GUIDE TO THE CLINICAL PSYCHOLOGY PROGRAM
Clark University

A Companion to the Doctoral Student Handbook

2025-2026

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

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Overview

Program Mission and Goals

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

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

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

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

In keeping with the Scientist-Practitioner model and the definition of Health Service Psychology outlined in the APA Standards of Accreditation, the Clinical Training Program at Clark has three broad aims:

1. To produce graduates with the knowledge and skills to conduct research independently and contribute to the knowledge base in psychology
2. To produce graduates with the knowledge and skills to conduct theoretically driven and empirically supported clinical practice
3. To produce graduates who apply solid ethical standards and sensitivity to cultural and individual diversity to their research and clinical practice

Beyond these broad goals, and in keeping with the APA Standards of Accreditation (SoA), the program builds a foundation of <u>Discipline-Specific Knowledge</u> by including experiences that provide knowledge in:

- History and Systems of Psychology
- Affective Aspects of Behavior
- Biological Aspects of Behavior
- Cognitive Aspects of Behavior
- Developmental Aspects of Behavior
- Social Aspects of Behavior
- Research Methods
- Quantitative Methods
- Psychometrics
- Integrative Knowledge

Also, in accord with the SoA, the program builds nine key <u>Profession-Wide Competencies</u>, which are met through a series of coursework and experiences within the program:

- Research
- Ethical and Legal Standards
- Individual and Cultural Diversity
- Professional Values and Attitudes
- Communication and Interpersonal Skills
- Assessment
- Intervention
- Supervision
- Consultation and Interprofessional/Interdisciplinary Skills

These competencies are described in detail at https://www.apa.org/ed/accreditation/section-c-soa.pdf, pages 15-20.

Overview of Training

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

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

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

A guiding principle of the Clinical Psychology Program (and the Psychology Department in general) is to maximize opportunities for individuals to establish their own scholarly specialty and research program. The graduate experience is designed to maximize time for developing close working relationships with faculty and engaging in professional activities. Moreover, the program of study is sequential and cumulative, building on foundations set in the early years.

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

Typical Program for Clinical Students

Year 1

Year 01 Fall	Year 01 Spring
Course	**Course**
History, Theory and Method: Research Design (301)	Ethics and Professional Issues in Clinical Psychology (387)
Statistical Methods (302)	Statistical Methods (302)
Adult Assessment (303) or Psychotherapy Practicum (338)	Child Assessment (304) or Psychotherapy Practicum (338)
Clinical Workshop (389)	Clinical Workshop (389)
ONE OF THE FOLLOWING:	
Psychopathology (311)	
Systems of Psychotherapy (310)	
Additional Activities	
Independent Research Project - First Year	
Research Portfolio	

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

Requirements Specific to Year 1

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

Overview of Year 1

In their first year, students spend much of their time in formal coursework designed to provide a strong foundation in clinical psychology. This coursework is in line with the Discipline Specific Knowledge and Profession-Wide Competencies that are required for APA accreditation. Students also receive their first formal clinical training, through the adult and child assessment courses. Students begin the process of getting involved in research and work on their independent research project, the plan for which is presented at the end of the year. First-year students will meet individually with their faculty research mentor a minimum of once every two weeks.

Mentoring Program

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

Description of Courses

Required courses in the first year.
The coursework for the first year involves intensive exposure to many facets of psychology as a science in general, as well as to clinical psychology as a specialty field. This provides much of the breadth necessary for the student's background and identity as a psychologist, and is in accord with the APA guidelines for accredited training in clinical psychology.

- **History, Theory and Method: Research Design (301)** is a research methods course taken by all first-year students in the department. This course is a graduate level survey of psychological research methods as they relate to philosophies of science, "micro"-theories, and substantive conceptual or pragmatic issues in psychology. Special emphasis is placed on developing useful and logically consistent links between different areas of inquiry and different methods. Students will apply concepts and methods to the development of their own programs of research.

- **Statistical Methods (302)** is a year-long sequence covering statistical analysis. The first semester is devoted to basic statistical concepts, parametric tests, and linear regression, non-parametric statistics, and an introduction to ANOVA. The second semester focuses on multivariate statistics, including various regression, ANOVA, and factor analytic techniques, and an introduction to structural equation modeling.

- **Adult Assessment (303)** provides an introduction to the fundamentals of assessment with adults. Topics include diagnostic interviewing and intellectual and personality assessment. It includes a didactic component and a practicum component in which students administer, score, and interpret a battery of tests on volunteer examinees.

- **Child Assessment (304)** provides an introduction to the fundamentals of assessment with children, including intellectual and personality assessment. As with adult assessment, the course includes a didactic and practicum component, in which students administer, score, and interpret a battery of tests on volunteer examinees.

- **Psychotherapy Practicum (338)** provides students with the opportunity to conduct psychotherapy with clients drawn from the Clark University undergraduate and non-psychology graduate student population. Students generally carry a two-client caseload and are supervised with a combination of both individual and group supervision.

- **Ethics and Professional Issues in Clinical Psychology (387)** covers ethical decision-making in a variety of professional contexts, including therapy, assessment, research, teaching, consultation, and supervision. Students gain an in-depth understanding of the APA ethical principles, as well as practice applying them in a variety of situations, via discussion, role-playing, and vignettes. The course also covers professional issues (e.g., professional identity, professional liability, and working in diverse settings).

- **Clinical Workshop (389)** provides an opportunity for all clinical students and faculty to hear outside speakers present on topics of clinical relevance (first semester) and for students to present and get feedback on their clinical cases (second semester). The Associate Director of Clinical Training (Associate DCT) organizes the agenda for the

series in collaboration with the Director of Clinical Training (DCT). This seminar is required of all clinical students throughout the first four years of their program.

Other Required Courses.

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

- **Systems of Psychotherapy (310)** provides a historical and current overview of the major systems of psychotherapy. Throughout this course there is a strong emphasis on multicultural issues in psychotherapy, as well as ongoing consideration of the evaluation of therapy outcomes and process.

- **Psychopathology (311)** examines the difficulties of defining psychopathology and reviews the major diagnostic categories from phenomenological, theoretical, and research perspectives. Special attention is given to gender, class, and diversity.

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

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

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

Affective Aspects of Behavior	Social and Emotional Development (323)
Biological Aspects of Behavior	Biological Bases of Behavior (370)
Cognitive Aspects of Behavior	Advanced Cognitive Development (327)
Developmental Aspects of Behavior	Social and Emotional Development (323)
Social Aspects of Behavior	Advanced Social Psychology (324)

Summer

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

Typical Program for Clinical Students

Year 2

Year 02 Fall	Year 02 Spring
Course	**Course**
Psychotherapy Practicum (338)	Psychotherapy Practicum (338)
Clinical Workshop (389)	Research/Second Year Project (317)
	Clinical Workshop (389)
REMAINING <u>ONE</u> OF THE FOLLOWING:	
Psychopathology (311)	**<u>TWO</u> OF THE FOLLOWING:**
Systems of Psychotherapy (310)	Diversity Issues (364)
	Social Aspects of Behavior
<u>ONE</u> OF THE FOLLOWING:	Affective/Developmental Aspects of Behavior
Biological Bases of Behavior (370)	
Cognitive Aspects of Behavior	
Additional Activities	
Independent Research Project – Second Year	
Research Portfolio	

Requirements Specific to Year 2

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

Overview of Year 2

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

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

Description of Coursework

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

- **Diversity Issues (364)** examines the sociocultural context of human behavior with a particular focus on issues of diversity in the clinical setting. This course fulfills the Massachusetts State Licensing Board requirement for training in issues of cultural diversity. This course is typically offered every other year so students take it in either their second or third year.

- **Courses Fulfilling Affective, Biological, Cognitive, Developmental, and Social Aspects of Behavior.** During the first three years, students must take one course that fulfills each of five categories (biological, cognitive, affective, social, and developmental). Specific courses meet different requirements and are listed on Page 8.

- **Adult Assessment (303)** provides an introduction to the fundamentals of assessment with adults. Topics include diagnostic interviewing and intellectual and personality assessment. It includes a didactic component and a practicum component in which students administer, score, and interpret a battery of tests on volunteer examinees.

- **Child Assessment (304)** provides an introduction to the fundamentals of assessment with children, including intellectual and personality assessment. As with adult assessment, the course includes a didactic and practicum component, in which students administer, score, and interpret a battery of tests on volunteer examinees.

- **Clinical Workshop (389)** provides an opportunity for all clinical students and faculty to hear outside speakers present on topics of clinical relevance (first semester) and for students to present and get feedback on their clinical cases (second semester). The Associate DCT in collaboration with the DCT organizes the agenda for the series. This seminar is required of all clinical students throughout the first four years of their program.

Description of Practica

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

- **Psychotherapy Practicum (338)** provides students with the opportunity to conduct psychotherapy with clients drawn from the Clark University undergraduate and non-psychology graduate student population. Students generally carry a two-client caseload and are supervised with a combination of both individual and group supervision.

Typical Program for Clinical Students

Year 3

Year 03 Fall		Year 03 Spring
Course		**Course**
Couples Therapy Practicum (342)		Couples Therapy Practicum (342)
Clinical Mini-Practicum (340)		Clinical Mini-Practicum (340)
Elective course		Elective Course
Clinical Workshop (389)		Clinical Workshop (389)
REMAINING ONE OF THE FOLLOWING:		**REMAINING ONE OF THE FOLLOWING:**
Biological Bases of Behavior (370)		Diversity Issues (364)
Cognitive Aspects of Behavior		Social Aspects of Behavior
		Developmental/Affective Aspects of Behavior
Additional Activities		
Complete Research Portfolio		
Work on dissertation proposal		

Requirements Specific to Year 3

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

Overview of Year 3

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

Toward the middle of the year, students work with their advisors and the Associate DCT to identify and apply to externship sites for the fourth-year practicum. As with the mini-practicum, students consider their interests and areas in which they require further experience in their externship choices. The clinical office keeps information on many of the externship sites where our students have worked; more advanced students are also excellent sources of information. Externship sites differ in their application requirements (e.g., some have more formal procedures than others), so students need to take the time to explore each potential site individually. If students choose to apply to *any* externship site(s) that adhere(s) to the Massachusetts Practicum Training Collaborative (MPTC), they must adhere to the guidelines, regulations, and dates specified by the MPTC, even if they also apply to sites that are not participating in the MPTC. MPTC guidelines, regulations, and dates can be found at www.massptc.org.

It is also wise for students to begin surveying information on clinical internships during the summer prior to the fourth year. For students who plan to apply in the fall of their fourth year, the applications for internship are due as early as the end of October in the Fall Term, and the process of applying can

require a good deal of time. **Students must complete their dissertation proposal defense prior to applying to internship. In addition, students must have successfully defended their dissertation proposal prior to November 1 of the year that they wish to apply for internship.** Thus, students who wish to apply for internship in their 4th year would need to successfully defend their proposal by November 1 of that year. There is a file of information available in the clinical administrator's office that contains information on specific internship sites, as well as the Association of Psychology Postdoctoral and Internship Centers (APPIC) manual (a compendium of internship and postdoctoral training agencies). The APPIC website (appic.org) is an excellent source of information on internships and includes an online directory.

Description of Coursework

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

- **Courses Fulfilling Affective, Biological, Cognitive, Developmental, and Social Aspects of Behavior.** During the first three years, students must take one course that fulfills each of five categories (biological, cognitive, affective, social, and developmental). Specific courses meet different requirements and are listed on Page 8.

- **Clinical Workshop (389)** provides an opportunity for all clinical students and faculty to hear outside speakers present on topics of clinical relevance (first semester) and for students to present and get feedback on their clinical cases (second semester). The Associate DCT in collaboration with the DCT organizes the agenda for the series. This seminar is required of all clinical students throughout the first four years of their program.

- **Advanced Qualitative/Quantitative Methods (Electives).** These courses are offered on a rotating basis every spring semester, and students are encouraged to take either or both courses as their schedule allows. Students should discuss these options with their faculty advisor.

Description of Practica

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

- **Couples Therapy Practicum (342).** In this practicum, clients are drawn from the greater Worcester community and screened by students and the clinical supervisor for their appropriateness as training cases for beginning couples therapists. Clients seen in the Couples Therapy Practicum present with a diverse array of relationship and individual issues. Students are trained in specific empirically supported Couples Therapy models.

- **Clinical Mini-Practicum (340).** In this practicum, students gain additional clinical training outside of the Psychology Department. This training experience is limited to 5-10 hours per week of clinical work. During the second semester of Year 2, students apply for positions at one of six possible placements. Students provide regular feedback about their practicum experiences both by means of official evaluation surveys and through

regular meetings with the Associate DCT. Descriptions of mini-practicum sites are below.

- o **Seven Hills**: The mini-practicum at Seven Hills includes a range of clinical, educational, and administrative experiences working with youth and families. Interns can design a field placement that will meet their individual needs and interests. Their training program includes Intern Training Institute, group supervision, and family therapy training with reflecting teams.

- o **UMass Memorial Medical Center: Outpatient Psychiatry**: UMass Medical provides outpatient group therapy to chronic mentally ill patients in the community. Cognitive-behavioral group therapy is provided three days per week. Mini-practicum students co-lead CBT groups and interested trainees can gain additional individual therapy experience.

- o **UMass Chan Medical School: Student Counseling Services**: UMass Chan Medical School Student Counseling Services provides counseling, psychotherapy, assistance with stress management, and educational programs on emotional well-being for graduate, medical, and nursing students. Trainees engage in individual therapy and gain additional skills in cognitive-behavioral therapy.

Typical Program for Clinical Students

Year 4

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

Overview of Year 4

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

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

Description of Coursework

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

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

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

Description of Practica

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

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

Typical Program for Clinical Students

Years 5+

Year 05 Fall		Year 05 Spring
Course		**Course**
Advanced Clinical Practicum (346)		Advanced Clinical Practicum (346)
Research (317)		Research (317)
Internship (398) – ***Generally Year 6***		Internship (398) – ***Generally Year 6***
Additional Activities		
Dissertation		

Overview of Years 5+

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

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

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

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

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

Optional Practica for students not on internship

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

General Information

Program and Professional Participation

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

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

In order to learn which organizations would be most relevant, students are encouraged to speak with their advisor as well as senior graduate students. Commonly attended conferences in the clinical program include those of the American Psychological Association (APA), the Association for Behavioral and Cognitive Therapies (ABCT), the Society for Prevention Research (SPR), the Society for Research on Adolescence (SRA), and the Society for Research in Child Development (SRCD). There are funds in the Department and the Graduate School to help support student involvement with such activities. Currently, students are provided with $600 per year to help defray the cost of conference attendance if they are presenting a first authored paper or poster. See the *Graduate Education Handbook* for more information in this regard.

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

Waiving Program Courses

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

Clinical Program Governance

Governance of the Clinical Program is overseen by the Clinical Faculty. At the beginning of the academic year, the first four classes (Years 1-4) select one student representative from each of their respective cohorts to represent them and actively participate in monthly Clinical Program meetings. Whenever important program changes are considered, feedback and input are sought from current students via the student representatives. While responsibility for the program ultimately rests with the Clinical Faculty, the system is designed to be open for student awareness and sensitive to student input.

Malpractice Insurance

All clinical students need to have malpractice insurance starting in the first year and must continue coverage throughout their clinical training. Students can obtain malpractice insurance from several sources. The most frequently used student liability coverage is The Trust (https://www.trustinsurance.com/Insurance-Programs/Student-Liability).

Clinical Supervision

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

Clinical supervision must be provided by a doctoral level psychologist. It is recognized that pre-doctoral interns or post-doctoral fellows under the supervision of an appropriately credentialed psychologist can provide supervision on site. Supervision should include ongoing weekly meetings, with a minimum of one hour of individual or small group (< 4 trainees per group) supervision for every 16 hours of clinical work. All evaluations of practicum student performance are based, in part, on direct observation, and documented via the Practicum Evaluation Form (see Appendix F).

Clinical Documentation and Record-Keeping

All client contact and services should be appropriately documented and should reflect the clinician's status as a trainee. The Clinical Psychology Program uses Titanium Schedule, an electronic medical records software, to facilitate record-keeping, documentation, therapy notes, and scheduling for onsite practica, and to expand the use of technology into the clinical training program.

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

secure or confidential means of communication. Facsimiles may be used with written authorization from the client.

Recording Clinical Hours

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

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

A sample log for recording practicum hours can be found in Appendix C. Also, there are some software programs that students can purchase that help tabulate clinical hours in the format requested by the APPIC internship application (e.g., http://time2track.com or www.mypsychtrack.com).

Additional Clinical Work Outside of the Structure of the Clinical Program

Because Clinical Psychology is a profession as well as an academic program, the Clinical Faculty has a responsibility to the public and the profession of psychology to ensure that students demonstrate re-sponsible professional behavior. *As a consequence, no student should engage in any work of a psycho-logical nature (e.g., psychotherapy or counseling, testing, teaching psychology, or research) without adequate faculty consultation and prior approval of the Clinical Faculty*. This includes any part-time or full-time position of a psychological character until the doctorate is awarded. Students must not portray themselves to the public as psychologists or as someone offering psychological services; they must work only under proper supervision. Supervision outside of the Clinical Program must comply with the Massachusetts licensing laws and so must come from a licensed psychologist, or by an arrangement for dual supervision involving a Clinical Faculty member.

Any student interested in outside volunteer or paid work should discuss this with the DCT and the student's advisor prior to beginning such work, and formally request approval from the Clinical Faculty. If the clinical hours are a part of an Advanced Therapy Practicum, then students should complete the **Clinical Training Agreement** which must be signed by the trainee, supervisor, and ADCT before any clinical work commences (see pp 38-40), and supervisor evaluations must be submitted at the end of each semester. If the clinical hours are not part of a practicum experience, then students should complete the **Non-Practicum Clinical Training Approval Form** (signed by the trainee, supervisor, and DCT); for non-practicum training hours, supervisor evaluations are not required (pp 51).

Educational Requirements for Licensure in Psychology

The Clinical Psychology PhD Program in the Department of Psychology at Clark University makes every effort to provide education that is compliant with national standards and to prepare students to practice clinical psychology. As recognition of our compliance with national standards, our Program is accredited by the American Psychological Association. The practice of psychology, however, is regulated at the state level. State licensing authorities, commonly referred to as "State Boards," determine the specific educational and training requirements for licensure in their state. Of note, many states require post-doctoral training as well as examinations beyond educational and training requirements. As such, a PhD degree from our Program in Clinical Psychology is not sufficient, in and of itself, to meet licensure requirements in some states.

If you are planning to pursue professional licensure or certification, it is strongly recommended that you contact the appropriate licensing entity in the state for which you are seeking licensure or certification to obtain information and guidance regarding licensure or certification requirements before beginning an academic program. Given that state requirements for licensure or certification vary and may change over time it is also strongly recommended that you review licensing or certification requirements as you get closer to seeking licensure or certification. You are encouraged to review the Association of State and Provincial Psychology Boards' online tool, PsyBook (https://www.asppb.net/page/psybook), which summarizes requirements for most states and territories. You are also encouraged to confirm state licensing requirements directly with the state in which you are interested in seeking licensure or certification.

This link summarizes the current licensing requirements in all states. ASPPB Consumer Information Disclosure Please see Appendix H for information about how Clark's program currently meets the educational requirements for licensure in different states.

Expectations for Professional Conduct

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

All students are expected to behave in ways consistent with the University Student Code of Conduct (http://www.clarku.edu/sites/default/files/clark-university-student-handbook.pdf) and the APA's Ethics Code (http://www.apa.org/ethics/code/index.aspx). This expectation for professionalism applies to student behavior, attitudes, attire, and personal hygiene, and encompasses the various roles that students

take on (i.e., student in class, researcher, clinician, teaching assistant). It is also expected that clinical students apply this professionalism when outside of the program structure. For example, students need to take care to demonstrate professionalism with respect to the internet, social media, and electronic communications. Even with privacy settings at the highest level, anything posted on the internet is available for public consumption. Students, clients, future employers, and even licensing boards may be able to access information that students had intended to remain private. Students are encouraged to discuss any questions they might have regarding professional conduct with their advisors or the DCT.

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

Evaluation of Student Performance

At the end of each semester, the Clinical Faculty meet to evaluate the clinical progress of each clinical student. All affiliated faculty who are teaching that semester are present at this meeting and provide their assessment of the student's performance in their respective clinical practica. For evaluations from the external clinical sites (i.e., third-year mini-practicum and fourth-year externship, as well as any other site at which a student has been given permission to participate in additional clinical training outside of the department), the DCT presents the written evaluations received from those placements. Using all relevant information, the Clinical Faculty determine what level of performance the student should receive in each activity (i.e., coursework, clinical practica, research). Student performance is evaluated on the following scale:

> 0 = unsatisfactory　　1 = marginal　　　　2 = satisfactory　　　　3 = excellent

The expectation is that students will achieve a satisfactory evaluation. Student performance that is deemed marginal in any activity is regarded as concerning and is a signal to the student that improved performance is required. A remediation plan may be required. Student performance that is deemed unsatisfactory will require a meeting with the DCT and will likely require a formal remediation plan (see below).

The faculty also evaluate **overall** student progress on all nine Profession-Wide Competencies (see *Student Evaluation Form* below)[*]. This progress is evaluated annually on the following scale:

> 0 = below expectation for year in program
> 1 = marginally at expectation for year in program
> 2 = solidly at expectation for year in program
> 3 = above expectation for year in the program

The expectation is that students will demonstrate progress *solidly at expectation for their year in the program* (evaluation =2). Students whose progress on any competency is deemed marginal may require a remediation plan, and students whose progress on any competency is deemed below expectation for year in the program will require a meeting with the DCT and will likely require a formal remediation plan.

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

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

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

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

Suspension of Clinical Work

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

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

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

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

Remediation Procedures

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

1. The DCT reviews the concerns regarding the student.
2. The DCT requests and receives, where appropriate, further written evaluations from faculty and supervisors.
3. The DCT convenes, when necessary, a meeting in order that the faculty member(s) and student may share concerns and arrive at a specific program of remediation.
4. The DCT provides written notification to the student should remedial action be deemed appropriate, including possible probation, suspension of clinical work, leave of absence from the program, or dismissal. Should the student's status change, specific expectations that the student must meet before the student is reconsidered for reinstatement to full status in the program will be clearly outlined in the letter.
5. The DCT, in consultation with the student's faculty advisor and the Department Chair, will write the letter. The letter will include:
   a. A description of the issues to be addressed
   b. A plan for addressing each issue
   c. A description of any previous efforts to address or prevent each issue
   d. Criteria for determining that the issues have been remedied or resolved
   e. A timeline for review
6. The DCT, in conjunction with the student, determines the nature, type, and frequency of subsequent reviews.
7. If the student, having notification of the faculty member(s)'s recommendations, believes the procedure to be unjust or the decision to be unfair, or that new information could lead to a different decision, he/she may present an appeal in writing to the DCT (see section on Grievance Procedures below).
8. If a student is to be suspended from participation in training, he/she must be notified in writing. The letter will state the time frames and limits of the temporary suspension and its rationale. A copy of the letter is to be maintained in the student's permanent file.

Student Termination from Clinical Program

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

1. Inability or unwillingness to satisfactorily address concerns raised in an unsatisfactory review through the remediation process (see above)

2. Conduct that is deemed so egregiously unprofessional or unethical that remediation is not appropriate

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

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

Grievance Procedures

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

Mental Health Resources

A list of local therapists will be provided to all graduate students and will be available at any time upon request. If you do not feel comfortable asking the DCT or Associate DCT for the referral list, you can contact the Clinical Program Assistant or Department Administrator for a copy.

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

First Year:

Fall: Assemble Portfolio Committee
             Consult with primary research advisor on developing program of research

Spring: Develop Independent Research Project – First Year plan and present in poster format at
             Departmental Graduate Research Festival
             Work on Portfolio

Second Year:

Fall: Work on Independent Research Project – Second Year and Portfolio

Spring: Continue working on Portfolio
             Present Second Year Project as a talk at Departmental Graduate Research Festival

Third Year:

Complete Portfolio requirements
Form Dissertation Committee
Develop Dissertation Proposal
Defend Dissertation Proposal by end of year

Fourth Year:

Form Dissertation Committee, develop and defend Dissertation Proposal (if not already completed)
Collect data and conduct dissertation research
Apply to clinical Internships

Fifth Year+:

Conduct, complete, and defend Dissertation (if not already completed)
Apply to clinical Internships (if not already completed)
Complete APA-approved clinical Internship

Note: Students should also review the Department *Graduate Education Handbook* regarding residence and time requirements for the doctorate degree. Currently, all students are limited to six years in the program, seven years with a written request for extension. Thus, clinical students are required to have completed both the Internship and Dissertation no later than the end of the seventh year.

Appendix B: Clinical Program Course Requirements Checklist

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

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

Class	Completed (☑)
History, Theory and Method: Research Design (301) (1 semester)	☐
Statistical Methods (302) (2 semesters)	☐
Assessment (303 / 304) (2 semesters: Adult and Child)	☐
Ethics and Professional Issues in Clinical Psychology (387)	☐
Systems of Psychotherapy (310)	☐
Psychopathology (311)	☐
Diversity Issues (364)	☐
Clinical Workshop (389) (Year 1 through Year 4)	☐ ☐ ☐ ☐
Psychotherapy Practicum (338) (2 semesters)	☐
Couples Therapy Practicum (342) (2 semesters)	☐
Clinical Mini-Practicum (340) (2 semesters)	☐
Clinical Externship (344) (2 semesters)	☐
Advanced Clinical Practicum (346) (optional)	☐
Research/Second Year Project (317) (1 semester)	☐
Research (Dissertation) (317) (2 semesters)	☐
Internship (398) (2 semesters)	☐

Appendix C: Bases of Behavior Classes

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

Class	Completed (☑)
Affective Bases of Behavior Social and Emotional Development (323)	☐
Biological Bases of Behavior Biological Bases of Behavior (370)	☐
Cognitive Bases of Behavior Advanced Cognitive Development (327)	☐
Developmental Bases of Behavior Social and Emotional Development (323)	☐
Social Bases of Behavior Advanced Social Psychology (324)	☐

Appendix D: Practicum Therapy Training Log

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

Total individual supervision hours   **0**   **Total face-to-face therapy hours**   **0**

Total group supervision hours   **0**   **Total support hours**   **0**

Appendix E: Guidelines for Professional Ethics at Clark University

An integral component of training and preparation for entry into the professional realm of clinical psychology is familiarity with and adherence to guidelines set forth by the American Psychological Association (APA). The APA publication *Ethical Principles of Psychologists and Code of Conduct* (2002. as Amended 2010 and 2017) provides both aspirational goals for psychologists as well as a set of enforceable rules. While not designed to be exhaustive, the Ethics Code was written broadly so as to apply to conduct in a variety of contexts (i.e., research, teaching, clinical, public service, supervision) with the aim of protecting the intended recipients of psychologists' work and educating psychologists, students, and the public regarding ethical standards and behavior.

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

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

Academic Honesty & Scholarly Integrity

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

Confidentiality, Protected Health Information, and HIPAA

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

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

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

2) Client information should not be stored on personal computers or PDAs. Consult with your clinical supervisor regarding specific record keeping policy and always remain cognizant of your responsibility to safeguard client information.

3) The Clark University email program is not a confidential means of communication. As such, students should not include PHI in emails to clients, supervisors, faculty, or other students. The client should also be made aware that any emails they choose to send to the student therapist are not ensured to be confidential.

4) Professional consultation is often an integral component of providing high quality services to clients. When consulting with appropriate professionals, students should make every effort to protect the client's privacy by disclosing only those details necessary for a successful consultation and should do so only in a private setting (i.e., not in a public setting where conversations may be overheard).

Human Relations

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

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

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

Appendix F: Externship Manual

Externship Program Description

Clinical Externship (PSYC 344) involves a half-time placement at one of several affiliated training sites. Students work with more complicated clinical cases under close supervision in the context of working clinical agencies. These external practicum sites are reviewed to assure that our training sites are clearly committed to training and supervising our students. Students provide regular feedback about their practicum experiences both by means of official evaluation surveys (see page 41) and through regular meetings with the Associate DCT. Although there is a list of established externship site placements, trainees can work with the Associate DCT and the DCT to identify other potential sites that may more appropriately align with their clinical interests.

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

First, the Clinical Psychology training committee has several requirements and preferred characteristics of externship sites. Trainees must be supervised by a licensed, doctoral-level Clinical Psychologist, workload is approximately 20 hours per week, and externship supervisors must be willing to release trainees to attend Clinical Workshop. It is the preference of the Clinical Program that externship placements show a commitment to training, provide supervision within the context of a cohesive theoretical model, and provide additional training experiences (e.g., didactics, grand rounds, etc.) that augment the trainee's clinical experiences.

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

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

The Application Process

For most practicum sites, the application process involves submitting a CV, a letter of interest, and letters of recommendation in the Fall of the third year of training. If students choose to apply to *any* externship site(s) that adhere(s) to the Massachusetts Practicum Training Collaborative (MPTC), they must adhere to the guidelines, regulations, and dates specified by the MPTC even if they also apply to sites that are not participating in the MPTC. MPTC guidelines, regulations, and dates can be found at

www.massptc.org. Some externship placements require submitting clinical writing samples as well as the completion of particular forms. Moreover, application deadlines vary by site, and so it is important to contact the externship site directors prior to submitting applications to confirm the site's applications procedures. Interviews typically are conducted in January, and range in format from a single one-on-one interview with a supervisor to group interviews. Prior to beginning clinical work at the externship site, the *Clinical Training Agreement* must be completed and signed by the trainee, the clinical supervisor and the DCT (see page 37-39).

Practicum Evaluations

Practicum Supervisors are requested to provide performance evaluations at the end of each semester. The ***Practicum Evaluation Form*** (see page 41-50) is completed by the Supervisor, discussed with the trainee, and reviewed by the ADCT and faculty at evaluation meetings scheduled at the end of each semester.

Sample List of Externship Placements

(Please see the Massachusetts Training Collaborative (PTC) website for detailed information about clinical placement sites: https://massptc.org/)

Child, Adolescent, and Family Placements

- **Seven Hills**: Seven Hills includes a range of clinical, educational, and administrative experiences working with youth and families. Interns can design a field placement that will meet their individual needs and interests. Their training program includes Intern Training Institute, group supervision, and family therapy training with reflecting teams.

- **SPARK Center – Boston Medical Center**: The SPARK Center is a medically-therapeutic childcare facility and day program. SPARK serves children and families whose lives are affected by complex medical needs (i.e.: neurological complications, failure to thrive and HIV/AIDS); emotional and behavioral challenges related to trauma (i.e.: child abuse, domestic violence and caregiver loss and separation); and developmental delays and special educational needs. (www.bmc.org/pediatrics-sparkcenter/education/internshipprogram.htm)

- **UMass Chan Medical School Family Health Clinic**: The training philosophy and model is based on a supervised experiential approach in which externs receive training in evidence-based clinical health psychology through didactics, clinical observations, clinical supervision, and by training side-by-side with family medicine residents. Externs learn to recognize behavioral needs and use psychosocial knowledge and behavioral health skills in a primary care setting. (http://www.umassmed.edu/fmch/fellowships/clinical-health-psychology-in-primary-care/ for information about site, but not specifically externship opportunity)

- **Worcester Recovery Center – Adolescent Unit**: The UMass Adolescent Continuing Care Units are comprised of two 15-bed inpatient facilities sited on the grounds of Worcester Recovery Center and Hospital in Worcester, Massachusetts. Patients range in age from thirteen to eighteen. This population is culturally, ethnically, racially, and socioeconomically diverse. Assessment and treatment of clients is provided using a multidisciplinary approach. (http://www.umassmed.edu/psychiatry/clinicalservices/child-adolescent-clinical-services/Adolescent-Treatment/Adolescent-Continuing-Care-Units/)

Adult Placements

- **Edith Nourse Rogers Memorial VA**: This practicum placement is a VA medical center. There are three tracks of practicum training: Center for Integrative Psychotherapy (CIP); a split track involving CIP and the Domiciliary program for homeless veterans; and the neuropsychology program. The CIP provides a range of short-term and longer-term individual and couples psychotherapy, incorporating dynamic, cognitive, behavioral, experiential, and humanistic/ transpersonal perspectives in an integrative approach to treatment. (www.psychologytraining.va.gov/bedford/)

- **Fenway Health**: Fenway Health primarily serves the LGBT community, as well as the Fenway neighborhood of Boston. The practicum program offers an interdisciplinary approach with staff, which is comprised of social workers, mental health & HIV counselors, psychologists, psychiatrists, psychiatric nurses, victim advocates, substance abuse case managers/counselors, health promotion educators, and acupuncturists. The theoretical orientation is predominantly psychodynamic; however, with active substance abusing and acute PTSD clients the emphasis may be on cognitive behavioral and psychoeducational approaches. (www.fenwayhealth.org/site/PageServer?pagename=FCHC_srv_services_mentalhealth)

- **Holy Cross College Counseling Center**: Externs gain experience in a wide range of psychological counseling, career, and consulting services to college students at Holy Cross. (http:www.holycross.edu/health-wellness-and-access/counseling-center)

- **McLean Hospital**: Externs gain experience leading groups and providing brief consultation to patients in the Behavioral Health Partial Hospital Program. (www.mclean.harvard.edu/education/professionals/practicum/bhp.php)

- **Wellesley College's Stone Counseling Center**: Externs gain experience in a wide range of psychological counseling, career, and consulting services to students at Wellesley College (a women's college). Externs participate in individual clinical supervision, group supervision, several training seminars, clinical team meetings, a trainee support group, and additional opportunities for participation in larger activities of the Stone Center and the Wellesley Centers for Women. (www.wellesley.edu/counseling/clinicaltrainingprogram)

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

Externship Application Checklist

Please see the Massachusetts Training Collaborative (PTC) website for detailed information about clinical placement sites: https://massptc.org/

Action	Date	Complete
Identify potential externship sites (typically 5-6 sites)	October	☐
Contact the "contact person" to inquire about new deadlines, openings, required application materials, etc.	October	☐
Ask references for letters of recommendation: Provide letter-writers with a CV, list of sites being applied to, and due dates	October	☐
Submit applications	Varies (Nov 1 – Jan 3)	☐
Interviews	Varies (Dec-Jan)	☐
Choose placement	January/February	☐

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

Sample Cover Letter

Date

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

Dear Dr. XX,

I am writing to express my interest in a practicum placement on the adult team at XX for the 2026-2027 academic year. My clinical interests center on working with diverse adults with a range of psychopathology and utilizing a variety of treatment modalities. I hope to continue my clinical training at XX where I would have the opportunity to work with a team of top-quality professionals who treat a diverse client population.

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

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

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

Sincerely,

Clinical Training Agreement

CLARK UNIVERSITY

CHALLENGE CONVENTION.
CHANGE OUR WORLD.

Clark University
Doctoral Program in Clinical Psychology
Clinical Training Agreement

Practicum Type: Enter Practicum Type

_____ agrees to train at:

_____

for _____ days per week from _____ (am/pm) to _____ (am/pm).

Days: ☐M   ☐T   ☐W   ☐TH   ☐F

The period of this agreement will be from _____ (mm/dd/yyyy) to _____ (mm/dd/yyyy).

Included in the total number of hours per week _____ (#), there will be _____ (#) hours of supervision by

_____

and _____(#) cases. The student will also engage in the following activities as

part of the practicum:

A stipend of _____ will be paid to _____ during this period.

Vacation/leave time will include _____(# of weeks).

The main goal of this placement is to:

The practicum supervisor(s) will evaluate the student using the following methods:

1) Mid-year and End-of-year evaluations signed by the supervisor and trainee and submitted to Clark University, Director of Clinical Training.
2) Regular supervision meetings.
3) Direct observation of the student's work at least once per evaluation period, i.e., once in the fall and once in the spring for Academic Year placements and once for summer placements.

The practicum supervisor(s) will communicate with the student's training program with the following frequency (indicate frequency per month/year) _____.

The rationale for this placement is as follows:

The student has completed the following relevant academic and practica training:

This placement will help the student meet the following training needs:

This agreement can be revised with the agreement of all the undersigned parties.

_____
Doctoral Student in Clinical Psychology (Signature)

_____
Clinical Supervisor (Print Name)

Supervisor Mailing Address (required)   Supervisor Email Address (required):

_____   _____

_____

_____

_____   _____
Clinical Supervisor (Signature)   **Amy Heberle, Ph.D. (Signature)**
                                                             Assistant Director of Clinical Training
                                                             Clark University

Notes:

- At least 50% of the total hours of supervised experience shall be in service-related activities, defined as treatment/intervention, assessment, interviews, report writing, case presentations, and consultations.

- At least 25% of the supervised professional experience shall be face-to-face patient/ client contact.

- The student must receive a minimum of two (2) hours of individual supervision per week. A minimum of one (1) hour of individual or group supervision must take place for each sixteen (16) hours of work. The group size may not exceed three (3).

- Direct Observation may include, in-person observation (e.g., in-room or one-way mirror observation of direct service contact), live simultaneous audio-video streaming, or audio or video recording.

| Save |

**Clark University
Clinical Psychology Program**

Practicum Evaluation Form

Supervisor's Evaluation of Trainee

*Thank you for your willingness to provide training opportunities for our student. Your feedback will
be used as part of our overall student evaluation process and for specific continued training needs.*

Supervisor :

Trainee :

Training Site :

Date :

Student Program Year :

Training Type :

Semester :

○ Fall   ○ Spring   ○ Summer

Evaluation :

○ First   ○ Final

Direct Observation:
Did you engage in direct observation of the student's work during this evaluation period?

○ Yes   ○ No

Comments:

For **FIRST** Evaluation: Has the trainee made satisfactory progress toward accruing the expected
number of clinical hours?

○ Yes   ○ No   ○ N/A

If NO, what plan has been put in place for remediation?

❯ ❯

Please rate each item according to the following scale and then discuss your feedback with your intern along with their feedback about your supervision. Please base your evaluation on the student's performance relative to their stage of training. (Note: a "3" constitutes the minimum threshold of achievement for each dimension)

N/A   Not Applicable
CR   Cannot rate (insufficient information)
1   Definitely needs improvement
2   Needs improvement
3   Meets expectations for this point in training
4   Functions very well
5   Excellent

1. Function as a Team Member

	N/A	CR	1	2	3	4	5
a) Communicates effectively and presents psychological perspectives without excessive use of jargon	O	O	O	O	O	O	O
b) Understands the roles and perspectives of other disciplines (including awareness of own biases and how they are perceived by other disciplines)	O	O	O	O	O	O	O
c) Respects others' feelings and points of view	O	O	O	O	O	O	O
d) Negotiates, collaborates and problem-solves effectively	O	O	O	O	O	O	O
Overall ability to Function as a Team Member	O	O	O	O	O	O	O

Comments:

       June 2017

2. __Assessment__

	N/A	CR	1	2	3	4	5
a) Adequately responds to crises and assesses patient's dangerousness to self and others	O	O	O	O	O	O	O
b) Knows diagnostic categories (including DSM) and utilizes descriptive terminology accurately	O	O	O	O	O	O	O
c) Considers a variety of factors which may influence a patient's presentation (e.g., substance abuse, organicity, sensory deficits, cultural background)	O	O	O	O	O	O	O
d) Elicits patient's cooperation and motivation to participate in assessment and provides a rationale for assessment, when needed	O	O	O	O	O	O	O
e) Selects appropriate instruments and procedures (considers reliability, validity, cultural limitations, etc.)	O	O	O	O	O	O	O
f) Conducts diagnostic interviews to obtain information helpful for clarifying patient's problems and developing treatment strategies	O	O	O	O	O	O	O
g) Adequately conducts a standard psychiatric interview and mental status exam	O	O	O	O	O	O	O
h) Recognizes need for further information and obtains this from other sources (e.g., clinical record, patient's family, other clinicians, etc)	O	O	O	O	O	O	O
i) Demonstrates technical understanding and clinical skill in administering formal psychological tests	O	O	O	O	O	O	O
j) Interprets and summarizes information obtained from assessment to respond clearly to referral question/ purpose of assessment and generate effective treatment recommendations	O	O	O	O	O	O	O
k) Demonstrates skill and judgment in providing relevant and useful information as feedback to patients and/or treatment staff	O	O	O	O	O	O	O
l) Writes clear, understandable, complete, and integrated reports/summaries that accurately portray the patient as a person beyond a listing of test scores	O	O	O	O	O	O	O
m) Arranges interviews and completes reports in a timely manner.	O	O	O	O	O	O	O
Overall performance in Assessment	O	O	O	O	O	O	O

June 2017

Comments:

---

3. <u>Case Conceptualization</u>

	N/A	CR	1	2	3	4	5
a) Integrates scientific literature into clinical decision-making	O	O	O	O	O	O	O
b) Develops a case conceptualization and treatment plan that is realistic and consistent with the assessment and with the patient's goals and resources	O	O	O	O	O	O	O
c) Consistently incorporates the guidelines developed from the conceptualization in treatment	O	O	O	O	O	O	O
d) Appropriately utilizes one or more theoretical perspectives in understanding treatment issues and process	O	O	O	O	O	O	O
e) Empirically evaluates progress/outcomes of clinical cases	O	O	O	O	O	O	O
f) Integrates theory, scientific literature, and clinical data when presenting case formulations	O	O	O	O	O	O	O
Overall performance in Case Conceptualization	O	O	O	O	O	O	O

Comments:

4. Intervention

Specify Type(s) of Intervention(s) :

☐ Individual psychotherapy   ☐ Community meeting

☐ Group psychotherapy   ☐ Consultation liaison

☐ Couples therapy   ☐ Staff/team

☐ Milieu therapy   ☐ Psychoeducation

☐ Family therapy

☐ Other   [   ]

5. Relationship / Interpersonal Dimensions

	N/A	CR	1	2	3	4	5
a) Readily establishes rapport and develops an alliance	◯	◯	◯	◯	◯	◯	◯
b) Empathetically attempts to understand patient's world/ checks accuracy of own perceptions and assumptions	◯	◯	◯	◯	◯	◯	◯
c) Boundaries: Separates own feelings, needs and values from those of patient	◯	◯	◯	◯	◯	◯	◯
d) Accurately hears what the patient says and communicates effectively, using the patient's language and metaphors when appropriate	◯	◯	◯	◯	◯	◯	◯
e) Accurately assesses relationship dimensions (e.g., rapport, degree to which patient is engaged)	◯	◯	◯	◯	◯	◯	◯
f) Aware of issues in the therapist-patient relationship (perceives interpersonal patterns and detects distortions)	◯	◯	◯	◯	◯	◯	◯
g) Utilizes awareness of the complex interplay of emotional, cognitive and behavioral reactions between patient and therapist in the therapeutic process (i.e., transference and countertransference)	◯	◯	◯	◯	◯	◯	◯
Overall Relationship / Interpersonal Skills	◯	◯	◯	◯	◯	◯	◯

Comments :

6. Process Dimensions

	N/A	CR	1	2	3	4	5
a) Sets the tone or creates an environment that facilitates the therapeutic process	O	O	O	O	O	O	O
b) Sensitive to emotional tone/nonverbal behavior	O	O	O	O	O	O	O
c) Aware of own affective and cognitive responses during session; utilizes them as data to facilitate treatment	O	O	O	O	O	O	O
d) Grasps and explores complex feelings and emotions	O	O	O	O	O	O	O
e) Recognizes and works through obstacles in the treatment process (e.g., working through defenses and resistance and/or opposition, power issues, fear of change, negativism, denial, hopelessness, dependency)	O	O	O	O	O	O	O
f) Sets limits, interprets, and/or confronts as appropriate	O	O	O	O	O	O	O
g) Follows up on issues when appropriate (e.g., homework, contracts, referrals, etc)	O	O	O	O	O	O	O
h) Anticipates termination issues and works toward closure	O	O	O	O	O	O	O
Overall Process Skills	O	O	O	O	O	O	O

Comments :

June 2017

7. Responsibility

	N/A	CR	1	2	3	4	5
a) Organizes time efficiently and prioritizes	O	O	O	O	O	O	O
b) Documentation is timely, complete, concise	O	O	O	O	O	O	O
c) On time for appointments	O	O	O	O	O	O	O
d) Demonstrates ability and willingness to assume professional responsibility, and seeks consultation as needed	O	O	O	O	O	O	O
Overall Responsibility	O	O	O	O	O	O	O

Comments :

8. Professional Identity / Awareness

	N/A	CR	1	2	3	4	5
a) Knows ethical standards and competently evaluates complex ethical dilemmas	O	O	O	O	O	O	O
b) Aware of legal requirements and their relationship to ethical and professional standards	O	O	O	O	O	O	O
c) Recognizes the limits of therapeutic responsibility	O	O	O	O	O	O	O
d) Sensitive to ethnic and cultural issues and open to increasing knowledge/awareness of cross-cultural therapeutic interventions	O	O	O	O	O	O	O
e) Sensitive to gender issues and sex-role stereotypes	O	O	O	O	O	O	O
f) Seeks consultation and information when dealing with special populations, e.g., disabled, gay/lesbian, minorities, etc.	O	O	O	O	O	O	O
Overall Professional Identity / Awareness	O	O	O	O	O	O	O

Comments :

9. Motivation

	N/A	CR	1	2	3	4	5
a) Committed to personal growth and development	O	O	O	O	O	O	O
b) Open to personal growth and development	O	O	O	O	O	O	O
c) Willing to take risks for the sake of learning	O	O	O	O	O	O	O
d) Self-directed and able to function independently	O	O	O	O	O	O	O
Overall Motivation	O	O	O	O	O	O	O

Comments :

10. Maturity

	N/A	CR	1	2	3	4	5
a) Tolerates uncertainty, ambiguity, and anxiety	O	O	O	O	O	O	O
b) Considers other perspectives even in charged situations	O	O	O	O	O	O	O
c) Aware and accepting of own strengths and weaknesses	O	O	O	O	O	O	O
d) Accurately evaluates own level of clinical judgment and competency (including during times of personal difficulty or stress)	O	O	O	O	O	O	O
e) Willing to ask questions or share expertise	O	O	O	O	O	O	O
f) Professional self-concept includes personal working model that provides consistency without being dogmatic or inflexible	O	O	O	O	O	O	O
g) Deals effectively with authority figures and is comfortable assuming a position of authority when appropriate	O	O	O	O	O	O	O
Overall Maturity	O	O	O	O	O	O	O

Comments :

11. Response to Supervision

	N/A	CR	1	2	3	4	5
a) Is prepared for supervisory sessions (notes, tapes, issues, reading) and actively participates with question and ideas	O	O	O	O	O	O	O
b) Processes feedback and incorporates input into work	O	O	O	O	O	O	O
c) Collaborates in processing supervisory relationship	O	O	O	O	O	O	O
d) Willing to challenge and be challenged	O	O	O	O	O	O	O
e) Asserts own needs, expectations, limits, and desires concerning training	O	O	O	O	O	O	O
Overall Response to Supervision	O	O	O	O	O	O	O

Comments :

Additional or Summary Comments :

Trainee Signature   Date

Supervisor Signature   Date

Non-Practicum Clinical Training Approval Form

CLARK UNIVERSITY

CHALLENGE CONVENTION.
CHANGE OUR WORLD.

Doctoral Program in Clinical Psychology
Request to Approve Work Experiences as Clinical Hours
(for experiences that are short term (e.g., summer) or less than 16 hours per week)

Student Name: _____

Date of request: _____ **Time Period- From:** _____ **To:** _____

Site of activities: _____

Supervisor: _____

Anticipated Number of Hours: _____

Description of activities:

Supervisor *(signature):* _____

Director of Clinical Training *(signature):* _____

Date: _____

Appendix G: Annual Student Evaluation Form

Student Name: ██████████

Advisor: ██████████

Year of Entry: ██████

Annual Progress toward Competencies

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

0 = Below expectation for year in program (needs to repeat elements)   *2 = Solidly at expectation for year in program*

1 = Marginally at expectation for year in program   *3 = Above expectation for year in program*

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

Profession-wide Competencies							
Competency	Year 01	Year 02	Year 03	Year 04	Year 05	Year 06 (if needed)	Year 07 (if needed)
Research							
Ethical/Legal Standards							
Individual & Cultural Diversity							
Professional Values, Attitudes, & Behaviors							
Communication & Interpersonal Skills							
Assessment							
Intervention							
Supervision							
Consultation & Interprofessional / Interdisciplinary Skills							
Overall Progress	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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

Dissertation Title:	**Internship:**
Enter Title	*Enter Internship name and location*
Defense Date:	Internship Completion Date:

☐   All Requirements for Graduation Met

Degree Conferral Date: _____

DCT Signature: _____

Course Completion and Competency Entry Form

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

		Date Completed	Rating (0, 1, 2, 3)
Core Courses			
301	History, Theory & Method: Research Design		
302	Statistics, Semester 1		
302	Statistics, Semester 2		
303	Assessment, Adult		
304	Assessment, Child		
310	Systems of Psychotherapy		
311	Psychopathology		
313	Assessment Practicum		
361	Human Neuropsychology		
364	Diversity Issues Seminar		
387	Ethics & Professional Issues in Clinical Psychology		
Research			
	Independent Research Project (Year 1)		
	Independent Research Project (Year 2)		
	Portfolio (Year 1)		
	Portfolio (Year 2)		
	Portfolio (Year 3)		
	Dissertation Research (Defense)		
Practica			
338	Psychotherapy Practicum		
340	Mini-Practicum		
342	Couples Therapy Practicum		
344	Clinical Externship		
346	Advanced Therapy Practicum (optional)		
398	Internship		
Clinical Workshop			
389	Clinical Workshop Year 01		
389	Clinical Workshop Year 02		
389	Clinical Workshop Year 03		
389	Clinical Workshop Year 04		
Electives			
323	Social and Emotional Development		
324	Advanced Social Psychology		
327	Advanced Cognitive Development		
337	Advanced Graduate Statistics		
306	Advanced Qualitative Methods		
Professional Development			
	Professional Development Series (Year 1)		
	Professional Development Series (Year 3)		
Others	*(Enter course Name and number in this column--will auto-fill in form)*		
Other Cognitive?			
Other Affective?			
Other Social?			
Other Developmental?			

0

PROFESSION-WIDE COMPETENCIES		
RESEARCH		
Training Domain	**Date Completed**	**Performance**
History, Theory & Method: Research Design		
Statistics, Semester 1		
Statistics, Semester 2		
Systems of Psychotherapy		
Independent Research Project (Year 1)		
Independent Research Project (Year 2)		
Portfolio (Year 3)		
Dissertation Research (Defense)		
Overall Competency - Research		
Optional Comments:		

ETHICAL AND LEGAL STANDARDS		
Training Domain	**Date Completed**	**Performance**
Ethics & Professional Issues in Clinical Psychology		
Psychotherapy Practicum		
Couples Therapy Practicum		
Mini-Practicum		
Externship		
Overall Competency - Ethical and Legal Standards		
Optional Comments:		

INDIVIDUAL AND CULTURAL DIVERSITY		
Training Domain	**Date Completed**	**Performance**
Diversity Issues Seminar		
Psychotherapy Practicum		
Couples Therapy Practicum		
Mini-Practicum		
Externship		
Overall Competency - Individual and Cultural Diversity		
Optional Comments:		

0

PROFESSION-WIDE COMPETENCIES (continued)		
PROFESSIONAL VALUES, ATTITUDES, AND BEHAVIORS		
Training Domain	**Date Completed**	**Performance**
Ethics & Professional Issues in Clinical Psychology		
History, Theory, and Method: Research Design		
Psychotherapy Practicum		
Couples Therapy Practicum		
Externship		
Professional Development Series (Year 1)		
Professional Development Series (Year 3)		
Overall Competency - Professional Values, Attitudes, and Behaviors		
Optional Comments:		

COMMUNICATIONS AND INTERPERSONAL SKILLS		
Training Domain	**Date Completed**	**Performance**
Adult Assessment		
Child Assessment		
Psychotherapy Practicum		
Couples Therapy Practicum		
Independent Research Project (Year 1)		
Independent Research Project (Year 2)		
Dissertation Research (Defense)		
Overall Competency - Communications and Interpersonal Skills		
Optional Comments:		

ASSESSMENT		
Training Domain	**Date Completed**	**Performance**
Adult Assessment		
Child Assessment		
Assessment Practicum		
Psychopathology		
Clinical Workshop (Year 2)		
Clinical Workshop (Year 3)		
Clinical Workshop (Year 4)		
Overall Competency - Assessment		
Optional Comments:		

0

PROFESSION-WIDE COMPETENCIES (continued)		
INTERVENTION		
Training Domain	**Date Completed**	**Performance**
Systems of Psychotherapy		
Psychotherapy Practicum		
Couples Therapy Practicum		
Mini-Practicum		
Externship		
Clinical Workshop (Year 2)		
Clinical Workshop (Year 3)		
Clinical Workshop (Year 4)		
Overall Competency - Intervention		
Optional Comments:		

SUPERVISION		
Training Domain	**Date Completed**	**Performance**
Psychotherapy Practicum		
Externship		
Overall Competency - Supervision		
Optional Comments:		

CONSULTATION AND INTERPROFESSIONAL / INTERDISCIPLINARY SKILLS		
Training Domain	**Date Completed**	**Performance**
Psychotherapy Practicum		
Mini-Practicum		
Externship		
Clinical Workshop (Year 2)		
Clinical Workshop (Year 3)		
Clinical Workshop (Year 4)		
Overall Competency - Consultation & Interprof/Interdisc Skills		
Optional Comments:		

0

Discipline-specific Knowledge Areas		
Training Domains and Courses	**Date Completed**	**Performance**
History & Systems of Psychology History, Theory, and Method: Research Design Systems of Psychotherapy		
Affective Aspects of Behavior Social and Emotional Development		
Biological Aspects of Behavior Human Neuropsychology		
Cognitive Aspects of Behavior Advanced Cognitive Development		
Developmental Aspects of Behavior Social and Emotional Development		
Social Aspects of Behavior Advanced Social Psychology		
Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas Social and Emotional Development		
Research Methods History, Theory, and Method: Research Design		
Quantitative Methods Statistics, Semester 1 Statistics, Semester 2		
Psychometrics History, Theory, and Method: Research Design Statistics, Semester 2 Adult Assessment Child Assessment		

Optional Comments:

0

Practica Placements		
Practicum Year and Site Name	**Date Completed**	**Performance**
Mini-Practicum - Third Year		
Externship - Fourth Year		
Advanced Therapy Practicum - Fifth Year +		
INTERNSHIP		

Optional Comments:

Appendix H: Licensure Requirements for States

In the table below, **an asterisk (*) indicates that earning a doctoral degree from a program accredited by the American Psychological Association (APA) is deemed to meet the educational requirements for licensure in that State**. The Clinical Psychology PhD Program at Clark University is currently – and has been continuously – accredited by APA since 1948 (see: http://www.apa.org/ed/accreditation). Please note that this table does **not** include an evaluation of state-specific requirements beyond that of educational or curricular requirements.

State	Program Satisfies Curricular Requirements?			State Professional Association or License Authority and Notes
	Yes	No	Unable to Determine	
1. Alabama	X*			http://www.psychology.alabama.gov/default.aspx
2. Alaska	X*			https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/BoardofPsychologists.aspx
3. Arizona	X*			https://psychboard.az.gov/
4. Arkansas	X*			https://psychologyboard.arkansas.gov/
5. California		X		https://www.psychology.ca.gov/ Although a doctoral degree in Clinical is required, additional coursework or experience beyond what is routinely offered in the Clinical Psychology PhD Program at Clark University may be required in California, including pre-license curriculum or training in: human sexuality (10 contact hours); alcoholism/chemical dependency detection and treatment (one semester or quarter); child abuse assessment (7 hours); spousal/partner abuse, detection and intervention strategies (15 contact hours); aging and long-term care (10 contact hours).
6. Colorado	X*			https://dpo.colorado.gov/Psychology
7. Connecticut	X*			https://portal.ct.gov/DPH/Public-Health-Hearing-Office/Board-of-Examiners-of-Psychologists/Board-of-Examiners-of-Psychologists
8. Delaware	X*			https://dpr.delaware.gov/boards/psychology/
9. District of Columbia	X*			https://dchealth.dc.gov/service/psychology-licensing
10. Florida	X*			https://floridaspsychology.gov/
11. Georgia	X			https://sos.ga.gov/index.php/licensing/plb/44
12. Hawaii	X*			http://cca.hawaii.gov/pvl/boards/psychology/
13. Idaho	X*			https://ibol.idaho.gov/IBOL/BoardPage.aspx?Bureau=PSY
14. Illinois	X*			https://www.idfpr.com/profs/psych.asp
15. Indiana	X*			https://www.in.gov/pla/psych.htm
16. Iowa	X*			https://www.idph.iowa.gov/Licensure/Iowa-Board-of-Psychology
17. Kansas	X*			https://ksbsrb.ks.gov/
18. Kentucky	X			http://psy.ky.gov/Pages/default.aspx
19. Louisiana	X			http://www.lsbep.org/
20. Maine	X*			https://www.maine.gov/pfr/professionallicensing/professions/psychologists/

In the table below, **an asterisk (*) indicates that earning a doctoral degree from a program accredited by the American Psychological Association (APA) is deemed to meet the educational requirements for licensure in that State**. The Clinical Psychology PhD Program at Clark University is currently – and has been continuously – accredited by APA since 1948 (see: http://www.apa.org/ed/accreditation). Please note that this table does **not** include an evaluation of state-specific requirements beyond that of educational or curricular requirements.

State	Program Satisfies Curricular Requirements?			State Professional Association or License Authority and Notes
	Yes	No	Unable to Determine	
21. Maryland	X*			https://health.maryland.gov/psych/Pages/Home.aspx
22. Massachusetts	X*			https://www.mass.gov/orgs/board-of-registration-of-psychologists
23. Michigan	X			https://www.michigan.gov/lara/0,4601,7-154-89334_72600_72603_27529_27552---,00.html NOTE: Beginning in March 30, 2022, a one-time training in identifying victims of human trafficking must be completed before licensure
24. Minnesota	X*			http://www.psychologyboard.state.mn.us/
25. Mississippi	X*			https://www.psychologyboard.ms.gov/Pages/default.aspx
26. Missouri	X*			https://pr.mo.gov/psychologists.asp
27. Montana	X*			http://boards.bsd.dli.mt.gov/psy
28. Nebraska	X*			http://dhhs.ne.gov/licensure/Pages/Psychology.aspx
29. Nevada	X*			http://psyexam.nv.gov/
30. New Hampshire	X*			https://www.oplc.nh.gov/psychologists/
31. New Jersey		X		https://www.njconsumeraffairs.gov/psy/ In addition to a doctoral degree from an APA accredited program like the Clinical Psychology PhD Program at Clark University, New Jersey requires the following breakdown of credits and topic areas: (Note: 1.0 unit at Clark = 4 semester credit hours or 6 quarter credits): • Six (6) semester credits in Personality Theory and Human Development Theory; • Six (6) semester credits in Learning Theory and/or Physiological Psychology; • Six (6) semester credits in Psychological Measurement and Psychological Assessment; • Six (6) semester credits in Psychopathology; • Six (6) semester credits in Psychological therapy/counseling or Industrial/Organizational Psychology.
32. New Mexico	X*			http://www.rld.state.nm.us/boards/Psychologist_Examiners.aspx
33. New York	X			http://www.op.nysed.gov/prof/psych/
34. North Carolina	X*			http://www.ncpsychologyboard.org/
35. North Dakota	X*			http://ndsbpe.org/index.html
36. Ohio	X*			https://psychology.ohio.gov/
37. Oklahoma	X			https://www.ok.gov/psychology/
38. Oregon	X*			https://www.oregon.gov/psychology/pages/index.aspx

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State	Program Satisfies Curricular Requirements?			State Professional Association or License Authority and Notes
	Yes	No	Unable to Determine	
39. Pennsylvania	X*			https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Psychology/Pages/default.aspx#.VgG6GN9VhBc
40. Rhode Island	X*			https://health.ri.gov/licenses/detail.php?id=241
41. South Carolina	X*			https://llr.sc.gov/psych/
42. South Dakota	X*			https://dss.sd.gov/licensingboards/psych/psych.aspx
43. Tennessee	X*			https://www.tn.gov/health/health-program-areas/health-professional-boards/psychology-board/psych-board/about.html
44. Texas	X			http://www.tsbep.texas.gov/index.php
45. Utah	X*			https://dopl.utah.gov/psych/index.html
46. Vermont	X*			https://sos.vermont.gov/
47. Virginia	X*			http://www.dhp.virginia.gov/psychology/
48. Washington	X*			https://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/Psychologist.aspx
49. West Virginia	X			https://psychbd.wv.gov/Pages/default.aspx
50. Wisconsin	X			https://dsps.wi.gov/pages/Professions/Psychologist/Default.aspx
51. Wyoming	X*			https://psychology.wyo.gov/