



WASHINGTON STATE
UNIVERSITY

**CLINICAL PSYCHOLOGY DOCTORAL
PROGRAM MANUAL**

POLICIES AND PROCEDURES

DEPARTMENT OF PSYCHOLOGY
2021-22

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SECTION 1: OVERVIEW

INTRODUCTION

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

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

A copy of this document is always available on our program website, located at: https://s3.wp.wsu.edu/uploads/sites/514/2021/05/Appendix_I.D.1.2.1_Program_Handbook.pdf. You will be asked to read this document in the first week of your training in the clinical psychology doctoral programs as well as to sign a form to indicate that you have read this document and have had the opportunity to ask questions about its contents. You will be notified (via e-mail on our listserv) annually when the document is updated. Please download and read the updated document as soon as possible after receiving notification of an update. A reread will get you up-to-date on changes and will serve as a good reminder of the general policies. We will also review new policies and procedures and answer questions at our annual Beginning of the Year Clinical Psychology Program Meeting, generally held the first Wednesday of the fall semester.

PROGRAM PHILOSOPHY AND MISSION

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

PROGRAM GOALS

The program's three broad goals, which follow from our philosophy and training model, are to train scientist-practitioners who will (1) have broad knowledge of scientific psychology and psychological research methods; (2) provide evidence-based clinical services that are consistent with ethical and professional standards, including knowledge of and sensitivity to issues of diversity; and (3) be capable of contributing to current knowledge in clinical psychology.

PEOPLE

Clinical Training Committee (CTC)

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

Student's Advisor (Major Professor)

Each student admitted into the program is assigned initially to the faculty member who most closely matches their research and clinical interests, who serves as the student's advisor/major professor. This faculty member will assist the student in planning their program of study. The advisor serves as the chair of the student's master's thesis, preliminary examination, and doctoral dissertation committees. Although not typical, students may change advisors as well as their research interests during their studies in the clinical program. In addition, it is possible for students to be involved in the research programs of more than one faculty member. Likewise, sometimes students will work in the labs of other faculty members on specific, time-limited projects that may help them gain additional research experience or clinical hours. Students should obtain approval from their major professor before volunteering for additional work in another professor's lab to ensure that they do not become too overloaded and are staying on track for their independent research projects. If you have any questions about these issues, please discuss them with the DCT.

In cases in which a student wishes to identify a new major professor, the student should first discuss this change with both the current and prospective mentor. Although a student may discuss options with another faculty member before pursuing a mentor change, ideally, the reasons for wanting to change major professors will be discussed with the current major professor before definitively deciding to make such a change. However, in matters involving discrimination or discriminatory harassment under a protected class or those involving sexual harassment or sexual misconduct, students can report directly to CCR (in such cases CCR will assist the student in facilitating interim safety measures as appropriate, which may include changing major professors). Otherwise, if there is a conflict in the working relationship, resolution following the outlined procedures for grievances and conflict resolution should be attempted before severing the mentor relationship. If the student is not comfortable discussing these reasons with the major professor, the conflict resolution chain via the DCT and department chair can be followed. It is also possible to set up an initial meeting with both the major professor and the DCT if the student requests it. If it is determined that a change will be made, the student must next notify the DCT of the change in writing. The DCT will contact the current and proposed major professors to confirm the proposed change in mentors and will then notify the CTC of this change. Students should note that if a student elects to leave their mentor's lab, it is the student's responsibility to obtain a new mentor from the list of eligible mentors for clinical psychology doctoral program committees. Finally, students should note the Graduate School Policies and Procedures Manual (Chapter Seven – Master's Degree Requirements and Chapter Eight – Doctoral Degree Requirements) indicates: "The

student is responsible for establishing and maintaining a faculty advisory committee. WSU faculty have the right to decline to serve on any specific student's committee.”

Graduate Program Coordinator

The Graduate Program Coordinator (currently Kendra Cochrane) for both the clinical and experimental doctoral programs is located in the Department of Psychology (JT 233B, 335-2633). It is important that all new clinical graduate students provide her with a local mailing address, telephone number(s), and e-mail address. All clinical students, new and continuing, should also keep her advised of any changes of local address, telephone number(s), or e-mail address that might occur. If you are a new student, please identify yourself to her as soon as you arrive on campus.

Graduate Student Mentor

Once accepted to the clinical psychology doctoral program, you will be assigned a graduate student mentor, typically based on your preferences concerning the goals of this mentoring relationship and availability of potential mentors. The graduate student mentor will be available to answer general questions about the program as well as specific questions about your transition to Pullman and WSU. Although we want all new students to feel fully supported by the entire program, the graduate student mentor readily provides students with a peer from whom to obtain information following admission.

Graduate Student Representatives

Each year, two clinical psychology graduate students are elected by their peers to serve as student representatives to the CTC. The representatives are elected at the end of the summer semester and serve a one-year term. To ensure representation across the student body—as well as awareness of and attention to the various concerns that students at different stages in training may have—one representative is elected from the incoming first-year class or rising second-year class, and one is elected from the rising third-year class and beyond. Students must be in residence for the upcoming year to be on the ballot. Students who previously served as a student representative are eligible for election if they remain in residence. At the end of the summer semester, all current students (incoming first years through internship class for the upcoming year) vote for both representative positions for the next academic year. Students who are completing internship and who will graduate in the current year are not eligible to vote. The student with the most votes from their peers for each of the two positions will be the student representative for that position if the student agrees to accept the position. Regardless of the number of votes from peers, students must be in good standing in the

program to serve as a student representative.

The student representatives will also participate in part of the CTC meetings to receive program updates to share with their fellow students, participate in relevant discussions, and present any program-level student concerns. They communicate related information to the full student body via CTC meeting minutes, distributed through the clinical listserv. Student representatives are not voting members of the CTC. Of course, the student representatives will be excused for discussions in which it would be inappropriate or unethical for them to be present (e.g., discussions of student performance, annual evaluations, review of data for admissions decisions, practicum placement decisions). The student representatives may also meet with the DCT as needed to discuss any concerns brought to their attention that are relevant to the training program at any time. Additionally, student representatives are appointed each fall semester to serve on various committees in the department (e.g., Search Committees; Graduate Admissions Committee; Diversity Committee).

Other Faculty, Staff, and Affiliated Supervisors

In addition to the core clinical psychology program faculty and the graduate coordinator, there are a number of additional faculty, staff, and supervisors affiliated with the clinical psychology doctoral program. Faculty from the experimental doctoral program teach many of the required courses in the discipline specific knowledge areas. They also may serve on thesis, preliminary examination, and dissertation committees as do designated and approved faculty from other departments (such as educational psychology, nursing, and medicine). Our program has a number of external supervisors who supervise clinical work in practicum placements/externships in community settings.

The department's secretary senior (currently Melissia Reisenauer) can assist with questions regarding facilities (e.g., issuing office keys) and often shares general information with the department (including the *Monday Memo*, to which you should refer weekly). She is also a point person for administrative assistance when teaching a course. The clinic's program specialist (currently Rachelle Simons) oversees the clinic's front office and assists the director and associate director in managing the clinic (see *Psychology Clinic Policies and Procedures Manual*). She will be a point person when working in the clinic. Other staff who will be helpful to you along the way include our information systems/information technology staff (currently Francis Benjamin and Brian Coughenour), who assist with facilities, hardware, software, and systems in the department offices, labs, and clinic. They also fulfill project requests, such as printing posters for conferences. Finally, our department's undergraduate advisors (currently Chioma Helm, Cassandra Hernandez, and Selam Yadetta) may interact with

you regarding undergraduate students in your courses. It is good to know who they are—and where they are located—in case you need to refer an undergraduate student for assistance.

New Clinical Psychology Graduate Students and Beginning of the Year

Each year's incoming cohort of clinical psychology graduate students represents the emerging future of our program. We want you to become integrated as part of the team right away! As part of a welcoming spirit, the department has a longstanding tradition of hosting a beginning-of-the-year picnic, held early during the fall semester. In addition to bringing everyone together to kick off anew academic year, this gathering allows all department faculty members and graduate students to meet the new students. Watch for the announcement early during the fall semester!

Clinical Psychology Program Students

Without the doctoral students there would be no clinical psychology doctoral program. As a faculty, we deeply appreciate you and are dedicated to training you as a future clinical psychologist and scientist. We are committed to supporting your professional growth and offering you a variety of training opportunities. In turn, we expect a lot from you! We selected you from a large group of applicants as the students we believe are best suited for our research teams and our clinical program's training mission. Certainly, we have high expectations, but we know you can meet them. While doing so, we want you to get the most out of your experience and to be an active participant in making the program increasingly better. We value your input and often actively seek it out. For example, you will be asked to be highly involved in the admissions process—from potentially housing applicants to interviewing applicants to helping with behind-the-scenes arrangements. You will soon be returning to someone else all of the goodwill once bestowed upon you! Like an exemplar of how our program operates, our admissions interview process is highly successful because our current students play such an important role. Welcome to the team!

Psychology Program Alumni

It may be difficult to consider yourself as a future graduate of the clinical psychology program when you are just starting out or working to steadily progress through the various requirements, courses, and experiences of the program. However, graduation day will arrive sooner than you think! The clinical psychology doctoral program has produced stellar scientist-practitioners, and the faculty are proud of our graduates and the professional positions that they hold. Know that you are our graduate students of today but are our research leaders of tomorrow. You are our practicum supervisees now but soon you will be our future students'

internship supervisors. As colleagues, we hope to maintain professional and academic relationships and collaborations with you. As a program, we also hope to stay in touch with you and the important work you are doing. After you have graduated, we will also ask you to report your ongoing roles to the American Psychological Association for accreditation purposes. In short, you will have a lifelong connection to WSU's doctoral program in clinical psychology, and we are dedicated to making that connection a positive one.

GRADUATE STUDENTS' OBLIGATION TO ETHICAL AND PROFESSIONAL BEHAVIOR

Ethical Principles and Code of Conduct of the American Psychological Association

You will be governed by the applicable principles of the current version of the American Psychological Association's **Ethical Principles and Code of Conduct** during the time you are in graduate school. The ethical principles and code of conduct can be obtained online from the following website: www.apa.org/ethics/code/index.aspx. You will be asked to read this document by the second Friday of the incoming semester of your training and to sign a form to indicate that you have read this document. You will abide by its standards throughout your training at Washington State University (and beyond).

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

Academic Honesty

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

Interpersonal Communication

We expect of faculty and students to be respectful and professional (i.e., ethical and responsible) in their interpersonal communication with others, including staff, clients/patients, research participants, undergraduate students, and fellow graduate students when engaging in curriculum, clinical, research, teaching or other professional activities as part of their training in the clinical psychology doctoral program. Interpersonal communication includes written and oral communication related to these training activities, wherein we value accountability, ethical engagement, self-reflection, civility, collaboration, and cultural humility. Our goal with this expectation is to maintain a respectful and positive educational community.

Intellectual Property

As was outlined for faculty members above, students also are expected to recognize faculty contributions to projects as part of that faculty member's intellectual property. That is, when a faculty member invests a significant amount of time and contributes ideas to a project, they should be considered to be part of that project unless they voluntarily withdraw. If there is a division between contributors to a project where the contributors are no longer going to continue on a project together, the decision about the work products for that project must be determined through a mutually agreed upon process. If this decision cannot be resolved between the faculty member and the student, a decision should be made following the program's conflict resolution and/or grievances procedures. Regarding authorship, note that faculty members and students should consult the APA website at Publication Practices and Responsible Authorship. In addition, having paper authorship agreements outlined in advance can help clarify contributions, timelines, and expectations. This expectation regarding intellectual property has also been added to the section on Graduate Students' Obligation to Ethical and Professional Behavior.

General Professional Behavior

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

Public Professionalism - Websites, Blogs, Email, and Voicemail

Increasingly, as information becomes more widely available through the internet, lines between

public and private information are blurring. Many students have websites, blogs, social media accounts, email signature lines, and voicemail messages that are entertaining and reflect their personal preferences and personalities. However, students should be thoughtful about how their online/social media presence intersects with their professional identities and image. For example, if the student uses their telephone, social media, email account for professional purposes, clients, research participants, and potential employers may be able to access these, and they may affect one's professional image. Also, according to information collected by the Council of University Directors of Clinical Psychology, clients, graduate and internship programs, and potential employers may all conduct internet searches and use the resulting information in decisions about therapy, or job interviews or offers. Legal authorities also view websites for evidence of illegal activities.

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

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

Title in Email Signature or Other Uses

If you use an email signature or are otherwise identifying your title, do not identify yourself as a "doctoral candidate." Doctoral candidacy is a specific designation by the Graduate School that comes late in your graduate career (i.e., you are not formally admitted to doctoral candidacy until after the doctoral comprehensive exam is passed). Furthermore, this term can be confusing to the lay public. You should use the term "doctoral student" or "graduate student" if you choose to identify yourself as such in your email signature.

Use of Laptops in Class

Student use of laptop computers is permitted in class insofar as they are used for note-taking, referencing materials for discussion, and **in compliance with course syllabi and instructor guidelines**. The use of laptops for other purposes (e.g., emailing, Facebook, instant messaging, video chat, playing games, internet browsing), except as explicitly authorized by the course instructor, **constitutes unprofessional behavior**. The use of other electronic devices during class is prohibited. Although laptops are generally allowed in class, it is up to the discretion of the instructor, and any instructor may determine that laptops are not permitted in general—or during specific class meetings. Certainly, computers do not need to be accessed during all activities of a class. For example, if classmates are delivering a presentation, there is no reason that other students should have their laptops open. Students misusing laptops or using other electronic devices during class (e.g., texting on cell phones) may be dismissed from class and may receive other disciplinary consequences at the discretion of the instructor and/or the CTC. **Professional behavior constitutes an important domain in faculty evaluation of student performance.**

Consensual Relationships

The WSU policy on consensual relationships between faculty and students can be found at: http://public.wsu.edu/~forms/HTML/EPM/EP28_Faculty-Student_and_Supervisor-Subordinate_Relationships.htm

Keep in mind that this policy applies to you both in your role as students, but also in your role as teaching assistant, research assistant, or course instructor.

SECTION 2: CLINICAL PSYCHOLOGY DOCTORAL PROGRAM CURRICULUM

RESEARCH TRAINING

The clinical psychology doctoral program operates on the proposition that research training is an integral part of the education of clinical psychologists. Although the program admits only persons who expect to receive a Ph.D., each student who enters at the bachelor's degree level is expected to complete an empirical master's thesis while en route to the doctoral dissertation. In addition to the master's thesis and doctoral dissertation, clinical students are expected to be involved in research activity under the direction of their faculty advisor during each semester in residence. Most of the program faculty have research labs/teams that meet on a weekly or bi-weekly basis. These research teams are usually centered on the interests of the faculty member (or members) and provide students with a wider array of research experience than their own independent projects alone.

CLINICAL TRAINING

Exposure to professional clinical activities begins in the fall semester of the second year of graduate training and continues through the completion of the clinical internship. To provide broad clinical training for students, the Department of Psychology offers a variety of different clinical experiences. The WSU Psychology Clinic in the Department of Psychology is staffed by faculty and clinical graduate students and provides assessment, diagnostic, and psychotherapy services to University faculty, staff, and students as well as referrals from the community. WSU's Counseling and Psychological Services (CAPS) is staffed by clinical psychology graduate students, interns, postdocs, and faculty psychologists. CAPS provides ongoing counseling and emergency services to students. At WSU's Health and Wellness Services (HWS), students can find assistance through the Behavior Health program—including Same Day Mental Health (SDMH)—which is staffed by clinical psychology graduate students, physicians, and psychiatrists.

INTEREST AREAS

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

areas are noted below. We believe the program's designated interest areas allow students the opportunity to develop competencies specific to their area of interest before applying to internship, thus maximizing their potential for a suitable internship match.

Adult Psychopathology Interest Area

This interest area provides students with research training in the general area of adult psychopathology. In addition to research opportunities in this area, clinical opportunities exist in the WSU Psychology Clinic and at Counseling and Psychological Services as well as other external training sites.

Pullman clinical faculty associated with this area:

David Marcus, Ph.D.

Chair, Department of Psychology

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

Walter Scott, Ph.D.

WSU Psychology Clinic Director and Practicum Coordinator

Areas: Social cognitive approaches to personality/psychopathology, applying personality science to personality assessment, self-regulation and depression.

Conny Kirchhoff, Ph.D.

WSU Psychology Clinic Associate Director

Areas: Temperament and personality factors across cultures and lifespan, and how these relate to psychopathology; personality assessment.

Regional campus clinical faculty associated with this area:

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

Vice Dean of Research, College of Nursing; Associate Vice President for Health Sciences Research

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

Sarah Tragesser, Ph.D. (Tri-Cities campus)

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

Clinical Health and Primary Care Psychology Interest Area

This area provides students with training opportunities in clinical health psychology and primary care psychology. Initial clinical training in health psychology occurs at the Behavioral Health service at WSU's Health and Wellness Services. The Behavioral Health service responds to referrals from University physicians. Typical referrals include headache, gastrointestinal disorders, sleep disorders, and pain syndromes. Students also provide same day consultation/intervention services (Same Day Mental Health; SDMH), in addition to follow-up, for patients with a range of psychological issues who present within a primary care setting vs. a specialty mental health setting. Typical problems include mood disorders, anxiety disorders, substance-related harm/substance use disorder, and facilitating the adoption of healthy behaviors. Additional opportunities for training include providing psychological services to the inpatient medical and surgical, obstetrics, and cardiopulmonary rehabilitation departments at Pullman Regional Hospital as well as to the Marimn Health Center, a medical clinic located on the Coeur d'Alene tribal reservation. Advanced training in these areas is also available within a local hospital-based clinical health psychology practice and within a large local medical practice (Palouse Medical). In addition to clinical training experiences, students may be involved in research in health psychology with the faculty as well as conducting their master's thesis or doctoral dissertation research in this area.

Regional campus clinical faculty associated with this area:

Jess Fales, Ph.D. (Vancouver Campus)

Areas: Research interests include psychosocial risk and protective factors for youth with chronic pain; individual and family-based cognitive-behavioral interventions for pain; and the impact of persistent pain on social development and functioning in adolescence.

Affiliated faculty associated with this area:

Carrie Cuttler, Ph.D.

Psychologist (Experimental Program), Health and Cognition Lab

Areas: Research focuses on elucidating the potentially beneficial and detrimental effects of chronic cannabis use and acute cannabis intoxication; links between cannabis use and mental health (e.g., depression, anxiety, OCD), physical health (e.g., pain, sleep), stress, and cognition (e.g., memory, decision-making, executive functioning, creativity, attention).

Other clinical training faculty associated with this area:

Kate Geiger, Ph.D.

Psychologist, Health and Wellness Services.

Areas: Clinical Health Psychology, Primary Care Psychology.

Child and Adolescent Psychopathology Interest Area

This area provides students with research and clinical opportunities in the areas of clinical/developmental, child and adolescent clinical psychology as well as pediatric psychology.

Pullman clinical faculty associated with this area:

Christopher Barry, Ph.D.

Areas: Risk and protective factors related to child conduct problems and adolescent delinquency; self-esteem, narcissism, and psychopathy in children and adolescents.

Tammy Barry, Ph.D.

Areas: Child clinical psychology, child neuropsychology, child externalizing behaviors, aggression, autism, and ADHD.

G. Leonard Burns, Ph.D.

Areas: Construct validity of Sluggish Cognitive Tempo, ADHD and oppositional defiant disorder within and across cultures.

Maria (Masha) Gartstein, Ph.D.

Director of Clinical Training (DCT)

Areas: Biological underpinnings of temperament and developmental psychopathology; early social-emotional development in a cultural context.

Regional campus clinical faculty associated with this area:

Paul Strand, Ph.D. (Tri-Cities campus)

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

Neuropsychology Interest Area

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

Pullman clinical faculty associated with this area:

Maureen Schmitter-Edgecombe, Ph.D.

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

Tammy Barry, Ph.D. (listed above in child/adolescent area) also conducts research in child neuropsychology.

Regional campus clinical faculty associated with this area:

Naomi Chaytor, Ph.D. (Spokane campus)

Areas: Adult neuropsychology; cognition and diabetes; ecological validity; medical self-management; depression in neurological disorders.

Lonnie Nelson, Ph.D. (Spokane campus)

Areas: Research, education, and interventions to mitigate health inequities among American Indians and Alaska Natives; risk and protective factors for Alzheimer's and other dementias; implement culturally adapted evidence-based interventions and other patient-centered models.

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

Chad Sanders, Ph.D.

Psychologist, Palouse Psychiatry and Behavioral Health

Areas: Executive functioning & aging issues, traumatic brain injury, ADHD, implementation of technology in health services and promotion

Melissa Swanson, Ph.D. (Spokane VAMC)

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

Angelique G. Tindall, Ph.D. (St. Luke's Rehabilitation Institute, Spokane)

Areas: Rehabilitation neuropsychology.

Pullman experimental faculty associated with this area:

Lisa Fournier, Ph.D.: Attention, perception, and action.

John Hinson, Ph.D.: Cognitive neuroscience and decision-making.

Paul Whitney, Ph.D.: Cognitive neuroscience and working memory.

Substance Use Interest Area

There is increasing research activity in this area by the program faculty as well as those affiliated with our program. These faculty also provide students with training opportunities, offering workshops and presenting at program meetings.

Susan Collins, Ph.D. (Spokane Campus)

Areas: The use of harm reduction interventions for people who use substance, conducting community-based participatory research working with multidisciplinary research and clinical teams, community-based agencies, and people who use substances to codevelop, evaluate and implement interventions that aim to reduce substance-related harm and improve quality of life for people who use substances and their communities.

Regional campus clinical faculty associated with this area:

Arthur Blume Ph.D. (Vancouver Campus)

Areas: Researching addictive behaviors and alcohol use interventions among ethnic minority populations, including American Indians and Alaska Natives, and

among college students, to advance understanding and effective interventions for addictive behaviors among racial and ethnic minorities in culturally appropriate ways using rigorous Community Based Participatory Methods

Benjamin Ladd Ph.D. (Vancouver Campus)

Areas: Research interests focus on improving prevention and early intervention techniques for promoting and motivating health behavior change, with an emphasis on process research with the goal of better understanding and identifying effective elements of therapeutic interventions, particularly Motivational Interviewing; additional interests related to risks and/or benefits of cannabis use across various populations.

Celestina Barbosa-Liker, Ph.D.

Areas: Investigates transition from pregnancy to parenthood in the context of substance use related problems; currently leading an interdisciplinary research team to assess mothers, infants, and healthcare providers in order to better care for perinatal people using substances (e.g., opioids, cannabis).

Diversity Interest Area

Majority of the core clinical and affiliated faculty also have strong diversity interests, in addition to the other areas of research already mentioned. Please see the Diversity and Clinical Psychology link on the Clinical Psychology Program web page for a description of their interests and training opportunities.

Advanced Quantitative Methods in Psychology Interest Area

The curriculum in the Department of Psychology at Washington State University provides students with the opportunity to acquire skills in advanced quantitative methods. In addition to the three courses that all clinical psychology graduate students are required to take (i.e., Analysis of Variance and Experimental Design (PSYCH 511); Correlation, Regression, and Quasi-Experimental Design (PSYCH 512); and Psychometrics (Measurement theory and confirmatory factor analysis, PSYCH 514) clinical psychology graduate students also have the opportunity to take one additional course within psychology. This course is Applied Structural Equation Modeling (path analysis, structural regression analysis; latent growth curve analysis; latent-state trait models, and multilevel analysis; PSCYH 516). Additional advanced quantitative courses are available in the doctoral programs in Educational Psychology and Prevention Science. Students can also earn a Certificate in Applied Measurement and Quantitative Methods (e.g., quantitative minor). Students apply the skills learned in this sequence of courses to their

particular research interests. The goal of this training is to prepare students for research careers. Applicants should contact Dr. Burns and/or Dr. French (Professor and Director of Learning and Performance Research Center, Psychometric Laboratory; frenchb@wsu.edu) if they have questions about the courses or the certificate.

CLINICAL PSYCHOLOGY DOCTORAL PROGRAM CURRICULUM REQUIREMENTS

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

Curriculum

Skills Courses

PSYCH 517: Clinical Skills (1-hour course; 2 semesters) - *Required*

PSYCH 505: Teaching Introductory Psychology - *Required before teaching*

PSYCH 510: Introduction to Online Instruction - *Required before teaching Global Campus courses*

History and Systems of Psychology

PSYCH 504: History of Psychology: Theoretical and Scientific Foundations - *Required (but may possibly be met if previously taken at the undergraduate level)*

Research Methodology and Techniques of Data Analysis

PSYCH 511: Analysis of Variance and Experimental Design - *Required*

PSYCH 512: Correlation, Regression, and Quasi-Experimental Design - *Required*

PSYCH 516: Applied Structural Equation Modeling with Current Software - *Elective*

Social Aspects of Behavior

PSYCH 550: Social Psychology - *Required*

Biological Aspects of Behavior

PSYCH 575: Foundations of Neuropsychology - *Required (this course also meets the Advanced Integrative Knowledge of Basic Discipline-Specific Content requirement)*

PSYCH 574: Clinical and Experimental Biopsychology - *Elective*

Note: Students with interests in clinical neuropsychology should take PSYCH 574 and PSYCH 575.

Cognitive and Affective Aspects of Behavior

PSYCH 592: Cognition and Affective Basis of Behavior - *Required*

Developmental Aspects of Behavior

PSYCH 518: Lifespan Developmental Psychology - *Required*

Professional Standards and Ethics

PSYCH 530: Professional, Ethical, and Legal Issues - *Required*

Individual Differences in Behavior

PSYCH 533: Adult Psychopathology - *Required*

Measurement Theory and Individual Assessment

PSYCH 535: Personality Assessment and Diagnosis - *Required*

PSYCH 539: Cognitive and Neuropsychological Assessment - *Required*

PSYCH 514: Psychometrics - *Required*

Diversity Issues in Psychology

PSYCH 552: Diversity Issues in Psychology - *Required*

Individual and Group Intervention

PSYCH 520: Adult Psychotherapy - *Required*

PSYCH 543: Developmental Psychopathology and Evidence-Based Assessment for Children - *Required*

PSYCH 544: Clinical Health and Primary Care Psychology - *Required*

PSYCH 542: Evidence-Based Therapy for Children and Adolescents - *Elective (expected for students interested in clinical child and adolescent psychology)*

Clinical Practica (18 credits minimum required)

PSYCH 546: Counseling and Psychological Services Practicum (6 credits)

PSYCH 537: Psychology Clinic Assessment Practicum (6 credits)

PSYCH 545: Psychology Clinic Assessment and Psychotherapy Practicum (6 credits)

Clinical Externship

PSYCH 548: Clinical Externship

Note: If students are involved in clinical work at a practicum other than the WSU Psychology Clinic or WSU Counseling and Psychological Services, then students need to register for PSYCH 548. The DCT will advise on practicum/externship registration. Most students complete two practica placements each semester, as well as practicum during the summer months (course enrollment not required during summer), to obtain the necessary

hours for their internship applications. Students must be involved in a minimum of one practicum placement each semester in the program at the start of the second year.

Independent Study

PSYCH 600: Independent Study

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

Thesis

PSYCH 700: Master's Research, Thesis, and/or Examination

Note: You need a **minimum of 4 credits of PSYCH 700**. You must sign up for a minimum of 1 credit each semester until the master's thesis is completed and 2 credits in the semester you have the final defense of the master's thesis. Also, please note that the number of credits that you list on your program of study will be the number the Graduate School will require you to take; thus, the department recommends listing only 4 credits on your Program of Study to avoid complications. Students who enter the program with a master's degree but who did not have an approved empirical master's thesis must register for PSYCH 700 and complete a master's thesis at WSU (and will obtain a second master's degree en route to the Ph.D.). Because PSYCH 700 course requirements involve activities in the Major Professor's lab beyond the individual student's Master's project, a related contract outlining these additional responsibilities is developed by the Major Professor and reviewed with the student every semester (See Appendix B for an example contract).

Dissertation

PSYCH 800: Doctoral Research, Dissertation, and/or Examination

Note: You need a **minimum of 20 credits of PSYCH 800** and should begin accumulating these credits after completing your master's thesis. You do not need to complete your preliminary examination before registering for PSYCH 800 credits. After completing your master's thesis, you must sign up for a minimum of 1 credit of PSYCH 800 each semester until the dissertation is completed. Because PSYCH 800 course requirements involve activities in the Major Professor's lab beyond the individual student's Master's project, a related contract outlining these additional responsibilities is developed by the Major Professor and reviewed with the student every semester (See Appendix B for an example contract).

Clinical Internship

PSYCH 595: Clinical Internship in Psychology

Note: You will enroll in two credits of PSYCH 595 during the spring semester prior to the start of the internship year. Due to limitations on tuition waivers in the summer, you will probably have to pay for these credits. To reduce the number of credits required and for which you must pay over the internship year, a grade of X will be assigned for the course for that initial summer until you complete the internship. You should file the internship leave approval form the semester before leaving for internship <http://gradschool.wsu.edu/facultystaff-resources/18-2/>. Enrolling in the spring and completing the leave form will allow you to waive student service fees during the year you are on internship. Once internship is successfully completed, a change of grade form will be submitted to change the PSYCH 595 grade from X to S (satisfactory, or pass).

Clinical Program Meeting Requirement

Clinical psychology doctoral program students are required to attend a clinical program meeting held on Wednesdays 5:00-6:00 p.m. on most weeks during the academic year. These meetings will cover program business involving all students, internship application preparation, didactic presentations from program faculty and outside guest speakers, and other relevant topics. Each year, two of these didactic presentations will involve a supervision topic and one will involve a consultation topic. Thus, students will participate in a total of 15 didactics on supervision (10 topics) and consultation (5 topics) during their time in the program (5 years). A quiz to assess knowledge will be administered following the supervision and consultation didactics and will supplement the supervision and consultation experiences obtained through other coursework and practicum experiences. Finally, clinical case conference presentations will be presented by fourth year students during the clinical program meeting time.

COURSE SCHEDULING

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

Please respond promptly to feedback from your major professor and the DCT about your course schedule. Please ensure that you register for classes promptly and as advised. Failure to do so could cause problems with your tuition waiver, financial aid, or graduate student status at the Graduate School.

Please note that the minimum number of hours for full-time graduate students on an assistantship for fall and spring semesters is 10 credit hours per semester, whereas the maximum number of hours for full-time graduate study is 18 credit hours. Thus, you should be registered for 10 to 18 hours in each fall and spring semester that you are on a paid assistantship, which is mandatory for tuition waivers to be applied. As long as you are registered for a minimum of 10 graduate hours, you may have additional undergraduate hours (up to 18 total hours for graduate plus undergraduate), which would be covered by the tuition waiver. Due to tuition waiver limitations, students do not typically register for courses in the summer.

Students can refer to the *Clinical Psychology Doctoral Program General Five-Year Course Plan* (Appendix C) for general information about course sequencing and a sample plan to complete of the program in five to six years (five in residence plus internship is typical).

COURSE GRADE EXPECTATIONS AND CONSEQUENCES

Only grades of B- or higher are considered acceptable for graduate courses in the clinical psychology doctoral program at WSU. A grade of C+ or lower is considered failing and will result in a formal warning letter from the DCT. The CTC will develop a remediation plan to facilitate future success, and the student will be required to retake the course and earn at least a B-. Students must also maintain a GPA of 3.0 or better to remain in good standing with the Graduate School (<http://gradschool.wsu.edu/policies-procedures/>). A graduate student who has completed their first semester of graduate study and earns a GPA between 2.75 and 2.99 is eligible for one additional semester of continued enrollment on a probationary status. Upon completion of the probationary semester, and thereafter until graduation, a minimum of a 3.0 cumulative GPA is required to continue in Graduate School. Thereafter, any cumulative GPA below 3.0 after the first semester will result in the student's dismissal from the Graduate School and thus the program. Practicum courses are graded S (satisfactory) or F (fail). A failure in practicum is considered extraordinarily problematic and will likely result in the termination of clinical training.

ACADEMIC ADVISING

Although the DCT provides guidance on course enrollment, your major professor is your formal academic advisor and mentor as well as your thesis and/or dissertation chair. In those rare cases in which a student wishes to identify a new major professor, the student should first discuss this change with both the current and prospective mentor (See Major Professor section for additional information). The student must next notify the DCT in writing. The DCT will contact the current and proposed major professor to confirm the proposed change in mentors and will then notify the CTC of this change.

In rare cases, non-clinical faculty members have directed clinical psychology students' theses and dissertations. If you select a non-clinical faculty member as your thesis or dissertation director, the DCT will appoint a clinical faculty member, typically one who is a member of your thesis or dissertation committee, to serve in the capacity as your clinical psychology program advisor or the DCT will serve in this capacity.

As stated before and reiterated here due to the importance of this policy, students should obtain approval from their major professor before volunteering for additional work in

another professor's lab to ensure that they do not become too overloaded and are staying on track for their independent research projects.

TRANSFER OF GRADUATE COURSES FROM OTHER INSTITUTIONS

Students who enter the program with a master's degree should consult with the DCT in regard to which of their previous non-clinical courses (e.g., statistics, social, developmental, history, physiological) will transfer into their Program of Study. To be evaluated as equivalent, a syllabus is required for each non-clinical course that you may transfer. Clinical students are required to retake the clinical psychology courses. The Graduate School will not accept coursework dated beyond 10 years of receipt of the degree. Therefore, only courses that would still be within 10 years of the student's anticipated graduation date would be considered.

MASTER'S DEGREE EN ROUTE TO THE DOCTORATE

A master's degree is required en route toward the doctorate. If you enter the clinical psychology program with only a baccalaureate degree, you must complete a master's degree, with thesis, at WSU. If you enter with a research-oriented master's degree, with thesis, from another department of psychology, you are expected to provide a copy of the thesis to the DCT early during the Fall semester of the first year. The DCT will appoint two readers for your thesis (typically one of the readers is your major professor). The two readers will advise the CTC after reviewing your thesis. If the CTC determines that your master's thesis meets the research criteria normally expected of master's theses conducted by clinical psychology students at WSU, you will not be required to earn a master's degree at WSU. If the CTC determines that your master's thesis does not meet the standard for thesis projects in the clinical psychology training program, you will be required to complete a thesis for the program, and you would earn a subsequent M.S. degree from WSU.

GRADUATE MINOR

No minor field is required in the doctoral program in clinical psychology at WSU. You must have prior approval from the CTC to take graduate courses in another department at WSU or to have it apply toward your degree.

SECTION 3: REQUIRED RESEARCH AND EXAMS

FILING YOUR PROGRAM PAPERWORK

Students obtain the following forms from the Graduate School webpage with the exceptions of numbers 2, 3, 6, and 8. The Graduate School webpage will note the specific deadlines each semester for the completion of the scheduling forms for the final defense of the master's thesis, the preliminary examination, and the doctoral dissertation. Students should consult the webpage of the Graduate School for these deadlines (www.gradschool.wsu.edu)

All forms should be turned in to the Graduate Program Coordinator who will review and approve before obtaining the signature from the DCT. Note that the DCT signs all of the following Graduate School forms related to clinical psychology doctoral students (i.e., on the signature line for chair/director). The DCT signs only after the Graduate Program Coordinator's review. All of the Graduate School Forms may be found at <http://gradschool.wsu.edu/facultystaff-resources/18-2/>

1. Program of Study for Master's Degree (Graduate School Form; see Graduate School website)
This form needs to be completed during the second semester in the program.
2. Thesis Prospectus (Departmental Form; Appendix D; see departmental SharePoint website)
This form is completed by the student to submit their thesis project idea to the predetermined committee for approval before pursuing the thesis proposal. An example of the *Thesis Prospectus* is found in Appendix D. However, students should download the editable Word document form directly from SharePoint (current Graduate Student Resources on the psychology webpage).
3. Thesis Proposal (T1) Approval Form (Departmental Form; Appendix E; see departmental SharePoint website)
The student provides this form to their committee for completion after the successful completion of the thesis proposal. The student files the form with the Graduate Program Coordinator within 5 business days. An example of the *Thesis Proposal (T1) Approval Form* is found in Appendix E. However, students should download the form directly from SharePoint (current Graduate Student Resources on the psychology webpage).
4. Scheduling Exam Form: Thesis Final Examination (Graduate School Form; see Graduate School website)

This graduate school form needs to be completed and filed with the Graduate Program Coordinator at least 12 working days prior to the final defense of the master's thesis.

5. Program of Study for Doctoral Degree (Graduate School Form; see Graduate School website)
This form is completed after the completion of the master's degree and 4 months prior to preliminary exam date.
6. Preliminary Exam Proposal (P1) Approval Form (Departmental Form; Appendix F; see departmental SharePoint website)
The student provides this form to their committee for completion after receiving approval from the committee to pursue their Prelim project. The student files the form with the Graduate Program Coordinator within 5 business days. An example of the *Preliminary Exam Proposal (P1) Approval Form* is found in Appendix F. However, students should download the form directly from SharePoint (current Graduate Student Resources on the psychology webpage).
7. Scheduling Exam Form: Preliminary Examination (Graduate School Form; see Graduate School website)
This form is completed after the filing of the "Program for Doctoral Degree" form. It must be filed with the Graduate Program Coordinator at least 12 working days prior to the exam date and a minimum of 4 months after your Program of Study for Doctoral Degree form and a minimum of 4 months prior to your final defense.
8. Dissertation Proposal (D1) Approval Form (Departmental Form; Appendix G; see departmental SharePoint website)
The student provides this form to their committee for completion after the successful completion of the dissertation proposal. The student files the form with the Graduate Program Coordinator within 5 business days. An example of *Dissertation Proposal (D1) Approval Form* is found in Appendix G. However, students should download the form directly from SharePoint (current Graduate Student Resources on the psychology webpage).
9. Scheduling Exam Form: Dissertation Final Examination (Graduate School Form; see Graduate School website)
This graduate school form needs to be completed prior to the final defense of the dissertation. It must be filed with the Graduate Program Coordinator at least 12 working days prior to the exam date and a minimum of 4 months after your preliminary exam. The final Ph.D. exam must be scheduled within 3 years of successfully completing the preliminary exam.

The Graduate School Policies and Procedure Manual may be found at <https://gradschool.wsu.edu/policies-procedures/>.

The Graduate School's Graduate Students' Rights and Responsibilities document can be found at <http://gradschool.wsu.edu/documents/2015/01/gsrightrresponsibilities.pdf>.

MASTER'S DEGREE

All students are expected to obtain an M.S. degree en route to the Ph.D., unless they come with an acceptable master's degree (including approved empirical thesis) from another institution. M.S. theses from other institutions should be submitted to the DCT during the summer before enrolling so that acceptability of the thesis can be determined as soon as possible (no later than July 1 to be eligible for the higher stipend awarded to students with master's degrees). To be judged acceptable, theses from other institutions must (a) address a topic that fits within the realm of psychology, broadly defined, (b) report the findings from an empirical study (e.g., theoretical papers and literature reviews are not acceptable, although meta-analyses may be acceptable), and (c) be judged to be of equivalent quality as the theses conducted by students in the WSU Clinical Program.

The M.S. degree program (thesis option) must consist of not less than 30 hours of approved graduate credit, including a minimum of 21 hours of graded coursework (our students typically have well above this minimum) and 4 hours of PSYCH 700 Master's Research. It also requires the completion of two semesters of practicum at both the University Counseling and Psychological Services (PSYCH 546) and the WSU Psychology Clinic (assessment practicum; PSYCH 545).

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

Most decisions regarding format, length, and organization are up to the master's committee. Unless the intention is to publish in a non-APA journal, the thesis document should be written

in the style described in the *Publication Manual of the American Psychological Association*:
<http://www.apa.org/>

Master's Thesis

During the first year of residence, the student selects a faculty member to chair their master's committee and direct the master's thesis. The chairperson must be a member of the Department of Psychology faculty. Typically, the chairperson is the major professor identified at the time of admission.

The master's committee consists of a minimum of three faculty members, including the chairperson, with committee members selected from the Psychology Faculty and other approved committee members (exceptions must be approved by the Clinical Faculty and the Department Chair, with final approval from the Dean of the Graduate School). During the Spring semester of their first year, students complete a brief *Thesis Prospectus* (see Appendix D), which must be approved by the committee members before completing the thesis proposal.

After the chair has approved the student's thesis proposal, the student gives the other committee members a copy of the proposal. After the committee members have had an appropriate amount of time to read the proposal (i.e., at least 10 working days), the student then schedules a thesis proposal meeting (T1 meeting). With the approval of the master's thesis proposal by the committee, the members of the committee then sign the *Thesis Proposal (T1) Approval Form* (Appendix E). This form is turned in to the Graduate Program Coordinator within 5 days of the T1 meeting and placed in the student's file.

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

DATA COLLECTION MAY NOT BEGIN UNTIL THE APPROVAL FORM HAS BEEN RECEIVED FROM THE IRB.

After the research and thesis document are completed, an oral examination is conducted (the T2 meeting). Students must post an announcement of the T2 meeting along with an electronic copy of the thesis on the program listserv at least one week prior to the meeting. All

Department of Psychology members are encouraged to attend. All final examinations are public, and all faculty members, regardless of discipline, are encouraged to attend those of interest to them. Although any member of the public at large may attend final examinations, only faculty members may ask questions and vote. Students are welcome but may not participate in the examination.

It is expected that the student will *complete the T2 by the end of the second year* of residence.

An electronic copy (PDF) of the master's thesis document **must be sent to the Graduate Program Coordinator of the Department of Psychology at least 1 week before the oral examination**. An electronic copy (PDF) of the final version of the thesis must be given to the Department of Psychology. The final PDF version will be available on the department SharePoint site.

The student should consult the "Policies and Procedures" of the Graduate School (as described in the Graduate Study Bulletin; <https://gradschool.wsu.edu/policies-procedures/>) for university requirements. Given specific requirements change periodically, the student should contact the Graduate School early in the master's thesis for information about program, examination, and graduation forms to be filed and deadlines for each. Currently, for example, the forms to schedule the thesis final examination must be turned into the Graduate School a minimum of ten business days prior to the defense. This is why the department requires them to be turned in to the Graduate Program Coordinator 12 business days prior to the scheduled defense date.

DOCTORAL DEGREE

The Ph.D. Program of Study must include at least 72 credit hours of course work and research, including a minimum of 34 hours of graded course work. In addition, a preliminary examination and dissertation are required. Preliminary examinations typically occur during the fourth year. The prelim committee and the dissertation committee do not have to be the same, but if you have a different committee for your dissertation, you will need to complete and file a Committee Change Form with the department, who will then send to the Graduate School (<https://gradschool.wsu.edu/facultystaff-resources/18-2/>).

Preliminary Examination

Students will usually take their preliminary examination during their fourth year. Because the knowledge domains of clinical psychology are constantly changing, it is important that students demonstrate their ability to master particular areas of clinical psychology in an independent manner that goes beyond the knowledge taught in the clinical courses. This goal represents

one way that the program attempts to meet the objectives of the American Psychological Association Commission on Accreditation's Standards of Accreditation.

The prelim portfolio meets the requirements of the preliminary exam for the Clinical Program. The Prelim Portfolio will include the following components (six written and one oral exam).

Note that for Components 1 through 3 specifically:

- All work products must have been from work conducted since initiating the doctoral program at WSU.
- If there are various options from which to choose, students should select work products that show the most cohesive snapshot of their research program. However, it is acceptable for the work products of each of these components to be diverse from one another in content as long as they meet the other criteria for each given component.

1. **Component 1: First-Authored Professional Conference Presentation**

- This component requires acceptance and presentation at a conference.
- The conference can be regional, national, or international but should require a submission review process (i.e., the student must have the work formally accepted at the conference).
- The student must be the first author on the presentation used to fulfill this requirement.
- The presentation may have any number of additional co-authors, including other students.
- The student must be the presenter at the conference for the presentation used to fulfill this requirement.
- The presentation can be a talk or a poster.
- The presentation must be based on original empirical research but can be conducted using a preexisting data set.
- The Prelim Portfolio must include the submitted abstract and the presented poster (smaller reprint) or presentation slides (if a talk) and evidence of acceptance.
- Depending on timing of the conference relative to the preliminary exam, it is acceptable to include a future presentation in the Prelim Portfolio provided that it has been accepted.

2. **Component 2: First-Authored Manuscript of an Empirical Study**

- This component requires submission of a manuscript to a peer-reviewed journal. However, it does not require acceptance of the manuscript for publication.

- The journal must conduct a peer review; the journal cannot require a fee for review or publication (i.e., no “pay journals”).
- The student must be the first author on the manuscript used to fulfill this requirement.
- The manuscript may have any number of additional co-authors, including other students.
- The manuscript must describe the results of an original empirical research study but can be conducted using a preexisting data set.
- It is acceptable for the manuscript to be the product of the student’s master’s thesis.
- The Prelim Portfolio must include the manuscript as well as confirmation of submission or acceptance (e.g., journal-created PDF, email).
- The student should submit the manuscript in the most finalized format available at the time that the Prelim Portfolio is submitted to the committee (submission manuscript, page proofs, in press online version, or final printed article).

3. Component 3: Additional Co-Authored Manuscript or F31 Grant Application

If fulfilling Component 3, with a co-authored manuscript:

- This component requires submission of a manuscript to a peer-reviewed journal. However, it does not require acceptance of the manuscript for publication.
- The journal must conduct a peer review; the journal cannot require a fee for review or publication (i.e., no “pay journals”).
- The student can be a co-author in any position on the manuscript, including first author.
- The manuscript may have any number of additional co-authors, including other students.
- The student must describe their contribution as a co-author (i.e., include an Author Contribution Statement that specifically details what they did for the study and manuscript). It must be apparent to the committee that the student’s contribution was substantial enough for consideration in the Prelim Portfolio.
- Two or more students may use the same manuscript for their respective portfolios (e.g., Student 1’s first authored manuscript may be Student 2’s co-authored manuscript; Student 1 and Student 2 may submit the same co-authored manuscript with another person as first author). However, it must be clear that each student made a substantial contribution to the given manuscript. This manuscript choice should be carefully vetted by the committee chair with feedback from the doctoral committee.

- The manuscript can describe the results of an original empirical research study (but can be conducted using a preexisting data set) or can be a conceptual article, a review article, **or** a book chapter.
- The Prelim Portfolio must include the manuscript as well as confirmation of submission or acceptance (e.g., journal-created PDF, email).
- The student should submit the manuscript in the most finalized format available at the time that the Prelim Portfolio is submitted to the committee (submission manuscript, page proofs, in press online version, or final printed article).

If fulfilling Component 3, with an F31 Grant Application:

- This component can be met by the student submitting an extramural funding proposal (i.e., grant application).
- The prototypical graduate student grant application is the Ruth L. Kirschstein National Research Service Awards for Individual Predoctoral Fellows (F31), and this mechanism meets the requirements for Component 3 of the Prelim Portfolio.
- These applications are formatted similarly to faculty grant awards and require sections in which existing scientific literature is reviewed.
- Most other student funding mechanisms, such as the Graduate Council Research Fellowship from the National Science Foundation, *though encouraged*, are too limited in scope to meet requirements of the Prelim Portfolio.
- Students who wish to consider applying for a fellowship from some other agency and to use that application for the Prelim Portfolio Component 3, must receive clearance from the doctoral committee in advance.

4. Component 4: Research Executive Summary

- The Prelim Portfolio must include a research executive summary (of no more than two typed written pages; single-spaced, 12-point font, 1-inch margins) that overviews the student's research program (which should focus on the work submitted for components 1 through 3 but can also address other work more broadly) and that integrates and summarizes key points.

5. Component 5: Curriculum Vita

- The Prelim Portfolio must include an updated CV, which will provide information about the student's full training context and accomplishments (research and clinical).

6. Component 6: Clinical Case Conference Overview

- Students will complete the program's required clinical case conference (on a therapy or assessment case) during their fourth year in the program unless they have negotiated a different timeline in progressing through the program.
- The clinical case conference requirement is its own doctoral program milestone that is distinct from the preliminary examination; expectations for the clinical case conference are outlined elsewhere in the handbook.
- At the time of the clinical case conference, all attending faculty will complete the Clinical Case Conference Evaluation Form, the results of which will be summarized (both quantitative and qualitative feedback) and provided to the student.
- The Prelim Portfolio must include the clinical case conference evaluation summary and the clinical case conference presentation slides.
- If the student fails the clinical case conference, a second one will be completed, consistent with the guidelines for the clinical case conference milestone. In that circumstance, the student should include only the most recent clinical case conference evaluation summary and case conference presentation slides in the Prelim Portfolio.
- Note that the clinical case conference *presentation* itself is not directly part of the preliminary examination process. Rather, the doctoral committee's review of the *written* evaluation summary and the *written* presentation slides are part of the preliminary exam process.

7. Component 7: Oral Examination

- Students will be required to provide an oral presentation and answer questions from the doctoral committee (oral exam) about the Prelim Portfolio, which will serve as the preliminary examination meeting (P2).
- The doctoral committee should have approximately one week to review the Prelim Portfolio before signing the preliminary examination (P2) scheduling form. The doctoral committee will then have the additional 12 working days after the scheduling form is submitted to fully review the Prelim Portfolio and prepare questions.
 - The doctoral committee will complete the preliminary exam evaluation form when reviewing the Prelim Portfolio.
- During the oral preliminary examination meeting scheduled with the doctoral committee, students will present a brief presentation that overviews the Prelim Portfolio.
- Although a focus will be on the work products submitted for Components 1 through 3 (conference presentation and manuscripts), the student can discuss

any research products (covered in Components 4 and 5; research executive summary and CV). Student can also discuss how their research informs their practice and vice versa, integrating Component 6 (clinical case conference overview).

- The doctoral committee will then be able to ask questions about the presentation or any of the six written components.
- The doctoral committee will then ballot (pass or fail) for the results of the preliminary examination based on their review of the written Prelim Portfolio and the oral examination.
 - If the student has not satisfactorily met a component of the Prelim Portfolio, the committee member can vote to fail the student on the preliminary exam ballot.
 - Per the WSU Graduate School, a minimum of three-fourths of those voting must pass the student for the student to pass the preliminary examination.
 - In the event of a failed examination, a student will be re-examined for a second and final attempt (per WSU Graduate School guidelines). They will receive summary feedback about the components that were deemed unsatisfactory and can revise those components and resubmit to the committee.

Grandfather Clause

Students from the 2018-19 cohort and later must complete a Prelim Portfolio. Students from earlier cohorts have the option to be grandfathered in under the previous preliminary exam procedures. If a student from an earlier cohort has already completed the P2, there is no need to also complete a Prelim Portfolio. If a student from an earlier cohort has already completed the P1, the student may opt to complete that project or change to the Prelim Portfolio *through consultation with the major professor/committee chair*. If the student opts to change to the Prelim Portfolio, a new P1 meeting (as described above) must be completed. If a student from an earlier cohort has not yet completed the P1, the student may opt for either the old preliminary exam format or the Prelim Portfolio *through consultation with the major professor/committee chair*. Any student repeating a P1 due to changing to the Prelim Portfolio should inform the DCT and Graduate Coordinator.

The student should consult the "Policies and Procedures" of the Graduate School (as described in the Graduate Study Bulletin; <https://gradschool.wsu.edu/policies-procedures/>) for university

requirements. Given specific requirements change periodically, the student should contact the Graduate School early in the preliminary exam process for information about program, examination, and graduation forms to be filed and deadlines for each. Currently, for example, the forms to schedule the preliminary examination must be turned into the Graduate School a minimum of ten business days prior to the defense. This is why the department requires them to be turned in to the Graduate Program Coordinator 12 business days prior to the scheduled defense date.

Students cannot apply for internship until the preliminary exam has been passed.

Dissertation

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

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

The dissertation committee consists of a minimum of three faculty members, including the chairperson, with committee members selected from the Psychology Faculty and other approved committee members (exceptions must be approved by the Clinical Faculty and the Department Chair, with final approval from the Dean of the Graduate School). If your dissertation committee is different than your prelim committee, a change of committee form is required by the Graduate School. The dissertation must deal with a problem that lies within the doctoral committee chairperson's direct expertise and not in an area with which he/she is only marginally acquainted.

After the chair has approved the student's dissertation proposal, the student then gives the other committee members a copy of the proposal. After the committee members have had an appropriate amount of time to read the proposal (i.e., at least 10 working days), the student then schedules the dissertation proposal meeting (D1 meeting). With the approval of the doctoral dissertation proposal by the committee, the members of the committee then sign the *Dissertation Proposal (D1) Approval Form* (Appendix G). This form is turned in to the

Graduate Program Coordinator within 5 days of the D1 meeting and placed in the student's file.

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

DATA COLLECTION MAY NOT BEGIN UNTIL THE APPROVAL FORM HAS BEEN RECEIVED FROM THE IRB.

After the research and dissertation document are completed, a final oral examination is conducted (the D2 meeting). Students must post an announcement of the D2 meeting along with an electronic copy of the dissertation on the program listserv at least one week prior to the meeting. All Department of Psychology members are encouraged to attend. All final examinations are public, and all faculty members, regardless of discipline, are encouraged to attend those of interest to them. Although any member of the public at large may attend final examinations, only faculty members may ask questions and vote. Students are welcome but may not participate in the examination.

At least 10 working days prior to the oral defense (D2), the student must email a PDF copy of the dissertation to the Department Graduate Program Coordinator. Following the oral examination, an electronic copy (PDF) of the final dissertation must be provided to the Department of Psychology Graduate Program Coordinator no later than the date of graduation. This copy will serve as the public copy and be added to SharePoint by the department or emailed upon request.

The student should consult the "Policies and Procedures" of the Graduate School (as described in the *Graduate Study Bulletin*; <https://gradschool.wsu.edu/policies-procedures/>) for university requirements. Given specific requirements change periodically, the student should contact the Graduate School early in the dissertation project for information about program, examination, and graduation forms to be filed and deadlines for each. Currently, for example, the forms to schedule the dissertation final examination must be turned into the Graduate School a minimum of ten business days prior to the defense. This is why the department requires them to be turned in to the Graduate

PREPARATION AND EVALUATION OF THESIS AND DISSERTATION PROPOSALS

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

1. Orientation

- a. The meeting at which the thesis proposal is presented to the master's committee generally is referred to as the T1 meeting, and that at which the dissertation proposal is presented to the doctoral committee is referred to as the D1 meeting.
- b. The function of the T1 or D1 meeting is discussion and evaluation of the proposal, resulting in a judgment of feasibility and scientific merit and an action accepting the proposal, recommending changes, or rejecting the proposal.

2. Selection of the committee

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

3. Preparation of the proposal

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

- c. Other members of the committee may be involved at this stage in a "consultant" capacity.
- d. The chairperson of the committee should edit and provide preliminary approval of the proposal before it is submitted to the other committee members.

4. Format of the proposal

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

5. Preparation for the T1 or D1 meeting

- a. The T1 and D1 meetings will include the student, their committee, and any other faculty who wish to attend the meeting.
- b. Multiple copies of the complete proposal should be prepared, one for each member of the committee.
- c. It is the student's responsibility to determine the availability of committee members and to schedule a time and place for the meeting. The chair of the committee will notify the clinical faculty as to the time and location of the T1 or D1 meeting.

6. Procedures in the T1 or D1 meeting

- a. Generally, the meeting is informal, but the degree of formality varies with chairpersons and committees. The D1 is more formal than the T1.
- b. Regardless of the formality, the student usually is asked to cover most of the following list of topics in a presentation that lasts approximately 30 minutes. Most of these topics concern what already is available in the proposal, but they remind the committee of details, help maintain a logical order, and permit the student briefly to summarize the proposal.
 - 1. Statement of background, interests, and professional goals of the student (this should be very brief).
 - 2. Why do you have a particular interest in this problem area? How is it related to your goals?
 - 3. Theoretical or empirical background, leading to a precise statement of hypotheses or questions to be investigated.
 - 4. Statement of procedures, including subjects, apparatus, steps in procedure, and time schedule.
 - 5. Description of design, showing how the design will answer questions.
 - 6. Statement of predicted results.
 - 7. Description of proposed statistical treatment.
- c. Committee questions may relate to any of the above points, or to any other matters relevant to the dissertation and/or the student's graduate and professional experience.

7. The committee's role and responsibility:

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

8. Roles and responsibilities of the student, chair, and committee

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

9. **Grievances and Conflict Resolution**

Grievances by the student, if not resolvable, may be discussed with one or more of the following people: The committee chairperson, the DCT, Psychology Graduate Resource Coordinator, and the department Chair. The student can also seek guidance from the CTC if desired and requested (See Grievance and Conflict Resolution Procedures section for additional information). If the matter cannot be resolved at the Department level, the student can seek resolution at the College or University level, as described in the WSU Graduate School's Policies and Procedures Manual (Chapter Twelve, Graduate Student Rights and Responsibilities).

Please see www.gradschool.wsu.edu

MILESTONE TIMELINE

The *Clinical Psychology Doctoral Program Milestone Timeline*, which covers expectations for satisfactory progress on major program milestones, is found in Appendix H. This timeline indicates deadlines for various components of the thesis, preliminary exam, and dissertation. Suggested guidelines are provided for completion of each major milestone. There are also warning dates (no consequences, just a warning) and dates at which the student fails to meet expectations (and would not be considered in good standing until remediated). For extremely delinquent progress, there are also dates for termination review or termination.

REVIEW AND APPROVAL OF ALL RESEARCH WITH HUMAN OR ANIMAL SUBJECTS

The **WSU Institutional Review Board** (IRB; <http://www.irb.wsu.edu/>) must review and approve all research conducted using human subjects. The **WSU Institutional Animal Care and Use Committee** (IACUC; <https://iacuc.wsu.edu/>) must review and approve all research using non-human subjects. Such approval must be obtained **prior** to the beginning of any data collection.

PUBLICATION MANUAL OF THE AMERICAN PSYCHOLOGICAL ASSOCIATION

The acceptable guide which governs much of the format of the thesis and dissertation, and which has been endorsed by the Graduate School as appropriate for theses and dissertations in Psychology, specifically, is the current version of **Publication Manual of the American Psychological Association**. In addition to the thesis and dissertation, much of the other work in which you will be engaged during your program of study at WSU will require mastery of the **APA Publication Manual**, and you are advised to acquire a copy early in your graduate career (i.e., during your first semester in the program).

SECTION 4: CLINICAL WORK

CLINICAL PRACTICA

Sequence of Practica

Clinical training occurs in the following manner. In the second year, students see clients at the University Counseling and Psychological Services (CAPS) in the fall and spring semesters (taking PSYCH 546) as well as perform psychological assessments (e.g., ADHD and LD evaluations with college students) in the Psychology Clinic (PSYCH 537). The primary practicum placement for third year students is PSYCH 545 in the Psychology Clinic. In years three and beyond, students have some flexibility in tailoring their practicum training sites to their areas of interest, including having both a primary and secondary training site. In addition to the Psychology Clinic, third years may be approved to seek training in a minor practicum at an externship site. Beginning in the fourth year, students may opt for either majors or minor at an externship site or continue to train in the WSU Psychology Clinic. Students completing an externship register for PSYCH 548 (Clinical Externship). Students entering the program with a master's degree in clinical psychology may have the option of starting their practicum training earlier than is typical and should consult with the DCT about this option.

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

Students are expected to be involved in summer practicum each summer starting in the summer after the second year but are not required to register for courses. Students may request exceptions to this policy in order to take part in summer clinical externships or research activities in other cities.

Practicum experiences are coordinated by Dr. Walter Scott, WSU Psychology Clinic Director and Practicum Coordinator.

The CTC may require that a student complete additional semesters of in-house practicum before being permitted to participate in off-campus clinical externship experiences.

Practicum Evaluations

At the end of each semester, the practicum supervisors (in the WSU Psychology Clinic or at other sites) will provide each student with a formal evaluation. Appendix I and Appendix J

provide copies of the practicum evaluations completed on students (general and assessment-specific, respectively). These evaluation forms highlight the skills that students are expected to demonstrate in their clinical training. Students will be rated as Exceeds Expectations, Meets Expectations, or Needs Improvement on these skills. In addition, students are given written, qualitative feedback on their strengths, weaknesses, and suggested experiences for future growth. In addition, once the semester is completed, students complete an evaluation on their practicum supervisor.

Clinical Work Outside the Program

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

CLINICAL CASE CONFERENCE

The clinical case conference portion of the Clinical Program Meeting is considered an important part of the clinical training experience. Students participate both as a presenter (during their fourth year) but also gain valuable knowledge through participation as an attendee at the clinical case conferences all other years. Students will attend, on average, more than 35 clinical case conference presentations during their first through fifth years in the program.

During the fourth year of the program, students will present a clinical case conference (therapy or assessment case) at a program-wide meeting, which will give them the opportunity to demonstrate their case conceptualization skills and articulate their theoretical orientation to therapy. The format involves a presentation and question and answer period (described in more detail below). The clinical case conference will be attended by the CTC and other non-presenting students in the program.

General Outline for Clinical Case Conference Presentation

1. Provide a brief overview the presenter's theoretical orientation. What is the presenter's beliefs and assumptions about the mechanisms of change/how therapy works? This orientation should inform the case conceptualization and treatment approach under point 5.

2. Provide general identifying information (but not names) and reason for referral for the case.
3. Provide background history that is relevant to case conceptualization (keep brief).
4. Provide assessment information and behavioral observations.
 - a. All cases should have some type of assessment information even if only seen for therapy.
 - b. If a full psychological assessment preceded treatment, it would be appropriate to present that data as well.
 - c. Provide a good description of the onset, duration, and severity of symptoms, the level of impairment, and the settings in which both symptoms and impairment take place.
5. Provide a coherent case conceptualization that informs evidence-based approaches to treatment.
6. Describe the main treatment objectives (for assessment-only cases, describe assessment-informed recommendations).
7. Describe the outcome goals.
8. Describe the client's response to treatment thus far (for assessment-only cases, describe assessment-informed recommendations).
9. Describe any anticipated or encountered barriers to treatment (or implementation of assessment recommendations) and plans to overcome them.

Clinical Case Conference Format

1. Each student will be scheduled for an individual case conference, which will be held in the main office conference room. Students may present a case either from our on-campus clinic or an externship site. The case must be cleared with your supervisor to be presented in case conference. Regardless of the origin of the case, only initials should be used during the case conference (no names or other obvious identifying information).
2. The case conference will be attended by the clinical faculty and all of the students. Students must clear any case conference absences with the DCT and their major

professor. Such absences would only be allowed for extraordinary circumstances or sickness (just like a class).

3. The presenting student will deliver a formal presentation (with use of visual aids, preferably PowerPoint). The presentation should start promptly and not exceed 30 minutes.
 - a. Attending students should not ask questions during the presentation but are encouraged to take notes and ask questions at the end.
 - b. Faculty will also ask minimal questions during the presentation but may raise a question for a point of clarification if deemed necessary.
4. A question and answer period will follow the case presentation. It will last for no more than 20 minutes.
 - a. First, faculty will ask a series of questions for up to 15 minutes.
 - b. In the final 5 minutes of the question and answer session (or earlier if faculty have completed all questions), the floor will be opened for questions from attending students.
5. After 50 minutes (30-minute presentation and 20-minute Q&A), attending students will be dismissed, and the faculty will provide oral feedback to the presenting student.
6. A brief written feedback (see "Written Evaluation Form") will also be given to the presenting student within 2 weeks of the presentation. A copy of the written feedback will also be placed in the student file.

Clinical Case Conference Evaluation

All attending faculty will complete the *Clinical Psychology Case Conference Evaluation Form* (Appendix K), which includes ratings for up to 11 items on a scale from *1-Fails to Meet Expectations* to *3-Exceeds Expectations*, with 2 representing a performance that *Meets Expectations*. The DCT will aggregate the ratings across all attending faculty for each item to obtain a mean for each item and will average the ratings across all item means to obtain a **grand mean**. A grand mean (i.e., an *average* total score, rather than a summed total score) will be used because not all items will be applicable to all students. To pass the clinical case conference, the student will have to earn a grand mean of **2.0 or higher**.

CLINICAL INTERNSHIP

The completion of a full-time 12-month internship is a requirement for graduation from the clinical program. The Ph.D. degree is awarded only when both the internship and dissertation

are completed. Students are expected to begin the internship at the start of their fifth year. The clinical program fully conforms to the APPIC (Association of Psychology Postdoctoral and Internship Centers) procedures and requirements pertaining to doctoral clinical internship application and acceptance. You should be versed in those policies and procedures early in the academic year immediately preceding your internship year. These policies and procedures can be found online at <http://www.appic.org/> and <http://www.natmatch.com/psychint/>. Students should track their clinical hours and experiences using a format that is compatible with the APPIC applications (currently Time2Track). **The CTC requires that the internship agencies to which you apply be accredited by the American Psychological Association (APA).** If you wish to apply to an internship that is not APA accredited, you must receive approval from the CTC before submitting the application. Please provide a written justification to the CTC, who will then consider your request.

With some exceptions, students usually apply for internship in the fall semester of their fifth year. Students are not allowed to apply for an internship until they have passed their preliminary examination, their dissertation proposal has been approved by their committee, and they have passed the clinical case conference. See Appendix H for specific deadlines for the preliminary exam and dissertation proposal. In addition, the CTC uses the *Council of University Directors of Clinical Psychology (CUDCP) Expectation for Internship Eligibility* (Appendix L) to determine internship eligibility. The only exception is #5 (completed all coursework) if a student has one or two remaining courses to complete due to the timing of course offerings. However, you will only be endorsed as internship eligible if you will have all coursework completed at the time of leaving for internship. The student's clinical readiness for internship is evaluated by the clinical faculty in the semester prior to the application process. You are not permitted to apply for internship until the CTC has judged you to be internship ready.

Please note that if you entered the program with a master's degree from another institution where you gained supervised clinical hours that you plan to report these terminal masters hours on your AAPI, you need to have your training director, major professor, or primary supervisor from your master's program communicate in writing to the DCT to verify the terminal masters hours that you have recorded. This information is necessary for the DCT to be able to later verify your terminal masters hours at the time that you apply for internship. Without verification from a representative from your master's program, the DCT will have to choose the option stating that the terminal masters hours cannot be verified.

Early in the Fall semester, members of the CTC will meet as a group with the prospective interns for the purpose of discussing the internship application process and communicating guidelines. The DCT, as well as the other CTC members, will help you identify potential internship facilities that might be a good match for you and assist you with specific items on the

internship application form. The CTC understands that the internship interviews will require that you be away from campus, and your schedules (e.g., clinic duty, assistantship hours) will be adjusted accordingly. On APPIC Phase I Match Day, the DCT and other members of the CTC will be available to consult with any students who receive notification that they did **not** match with an internship program. The DCT and CTC can provide further information and assistance with the application for APPIC Phase II Match, if the student decides to apply for the Phase II Match.

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

SUPERVISION AND CONSULTATION SERIES

Each academic year, three of the Clinical Program Meetings will be reserved for topics that are part of the Supervision and Consultation Series. Unique topics will be presented each year during a four-year period (no repeated topics). Thus, students will be exposed to 12 unique topics related to supervision and consultation during their first four years in the program. The topics in this series will be presented by clinical faculty or qualified guest speakers. Readings may be provided in advance of the presentations, which students are required to read prior to attending the meeting. Students are expected to attend all 12 meetings (they will sign an attendance sheet) and are required to do make-up work if they miss a meeting. Presentation notes will typically be provided to the students via the clinical listserv after each meeting. Following each topic, students will take a *Supervision and Consultation Written Assessment Quiz* to assess their knowledge of the material presented. Handouts and readings may be used as a reference for the written assessment quizzes. Participation in the written assessments is mandatory; however, its purpose is to provide program outcome data, and the results of the written assessment do not impact the students' grades. Nevertheless, if the results of the written assessment indicate that a student requires some remediation in knowledge, the student will be provided additional materials and instruction as necessary.

SECTION 5: STUDENT PROGRESS

ANNUAL EVALUATIONS

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

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

As such, within a developmental framework, and with due regard for the inherent power difference between students and faculty, students and trainees should know that their faculty, training staff, and supervisors will evaluate their competence in areas other than, and in addition to, coursework, seminars, scholarship, comprehensive examinations, or related program requirements. These evaluative areas include, but are not limited to, demonstration of sufficient: (a) interpersonal and professional competence (e.g., the ways in which student-trainees relate to clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (b) self-awareness, self-reflection, and self-evaluation (e.g., knowledge of the content and potential impact of one's own beliefs and values on clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (c) openness to processes of supervision (e.g., the ability and willingness to explore issues that either interfere with the appropriate provision of care or impede professional

development or functioning); and (d) resolution of issues or problems that interfere with professional development or functioning in a satisfactory manner (e.g., by responding constructively to feedback from supervisors or program faculty; by the successful completion of remediation plans; by participating in personal therapy in order to resolve issues or problems).

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

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

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

The entire clinical faculty attends the evaluation meeting in the spring semester. In addition, experimental faculty who have input to provide are encouraged to attend or, if they cannot attend the meeting, are asked to provide their input in writing. At this meeting, each student's progress toward graduation is discussed in detail on a number of professional competence dimensions:

- (1) quality of academic work;
- (2) overall clinical skills;
- (3) overall research skills;
- (4) progress through the program;
- (5) performance of assistantship duties;
- (6) openness to supervision and responsiveness to feedback;
- (7) interpersonal and professional competence;
- (8) self-awareness (i.e., having a clear sense of own strengths and limitations and impact on others in different contexts/situations);
- (9) professional and ethical behavior;
- (10) involvement in service/advocacy/leadership activities
- (11) problem areas, if any, and suggestions for remediation;
- (12) self-evaluation and progress toward goals; and
- (13) evaluation of overall professional competence and progress.

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

Appendix M contains a copy of the *Annual Student Evaluation Form*. This form is used by the faculty to evaluate the student's progress on the above eleven dimensions.

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

REMEDIATION POLICIES AND PROCEDURES

If (a) a student's performance is evaluated as less than satisfactory during the course of the annual review procedure, (b) the student's academic performance falls below the minimum acceptable level during the course of the year (e.g., the student receives a C in a required course or the student's GPA drops below 3.0), or (c) the student demonstrates behaviors that are a cause for serious concern during the academic year (e.g., serious difficulties during supervision or practicum training), the CTC will discuss the issue and draft a remediation plan. The DCT, the student's major professor, and the student (and when appropriate the practicum supervisor, clinic director, or another party issuing the cause for concern) will then meet to discuss the concern and the remediation plan. Following this meeting the plan may be modified. The final plan will be presented in writing and will include steps for correcting the problem, how the program can support the student in addressing the problem, criteria for satisfactorily addressing the problem, and consequences for failing to satisfactorily address the problem. After the student receives the written plan, the student will meet with the DCT and major professor to discuss the plan and address any questions that the student may have about the plan. The plan will also contain target outcomes and dates for follow-up assessment of progress. This written document will be signed by the DCT, the student, the student's major professor, and any appropriate third parties (e.g., clinic director, supervisor), with copies given to all parties involved and placed in the student file. Throughout the remediation period students are encouraged to meet regularly with their major professors and the DCT to discuss their progress with the plan. This group (DCT, student, major professor, etc.) will then meet on the follow-up date(s) to assess the student's progress with the remediation plan and provide the student with feedback regarding their progress on the remediation plan. Based on the relevant evidence (e.g., course grades if it is an academic issue, progress on thesis or dissertation if it is an issue of failing to make appropriate progress, supervisor feedback if it is a clinical issue), this group will recommend to the CTC either that (a) the student has remediated and no further remediation is necessary, (b) that the student is making progress but that the remediation plan needs to be continued or adjusted, or (c) that the student has not been able to remediate and may need to be terminated from the clinical program (see section below).

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

When a student experiences difficulty in the training program, several steps may be taken. These include, but are not limited to: (a) reducing the student's course load and/or other expectations, (b) approving a request for a formal leave-of-absence through the Graduate School, (c) referring a student for medical treatment or psychological therapy, (d) requiring

additional semesters of practicum or other clinical experience beyond the minimum normally required by the program, and (e) providing additional faculty mentoring and encouragement.

GRIEVANCE AND CONFLICT RESOLUTION PROCEDURES

If (a) there is a complaint against a student, (b) a student objects to a negative evaluation or a proposed remediation plan, (c) a student objects to any other CTC decision concerning that student, or (d) a student has a conflict with a faculty member, the student has the right to express these concerns, including directly presenting concerns in a meeting with the CTC if desired and requested by the student.

Grievances and conflict resolution should be resolved in the following manner: If a student has grievances or conflicts with a specific faculty member, supervisor, or with the program more broadly, the student is first directed to the relevant faculty member or student's committee Chair (major professor) to work toward a resolution. If there is a failure to resolve the matter at that level, the matter should be referred to the DCT. At this point, the student may also meet with the CTC to discuss her or his grievances if desired and requested by the student. If there is a failure to resolve a grievance at that level or if the matter is a conflict rather than a more formal grievance, the matter should be referred to the Department Chair for resolution (after the DCT, and possibly CTC). If the matter cannot not be resolved at the Department level, the student can seek resolution at the College or University level, as described in WSU Graduate School's Policies and Procedures Manual (Chapter Twelve, Graduate Student Rights and Responsibilities). Attempting to resolve conflicts at the College or University level should only occur once these other avenues have been exhausted.

Resolution of conflicts should be in keeping with the spirit of the APA Ethics code by which we abide as professionals. Specifically, APA Ethics Code 1.04 Informal Resolution of Ethical Violations states, "When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved."

Although the faculty encourage an attempt at conflict resolution at the lowest level possible, these guidelines do not preclude students from making a relevant complaint to the Compliance and Civil Rights (CCR) if they believe they have experienced discrimination or discriminatory harassment under a protected class or have experienced sexual harassment or sexual misconduct (consistent with CCR's mission).

Faculty also have the right to report concerns about such discrimination, harassment, or

misconduct to CCR. Likewise, if students share these types of concerns with faculty, students should be aware that faculty are required to report discrimination against a protected class, discriminatory harassment, sexual harassment, and sexual misconduct to CCR pursuant to the EP-15 employee reporting requirements.

The Psychology Graduate Resource Coordinator (currently Dr. Paul Strand located on the Tri-Cities campus: CIC 125S, 509-372-7177; pstrand@wsu.edu) can also provide assistance in situations involving grievances and conflict resolution. The GRC is available to serve as a resource to psychology graduate students in both the experimental and clinical programs on all campuses, providing guidance and referral on a wide range of issues and concerns in the event that you do not wish to take these concerns to your major advisor, DCT/CTC, or the department chair.

Students also may seek assistance from the Ombudsman Office, which functions as an impartial and neutral resource to assist all members of the university community. The ombudsman provides information relating to university policies and procedures and facilitates the resolution of problems and grievances through informal investigation and mediation.

Expectations for Faculty

The CTC faculty is the governing body of the clinical psychology doctoral program. That is, the clinical psychology doctoral program values the input of students and wants to hear student feedback – both on a global program level and when individual students have specific needs. The CTC faculty is also committed to being responsive to student concerns. However, our program does not operate within a shared governance model, and there are many decisions that must be made by the faculty only. Again, we welcome feedback from students on issues that arise from the students' perspective. We also will actively seek student input on various training issues. One mechanism (although not the only mechanism) is to submit student issues to the student representatives. Notably, student representatives participate in CTC meetings as appropriate but are not voting members of the CTC. Information regarding concerns brought to the CTC by the student representatives, the content of related discussion, and any resolution that follows, is shared in the minutes from the CTC meetings, distributed to the entire student body by the student representatives via the listserv – please review these carefully. The CTC also holds the expectation that issues discussed only among the faculty will not be shared with students outside of CTC meetings. Additionally, if a student shares concerns regarding program training or faculty/supervisor conduct with a faculty member of the CTC, it is expected that the faculty member would share the information with the CTC so that it can be addressed.

Faculty's Role in Conflict Resolution

Faculty who have a direct conflict with a student that cannot be resolved between the two of them should work with the student to follow the program's conflict resolution procedure. That

is, the faculty member and student should approach the DCT with the conflict and, if necessary, then the Department Chair. Resolutions at a College or University level should occur only after these departmental-level avenues have been exhausted. If a faculty member receives a complaint from a student about another faculty member, the faculty member should try to resolve the issue with the specific faculty member first. If that process does not lead to a resolution, the same chain of meeting with the DCT, then the Department Chair, should be followed before bringing the issue to a level outside of the department. This is in keeping with the spirit of the APA Ethics code by which we abide as professionals (as noted earlier). In cases where conflict of interest occurs, the next step in the sequence would take place. That is, if the DCT has a conflict of interest, the Department Chair would be consulted first. If the Chair has a conflict of interest, the College administration would be approached instead, etc.

Intellectual Property Faculty are expected to recognize a student's contributions to projects as part of that student's intellectual property. That is, when a student invests a significant amount of time and contributes ideas to a project, the student should be considered to be part of that project unless he or she voluntarily withdraws. If there is a division between contributors to a project where the contributors are no longer going to continue on a project together, the decision about the work products for that project must be determined through a mutually agreed upon process. If this decision cannot be resolved between the faculty member and the student, a decision should be made following the program's conflict resolution and/or grievances procedures. Regarding authorship, note that faculty and students should consult the APA website at Publication Practices and Responsible Authorship, and develop an authorship agreement prior to beginning work on the publication. This expectation regarding intellectual property is also in the section on Graduate Students' Obligation to Ethical and Professional Behavior.

Communication with Students from Full CTC

As a faculty, we are sensitive to student concerns and their professional development needs. As stated above, we want our program's students to be successful and, as a CTC, we want to be responsive to students needs some of which cannot be anticipated in advance by the CTC. Our goal as a CTC is to be a unified body in our communications with students about student concerns and issues. The CTC, as a group, will process concerns and present our recommendations or decisions as one unified body. For issues that impact all students in a program, those communications will be to the full student body. For issues that impact only a specific student or students, those communications will be only with those specific students.

Interpersonal Communication

As faculty members, we hold the shared expectation that we will be respectful and professional (i.e., ethical and responsible) in our interpersonal communication with students,

staff, and fellow faculty when engaging in professional activities related to training in the program. Interpersonal communication includes written and oral communication related to these training activities, wherein we value accountability, ethical engagement, self-reflection, civility, collaboration, and cultural humility. Our goal is to maintain a respectful and positive educational community.

If a student has grievances or problems with a specific faculty member, supervisor, or with the program, the student is first directed to the relevant faculty member or student's committee Chair. If there is a failure to resolve the matter at that level, the matter should be referred to the DCT. At this point the student may also meet with the CTC to discuss her or his grievances. If there is a failure to resolve at that level, the matter should be referred to the Department Chair for resolution. If the matter cannot not be resolved at the Department level, the student can seek resolution at the College or University level, as described in WSU policies for student conduct. Please see .

TERMINATING THE ENROLLMENT OF A STUDENT

The attrition rate in the clinical program is low. When a student does leave, it is usually for a personal reason (e.g., incompatible program fit) rather than an academic reason. There have been a few instances in the past, however, when students have been counseled out of the program or have voluntarily withdrawn from the program because of difficulty making progress, and there have been instances in which students have been terminated for academic reasons. Failure to meet Program, Departmental, or Graduate School requirements (e.g., timeline on research, meeting requirements for grades in coursework) is grounds for termination. Unethical behavior, such as plagiarism and other forms of academic dishonesty, or unethical behavior in a clinical setting is also grounds for termination.

LEAVES OF ABSENCE

Students who have personal difficulties (e.g., serious illness) that prevent them from participating in the program for a given period of time may request a leave of absence from the program for one year. Further requests for leave will be evaluated after that period. To request a leave of absence, the student submits a request for a leave to the DCT for consideration. The DCT will then forward the recommendation to the Department Chair who is responsible for Departmental approval. If approved at the Departmental level, the Chair forwards the request to the Graduate School for consideration. Students taking a leave of absence must complete the Graduate Leave form and file it with the Graduate School (<http://gradschool.wsu.edu/facultystaff-resources/18-2/>). The Policies and Procedures Manual of the Graduate School provides additional information on the Leave of Absence Procedure.

SECTION 6: FINANCIAL INFORMATION AND WORK

ASSISTANTSHIP FUNDING

There are a variety of financial assistance programs available within the Department of Psychology. The most common forms of support are teaching and research assistantships. Other forms of support are teaching and work-study stipends. Acceptance into the graduate program does not guarantee financial support, but the vast majority of the students in the program in recent years have received support. **You should become a state of Washington resident as soon as possible because then you will be eligible for in-state tuition waivers.** Out-of-state tuition waivers are provided during the first year only. See residency website (<http://residency.wsu.edu>) for more information and start the process upon your arrival to Washington.

TA or RA Responsibilities

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

Your appointments are renewed annually, if funds are available. If you are a TA/RA, your 20 hour/week appointment begins on August 16. Plan your arrival in Pullman accordingly and be here in time to begin performing your duties on that date. Your 9-month assistantship ends on May 15. You should plan to remain in Pullman until this end date.

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

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

The Department Chairperson has the responsibility to judge when exceptions are appropriate due to “extraordinary” circumstances and the level of support to be granted to individual students.

A couple of reminders: Students on TA appointments must be registered for 10 credit hours at least one month before the semester begins in order for you to be paid. You must maintain at least a 3.0 GPA, have no outstanding incomplete grades of more than one semester or summer session's duration, and be doing the job that is required of you (e.g., if you are a graduate instructor, you must attend the class that you are assigned to teach, come to class prepared, complete any grading in a timely manner, submit final grades by the deadline, be available to your students, and treat your students professionally and with respect). It is rare that a TA/RA appointment is revoked; however, it is your responsibility to see that neither the department nor you are put in an uncomfortable situation.

Application of these criteria, based on "normal" progress, may be made difficult by extenuating circumstances. In addition, because state funds are allocated on the basis of teaching needs, specific departmental teaching needs must be considered. In general, priority for department support will be given to students based on factors such as normal progress and the ability or experience required to meet specific departmental needs. Priority for department financial support will be reduced by a student's lack of normal progress or because he or she has exceeded the number of years for which students are eligible. The Chair does not make final decisions about "non-departmental" support, such as research assistantships supported by grants, or about positions outside the department.

Clinical Assistants (CA)

The Psychology Clinic has two to four CA positions. Teaching assistantship monies fund these CA positions. Students may apply for these CA positions in their third and fourth years in the program.

ADDITIONAL FINANCIAL AID

Students who are US citizens may complete the Free Application for Federal Student Aid (FAFSA) to determine their eligibility for additional financial aid, typically in terms of student loans.

EMPLOYMENT WHILE A STUDENT-IN-TRAINING

WSU's graduate program in clinical psychology is designed as an intensive full-time experience, and students are not admitted for part-time graduate studies. A full-time academic schedule, together with an assistantship appointment, normally requires a full-time effort that precludes outside work. Consequently, such activity is to be avoided during the period you are in training. However, the CTC recognizes that financial exigencies do occur. Requests for exceptions to this program policy should be submitted in writing to the DCT who will submit it to the CTC for its decision. Such requests will be considered on a case-by-case basis and will be approved only if the CTC judges the requested activity not to conflict with any of the ethical principles or the student's training or to be harmful to the program or otherwise impede upon the student's University responsibilities. Such employment activity, when approved, would normally come later rather than earlier in a student's program of study.

Consideration of any **off-site clinical activities** of students in their fifth year or beyond (i.e., who are no longer funded by the program) must also be presented to the CTC for approval. Students should submit the location of the work, their title, a description of their job responsibilities, the name and credentials of their supervisor at the site, and a description of the supervision plan (i.e., duration and frequency of face-to-face supervision meetings). If approved, the hours are considered "program sanctioned" and can be counted toward the student's APPIC application. Only hours supervised by a Ph.D.-level psychologist will be considered for program sanctioning for APPIC hours.

Keep in mind that as a student in training, the state of Washington and the APA ethics code prohibit you from using the title of "Psychologist" and restrict the professional activities in which you may engage.

SECTION 7: OTHER SPECIFIC INFORMATION

RESIDENCY

The doctoral program in clinical psychology is designed as a six-year program, including the doctoral clinical internship. Thus, our students will far exceed the minimum residency requirements as specified by the WSU Graduate School. Students are typically full-time students in residence during their first four years in the program. In some instances, those students entering with an accepted master's degree and thesis are able to be full-time students in residence during only the first four years in the program. **Students are required to apply for Washington state residency after attending graduate school at WSU for one year so that they will qualify for an in-state tuition waiver** (due to a limited number of out-of-state tuition waivers available). Only under exceptional circumstances (e.g., international students) will a student be permitted to maintain out-of-state residency status after the first year.

SHORT ABSENCES DURING TIMES OF PROGRAM OBLIGATION

If you have to leave town during the regular semester (fall, spring, or summer), or during your regularly scheduled work time for an assistantship, for any reason, you should clear it with each of the following people: (1) your major professor; (2) professors for any of the classes that you would miss during the time of your absence; (3) your supervisor for each practicum site (if applicable); (4) your supervisor(s) for your teaching assistantship, research assistantship, and/or clinical assistantship; and once all of these supervisors/professors have approved the absence (5) the Director of Clinical Training (DCT). **You must secure permission from each of these people before the absence.**

If you have to leave town during the interim when you have required hours at your assistantship, you need to clear the absence with both the DCT and your assistantship supervisor.

Please be mindful of expectations beyond your classes/exams when scheduling travel during semester breaks. Although your exams may end early, you likely still have obligations due to your assistantship or practicum/clinical duties. Be aware of those expectations and ensure that you do not depart too early or return too late to meet your obligations. Check in with the DCT and/or your supervisors if you have any questions about travel dates.

If you must leave town because of an emergency, please inform your major professor and any direct supervisors as soon as possible.

PROGRAM DEADLINES FALLING ON A WEEKEND/HOLIDAY

All program deadlines that fall on a weekend or holiday are pushed to the **next business day**.

RESOURCES FOR GRADUATE STUDENTS

Work Space and Equipment

Graduate students have access to their major professor's lab space for research work. Graduate students are also assigned shared office space. Your practicum sites, including the WSU Psychology Clinic, will provide work space and computers needed to complete your duties.

Colloquia and Seminars

The department, the clinical psychology program, and other departmental entities, sponsor speakers, colloquia, and seminars throughout the year. Students are expected to attend these events.

Grants and Funding

The ability to attract research funding reflects peer approval of a scientific research program and is an important skill for scientist-practitioners to acquire. Graduate students are therefore strongly encouraged to seek both internal and external funding to support their research under the mentorship of the major professor. Speak to your mentor about grant opportunities in your research area. There are many opportunities for students to seek funds—particularly for dissertation support—through a variety of national organizations and funding agencies.

Keys

Students receive a key to the main building and their individual office at the start of their first semester. Students in the clinical psychology program receive a main key to the WSU Psychology Clinic in spring semester of first year when they begin training on standardized testing. Upon the recommendation of your assistantship supervisor or research advisor, and the approval of the department chair, you may be assigned other keys. Alternatively, a shared key may be made available for you to check out. You should discuss this matter with your supervisor/advisor. Please return keys promptly when their use is no longer applicable for you. The department will charge you for lost keys or keys that are not returned. Under no circumstances should departmentally-issued door keys be duplicated or assigned to others.

Mail Boxes

Graduate student mail boxes are in the main office in JT 235. You may use your departmental mail box to receive mail that is professional or training-related. To have mail delivered to your mail box, use this address: **Department of Psychology, Washington State University, PO Box 644820, Johnson Tower 233, Pullman, WA 99164-4820**. If you are a new student, check your mail box when you arrive on campus. All students should check their mail boxes periodically. Your instructors, faculty advisor, departmental administrative assistants, various offices across campus, as well as your graduate student colleagues will be communicating with you through your departmental mail box. Please do not have your personal mail addressed to the department.

WSU Email Account

Once your university email account is established, please provide your e-mail address to the DCT and the clinical program administrative assistant. You should **check your @wsu.edu account regularly** or ensure it is forwarding information to another email address that is checked. Be aware that WSU faculty and staff are required to communicate with WSU students through their WSU email account only. We ask that you use your WSU email account for all official business related to your role as a graduate student in the clinical psychology doctoral program, including when you communicate with undergraduate students as a TA, RA, or instructor. It is imperative that your WSU email account be used in any written materials for collection of data with human subjects, per the IRB regulations.

Clinical Psychology Program Listserv and Website

A considerable amount of program information (e.g., notices of policy changes, program events, upcoming deadlines) will be communicated through our Clinical listserv. All students will be subscribed to this listserv (<http://lists.wsu.edu/mailman/listinfo/clinical>) by the DCT prior to their arrival in the program. Once subscribed, please check your email regularly for any announcements. Students should also feel free to post relevant announcements to the listserv (send email to clinical@lists.wsu.edu). In addition to the listserv, information is available on the clinical psychology program website and on the Graduate Student section in SharePoint.

Psychology Graduate Student Listserv

A considerable amount of departmental information relevant to all graduate students in psychology is communicated from the department chair's office via the psychology graduate

student listserv. All students should subscribe to this listserv at: <http://lists.wsu.edu/mailman/listinfo/psychgrad>. Again, please check your email regularly for any announcements from this listserv. To post to this listserv, send an email to psychgrad@lists.wsu.edu.

MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS

Most clinical psychology graduate students at WSU affiliate with regional or national psychology organizations such as the American Psychological Association (APA), the Association for Psychological Science (APS), or with other organizations with more specific missions such as the Association for Behavioral and Cognitive Therapies (ABCT), Society for Research in Child Development (SRCD), Society for Personality and Social Psychology (SPSP), National Academy of Neuropsychology (NAN), among others. Many of these organizations also provide reduced rates for student membership. Many students also join Psi Chi, a psychology honor society, or Sigma Xi, a science honor society. Both Psi Chi (www.psichi.org/) and Sigma Xi (www.sigmaxi.org/) grant funds for graduate student research projects.

STUDENTS WITH DISABILITIES

Reasonable accommodations are available for students with documented disabilities or chronic medical conditions. If you have a disability and need accommodations to fully participate in your classes, please visit the Access Center website to follow published procedures to request accommodations: <http://www.accesscenter.wsu.edu>. Students may also either call or visit the Access Center in person to schedule an appointment with an Access Advisor. Location: Washington Building 217; Phone: 509-335-3417. All disability related accommodations MUST be approved through the Access Center. Students with approved accommodations are strongly encouraged to visit with instructors early in the semester during office hours to discuss logistics. For more information contact a Disability Specialist on your home campus.

Pullman or WSU Online: 509-335-3417, Washington Building 217;
<http://accesscenter.wsu.edu>, Access.Center@wsu.edu.

Per the Graduate School's stated Rights and Responsibilities, graduate students with identified disabilities should contact the Access Center before the semester that they plan to initiate the accommodations process. Accommodations are unique for each individual and some require a significant amount of time to prepare for, so it is essential that students notify the Access Center as far in advance as possible. Students with a disability that is identified during the semester should contact the Access Center as soon as possible to arrange for an appointment and a review of their documentation by an Access advisor.

RECOMMENDATION TO RETAIN YOUR SYLLABI

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

A DATE YOU MAY NEED TO KNOW IN THE FUTURE

Our graduates occasionally call to obtain the date the clinical psychology program at WSU was initially accredited by the American Psychological Association. Such information is sometimes called for on various application forms. The WSU doctoral program in clinical psychology has been fully accredited by the American Psychological Association since **February 14, 1956**. That information may also be found in the listing of accredited programs that appears each year in **The American Psychologist** and on the APA website at:

<http://www.apa.org/ed/accreditation/programs/clinical.aspx>.

For information about our accreditation status, you can contact the [Commission on Accreditation](#) of the American Psychological Association, which can also be reached at:

Office of Program Consultation and Accreditation

750 First Street, NE

Washington, DC 20002-4242

Phone: 202-336-5979

TDD/TTY: 202-336-6123

Fax: 202-336-5978

apaaccred@apa.org

A FINAL REQUEST

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

SECTION 9: APPENDIXES

APPENDIX A. WSU CLINICAL PSYCHOLOGY DOCTORAL PROGRAM STUDENT LEARNING OUTCOMES

Goal #1: To produce graduates who have a broad knowledge of scientific psychology.
Objective 1.1: Students will acquire basic knowledge of the core domains.
Competencies Expected for this Objective: 1. Students will master academic material concerning the biological bases of behavior. 2. Students will master academic material concerning the cognitive and affective bases of behavior. 3. Students will master academic material concerning social bases of behavior. 4. Students will master academic material concerning human development. 5. Students will master academic material concerning history and systems of psychology.
Measurement of Outcomes and Minimum Thresholds for Competency: Competency is assessed in a variety of ways in these courses. Most courses use some combination of tests, term papers, and class projects/presentations to assess competency. Students must earn a minimum of a B- in each of these core courses to demonstrate minimum competency. The courses that fulfill each area are as follows: 1. Biological bases of behavior: Psych 575: Foundations of Neuropsychology or PSYCH 574: Clinical and Experimental Biopsychology; 2. Cognitive and affective bases of behavior: PSYCH 592: Cognition and Affective Basis of Behavior; 3. Social bases of behavior: PSYCH 550: Social Psychology; 4. Human development: PSYCH 518: Lifespan Developmental Psychology; 5. History and systems: PSYCH 504: History of Psychology: Theoretical and Scientific Foundations
Goal #2: To produce graduates who can provide evidence-based clinical services that are consistent with ethical and professional standards, including knowledge of and sensitivity to issues of diversity.
Objective 2.1: Students will acquire detailed knowledge about psychopathology.
Competencies: 1. Students will master academic material on adult psychopathology. 2. Students will master academic material on child psychopathology.
Measurement of Outcomes and Minimum Thresholds for Competency: Students must earn at least a B- in: PSYCH 533: Adult Psychopathology; PSYCH 543: Developmental Psychopathology and Evidence-Based Assessment for Children.
Objective 2.2: Students will acquire detailed knowledge about evidence-based

psychological interventions.
<p>Competencies:</p> <ol style="list-style-type: none"> 1. Students will master academic material on adult psychotherapy. 2. Students will master academic material on medical psychology.
<p>Measurement of Outcomes and Minimum Thresholds for Competency: Students must earn at least a B- in: PSYCH 520: Empirical Approaches to Psychotherapy; PSYCH 544: Clinical Health and Primary Care Psychology.</p>
<p>Objective 2.3: Students will acquire detailed knowledge about psychological assessment.</p>
<p>Competencies:</p> <ol style="list-style-type: none"> 1. Students will master academic material on psychometrics. 2. Students will master academic material on personality assessment and diagnosis. 3. Students will master academic material on intellectual and neuropsychological assessment.
<p>Measurement of Outcomes and Minimum Thresholds for Competency: Students must earn at least a B- in: PSYCH 514: Psychometrics; PSYCH 535: Personality Assessment and Diagnosis; PSYCH 539: Cognitive and Neuropsychological Assessment; PSYCH 543: Developmental Psychopathology and Evidence-Based Assessment for Children.</p>
<p>Objective 2.4: Students will demonstrate sensitivity, knowledge, and skills in regard to the role of human diversity in clinical psychology.</p>
<p>Competencies:</p> <ol style="list-style-type: none"> 1. Students will master academic material on human diversity. 2. Students will successfully handle diversity issues throughout their practicum placements.
<p>Measurement of Outcomes and Minimum Thresholds for Competency:</p> <ol style="list-style-type: none"> 1. Students must earn at least a B- in PSYCH 552: Diversity Issues in Psychology. 2. Students must receive a rating of at least Meets Expectations on the diversity-specific item(s) on evaluations from their practicum supervisor(s).
<p>Objective 2.5: Students will acquire the knowledge necessary to engage in ethical practice.</p>
<p>Competencies:</p> <ol style="list-style-type: none"> 1. Students will Master academic material on professional, ethical, and legal issues. 2. Successful handling of ethical and professional issues throughout their practicum placements.
<p>Measurement of Outcomes and Minimum Thresholds for Competency:</p> <ol style="list-style-type: none"> 1. Students must earn at least a B- in PSYCH 530: Professional, Ethical, and Legal Issues. 2. Students must receive ratings of at least Meets Expectations on the on the items

addressing clinic policies/procedures, HIPAA, and the APA Ethics Code from their practicum supervisor(s).

Objective 2.6: Students will develop the skills necessary to provide a range of clinical services, including both therapy and assessment.

Competencies:

1. Demonstration of basic psychotherapy skills in two semesters of beginning practicum at WSU Counseling Services.
2. Demonstration of the competent practice of psychotherapy at the WSU Psychology Clinic and various externship placements, including successful implementation of empirically-supported interventions.
3. Demonstration of competent psychological assessment skills at the WSU Psychology Clinic and various externship placements, including the ability to administer, score, and interpret a range of personality and cognitive measures. Also, the ability to integrate these findings into an assessment report that clearly addresses the referral question(s).
4. Demonstration of competent practice of psychotherapy and psychological assessment during internship.

Measurement of Outcomes and Minimum Thresholds for Competency:

1. Satisfactory ratings in basic psychotherapy skills during the Counseling and Psychological Services practicum (defined as 80% or more items on the practicum evaluation rated as at least Meets Expectations).
2. Satisfactory ratings of advanced level psychotherapy skills, including the implementation of empirically-supported interventions across practicum sites (defined as 80% or more items on the practicum evaluation rated as at least Meets Expectations).
3. Satisfactory ratings of diagnosis and assessment skills (defined as 80% or more items on the practicum evaluation rated as at least Meets Expectations).
4. Successful completion of a year-long (or equivalent) APA-accredited predoctoral internship, including a satisfactory final evaluation (based on the site-specific format) from the Director of Training at the internship site.

Goal #3: To produce graduates who are capable of contributing to current knowledge in clinical psychology.

Competency 1: Mastery of academic material on research methodology and techniques of data analysis.

Measurement of Outcomes and Minimum Thresholds for Competency: Students must earn at least a B- in: PSYCH 511: Analysis of Variance and Experimental Design; PSYCH 512: Correlation, Regression, and Quasi-Experimental Design.

Competency 2: Successful completion of an empirical master's thesis.

Measurement of Outcomes and Minimum Thresholds for Competency: Evaluation by the

3-faculty-member thesis committee and a successful public defense. At a minimum, the thesis must be clearly written, correctly follow APA style, provide an adequate review of the relevant literature, report appropriate statistical analyses, and reach reasonable conclusions. To pass the defense, the student must be able to communicate an adequate understanding of the project and answer relevant questions.

Competency 3: Successful completion of preliminary examination portfolio demonstrating breadth and depth of knowledge in scientific psychology.

Measurement of Outcomes and Minimum Thresholds for Competency: A 3-faculty-member committee evaluates the preliminary portfolio. The preliminary portfolio includes 6 written elements (First-Authored Professional Conference Presentation; First-Authored Manuscript of an Empirical Study; Additional Co-Authored Manuscript or F31 Grant Application; Research Executive Summary; Curriculum Vita; Clinical Case Conference Overview) and an oral exam, evaluated by the committee members. The student must provide an oral summary of the portfolio to the committee and adequately answer questions about the components during a defense.

Competency 4: Successful completion of an empirical doctoral dissertation.

Measurement of Outcomes and Minimum Thresholds for Competency: Evaluation by the 3-faculty-member dissertation committee and a successful public defense. At a minimum, the dissertation must be clearly written, correctly follow APA style, provide an adequate review of the relevant literature, report appropriate statistical analyses, and reach reasonable conclusions. To pass the defense, the student must be able to communicate an adequate understanding of the project and answer relevant questions.

Competency 5: Students will contribute to ongoing research in the laboratories of their mentors.

Measurement of Outcomes and Minimum Thresholds for Competency: Students' research contribution is assessed as a part of their annual evaluation ("Overall research skills"). Ideally, the student's contribution results in presentations or publications, but the minimal threshold is making a contribution to the research team.

**APPENDIX B: CLINICAL PSYCHOLOGY DOCTORAL PROGRAM
SAMPLE PSYCH 700/800 CONTRACTS**

TO: PRE-MASTER'S STUDENT
FROM: MAJOR PROFESSOR
DATE: August 15, 2021
SUBJECT: Psych 700 course requirements for Fall 2021

The WSU Graduate School has requested that all PhD programs clarify expectations for student performance in regard to earning research course credits such as Psych 700 and 800. Minimum requirements for successful completion (passing with an "S") for your Psych 700 course for Fall 2021 are:

- Completion of the following tasks related to the T1 requirement:
 - Proposal submission to and final proposal approval by advisor
 - Dissemination of written proposal to thesis committee at least two weeks prior to scheduled T1 meeting
 - T1 meeting with the committee
 - Modifications to research plan, if recommended by committee
- Tasks related to laboratory assistantship/data collection:
 - Participation in data collection
 - Assisting with training and supervision of undergraduate RAs
 - Assisting with recruitment and scheduling of lab visits
 - Assisting with data management activities (e.g., checking/downloading Qualtrics survey data, backing up EEG and video recordings)
 - Participating in our lab and coordinator meetings, as well as collaborative meetings with collaborator research teams
- Contribution warranting co-authorship to submission(s)/presentation(s) prepared for scientific conferences (e.g., ICIS)
- Contribution warranting co-authorship to manuscript(s) prepared for peer-reviewed publication:
 - Completion of manuscript components for which student has primary responsibility (e.g., designated intro paragraphs, results)

Failure to complete all requirements for Psych 700 by December 15, 2021, will result in a grade of "U"; two semesters of "U" grades in Psych 700 may result in termination from the program.

TO: POST-MASTER'S STUDENT
FROM: MAJOR PROFESSOR
DATE: August 15, 2021
SUBJECT: Psych 800 course requirements for Fall 2021

The WSU Graduate School has requested that all PhD programs clarify expectations for student performance in regard to earning research course credits such as Psych 700 and 800. Minimum requirements for successful completion (passing with an "S") for your Psych 800 course for Fall 2021 are:

- Completion of the following tasks related to the D1/D2 requirement:
 - Proposal submission to and final proposal approval by advisor
 - Dissemination of written proposal to dissertation committee at least two weeks prior to scheduled D1 meeting
 - D1 meeting with the committee
 - Modifications to research plan, if recommended by committee
 - Completion of dissertation analyses, consistent with D1 framework
 - Finalizing the dissertation document, including results and discussion
 - Dissemination of written proposal to dissertation committee at least two weeks prior to the graduate school (GS) D2 scheduling form
 - Submitting the scheduling form with required signatures to Kendra Cochrane, who will forward it to GS
 - D2 meeting with the committee
 - Making any changes to the document recommended by the committee

- Tasks related to laboratory assistantship/data collection:
 - Participation in data collection
 - Providing training and supervising undergraduate RAs and more junior graduate students
 - Coordinating recruitment and scheduling of lab visits
 - Data management activities (e.g., checking/downloading Qualtrics survey data, backing up EEG and video recordings)
 - Participating in our lab and coordinator meetings, as well as collaborative meetings with collaborator research teams

- Contribution warranting co-authorship to submission(s)/presentation(s) prepared for scientific conferences (e.g., ICIS)

Appendix B: Sample Psych 700/800 Contracts (continued)

- Contribution warranting co-authorship to manuscript(s) prepared for peer-reviewed publication:
 - Completion of manuscript components for which student has primary responsibility (e.g., designated intro paragraphs, results)

Failure to complete all requirements for Psych 800 by December 15, 2021, will result in a grade of “U”; two semesters of “U” grades in Psych 800 may result in termination from the program.

APPENDIX C: CLINICAL PSYCHOLOGY DOCTORAL PROGRAM GENERAL FIVE-YEAR COURSE PLAN

Important Notes:

- Regardless of classes, each *in-residence student* must be registered for a minimum of **10 hours** during each regular academic semester (fall and spring). Students should enroll in 18 hours maximum
 - Necessary to ensure tuition waiver and stipend.
- Each student currently seeking the masters en route to the doctoral degree should be enrolled in a minimum of 1 hour of PSYCH 700 with the major professor during each regular academic semester (fall and spring).
- After the master's degree is awarded, each student should be enrolled in a minimum of 1 hour of PSYCH 800 with the major professor during each regular academic semester (fall and spring).
- Each student must be enrolled for a minimum of 2 hours of PSYCH 700 during the semester the thesis is defended; each student must be enrolled in a minimum of 2 hours of PSYCH 800 during the semester the dissertation is defended.
- The sample course sequencing below assumes students will take content courses as quickly as possible.
 - Any student may have modifications to the sample course sequencing based on course offerings or otherwise delaying course content to a later semester or adding an elective after consultation with the DCT and major professor.
- Each *off-site student* (but not yet on internship) must register for a minimum of 2 hours for fall semester and 2 hours for spring semester to maintain continuous enrollment.
- Each intern must enroll for 2 hours of PSYCH 595 in the summer semester that they leave for internship.
 - The intern must complete the internship leave form to avoid registration during the academic year of internship and to avoid paying fees.

The following information shows the courses that students typically take each year in the clinical program. The specific sequence may vary because certain courses rotate from one year to the next. Students who enter the program with a master's degree should consult with the DCT in regard to which of their previous non-clinical courses (e.g., social, developmental, history, cognitive/affective) will transfer into their Program of Study. To be evaluated as equivalent, a syllabus is required for each non-clinical course that you may transfer. Students entering with a clinical master's degree are required to retake all clinical psychology courses.

Sample Year-by-Year Course Guide (all courses are 3 hours unless otherwise noted)

Year 1: Fall Semester

PSYCH 511: Analysis of Variance and Experimental Design
PSYCH 530: Professional, Ethical, and Legal Issues
PSYCH 533: Adult Psychopathology
PSYCH 535: Personality Assessment and Diagnosis
PSYCH 700: Master's Research, Thesis, and/or Examination (1 hour) [or PSYCH 800: Doctoral Research, Dissertation, and/or Examination (1 hour)]
PSYCH 517: Clinical Skills (1 hour)

Year 1: Spring Semester

PSYCH 512: Correlation, Regression, and Quasi-Experimental Design
PSYCH 520: Adult Psychotherapy
PSYCH 539: Cognitive and Neuropsychological Assessment
PSYCH 505: Teaching Introductory Psychology (1 hour)
PSYCH 510: Introduction to Online Instruction (1 hour)
PSYCH 700: Master's Research, Thesis, and/or Examination (1 hour) [or PSYCH 800: Doctoral Research, Dissertation, and/or Examination (1 hour)]
PSYCH 517: Clinical Skills (1 hour)

Summer: Research on Thesis

Year 2: Fall Semester

PSYCH 575: Foundations of Neuropsychology
and/or PSYCH 514: Psychometrics
PSYCH 552: Diversity Issues in Psychology
or PSYCH 530: Professional, Ethical, and Legal Issues (whichever was not taken the year before)
PSYCH 546: Counseling and Psychological Services Practicum
PSYCH 537: Psychology Clinic Assessment Practicum
PSYCH 700: Master's Thesis (3 hours, or 2 hours with another course)

Note: PSYCH 530: Professional, Ethical, and Legal Issues and PSYCH 552: Diversity Issues in Psychology alternate, with each offered every other year.

Year 2: Spring Semester

PSYCH 544: Clinical Health and Primary Care Psychology
or PSYCH 543: Developmental Psychopathology and Evidence-Based Assessment for Children
PSYCH 537: Psychology Clinic Assessment Practicum
PSYCH 546: Counseling and Psychological Services Practicum
PSYCH 700: Master's Thesis (2 hours)

Summer: Practicum at one of the clinics

For the 3rd year and beyond, please use electives, dissertation, or independent study hours to ensure that you are enrolled in at least 10 hours each semester that you are supported by an assistantship.

Note: The following four bases courses listed below are usually taken in the third and fourth years of study as they are offered and fit best in the student's schedule:

1. PSYCH 504: History of Psychology: Theoretical and Scientific Foundations
2. PSYCH 550: Social Psychology
3. PSYCH 592: Cognition and Affective Basis of Behavior
4. PSYCH 518: Lifespan Developmental Psychology

Year 3: Fall Semester

PSYCH 575: Foundations of Neuropsychology
or PSYCH 514: Psychometrics (whichever was not taken the year before)
PSYCH 700 or 800: Master's Thesis or Dissertation
Potential bases course (see note above)
PSYCH 545: Psychology Clinic Assessment and Therapy Practicum

Year 3: Spring Semester

PSYCH 544: Clinical Health and Primary Care Psychology
or PSYCH 543: Developmental Psychopathology and Evidence-Based Assessment for Children
(whichever was not taken the year before)
PSYCH 800: Dissertation
Potential bases course (see note above)
PSYCH 545: Practicum Psychology Clinic Assessment and Therapy Practicum

Summer: Practicum at one of the clinics

Year 4: Fall Semester

PSYCH 800: Dissertation
Potential bases course (see note above)
PSYCH 545 and/or 548: Practicum and/or Externship

Year 4: Spring Semester

PSYCH 800: Dissertation
Potential bases course (see note above)
PSYCH 545 and/or 548: Practicum and/or Externship

Summer: Practicum at one of the clinics

Year 5/6: Twelve-month APA accredited clinical internship

PSYCH 595: Clinical Internship in Psychology (2 hours)

Students enroll in PSYCH 595 for 2 hours in the spring immediately prior to the pre-doctoral internship. Students should file the internship leave approval form the semester before leaving for internship <http://gradschool.wsu.edu/facultystaff-resources/18-2/>

APPENDIX D: THESIS PROSPECTUS

Instructions (delete these from your prospectus): A total of 2 pages maximum; single-spaced; 1-inch margins; 12 point font; you must include the section headers but not the additional instructional details; you must include the signature line with date; any figure or table counts in the 2-page limit; citations should be made in the text but a reference list is not required; include your name and project title at the top.

I. Aims/Goals

Briefly describe the aim/goals of the project. What question(s) will this study help to answer? [One paragraph]

II. Rationale

Provide a brief rationale for the proposed study. Why is the study worth pursuing? How will it contribute to the literature? You will probably want to cite some relevant studies here, but this should not be an exhaustive literature review. [Two paragraphs]

III. Hypotheses

What do you expect to find? [One paragraph]

IV. Method

Briefly discuss the design of the study. Detail your methods and procedures (including the types of measures you plan to use, even if you have not yet selected specific instruments). Identify the source of your data: Who will the participants be, from where will they be sampled, and how many participants will you need? How will the design of the study allow you to answer the question(s) from Part I? [Two paragraphs]

V. Proposed Analyses

How will you analyze the data? What statistics do you anticipate using? [One paragraph]

Approved: Director of Clinical Training

Date

For office use only.
Program Director Initials: _____

APPENDIX E: THESIS PROPOSAL (T1) APPROVAL FORM

Title of Thesis Proposal:

Name of Student:

Date of T1:

We have approved the student's thesis proposal.

Date

Chair Signature: _____
Print Name: _____

Member 1: _____
Print Name: _____

Member 2: _____
Print Name: _____

Member 3: _____
Print Name: _____

Please submit this form to the Graduate Coordinator or their mailbox within 5 business days of your successful T1.

For office use only.
Program Director Initials: _____

APPENDIX F: PRELIMINARY EXAMINATION PROPOSAL (P1) FORM

Title of Prelim Examination:

Name of Student:

Date of P1:

Estimated semester of Preliminary Exam: Fall / Spring / Summer _____
(circle one) Year

	Pass	Fail
Chair Signature: _____ Print Name: _____	_____	_____
Member 1: _____ Print Name: _____	_____	_____
Member 2: _____ Print Name: _____	_____	_____
Member 3: _____ Print Name: _____	_____	_____

Please submit this form to the Graduate Coordinator or their mailbox within 5 business days of your successful P1.

For office use only.
Program Director Initials: _____

APPENDIX G: DISSERTTION PROPOSAL (D1) APPROVAL FORM

Title of Dissertation Proposal:

Name of Student:

Date of D1:

We have approved the student's dissertation proposal.

Date

Chair Signature: _____

Print Name:

Member 1: _____

Print Name:

Member 2: _____

Print Name:

Member 3: _____

Print Name:

Please submit this form to the Graduate Coordinator or their mailbox within 5 business days of your successful D1.

APPENDIX H: CLINICAL PSYCHOLOGY DOCTORAL PROGRAM MILESTONE TIMELINE

Requirement	Deadline	Consequence if Missed
Thesis Prospectus Approved	May 1 of first year	WARNING The student will receive a letter that documents that he/she did not meet the expected deadline for the thesis prospectus, which also will be reflected in the student's annual evaluation.
	September 1 of second year	FAILS TO MEET EXPECTATIONS The student will receive a letter that documents that he/she failed to meet expectations for research for the year, which will be documented in the student's annual evaluation for the research category. A written remediation plan will be developed in collaboration with the student, the major professor, and the DCT.
Thesis Proposal Approved (T1)	May 1 of first year	SUGGESTED GUIDELINE Guideline for the student, but no consequence if not met.
	January 31 of second year	WARNING The student will receive a letter that documents that he/she did not meet the expected deadline for the thesis proposal, which also will be reflected in the student's annual evaluation for the research category.
	May 1 of second year	FAILS TO MEET EXPECTATIONS The student will receive a letter that documents that he/she failed to meet expectations for research for the year, which will be documented in the student's annual evaluation for the research category. A written remediation plan will be developed in collaboration with the student, the major professor, and the DCT.
	September 1 of third year	TERMINATION REVIEW Depending on the circumstances, the CTC will (a) develop another remediation plan , (b) counsel the student from the program, or (c) terminate the student from the program.

Program Milestone Timeline (continued)

Requirement	Deadline	Consequence if Missed
Thesis Final Defense Approved (T2)*	August 1 of second year	SUGGESTED GUIDELINE Guideline for the student, but no consequence if not met.
	October 15 of third year	WARNING The student will receive a letter that documents that he/she did not meet the expected deadline for thesis defense, which will be reflected in the student's annual evaluation for the research category.
	January 31 of third year	FAILS TO MEET EXPECTATIONS The student will receive a letter that documents that he/she failed to meet expectations for research for the year, which will be documented in the student's annual evaluation for the research category. A written remediation plan will be developed in collaboration with the student, the major professor, and the DCT. The CTC may modify the student's schedule (e.g., no practicum or reduced client load) to free up time to complete the thesis.
	May 1 of third year	TERMINATION REVIEW Depending on the circumstances, the CTC will (a) develop another remediation plan , (b) counsel the student from the program, or (c) terminate the student from the program.
	August 1 of fourth year	TERMINATION REVIEW/FUNDING WITHDRAWN/NO CLASS REGISTRATION Unless the thesis defense is imminent, the student will be (a) counseled from the program, (b) terminated from the program, or (c) allowed to continue in the program but only allowed to register for 1 hr. The student will not be allowed to participate in practicum or externship and will receive no funding. Another remediation plan will be developed in collaboration with the student, the major professor, and the DCT.
	December 15 of fourth year	TERMINATION Barring extraordinary circumstances, the student will be terminated from the program at this time.

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

Program Milestone Timeline (continued)

Requirement	Deadline	Consequence if Missed
Preliminary Exam: P1	May 1 of third year	SUGGESTED GUIDELINE Guideline for the student, but no consequence if not met.
	September 1 of fourth year	WARNING The student will receive a letter that documents that he/she did not meet the expected deadline for the initial preliminary examination meeting, which will be reflected in the student's annual evaluation.
	May 1 of fourth year	FAILS TO MEET EXPECTATIONS The student will receive a letter that documents that he/she failed to meet expectations for the initial preliminary exam meeting, which will be documented in the student's annual evaluation. A written remediation plan will be developed in collaboration with the student, the major professor, and the DCT.
	September 1 of fifth year	TERMINATION REVIEW Depending on the circumstances, the CTC will (a) develop another remediation plan , (b) counsel the student from the program, or (c) terminate the student from the program.

Program Milestone Timeline (continued)

Requirement	Deadline	Consequence if Missed
Preliminary Exam: P2 *	September 1 of fourth year	<p>SUGGESTED GUIDELINE Guideline for the student, but no consequence if not met. This is the earliest the P2 is expected due to Graduate School timelines for graduation.**</p> <p><i>Note that the student cannot apply for internship until the preliminary exam is passed. The student must pass the preliminary exam by <u>September 1st of the internship application year</u> to be eligible to apply for internship.</i></p>
	May 1 of fourth year	<p>WARNING The student will receive a letter that documents that he/she did not meet the expected deadline for the preliminary exam, which will be reflected in the student's annual evaluation.</p>
	September 1 of fifth year <u>OR</u> if the P2 is failed after the first administration (regardless of timeline)	<p>FAILS TO MEET EXPECTATIONS The student will receive a letter that documents that he/she failed to meet expectations for the preliminary exam, which will be documented in the student's annual evaluation. A written remediation plan will be developed in collaboration with the student, the major professor, and the DCT. The CTC may modify the student's schedule (e.g., no practicum or reduced client load) to free up time to complete the preliminary exam.</p> <p><i>Note that the student cannot apply for internship until the preliminary exam is passed. The student must pass the preliminary exam by <u>September 1st of the internship application year</u> to be eligible to apply for internship.</i></p>
	September 1 of sixth year	<p>TERMINATION REVIEW Depending on the circumstances, the CTC will (a) develop another remediation plan, (b) counsel the student from the program, or (c) terminate the student from the program.</p>

* The dissertation proposal (D1) can proceed the preliminary exam (P2). These meetings must be held on separate dates.

** Per the Graduate School, the student must graduate within three years of the semester in which they pass their preliminary examination, or an extension request will need to be filed. Keep this rule in mind when scheduling your P2. Extensions can be granted, so do not delay the P2 if you are ready and it will impede your progress.

Program Milestone Timeline (continued)

Requirement	Deadline	Consequence if Missed
Dissertation Proposal (D1) *	October 1 of fourth year	<p>SUGGESTED GUIDELINE Guideline for the student, but no consequence if not met.</p> <p><i>Note that the student cannot apply for internship until the dissertation is successfully proposed. The student must pass the dissertation proposal by <u>October 1st of the internship application year</u> to be eligible to apply for internship.</i></p>
	May 15 of fourth year	<p>WARNING The student will receive a letter that documents that he/she did not meet the expected deadline for the dissertation proposal, which also will be reflected in the student's annual evaluation for the research category.</p>
	October 1 of fifth year	<p>FAILS TO MEET EXPECTATIONS The student will receive a letter that documents that he/she failed to meet expectations for the dissertation proposal, which will be documented in the student's annual evaluation for the research category. A written remediation plan will be developed in collaboration with the student, the major professor, and the DCT. The CTC may modify the student's schedule (e.g., no practicum or reduced client load) to free up time to complete the preliminary exam.</p> <p><i>Note that the student cannot apply for internship until the dissertation is successfully proposed. The student must pass the dissertation proposal by <u>October 1st of the internship application year</u> to be eligible to apply for internship.</i></p>
	October 1 of sixth year	<p>TERMINATION REVIEW Depending on the circumstances, the CTC will (a) develop a remediation plan, (b) counsel the student from the program, or (c) terminate the student from the program.</p>

* The dissertation proposal (D1) can proceed the preliminary exam (P2). These meetings must be held on separate dates.

Program Timeline (continued)

Requirement	Deadline	Consequence if Missed
Dissertation Final Defense (D2)	August 1 of internship year	SUGGESTED GUIDELINE (to graduate following internship) Guideline for the student, but no consequence if not met (other than ABD status).
	One year post-internship	FAILS TO MEET EXPECTATIONS The student will receive a letter that documents that he/she failed to meet expectations for research for the year. A written remediation plan will be developed in collaboration with the student, the major professor, and the DCT.
	Two years post-Internship	TERMINATION REVIEW Depending on the circumstances, the CTC will (a) develop a remediation plan, (b) counsel the student from the program, or (c) terminate the student from the program.

Note: Students will complete another program milestone, the Clinical Case Conference, in their fourth year of the program. The date of each student's case conference will be scheduled through consultation with the DCT.

APPENDIX I: SUPERVISOR'S EVALUATION OF STUDENT PRACTICUM PERFORMANCE
WSU Clinical Psychology Doctoral Program
SUPERVISOR'S EVALUATION OF STUDENT PRACTICUM PERFORMANCE

STUDENT NAME _____

SEMESTER _____

SUPERVISOR NAME _____

DATE _____

PRACTICUM SITE _____

Please rate, keeping in mind that your comparison level should be with other students at the same level of training. Please have student's sign and give them a copy for their records.

Check the box for the appropriate rating from the following four rating categories:

NA = Not Applicable/Didn't Observe/Don't Know

NI = Needs Improvement – comments should detail plan for growth or remediation

M = Meets Expectations – often at expected levels, continuing to develop skills

E = Exceeds Expectations – above expected levels or skills

NA NI M E GENERAL PROFESSIONAL ETHICS AND RESPONSIBILITIES

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Presents a professional image (e.g., dress, grooming, demeanor) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Uses effective and professional communication with professionals, peers, and supervisors |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Knows and adheres to Clinic Policies and Procedures including HIPAA guidelines |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Knows and adheres to APA Ethics Code and relevant state laws; seeks appropriate consultation |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Implements responsible time management (e.g., arrives punctually for appointments; completes paperwork and tasks in a timely manner; adequate between-session preparation) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Tolerates ambiguity |

NA NI M E SUPERVISION

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Attends supervision as expected (e.g., regular, on time) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Prepares for supervision (e.g., session video downloaded and selected, notes written, questions formulated, tentative plans for upcoming session) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Accepts and implements feedback |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Communicates non-defensively in discussing clinical work |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Contributes to group supervision with active involvement / insightful comments |

NA NI M E ASSESSMENT SKILLS

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Knows and uses appropriate assessment measures |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Demonstrates facility in test administration and accurate scoring for a range of tests |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Attends to detail in assessment reports |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Writes clear and well-written assessment reports |

NA NI M E CASE CONCEPTUALIZATION SKILLS

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Demonstrates effective diagnostic interviewing skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Collects necessary and relevant data |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Integrates across multiple sources of data |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Makes accurate DSM-5 diagnoses, justified by data |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Develops coherent case conceptualizations, justified by data |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Formulates treatment strategies linked to case conceptualization |

STUDENT NAME _____

NA NI M E GENERAL THERAPY SKILLS

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Sets goals collaboratively with client and prioritizes among goals |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Directs and manages sessions effectively so that treatment plan is implemented |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Exhibits flexibility with client problems/issues |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Identifies and plans homework exercises that are tied to treatment plan |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Evaluates impact of interventions continuously with appropriate measures |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Adjusts case conceptualization when appropriate, modifying treatment approach accordingly |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Demonstrates and applies knowledge of empirically supported treatments and/or principally-based treatment strategies appropriate for case conceptualization |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Recognizes and integrates into treatment the impact of gender role/identity, sexual orientation, ethnicity, cultural, SES, religious, age, disability issues |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Writes clear, coherent, and succinct session notes |

NA NI M E SPECIFIC THERAPY SKILLS

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Demonstrates empathic understanding and empathic reflection/paraphrasing skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Demonstrates effective experiential/emotional processing intervention skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Demonstrates insight-building skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Demonstrates motivational interviewing and other motivational enhancement skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Demonstrates effective behavioral activation intervention skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Demonstrates skills in helping client to identify automatic thoughts |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Demonstrates cognitive restructuring skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Demonstrates problem solving therapeutic skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Demonstrates effective exposure intervention skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Demonstrates mindfulness intervention/distress tolerance skills |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Demonstrates skills in using client-therapist interactions to identify interpersonal patterns |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Demonstrates relapse prevention/termination skills |

NA NI M E CHILD CASES

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Develops rapport and establishes working alliance with children/adolescents and parent(s) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Balances relationship and time spent with child client and parent during session |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Demonstrates range of evidence-based therapy skills (e.g., parent training, cognitive-behavioral therapy) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Demonstrates expertise with a range of client populations (e.g., children, adolescents, developmental disabilities) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Demonstrates a developmentally sensitive approach to the therapy process (e.g., knowledge of development, creativity) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Demonstrates effective approach in consulting with others involved in the case (e.g., parents, teachers, pediatricians) |

APPENDIX J: SUPERVISOR'S EVALUATION OF STUDENT ASSESSMENT PRACTICUM PERFORMANCE
WSU Clinical Psychology Doctoral Program
SUPERVISOR'S EVALUATION OF STUDENT ASSESSMENT PRACTICUM PERFORMANCE

STUDENT NAME _____ SEMESTER _____
 SUPERVISOR NAME _____ DATE _____
 PRACTICUM SITE _____

Please rate, keeping in mind that your comparison level should be with other students at the same level of training. Please have student's sign and give them a copy for their records.

Check the box for the appropriate rating from the following four rating categories:

NA = Not Applicable/Didn't Observe/Don't Know

NI = Needs Improvement – comments should detail plan for growth or remediation

M = Meets Expectations – often at expected levels, continuing to develop skills

E = Exceeds Expectations – above expected levels or skills

NA	NI	M	E	<u>GENERAL PROFESSIONAL ETHICS AND RESPONSIBILITIES</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Presents a professional image (e.g., dress, grooming, demeanor)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Uses effective and professional communication with professionals, peers, and supervisors
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Knows and adheres to Clinic Policies and Procedures including HIPAA guidelines
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Knows and adheres to APA Ethics Code and relevant state laws; seeks appropriate consultation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Implements responsible time management (e.g., arrives punctually for appointments; completes paperwork and tasks in a timely manner)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Is adequately prepared before assessment sessions and supervision
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Tolerates ambiguity

NA	NI	M	E	<u>SUPERVISION</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Attends supervision as expected (e.g., regular, on time)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Prepares for supervision (e.g., session video downloaded and selected, notes written, measures scored, questions formulated)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Accepts and implements feedback
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Communicates non-defensively in discussing clinical work
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Acknowledges and corrects errors
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Contributes to group supervision with active involvement / insightful comments

NA	NI	M	E	<u>TEST ADMINISTRATION AND SCORING SKILLS</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Knows and uses appropriate assessment measures
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Demonstrates facility in test administration for a range of tests
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Demonstrates facility in scoring tests and measures

STUDENT NAME _____

NA NI M E BASIC INTAKE AND FEEDBACK SKILLS

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Hears and reflects the client's needs |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Generates hypotheses and asks appropriate follow-up questions |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Understands client and conveys assessment results according to the needs of the client |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Gathers information effectively and efficiently from collateral informants |

NA NI M E BASIC REPORT WRITING SKILLS

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Communicates clearly in reports |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Writes concise reports (not unnecessarily lengthy) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Documents and accurately interprets test measures utilized |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Attends to detail in assessment reports |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Uses appropriate grammar, punctuation, and spelling throughout reports |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Implements supervisor's edits on notes and reports, showing continuous improvement |

NA NI M E CASE CONCEPTUALIZATION SKILLS

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Integrates information across multiple sources of data (e.g., historical and behavioral observation data with testing data) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Makes accurate DSM-5 diagnoses, justified by data |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Develops coherent case conceptualizations, justified by data |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Conveys conceptualization of case in a written document |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Formulates recommendations linked to case conceptualization |

NA NI M E RELATIONSHIP AND INTERPERSONAL SKILLS / DIVERSITY

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Develops rapport with clients in session (i.e., present, focused, receptive) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Understands and maintains appropriate professional boundaries with clients |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Exhibits flexibility with client problems/issues and is able to handle ambiguous and/or unexpected situations |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Communicates professionally and works collaboratively with community professionals |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Works effectively and is at ease in the assessment process with diverse clients |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Recognizes and integrates into the assessment the impact of gender role/identity, sexual orientation, ethnicity, cultural, SES, religious, age, disability issues |

NA NI M E CHILD ASSESSMENT CASES

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Develops rapport and establishes working alliance with children/adolescents and parent(s) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Demonstrates expertise with a range of client populations (e.g., children, adolescents, developmental disabilities) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Demonstrates a developmentally sensitive approach to the assessment process (e.g., knowledge of development, creativity) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Demonstrates effective approach in consulting with others involved in the case (e.g., parents, teachers, pediatricians) |

APPENDIX K: DOCTORAL COMPREHENSIVE EXAM: CLINICAL CASE CONFERENCE WRITTEN EVALUATION FORM

Student's Name: _____ Rater's Name: _____

Supervisor (if known): _____ Date of Case Conference: _____

For each of the 11 items, please select the rating (1, 2, or 3). Provide qualitative feedback for strengths, areas to target for improvement, and overall assessment of case conference performance.

1. The student's theoretical orientation was clearly presented and integrated well into the case presentation.

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

2. The visual presentation of client information was clear.

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

3. Student was prepared and able to discuss the case with ease (e.g., not just read from slides/notes).

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

4. Only relevant background information was presented.

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

5. Assessment information was summarized clearly and integrated into the case conceptualization.

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

6. Case conceptualization was clear and communicated precipitating factors as well as factors contributing to the maintenance of symptoms.

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

7. Treatment (or assessment recommendations) followed directly from the assessment information and case conceptualization.

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

8. Student described the outcome goals (and client's response to treatment if applicable).

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

9. Student described anticipated or encountered barriers to treatment (or implementation of assessment recommendations) and plans to overcome them.

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

10. Student fielded questions from the faculty well.

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

11. Student fielded questions from their peers well (if applicable). Circle here if N/A

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

Qualitative Feedback

Strengths

Areas to target for improvement

Overall assessment of case conference performance

APPENDIX L: CUDCP INTERNSHIP ELIGIBILITY

COUNCIL OF UNIVERSITY DIRECTORS OF CLINICAL PSYCHOLOGY EXPECTATION FOR INTERNSHIP ELIGIBILITY

1. Trainee meets or exceeds foundational and functional competencies as outlined by the Assessment of Competency Benchmarks Work Group.
2. Trainee successfully completed a master's thesis (or equivalent).
3. Trainee passed program's comprehensive or qualifying exams (or equivalent).
4. Trainee's dissertation proposal has been accepted at the time of application to the internship.
5. Trainee successfully completed all required course work for the doctoral degree prior to starting the internship (except hours for dissertation and internship).
6. Trainee completed an organized, sequential series of practicum experiences supervised by at least two different clinical psychologists that involve formalized practicum experience in evidence-based assessment and therapy. The Trainee completed at least 450 face-to-face hours of assessment/intervention and at least 150 hours of supervision by a clinical psychologist who routinely employed individual and/or group supervision models and at least one or more of the following intensive supervision methods (e.g., direct observation, co-therapy, audio/videotape review). During early formative years, the ratio of face-to-face hours to supervision hours approximated 1:1 and increased to around 4:1 as the Trainee developed intermediate to advanced clinical skills.
7. Trainee has contributed to the scientific knowledge within psychology, as evidenced by:
 - a. Publishing an article in a refereed journal or a book chapter as an author or co-author, or
 - b. Presenting at least three papers/posters/workshops at regional, national, or international professional conferences or meetings.
8. Trainee was enrolled in a program that conducts formal annual evaluations of each student for purposes of monitoring trainees' developing competencies and assuring that only students making satisfactory progress are retained and recommended for doctoral candidacy and entry into the profession. This annual program review of each student utilizes evaluations obtained from different faculty and supervisors and covers the full range of competencies including academic, research, clinical skills, and ethical professional behavior. Trainee has been rated as meeting expectations and possessing the required competencies at the time of applying for internship.

Adopted January 22, 2011

APPENDIX M: ANNUAL EVALUATION FORM
Washington State University
Clinical Psychology Doctoral Program
Graduate Student Evaluation Form
Annual Evaluation by Clinical Training Committee (CTC)

NAME OF STUDENT: _____ DATE OF EVALUATION: _____

MAJOR PROFESSOR: _____ STUDENT YEAR IN PROGRAM: _____

1. Quality of academic work

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

COMMENTS: _____

2. Overall clinical skills

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

COMMENTS: _____

3. **Overall research skills**

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

COMMENTS: _____

4. **Progress through the program (timeliness on milestones)**

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

COMMENTS: _____

5. **Performance of assistantship duties**

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

COMMENTS: _____

6. **Openness to supervision and responsiveness to feedback**

Acceptable _____ Unacceptable _____

COMMENTS: _____

7. **Interpersonal and professional competence**

Acceptable _____ Unacceptable _____

COMMENTS: _____

8. **Self-awareness**

Acceptable _____ Unacceptable _____

COMMENTS: _____

9. Manifestation of appropriate professional and ethical behavior

Acceptable _____ Unacceptable _____

COMMENTS: _____

10. Involvement in service/advocacy/leadership activities

COMMENTS: _____

11. Problem areas, if any, and plans for remediation: (if N/A check here: _____)

Problem 1: _____

Problem 2: _____

Problem 3: _____

Problem 4: _____

12. **Comments on self-evaluation and/or goals for next academic year**

13. **Annual Evaluation Summary: Evaluation of overall performance and progress**

1	2	3
Fails to Meet Expectations	Meets Expectations	Exceeds Expectations

COMMENTS: _____

I have read this evaluation:

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

Student Signature

Director of Clinical Training

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