in summer commencement prior to completion of the internship or other degree requirements have not officially graduated from the University. It is important that you request your internship director to verify completion (see above) with our DCT on the day your internship is completed. Once verification is received, the DCT will then authorize the registrar’s office to update your transcript indicating completion of all of the Ph.D. requirements.
THE GENERAL/EXPERIMENTAL PSYCHOLOGY PH.D. PROGRAM

OVERVIEW

Goals of the Program

The mission of UND’s General/Experimental (G/E) Ph.D. program is to provide quality educational experiences to qualified graduate students that promote critical thinking and creative skills based on the current theory, principles, and methodologies and techniques of experimental psychology. These will be promoted through written as well as oral communication. Graduates of our program will be prepared for careers as academicians at the college and/or university level, researchers in private industry and education, and/or teachers at the college and/or university level and will all show continued evidence of expertise within their various specialization in G/E psychology. G/E students should anticipate and expect broad exposure to a variety of issues and topics in the field of experimental psychology and, as a result, each student is expected to establish a firm theoretical and academic foundation that will support their later pursuit of more specialized academic interests. This will be in evidence via a broad breadth of knowledge appropriate to receiving a M.A. and/or Ph.D. in General/Experimental Psychology. The G/E faculty have two specific goals in mind for students. These include:

Student Learning Goal # 1 – Students of the G/E program will demonstrate a base of knowledge regarding the field of experimental psychology which extends beyond specialized experimental areas.

Objective 1.1: G/E students will demonstrate competency in specialized experimental areas by successfully completing the thesis and dissertation defenses in a timely manner.

Objective 1.2: G/E students will demonstrate breadth of knowledge by completing coursework in multiple areas in Experimental Psychology, including Learning, Cognitive Psychology, Physiological Psychology, Social Psychology, Developmental Psychology, Psychology and the Law, and Statistics & Research Design.

Objective 1.3: G/E students will also demonstrate breadth of knowledge through graduate coursework products, or other, comparable demonstrations of breadth of knowledge.

Student Learning Goal # 2 – Students of the G/E program will demonstrate ability to design, conduct, analyze, and report/disseminate research that advances the scientific study of psychology.

Objective 2.1: Students will complete successfully courses in and demonstrate knowledge in research design, univariate and multivariate statistics.
Objective 2.2: Students will also demonstrate critical thinking skills and scientific writing ability through thesis and dissertation development as well as other related research/writing projects.

Objective 2.3: Students will continually be involved in demonstrating their scholarly skills by presenting and publishing their research both before and after graduation.

Core Areas of Study

The General/Experimental program emphasizes both depth and breadth of experience. Depth of experience is provided through the student’s mentored program of research and assessed through the completion and defense of the Master’s thesis and Doctoral Dissertation. Breadth of experience is provided through coursework offerings and assessed through the Comprehensive Exams (see below).

The following is a list of some of the areas in which students can acquire specialized training.

Experimental Analysis of Behavior

Faculty: Adam Derenne, Jeffrey Weatherly
Foundation Course: Theories of Learning (PSYC 533)

Applied Cognition

Faculty: F. Richard Ferraro, Tom Petros, Dmitri Poltavski, Alison Kelly
Foundation Course: Advanced Cognitive Psychology (PSYC 539)

Health and Aging

Faculty: F. Richard Ferraro, Joelle Ruthig
Foundation Course: Advanced Developmental Psychology (PSYC 551)

Social Psychology

Faculty: Andre Kehn, Karyn Plumm, Joelle Ruthig, Cheryl Terrance, Heather Terrell
Foundation Course: Advanced Social Psychology (PSYC 560)

Psychology and the Law

Faculty: Andre Kehn, Alison Kelly, Karyn Plumm, Cheryl Terrance
Foundation Course: Foundation of Forensics (PSYC 520)

Other available courses (i.e., those that help provide breadth of experience) include History of Psychology (PSYC 505), Foundations of Forensic Psychology (PSYC 520), Diversity Psychology (PSYC 521), Physiological Psychology (PSYC 535), Psychophysiology (PSYC 537), and Multicultural Psychology (PSYC 565).
All G/E students are required to complete Advanced Univariate Statistics (PSYC 541), Multivariate Statistics for Psychology (PSYC 542), and Experimental Design (PSYC 543).

**History of the Program**

In 1912, John Wilhoff Todd, Ph.D., became the first Assistant Professor of Psychology at UND. Todd also began the tradition of research in experimental Psychology at UND, beginning with the creation of a 6-credit course in Experimental Psychology. In its early years, the Department of Psychology was closely tied to the departments of Education and Philosophy. The first students to earn a Ph.D. in Psychology at UND (beginning with Soren Olaf Kolstoe in 1931) did so through a combination of coursework in Education and Psychology. During the 1950s, the Department of Psychology dramatically increased in size, and by the early 1960s, it was responsible for several specialized graduate programs. Walter Essman earned the first Ph.D. in General-Experimental Psychology at UND, in 1957.

Faculty hired during the 1950s and 1960s enabled the Psychology Department to offer coursework and research experiences in many different areas in Experimental Psychology. For example, Ralph H. Kolstoe established the first animal laboratory in 1957, and Paul H. Wright provided advanced coursework and research opportunities in Social Psychology, beginning in 1963. Ever since, the department has maintained a breadth of graduate course and research opportunities.

An Instructional Skills Training Track Program was established in 1994 to help prepare graduate students in Psychology (especially those in the General/Experimental Program) to be effective collegiate teachers.

A total of 47 individuals have earned a Ph.D. in General/Experimental Psychology at UND; 19 of those degrees have been awarded since 2000.

The General/Experimental Program is presently at or near historical highs in terms of the number of faculty and students, and the amount of scholarly productivity.

**G/E RESEARCH TRAINING**

Graduate students are expected to work closely with at least one faculty member on research throughout their five years at UND, and programs of study typically require substantial thesis (PSYC 998), dissertation (PSYC 999), and individual research (PSYC 596) credit hours.

**The Research Advisor**

Although admissions are determined partially by the applicant’s match with faculty research interests, students in the G/E program are not required to begin working with a specific advisor. Similarly, students are not required to continue working with a given research advisor.
throughout their enrollment in the G/E program, nor are they prohibited by working with a given advisor from conducting research in collaboration with other faculty.

Incoming students are expected to carefully investigate the research and mentorship opportunities made available by faculty members within the department. Students typically speak with faculty members about their research and professional interests, and it is common for them to also consult with upper-level peers who have had experience working with particular faculty members.

The research advisor normally chairs the student’s thesis and dissertation committees. Most (if not all) G/E faculty are eligible to serve as committee chairs. However, if a student’s advisor is not either a full or associate member of the UND graduate faculty, than another committee member will need to serve in this capacity.

### The Thesis and Dissertation

All students complete an empirical thesis and dissertation that represents original work of a quality the faculty considers worthy of publication in a national or international peer-reviewed publication. A detailed prospectus of all thesis and dissertation projects must be presented orally and accepted by the advisory committee prior to data collection.

Students who hold a master’s of arts or sciences in psychology from another institution are required to present a copy of their thesis to the G/E Director by the beginning of their first semester in the program. Students will be required to complete a thesis that meets program requirements if their prior thesis was nonempirical.

The thesis committee is comprised of three psychology department faculty, at least one of whom is a core member of the G/E program. The dissertation committee is comprised of at least four psychology department faculty, at least two of whom are core members of the G/E program. (The committee must also include one “outside” member who is appointed or approved by the School of Graduate Studies). Thesis and dissertation committee can be chaired by core faculty within either the G/E or Clinical psychology programs. Thesis and dissertation committees are usually, but not always, chaired by the same faculty member. Students are expected to inform the G/E Director of the composition of their thesis and dissertation committees, as well as any changes in composition that occur after a committee is initially formed.

Final oral defenses of the thesis and dissertation are mandatory, and open to the public as advertised in the campus newsletter. The defense should predominantly focus on the results and interpretation of the completed project, but committee members may examine any aspect of the student’s academic preparation.

Advisors are required to assign satisfactory or unsatisfactory grades for thesis and dissertation credits at the end of each semester. Students are encouraged to regularly discuss their progress on their thesis or dissertation project with their advisor to ensure satisfactory progress.
Students should similarly discuss with their advisor their intention to work on peripheral projects with other researchers as this may interfere with their thesis and dissertation.

**Other Research**

Although not required for graduation, it is important for G/E students to conduct research outside of the thesis and dissertation projects in order to develop the skill set and record of accomplishment typically expected by academic and nonacademic employers.

Students are expected to develop a program of research with the assistance of their advisor (and perhaps other professionals) and to conduct multiple studies within the selected area. Students should regularly engage in reading the primary research literature and preparing manuscripts. Students are also expected to present their research at professional conferences and publish their research in peer-reviewed, scientific journals.

**COMPREHENSIVE EXAMS**

**Overview**

All general/experimental (hereafter G/E) students are required to complete two comprehensive examination (or "comp") components detailed below during the 3rd year of graduate training (assuming normal progress). The first component is the Grant, and the second component is the Integrative Review Paper.

The Grant and the Integrative Review Paper must be based in two of the areas listed below. The student must inform the G/E Director which two areas he/she has selected by the time he/she begins the comps process (i.e., no later than September 1).

1. Experimental Analysis of Behavior (Learning)
2. Cognitive Psychology
3. Health Psychology
4. Social Psychology
5. Psychology and the Law
6. Developmental Psychology
7. Educational Psychology
8. Physiological Psychology
9. Sensation & Perception
10. Statistics & Research Design

**Comprehensive Exam 1: The Grant**

For the first comprehensive exam, the student prepares a grant proposal that is intended to provide funding for his/her upcoming dissertation research.

**Part 1: The Proposal**

The first phase of Comp 1 is the preparation of a brief, APA-formatted proposal. This document consists of a title page, a concise description of the project, and a references page. The title page should include the title of the project and it should identify the Comp area into which it falls.
The description of the project should be written in the style of an abstract and concisely describe the intended research. More specifically, the proposal should provide basic background information about the topic, describe and justify the purpose of the research, and relate basic details pertaining to the method such as the research design, the number and type(s) of participants, and the independent and dependent variables. The proposal (exclusive of the title page and references page) should be modeled after an APA-formatted abstract, and it must not exceed two pages in length.

**Part 2: The Final Project**

The second phase of Comp 1 is the preparation of the actual grant proposal. The grant proposal should be directed towards either the National Institutes of Health (NIH) or the National Science Foundation (NSF), depending on which agency is most relevant for the specific project. Students can petition the G/E to use an alternative funding source.

The project should be prepared using the forms and guidelines developed by the granting agency. NIH and NSF typically require grant proposals to range between 15-20 single-spaced pages (excluding references). Although other foundations exist which may be potential funding sources, the student must petition the Experimental faculty to use a funding source other than NIH or NSF. The proposals should be prepared in accordance with the most current American Psychological Association (APA) format.

**Timeline**

The proposal is due September 1 and the final project is due 3 months after the proposal is approved. If the student is requested to revise the proposal (see section, below, on the Evaluation of Comprehensive Exams), then the revision will be due 2 weeks after the decision date. If the student is requested to revise the final project, then the revision will be due 1 month after the decision date.

**Other Details**

After the project is approved, the student should submit the grant to the intended granting agency to support the research intended to follow as a doctoral candidate. However, being able to secure funding from an outside source is not a requirement.

**Component 2: Integrative Review Paper**

For the second comprehensive exam, the student prepares an Integrative Review Paper, and this paper must be in a different area than the Grant (see Overview). The Integrative Review Paper is intended to demonstrate the student's ability to master and integrate some significant content area that is professionally relevant to the student but in which the student does not already have an extensive background. Note that the Integrative Review Paper should not substitute for the literature review and preliminary work required for the doctoral dissertation.
Part 1: The Proposal

The first phase of Comp 2 is the preparation of a brief, APA-formatted proposal. This document consists of a title page, a concise description of the project, and a references page. The title page should include the title of the project and it should identify the Comp area into which it falls (see Overview for a listing). The description of the project should be written in the style of an abstract and concisely describe the intended review. More specifically, the proposal should provide basic background information about the topic, and describe and justify the aims and scope of the review. The proposal (exclusive of the title page and references page) should be modeled after an APA-formatted abstract, and it must not exceed two pages in length.

Part 2: The Final Project

The second phase of Comp 2 is the preparation of the review paper in the style of review papers published in Psychological Bulletin or Psychological Review. The following is Psychological Bulletin’s description of an integrative review (from http://www.apa.org/pubs/journals/bul/):

Integrative reviews or research syntheses focus on empirical studies and seek to summarize past research by drawing overall conclusions from many separate investigations that address related or identical hypotheses. A research synthesis typically presents the authors’ assessments of

- The state of knowledge concerning the relations of interest
- Critical assessments of the strengths and weaknesses in past research
- Important issues that research has left unresolved, thereby directing future research so it can yield a maximum amount of new information.

NOTE: The above criteria can be used as a guideline for students writing their Comp 2 and an assessment guideline for the primary reviewers.

The Integrative Review Paper is expected to be at least 40 manuscript pages in length (i.e., 40 pages beyond those used for the title page, abstract, and references), and it should follow APA-formatting. (Forty manuscript pages are approximately equal to 10 printed pages in a published article).

Timeline

The proposal is due October 1 and the final project is due 3 months after the proposal is approved. If the student is requested to revise the proposal (see section, below, on the Evaluation of Comprehensive Exams), then the revision will be due 2 weeks after the decision.
date. If the student is requested to revise the final project, then the revision will be due 1 month after the decision date.

**Evaluation of Comprehensive Exams**

**Submitting Materials on Time**

Students are required to complete each component of comps by the dates and times designated by the G/E Director. (If no time is specified, then the work is due by the end of the day on the designated date). Required work that is not received on time will be automatically failed/rejected; late work also will not be reviewed by the G/E faculty.

**Evaluation of the Proposal**

If the proposal is approved by the G/E faculty, the final project will be due 3 months after the approval date. If the proposal is rejected, the student will receive feedback on the proposal and a revision of the proposal will be due 2 weeks later. If the first revision is also unacceptable, the student will be allowed to submit a second revision of the proposal within 2 weeks of the decision date. If the second revision is rejected, the student will be found to have failed the comps process.

**Evaluation of the Final Project**

After a proposal is approved, two primary reviewers will be assigned to provide independently-prepared written evaluations of the final project. Normally, the two primary reviewers are core faculty in the G/E program. However, if there is insufficient expertise among the G/E faculty in the topic of the final project, one of the reviewers may be another faculty person at UND with expertise in the topic. The identity of the primary reviewers will not be disclosed to the student. The reviewers will recommend either to “pass” or to “fail” the final project. This ordinarily occurs within 2 weeks of submission of the final project. The other members of the G/E faculty will also have access to the project and they are also expected to reach a decision about the project.

At a meeting of the G/E faculty (at which a quorum is necessary to conduct any business), the G/E faculty will discuss the responses of the primary reviewers, and their own evaluations of the project. A simple majority of the G/E faculty in attendance is required to pass or fail the student’s project. Following the vote and regardless of outcome, the responses of the primary reviewers will be forwarded to the student.

If the vote is to fail the project, the student is expected to use the responses of the primary reviewers, and whatever additional feedback the G/E Director provides, to revise their project. The student will be given 1 month to revise the project. The revision will be evaluated in the same manner as the initial submission, and the same primary reviewers will provide written responses. If the vote is to fail the revision of the project, the student will be found to have failed the comps process.
Failing the Comps Process

If a student is found to fail the comps process, the comps process is suspended for the remainder of the academic year, but the student is eligible for a second (and final) attempt at passing comps beginning the next academic year. The student that fails comps is not necessarily required to retake both portions of the comps process – only the portion(s) that the student did not pass during the first attempt. To provide an example, a student passes Comp 1 and fails Comp 2. In this case, when the student retakes the comps process the following year, the student skips Comp 1, and instead begins work on Comp 2 (starting with a new proposal). The comps process during the second attempt begins on September 1.

If a student fails the second attempt at passing comps, he/she is dismissed from the program.

Frequently Asked Questions about Comprehensive Exams

1. Who should I ask if I have questions about the comps process?

   In general, students can ask the G/E Director or their advisor basic questions about the comps process at any time.

   Students are welcome to speak with faculty members about a final comp project (either Comp 1 or Comp 2) before their proposal has been approved. More specifically, students are encouraged to select a topic for their final comp projects with the assistance of their advisor, and they are initially free to discuss matters pertaining to this project with their advisor, or others in the department with expertise in the area (e.g., students may have questions about the research literature pertaining to their topic, or they may be looking for resources to help them with grant writing). However, once the proposal has been approved by the G/E faculty, the only questions students are permitted to ask are general questions about how the comps process works.

   As for Comp 3 (the exam), students can ask the G/E Director for clarification after they have received the set of questions, and the G/E Director will act as an intermediary between the student and the author(s) of the question. Students cannot ask any questions once they begin the 6-hour sit-down exam.

2. Is it possible to begin the comps process at an earlier or later date than specified in the handbook (in case of being ahead or behind in progress)? If so, what is the process for requesting these date changes?

   Students can petition the G/E faculty to alter the dates indicated in the Graduate Student Handbook. However, a compelling case needs to be made for the petition to be accepted.
3. How does a student petition?

*Petitions take the form of a memo or email sent to the G/E Director that includes a detailed description of the request, why the student is making the request, and what outcome the student hopes to achieve. The petition then will be reviewed by the G/E faculty, who will render a decision on whether to accept or deny the petition.*

4. Is it alright if my Comp 1 or Comp 2 proposal is slightly under or over the recommended word limit?

*The purpose of an abstract is to see if student can succinctly detail their project. Most journals and granting agencies have word limits and our 150-300 word limit for abstracts falls within these standards.*

5. Is it OK to write a grant on a topic other than what I intend to do for my dissertation or must the grant be intended to fund my dissertation?

*Yes, but the practice is discouraged. The purpose of the grant is, among other things, to allow students to get funding for their dissertation. While we do not require that the grant actually be funded, it is expected that by this time in the program the student has a good idea of what they are doing for their dissertation and, as a result, are able to write a grant to support that research.*

6. Where can I find grant information?

*The UND Research Development & Compliance office is helpful, as is the office of Grants and Contracts and the School of Graduate Studies. Contact information can be obtained at [http://und.edu/research/](http://und.edu/research/). Also most grant agencies have websites where most if not all of these questions can be answered.*

7. What is the process to request a grant format other than NSF/NIH?

*For agencies and formats other than NSF/NIH, the student must petition the G/E faculty.*

8. When preparing the grant, do I stick to the criteria of the organization I’m applying to, or are there additional criteria the faculty are looking for (e.g., statistics section, limitations etc.)?

*The criteria advanced by the specific granting agency are what G/E faculty will follow and these criteria are similar across many agencies.*
9. Am I allowed to ask someone to look over early drafts of my Grant or Integrative Review Paper? If so, who?

*Students are not permitted to seek any feedback or assistance while preparing a Comp 1 or Comp 2 final project. Assistance can be sought only prior to the approval of a Comp 1 or Comp 2 proposal.*

10. Is it possible to change the Grant or Integrative Review Paper topic after having submitted it? If so, what is the process for this?

*Students can submit a petition to change the topic, but a compelling case needs to be made for the petition to be accepted.*

11. Is it possible to use a grant proposal or paper that I’ve already worked on for the Comp 1 or Comp 2 final project? For example, if I did a literature review paper for a class, can I use this as a starting point for my Comp 2 final project?

*Students are not permitted to incorporate, either in whole or in part, prior work into their comps projects. As in other cases, students can petition the G/E faculty if they believe they can make a compelling argument as to why an exception should be made.*

12. If my integrative paper is less than 40 pages, will I automatically fail?

*The 40 page expectation is based on the observation that 40 typed pages would equal approximately 10 published journal pages. Some articles, however, are shorter and longer than this specific limit.*

13. If I do not pass my Comp 1 or Comp 2 final project, and I receive unclear or contradictory suggestions from the primary reviewers, how do I decide how to revise the project?

*Students can ask the G/E Director for clarification if they have questions after receiving the primary reviews, and the G/E Director will act as an intermediary between the student and the primary reviewers. If necessary, the Director will hold a meeting with all of the relevant parties as a means of resolving contradictory suggestions from the reviewers.*

14. Am I expected to memorize numerous citations for each Comp 3 response (the sit-down exam)?

*Students should know and cite classic studies pertaining to the question. It is not necessary for students to memorize a long list of citations.*
ASSESSMENT OF BREADTH OF KNOWLEDGE

Before students propose their doctoral dissertation, they must pass an assessment of breadth of knowledge in General/Experimental Psychology. The assessment entails a demonstration of knowledge in three areas in psychology that are distinct from the areas selected for Comp 1 and Comp 2 and from each other (e.g., the three areas may be drawn from the Comp topic areas, listed above).

Breadth of knowledge can be demonstrated in the following forms: 1) papers and other significant coursework, 2) significant research products, such as papers published in peer-reviewed journals, 3) high marks on end-of-semester student assessment of teaching for a course taught in a given area, 4) demonstration of competency in a 50-minute lecture on the topic that is attended by program faculty, or 5) satisfactory answers to sit-down exam-style questions relating to graduate-level courses taught at UND in the area. Students are not required to pass the assessment through multiple modes of demonstration. For example, a submission of significant coursework products from the three areas is sufficient. The demonstration must be based on the student’s accomplishments as a graduate student in psychology.

The student is responsible for selecting the three areas and presenting the appropriate materials to the Director (or, if Option #4 or #5 is selected, making arrangements with the Director to deliver the lecture presentation or take the sit-down exam). In the event the Director has concerns about the student’s demonstration of breadth of knowledge (e.g., there is a question about the adequacy of the demonstration for a given area, or a question as to whether the student’s demonstration represents three sufficiently distinct areas), the Director may ask the student to provide additional information.

The Director will make a recommendation to the G/E faculty to pass/fail the student on the breadth of knowledge assessment. The G/E faculty will vote on the recommendation and decide the appropriate course of action in the event the student does not pass.

THE FORENSIC PSYCHOLOGY PROGRAM

The Psychology Department offers two advanced degrees in Forensic Psychology:

**Master's of Science** (M.S.). In the U.S. forensic graduates obtain master's-level psychology jobs in agencies and institutions such as prisons, juvenile facilities, social service agencies, police departments, child care agencies, probation, parole, family court, addiction services, hospitals, and community mental health centers. Some students get jobs as forensic researchers doing studies and evaluations of at-risk populations. A few graduates will be accepted in federal law enforcement agencies after earning the Master's degree. You would expect to see forensic graduates working in the following areas: secure forensic units in state facilities, jails/prisons, probation services, court service units, community mental health centers,
protective services, violence risk assessment, specialized agencies (i.e. child advocacy centers), law enforcement, and trial consulting. The M.S. degree in forensic psychology will also allow some students to advance to doctoral programs in forensic psychology, forensic science, and law school. Students in the M.S. Forensic Psychology Program at UND are required to attend classes on campus and complete 44 credits of study. This includes 26 credits of required course work, 12 credits of elective courses, and a minimum of 6 credit-hours for thesis work.

**Master's of Arts (M.A.).** The Department of Psychology, in conjunction with the Division of Continuing Education, has designed an online forensic psychology program targeted for working professionals. The M.A. Forensic Psychology program is the first to be offered online by a nationally recognized, fully accredited university. Through the 34-credit M.A. program, students will learn how to provide the psychological expertise and knowledge needed by the legal community and agencies having a strong forensic focus. Students in the program will likely be in-service professionals, such as law enforcement personnel, who want to further their career as well as those with a behavioral or social science background, such as counselors or social workers, who are interested in applying psychology to their work involving forensic issues.

### YEAR BY YEAR DETAILS

#### YEAR 1: BEGINNING OF CLASSES

*All students.* The School of Graduate Studies requires new students to be at a two-day orientation meeting which occurs the week before classes begin. An unexcused absence at the orientation could delay your initial paycheck from the university. Please check the dates. The department holds an orientation most of Monday of the first day of Fall classes. This orientation meeting is mandatory and particularly important to incoming clinical students as it involves privileges at our Psychological Services Center.

*All students.* Incoming students are assigned a temporary advisor (the Chairperson) to help them with initial registration and program planning; students meet with the Chairperson and program director for department and program orientation.

*All students.* Graduate Teaching Assistants (GTA) and all other students are typically required to pay fees each semester of registration. These fees cover a variety of student benefits including sports events, the wellness center, technology upgrades, and other contributors to quality of life on campus. Please check with the registrar’s office web page for an accounting of current fees. Books and the various materials you will require will add up to approximately $300-$500 per semester. We also recommend that you purchase a personal computer for word processing and data management and analysis.

*All students.* First year students and significant others will get an opportunity to meet some of your classmates and faculty at a party on Friday night at the completion of the first week of classes. A notice will be posted in the student lounge.
Clinical students. For students in the Incoming and other second through fourth year clinical students are assigned to a PSC supervision team for the upcoming year sometime in April. Each clinical team consists of one faculty member and usually one or two students from each class. Placement on a clinical team is meant to provide first-year students with the opportunity to observe clinical cases and to participate in clinical supervision (the specific opportunities and obligations will likely vary dependent upon the faculty member directing the team). Incoming clinical students are also required to spend two hours a week at the PSC desk as part of the initial orientation to clinic policies. The first year desk schedule will be established during the first week of fall classes.

All students. Students moving to Grand Forks from out of state should begin to establish state residency (e.g., by obtaining a North Dakota state driver’s license) shortly after making the move so that they are eligible for in-state tuition by the beginning of their second year (see https://und.edu/finance-operations/student-account-services/residency.cfm).

YEAR 1: FALL AND SPRING SEMESTERS

All students. Some time in their first year, students select a master’s advisory committee. This committee consists of a chairperson and normally two additional faculty members (though three may be selected). Students must recommend a committee to the Chairperson of the department who, if in agreement, will recommend the committee to the Dean of the School of Graduate Studies who, if in agreement, will officially appoint the committee. Thesis Advisory Committee Chairpersons must be either associate or full members of the UND graduate faculty. This committee has two functions: a) to guide/approve the student’s master’s thesis research, and b) to assist the student in outlining his or her program of study, which should be filed with the School of Graduate Studies by the end of the student’s first year. The program of study should reflect the fact that at least 30 semester hours are required to complete the master’s degree.

All students. Once the Dean of the School of Graduate Studies has appointed a thesis advisory committee, approved your program of study, your committee has approved your thesis prospective and you have filed your “Outline of Thesis” with the School of Graduate Studies, you will be advanced to masters candidacy (assuming you have maintained at least a 3.0 grade point average in your graduate coursework).

All students. Students will be provided feedback at the end of each semester (throughout your four years) regarding their performance in the department. Clinical students will receive feedback from the clinical faculty (primarily regarding your clinical progress) and all graduate students will receive evaluations from the faculty as a whole (primarily regarding academic and scientific progress).

Clinical students. Late in the spring semester of the first year, clinical students will be given the opportunity to express their preference for clinical PSC team supervisor for the upcoming year. Their preferences will be considered during the annual assignment process (see Appendix K).
YEAR 2

Clinical students. Second year clinical students will begin to see clients through their clinical team. Clients will be assigned with approval of your team supervisor and our PSC case assignment process.

All students. You should complete your thesis by the end of the summer session of your second year to ensure compliance with the normal progress requirements of the department. This means that you will graduate with a master’s degree by August of your second year. To accomplish this, you must file preliminary approval by July 7th (this is an approximate date, check bulletin each year to determine the exact date). In addition, you must have all incomplete grades removed from previous coursework and have your thesis filed with the School of Graduate Studies by July 21st (again this is an approximate date, see bulletin for exact date). Although this is normally not an issue, please be aware that to obtain your M.A. you must meet a residence requirement that states that you must spend a minimum of one semester or two summer sessions on UND’s main campus taking either 12 semester hours (6 in summer session) or being a graduate teaching or research assistant and taking 10 semester hours (5 in summer session). For clinical students, to ensure first round competition in the placement process, your thesis proposal must be defended by September 15th or your data collection must be entirely complete by April 1st of your second year.

Clinical and G/E students. After you complete the requirements for the M.A., the chairperson of your thesis advisory committee will need to schedule a vote of the full faculty to permit your continuation in the doctoral program. To continue on with comprehensive exams, practicum assignments (for clinical students), dissertation research, and remaining coursework you must have: a) earned a cumulative graduate GPA of at least 3.5; b) completed your thesis and M.A. requirements within three years of enrollment; and c) gained the approval a majority of the core and combined core + associated faculty of the program. Students failing to meet one or more of these requirements will be terminated from the respective Ph.D. program with a M.A. degree in general psychology (assuming all of the requirements for the M.A. have been met).

Clinical students. Clinical placements for the third year will be determined during the Spring semester of the second year. The process of assigning practicum placements has evolved over the years in the direction of allowing students and placements to determine the appropriateness of the match rather than our former process which largely deferred these judgments to the clinical faculty. Students are encouraged to talk to upper-level students and faculty about the placement process and the merits and challenges associated with each practicum option.

YEAR 3

Clinical and G/E students. After you have been advanced to the doctoral program, you will need to select a doctoral committee (the doctoral chairperson must be a full member of the graduate faculty) consisting of a chairperson and three other members. The Dean of the School of Graduate Studies will also appoint an outside member (a faculty member from another
department to be the Dean’s representative). You can request a specific outside member, but the decision remains with the Dean. This advisory committee has responsibilities that are similar to your thesis advisory committee (e.g., program of study, dissertation). Please note that you must have two consecutive years of full time graduate work on campus to earn your Ph.D., so make sure you sign up for at least 12 credits for 4 consecutive semesters. Also note that you need at least 90 semester hours to graduate (this includes “acceptable” masters work).

Clinical and G/E students. During the Fall of your third year you will take comprehensive exams. Please note that you must apply to the School of Graduate Studies for permission to take the comprehensive exam. For permission to be granted you must: a) have an approved program of study, b) have your scholarly tool completed (usually the statistics sequence in our program), and c) most of your coursework completed for the doctoral degree completed. You must successfully complete comps before requesting an internship readiness vote from the clinical faculty.

YEAR 4

Clinical students. In the fall of your fourth year, you should prepare for your 5th year clinical internship by sending for information about internships (see APPIC book in office). At some time in the fall semester, you should petition the clinical faculty for permission to seek an internship for the following year. You should provide the DCT with a summary of your upcoming APPIC clinical hours (assessment, therapy and supervision), a list of sites to which you wish to apply (along with their accreditation status), and a copy of your vita. This material will constitute a formal request to participate in the upcoming APPIC application process. Assuming that permission is granted, you can proceed with submission. Plan ahead since the clinical faculty does not necessarily meet every two weeks. Permission will be granted only for the upcoming application year so renewed approval would be required for subsequent years if you later withdraw from the process, program approval is subsequently retracted, or if you are unsuccessful. You must have preliminary outline for your dissertation and meet all of our curriculum requirements before the clinical faculty will vote on your internship readiness.

Clinical students. Finally, we strongly recommend that you make whatever attempt is necessary to complete your dissertation data collection before you leave for internship.

YEAR 5

Clinical students. Once you are on internship you will begin to make plans to graduate. The School of Graduate Studies usually permits our clinical Ph.D. to participate in the summer graduation ceremony when the following conditions are met: a) your dissertation is successfully defended within the Graduate School application deadlines; b) your internship director provides our program DCT written verification around mid-summer that you are on course for anticipated completion of your internship by the end of August (an exact date of anticipated completion is needed); and c) you have met all of the other curriculum requirements for the Ph.D. Under these conditions you will usually be allowed to participate in the ceremony, but you will not receive an
official diploma at that time. If you participate in the ceremony before completing the requirements you will have to petition the board of higher education for your official diploma once all of the requirements are completed. You need to assure that your internship director notifies our clinical program DCT (email is fine) on the day that the internship is completed. Our DCT then authorizes the UND registrar office to update your transcript to indicate that all of the requirements are then met. You can then contact the Grad School office to identify the paperwork that is needed to petition the board of higher education for your diploma (this is sometimes called “early graduation” since you would be receiving your official diploma after the August ceremony but sometime before December). The board will mail your diploma as soon as they can process your request and verify your completion.

NORMAL PROGRESS AND CONDITIONAL STATUS

A cumulative grade point average of at least 3.00 for all work taken as a graduate student must be maintained in order to remain in satisfactory academic standing in the School of Graduate Studies. However, there are additional department and program requirements that also must be met. These include all additional requirements specified by the School of Graduate Studies (e.g., successful completion of all comprehensive exams, an approved clinical internship), the student’s graduate committee, the Psychology Department, and the program (e.g., the earning of acceptable grades in all practica credit hours). After completion of all Program of Study course requirements except the dissertation and internship, clinical graduate students are also required to enroll in at least 1 continuing enrollment credit (PSY 996) each additional semester prior to graduation. A failure to maintain continuing enrollment for even a single semester constitutes potential grounds for dismissal, and approval of the School of Graduate Studies is required for more than two years of continuing enrollment credits. The clinical faculty may recommend that the School of Graduate Studies require enrollment in additional readings (PSY 593) or research (PSY 596) credits concomitant with continuing enrollment in cases where requests are made to exceed the two year (internship year plus one) continuing enrollment limit.

CONDITIONAL STATUS

Student status can be changed from normal to conditional for failing to meet any specified standard set by the program, department, or School of Graduate Studies. A motion to place a student on conditional status can also be advanced by any program faculty member in response to allegations of unethical conduct or concerns (in the case of the clinical program) about the student’s suitability for a career in clinical psychology. A majority of non-abstaining votes cast by the core program faculty is required to place a student on conditional status.

Students on conditional status remain in the program but may not be allowed to enroll for further academic credits toward their Program of Study until their standing is formally resolved. Clinical students with conditional status additionally may not provide psychological services. Conditional status will be resolved by the satisfactory completion of a course of remediation or by dismissal of the student by the program faculty.
GRIEVANCES AND DUE PROCESS

DUE PROCESS

Students placed on conditional status are expected to provide the faculty in their program with a written plan for addressing all identified performance concerns. Alleged training concerns or rule infractions will be documented in writing, and students whose status is in question will be provided with all information contained in his or her department file. Students placed on conditional status may be scheduled for a special meeting with the program faculty to account for their difficulties and describe possible steps to remediate the identified concern(s). A motion to dismiss a student from the program must be passed by the core program faculty to terminate a student from the program. The program faculty may require conditions for continued enrollment subsequent to lifting the conditional status of a student. Students have the right to appeal dismissal decisions to the Department Chairperson, School of Graduate Studies Dean, or Graduate Committee as specified in the UND Academic Catalog and Academic Concerns section of the Code of Student Life.

GRIEVANCE PROCEDURES

In the event that a student has a grievance regarding a department policy, department personnel, or department/program decision, that student should take the following steps:

1. First, the student should bring the matter to his or her advisory committee chairperson. The committee chairperson may decide to bring the matter to the attention of the members of the advisory committee, the faculty of a particular program (e.g., the clinical faculty) and/or the full faculty as he or she deems appropriate. In other cases the committee chairperson may decide to consult with the department chairperson or program director.

2. Second, if the student is dissatisfied with the actions of his or her committee chairperson or in the event that the issue involves his or her committee chairperson, the student may seek out the departmental chairperson or the program director directly to present his or her concerns.

3. Finally, if still dissatisfied, the student may follow the grievance procedure outlined in the UND Code of Student Life, which is received prior to registration. If you don’t receive one, you may acquire one at the Admissions office in Twamley Hall. Section Three of the UND Code of Student Life specifies procedures related to academic grievances.

4. If the student prefers an alternative to the above procedure, the student should contact the department ombudsperson.
DEPARTMENT OMBUDSPERSON

If you have concerns about how you are treated in class, you are encouraged to try to resolve the matter with your instructor. If you feel unable to meet with your instructor or if attempted resolution with your instructor does not produce an acceptable solution, you are encouraged to consult the Psychology Department ombudsperson. The ombudsperson's role is currently filled by Dr. Ruthig. The role of ombudsperson is to assist students in reaching a satisfactory solution to complaints relating to their functioning within the Psychology Department. The UND Affirmative Action Office in Twamley Hall (Sally Page at 777-4171) should be contacted if complaints involve possible discrimination or equal opportunity concerns. Affirmative Action also represents an entity outside of the department that may protect students from fears of possible reprisals by an individual. Please note the various avenues available to resolve concerns and grievances which may occur during your training in our department. Personal and academic complaints of one form or another are not uncommon in university life, and it is the department’s intention to facilitate the procedures necessary to lodge and resolve sources of discontent which may surface at times in the future.

THE ROLE OF STUDENTS IN THE DEPARTMENT

EXPECTATION OF STUDENT INVOLVEMENT

Students are responsible to make active efforts to become aware of all program policies and functions (for clinical students, this includes policies and functions pertaining to PSC). Your active participation in department functions provides a measure of commitment that is central to the program’s identity and long-term interests. Some examples of important department functions include our annual colloquium series, the Northern Lights Psychology Conference, our Friday afternoon Professional Development Series (for clinical students), the annual admissions open house weekend, faculty candidate interviews, and many others. Most events are advertised via flyers posted around the department.

Clinical students are required to attend, prior to internship, all meetings of the professional development series. Clinical students are also expected to attend colloquia, workshops, and conferences as part of the assessment of clinical competency (see Appendix J).

G/E students are expected to attend all colloquia and faculty candidate interviews and to attend and participate in the Northern Lights Psychology Conference. Participation in these events will be considered when students are evaluated by G/E faculty.

Some students may receive invitations to serve on department committees from the Department Chair. Although this form of service is not required, students are encouraged to take advantage of such opportunities, especially if they are preparing for employment in an academic setting.
Students in general may be contacted directly by faculty for assistance or for information of one sort or another. Whenever this occurs, students are expected to respond to requests for information in a timely and conscientious manner. Of particular importance to the clinical and G/E programs is that students respond to annual surveys used to monitor program quality. For the clinical program this information is also used in accreditation documents, and it is particularly important that the opinions expressed anonymously in this annual survey are representative of the student body.

**STUDENT REPRESENTATIVES**

Each graduate class should meet immediately in the fall semester of each year to elect a student representative to the meetings of the general faculty. Clinical students from each class should also elect a student representative to the meetings of the clinical faculty. Similarly, the G/E students should elect a student representative to attend meetings of the G/E faculty. These positions are important because they provide a direct mechanism for students’ voices to be heard in departmental governance procedures (each student representative has a ½ vote). One prior national survey indicated that graduate student voting privileges were infrequently (< 10%) permitted in scientist-practitioner clinical training programs. Student representatives bear a special responsibility of keeping his or her peers involved in the governance process and well-informed about program developments.

**TEACHING EXPERIENCES FOR GRADUATE STUDENTS**

**GRADUATE TEACHING ASSISTANTSHIPS**

The department expects all students to be involved in undergraduate teaching during their graduate training. Students generally receive Graduate Teaching Assistantships (GTA) during their first two years in our department. A student with a GTA is usually responsible for four, small (about 25) laboratory or discussion sections each semester. These sections are part of larger courses such as Developmental Psychology, Introductory Psychology, Statistics, Abnormal Psychology, or Research Methods. Students are supervised by the professor assigned to the larger course. In addition, some students (usually all experimental and some clinical students) are involved in teaching beyond their first two years. These students may continue on a GTA and/or they may take advantage of other teaching opportunities, as described below.

GTA assignments are made by the department chair, and students will learn about their course assignments and responsibilities through the instructors of the course(s) to which they have been assigned.

Students have a variety of responsibilities depending on the course and the instructor. For example, students may be required to attend lectures, write and grade tests (see Appendix N for
information on how scantron exams are processed), grade assignments, lead discussions, and supervise computer or laboratory assignments and experiments (among other possibilities). In addition, students must enroll in the Department’s Teaching Assistant Seminar during the first semester they hold a teaching assistantship.

At the end of each semester, teaching assistants will be evaluated on their performance by their students and by the faculty they assist. The students will complete the Student Assessment of Teaching form (see Appendix O); the instructor of record will determine whether the graduate teaching assistant met the objectives described in the GTA Performance Evaluation document (see Appendix P).

**INSTRUCTIONAL SKILLS TRAINING TRACK**

Competition for academic positions is very intense and the department wants to give new UND Ph.D.s the strongest credentials possible. Opportunity has often been equated with research experience and publication frequency. There is a growing realization that other skills and experiences need to be emphasized. The department has established a track to increase the emphasis placed on training graduates to be effective instructors. The program consists of two content courses and a supervised teaching experience. When open courses are available (e.g., an open faculty position), preference will be given to students who have completed the teaching track in the form of a teaching placement. The intent is to provide experiences that develop skills and allow the faculty to document that our students have unique training. The sequence includes:

1. **PSYC501/EFR 501-Psychological Foundations of Education**
   and at least one of the following:

   T&L 539 – College Teaching
   T&L 544 – Assessment in Higher Education
   T&L 545 – Adult Learners

   These two courses must precede the supervised teaching experience (Psyc 594).

2. **PSY 594 – Special Topics in Psychology: Teaching Practice – 1 credit**

   Small pull-out groups of 25 from Intro, Abnormal, Statistics, Developmental or other course for which there are large number of students and for which the grad student has adequate background. Supervision by faculty volunteers. A skill list will be developed along with oversight of lecture, test construction, syllabus, grading procedure, and classroom discussion content.
INDEPENDENT TEACHING

Students that have completed the instructional skills training track may receive one or more offers to teach a full course from the Department Chair. Students are compensated with a graduate teaching assistantship. Whether students receive such offers depends, in part, on the availability of teaching assistantships for upper level students. Students completing the teaching track program may also pursue additional teaching experiences by teaching courses at other institutions of higher learning in the Grand Forks region.

RESOURCES AND SUPPORT SERVICES FOR STUDENTS

FINANCIAL ASSISTANCE

The following is a brief synopsis of some of the different types of financial support available to you as a UND graduate student. However, it is wise to periodically check with the School of Graduate Studies (701-777-2784) or Student Financial Aid (701-777-3121) to keep abreast of new sources of aid.

Tuition Waiver Scholarships. Tuition waivers are provided for a subset of students through the School of Graduate Studies and Psychology Department. Check with the Department Chairperson to determine if you are eligible for a partial or full tuition waiver for the upcoming academic year. We have been successful in recent years in providing tuition waivers (not fees) for all of our graduate students during their first four years in the program.

Chester Fritz Scholarships. $1,000 each are awarded to North Dakota students with an outstanding academic record who are continuing graduate work.

Clinical Placement. Third and fourth year students are often provided with a clinical placement in one of several locations around the area. See the sections of this handbook that pertain to clinical placements for more information about these placements.

Federal Work Study Program (FWSP). Provides jobs for students demonstrating financial need to further their education. Students must be enrolled for at least 6 credits, and typically work about 15-20 hours per week.

Diversity Tuition Waiver. The University of North Dakota has a number of undergraduate (approximately 80) and graduate (approximately 20) tuition waivers available to increase diversity. Special emphasis of this policy is to recruit, assist, and retain members of federally recognized American Indian tribes and Alaska Natives and villages, American Indian graduates of tribally controlled community colleges in North Dakota, and economically disadvantaged students. Recipients shall be limited to a maximum of two years. Deadline is April 15th for Fall.
Graduate Teaching Assistant (GTA). The purpose of these assistantships is to facilitate students working toward their degree while gaining teaching experience in the field of the degree. Appointments may be for one-fourth or one-half of full-time service. Most assistantships are half-time assistantships which require approximately fifteen hours of work per week and permit the student to carry a minimum of six and a maximum of ten credits of graduate work each semester. A quarter-time assistant must carry eight to twelve credits per semester. In addition, GTAs receive a health insurance policy with the premiums paid by the School of Graduate Studies. Summer GTAs are occasionally available and are usually one-quarter time. Keep your eyes open for memos from the Chairperson regarding summer GTA positions.

Federal Stafford Loans. The Federal Stafford Loan is available to students who are enrolled at least half-time and demonstrate financial need. Financial need is determined by subtracting the expected family contribution (calculated from income information on the Free Application for Federal Student Aid–FAFSA) from the estimated cost of attendance. The Federal Government pays the interest while you are enrolled at least half-time. Stafford Loans cannot exceed your financial need or the $8,500 annual loan limit for graduate students. The Federal Unsubsidized Stafford Loan is also available to students, however, financial need is not required to be eligible for this loan. You must pay the interest on the loan during in-school periods, the grace period and any deferment period. The combined amounts borrowed under the Stafford and Unsubsidized Stafford Loan programs cannot exceed the cost of attendance or the $18,500 annual loan limit for graduate students. The FAFSA must be processed prior to applying for these loans. Forms are available in the Student Financial Aid Office.

Summer Doctoral Fellowships. These scholarships are awarded to students who are pursuing the Ph.D. and are willing to work full-time on dissertation research over the summer months. A committee comprised of faculty members along with the School of Graduate Studies determines whose projects are worthy. Application procedures are outlined on a regular basis in the Grad Grapevine (the graduate student newsletter).

GRADUATE RESOURCE ALLIANCE FOR STUDENTS IN PSYCHOLOGY

One of the best examples of active student efforts to improve the clinical program and department is the Graduate Resource Alliance for Students in Psychology. The acronym GRASP was coined by the student leaders who began this organization and provided the following description for inclusion in this handbook as a means to inform, and encourage the involvement of, all future incoming students:

Although previous classes had considered the idea of a graduate student organization, the idea was put into action by the incoming class of 2004-2005. The first official meeting was held on April 6, 2004 with four people in attendance. Since that time we have been slowly growing with more students getting involved in the formation of this organization. GRASP continues to hold annual elections, holds fundraisers, organizes workshops, and provides useful orientation assistance to incoming graduate students as a formally recognized student organization on campus.
As described in its missions statement, GRASP was founded with the intent of organizing a formal dissemination of academic information between graduate students in psychology, fostering solidarity and colleagueship among graduate students in psychology, creating a centralized lobbying effort for graduate student issues, actively generating revenue to supplement financial resources for graduate student scholarly and academic activities, promoting student morale, and encouraging critical thinking and productive discussion about current issues in the field of psychology. Students are also encouraged to contribute intellectually and critically evaluate ways in which to revolutionize the field of psychology. These opportunities for student involvement and advocacy represent the core benefit of GRASP membership.

It is easy for students to get involved in the proactive agenda set by GRASP for the graduate programs and department. Students can become involved primarily by regularly attending organizational meetings, serving on committees and subcommittees, and assisting with activities such as the coordination of fundraising, social events, and training workshops. Student involvement is the foundation of GRASP and the hope is that all graduate students will capitalize on their opportunity to participate.

For more information, please see the GRASP website at:
www.und.nodak.edu/org/grasp/index.htm

LIBRARIES

Chester Fritz Library. Contains over 2 million print and non-print items. The Chester Fritz is also a depository for state and federal government documents, the ERIC (Educational Resource Information Center), and has a rather large special collections department. A variety of online search engines are available.

Medical and Law Libraries. The Harley E. French Health Sciences Library, housed in the Medical Science Building, consists of 61,000 volumes, 1,666 current serials, and 1,316 audiovisual programs, and services the Medical Center which includes the School of Medicine, the College of Nursing, and Allied Health programs. The Thormodsgard Law Library consists of 186,000 volumes and 3,600 annual subscriptions and is located adjacent to the Law Building.

Grand Forks Public Library. Open seven days a week. The library is relatively well-stocked and can serve as a nice diversion. They often have speakers come in for colloquiums. A calendar of the month’s events can be picked up at the main desk.

Computer Services. The Department has computer labs for graduate students (via INPSYDE funds) and for undergraduate instructional needs (see Appendix Q for policy statement). Students also have the opportunity to use computer labs maintained elsewhere around the University.
Counseling Services. The Counseling Center in McCannel Hall provides counseling, testing, addiction prevention services, academic skills development, and career development services to UND students. (All at a nominal fee or free of charge.)

HOUSING

All students are free to choose their own housing arrangement. Student living facilities at UND include residence halls and apartments for single students and families.

Residence Halls. UND has 15 residence halls. Hancock Hall is reserved for graduate students and older than average (21+ years old) students. The building has mostly single and some double occupancy rooms with private baths in community clusters. Laundry facilities, a kitchenette with microwave is located on each floor. Individual rooms have wireless access and in-room hard-wired internet connection, as well as cable TV hookup. All residence hall rooms include a desk, chair, single bed, and dresser. A meal plan is required and several options are available.

University Single Student/Family Housing. UND manages more than 850 apartments (1, 2, and 3 bedroom units) for single students and students with families. The advantages of University apartment housing include location, reasonable rent, access to DSL, and subsidized utilities (i.e., utility bills are about 1/3 of off campus utility bills). There is rather a long waiting list (3 months at best) to acquire apartment housing on campus, so apply early.

There is a non-refundable application fee that must be paid at the time of applying for housing. Complete information about the residence halls and apartments including eligibility and application forms are available on the web at www.housing.und.edu or by contacting the Housing Office, University of North Dakota, 525 Stanford Road, Stop 9029, Grand Forks, ND 58202-9029.

Off-Campus Housing. Students who wish to live off campus must contract for such facilities themselves.

CHILDCARE

The University Children's Center (UCC) provides quality care and education for children 2-12 years of age, and for those needing care before and after all public school programming including Head Start. The Children’s Center is open to UND student and employee families and also families of the Greater Grand Forks Community, welcoming children from a variety of ethnic, cultural, socio-economic and educational backgrounds and is committed to integrating children with special needs. Children do not need to be toilet trained to attend the center.

The Children’s Center strives to maintain high quality early childhood programming such as those put forth by the National Academy of Early Childhood Education, and is licensed by the North Dakota Department of Social Services. This license indicates compliance with State
Health, Safety and Fire Codes, as well as State Guidelines for Center based childcare and preschool.

A day at the University Children’s Center includes a USDA approved breakfast; lunch, snack and opportunities for quiet as well as active times. UCC is proud of its qualified teachers with degrees in early childhood education or a related field; its toddler program that has completed the North Dakota quality Enhancement Project; family style programming and a long tradition of stable staff who are committed to best practices in early childhood education.

The Center is open year round, Monday-Friday, 7:00 a.m. – 5:30 p.m., and is located on the UND campus at 525 Stanford Road, Community Center Building. Childcare rates and additional information about UCC can be found by visiting www.childrenscenter.und.edu or by calling: 701-777-3947.

Those individuals needing care for children under two can visit the North Dakota Resource and Referral website at www.ndchildcare.org and connect with a referral specialist to obtain a listing of available providers.

HEALTH SERVICES

Student Health Services, located in McCannell Hall, provides low cost medical care for students (spouses can pay a semester fee and be seen by Student Health Services throughout that semester). Those items not covered there can be supplemented through student health insurance. If you are appointed as a GTA/GRA/GSA, the premiums are paid by the University (if you wish to have coverage for your spouse, you must pay approx. $1,344.00/year). You may continue the coverage after your GTA appointment is over, if you take over premium payments. In addition, children of students may be seen for free at the Family Practice Center (a facility that trains physicians supervised by Medical School personnel and licensed physicians). Specific health insurance questions can be answered by the Grad School (701)777-2784. As long as you have an assistantship (stipend) over the 9 month school year your summer health insurance premiums are covered at no cost.

Mental Health Services

Mental health counseling is provided at no cost to students at the University Counseling center, also in McCannell Hall, room 200 (777-2127). Students may also seek services from providers/agencies outside of the University, though this may be at the student’s own expense. Some of these resources are listed below, though others may be identifiable online. Clinical students may want to note that the clinical program may offer occasional ASCE through one or more of these practices/facilities; if currently, then they should appear on the list of active practica available on Bb.

Northeast Human Service Center (701) 795-3100 http://www.nd.gov/dhs/locations/regionalhsc/northeast/
Altru Psychiatry Center (701) 780-6697 http://www.altru.org/services/psychiatry-center/
Assessment & Therapy Associates of Grand Forks (701) 780-6821 http://www.grandforkstherapy.com/
<table>
<thead>
<tr>
<th>Company</th>
<th>Phone Number</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Violence Intervention Center (CVIC)</td>
<td>(701) 746-0405</td>
<td><a href="http://cviconline.org/">http://cviconline.org/</a></td>
</tr>
</tbody>
</table>

**PARKING**

Graduate Teaching Assistants who are ½ time may get a red “A” zone sticker, which permits the use of the choicest parking lots. The Parking Office requires 1/4 GTAs to get a regular student parking sticker. When going to the Parking Office to get your sticker, remember to bring a copy of your GTA contract as proof that you are indeed an employee of the University. Contact Parking and Transportation Services at 701-777-3551.
APPENDIX A: PSYCHOLOGY DEPARTMENT FACULTY

April Bradley, Ph.D.  
Core Clinical Faculty Member  
B.A. University of Arizona, 1992  
M.A. University of Texas at El Paso, 1995  
Ph.D. University of Nevada - Reno (2003)  
Research: Child clinical psychology assessment & treatment; child custody evaluations

Adam Derenne, Ph.D.  
Core G/E Faculty Member & G/E Program Director  
B.A., University of Wisconsin-Whitewater, 1996  
M.A., University of Wisconsin-Milwaukee, 1998  
Ph.D., University of Wisconsin-Milwaukee, 2003  
Research: Experimental analysis of behavior, behavioral genetics

F. Richard Ferraro, Ph.D.  
Core G/E Faculty Member  
B.A., SUNY at Potsdam, 1982  
M.A., University of Kansas, 1986  
Ph.D., University of Kansas, 1989  
Research: Cognitive aging and gerontology, Alzheimer’s disease, Parkinson’s disease; Cognitive neuropsychology and neuroscience; older men’s and older women’s health; visual word recognition; inhibitory processing in cognitive performance.

Mark Grabe, Ph.D.  
Professor Emeritus  
B.S., Iowa State University, 1971  
M.S., Iowa State University, 1973  
Ph.D., Iowa State University, 1975  
Research: Assessment & development of cognitive & metacognitive skills involved in reading and study behavior.

Jeffrey Holm, Ph.D.  
Core Clinical Faculty Member & Department Chair  
A.B., Hope College, 1981  
M.S., Ohio University, 1983  
Ph.D., Ohio University, 1987  
Research: Assessment/measurement & treatment of headache & other psychophysiological disorders; development and expression of sexual aggressive behaviors; multivariate statistics.

Andre Kehn, Ph.D.  
Core G/E / Forensic Faculty Member  
B.S. Mount Olive College, Mount Olive, NC (Psychology)  
M.S. University of Wyoming, Laramie WY (Experimental Psychology)  
Ph.D. University of Wyoming, Laramie WY (Experimental Psychology)  
Research: Social cognition and psychology and law: eyewitness identification accuracy, cross-race effect, emotion and juror information processing, perception of witnesses.
Alison Kelly, Ph.D.  Forensic Faculty Member
B.A., University of North Dakota, 2000
M.A., University of North Dakota, 2004
Ph.D., University of North Dakota, 2006
  Research: Social psychology & the law; perceptions of violent crime scenarios.

Alan King, Ph.D.  Core Clinical Faculty Member
B.A., Nicholls State University, 1977
M.S., University of Southwestern Louisiana, 1979
Ph.D., Louisiana State University, 1984
  Research: Personality appraisal and development, alcohol research, adult psychopathology, and professional training issues

John Paul Legerski, Ph.D.  Core Clinical faculty Member & PSC Director
B.S., Brigham Young University, 2004
Ph.D., University of Kansas, 2010.

Doug McDonald, Ph.D.  Core Clinical Faculty Member & INPSYDE Program Director
B.S., University of South Dakota, 1987
M.A., University of South Dakota, 1988
Ph.D., University of South Dakota, 1992
  Research: Cross-cultural issues in clinical assessment, research, and graduate training

Joseph Miller, Ph.D.  Core Clinical Faculty Member & Director of Clinical Training,
B.A. College of William & Mary, 1993
M.A. University of South Dakota, 2000
Ph.D. University of South Dakota, 2002
Post-Doctoral fellowship, University of Minnesota (2002-2003)
  Research: Development of nonvisual cognitive and neuropsychological assessment measures

Douglas Peters, Ph.D.  Professor Emeritus
B.A., Santa Clara University, 1970
M.A., Southern Illinois University, 1972
Ph.D., Southern Illinois University, 1975
  Research: Psychology and the law and issues relating to the child witness, eyewitness memory, media effects, and expert testimony.

Thomas Petros, Ph.D.  Core G/E Faculty Member
B.A., Kent State University, 1975
M.A., Kent State University, 1978
Ph.D., Kent State University, 1981
  Research: Reading processes and learning disabilities; alcohol, caffeine & nicotine effects on cognitive functioning
Karyn Plumm, Ph.D.  Core G/E / Forensic Faculty Member  
B.A., University of North Dakota, 2002  
M.A., University of North Dakota, 2004  
Ph.D., University of North Dakota, 2006  
Research: Hate crime, gender issues, forensic psychology

Dmitri Poltavski, Ph.D.  Core G/E / Forensic Faculty Member  
B.A., University of North Dakota, 1998  
Moscow State Pedagogical University, 1998  
M.A., University of North Dakota, 2000  
Ph.D., University of North Dakota, 2003  
Research: cognitive effects of nicotine, alcohol; visual perception in sports and learning; psychophysiological recording

Joelle Ruthig, Ph.D.  Core G/E Faculty Member  
B.A., University of Manitoba, 1997  
M.A., University of Manitoba, 2001  
Ph.D., University of Manitoba, 2005  
Research: Health psychology; longitudinal analyses of optimism & health, attribution retraining

Heather Terrell, Ph.D.  Core G/E Faculty Member / Undergraduate Program Director  
B.A., Arizona State University, 2002  
M.A., Arizona State University, 2006  
Ph.D., Arizona State University, 2009  
Research: Social and personality psychology; gender roles, stereotyping and prejudice, aggression, evolutionary psychology.

Cheryl Terrance, Ph.D.  Core G/E Faculty Member / Forensic Program Director  
B.A., Carleton University, 1991  
M.A., Carleton University, 1993  
Ph.D., Carleton University, 2000  
Research: Social psychology, gender issues, and perceptions of victims within the courtroom

Jeffrey Weatherly, Ph.D.  Core G/E Faculty Member  
B.A., California State University, Chico, 1992  
M.S., Washington State University, 1993  
Ph.D., Washington State University, 1996  
Research: Animal learning & behavior; gambling.

Richard Allen Wise, Ph.D., J.D.  Core Clinical / Forensic Faculty Member  
J.D., Cleveland-Marshall College of Law, 1979  
Ph.D., Catholic University, 2003  
Research: Forensic psychology and eye witness
APPENDIX B: GRADUATE ADMISSIONS PROCESS

The Department of Psychology at the University of North Dakota offers an undergraduate minor and major in psychology and graduate programs leading to degrees of Master of Arts (M.A.) and Doctor of Philosophy (Ph.D.). Located within UND’s College of Arts and Sciences, the Department meets a demanding undergraduate teaching mission as well as providing scholarly and professional graduate training and maintaining active research programs. In addition to its faculty of 22, the Department also utilizes the expertise of area professionals who serve as clinical and adjunct faculty. Enrollment in graduate programs is limited to maintain a favorable student-faculty ratio. The Department offers doctoral programs in Clinical (APA-approved) and General/Experimental Psychology.

Admission Requirements

- All admissions material must be submitted through the School of Graduate Studies: http://graduateschool.und.edu.

- Students are admitted to the graduate program with the expectation that they plan to obtain the Ph.D. degree. Applicants must complete the Graduate Record Exam (Verbal, Quantitative, Analytic Writing) and direct ETS to forward their scores to the School of Graduate Studies at the University of North Dakota so that they are received by the application deadline (January 1). Three letters of recommendation and the GRE Subject Test are also required prior to admission.

- Applicants can apply to one or both of our graduate doctoral programs. Doctoral training programs must often plan several years ahead to assure that funding, practicum opportunities, and optimal class sizes are assured. The admission of significant numbers of advanced students can complicate long-term planning. Thus, applicants who have earned, or will earn, a graduate degree in psychology, counseling, social work, sociology, any related behavioral science field will be assigned to a separate pool for consideration of admission to either the clinical (MAC) or experimental (MAE) programs. The psychology department faculty makes a judgment each year regarding the maximum number of students we are able to accept from the clinical and general/experimental applicants possessing graduate degrees in psychology and related-disciplines.

- Applicants to the clinical and general/experimental Ph.D. programs will be eliminated from the initial admission review if they fail to meet any one of the following criteria:

  A. The following materials must be received by the School of Graduate Studies by the January 1st deadline: the application, a personal statement regarding career objectives and rationale for selecting UND, a curriculum vitae/resume, transcripts from all academic institutions attended, official GRE scores, and payment of the application fee.
B. A cumulative undergraduate GPA of 3.2 or above, and/or a graduate GPA of 3.75 or above for applicants in the MAC or MAE pools.

C. Verbal, Quantitative, and Analytic Writing GRE scores that, in each area, equal or exceed the 30th percentile.

- The Admissions Committee will evaluate applicant’s most recent GRE scores. GRE scores in excess of 5 years old will be rated, but applicants who are ultimately in a position to receive an offer of admission must first retake the exam and successfully meet the department’s minimum requirements with the updated scores. Applicants will be given the minimum points for the GRE Subject test or letters of recommendation if they are not available once the application deadline has passed.

- The clinical psychology program also offers two federally funded positions for qualified Native American applicants. Your eligibility for consideration in our Indians Into Psychology Doctoral Education (INPSYDE) program can be determined by contacting the director of this program (Dr. Doug McDonald). Minimum GRE and grade eligibility requirements may differ for applicants who qualify for the INPSYDE program.

- As specified in the department’s admissions policy, the applicants in each pool will be ranked, and the top applicants will be invited to visit the UND Psychology Department annual open house. The open house is held in either late February or early March, and begins on a Friday morning and ends around noon on Saturday. During the open house, department administrators will provide an orientation meeting, and faculty members will give brief presentations of their research interests. Applicants will also have an interview with two or more members of the Admissions Committee. Finally, applicants will have an opportunity to request individual meetings with faculty members of interest.

**Degree Requirements**

Graduate students in the psychology department must meet all of the policies and standards that are described in both the UND Graduate and Psychology Department Student Handbooks. Evaluations are made each semester on the academic progress and clinical skills (for students in the clinical Ph.D. program). Students must remain in good standing to remain in the program. Assuming compliance with university and program policy, students must meet the following requirements to complete the Ph.D.:

- Graduate Course Work (at least four years of full academic enrollment which includes completion of the Scholarly Tool for the Ph.D. which is met by the successful (GPA > 3.5) completion of PSY 541, 542 and 543;
- Successful completion of both a Master’s thesis and Doctoral dissertation;
- Successful completion of all areas of comprehensive exams;
- Successful completion of an approved (one calendar year) clinical internship and required practicum (21) credit hours for the Ph.D. in clinical psychology.
Minor in Psychology

Graduate students taking major work in other departments and graduate minor work in psychology for a master’s degree should have the equivalent of an undergraduate minor in psychology with the following specific courses: Introduction to Psychology, Developmental Psychology, Abnormal Psychology (or the equivalent). Any of the psychology courses which carry graduate credit are acceptable for the graduate minor. If you are taking major work in another department and minor work in psychology for a doctoral degree, in addition to having the undergraduate preparation noted in the paragraph above, must also have completed a course in statistics and an undergraduate laboratory course in Experimental Psychology. No specific courses are required for the graduate minor except that one-half of the total credits for the minor must be 500-level credits.
APPENDIX C: CLINICAL ADMISSIONS WITH AN ADVANCED DEGREE

An advanced curriculum can be followed by: anyone holding a master's of arts or sciences or a Ph.D. in psychology that included a thesis and/or dissertation that is consistent with those required by our program (see above for a description of consistent theses and/or dissertations). A minimum of 60 semester hours must be taken from our program to graduate. The minimum requirements of the advanced curriculum are:

Possibility of completing the program in four years (3 years academic & 1 year predoctoral internship), one year of community placement, three years of PSC work, a doctoral dissertation, doctoral comprehensives, predoctoral internship, course work as follows: normally it is expected that students in this track will complete all of our required course work. However, petitions to omit a particular class can be advanced. The petition process follows these steps: present your petition with supporting documents to the instructor of the course (as determined by the DCT), the instructor will either recommend or not recommend approval based on his/her examination of your request, supporting documentation, and any other material she/he requests (e.g., challenge examination), the DCT will then consider the request and either approve or deny the petition. This information will be forwarded to the student's advisory committee.
# Appendix D: Program of Study Example

**University of North Dakota Graduate School**

Twin City Room 414 - 2nd Centennial Drive Stop 5179 - Grand Forks, ND 58202-9370

Phone (701) 777-7284; 1-800 CALL-UND (ext. 2784); Fax (701) 777-5616

## Program of Study

<table>
<thead>
<tr>
<th>DOCTORAL DEGREE AND SPECIALIST DIPLOMA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Address</td>
</tr>
<tr>
<td>Address</td>
</tr>
<tr>
<td>STUDENT ID #</td>
</tr>
<tr>
<td>Phone</td>
</tr>
<tr>
<td>E-Mail</td>
</tr>
<tr>
<td>Degree Sought</td>
</tr>
<tr>
<td>Expected Graduation Date</td>
</tr>
</tbody>
</table>

A program of study for a Doctoral Degree or Specialist's Diploma is to be completed using this form. The complete program consists of this cover page together with the requisite number of pages containing the courses and credits required for the program. The student and the Faculty Advisory Committee should sign the program after which this copy should be submitted to the Graduate School to receive the approval of the Dean. The program becomes official after receiving such approval and any subsequent changes must have the written approval of the student, the advisory committee chairperson and the Dean of the Graduate School. It is the student’s responsibility to complete the approved program as outlined and as prescribed in the Graduate Catalog. The committee chair, the student, and the major department will receive a copy of the approved program direct from the Graduate School after its approval by the Dean.

### Major Field of Study: Clinical Psychology

Scholarly Tool Requirements (Note: If these tools are courses eligible for graduate credit, and you wish them to carry credits toward the degree, they also must be listed in the program, preferably in the major):

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
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<tbody>
<tr>
<td>PSCY 541</td>
<td>Advanced Univariate Statistics</td>
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<tr>
<td>PSCY 542</td>
<td>Multivariate Statistics</td>
</tr>
<tr>
<td>PSCY 543</td>
<td>Experimental Design</td>
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</table>

Other Special Requirements: Successful completion of comprehensive exams and an approved year-long clinical internship

Academic Term(s) during which the residence requirement for this degree program will be met:

---

**The Program of Study for the degree indicated above and on the following page(s) is hereby approved:**

<table>
<thead>
<tr>
<th>Committee Chairperson</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student</td>
<td>Date</td>
</tr>
<tr>
<td>Member</td>
<td>Date</td>
</tr>
<tr>
<td>Member</td>
<td>Date</td>
</tr>
<tr>
<td>Member</td>
<td>Date</td>
</tr>
<tr>
<td>Dean of the Graduate School</td>
<td>Date</td>
</tr>
<tr>
<td>Member at-Large</td>
<td>Date</td>
</tr>
</tbody>
</table>

(rev. 8/09)
PROGRAM OF STUDY - Page 2

Student:

**Format:** Courses are to be grouped into major, minor, cognates, foundations, etc. in accord with degree requirements stated in the Graduate School Catalog.

**Transfer Credits:** List the course(s) on your Program of Study as it shows on your transcript. List the University in parenthesis after the title of the course. Send an official transcript to The Graduate School when graded, if it has not been previously submitted.

**Substitutions:** If substituting a required course, list the UND course it is being substituted for after the title of the course.

Check this box if credits were part of a completed Master's Degree

<table>
<thead>
<tr>
<th>Dept.</th>
<th>Course No.</th>
<th>Title of Course</th>
<th>(Semester Credits)</th>
<th>Transfer and Master's courses</th>
<th>UND Doctoral or Specialist Courses</th>
<th>Grade</th>
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<tr>
<td>PSYC</td>
<td>541</td>
<td>Advanced Univariate Statistics</td>
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<td>PSYC</td>
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<td>Clinical Assessment - I</td>
<td>4</td>
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<td>PSYC</td>
<td>575</td>
<td>Behavior Pathology</td>
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<tr>
<td>PSYC</td>
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<td>Clinical Assessment - II</td>
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<td>PSYC</td>
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<td>Multivariate Statistics</td>
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<td>PSYC</td>
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<td>Theories of Psychotherapy</td>
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<td>PSYC</td>
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<td>Professional Issues and Ethics</td>
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<tr>
<td>PSYC</td>
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<td>Master's Thesis</td>
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<tr>
<td>PSYC</td>
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<td>Advanced Therapeutic Interventions</td>
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<tr>
<td>PSYC</td>
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<td>Cognitive/Affective Foundations</td>
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<tr>
<td>PSYC</td>
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<td>Clinical Practice</td>
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<tr>
<td>PSYC</td>
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<td>Supervised Field Work</td>
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<tr>
<td>PSYC</td>
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<td>Professional Issues</td>
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<tr>
<td>PSYC</td>
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<td>Advanced Social Psychology</td>
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<tr>
<td>PSYC</td>
<td>535</td>
<td>Physiological Psychology</td>
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<tr>
<td>COUN</td>
<td>505</td>
<td>History of Psychology</td>
<td>3</td>
<td></td>
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<tr>
<td>PSYC</td>
<td>551</td>
<td>Advanced Developmental Psychology</td>
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<tr>
<td>PSYC</td>
<td>521</td>
<td>Diversity Psychology</td>
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<tr>
<td>UNIV</td>
<td>994</td>
<td>Internship</td>
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<tr>
<td>PSYC</td>
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<td>Dissertation</td>
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</tbody>
</table>

Subtotal Credits: 32  Grade: 60

Total Credits: 92 (rev. 8/05)
**APPENDIX E: ADJUNCT & CLINICAL ADJUNCT FACULTY LIST**

Appointment Period: January 1st (2014-2016)

<table>
<thead>
<tr>
<th><strong>Name</strong></th>
<th><strong>Adjunct Appointment</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Adams-Larsen, Margo</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Baas (Freed), Stephanie</td>
<td>Clinical, Assistant</td>
</tr>
<tr>
<td>Bergloff, Paula</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Biberdorf, David</td>
<td>Associate</td>
</tr>
<tr>
<td>Clow, Randi</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Crosby, Ross</td>
<td>Assistant</td>
</tr>
<tr>
<td>Ellison, Jo</td>
<td>Clinical, Assistant</td>
</tr>
<tr>
<td>Engel, Scott</td>
<td>Assistant</td>
</tr>
<tr>
<td>Ertelt, Troy</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Gregory, Jeffrey</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Haugen, Erin</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Hines, Lindsay</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Jackson, David</td>
<td>Clinical, Professor</td>
</tr>
<tr>
<td>Juanto, Mariah</td>
<td>Clinical, Assistant</td>
</tr>
<tr>
<td>Kolstoe, Paul</td>
<td>Clinical, Professor</td>
</tr>
<tr>
<td>Kotschwar, Jeanine</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Mayzer, Roni</td>
<td>Associate</td>
</tr>
<tr>
<td>McDougall, Casey</td>
<td>Clinical, Assistant</td>
</tr>
<tr>
<td>Mitchell, James</td>
<td>Professor</td>
</tr>
<tr>
<td>Muse, Shyla</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Paulson, Heidi</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Peltier, Shelly</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Peterson, Lisa</td>
<td>Clinical, Assistant</td>
</tr>
<tr>
<td>Schmutzer, Peter</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Sloan, Lora</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Thompson, Susan</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Veenstra, Myron</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Vogeltanz-Holm, Nancy</td>
<td>Professor</td>
</tr>
<tr>
<td>Welke, Charles</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Willert, Meryl</td>
<td>Clinical, Associate</td>
</tr>
<tr>
<td>Wonderlich, Stephen</td>
<td>Professor</td>
</tr>
<tr>
<td>Yeager, Catherine</td>
<td>Clinical, Professor</td>
</tr>
</tbody>
</table>
APPENDIX F: CLINICAL PSYCHOLOGY CURRICULUM (REV 6-16)

F.1. OVERVIEW: COURSEWORK, RESEARCH & CLINICAL PRACTICA

Curriculum Summary: The typical program requires five years -- four years of coursework, research, and clinical practica, and a fifth year clinical internship.

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall Semester</th>
<th>Spring Semester</th>
<th>Summer Semester</th>
</tr>
</thead>
</table>
| 1st  | 541 - Adv Univariate Stats (3) - Petros  
570 - Clinical Assessment I (4) - Miller  
575 - Behavior Pathology (3) – King | 543 - Experimental Design (3) – Petros  
571 – Clinical Assessment II (4) – Miller  
Foundation Course (3): Odd Years: 521, 533; Even Years: 539; Every Year: 551, 560 | Optional credits  
e.g., 594 (1) for assessment work |
| 2nd  | 542 - Multivariate (3) - Holm  
573 - Psychotherapy (3) - Legerski  
579 - Pro Ethics (3) - McDonald  
580 - PSC Practice (1) | 574 - Adv Tx Interventions (3)  
580 - PSC Practice (1)  
998 – Thesis Credits (3)  
Foundation Course (3): Odd Years: 521, 533; Even Years: 539; Every Year: 551, 560 | 594 – ERS&C (2) - Miller  
998 - Thesis (3-5)  
580- PSC (1) |
| 3rd  | 580 - PSC Practice (1)  
587 - Supervised Field Work (3)  
999 - Dissertation (3)  
Additional 999 credits or Foundation course (Every Year: 537) | 580 - PSC Practice (1)  
587 - Supervised Field Work (3)  
999 – Diss or Foundation course (3)  
Foundation course (3): Odd Years: 521, 533; Even Years: 539; Every Year: 551, 560 | 580- PSC Practice (1)  
*587- Supervised Field Work (1)  
999-Dissertation (1) |
| 4th  | 580 - PSC Practice (1)  
*587 - Supervised Field Work (3)  
999 - Dissertation (3)  
Additional 999 credits or Foundation course (Every Year: 537) | 580 - PSC Practice (1)  
*587 - Supervised Field Work (3)  
999 – Diss or Foundation course (3)  
Foundation course (3): Odd Years: 521, 533; Even Years: 539; Every Year: 551, 560 | Optional credits |
| 5th  | UNIV 994 (1) Internship | UNIV 994 (1) Internship | UNIV 994 (1) Internship |

Note: Students are required to complete a minimum of 6 cr for the Master’s thesis and 13 cr for the doctoral dissertation.

Foundation Courses (Offerings of courses listed below are subject to change at the discretion of the responsible departments/Chairs.)

<table>
<thead>
<tr>
<th>Foundation Areas</th>
<th>Courses</th>
<th>Instructor</th>
<th>Offered</th>
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<tbody>
<tr>
<td>Social Foundation</td>
<td>PSY 560 - Adv Social Psychology</td>
<td>Variable</td>
<td>Every Spring</td>
</tr>
<tr>
<td>Cognitive/Affective Foundation</td>
<td>PSY 533 - Theories of Learning</td>
<td>Derenne</td>
<td>Odd Springs</td>
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<tr>
<td></td>
<td>PSY 539 - Adv Cognitive Psychology</td>
<td>Ferraro</td>
<td>Even Springs</td>
</tr>
<tr>
<td>Biological Foundation</td>
<td>PSY 537 – Physiology of Behavior *</td>
<td>Poltavski</td>
<td>Every Fall</td>
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<tr>
<td>History Foundation</td>
<td>COUN 505 – History of Psychology</td>
<td>Whitcomb</td>
<td>Every Summer</td>
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<tr>
<td>Developmental Foundation</td>
<td>PSY 551 - Advanced Developmental</td>
<td>Ferraro</td>
<td>Every Spring</td>
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<tr>
<td>Diversity Foundation</td>
<td>PSY 521 - Diversity Psychology</td>
<td>McDonald</td>
<td>Odd Springs</td>
</tr>
<tr>
<td>Teaching Track:</td>
<td>(a) EFR 301 – Ed Psych</td>
<td>TBA</td>
<td>Every Spring</td>
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<tr>
<td></td>
<td>(b) CTL 539, 544, or 545</td>
<td>TBA</td>
<td>Variable</td>
</tr>
<tr>
<td></td>
<td>(c) PSYC 594 – Spec Topics: Teaching Practice</td>
<td>variable</td>
<td>As needed</td>
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* Approval may be granted to substitute Psychopharmacology or Neuropsychology to meet this requirement for students who previously completed an undergraduate course in physiological psych with a grade of A or B.

Normal Progress Expectancies (Once benchmark met then student returns to normal progress.)

1. Cumulative GPA > 3.5 at all times in the program
2. Satisfactory grades in all PSYC 580 & 587 credits
3. Master's Thesis proposal by September 7th of fall semester, second year
4. Master's Thesis defense before first day of fall semester, third year;
5. Master's Thesis & degree completed within 3 years of enrollment (failure to meet would preclude enrollment past the M.A. degree).
6. Comps completed by March 1st of third year;
7. Dissertation proposed before October of fourth year;
8. Internship match before March 1st of fourth year.

F.2. SUMMARY OF CLINICAL TRAINING REQUIREMENTS & TIMELINE

➢ Residency Requirements: APA accreditation regulations require a minimum number of years in the program, and “in residence”, to facilitate adequate training, oversight, and evaluation. In most cases, the program requires four years of full time coursework, with a fifth year accredited predoctoral internship, though students entering the program with “MAC-P” status (see below) may conceivably complete the program with three years of coursework and a fourth-year internship. By policy, three years of on-site practicum through our training clinic (PSYC 580) are required, though, with a successful petition, up to one year of this requirement may be met off-site. Thus, an absolute minimum of two years spent on or near the UND campus will be required. Most students discover that, practically speaking, living in or near Grand Forks will be necessary to complete their required training, as all required courses are taught “live” and on campus.

Clinical Practicum Requirements

All clinical work must be represented by clinical practice credits, and must be approved by the program:

• PSYC 580 (exactly 1 credit) for PSC practicum or Additional Supervised Clinical Experiences (ASCEs are clinical experiences that are not both paid and at least 1/2 time. Typically, these experiences are above and beyond the usual PSC or 587 practica in a given semester; regardless, only 1 cr of 580 is needed per any semester, and student should not typically enroll in more than one cr of 580.
• PSYC 587 (3 credits Fall/Spring, 1 credit summer) for any practica that are both (a) paid and (b) at least ½ time. Students who have completed their 13 required 587 credits (6 of these 13 may be PSYC 596 credits, see above) may enroll for only 1 cr of 587 in Fall/Spring, as long as the practicum meets the requirements of (a) paid and (b) at least ½ time.
  ○ Note. A student must petition the faculty to apply for a third year placement if his or her thesis has not yet been successfully proposed. A student must petition the faculty to apply for a fourth year placement if his or her thesis has not yet been successfully completed.
• Optional: PSYC 594 (1 credit, summer of year 1). With program approval, first year students may do assessment work in the summer of their first year.

Satisfactory Practicum Credit Minimums: the following number of PSYC 580 & 587 credits must be completed with a grade of “S”, to meet the following sequential milestones:

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<th>PSYC 580</th>
<th>PSYC 587</th>
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1. To Stand for an Internship Readiness Vote (typically, in fall of year 4): 6 7
2. To Submit January APPIC Internship Rankings (typically, in spring of Year 4): 7 10
3. To Graduate (after completing all other requirements, including internship): 8 13

Practice Readiness Sequence

The timeline for eligibility to do supervised, direct clinical work (intervention and/or assessment) is determined, in part, by the student's status in their first year entering the program:

1. MAC-P (with Practicum). These are students entering with an advanced degree and formal, program-approved, clinical practicum under the supervision of a licensed mental health professional. These students have the potential for accelerated clinical training, and could apply for internship in year 3. The program asks the prior supervisor(s) to evaluate the student's pre-prac competencies, and some course specific pre-prac competencies could be met by transferred courses (e.g., if the student transfers in a psychotherapy course), however, the MA/MS course instructor would need to evaluate the student's pre-prac competencies;
a. If all pre-prac competencies are met, then the student could, at the UND supervisor’s discretion, see clients immediately on enrollment, and the UND supervisor and instructors would begin evaluating the student on pre-internship competencies.

b. If some are met, then the remaining must be approved by the UND supervisor(s) and relevant course instructors before practice at the pre-internship (“practicum ready”) level can begin. These students are eligible for assessment and/or intervention work as early as fall of year 1, depending on their pre-prac competency status.

2. MAC (without practicum). These are students entering with an advanced degree but no prior program-approved clinical practicum under the supervision of a licensed mental health professional. These students are ineligible for accelerated clinical training, and could apply for internship no earlier than year 4. All pre-prac competencies are evaluated by UND supervisors and course instructors, within the same timeframe as BAC students. These students may be eligible for assessment work as early as summer of year 1, and for intervention work no earlier than spring of year 2, unless such work is directly supervised. These students, may, however, transfer in courses that may free them up to pursue ASCE later in their program, and therefore have greater flexibility in crafting clinical experiences pertinent to their unique training goals. The program would request that these students receive an additional year of GTA support in their second year of training.

3. BAC. These students enter the program with a bachelor’s degree. These students are ineligible for accelerated clinical training, and could apply for internship no earlier than year 4. All pre-prac competencies are evaluated by UND supervisors and course instructors. These students may be eligible for assessment work as early as summer of year 1 (with program approval and enrollment in 1 cr of PSYC 594), and for intervention work no earlier than spring of year 2, unless the work is directly supervised.

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<tr>
<th>Competency Level</th>
<th>Intervention Work</th>
<th>Assessment Work</th>
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<tr>
<td>Pre-Practicum</td>
<td>Allowed only with direct supervision.</td>
<td>• If 570 &amp; 571 Completed: Allowed with or without direct supervision. Assessment work without direct supervision in the summer of year 1 must be approved by the program as an ASCE, with enrollment under 1 cr of PSYC 594. • If 570 &amp; 571 Not Completed: Allowed only with direct supervision.</td>
</tr>
<tr>
<td>Pre-Internship &amp; “Internship-Ready”</td>
<td>Allowed with or without direct supervision.</td>
<td>Allowed with or without direct supervision.</td>
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“Direct Supervision” occurs only if the supervised contact is approved by the licensed supervisor, and either or both of the following conditions apply:

- Co-Therapy/Co-Assessment, where the co-therapist or co-assessor is both (a) an approved senior student or clinical supervisor, and (b) present throughout all client contacts. An approved senior student co-therapist is designated by the clinical supervisor, and must also (a) be concurrently designated as “practicum-ready” or “internship-ready” by the program, and (b) have completed, with a grade of A, the program’s required coursework in clinical supervision.
• **Direct Observation;** the student is directly observed, in real time, throughout all clinical contacts by a designated peer supervisor or team/placement supervisor. Direct observation could include live viewing of the intervention or having the supervisor present in the room throughout the contact. Peer supervisors would be designated by the clinical supervisor, and must also (a) be concurrently designated as “practicum-ready” or “internship-ready” by the program, and (b) have completed, with a grade of A, the program’s required coursework in clinical supervision.

**Oral Comprehensive Exams**

Students demonstrate knowledge of empirically-base practice and integration of basic knowledge in scientific psychology by preparing and presenting a written and oral clinical case summary to a committee of three core clinical faculty. This component of comps serves as a capstone project to the pre-internship phase of clinical training, and is a prerequisite to internship readiness.

**F.3. SUMMARY OF MINIMAL RESEARCH EXPECTATIONS**

To earn the PhD, students must complete two empirical research projects under advisement of program faculty. In both cases, students are responsible for a formal written and oral proposal of the project, preparing a properly formatted report of the results, and presenting their findings to a committee of faculty.

- **The thesis** typically requires more direction from the faculty adviser and the thesis committee. This project is usually proposed by the end of the first year, and completed by the end of year two to remain in “normal progress” (see Normal Progress Requirements, above). The thesis must be completed by the end of year three.

- **The dissertation** is generally conducted more independently, and is typically a more complex project. The dissertation must be formally proposed before a student may be considered “internship ready” (allowed to apply for a predoctoral internship) in year four. The dissertation must be successfully defended before the PhD can be conferred.

The program’s Comprehensive Examination, another prerequisite for “internship readiness”, establishes two additional scholarship requirements for graduation:

- The student must have submitted an empirical manuscript to a peer-reviewed journal as first author, and the manuscript must have been accepted for review. The manuscript is most likely to be based on the student's thesis project, but other projects may meet this requirement.

- The student must have presented research in the form of a poster or paper presentation at a professional/research conference as first author of the paper/poster.
OVERVIEW

The purpose of doctoral comprehensive examinations (comps) in the clinical program is for the student to demonstrate: (a) mastery of content in each area of the comprehensive exam listed below, (b) advanced integrative knowledge of basic discipline-specific content areas, (c) the ability to critically examine and comment upon the pertinent literature in each of the specified areas; and (d) that practice decisions are predicated on science and that science is informed and guided by practice (i.e., science-practice integration).

There are two components to the comps process. The first consists of a written and oral clinical case presentation demonstrating clinical work representative of empirically-based practice. The second component consists of at least two scholarly products with demonstrable clinical relevance. These components are discussed in greater detail below.

This two-pronged approach allows students to demonstrate their knowledge of the five emphasis areas by applying them, as relevant, in two very important clinical venues commonly espoused in scientist practitioner model training programs. Further, within each component, students demonstrate their adherence to the principles of science-practice integration, and the integration of discipline-specific knowledge as described in the APA Standards of Accreditation and operationalized by program curriculum.

The content of each of the five areas tested in clinical comprehensives is described below:

1. **Assessment and Measurement.** Students are expected to demonstrate expertise in the assessment and prediction of human behavior in relation to intellectual indices, interviewing skills, personality assessment, behavioral assessment, and neuropsychological assessment. Students are also expected to be familiar with and able to discuss basic and applied issues relevant to psychological testing and administration and interpretation of widely-used assessment instruments. Relevant courses where some of this material is discussed include PSY 570 (Clinical Assessment I) and PSY 571 (Clinical Assessment II).

2. **Applied Methodology, Data Analysis, & Program Evaluation.** Students are expected to be familiar with and able to apply various research designs to the study of human behavior in applied settings. Students are also expected to be able to discuss the appropriate use of data analytic strategies when examining information obtained from studies of human behavior in applied settings. Relevant courses where some of this material is discussed include PSY 541 (Advanced Univariate Statistics), PSY 542 (Multivariate Statistics for Psychology), & PSY 543 (Experimental Design).

3. **Ethics and Professional Issues in Clinical Psychology.** Students are expected to be familiar with and able to discuss and comment upon current professional issues facing clinical and general psychology. Students are also expected to be able to demonstrate knowledge of the ethical standards of psychologists and be able to apply this knowledge to various contexts found in the science and practice of clinical psychology. Relevant courses where some of this material is discussed include PSY 579 (Professional Issues and Ethics in Psychology) and PSY 594 (Science and Practice in Clinical Psychology).

4. **Psychopathology.** Students are expected to demonstrate expertise in the differential diagnosis and etiology of a wide range of psychopathologic conditions. Knowledge should include current research in the etiology and differential diagnosis of psychological disorders, as well as theories pertinent to our understanding of psychopathology. Relevant courses where some of this material is discussed include PSY 575 (Behavior Pathology) and PSY 594 (Child Psychopathology and Intervention).
5. **Therapeutic Interventions.** Students are expected to demonstrate an ability to discuss and compare major theoretical viewpoints in psychotherapy. In addition, students are expected to be able to discuss and comment upon data pertinent to the effectiveness of various forms of psychotherapeutic intervention with specific disorders and problems. Relevant courses where some of this material is discussed include PSY 573 (Theories of Psychotherapy) and PSY 574 (Advanced Therapeutic Interventions).

### 1. CLINICAL CASE PRESENTATION: WRITTEN AND ORAL

#### 1.1. Overview

The student will produce a written document describing an actual clinical case, submit this document to a three-person committee for review and approval, and then appear before that same committee to present the case and respond to any questions asked by committee members. Committee members will rate the oral exam performance, and make recommendations, which could include pass, remediation of one or more areas, or failure/retake.

In both the written and oral portions, students are expected to articulate salient aspects of their case, from initial assessment, diagnosis and treatment plan development, to course of therapy and termination. The case chosen may be drawn from cases from clinical placements or the Psychological Services Center. The case chosen must have been supervised by either a core clinical faculty member or approved external supervisor. Cases that disproportionately represent either assessment or treatment may be considered acceptable under exceptional circumstances that are readily justifiable to the student’s comps committee.

#### 1.2. Committee Constitution

The student’s comps committee will consist of three core clinical faculty, none of whom may be the student’s academic adviser or supervisor for the case presented. Each committee will designate a chairperson, who will be responsible for reporting results, recommendations, and any remediation plans and results to the program.

The DCT will assign all comps committee memberships. Committees may not include the student’s adviser or supervisor(s) who provided oversight on the case presented. In cases where there are not enough core clinical faculty to meet the requirements above, the DCT may appoint a qualified associated program faculty or clinical adjunct faculty to a committee. Students may petition for a change in committee membership, but should be aware that only very extreme circumstances (e.g., concerns about violation of client confidentiality, etc.) will be considered reasonable grounds for altering committee membership.

#### 1.3. Scheduling & Timelines

The oral/case presentation component of comprehensive exams in clinical psychology will be offered during the months of September and October of the Fall Semester, and February and March of the Spring Semester. Students are expected to take comps within six months of their favorable continuation vote in the doctoral program.
Students are advised to inform the DCT of their intent to sit for oral comps as soon as possible, and to inform the DCT of their current adviser and the clinical supervisors responsible for the case to be presented. The DCT will then constitute the student’s committee.

The student will prepare a case document and submit it to their committee. The committee will have one week to review the document and determine whether the case is ready to be presented orally, or whether the case will require additional work by the student. All committee members must approve the document before the student will be allowed to schedule their oral presentation. Note that the written document must be reviewed and approved by the student’s comps committee before an oral presentation can be scheduled (similar to thesis/dissertation) within one of the two 2-month windows each year. It is the student’s responsibility to ensure enough time prior to this two-month period, for review by the committee, and, if needed, revision of the written document and resubmission to the committee before the oral presentation.

It will be the student’s responsibility to coordinate the time and place for the oral presentation with the committee members. The committee should schedule a minimum of 2 hours for the presentation, although more time in some cases may be needed.

Should remediation for the oral presentation be required, the student’s committee will develop and submit a remediation plan to the student no later than one week following the oral presentation. The student will have no more than 4 weeks after receiving the plan to successfully remediate.

Should a retake of oral comps be required, the student must present a new case no sooner than 3 months and no later than 6 months after the committee officially determines that a retake will be required. This new window for oral case presentation is not constrained by the usual 2-month biannual windows for initial presentation.

### 1.4. Written Case Presentation

Students will produce a written clinical case study, and present it to their committee. It is expected that the case presented will reflect empirically-based practice, and that appropriate citations to the relevant literature will be included. APA style is expected. To protect client confidentiality, the document will be de-identified.

#### 1.4.1. Contents

- **Referral Issue.** e.g., list referral type & source. Briefly describe the presenting problem(s). Comment on critical indicators
- **Behavioral Observation & Mental Status.** e.g., Offer a basic mental status exam and behavioral observations (formal testing of attention, memory, etc., not required).
- **Background.** Brief summary of relevant client Hx, including relevant individual/cultural differences, current family / family of origin (e.g., genogram, description of traumatic events, etc.), education, employment Hx, dating Hx, legal Hx, etc.
- **Medical & Psychiatric Hx.** Brief Hx of medical & psychiatric Hx, including any hospitalizations, chronic illnesses, past treatments, significant injuries, past and current medical/MH providers, current Rx.
- **Psychometric Data.** Present any test data used to develop case conceptualization and Dx.
- **Case Conceptualization & DSM-V Diagnosis.** Make inferences re factors (biopsychosocial, behavioral, individual and cultural differences, etc.) initiating and
perpetuating pathology. Support with observations previously presented. Explain factors that may mitigate against relevant pathology, and how these might be of use in an intervention. Make a differential Dx. Explain reasoning and evidence. Provide empirical support for clinical inferences & cite relevant literature; explain any limitations or qualifications of support for clinical inferences.

- **Treatment Plan.** Describe the intervention proposed (if assessment case only), implemented, or attempted. TX plan should follow logically from case conceptualization & Dx. Provide evidence for anticipated (a priori) effectiveness of the proposed intervention(s).

- **Treatment Outcomes.** Describe means used for tracking progress in Tx (present data as appropriate). Describe outcomes. Describe any complications in or barriers to Tx, especially those requiring reassessment/modification of the treatment plan, case conceptualization, diagnosis, etc. Describe any such modifications. Make recommendations for future treatment (e.g., future monitoring or assessment; Tx for related or complicating issues, other referrals, follow-up, etc.). If relevant, provide summary termination (including final diagnosis).

- **Integration of DSK.** The student must describe how two or more discipline-specific areas of knowledge (DSK) were integrated as part of the clinical work represented by the written oral case document. Areas of DSK, as defined by the Standards of Accreditation (II.B.1.a) and associated IR C-7 D include:
  
  - **History and Systems of Psychology,** including the origins and development of major ideas in the discipline of psychology. The history of a subdiscipline of psychology, such as clinical, counseling, or school psychology, or the history of interventions or assessments do not, by themselves, fulfill this category.
  
  - **Affective Aspects of Behavior,** including topics such as affect, mood, and emotion. Psychopathology and mood disorders do not by themselves fulfill this category.
  
  - **Biological Aspects of Behavior,** including multiple biological underpinnings of behavior, such as neural, physiological, anatomical, and genetic aspects of behavior. Although neuropsychological assessment and psychopharmacology can be included in this category, they do not, by themselves, fulfill this category.
  
  - **Cognitive Aspects of Behavior,** including topics such as learning, memory, thought processes, and decision-making. Cognitive testing and cognitive therapy do not, by themselves, fulfill this category.
  
  - **Developmental Aspects of Behavior,** including transitions, growth, and development across an individual’s life. A curriculum limited to one developmental period is not sufficient.
  
  - **Social Aspects of Behavior,** including topics such as group processes, attributions, discrimination, and attitudes. Individual and cultural diversity and group or family therapy do not, by themselves, fulfill this category.

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### 1.5. Oral Case Presentation.

Students will make a formal clinical case presentation their comps committee comprised of three core clinical faculty members (see above for more details). Students will be expected to address the relevant aspects of the five areas of emphasis (see above). Committee members may ask questions relevant to any of the five areas of comps and the case document/presentation in order to sample the student’s theoretical and applied knowledge of the five areas.
1.5.1. Comps Case Presentation Scoring.

The following scale and anchors will be used by committee members to score each of the five areas of comps (i.e., Applied Methods, Ethics & Pro Issues, etc.). Scores will be derived by calculating an average across raters for each domain and the total score. If the average score for a given area is < 1.5, that specific area will require remediation (see below). If the total score (derived from first averaging all raters’ area scores, and then averaging the area scores) is < 0, the case presentation portion of the comps process will require a full retake (see below).

**Area Rating Scale for Oral Comps Presentation**

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1.5.2. Remediation vs. Retake

Required tasks differ for area remediation(s) and full retakes.

1.5.2.1. Remediations

Remediation may be recommended by the committee due to errors, omissions, and/or unclear responses made during the case presentation. Remediation shall be required for individual sections that earned an averaged score less than 1.5. In this case, any committee members who rated the student below 3 in that section shall be responsible for collaboratively developing and presenting to the student, a remediation plan. This plan should be relevant to the material judged, by the committee, to have not been mastered by the student. The plan must be presented to the student no later than one week following their oral presentation. Tasks assigned must be completed by the student and presented (live—individually or collectively, or via email, etc., as determined by the remediation plan) to all three raters no later than four weeks after the plan is presented by the committee to the student.

Examples of possible remediation tasks include:

- The committee assigns a list of readings to the student, and each grader meets individually with the student to discuss the readings and assess the student’s comprehension of the material.
- The committee assigns a list of journal articles, and requires the student to prepare an annotated bibliography or summary paper, which is submitted to all committee members, who then evaluate the student’s comprehension based on their written product.
- The committee tasks the student with completing a literature review, submitting their review to the committee, and then answering questions about the content of the review in front of the assembled committee.

**Remediation Outcomes.** Remediation activities are rated by the committee members, using the evaluation scale shown above. Students must satisfactorily complete all remediation plan tasks within 4 weeks of receiving the plan from their committee. Satisfactory remediation is operationalized by a mean rating (averaged across all committee members’ ratings of the remediation task/product) of 1.5 or greater. Failure to do so will result in the committee requiring the student to retake the oral case component of comps (see “Retakes” below). Satisfactory
remediation of all sections under remediation will result in a passing grade for this component of comprehensive exams.

1.5.2.2. Retakes

Retakes shall be coordinated by the comps committee. The Retake case presentation must be an entirely new/different case than the original case, and will proceed in the same manner as the original case (i.e., the student is simply repeating the entire oral case comps process, using a new case). Students designated to retake must do so within three-to-six months following the committee’s decision to require a retake, irrespective of the two 2-month windows for an initial take. If the student is rated as needing a third retake, dismissal from the program would be the default response, though the student could petition the Graduate School for an additional attempt at the oral case presentation component of comps.

Note that a retake of the oral component abrogates the requirement for remediation of any given area(s). However, the student is strongly encouraged to seek remediative consultation, in all areas rated below 1.5 by the committee, with any faculty, but especially their comps committee members, to prepare for their retake.

1.6. Documentation of Completion / Verification

Once the written and oral presentation has been deemed by the committee to be satisfactorily completed (including any relevant remediation), the student is required to have each member of the committee sign a Documentation of Written and Oral Case Presentation Completion Form. The signed copy of this form should be given to the student, who will submit the form along with evidence that the student has completed the other requirements of comps, to the DCT, once all requirements have been met (see Section 3, below).

2. SCHOLARLY PRODUCTS

Students will work, typically, with their advisors, but may also work with core or associated program faculty, to generate scholarly products that will demonstrate their ability to the body of scientific knowledge in Psychology.

Graduate students are required to give a research presentation and submit an empirical research manuscript for publication (the manuscript must, at a minimum, be accepted for review by the journal to which it is submitted).

The presentation and manuscript may be from different projects. Using data collected for a thesis is permissible; however, students may be encouraged by their advisors to use data from other sources if circumstances suggest publication of thesis data is unlikely. The program recommends that students involve themselves early in a variety of projects to ensure they will have viable submissions prepared within a timeframe to meet normal progress milestones.

Students must be the first author on both the presentation and manuscript to meet these requirements.
2.1. Research Presentation.

Students may present a poster or oral presentation at a local, regional, national, or international conference to fulfill this requirement, though the program strongly recommends that the presentation occur at a regional, national, or international meeting.

The student must make sufficient contributions to this project to warrant the distinction of first author.

Students must be present during their presentation.

The student’s UND Psychology advisor must approve the project prior to submission, and is responsible for verifying the presentation (see below).

Research for this project must be conducted at UND under the supervision of core or associated clinical program or UND Psychology adjunct faculty. Typically, it will be the student’s UND Psychology program advisor. We strongly encourage students to involve their advisors early and often in this project because the advisor will be required to determine whether the project is adequate for submission.

The research project cannot be submitted prior to the date of first enrollment in the UND clinical program.

2.2. Manuscript Submission.

The manuscript should be submitted to a peer-reviewed academic journal, and must include a review of related background literature, the rationale for the research, the empirical procedures and methodology, an analysis of the results, and a discussion section.

Students must submit their manuscript for publication after the date of first enrollment at UND, and the submission must be approved and eventually verified by their adviser in the Clinical Psychology Ph.D. program at UND, even if the manuscript submitted was based on data collected for a thesis or similar project in a prior program or at an institution attended previously by the student.

2.3. Verification of Scholarly Products.

To demonstrate completion of the two requirements above, the student must

1. Provide a conference program to their advisor documenting completion of the presentation.
2. Provide documentation to their advisor that the manuscript is currently under review from the journal to which it has been submitted. This documentation may include an email confirmation that the article is under review or printed information for the journal’s website notifying that the manuscript has been uploaded.

The student’s adviser will provide the formal verification that the student has completed the scholarly product requirements. This verification will be in the form of a letter, signed by the adviser and addressed to the DCT.
1. Verify that the student has met the requirements, based on the evidence provided by the student.
2. Verify that the projects cited by the student as evidence have been approved by the adviser.
3. Include, as an attachment, the evidence provided to the adviser by the student.

The student will retain this verification letter until submission of all comps verification materials to the DCT (see Section 3, below).

### 3. VERIFICATION OF COMPLETED COMPS REQUIREMENTS

Because comps represents a summative assessment of the student's graduate-level knowledge and skills, the student will present evidence of requirement completion prior to the program’s determination of internship readiness, i.e., that the student is adequately prepared to pursue training at the internship level.

To demonstrate completion of comps, the student will present, to the DCT,

(a) A Documentation of Written and Oral Case Presentation Completion Form, signed by their oral comps committee members (see section 1.6 above).

(b) A letter from the student’s adviser verifying they have received evidence that the student has completed the scholarly product requirement (see Section 2.3 above).

The DCT will review the submitted material to ensure that requirements for comps have been met, and report this to the graduate school. As needed, the DCT may confer with the student, their adviser, the student's comps committee, and the core clinical faculty in order to make this determination.
APPENDIX H: COMP OPTIONAL PREPARATION EXERCISES (COPE)

The clinical comprehensive exam process affords an ideal opportunity for the program to evaluate the student’s mastery of content in specified areas and ability to critically examine scientific literature central to the informed practice of psychology. Student performance in particular areas (psychopathology, psychotherapy, assessment, ethics, applied methods) may be found unacceptable for a number of reasons including poverty of content, disorganization, inadequate referencing of sources, and writing deficiencies. Comp Optional Preparation Exercises (COPE) are designed to assist students in preparing for these important exams. The program is structured in a sequence of phases or options designed to identify and remediate comprehensive exam performance deficits.

Phase 1. Problem Identification. This program is designed to assist students who appear to be at elevated risk of failing one or more areas of our comprehensive exams. Clinical students earning a graduate course grade of “B” or less are encouraged to consider the potential benefits of COPE with their thesis/dissertation chairperson and the DCT. Faculty members may also encourage specific students to consider participating in COPE to address concerns about writing quality observed during a particular course. The clinical faculty strongly recommends the participation of students who fail first attempts at comprehensive exams.

Phase 2. Initial Faculty Consultation Meeting. Students initiate participation in the COPE program by scheduling an initial assessment meeting with a designated clinical faculty member to review a writing sample which requires improvement (Dr. King for psychopathology; Dr. McDonald for ethics; Dr. Bradley for therapeutic interventions; Dr. Miller for assessment; Dr. Holm for applied methods). The DCT can provide samples of prior comp responses in specific areas which have been previously rated as “excellent” by two faculty reviewers. This initial review meeting will probably last less than an hour, and efforts will be made to identify the differences between acceptable and unacceptable content, writing and referencing of comp responses. The student and faculty member will conclude the initial assessment meeting with a discussion of whether the student should complete any or all of the following remediation components:

A. Writing Center Intervention. One possible option that should be considered would be completion of half-hour tutoring sessions at the UND Writing Center. An English graduate student or instructor would be assigned to provide tutoring to improve the style, organization, and quality of your writing. Writing Center tutors may recommend that you return for additional sessions based upon this initial evaluation meeting. Your decision to sign up for one or more Writing Center consultations may also be recommended by your faculty consultant, but it is ultimately your voluntary decision based upon the degree to which you see benefit from this activity.

B. Trial Outline Generation. An important element in the successful completion of comprehensive exams is the generation of an initial outline with intended reference
sources. Option B would involve one or more trials of outline generation with the identification of selected references. You can participate in this phase by contacting the DCT to schedule a one-hour trial session in which you will be provided a sample question in a specified comp area. For the remainder of the hour you can then attempt to construct an outline of your intended response. You should also identify any references that you intended to integrate into the full response. You will also be asked to provide brief narrative responses to a couple of areas in your outline. The clinical faculty recognizes the importance of outline generation and organization in the successful completion of a comps response.

C. Technical Writing Course. Some students may conclude that a course in Technical Writing through the English Department represents a wise investment of time to address writing concerns.

D. Mock Comp Testing. Upon the recommendation of your clinical faculty consultant, you can schedule a meeting with the DCT to complete an untimed mock testing in one or more comp areas.

**Phase 3. Follow-up Faculty Consultation.** You may be invited to return for a follow-up faculty consultation meeting after completion of one or more of the remediation components identified above. Your faculty consultant could provide feedback on the adequacy of the content and citations from one or more trial outline or mock testing efforts. The decision to proceed to this follow-up phase is up to you and your faculty consultant.
COPE Faculty Tutoring Weekly Recording Form

Student Name: ________________                  Week of Faculty Tutoring ____________

The clinical program is trying to track the number of individualized tutoring (COPE) hours faculty are providing our students. The form below is primarily intended to document faculty efforts to assist you. We believe that these hours will ultimately correlate with higher levels of success in completing comprehensive exams. Please indicate the number of hours you and different faculty members have invested this week in each of the specified tutoring activities. These first entries are used as an example:

<table>
<thead>
<tr>
<th>Hours Invested by You</th>
<th>Hours Invested by Faculty Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>One on One Meeting</td>
<td>One on One Meeting</td>
</tr>
<tr>
<td>E-Mail Feedback</td>
<td>E-Mail Feedback</td>
</tr>
<tr>
<td>Homework Assignment</td>
<td>Homework Assignment</td>
</tr>
<tr>
<td>1 hr 7/15</td>
<td>1 hr 7/15</td>
</tr>
<tr>
<td>King</td>
<td>King</td>
</tr>
<tr>
<td>½ hr 7/18</td>
<td>1 hr 7/18</td>
</tr>
<tr>
<td>Petros</td>
<td>Petros</td>
</tr>
<tr>
<td>3 hrs 7/19</td>
<td>1 hr 7/20</td>
</tr>
<tr>
<td>Holm</td>
<td>Holm</td>
</tr>
</tbody>
</table>

*****************************************************************************

The individualized tutoring services referenced above were for preparation in which area of comprehensive exams (please circle one and use a different form for each area)?

- Applied Methods
- Ethics
- Assessment
- Psychotherapy
- Psychopathology
APPENDIX J: EVALUATION OF CLINICAL COMPETENCIES

Clinical competencies are evaluated on a semester basis, and are based on performance in any and all clinical practica, as well as, where applicable, conduct outside of practica that may bear on professional behavior as specified in the tables in this appendix.

These criteria are modified from the BEA’s recommendations on evaluation of competencies. The BEA model is developmental, with competencies evaluated at three progressive levels: pre-practicum (graduate students preparing for supervised clinical work in their training program), pre-internship (graduate students engaged in practicum work in their training program and preparing for clinical work at the internship level, and pre-licensure (students on internship preparing for increasingly independent practice as residents, and, eventually, as licensed professionals). Training in the UND clinical psychology program concerns itself with the first two levels of training. Our competencies address readiness to practice at the pre-practicum and pre-internship levels.

Students must have “met: (see Rating Categories in Table J.3 below) all pre-practicum competencies (Table J.1) to be considered "practicum-ready"; subsequently, they must meet all pre-internship competencies (Table J.2) in order to be voted “internship-ready”.

TABLE J.1: PRE-PRACTICUM COMPETENCIES

| GOAL I: Students & program graduates will behave in an ethical & professional manner when meeting their responsibilities as scientist-practitioner Clinical psychologists. |
| I.A. Professionalism: Professional values & ethics as evidenced in behavior & comportment that reflects the values & ethics of psychology, integrity, & responsibility. |
| I.A.1. Integrity: Understanding of professional values; honesty, personal responsibility |
| (1) I.A.1.p1. Demonstrates honesty, generally, & particularly in difficult situations |
| (2) I.A.1.p2. Takes responsibility for own actions |
| (3) I.A.1.p3. Displays basic understanding of core professional values |
| (4) I.A.1.p4. Demonstrates ethical behavior & basic knowledge of the APA ethics code |

GOAL I: Ethics & Professionalism

I.A. Professionalism:

I.A.2. Deportment. Understands how to conduct oneself in a professional manner

(5) I.A.2.p1. Demonstrates appropriate personal hygiene & attire
(6) I.A.2.p2. Distinguishes between appropriate & inappropriate language & demeanor in professional contexts

GOAL I: Ethics & Professionalism

I.A. Professionalism:

I.A.3. Accountability. Accountable & reliable

(7) I.A.3.p1. Turns in assignments in accordance with established deadlines
(8) I.A.3.p2. Demonstrates personal organizational skills
(9) I.A.3.p3. Plans & organizes own workload
(10) I.A.3.p4. Aware of & follows policies & procedures of institution

GOAL I: Ethics & Professionalism

I.A. Professionalism:

I.A.4. Concern for the Welfare of Others. Awareness of the need to uphold & protect the welfare of others
### TABLE J.1: PRE-PRACTICUM COMPETENCIES

<table>
<thead>
<tr>
<th><strong>Goal I:</strong> Ethics &amp; Professionalism</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I.A. Professionalism:</strong></td>
</tr>
<tr>
<td><strong>I.A.5 Professional Identity.</strong> Beginning understanding of self as professional, “thinking like a psychologist”</td>
</tr>
<tr>
<td>(15) I.A.5.p1. Demonstrates knowledge of the program &amp; profession (training model, core competencies)</td>
</tr>
<tr>
<td>(16) I.A.5.p2. Demonstrates knowledge about practice within one’s competencee</td>
</tr>
<tr>
<td>(17) I.A.5.p3. Understands that knowledge goes beyond formal training</td>
</tr>
</tbody>
</table>

**Goal I:** Ethics & Professionalism

**I.B. Effective Relationships:** Relate effectively & meaningfully with individuals, groups, and/or communities.

**I.B.1. Interpersonal Relationships.** Interpersonal skills

| **I.B.1.p1.** Listens & is empathic with others |
| **I.B.1.p2.** Respects & shows interest in others’ cultures, experiences, values, points of view, goals & desires, fears, etc. |
| **I.B.1.p3.** Demonstrates skills verbally & non-verbally |
| **I.B.1.p4.** Receives feedback constructively & professionally |

**Goal I:** Ethics & Professionalism

**I.B.2. Affective Skills.** Affective skills

| **I.B.2.p1.** Demonstrates affect tolerance |
| **I.B.2.p2.** Tolerates & understands interpersonal conflict |
| **I.B.2.p3.** Tolerates ambiguity & uncertainty |
| **I.B.2.p4.** Demonstrates awareness of inner emotional experience |
| **I.B.2.p5.** Demonstrates emotional maturity |
| **I.B.2.p6.** Listens to & acknowledges feedback from others |

**Goal I:** Ethics & Professionalism

**I.B.3. Expressive Skills.** Expressive skills

| **I.B.3.p1.** Communicates ideas, feelings & information verbally & non-verbally |

**Goal I:** Ethics & Professionalism

**I.C. Reflective Practice/Self-Assessment/Self-Care:** Practice conducted with personal & professional self-awareness & reflection; with awareness of competencies; with appropriate self-care.

**I.C.1. Reflective Practice.** Basic mindfulness & self-awareness; basic reflectivity regarding professional practice (reflection-on-action)

| **I.C.1.p1.** Displays problem solving skills |
| **I.C.1.p2.** Displays critical thinking |
| **I.C.1.p3.** Displays organized reasoning |
| **I.C.1.p4.** Displays intellectual curiosity & flexibility |
| **I.C.1.p5.** Demonstrates openness to considering own personal concerns & issues |
| **I.C.1.p6.** Demonstrates openness to recognizing impact of self on others |
| **I.C.1.p7.** Demonstrates openness to articulating attitudes, values, & beliefs toward diverse others |
| **I.C.1.p8.** Demonstrates openness to self-identifying multiple individual & cultural identities |
| **I.C.1.p9.** Demonstrates openness to systematically reviewing own professional performance with supervisors/teachers |

**Goal I:** Ethics & Professionalism

**I.C.2. Self-Assessment.** Knowledge of core competencies; emerging self assessment re: competencies
### TABLE J.1: PRE-PRACTICUM COMPETENCIES

<table>
<thead>
<tr>
<th>No.</th>
<th>Competency Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>(38)</td>
<td>I.C.2.p1. Demonstrates awareness of clinical competencies for professional training</td>
</tr>
<tr>
<td>(39)</td>
<td>I.C.2.p2. Develops initial competency goals for early training (with input from faculty)</td>
</tr>
</tbody>
</table>

**GOAL I: Ethics & Professionalism**

**I.C. Reflective Practice/Self-Assessment/Self-Care.**

**I.C.3. Self-Care (attention to personal health & well-being to assure effective professional functioning).** Understanding of the importance of self-care in effective practice; knowledge of self-care methods; attention to self-care

| (40) | I.C.3.p1. Demonstrates basic awareness & attention to self-care |

**GOAL II: Students & program graduates will recognize & appreciate the importance of cultural diversity & individual differences in understanding human psychological functioning.**

**II.A. Ethical Legal Standards & Policy:** Application of ethical concepts & awareness of legal issues regarding professional activities with individuals, groups, & organizations.

**II.A.1. Knowledge of ethical, legal & professional standards & policy.** Basic knowledge of the principles of the APA Ethical Principles & Code of Conduct [ethical practice & basic skills in ethical decision making]; beginning knowledge of legal & regulatory issues in the practice of psychology that apply to practice while placed at practicum setting.

| (41) | II.A.1.p1. Displays a basic understanding of this knowledge (e.g., APA Ethics Code & principles, Ethical Decision Making Models) |
| (42) | II.A.1.p2. Demonstrates knowledge of typical legal issues (e.g., child & elder abuse reporting, HIPAA, FERPA, confidentiality, informed consent) |

**GOAL II: Diversity**

**II.A. Ethical Legal Standards Policy.**

**II.A.2. Awareness & Application of Ethical Decision Making.** Demonstrates the importance of an ethical decision model applied to practice

| (43) | II.A.2.p1. Recognizes the importance of basic ethical concepts applicable in initial practice (e.g., child abuse reporting, informed consent, confidentiality, multiple relationships, & competence) |
| (44) | II.A.2.p2. Identifies potential conflicts between personal belief systems, APA ethics code & legal issues in practice |

**GOAL II: Diversity**

**II.A. Ethical Conduct.** Ethical attitudes & values evident in conduct

| (45) | II.A.3.p1. Evidence desire to help others |
| (46) | II.A.3.p2. Demonstrates openness to new ideas |
| (47) | II.A.3.p3. Shows honesty/integrity/values & ethical behavior |
| (48) | II.A.3.p4. Demonstrates personal courage consistent with ethical values of psychologists |
| (49) | II.A.3.p5. Displays a capacity for appropriate boundary management |
| (50) | II.A.3.p6. Integrates ethical concepts into professional behavior |

**GOAL II: Diversity**

**II.B. Individual & Cultural Diversity:** Awareness, sensitivity & skills in working professionally with diverse individuals, groups & communities who represent various cultural & personal background & characteristics defined broadly & consistent with APA policy.

**II.B.1. Self as Shaped by Individual & Cultural Diversity (e.g., cultural, individual, & role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, & socioeconomic status) & context.** Knowledge, awareness, & understanding of one’s own dimensions of diversity & attitudes towards others

| (51) | II.B.1.p1. Demonstrates self knowledge, awareness, & understanding (e.g., articulates how ethnic group values influence how one sees self & relates to others) |

**GOAL II: Diversity**
### TABLE J.1: PRE-PRACTICUM COMPETENCIES

**II.B. Individual Cultural Diversity.**

**II.B.2. Others as Shaped by Individual & Cultural Diversity (e.g., cultural, individual, & role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, & socioeconomic status) & context.** Knowledge, awareness, & understanding of others individuals as cultural beings

| (52) II.B.2.p1. | Demonstrates knowledge, awareness, & understanding of the way culture & context shape the behavior of other individuals |

**GOAL II: Diversity**

**II.B. Individual Cultural Diversity.**

**II.B.3. Interaction of Self & Others as Shaped by Individual & Cultural Diversity (e.g., cultural, individual, & role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, & socioeconomic status) & context.** Knowledge, awareness, & understanding of interactions between self & diverse others

| (53) II.B.3.p1. | Demonstrates knowledge, awareness & understanding of the way culture & context shape interactions between & among individuals |

**GOAL II: Diversity**

**II.B. Individual Cultural Diversity.**

**II.B.4. Applications Based on Individual & Cultural Context.** Basic knowledge of & sensitivity to the scientific, theoretical, & contextual issues related to ICD (as defined by APA policy) as they apply to professional psychology. Understanding of the need to consider ICD issues in all aspects of professional psychology work (e.g., assessment, treatment, research, relationships with colleagues)

| (54) II.B.4.p1. | Demonstrates basic knowledge of literatures on individual & cultural differences & engages in respectful interactions that reflects this knowledge |
| (55) II.B.4.p2. | Demonstrates understand the need to consider ICD issues across professional settings & activities |

**GOAL III: Graduates of our program will demonstrate knowledge in psychopathology & competency in the delivery of a wide range of clinical assessment & psychotherapy services that are theory-based & empirically-supported.**

**III.A. Assessment:** Assessment & diagnosis of problems, capabilities & issues associated with individuals, groups, and/or organizations.

**III.A.1. Measurement & Psychometrics.** Basic knowledge of the scientific, theoretical, & contextual basis of test construction & interviewing

| (56) III.A.1.p1. | Demonstrates awareness of the benefits of standardized assessments |
| (57) III.A.1.p2. | Demonstrates knowledge of the construct(s) being assessed |
| (58) III.A.1.p3. | Evidences understanding of basic psychometric constructs such as validity, reliability, &; test construction |

**GOAL III: Pathology/Assessment/Intervention**

**III.A. Assessment.**

**III.A.2. Evaluation Methods.** Basic knowledge of administration & scoring of traditional assessment measures, models & techniques, including clinical interviewing & mental status exam

| (59) III.A.2.p1. | Accurately & consistently administers & scores various assessment tools in non-clinical (e.g., courses) contexts |
| (60) III.A.2.p2. | Demonstrates knowledge of initial interviewing (semi-structured interviews, mental status exams, etc.) |

**GOAL III: Pathology/Assessment/Intervention**

**III.A. Assessment.**


| (61) III.A.3.p1. | Demonstrates awareness of need to base diagnosis & assessment on multiple sources of information |
| (62) III.A.3.p2. | Demonstrates awareness of need for selection of assessment measures appropriate to population/problem |

**GOAL III: Pathology/Assessment/Intervention**
### TABLE J.1: PRE-PRACTICUM COMPETENCIES

III.A. Assessment.

**III.A.4. Diagnosis.** Basic knowledge regarding the range of normal & abnormal behavior in the context of stages of human development & diversity

<table>
<thead>
<tr>
<th></th>
<th>Competency Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>(63)</td>
<td>III.A.4.p1. Identifies DSM criteria</td>
</tr>
<tr>
<td>(64)</td>
<td>III.A.4.p2. Describes normal development consistent with broad areas of training</td>
</tr>
</tbody>
</table>

**GOAL III: Pathology/Assessment/Intervention**

III.A. Assessment.

**III.A.5. Conceptualization & Recommendations.** Basic knowledge of formulating diagnosis & case conceptualization

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<th>Competency Details</th>
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<tbody>
<tr>
<td>(65)</td>
<td>III.A.5.p1. Demonstrates the ability to discuss diagnostic formulation &amp; case conceptualization</td>
</tr>
<tr>
<td>(66)</td>
<td>III.A.5.p2. Prepares basic reports which articulate theoretical material</td>
</tr>
</tbody>
</table>

**GOAL III: Pathology/Assessment/Intervention**

III.A. Assessment.


<table>
<thead>
<tr>
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<th>Competency Details</th>
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</thead>
<tbody>
<tr>
<td>(67)</td>
<td>III.A.6.p1. Demonstrates this knowledge including context &amp; organization of test reports, mental status examinations, interviews</td>
</tr>
</tbody>
</table>

**GOAL III: Pathology/Assessment/Intervention**

III.B. Intervention: Interventions designed to alleviate suffering & to promote health & well-being of individuals, groups, and/or organizations.

**III.B.1. Knowledge of Interventions.** Basic knowledge of scientific, theoretical, & contextual bases of intervention & basic knowledge of the value of evidence-based practice & its role in scientific psychology

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<thead>
<tr>
<th></th>
<th>Competency Details</th>
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<tbody>
<tr>
<td>(68)</td>
<td>III.B.1.p1. Articulates the relationship of EBP to the science of psychology</td>
</tr>
<tr>
<td>(69)</td>
<td>III.B.1.p2. Identifies basic strengths &amp; weaknesses of intervention approaches for different problems &amp; populations</td>
</tr>
</tbody>
</table>

**GOAL III: Pathology/Assessment/Intervention**

III.B. Intervention.

**III.B.2. Intervention Planning.** Basic understanding of the relationship between assessment & intervention.

<table>
<thead>
<tr>
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<th>Competency Details</th>
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</thead>
<tbody>
<tr>
<td>(70)</td>
<td>III.B.2.p1. Articulates a basic understanding of how intervention choices are informed by assessment</td>
</tr>
</tbody>
</table>

**GOAL III: Pathology/Assessment/Intervention**

III.B. Intervention.

**III.B.3. Skills.** Basic helping skills

<table>
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<tr>
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<th>Competency Details</th>
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</thead>
<tbody>
<tr>
<td>(71)</td>
<td>III.B.3.p1. Demonstrates helping skills such as empathic listening, framing problems</td>
</tr>
</tbody>
</table>

**GOAL III: Pathology/Assessment/Intervention**

III.B. Intervention.

**III.B.4. Intervention Implementation.** Basic knowledge of intervention strategies

<table>
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<tr>
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<th>Competency Details</th>
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</thead>
<tbody>
<tr>
<td>(72)</td>
<td>III.B.4.p1. Articulates awareness of theoretical basis of intervention &amp; some general strategies</td>
</tr>
</tbody>
</table>

**GOAL III: Pathology/Assessment/Intervention**

III.B. Intervention.

**III.B.5. Progress Evaluation.** Basic knowledge of the assessment of intervention progress & outcome

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<tr>
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<th>Competency Details</th>
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</thead>
<tbody>
<tr>
<td>(73)</td>
<td>III.B.5.p1. Demonstrates basic knowledge of methods to examine intervention outcomes</td>
</tr>
</tbody>
</table>

**GOAL IV: Students & program graduates will demonstrate an appreciation of the scientific method & applicable knowledge in the areas of research methodology (including techniques of data collection & analysis) & the biological, developmental, cognitive-affective, & social bases of behavior**

**IV.A. Scientific Knowledge & Methods:** Understanding of research, research methodology, techniques of data collection & analysis, biological bases of behavior, cognitive-affective bases of behavior, & development across the lifespan. Respect for scientifically derived knowledge.

**IV.A.1. Scientific Mindedness.** Critical scientific thinking.

<table>
<thead>
<tr>
<th></th>
<th>Competency Details</th>
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</thead>
<tbody>
<tr>
<td>(74)</td>
<td>IV.A.1.p1. Aware of need for evidence to support assertions</td>
</tr>
<tr>
<td>(75)</td>
<td>IV.A.1.p2. Questions assumptions of knowledge</td>
</tr>
</tbody>
</table>
TABLE J.1: PRE-PRACTICUM COMPETENCIES

<table>
<thead>
<tr>
<th>(76) IV.A.1.p3.</th>
<th>Evaluates study methodology &amp; scientific basis of findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>(77) IV.A.1.p4.</td>
<td>Presents own work for the scrutiny of others</td>
</tr>
</tbody>
</table>

**GOAL IV: Scientific Knowledge/Application**

**IV.A. Scientific Knowledge Methods.**

**IV.A.2. Scientific Foundation of Clinical Psychology.** Understanding of psychology as a science.

| (78) IV.A.2.p3. | Evaluates scholarly literature on a topic |
| (79) IV.A.2.p2. | Demonstrates understanding of psychology as a science including basic knowledge of the breadth of scientific psychology. For example, able to cite scientific literature to support an argument |
| (80) IV.A.2.p3. | Demonstrates understanding of core scientific conceptualizations of human behavior |
| (81) IV.A.2.p4. | Understands the development of evidence based practice in psychology (EBP) as defined by APA |
| (83) IV.A.2.p5. | Cites scientific literature to support an argument |
| (84) IV.A.2.p6. | Evaluates scholarly literature on a practice-related topic |

**GOAL IV: Scientific Knowledge/Application**

**IV.B. Research/Evaluation:** Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.

**IV.B.1. Scientific Approach to Knowledge Generation.** Basic scientific mindedness, critical thinking.

| (85) IV.B.1.p1. | Demonstrates understanding that psychologists evaluate the effectiveness of their professional activities |
| (86) IV.B.1.p2. | Open to scrutiny of one’s work by peers & faculty |

TABLE J.2: PRE-INTERNSHIP COMPETENCIES

**GOAL I: Students & program graduates will behave in an ethical & professional manner when meeting their responsibilities as scientist-practitioner Clinical psychologists.**

**I.A. Professionalism:** Professional values & ethics as evidenced in behavior & comportment that reflects the values & ethics of psychology, integrity, & responsibility.

**I.A.1. Integrity:** Work as psychologist-in-training infused with adherence to professional values. Recognizes situations that challenge adherence to professional values.

| (1) I.A.1.i1. | Demonstrates knowledge of professional values |
| (2) I.A.1.i2. | Demonstrates adherence to professional values |
| (3) I.A.1.i3. | Identifies situations that challenge professional values, & seeks supervisor/ faculty guidance as needed |
| (4) I.A.1.i4. | Demonstrates ability to share, discuss & address failures & lapses in adherence to professional values with supervisors/faculty as appropriate |

**GOAL I: Ethics & Professionalism**

**I.A. Professionalism**

**I.A.2. Deportment.** Professionally appropriate communication & physical conduct, including attire, across different settings.

| (5) I.A.2.i1. | Demonstrates awareness of the impact behavior has on client, public & profession |
| (6) I.A.2.i2. | Utilizes appropriate language & demeanor in professional communications |
| (7) I.A.2.i3. | Demonstrates appropriate physical conduct, including attire, consistent with context |

**GOAL I: Ethics & Professionalism**

**I.A. Professionalism**

**I.A.3. Accountability.** Consistently reliable; consistently accepts responsibility for own actions.

| (8) I.A.3.i1. | Completes required case documentation promptly & accurately |
| (9) I.A.3.i2. | Accepts responsibility for meeting deadlines |
| (10) I.A.3.i3. | Available when &ldquo;&quot;on call;&quot; & keeps scheduled appointments. |
| (11) I.A.3.i4. | Acknowledges errors |
| (12) I.A.3.i5. | Utilizes supervision to strengthen effectiveness of practice |
| GOAL I: Ethics & Professionalism  |  |
|----------------------------------|  |
| I.A. Professionalism             |  |
| I.A.4. Concern for the Welfare of Others. | Consistently acts to understand & safeguard the welfare of others |
| (13) I.A.4.i1. Regularly demonstrates compassion |  |
| (14) I.A.4.i2. Displays respect in interpersonal interactions with others, including those from divergent perspectives or backgrounds |  |
| (15) I.A.4.i3. Correctly determines when response to client needs takes precedence over personal needs & behaves accordingly |  |

| GOAL I: Ethics & Professionalism  |  |
|----------------------------------|  |
| I.A. Professionalism             |  |
| I.A.5. Professional Identity. Emerging professional identity as psychologist; uses resources (e.g., supervision, literature) for professional development |  |
| (16) I.A.5.i1. Attends colloquia, workshops, conferences |  |
| (17) I.A.5.i2. Consults literature relevant to client care |  |

| GOAL I: Ethics & Professionalism  |  |
|----------------------------------|  |
| I.B. Effective Relationships: Relate effectively & meaningfully with individuals, groups, and/or communities. |  |
| I.B.1. Interpersonal Relationships. | Forms & maintains productive & respectful relationships with clients, peers/colleagues, supervisors & professionals from other disciplines |  |
| (18) I.B.1.i1. Forms effective working alliance with clients |  |
| (19) I.B.1.i2. Engages with supervisors to work effectively |  |
| (20) I.B.1.i3. Works cooperatively with peers |  |
| (21) I.B.1.i4. Demonstrates respectful & collegial interactions with those who have different professional models or perspectives |  |

| GOAL I: Ethics & Professionalism  |  |
|----------------------------------|  |
| I.B. Effective Relationships     |  |
| I.B.2. Affective Skills. Negotiates differences & handles conflict satisfactorily; provides effective feedback to others & receives feedback nondefensively |  |
| (23) I.B.2.i1. Works collaboratively |  |
| (24) I.B.2.i2. Demonstrates active problem-solving (e.g., generates possible solutions to therapeutic roadblocks, independently consults literature to find solutions to professional problems, etc.). |  |
| (25) I.B.2.i3. Makes appropriate disclosures regarding problematic interpersonal situations |  |
| (26) I.B.2.i4. Acknowledges own role in difficult interactions |  |
| (27) I.B.2.i5. Provides constructive feedback to supervisor regarding supervisory process |  |
| (28) I.B.2.i6. Constructively provides feedback to peers regarding peers' role during clinical work in context of group supervision or case conference |  |
| (29) I.B.2.i7. Accepts & implements supervisory feedback non-defensively |  |

| GOAL I: Ethics & Professionalism  |  |
|----------------------------------|  |
| I.B. Effective Relationships     |  |
| (30) I.B.3.i1. Communicates clearly using verbal, nonverbal, & written skills |  |
| (31) I.B.3.i2. Demonstrates understanding of professional language |  |

| GOAL I: Ethics & Professionalism  |  |
|----------------------------------|  |
| I.C. Reflective Practice/Self-Assessment/Self-Care: Practice conducted with personal & professional self-awareness & reflection; with awareness of competencies; with appropriate self-care. |  |
| I.C.1. Reflective Practice. Broadened self-awareness; self-monitoring; reflectivity regarding professional practice (reflection-on-action); use of resources to enhance reflectivity; elements of reflection-in-action |  |
| (32) I.C.1.i1. Articulates attitudes, values, & beliefs toward diverse others |  |
| (33) I.C.1.i2. Recognizes impact of self on others |  |
| (34) I.C.1.i3. Self-identifies multiple individual & cultural identities (e.g., identifies own ethnicity, spirituality, sexual orientation, cultural values, etc.) |  |
| (35) I.C.1.i4. Accurately describes how others experience him/her & identifies roles played within a group |  |
| (36) I.C.1.i5. Responsively utilizes supervision to enhance reflectivity |  |
| (37) I.C.1.i6. Systematically & effectively reviews own professional performance via videotape or other technology with supervisor |  |
| (38) I.C.1.i7. Monitors & adjusts professional performance &quot;in action&quot; as situation requires |  |
TABLE J.2: PRE-INTERNSHIP COMPETENCIES

GOAL I: Ethics & Professionalism
I.C. Reflective Practice/Self-Assessment/Self-Care

(39) I.C.2.i1. Self-assessment is congruent with assessment by peers & supervisors
(40) I.C.2.i2. Accurately Identifies areas of requiring further professional growth
(41) I.C.2.i3. Writes a personal statement of professional goals
(42) I.C.2.i4. Identifies learning objectives for overall training plan
(43) I.C.2.i5. Systematically & effectively reviews own professional performance via videotape or other technology, distinct from such review with the supervisor present.

GOAL I: Ethics & Professionalism
I.C. Reflective Practice/Self-Assessment/Self-Care
I.C.3. Self-Care (attention to personal health & well-being to assure effective professional functioning). Monitoring of issues related to self-care with supervisor; understanding of the central role of self-care to effective practice

(44) I.C.3.i1. As needed, works with supervisor to monitor issues related to self-care
(45) I.C.3.i2. As needed, takes actions recommended by supervisor for self-care to ensure effective training

GOAL II: Students & program graduates will recognize & appreciate the importance of cultural diversity & individual differences in understanding human psychological functioning

II.A. Ethical Legal Standards & Policy: Application of ethical concepts & awareness of legal issues regarding professional activities with individuals, groups, & organizations

II.A.1. Knowledge of ethical, legal & professional standards & policy. Intermediate level knowledge & understanding of the APA Ethical principles & Code of Conduct & other relevant ethical/professional codes, standards & guidelines; laws, statutes, rules, regulations

(46) II.A.1.i1. Identifies ethical dilemmas effectively
(47) II.A.1.i2. Actively consults with supervisor to act upon ethical & legal aspects of practice
(48) II.A.1.i3. Addresses ethical & legal aspects within the case conceptualization
(49) II.A.1.i4. Discusses ethical implications of professional work
(50) II.A.1.i5. Recognizes & discusses limits of own ethical & legal knowledge
(51) II.A.1.i6. Works effectively with diverse others in professional activities

GOAL II: Diversity

II.A. Ethical Legal Standards Policy

II.A.2. Awareness & Application of Ethical Decision Making. Knows & applies an ethical decision-making model & is able to apply relevant elements of ethical decision making to a dilemma

(52) II.A.2.i1. Uses an ethical decision-making model when discussing cases in supervision
(53) II.A.2.i2. Readily identifies ethical implications in cases & understands the ethical elements in any present ethical dilemma or question
(54) II.A.2.i3. Discusses ethical dilemmas & decision making in supervision, staffings, presentations, practicum settings, etc.

GOAL II: Diversity

II.A. Ethical Legal Standards Policy

II.A.3. Ethical Conduct. Knowledge of own moral principles/ethical values integrated in professional conduct

(55) II.A.3.i1. Articulates knowledge of own moral principles & ethical values in discussions with supervisors & peers about ethical issues
(56) II.A.3.i2. Spontaneously discusses intersection of personal & professional ethical & moral issues

GOAL II: Diversity

II.B. Individual & Cultural Diversity: Awareness, sensitivity & skills in working professionally with diverse individuals, groups & communities who represent various cultural & personal background & characteristics defined broadly & consistent with APA policy.

II.B.1. Self as Shaped by Individual & Cultural Diversity (e.g., cultural, individual, & role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, & socioeconomic status & context). Monitors & applies knowledge of self as a cultural being in assessment, treatment, & consultation

(57) II.B.1.i1. Understands & monitors own cultural identities in relation to work with others
(58) II.B.1.i2. Uses knowledge of self to monitor effectiveness as a professional
(59) II.B.1.i3. Critically evaluates feedback & initiates supervision regularly about diversity issues

GOAL II: Diversity
<table>
<thead>
<tr>
<th>TABLE J.2: PRE-INTERNSHIP COMPETENCIES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>II.B. Individual Cultural Diversity</strong></td>
</tr>
<tr>
<td><strong>II.B.2. Others as Shaped by Individual &amp; Cultural Diversity (e.g., cultural, individual, &amp; role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, &amp; socioeconomic status) &amp; context</strong>. Applies knowledge of others as cultural beings in assessment, treatment, &amp; consultation of others</td>
</tr>
<tr>
<td>(60) II.B.2.i. Understands multiple cultural identities in work with others</td>
</tr>
<tr>
<td>(61) II.B.2.i. Uses knowledge of others' cultural identity in work as a professional</td>
</tr>
<tr>
<td>(62) II.B.2.i.3. Critically evaluates feedback &amp; initiates supervision regularly about diversity issues with others</td>
</tr>
<tr>
<td><strong>GOAL II: Diversity</strong></td>
</tr>
<tr>
<td><strong>II.B. Individual Cultural Diversity</strong></td>
</tr>
<tr>
<td><strong>II.B.3. Interaction of Self &amp; Others as Shaped by Individual &amp; Cultural Diversity (e.g., cultural, individual, &amp; role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, &amp; socioeconomic status) &amp; context</strong>. Applies knowledge of the role of culture in interactions in assessment, treatment, &amp; consultation of diverse others</td>
</tr>
<tr>
<td>(63) II.B.3.i. Understands the role of multiple cultural identities in interactions among individuals</td>
</tr>
<tr>
<td>(64) II.B.3.i.2. Uses knowledge of the role of culture in interactions in work as a professional</td>
</tr>
<tr>
<td>(66) II.B.3.i.3. Demonstrates knowledge, awareness &amp; understanding of the way culture &amp; context shape interactions between &amp; among individuals</td>
</tr>
<tr>
<td><strong>GOAL II: Diversity</strong></td>
</tr>
<tr>
<td><strong>II.B. Individual Cultural Diversity</strong></td>
</tr>
<tr>
<td><strong>II.B.4. Applications Based on Individual &amp; Cultural Context</strong>. Applies knowledge, sensitivity, &amp; understanding regarding ICD issues to work effectively with diverse others in assessment, treatment, &amp; consultation</td>
</tr>
<tr>
<td>(67) II.B.4.i. Demonstrates knowledge of ICD literature &amp; APA policies including guidelines for practice with diverse individuals, groups &amp; communities</td>
</tr>
<tr>
<td>(68) II.B.4.i.2. Demonstrates ability to address ICD issues across professional settings &amp; activities</td>
</tr>
<tr>
<td>(69) II.B.4.i.3. Works effectively with diverse others in professional activities</td>
</tr>
<tr>
<td>(70) II.B.4.i.4. Demonstrates awareness of effects of oppression &amp; privilege on self &amp; others</td>
</tr>
<tr>
<td><strong>GOAL III: Graduates of our program will demonstrate knowledge in psychopathology &amp; competency in the delivery of a wide range of clinical assessment &amp; psychotherapy services that are theory-based &amp; empirically-supported</strong></td>
</tr>
<tr>
<td><strong>III.A. Assessment</strong>: Assessment &amp; diagnosis of problems, capabilities &amp; issues associated with individuals, groups, &amp; organizations</td>
</tr>
<tr>
<td><strong>III.A.1. Measurement &amp; Psychometrics</strong>. Selects assessment measures with attention to issues of reliability &amp; validity</td>
</tr>
<tr>
<td>(71) III.A.1.i. Identifies appropriate assessment measures for cases seen at practice site</td>
</tr>
<tr>
<td>(72) III.A.1.i.2. Routinely consults with supervisor regarding selection of assessment measures</td>
</tr>
<tr>
<td><strong>GOAL III: Pathology/Assessment/Intervention</strong></td>
</tr>
<tr>
<td><strong>III.A. Assessment</strong></td>
</tr>
<tr>
<td><strong>III.A.2. Evaluation Methods</strong>. Awareness of the strengths &amp; limitations of administration, scoring &amp; interpretation of traditional assessment measures as well as related technological advances</td>
</tr>
<tr>
<td>(73) III.A.2.i. Demonstrates intermediate level ability to accurately &amp; consistently select, administer, score &amp; interpret assessment tools with client populations</td>
</tr>
<tr>
<td>(74) III.A.2.i.2. Collects accurate &amp; relevant data from interviews, mental status exams, etc.</td>
</tr>
<tr>
<td><strong>GOAL III: Pathology/Assessment/Intervention</strong></td>
</tr>
<tr>
<td><strong>III.A. Assessment</strong></td>
</tr>
<tr>
<td><strong>III.A.3. Application of Methods</strong>. Selects appropriate assessment measures to answer diagnostic question</td>
</tr>
<tr>
<td>(75) III.A.3.i. Selects assessment tools that reflect awareness of patient population served at a given practice site</td>
</tr>
<tr>
<td>(76) III.A.3.i.2. Regularly selects &amp; uses appropriate methods of evaluation</td>
</tr>
<tr>
<td>(77) III.A.3.i.3. Demonstrates ability to adapt environment &amp; materials according to client needs (e.g., lighting, privacy, ambient noise, primary language, disability, etc.)</td>
</tr>
<tr>
<td>(78) III.A.3.i.4. Provides assessment services with professional authority &amp; self-confidence</td>
</tr>
<tr>
<td><strong>GOAL III: Pathology/Assessment/Intervention</strong></td>
</tr>
<tr>
<td><strong>III.A. Assessment</strong></td>
</tr>
<tr>
<td><strong>III.A.4. Diagnosis</strong>. Applies concepts of normal/abnormal behavior to case formulation &amp; diagnosis in the context of stages of human development &amp; diversity</td>
</tr>
<tr>
<td>(79) III.A.4.i. Articulates relevant developmental features &amp; clinical symptoms as applied to presenting question</td>
</tr>
</tbody>
</table>
TABLE J.2: PRE-INTERNSHIP COMPETENCIES

- (80) III.A.4.i2. Demonstrates ability to identify problem areas & use concepts of differential diagnosis

GOAL III: Pathology/Assessment/Intervention

III.A. Assessment

III.A.5. Conceptualization & Recommendations. Utilizes systematic approaches of gathering data to inform clinical decision-making

(81) III.A.5.i1. Presents cases & reports demonstrating how diagnosis is based on case material

GOAL III: Pathology/Assessment/Intervention

III.A. Assessment

III.A.6. Communication of Findings. Writes assessment reports & progress notes

(82) III.A.6.i1. Writes a basic psychological report

(83) III.A.6.i2. Demonstrates ability to communicate basic findings verbally

(84) III.A.6.i3. Reports reflect data that have been collected via interview & other data sources

GOAL III: Pathology/Assessment/Intervention

III.B. Intervention: Interventions designed to alleviate suffering & to promote health & well-being of individuals, groups, and/or organizations.

III.B.1. Knowledge of Interventions. Knowledge of scientific, theoretical, empirical & contextual bases of intervention, including theory, research, & practice

(85) III.B.1.i1. Demonstrates knowledge of interventions & explanations for their use based on evidence-based practices

(86) III.B.1.i2. Demonstrates the ability to select interventions for different problems & populations related to the practice setting

(87) III.B.1.i3. Investigates existing literature related to problems & client issues

(88) III.B.1.i4. Writes a statement of one's own theoretical perspective regarding intervention strategies

GOAL III: Pathology/Assessment/Intervention

III.B. Intervention

III.B.2. Intervention Planning. Formulates & conceptualizes cases & plan interventions utilizing at least one consistent theoretical orientation

(89) III.B.2.i1. Articulates a theory of change & identifies interventions to implement change

(90) III.B.2.i2. Writes understandable case conceptualization reports & collaborative treatment plans incorporating evidence-based practices

GOAL III: Pathology/Assessment/Intervention

III.B. Intervention

III.B.3. Skills. Clinical skills

(91) III.B.3.i1. Develops rapport with most clients

(92) III.B.3.i2. Develops therapeutic relationships

(93) III.B.3.i3. Demonstrates appropriate judgment about when to consult supervisor

GOAL III: Pathology/Assessment/Intervention

III.B. Intervention

III.B.4. Intervention Implementation. Implements evidence-based interventions that take into account empirical support, clinical judgment, & client diversity (e.g., client characteristics, values, & context)

(94) III.B.4.i1. Applies specific evidence-based interventions

(95) III.B.4.i2. Presents case that documents application of evidence-based practice

(96) III.B.4.i3. Provides intervention services with professional authority & self-confidence

GOAL III: Pathology/Assessment/Intervention

III.B. Intervention

III.B.5. Progress Evaluation. Evaluate treatment progress & modify treatment planning as indicated, utilizing established outcome measures

(97) III.B.5.i1. Assesses & documents treatment progress & outcomes

(98) III.B.5.i2. Alters treatment plan accordingly

(99) III.B.5.i3. Describes instances of lack of progress & actions taken in response

GOAL IV: Students & program graduates will demonstrate an appreciation of the scientific method & applicable knowledge in the areas of research methodology (including techniques of data collection & analysis) & the biological, developmental, cognitive-affective, & social bases of behavior

IV.A. Scientific Knowledge & Methods: Understanding of research, research methodology, techniques of data collection & analysis, biological bases of behavior, cognitive-affective bases of behavior, & development across the lifespan. Respect for scientifically derived knowledge.

IV.A.1. Scientific Mindedness. Values & applies scientific methods to professional practice

(100) IV.A.1.i1. Articulates in supervision & case conference, support for issues derived from the literature
### TABLE J.2: PRE-INTERNSHIP COMPETENCIES

1. Formulates appropriate questions regarding case conceptualization
2. Generates hypotheses regarding own contribution to therapeutic process & outcome
3. Performs scientific critique of literature

**GOAL IV: Scientific Knowledge/Application**

**IV.A. Scientific Knowledge Methods**

1. Displays intermediate level knowledge of & respect for scientific bases of behavior
2. Applies EBP concepts in case conceptualization, treatment planning, & interventions
3. Compares & contrasts EBP approaches with other theoretical perspectives in the context of case conceptualization & treatment planning

**GOAL IV: Scientific Knowledge/Application**

**IV.B. Research/Evaluation:** Generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.

**IV.B.1. Scientific Approach to Knowledge Generation:** Development of skills & habits in seeking, applying, & evaluating theoretical & research knowledge relevant to the practice of psychology

1. Demonstrates being a critical consumer of research
2. Discusses evidence based practices
3. Compiles & analyzes data on own clients (outcome measurement)

**GOAL V: Students & program graduates will show competency in assuming roles that extend beyond the direct delivery of mental health services as a scientist-practitioner clinical psychologist**

**V.A. Supervision:** Supervision & training in the professional knowledge base & of evaluation of the effectiveness of various professional activities.

**V.A.1. Knowledge of Supervisory Responsibilities:** Knowledge of purpose for & roles in supervision

1. Identifies roles & responsibilities of the supervisor & supervisee in the supervision process

**GOAL V: Other Professional Roles**

**V.A. Supervision**

**V.A.2. Processes & Procedures:** Knowledge of procedures & processes of Supervision

1. Identifies goals & tasks of supervision related to developmental progression

**GOAL V: Other Professional Roles**

**V.A. Supervision**

**V.A.3. Skills Development / Communication Effectiveness / Receptiveness to Feedback:** Knowledge of the supervision literature & how clinicians develop to be skilled professionals

1. Successfully completes coursework on supervision

**GOAL V: Other Professional Roles**

**V.A. Supervision**

**V.A.4. Awareness of Factors Affecting Supervisory Relationship:** Knowledge about the impact of diversity on all professional settings & supervision participants including self as defined by APA policy; beginning knowledge of personal contribution to therapy & to supervision

1. Demonstrates knowledge of the ICD literature & APA guidelines in supervision
2. Demonstrates awareness of role of oppression & privilege on supervision process

**GOAL V: Other Professional Roles**

**V.A. Supervision**

**V.A.5. Ethical & Legal Standards:** Knowledge of & compliance with ethical/professional codes, standards & guidelines; institutional policies; laws, statutes, rules, regulations, & case law relevant to the practice of psychology & its supervision

1. Recognizes ethical & legal issues in clinical practice & supervision

**GOAL V: Other Professional Roles**

**V.B. Consultation:** The ability to provide expert guidance or professional assistance in response to a client's needs or goals.

**V.B.1. Understanding of Role of Consultant:** Knowledge of the consultant's role & its unique features as distinguished from other professional roles (such as therapist, supervisor, teacher).

1. Articulates common & distinctive roles of consultant
2. Compares & contrasts consultation, clinical & supervision roles

**GOAL V: Other Professional Roles**
TABLE J.2: PRE-INTERNSHIP COMPETENCIES

<table>
<thead>
<tr>
<th>V.B. Consultation</th>
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<tbody>
<tr>
<td>V.B.2. Addressing Referral Question. Knowledge of &amp; ability to select appropriate means of assessment to answer referral questions</td>
</tr>
<tr>
<td>(132) V.B.2.i1. Identifies sources &amp; types of assessment tools</td>
</tr>
<tr>
<td>GOAL V: Other Professional Roles</td>
</tr>
<tr>
<td>V.B. Consultation</td>
</tr>
<tr>
<td>V.B.3. Communication of Findings. Identifies literature &amp; knowledge about process of informing consultee of assessment findings</td>
</tr>
<tr>
<td>(133) V.B.3.i1. Identifies appropriate approaches &amp; processes for providing written &amp; verbal feedback &amp; recommendations to consultee</td>
</tr>
</tbody>
</table>

Ratings on the relevant competencies from supervisors and course instructors (practicum-level evaluation) are used by the program to offer both formative and summative feedback twice yearly, to each student (program-level evaluation). The purposes, data used/provided, format, and rating categories/ descriptors used in practicum- and program-level evaluations are shown in Table J.3.

Note that the program makes all final evaluations of students, using data submitted by supervisors/instructors.

TABLE J.3: PRACTICUM-LEVEL VS. PROGRAM-LEVEL EVALUATION OF CLINICAL COMPETENCIES

<table>
<thead>
<tr>
<th>Practicum-Level Evaluation</th>
<th>Program-Level Evaluation</th>
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</thead>
<tbody>
<tr>
<td>Evaluator: Practicum Supervisor / Course Instructor</td>
<td>Clinical Program Faculty</td>
</tr>
<tr>
<td>Purpose:</td>
<td>1. Offer direct feedback to student (formative) and program (summative) regarding performance on a specific rotation.</td>
</tr>
<tr>
<td>2. Determine whether specific competencies were observable on the relevant rotation (-), and, if so, was the competency met; i.e., was performance consistent with minimal readiness for practicum or internship? (M/X).</td>
<td></td>
</tr>
<tr>
<td>3. Identify observed competencies that did not quite meet, minimally, readiness for internship, &amp; requires more work by the student; however, in the supervisor's opinion, performance did not represent a &quot;significant deficiency&quot; (E).</td>
<td>1. Offer direct feedback to student (summative) regarding performance across rotations and other clinically-relevant contexts in a given evaluation cycle.</td>
</tr>
<tr>
<td>2. Make recommendations as appropriate for remediation</td>
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<tr>
<td>3. Iteratively determine readiness for supervised practice at the internship level.</td>
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<tr>
<td>4. Determine whether specific competencies were yet met in any clinically-relevant context (-/M), and significant deficiencies, requiring immediate and significant remediation, were apparent (X).</td>
<td></td>
</tr>
<tr>
<td>Data: Direct observation of student behavior and work product</td>
<td>1. Feedback from supervisors/instructors; other data as appropriate</td>
</tr>
</tbody>
</table>
**Practicum-Level Evaluation**

| Format: | 1. Summative: Online (Qualtrics) survey of competencies, submitted electronically to the program  
|         | 2. Formative: Hardcopy/Emailed summary of semester ratings and associated supervisor comments. It is expected that the supervisor will review competencies with the student in person, and that the student will have the opportunity to add their own written comments to the evaluation. |
| Rating Categories: | • **No Basis for Judgment (-)**: The student had no opportunity to demonstrate this competency on this rotation, and cannot therefore evaluate this competency.  
|         | • **Meets Expectations (M)**: The student had an opportunity to demonstrate this competency on this rotation, and did so in a manner consistent with readiness for internship.  
|         | • **1 Emergent, Further Development Recommended (E)**: The student had an opportunity to demonstrate this competency on this rotation; the competency was not minimally met, and further development in this area is recommended. The student has not yet demonstrated practicum/internship-level competency on this item.  
|         | • **1 Does Not Meet (X)**: The student had an opportunity to demonstrate this competency; Student fell significantly short of expectations, and immediate remediation will be necessary. Student is clearly NOT internship/practicum ready with respect to this competency, and must remediate before they may be considered so. If the student has already been voted internship-ready, then their internship readiness will be re-evaluated by the program. |

1 requires additional (written) explanation from supervisor.

**Program-Level Evaluation**

|         | 2. Summative: Formal internship readiness vote, usually in the fall of 4th year in program (fall of 3rd year for students with advanced standing). |
| Rating Categories: | • **2 Not Demonstrated (-)**: The student either (a) had no opportunity to demonstrate this competency in this evaluation cycle, or (b) had an opportunity, but did not demonstrate internship readiness in that competency.  
|         | • **Meets Expectations (M)**: The student had an opportunity to demonstrate this competency, and did so in a manner consistent with readiness for internship.  
|         | • **Does Not Meet (X)**: The student had an opportunity to demonstrate this competency during the current evaluation cycle, and fell significantly short of expectations. Immediate remediation will be necessary. Student is NOT internship-ready with respect to this competency, and must remediate before they may be considered so. If the student has already been voted internship-ready, then their internship readiness will be re-evaluated by the program. |

2 “E” ratings from supervisors revert by default to “-”. “E” ratings are considered formative at the practicum-evaluation level, and indicate, at the program evaluation level, that readiness has not been demonstrated in the current evaluation cycle; however, having met (M) in prior evaluation cycles would mean that a more recent “-” would not preclude internship readiness.
<table>
<thead>
<tr>
<th>Practicum-Level Evaluation</th>
<th>Program-Level Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Accountability:</strong></td>
<td></td>
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<tr>
<td>Supervisor and student must sign the printed form and return to the DCT prior to the program’s semester clinical evaluation meeting. A copy of the signed form will be kept in the student's clinical file, and the student is encouraged to make a copy for their records.</td>
<td>Program submits an evaluation letter to the student and her/his adviser twice yearly. A copy of this letter is retained in the student's clinical file. Student has the opportunity to correct errors and petition for changes in program evaluation. Note that UND establishes windows for student petitions/grievances, so requests to change evaluations must be made within this specified timeframe.</td>
</tr>
</tbody>
</table>
APPENDIX K: PSC TEAM ASSIGNMENT POLICY (APPROVED 10/15/15)

The PSC Committee makes PSC team assignments, using student preferences and accounting for training priorities specified by the program.

1. The PSC Committee will solicit team preferences for the following year no later than April 1st.
   1.1. Preferences are intended to help the committee make initial assignments to teams. Because of this, exclusionary preferences will not be considered, (e.g., “no child-focused teams”, “not Miller”, etc.). It is strongly recommended that students submit rank-ordered team preferences (e.g., “1st Choice = Legerski, 2nd choice = Bradley, etc.).
   1.2. In some cases, supervisors may have specific requirements in excess of the program’s default PSYC 580 syllabus (refer to APPX of the Grad Handbook). Students should be prepared to meet these requirements at the time they express a preference for that supervisor’s team. E.g., if the team in question meets weekly on Thursday afternoons, this team should not be preferred unless the students schedule can accommodate the stated meeting day and time.

2. Given that the third year (2nd year if MAC-P) is the last full year of placement prior to internship application, the preferences of upcoming third year students will be given first priority, followed by those of 4th year students, and then 2nd year students. i.e., all members of the upcoming third year class will be placed, then all members of the upcoming 4th year class, etc.

3. Students will be placed on PSC teams based on their preferences, except where the following training priorities supersede:
   3.1. Assuring diversity of clinical experiences and supervisory models/styles. No student will be placed on the same PSC team for two consecutive years.
   3.2. Meeting individual training needs. Students may be placed, contrary to stated preferences, on a team that may better suit individual training needs; these training needs would most commonly include, but would not be limited to, remediation of specific skills or offering opportunities to meet outstanding clinical competencies.
   3.3. Assuring diversity of experience represented within each team. Students from each cohort (beyond year 1) will be, to the extent practical, equally distributed across each of the teams. This is intended to (a) assure that each team has roughly equal capacity to staff cases in both fall and spring semesters, and (b) where allowable by policy and approved by the supervisor, facilitate peer mentorship and supervision.

After team assignments have been circulated to the program, students may arrange a “swap” with a student from another team, assuming both supervisors and both students agree, and the swap does not violate any of the training priorities listed above. Students should process these requests using the Team Reassignment Request.
APPENDIX L: SYLLABI FOR CLINICAL PRACTICA (REV 1/27/16)

L.1: SUPERVISED FIELD WORK (PSYC 587) SYLLABUS (REV 1/27/16)

Student Trainee:
Placement Site:
Supervisor:
Evaluation Period:
Course Credit Hours:
Program Coordinator: Joseph Miller, Ph.D. (Director of Clinical Training)
Contact Information: joseph.miller@und.edu (777-3451)

COURSE DESCRIPTION: The clinical program distinguishes between practicum work completed as a team member at our Psychological Services Center, paid half-time practicum work placed in the community during our annual assignment process, and optional ¼-time supervised additional clinical experiences (ASCEs). External placement rotations and supervision arrangements must be approved annually by the clinical program. You have been assigned to the external placement and supervisor(s) designated above. This half-time assignment is intended to provide practical supervised experience in the delivery of assessment and/or psychotherapy services to clients in the community.

Graduate students in the clinical psychology training program are required to successfully (satisfactory grades) complete 7 credit hours of PSYC 587 to be eligible to stand for an internship readiness vote by the clinical faculty. Students must then successfully complete 10 and 13 credit hours of PSYC 587 respectively to submit APPIC internship rankings (usually in January) and to graduate from the Ph.D. program. External practicum placements require enrollment in 3 credit hours (no more or less) for Fall and Spring semesters and 1 credit hour (maximum) for summer work.

COURSE REQUIREMENTS: Satisfactory completion of this practicum rotation will require evidence that the student has met the minimum requirements established below and shown progress in achieving an expected level of performance regarding the additional criteria set forth in our standard supervisory evaluation (reflecting Pre-Internship Clinical Competencies, see APPX S.2 in the Grad Student Handbook. Our minimum necessary but not alone sufficient) requirements for a viable practicum rotation have been identified as follows:

1. Weekly supervision of 1 or more hrs/wk with a program-approved doctoral psychologist;
2. Direct observation, as defined by CoA (IR C-14 D), consisting of either (a) in-person live observation of the student’s clinical work in direct contact with clients, or (b) review of audiovisual recording of same, occurring regularly and, minimally, once per semester (evaluation cycle).
3. APPIC direct service delivery hours (as broadly specified on the APPIC web page) of 5 or more hrs/wk
4. Documentation of placement activity via Time2Track online, or Weekly Practicum Monitoring Forms (WPMF) that are submitted to the DCT each week;
5. Diligent review of any assigned readings or multimedia educational materials assigned by the supervisor to enhance the training experience;
6. Timely attendance and active participation at all scheduled practicum meetings and events, including supervision and all client contacts;
7. Timely completion of all reports, charting, and other paperwork as required by the site;
8. An average of at least 15 hours and two days of practicum site-related work per week.
ADDITIONAL REQUIREMENTS: The following are specified, by the supervisor, as additional requirements for this placement.

- (None specified)

GRADING: Grades will be assigned by the program for all credit hours in PSYC 587 earned during the Fall, Spring and Summer sessions. The process for grade assignment and standards for evaluation are specified below.

Grading Process. All clinical program faculty will be given an opportunity to contribute equally to the assignment of your grade in the designated practicum rotation identified in this course outline. You will be assigned a grade of either Satisfactory or Unsatisfactory for these credit hours. Each faculty member in attendance at the semester evaluation meeting can either abstain (without explanation) from the vote or motion in favor of one of the two grading options (final grade based on majority of non-abstaining votes). Students earning “U” grades will be given the opportunity, if requested within two weeks of notification of grade assignment, to meet with the clinical faculty at one of the next two regularly-scheduled meetings to request that the grade be changed. An Incomplete grade will be filed in cases where inadequate supervisory feedback is available for faculty consideration. Students will be notified at least a week in advance of the evaluation meeting if their supervisor fails to complete the required evaluation. This will allow time for both the student and DCT to again attempt to secure formal evaluative feedback. Students will retain the option of filing appeals with the department and college as well (see Graduate Student Handbook) in the event that they remain dissatisfied with the program decision.

Grading Criteria. The faculty will first consider whether the seven minimum requirements specified above for a meaningful placement rotation were met. Assuming so, the faculty will then review documented and sometime direct verbal feedback from supervisor(s) regarding the performance of the student during the designed evaluation period.

Department Ombudsperson: Dr. Joelle Ruthig volunteers to be available to any student who has concerns about faculty or psychology department issues. If you have a concern, Dr. Ruthig asks that you first try to resolve the matter with your instructor. If you feel unable to meet with your instructor or if attempted resolution with your instructor does not produce an acceptable solution, you can consult with Dr. Ruthig (777-3451) regarding your options. Her intent is to assist students in reaching a satisfactory solution to complaints which arise during their time within the Psychology Department.

STUDENT & SUPERVISOR CONFIRMATION

My signature below verifies that I have read the above syllabus, and understand the minimum requirements, as specified by the clinical program, and any additional requirements, as specified by the clinical supervisor.

Supervisor Signature
Date

Student Signature
Date
L.2: CLINICAL PRACTICE AT PSC (PSYC 580) SYLLABUS (REV 1/27/16)

Student Trainee:
Placement Site:
Supervisor:
Evaluation Period:
Course Credit Hours:
Program Coordinator: Joseph Miller, Ph.D. (Director of Clinical Training)
Contact Information: joseph.miller@und.edu (777-3451)

COURSE DESCRIPTION: The clinical program distinguishes between practicum work completed as a team member at our Psychological Services Center, paid half-time practicum work placed in the community during our annual April assignment process, and optional ¼-time supervised additional clinical experiences (ASCEs). External placement rotations and supervision arrangements must be approved annually by the clinical program. You have been assigned to the PSC team and supervisor designated above. This assignment is intended to provide practical supervised experience in the delivery of assessment and/or psychotherapy services to clients at UND and in the community.

Graduate students in the clinical psychology training program are required to successfully (satisfactory grades) complete 6 credit hours of PSYC 580 to be eligible to stand for an internship readiness vote by the clinical faculty. Students must then successfully complete 7 and 8 credit hours of PSYC 580 respectively to submit APPIC internship rankings (usually in January) and to graduate from the Ph.D. program. PSC practice requires enrollment in 1 credit hour (no more or less) for Fall, Spring, & Summer semesters.

COURSE REQUIREMENTS: Satisfactory completion of this practicum rotation will require evidence that the student has met the minimum requirements established below and shown progress in achieving an expected level of performance regarding the additional criteria set forth in our standard supervisory evaluation (reflecting Pre-Internship Clinical Competencies, see APPX S.2 in the Grad Student Handbook. Our minimum necessary but not alone sufficient) requirements for a viable practicum rotation have been identified as follows:

1. Weekly supervision of 1 or more hrs/wk with a PSC Supervisor;
2. Direct observation, as defined by CoA (IR C-14 D), consisting of either (a) in-person live observation of the student’s clinical work in direct contact with clients, or (b) review of audiovisual recording of same, occurring regularly and, minimally, once per semester (evaluation cycle).
3. Documentation of placement activity via Time2Track online, or Weekly Practicum Monitoring Forms (WPMF) that are submitted to the DCT each week;
4. Diligent review of any assigned readings or multimedia educational materials assigned by the supervisor to enhance the training experience;
5. Timely attendance and active participation at all scheduled practicum meetings and events, including supervision and all client contacts;
6. Timely completion of all reports, charting, and other paperwork as required by the site;

ADDITIONAL REQUIREMENTS: The following are specified, by the supervisor, as additional requirements for this placement.

• (None specified)
**GRADING**: Grades will be assigned by the program for all credit hours in PSYC 587 earned during the Fall, Spring and Summer sessions. The process for grade assignment and standards for evaluation are specified below.

*Grading Process*. All clinical program faculty will be given an opportunity to contribute equally to the assignment of your grade in the designated practicum rotation identified in this course outline. You will be assigned a grade of either *Satisfactory* or *Unsatisfactory* for these credit hours. Each faculty member in attendance at the semester evaluation meeting can either abstain (without explanation) from the vote or motion in favor of one of the two grading options (final grade based on majority of non-abstaining votes). Students earning “U” grades will be given the opportunity, if requested within two weeks of notification of grade assignment, to meet with the clinical faculty at one of the next two regularly-scheduled meetings to request that the grade be changed. An Incomplete grade will be filed in cases where inadequate supervisory feedback is available for faculty consideration. Students will retain the option of filing appeals with the department and college as well (see *Graduate Student Handbook*) in the event that they remain dissatisfied with the program decision.

*Grading Criteria*. The faculty will first consider whether the five *minimum* requirements specified above for a meaningful placement rotation were met. Assuming so, the faculty will then review documented and sometime direct verbal feedback from supervisor(s) regarding the performance of the student during the designed evaluation period.

*Department Ombudsperson*: Dr. Joelle Ruthig volunteers to be available to any student who has concerns about faculty or psychology department issues. If you have a concern, Dr. Ruthig asks that you first try to resolve the matter with your instructor. If you feel unable to meet with your instructor or if attempted resolution with your instructor does not produce an acceptable solution, you can consult with Dr. Ruthig (777-3451) regarding your options. Her intent is to assist students in reaching a satisfactory solution to complaints which arise during their time within the Psychology Department.

**STUDENT CONFIRMATION**

*My signature below verifies that I have read the above syllabus, and understand the minimum requirements, as specified by the clinical program, and any additional requirements, as specified by the clinical supervisor.*

__________________________  ____________________
Student Signature                     Date
L.3: ADDITIONAL SUPERVISED CLINICAL EXPERIENCE (ASCE; PSYC 580/594) SYLLABUS (REV 1/27/16)

Student Trainee: 
Placement Site: 
Supervisor: 
Evaluation Period(s): 
Course Credit Hours: Enrolled Course: □ 580 □ 587 □ 594 
Program Coordinator: Joseph Miller, Ph.D. (Director of Clinical Training) 
Contact Information: joseph.miller@und.edu (777-3451)

COURSE DESCRIPTION: The clinical program distinguishes between practicum work completed as a team member at our Psychological Services Center, paid half-time practicum work placed in the community during our annual April assignment process, and optional ¼-time supervised additional clinical experiences (ASCEs). External placement rotations and supervision arrangements must be approved annually by the clinical program; i.e., a new approval must be secured for the Fall, Spring, and/or Summer semester of each new academic year, which begins in the Fall. You have been assigned to the external placement and supervisor(s) designated above. This 1/4-time assignment is intended to provide practical supervised experience in the delivery of assessment and/or psychotherapy services to clients in the community.

ASCEs are considered optional by the program, but the professional commitment of the student to the site and clients served, as for any required clinical training experience, is expected. Students should note that their competencies will be evaluated by ASCE supervisors, and any significant skill deficits observed will be considered targets for remediation; significant ethical, legal, or professional breaches may result in a grade of “U” for the credits enrolled, even if performance of other duties, or in other settings, under that enrolled course are considered satisfactory. Students completing ASCEs must be registered for 1 credit hour of PSYC 580 for each semester of practice; if the student is enrolled in PSYC 580 for concurrent service on a PSC Team, then no additional credits are required in that semester. With program approval, a first year student may complete an assessment-related (intervention is not allowable) ASCE in their first summer semester, and must enroll in one credit of PSYC 594. If a senior student (i.e., past year 4) has completed all 580 and 587 required credits, they may enroll in 1 cr of 587 to represent an ASCE up to ½-time (16-20 hours per week).

COURSE REQUIREMENTS: Satisfactory completion of this practicum rotation will require evidence that the student has met the minimum requirements established below and shown progress in achieving an expected level of performance regarding the additional criteria set forth in our standard supervisory evaluation (reflecting Pre-Practicum or Pre-Internship Clinical Competencies, see APPX S.2 in the Grad Student Handbook). Our minimum necessary (but not alone sufficient) requirements for a viable ASCE rotation have been identified as follows (Please initial each below):
### Requirement

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<th>Student's Initials</th>
<th>Supervisor Initials</th>
<th>Requirement</th>
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<td>1. Supervision equal to 25% of time per week spent in direct service, as defined by APPIC (e.g., 1 hour of group or individual supervision, per week, for every 4 hours of direct service delivery in a week), averaged over the course of the ASCE. Supervision for the ASCE must be specific to the ASCE identified, and cannot occur simultaneously with supervision of another activity (e.g., PSYC 587 practicum, another ASCE, PSYC 580 PSC Team supervision, etc.)</td>
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<td>2. APPIC direct service delivery hours (as broadly specified on the APPIC web page) of at least 1 hr/wk, and no more than 8 hrs/wk, on average.</td>
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<td>3. Documentation of placement activity via Time2Track online, or Weekly Practicum Monitoring Forms (WPMF) that are submitted to the DCT each week;</td>
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<td>4. Diligent review of any assigned readings or multimedia educational materials assigned by the supervisor to enhance the training experience;</td>
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<td>5. Timely attendance and active participation at all scheduled practicum meetings and events, including supervision and all client contacts;</td>
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<td>6. Timely completion of all reports, charting, and other paperwork as required by the site;</td>
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<td>7. Clinical supervisors will be asked to evaluate the clinical competencies of the student under their supervision, near the conclusion of the fall and spring semesters.</td>
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### ADDITIONAL REQUIREMENTS:
The following are specified, by the supervisor, as additional requirements for this placement.

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<th>Student Initials</th>
<th>Supervisor Initials</th>
<th>Additional Requirement(s)</th>
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<td>1. Direct observation, as defined by CoA (IR C-14 D), consisting of either (a) in-person live observation of the student’s clinical work in direct contact with clients, or (b) review of audiovisual recording of same, occurring regularly and, minimally, once per semester (evaluation cycle).</td>
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**GRADING**: Grades will be assigned by the program for all credit hours in PSYC 580 earned during the Fall, Spring and Summer sessions. The process for grade assignment and standards for evaluation are specified below.

**Grading Process.** All clinical program faculty will be given an opportunity to contribute equally to the assignment of your grade in the designated practicum rotation identified in this course outline. You will be assigned a grade of either *Satisfactory* or *Unsatisfactory* for these credit hours. Each faculty member in attendance at the semester evaluation meeting can either abstain (without explanation) from the vote or motion in favor of one of the two grading options (final grade based on majority of non-abstaining votes). Students earning “U” grades will be given the opportunity, if requested within two weeks of notification of grade assignment, to meet with the clinical faculty at one of the next two regularly-scheduled meetings to request that the grade be changed. An Incomplete grade will be filed in cases where inadequate supervisory feedback is available for faculty consideration. Students will be notified at least a week in advance of the evaluation meeting if their supervisor fails to complete the required evaluation. This will allow time for both the student and DCT to again attempt to secure formal evaluative feedback. Students will retain the option of filing appeals with the department and college as well (see Graduate Student Handbook) in the event that they remain dissatisfied with the program decision.

**Grading Criteria.** The faculty will first consider whether the seven *minimum* requirements specified above for a meaningful placement rotation were met. Assuming so, the faculty will then review documented and sometime direct verbal feedback from supervisor(s) regarding the performance of the student during the designated evaluation period.

**Department Ombudsperson:** Dr. Joelle Ruthig volunteers to be available to any student who has concerns about faculty or psychology department issues. If you have a concern, Dr. Ruthig asks that you first try to resolve the matter with your instructor. If you feel unable to meet with your instructor or if attempted resolution with your instructor does not produce an acceptable solution, you can consult with Dr. Ruthig (777-3451) regarding your options. Her intent is to assist students in reaching a satisfactory solution to complaints which arise during their time within the Psychology Department.

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**STUDENT & SUPERVISOR CONFIRMATION**

*My signature below verifies that I have read the above syllabus, and understand the minimum requirements, as specified by the clinical program, and any additional requirements, as specified by the clinical supervisor.*

________________________   ________________________
Student Signature            Date

________________________   ________________________
Supervisor Signature        Date
APPENDIX M: APPLICATION FOR ADDITIONAL SUPERVISED CLINICAL EXPERIENCES (ASCE)

(Please download & complete the MSWord version from the Clinical Program’s Bb site)

Application for Additional Clinical Experience

Please fill out this form, then print for signature by your advisor before submitting to the DCT.

University malpractice insurance is provided for clinical graduate students who are engaged in training activities that are sanctioned by the program. The clinical program formally recognizes practicum activities conducted under the direction of approved supervisors who are usually affiliated faculty members. The clinical faculty formally adopted a policy on 11/1/01 that requires students to receive program approval to work in any and all practicum settings. Students providing direct clinical services should program approval as an exception to this policy and of the relevant clinical components; their professional work will not be covered by university malpractice insurance, and their hours may not be listed on their AAP. Violations of this policy could result in disciplinary action by the program.

Student: ___________________________ Year Enrolled in Program: __________ Date of Application: __________

* Application is for work in the [ ] Fall [ ] Spring [ ] Summer of Academic Year: 2014-2015

Name of Placement/Site: ___________________________ Location: ___________________________

Name of Supervisor: ___________________________ Licensed Psychologist? [ ] Yes [ ] No

Supervisor email: ___________________________ Supervisor phone #: ___________________________

Briefly describe the nature of clinical work to be performed: ___________________________

Anticipated Clinical Hrs./Wk.: __________ Anticipated Supervision Hrs./Wk.: __________

Note: Total clinical practicum work should not exceed 1/2 time. E.g., if you are already working a 1/2 time PSYC placement (16-20 hours/week), then no more than 8-10 hours/week should be dedicated to additional clinical experiences.

Enrollment: Students must also be enrolled in the proper number of practicum credits (e.g., PSYC 580, 587) that are identified in their curricula and their FOS (see the Handbook section on Clinical Practicum Training for more details on required enrollment).

I will be enrolled in _____ Credits of PSYC _____ for each of the semesters indicated above.

Normal Progress: By program policy, additional clinical experiences may be approved by the DCT if you are in normal progress and are otherwise eligible for supervised clinical work. If you are not in normal progress, a program faculty vote will be required for approval. Please provide the information below pertinent to normal progress.

1. Cumulative GPA ≥ 3.5? [ ] Yes [ ] No

2. “S” grades in all PSYC 580 & 587 credits? [ ] Yes [ ] No

3. Master’s Thesis proposed? [ ] Yes [ ] No Date of Proposal: __________

4. Master’s Thesis defended? [ ] Yes [ ] No Date of Defense: __________

5. Master’s Thesis and degree completed? [ ] Yes [ ] No

6. Comps completed? [ ] Yes [ ] No Semester/Year: __________

7. Dissertation proposed? [ ] Yes [ ] No Date of Proposal: __________

8. Internship match? [ ] Yes [ ] No

Approved by Student’s Adviser: [ ] Signature: ___________________________ Date: __________

Program Approval

Approved by DCT [ ] Signature: ___________________________ Date: __________

Approved by Clinical Program Vote [ ] Date: __________

* Please check all semesters that apply. Approval MUST be granted at least once each academic year, and ASCEs may be approved for up to three semesters per year.
APPENDIX N: SCANTRON FORMS

COMPUTER CENTER TRANSMITTAL FORM

DEPT: PHONE:
NAME: DATE:

REPORT SELECTIONS:

(____) 1. Individual Test Results Report (shows score and percentage)
   A. (____) Alphabetic
      1. One student per page: (both can be checked)
         (____) Yes (individual student on a page)
         (____) No (multiple students on a page)
   B. (____) Student ID
      1. Omit student names: (check only one)
         (____) Yes
         (____) No
      2. One student per page: (both can be checked)
         (____) Yes (individual student on a page)
         (____) No (multiple students on a page)

(____) 2. Individual Item Response Report (shows score and student responses)
   A. (____) Alphabetic
      1. One student per page: (both can be checked)
         (____) Yes (individual student on a page)
         (____) No (multiple students on a page)
   B. (____) Student ID
      1. Omit student names: (check only one)
         (____) Yes
         (____) No
      2. One student per page: (both can be checked)
         (____) Yes (individual student on a page)
         (____) No (multiple students on a page)

(____) 3. Item Analysis Report (used to analyze each question)
(____) 4. Relative Frequency Distribution Report (bar graph of scores-2% of group)
(____) 5. Absolute Frequency Distribution Report (bar graph of scores)

(____) 6. Test Score Distribution Report (Formula scoring)

**Picked up by: ______________________ Date: ______________
A test name of your choice must be entered.

It is recommended that you enter the instructor's name, but it is not.

This field must be filled in exactly like this. Always 01.

This field may be used or left blank. If used, it must be filled in completely.

This field must be filled in exactly like this.

This field must be filled in completely.

Choose any six digit number that you prefer.

All three of these fields must be filled in exactly as shown.

Leave these three.
Fill in the answers to test questions. The number of answers here must be the same as the number in the identification # field.

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Fill answers in clearly. Neatness leads to accuracy.

The name fields are not required, but normally will be filled in.

May be filled in or left blank as you choose.

Important: The identification # must be filled in. The student's NAID # is the best choice, but any number between two and ten digits will do. The number must be unique for each student. The number must be left justified, with no spaces between...
## APPENDIX O: STUDENT ASSESSMENT OF TEACHING FORM

### Student Assessment of Teaching

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<tr>
<th>Course: (Dept.) (course number) (section)</th>
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### Reason for taking course:

- Interest
- Major/minor requirement
- General Education requirement
- Reputation of course
- Reputation of instructor
- Other (Don't Know)

### Grade expected:

- A, Audit
- B, Satisfactory
- C, Unsatisfactory
- D, Don't know
- F

### Part 1

**Directions:** Students are an important source of information about the effectiveness of a course and instructor. Please respond candidly to the following questions. The results are used by faculty to make improvements in their own courses and by departments in faculty performance evaluations and in tenure and promotion decisions.

**FILL IN COMPLETELY ONE OF THE CIRCLES AT THE APPROPRIATE POINT USING THE SCALE INDICATED**

### Questions about yourself

1. I asked the instructor for feedback when I needed it.
2. I participated when appropriate.
3. I completed all of my homework and reading assignments to prepare for class, unless excused.
4. I attended all class sessions and related, required meetings, unless excused.

### Questions about the course

5. The course was well organized.
6. The required textbook and/or materials were helpful and added to the learning experience.
7. The readings and assignments contributed to my learning.
8. The work required for the course was appropriate for the credit given.

### Questions about the instructor

9. The instructor communicated ideas and information clearly and effectively.
10. The instructor connected activities, assignments and assessments to the course goals and objectives.
11. The instructor encouraged me to connect real world situations to the course when appropriate.
12. The instructor found ways to keep students interested and engaged.
13. The instructor was available during posted office hours and/or by appointment.
14. The instructor made good use of the book/materials for the course.
15. The instructor provided clear, useful and timely feedback.
16. The instructor treated students and their ideas and opinions with respect.
17. The instructor effectively used technology when appropriate.
18. The instructor explained grading criteria clearly.
19. The instructor applied grading criteria consistently.

### Summary Questions

20. Overall, I put forth a full effort for this course.
21. Overall, the instructor was effective in promoting my learning in this course.
22. Overall, this course has been a worthwhile addition to my University experience.

---

Page 1 is shown.
Students provide written comments on the back side of this form.
During the first semester as a graduate teaching assistant (GTA), each student must participate in and successfully complete the Department of Psychology’s Teaching Assistant Seminar. This seminar covers safety training, use of Blackboard and other CILT technologies, teaching of psychology, and best practices for college instruction.

Additionally, the University requires GTAs to complete NDUS Data Privacy (FERPA) training.

Performance Evaluation
Faculty members should make expectations for the GTA clear at the beginning of each semester and attempt to correct unsatisfactory performance as it occurs. In order to be considered for continued funding, students should maintain satisfactory performance. Documentation may be required to justify an unsatisfactory performance rating.

A student who demonstrates satisfactory performance should:
- Complete assigned tasks on time (as defined by supervising faculty member early in the semester)
- Respond to communication from faculty member or supervisor within a reasonable period of time (as defined by supervising faculty member)
- Respond to communication from students within a reasonable period of time (as defined by supervising faculty member)
- Attend required class sessions (as defined by supervising faculty member)
  - May include exam administration
  - May include teaching duties
  - May include attending lectures
- Be conscientious (minimal grading errors, minimal data entry errors, etc.)
- Grade student work fairly and consistently
- Demonstrate respect for supervising faculty member
- Demonstrate respect for students
- Display professional behavior (i.e. appropriate attire, appropriate language, punctuality, staying on topic, etc.)
- Display competency by providing correct information to students and following instructions from supervisor
- Communicate with supervisor (and gain approval, if necessary) for any non-emergency travel, missed classes, or substitutions that may interfere with course duties

Unsatisfactory performance may include:
- Failure to complete assigned tasks on time
- Failure to respond to communication from faculty member with a reasonable period of time
- Failure to respond to students within a reasonable period of time
- Failure to attend required class sessions
- Lack of conscientiousness and/or attention to detail
- Inconsistency and/or bias in grading student work
• Lack of respect for faculty member
• Lack of respect for students
• Unprofessional behavior
• Lack of competency
• Non-emergency travel plans that interfere with course duties
• Missed classes and/or substitutions that have not been approved by faculty member

Policy for unsatisfactory performance:
• If attempts by the faculty member to correct unsatisfactory performance have been unsuccessful, the undergraduate director and director of the student’s program will meet with the student discuss his or her performance.
• Based on this meeting the student may receive a written warning, which will be shared with the department chair. The student will also be put on probation for the remainder of his/her time in the program.
• If unsatisfactory performance continues, the department chair and student’s advisor will meet with the student to determine whether funding will continue.

Behaviors that may result in immediate loss or suspension of stipend:
• Unethical behavior
• Failure to complete the GTA seminar

At the end of each semester, the following information will be collected, shared with the student, and shared with the department as part of the evaluation process:
  o Number of students in course
  o Whether the GTA served as a lab instructor (yes/no)
  o Whether the GTA graded assignments (yes/no)
  o Whether the GTA entered grades or other data (yes/no)
  o Whether the GTA was required to attend lectures (yes/no)
  o Letter grade based on performance (A+ to F)
  o Explanation for grade

Grievance process
• Students should contact the ombudsperson if they believe they have been treated unfairly
APPENDIX Q: PSYCHOLOGY DEPARTMENT COMPUTER LAB POLICIES

1. Laboratory hours are: M-Th (8:30 am to 6:00 pm) and F (8:30 am to 4:30 pm). The lab may be opened at other times, such as evenings or weekends, but the faculty member or graduate student who opens it is responsible for locking the door and shutting down the computers.

2. The department secretaries are responsible for lab security. They will open and lock the lab each day (work study will have the responsibility for locking the lab M-Th).

3. The lab is intended for instructional use and may not be used for research or activities not involving the computers (e.g., administering make-up exams).

4. Instructors may reserve the lab for class use for the entire semester or on an as-needed basis. If the latter, the arrangements must be made (through the secretary) the prior week (or sooner). A weekly schedule will be posted on the door.

5. If the room is not reserved, as described above, then it must be available for drop-in students. This means that an instructor may, at the last minute, use the lab for a class but may not remove drop-in students who are already in the room.

6. Students having accessibility needs have first priority for the computer with the large screen.

7. No food or drinks are allowed.
### APPENDIX R: WEEKLY PRACTICUM MONITORING FORM

Name ___________________                                           Recording Week _____________

**Assessment Hours** (objective/projective personality testing, behavioral assessment, psychophysiological assessment, intelligence/neuropsychological assessment, etc.)

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**Therapy Hours** (any direct individual, family, couples, or group therapeutic contacts)

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**Support Hours** (report writing; charting of progress notes; test administration, scoring, & interpretation; staffings, treatment planning, chart reviewing, etc.)

**# HRS Total:** _______

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**Supervision Hours** (any and all supervised clinical work; distinguish between individual & group supervision)

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