

**Clinical Graduate Student Manual**  
**Department of Psychology**  
**Ohio University**

**Summer 2022**

Foreword

This manual is designed to help students understand the doctoral program in clinical psychology. It describes the organization of the Clinical Section; the requirements for the clinical psychology specialization and for the elective training in our other major areas of study (clinical child psychology, and clinical neuropsychology); and various procedures that students will need to follow to complete the program. The manual is a reference for students regarding their program requirements and responsibilities.

This manual is a supplement to, not a substitute for, the *Graduate Catalog*. Students are expected to know the information in the *Graduate Catalog* as well as in this manual and to be responsible for completing the various requirements. If students need further information, they should consult with their mentor/advisor, the Director of Clinical Training, or the Assistant Chair for Graduate Studies.

This manual is also subject to changes during the time of a student's matriculation through the program. Students should be aware that requirements may change in response to developments in the field, per guidelines put forth by the American Psychological Association, or programmatic enhancements decided upon by the Clinical Section. All changes will be announced to students, with clear indications as to which cohorts of students they will affect. Students are encouraged to attend to communications from the Director of Clinical Training and their student representative with regard to any important changes, to check the Department website or the Clinical Student Teams channel for the latest version of the manual (which is updated only once a year), or to request an updated pdf copy of the manual at the start of every academic year, to stay up to date with any important changes.

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## **I. Organization of the Department of Psychology**

The psychology department is organized in a somewhat decentralized fashion to help spread around the workload, consisting of a Department Chair, two Assistant Chairs, and two Program Directors. Below is a short description of their functions so that students will know to whom they should turn for various needs.

### **Department Chair**

The Department Chair has responsibility for just about everything but has delegated a number of these responsibilities to the positions described below. The Department Chair works primarily on matters relating to the faculty, the budget, scheduling of courses, etc. and represents the department when dealing with other units. Students will need to see the Chair if they present papers at conferences (which is strongly encouraged) in order to get partial reimbursement for their travel costs (see Travel Support, Section X.CC) or to discuss available funding for thesis and dissertation research (see Research Support, Section X.BB).

### **Assistant Chair for Graduate Studies**

This person oversees policies and procedures relating to all the graduate programs. If students have questions about program requirements, registration, financial aid, grievances, workload assignments, deadlines, and various other practical matters, they should check with the Assistant Chair for Graduate Studies. However, students are encouraged to consult this manual first.

### **Assistant Chair for Undergraduate Studies**

This person oversees policies and procedures relating to the undergraduate program.

### **Director of Experimental Training**

The Experimental Section is home to the doctoral program in experimental psychology. The Director of Experimental Training is responsible for administering policies and procedures for the experimental psychology program.

### **Director of Clinical Training**

The Director of Clinical Training oversees policies and procedures for the Clinical Section. A fuller description of this role is given in Part III of this manual.

## II. Organization of the Clinical Section

The Clinical Section comprises all full-time clinical faculty (both Tenure-Track and Instructional faculty who are involved at least 50% FTE in the instruction/mentorship of clinical graduate students via courses, practicum supervision, or research mentorship) and is chaired by the Director of Clinical Training. Members of the Clinical Section and its student representative meet regularly to conduct the business of the Clinical Section, though much of the work of the section is handled individually by the Director of Clinical Training or by one of the four standing committees. The four standing committees are described below.

All members of the Clinical Section are eligible to vote on any student-related issues. The student representative attends the meetings to provide a student perspective, gather and present student concerns and input, vote when appropriate on behalf of the clinical student body, and provide summaries of relevant topics of discussion to the clinical students after each meeting.

### **A. Admissions Committee**

**Composition.** The Admissions Committee is composed of four faculty members, two from the general clinical area and two from the child elective area of study and one additional clinical faculty member who chairs the committee. Faculty members are appointed to the committee for two-year terms by the Director of Clinical Training, although term lengths may vary dependent upon faculty workload and other staffing concerns. The term of appointment for a committee member begins with the start of the academic year. There is no student representative to this committee, but the department funds an overload work assignment for interested students who would like to assist in coordinating the Visitation Days for admission.

**Chairperson.** The chair of the committee is appointed by the Director of Clinical Training for a term of one year. The chair is eligible for a second, consecutive one-year term. Of note, these term lengths may vary dependent upon faculty workload and other staffing concerns.

**Functions.** The purpose of the admissions committee is to select new students for admission to the clinical program. The committee determines on a yearly basis the number of students who are to be admitted to an incoming class, in consultation with the Department Chair and the Assistant Chair of Graduate Studies. The committee reviews application materials submitted by candidates according to the criteria the committee has set for admission. The committee also makes preliminary phone calls to interview some candidates. The Chair of the committee then works with the Director of Clinical Training, the Assistant Chair of Graduate Studies, and the rest of the section members to coordinate visitation days and to collect feedback about applicants who are interviewed to share with all potential mentors. The Chair also works with the Department Chair, Assistant Chair of Graduate Studies, and Director of Clinical Training to determine the final size of any incoming class and to distribute scholarship and fellowship offers.

#### **Procedures for Selection of Potential Candidates**

Our minimal criteria for accepting an applicant into the program are that both the quantitative and verbal GRE are at the 50<sup>th</sup> percentile or higher and the undergraduate GPA is 3.00 or higher. Committee members review all materials and note whether applicants

meeting minimal criteria have good fit for our program and seem acceptable for an interview. Qualified applicants should be directed to appropriate mentors by committee members. Potential faculty mentors may wish to call qualified applicants to phone interview them or may choose to invite them directly for visitation days. In addition, a committee member in each of the two areas (general, child) will conduct a preliminary telephone or videoconference interview with all students who self-identify as members of diverse/underrepresented groups with regard to race/ethnicity and who meet our eligibility criteria. If the student has identified a particular mentor, that mentor could also be the one to make the phone call.

Because we know that applicants may not be accurately represented by just three scores, we include exception criteria to consider those candidates who may be excellent candidates, but who did not achieve the minimal criteria. Faculty may *invite* students who meet the criteria defining exceptions below. If a faculty member would like to *accept* one of the applicants on the exception list, the faculty member must present the applicant at a section meeting and the majority of faculty must approve the acceptance offer prior to notifying the student that they are accepted. The exception criteria are:

- One of the two GRE scores is less than the 50<sup>th</sup> percentile but greater than the 40<sup>th</sup> percentile, the other is at or above the 50<sup>th</sup> percentile, the undergraduate GPA is equal to or greater than 3.0 and the applicant has qualities that compensate for the lower GRE score. These qualities may include:
  - Data inconsistent with the lower GRE score. For example, an applicant may have a quantitative GRE score less than the 50<sup>th</sup> percentile but high grades in multiple math and statistics courses.
  - Evidence that the applicant has the potential to bring diverse and unique perspectives to our training environment (e.g., this may include being a member of an under-represented racial/ethnic group; English as a second language; person who has acquired diverse experiences that are likely to enrich clinical training and the department).
- An undergraduate GPA less than 3.0 and a graduate school GPA in psychology of 3.5 or greater.

## **B. Comprehensive Examination Committee**

**Composition.** The Comprehensive Examination Committee is composed of three faculty members from the Clinical Section, created for each student. The student representative for the Clinic Advisory Committee, who is elected by the students, also serves as the student representative for this committee. The Chair of the committee is appointed by the Director of Clinical Training at the beginning of each academic year. The Chair selects the rest of the comps committee for each student, trying to prioritize an even distribution of the workload for faculty but also trying to match known competences and areas of research interests with the student to facilitate grading.

**Functions.** The Chair receives student proposals at one of the two proposal deadline dates (March, September) and selects a committee for each student. The committee members have 2 weeks to approve the proposal. The Chair also receives part 1 and part 2 of comps from students at one of the two dates (September, March) and distributes them to the students' committee members. The committee members have a month to grade comps. The Chair is responsible for compiling and giving feedback to the

students and for serving as a third grader if there are grading discrepancies. Once the examination has been completed, the Chair reports the final grade to the Director of Clinical Training and places a letter with the grading and the final copy of the comps documents in student folders. The student member of the committee solicits feedback from students regarding comprehensive exams to relay concerns and information to the committee. More details about the actual procedures for comprehensive exams can be found in Section V.D of this document.

### **C. Internship and Training Committee**

**Composition.** The Internship and Training Committee is composed of three faculty members from the Clinical Section and one student representative. Faculty members are appointed for a two-year term by the Director of Clinical Training. Term lengths may vary based on faculty workload and staffing concerns. The student representative for the Clinic Advisory Committee also serves as the student representative for this committee; the student is elected by their peers for a one-year term and should be at least a third-year student. Appointments begin with the beginning of the academic year.

**Chair.** The chair of the committee is elected for a one-year term by the members of the committee. The election is held at the beginning of the academic year, and the chair takes office immediately after the election. The chair is eligible for a second, consecutive one-year term. As noted above, term lengths may vary dependent upon faculty workload and staffing concerns.

**Function.** The purpose of the Internship and Training Committee is to support the students regarding both internship applications and interviews and traineeship applications and interviews. If necessary, the Internship and Training Committee can also serve an advisory role to the Director of Clinical Training and the Clinical Director regarding placement in Clinic practica. The student representative can also assist in reviewing student materials.

With regard to internship, the Internship and Training Committee offers advice about the accuracy and appropriateness of application materials provided by prospective interns (more details about the process for internship applicants can be found in Section V.F of this document) and advise students about the appropriateness of their choices for internship. For example, the committee can review all sites selected by students applying in a given year and note any overlaps in choices among students. The Committee will also offer support regarding the interview process at the end of the Fall Semester, which may include interview preparation meetings. Finally, the Committee offers a spring semester meeting of potential internship applicants with the prior applicant class providing advice and feedback/support.

With regard to traineeship, the Internship and Training Committee will also offer advice about the accuracy and appropriateness of student materials for traineeship placements. This process typically occurs in the beginning of Spring semester. Details regarding the process students should follow can be found in Section X.L. The Committee will also offer a traineeship interview preparation meeting in late January/early February.

### **D. Clinic Advisory Committee**

The Clinic Advisory Committee consists of the Clinic Director, at least two members of the clinical faculty, and a student representative (who also serves as the student

representative to the Comprehensive Exam and Internship/traineeship Committees). The committee meets as needed, according to the needs of the Clinic Director; the student representative serves as the liaison to the students, bringing issues to the Clinic Director for the committee to address and reporting back details of meetings and decisions from the committee to the student body.

### **III. Role of the Director of Clinical Training**

The Director of Clinical Training plays an important role in guiding the clinical program and in exploring procedures and options for providing better clinical training. They work in close cooperation with the Department Chair and the Assistant Chair of Graduate Studies in attaining these goals. Generally, the Director of Clinical Training is responsible for and should play an active role in the following areas:

1. writing the annual APA report;
2. coordinating the periodic self-study report for reaccreditation;
3. providing effective day-to-day management of Clinical Section activities such as policy decisions and curriculum planning; conducting student evaluations; scheduling and conducting Clinical Section meetings and writing up and distributing summaries of these meetings;
4. verifying students' internship eligibility and readiness and corresponding with internship agencies about internship placement and experience;
5. monitoring clinical graduate students' traineeship placements (with the Clinic Director);
6. coordinating with faculty to determine course and thesis equivalences for incoming post-master's students;
7. listening to inter-faculty and student-faculty problems and complaints relevant to the clinical program and trying to find solutions;
8. conducting committee elections or appointing minor or ad hoc committees; following up on committees, trying to stimulate committee action;
9. managing accreditation and licensure for graduates (completing documentation for APPIC and for state licensure boards, as needed);
10. working with the Assistant Chair of Graduate Studies on program updates;
11. delegating administrative responsibilities, where applicable, during periods when the director is not available;
12. carrying out faculty duties consistent with the training program's goals;
13. being responsible for annual review and update of the Clinical Graduate Student Manual; responding to research questionnaires and communiques regarding various training issues received from APA, APPIC, etc., as well as numerous committee groups and individual researchers nationwide;
14. attending the annual meeting of the Council of University Directors of Clinical Psychology;
15. serving as a standing member of the departmental Faculty Load Committee (with the Director of Experimental Training and the Department Chair);
16. serving as the oversight person for the department's Training Clinic.
17. conferring with the Department Chair about matters relevant to the clinical program such as scheduling flow and sequencing problems;
18. collaborating with the Assistant Chair of Graduate Studies in setting up recruiting programs for graduate students, including minority and other special interest groups;
19. making contacts with university and non-university agencies (local, state, regional, federal) for research and training experiences and for funding

- arrangements that may support graduate training; helping foster interagency contacts for traineeship experiences;
20. working with the Department Chair and the Director of Experimental Training for joint research and training ventures;
  21. seeking sectional training grants such as NIMH grants, as the section decides, and carrying out the day-to-day activities involved in administering such grants as needed;

The Director of Clinical Training's responsibilities extend for a 12-month rather than a 9-month period. In order to aid the Director of Clinical Training in carrying out these activities, they are given release time of two courses per year and an annual summer stipend. The Director of Clinical Training will serve for a 5-year period. The position may be held for a maximum of two terms, although members of the Clinical Section can grant exceptions.

#### **IV. Program Mission and Objectives**

The goal of the program is to prepare doctoral students to become professionals in health service psychology, specifically in the specialization of clinical psychology. Recent graduates of the program work in various types of settings, including medical centers, colleges and universities, independent practice, state and county hospitals, medical schools, school districts, university counseling centers, and correctional facilities. The specific objectives of the training program include the following:

- To educate students about the content issues that presently define the discipline-specific knowledge base in clinical psychology
- To train students in the use of scientific methodology applied to the study of human behavior
- To facilitate the development of foundational and functional competencies associated with practice as health service providers
- To educate students on the role of individual and cultural diversity as it relates to both the science and practice of clinical psychology
- To promote the integration of science and practice in professional activity

## V. General Requirements for Doctoral Program in Clinical Psychology

The doctoral program in clinical psychology integrates academic, research, and professional training. The program requires 90 credit hours for those entering with the bachelor's degree and 56 credit hours for those entering with the master's degree. The program is accredited by the American Psychological Association (APA), and program requirements are structured to fulfill the Discipline-Specific Knowledge and Profession-Wide Competency areas specified by the APA accreditation guidelines.

All clinical students complete required coursework and practical training in Discipline-Specific Knowledge and Profession-Wide Competencies, a master's thesis for those entering with the bachelor's degree (or those students entering with a master's degree who did not complete an approved thesis prior to entering the doctoral program), a doctoral comprehensive examination, a dissertation, and an internship.

Competence in Discipline-Specific Knowledge domains and Profession-Wide Competencies is assessed in multiple ways, including: 1) performance in the prescribed courses, 2) completion of the doctoral comprehensive examination, 3) completion of a thesis and dissertation, 4) performance in all practical training settings (courses, practicum and traineeship assignments) as assessed by competency evaluations, and 5) successful completion of an internship appropriate to the student's training. Evaluation tools used in assessment of students are reviewed with students in the Clinical Orientation Seminar (PSY 5700) that is taught by the Director of Clinical Training during their first semester on campus.

All students complete training consistent with the specialization of clinical psychology. There is additional coursework and practical /research training that would allow interested students to complete elective major areas of study in either clinical child psychology or clinical neuropsychology. The Department also offers an elective quantitative concentration. Although not a major area of study, students can also gain exposure to clinical health psychology through a couple of elective courses and traineeship opportunities. Students work closely with the Director of Clinical Training to ensure successful completion of the requirements for the clinical psychology specialization as well as any elective areas of study they wish to complete.

Students who enter with a master's degree and wish to determine whether their previously completed coursework can be counted as equivalent courses to the course requirements of the doctoral program should submit copies of the course syllabi to the Director of Clinical Training to be reviewed by relevant faculty. If such courses are approved as equivalent to course requirements in the doctoral training program, they will not have to be repeated. Please note that the only courses eligible for potential waivers are those that are not core clinical requirements (i.e., courses under 5.a-5.d and 6.a-6.b below). No core clinical requirements can be waived. This includes the required practica in the Training Clinic; even if students entering with a master's degree have completed prior practical training, they are still required to complete four semesters of practica in the Training Clinic. However, it is possible that they can start traineeship early; see the Director of Clinical Training and Section X.L for details.

All students can also potentially waive the History and Systems requirement if they completed a History and Systems course at the undergraduate level and received at least a B grade in the course. The course content would be reviewed by the current instructor of

History and Systems to determine whether it covers enough of the substantive area to be waived.

### **A. Course Requirements**

#### **Discipline Specific Knowledge (Category 1 and 2)**

1. **History and Systems of Psychology:**  
PSY 7010 History and Systems of Psychology
2. **Affective Aspects of Behavior:**  
(completed as part of additional course requirements)
3. **Biological Aspects of Behavior:** (select one of the following)  
PSY 6220 Physiological Psychology  
PSY 7210 Neuropsychology
4. **Cognitive Aspects of Behavior:**  
PSY 6310 Cognitive Processes
5. **Developmental Aspects of Behavior:**  
PSY 6410 Developmental Psychology
6. **Social Aspects of Behavior :**  
PSY 6510 Experimental Social Psychology

#### **Advanced Integrative Knowledge in Scientific Psychology (Category 3)**

(Achieved through completion of advanced integrative evaluative tasks in PSY 6410 and through successfully completing the comprehensive exam Part 1)

#### **Discipline-Specific Knowledge (Category 4)**

1. **Research Methods:**  
PSY 6120 Advanced Research Methods
2. **Quantitative Methods:** (two courses are required)  
PSY 6111 Advanced Statistics for the Behavioral Sciences  
PSY 6112 Introduction to Linear Regression Analysis
3. **Psychometrics:** (completed as part of additional course requirements)

#### **Profession-Wide Competencies**

1. **Research:**  
PSY7940 Research (a research prospectus must be approved by students' mentors by the second Monday in April of the first year)  
PSY 6950 Thesis (complete an empirically-based thesis)  
PSY 8950 Dissertation (complete an empirically-based dissertation)
2. **Ethical and Legal Standards:**  
PSY 6750 Issues in Professional Psychology  
PSY 7920 Practicum  
PSY 7925 Advanced Practicum  
PSY 7910 Fieldwork
3. **Individual and Cultural Diversity:**  
PSY 6760 Diversity Issues in Research and Clinical Practice  
PSY 7920 Practicum  
PSY 7925 Advanced Practicum  
PSY 7910 Fieldwork
4. **Professional Values and Attitudes:** (interwoven through curriculum and observed in 7920, 7925, and 7910)

5. **Communication and Interpersonal Skills:** (interwoven through curriculum and observed in 7920, 7925, and 7910)
6. **Assessment and Psychopathology:**
  - a. PSY 6710 Clinical Psychopathology
  - b. PSY 6730 Fundamentals of Clinical Assessment **plus:** One additional course (PSY 7730 Adult Assessment, or PSY 7732 Child and Adolescent Assessment)
  - c. PSY 7920, 7925, and 7910
7. **Intervention:**
  - a. PSY 6740 Fundamentals of Psychotherapy **plus:** One additional course from the following: PSY 7740 Adult Psychotherapy, PSY 7742 Child and Adolescent Psychotherapy, PSY 7750, Interventions in Health Psychology, or advanced seminars in therapy as approved by the Clinical Section)
  - b. Complete 4 semesters (3 CR per semester) of PSY 7920 Clinical Practicum
  - c. PSY 7925 and 7910
8. **Supervision/Consultation/Interdisciplinary Skills:**
  - PSY 8920 Supervision
  - PSY 7925 Advanced practicum
  - PSY 7910 Fieldwork

## **B. Additional Requirements**

1. Attendance at Departmental Colloquia: It is expected that all first- and second-year students will attend departmental colloquia when the speaker is external to the department. Our department brings in nationally recognized scholars throughout the year, and unless students are excused by the DCT, it is expected that they will be at all of the presentations. Since the colloquia are typically at 12:55 to 1:50 on Fridays, students should not schedule other responsibilities during this time. Attendance at colloquia will be included as a point of discussion in students' annual evaluations. Further, while it is recognized that students in their third year and beyond are away from campus more often than beginning level students, they are also encouraged to regularly attend colloquia.
2. Second year and above students are also expected to, at least once a year, either 1) author/coauthor a peer reviewed journal article/book chapter, OR 2) present their research at either a local, regional, state, or national conference. This will also be included as a point of discussion in students' annual evaluations.
3. PSY 7960 Teaching Seminar is required for all students prior to being assigned a course to teach. During the first semester that students are teaching, they are also assigned to PSY 7926 Teaching Practicum. Students are encouraged to complete 7960 as early as they can in the program.
4. In the summer between first and second year, students will sign up for Fieldwork (7910) with the Director of Clinical Training and will shadow second year, third year, and traineeship students placed in the Training Clinic. They will engage in a series of shadowing activities that will include watching therapy videos, joining student clinicians and their supervisors to discuss the cases they observed, and working with the student clinicians they observed to see how record keeping is done in the clinic. They will also engage in other

shadowing opportunities as available in any given summer. The purpose of this 1 credit course is to help them transition into their first practicum placement in the fall semester of their second year.

Traineeship. Students complete at least two traineeships during their time in the program, typically beginning after their first year of practicum in the Training Clinic. These are typically two different placements, each for around 12 months. Students register for 7925 if the traineeship happens to be within our Training Clinic, and for 7910 if the placement is external, which is most of the placements. The process for applying for traineeships can be found in Section X.L of this manual.

### **C. Scholarly Discipline Requirement**

One of the university-wide requirements for Ph.D. programs is the completion of a scholarly discipline (scholarly tool). Completion of the Discipline-Specific Knowledge areas listed above fulfills the university's scholarly discipline requirement.

### **D. Comprehensive Examination**

The university requires that students in doctoral programs take a comprehensive examination prior to the dissertation in order to establish their mastery of the field and readiness to undertake a dissertation. In the Department of Psychology, the comprehensive examination for clinical students is administered twice a year. Students normally take the examination in the administration closest to completion of their master's thesis. A student may not take the comprehensive examination until they have defended the master's thesis and been formally continued into the doctoral program (See section on continuation into the doctoral program).

The exam involves two parts, and students have a deadline for proposal for Part 1 and then a matching deadline for submission of both Parts 1 and 2. See table below.

Deadlines for the Two Administrations of Comprehensive Exams

<b>Proposal due for Part 1</b>	<b>Committee Approval of Part 1 proposal</b>	<b>Final Parts 1 and 2 due to committee</b>	<b>Comps results given to comps chair (assuming no third grader)</b>	<b>If a minor revision decision, revised comps due date</b>	<b>If a major revision decision, revised comps due date</b>	<b>If a reject decision, new comps proposal due date</b>
Last Friday of March	The committee will provide feedback to the student within 3 weeks of proposal submission	Last Friday of August	Last Friday of September	3 weeks from the date of feedback from comps chair	Second Friday of February	Last Friday of March

	<p>deadline. If the committee requires revisions, the student must submit a revised proposal to the committee within 3 weeks of receipt of committee feedback. Time required to reach committee approval for the proposal does not change the comps submission deadlines.</p>					
First Friday of September	<p>The committee will provide feedback to the student within 3 weeks of proposal submission deadline. If the committee requires revisions, the student must</p>	Second Friday of February	Second Friday of March	3 weeks from date of feedback from comps chair	Last Friday of August	First Friday of September

	submit a revised proposal to the committee within 3 weeks of receipt of committee feedback. Time required to reach committee approval for the proposal does not change the comps submission deadlines.					
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**Committee:** Students should notify the Comps Chair as soon as they know that they plan to submit a proposal so that the Chair can assign a comprehensive exam committee for the student. The evaluation committee consists of 2 graders (not the student's mentor) who will grade both parts of the exam for any given student. The Comps Chair will try to prioritize an even distribution of the workload for faculty (considering both recent membership on Comps committees, as well as other section and department service committee assignments), but also try to match known competencies and areas of research interests with the student to facilitate grading. The Comps Chair is also responsible for compiling and giving feedback to the students and for serving as a third grader if there are grading discrepancies.

### **Structure of Comps**

The comprehensive exam consists of 2 parts. Students must complete both parts by deadlines specified. Part 1 requires a proposal, whose deadline appears in the table above. Part 2 requires that the student follow the Psychology and Social Work Policies and Procedures Manual for appropriate deidentification of the case prior to submission for grading.

### **Part 1: Either a Literature Review or an Empirical Paper**

The purpose of the paper is for the student to independently demonstrate the ability to conceptualize, integrate, and critically evaluate the primary psychological literature. A specific goal is that the student demonstrates advanced integrative knowledge in two or more discipline-specific domains (developmental, biological, cognitive, social, affective)

and application of that knowledge to an area of profession- wide competencies (research, diversity, assessment/diagnosis, intervention, ethical/professional decision making). Advanced integrative knowledge means that the student can combine concepts, theories, or topics from at least two of the discipline-specific domains in an integrative fashion.

Affective Aspects of Behavior includes topics such as affect, mood, and emotion. Biological Aspects of Behavior includes any biological underpinnings of behavior, such as neural, physiological, anatomical, and genetic aspects of behavior. Cognitive Aspects of Behavior include topics such as learning, memory, thought processes, and decision-making. Developmental Aspects of Behavior include transitions, growth, and development across an individual's life; the topic should be considered, at least in the arguments within the paper, across at least two developmental periods (e.g., infancy, childhood, adolescence, adulthood, or late life). Social Aspects of Behavior include topics such as group processes, attributions, discrimination, and attitudes.

The paper needs to be either an empirical study or a review paper (both separate from their thesis or dissertation), of the student's choice. While it is not expected that this paper will be fully ready to publish, it is expected that the paper will be a carefully written and revised document, representing the highest quality work of the student. Thus, the "publication readiness" of the paper is merely a guideline to structure and its true publishability is aspirational.

**Statistical Considerations:** If the student anticipates needing consultation on the statistical analyses for the paper because the statistics are more advanced than the methods taught in either of the two first statistics courses, they must seek that consultation prior to proposing their project, and any analyses conducted after the project has been proposed should reflect the student's independent work. It is also important to note that, because it is a comprehensive exam and not necessarily a final pre-publication submission of an empirical study, it is understood that there may be some limitations to design and analysis (e.g., power). However, we would expect that students can speak to sample size and related design issues within the paper. That is, this project does not necessarily carry the same standards for sampling or advanced statistical analyses that might be expected in a dissertation, but there should be advanced knowledge of the relative strengths and limitations of these choices within the manuscript.

**Proposal:** The student must submit a proposal for this paper to their comprehensive exam evaluation committee. The proposal is an abstract (2 pages single-spaced; references do not count in the page limits) that clearly states the aims of the paper, the method, the source of the data, and the proposed analytic approach. The proposal should clearly indicate what discipline-specific knowledge areas they are integrating in the work.

The comprehensive exam committee members will each review the proposal and determine whether they feel the proposed paper serves the purpose of integrating two discipline-specific knowledge domains. If necessary, the committee will make recommendations for areas of coverage, as well as relevant supplemental questions that the student must answer even if they do not fit into the paper itself. If revisions to the proposal are required before it is approved, they will be due to the committee within 3 weeks of the committee feedback on the proposal; otherwise, the student will need to resubmit the proposal in the next comps cycle. Any submitted revision must still fit within the 2 page limit, but can include Track Changes (edits and comments) if this facilitates helping the committee identify changes that were made. No cover letter is allowed.

**Role of the Mentor:** The comprehensive exam is an evaluation of the students' conceptual/critical thinking, integrative knowledge of psychology, and methodological acumen. As a result, the actual work and the final comps product should be completed independently of the mentor. However, students should consult with their mentor about their Part 1 proposal. The mentor can help the student develop an idea, suggest directions, edit the proposal drafts, advise about skills the student needs to develop prior to submitting the proposal so that the project can be successfully carried out independently, etc. The mentor and student should also discuss the ownership of the data and authorship of any publications that could potentially arise from the comprehensive exam product. It should be clear to both mentor and student that, because comprehensive exams are meant to test the independent competencies of the student, the consultation should be limited to the general nature of the paper, what data would be used (if any), and plans for authorship should the paper be something that could be further revised into a publication after comprehensive exams is over. The mentor must sign off on the proposal document prior to submission to the comps committee. Once Part 1 is successfully proposed and approved by the committee, the mentor should not be involved at all in the student's comps process. An exception is if the student has proposed collection of data, as the mentor will need to sign the IRB (see below). The mentor could also talk briefly with the student about time management, balancing completion of comps with other duties, responsibilities, but not actual content about either section of the exam.

**Guidelines for Structure:** Guidelines for the structure of each type of paper appear below. Regardless of type, the paper must be in a publishable format (i.e., consistent with a journal submission) and in APA style.

Structure for a Literature Review (maximum 30 pages of text, not including title page or abstract; maximum 50 pages total including title page, abstract, references, figures, tables, and appendices; students should note that papers considerably shorter than the maximum are not likely to cover required elements)

The literature review should critically evaluate the current state of knowledge on a topic in psychology, consistent with the goal of integrating together at least two of the following domains: developmental, biological, cognitive, social, and affective bases of behavior.

The review should contain the following elements:

- 1) focus on important, relevant, and operationally defined topics
- 2) a clear case for why a literature review of the topics is important to advance the science and/or practice in the field
- 3) description of the systematic process or method used during the literature review. There are articulated ways to do "narrative reviews" just as there are ways of doing meta-analyses (Moher et al 2009; Siddaway et al 2019)
- 4) a critical and inclusive review of previous theory related to the relevant topic. Critical means identification of problems, contradictions, controversies, strengths, next steps, and potentials in the theories. Inclusive means there is active evaluation of the theory relevant to the topic. This may include an historical account or background of the development of the theory or research program reviewed.
- 5) a critical and inclusive review of previous empirical research related to the topic.

- 6) Critical analysis of interpretations of the findings with consideration of how interpretations change as new findings are reported.
- 7) Discussion of the methodological diversity of studies reported, and populations studied in the literature review and the implications of this diversity for new knowledge or future research.
- 8) Raising provocative and innovative questions on the topic not discussed before in the literature. Include “take home” messages that generate new hypotheses and new research or that discuss the clinical implications of the review.

Moher et al (2009). Preferred reporting items for systematic reviews and meta-analyses: The PRISMA statement. *The British Medical Journal*.

Siddaway, A. P., Wood, A. M., & Hedges, L. V. (2019). How to do a systematic review: A best practice guide for conducting and reporting narrative reviews, meta-analyses, and meta-syntheses. *Annual Review of Psychology*, 70(1), 747–770.

Structure for an Empirical Paper (max 20 pages of text, not including title page or abstract; max 35 pages including title page, abstract, references, figures, tables, and appendices; students should note that papers considerably shorter than the maximum are not likely to cover required elements).

The empirical paper should analyze a specific research question(s) that integrates together at least two of the following domains: developmental, biological, cognitive, social, and affective bases of behavior. The paper should be a report of original research, which can include novel analyses of secondary data (archival datasets) or collection of new data. Given the timeline of comps, students are instructed to think carefully before proposing collecting of new data, as a study should not be proposed that would not realistically fit into the comps deadlines. However, if they plan to do so, the mentor will obviously need to read through the IRB application and sign it (but their involvement in the research process should otherwise be completely limited to the Part 1 proposal stage, as detailed above).

The paper should include distinct sections that reflect the stages in the research process, including:

- 1) Introduction which develops the problem under investigation, including clear statement of the purpose of the investigation and its significance; clear development of the rationale for the proposed study based on limitations of the existing literature; and clear integration of the two areas mentioned above.
- 2) Clear and detailed description of the participants
- 3) Clear and detailed description of the measures (including critical psychometrics)
- 4) Clear and detailed description of the procedures used
- 5) Report of the statistical analyses and the findings
- 6) Discussion of the results, including a summary, degree to which the results address limitations in the prior literature and implications (particularly with regard to the integration of the two areas that were the focus of the study), consideration of limitations of the study itself, and future directions.

## **Part 2: Case conceptualization.**

The purpose of the written case conceptualization is to evaluate whether the student can integrate discipline specific knowledge (developmental, biological, cognitive, social,

affective) with clinical skills (diversity, assessment/diagnosis, intervention, ethical/professional decision making). We expect that this will be an **empirically supported** case conceptualization of a de-identified case that the student has actually treated in the PSWC, with a maximum length of 12 pages of text (double spaced) and accompanying references (that do not count in page limit). Assessment only cases will not be allowed for this portion of the comprehensive exam.

It is expected that the case conceptualization will include integration of assessment and treatment information about the patient per the following guidelines:

1. We expect the student to describe the background of the case by considering developmental, biological, psychological, sociocultural, and diversity issues, with empirical support for why these are relevant considerations in this case. In this way, the student can demonstrate the ability to integrate discipline specific knowledge and apply it to a clinical situation. Citations of relevant literature are required.
2. In so doing, we expect the student to utilize existing assessment data, including results of any tests/measures that were administered, as well consider any additional data/tests/measures that could have been informative but were not administered. We also expect the student to provide empirical citations for this information. In this way, the student can demonstrate their understanding of empirically supported assessment and its importance in case conceptualization.
3. We expect to be able to see the student's decision-making process with regard to their case conceptualizations, diagnostic impressions, integrating together a biopsychosociocultural perspective with the assessment data.
4. Then, we expect the student to consider not only the treatment that was selected for the client (with both theoretical and empirical support for this choice), but also to consider at least one additional treatment option, why this may have been appropriate for the client (again, citing research evidence), and to articulate their decision making process between these two options.
5. Further, we expect the student to discuss the course and process of treatment for the client and how it evolved over time. This may include treatment process and outcome data, the role of the client's cultural identity and context, other client characteristics (e.g., presentation/mental status), adherence and theoretical issues, alliance with the client, and other contextual issues.
6. If appropriate for the case, we expect the student to demonstrate any ethical/professional dilemmas that arose and to describe the decision making process they undertook to address the issue(s).

**Role of the Supervisor(s):** While clinical supervisors might advise students on general appropriateness of a case for use for this part of the comprehensive examination, or even suggest to a student that a case might be appropriate for comprehensive exam purposes, the supervisor(s) should not play an active role in helping the student beyond perhaps suggesting that a particular case might be good for use as this part of the comprehensive exam. The supervisor(s) cannot read or edit the case conceptualization, or make direct suggestions as to how a student should approach writing the case conceptualization. Thus, the student should not choose a case that they have already presented as a case conceptualization in practicum and upon which they have already

received evaluative feedback. A student should review points 1-6 above to help them determine whether a particular case would be appropriate to use for this portion of the comprehensive exam.

**Role of the Clinic Director:** The student must make the Clinic Director aware of the case they have chosen for their comprehensive exams, so that the committee members will be able to check back on the veracity of the information presented by the student in their case conceptualization. In addition, students should follow the deidentification procedures in the Clinic's Policy and Procedures manual prior to turning in their case for review. Because the case conceptualization must be deidentified consistent with the clinic policy and procedures, students should provide the Clinic Director with a more or less complete draft (only minor polishing left) of the case conceptualization at least three weeks before the due date for comps, to give the Clinic Director time to confirm that the case was appropriately deidentified.

**Grading for both parts of comps:** The two graders will use the following grading rubrics to independently grade the exam. Graders are required to complete the grading rubric by putting in comments for each rubric (no comment if it does not apply). Some graders may also opt to provide additional comments via Track Changes in the comps document itself, but this is optional and meant only to assist the student in making revisions. The average scores across the two graders determines a pass for each section of comps. If the average scores for a section are above a pass, the student passes that section. If the average scores fall below a pass (4), the committee meets to determine actions that the student would need to take as a follow-up to the failing score. If there is too much discrepancy between the two graders (more than 1 point), the third grader is the chair of comps and the average grade would then be across the three graders. Note that this would lead to delay in feedback to allow the third grader to read the documents, and students would be notified why there is a delay and the length of the delay in getting a response.

**Revision documents:** If the student is required to conduct minor or major revisions, the student should follow the feedback given by their comps committee for making those revisions. The revisions are due as specified in the above table. Documents requiring revisions should have changes visible using Track Changes and must also have a letter accompanying the revised comps document that outlines changes that were made to each specific point of feedback provided by the comps committee. Page limits for the actual comps answer remain the same as given above; the revision letter has a page limit of 2 double spaced pages. It is generally expected that the committee will be able to grade the revised documents within two weeks, although this may vary dependent upon when the revisions are submitted and the degree of revisions that were conducted. As is true with journal manuscripts, it is possible that reviewers' comments may differ from, and in some cases contradict, each other. Graders are aware of this as they will have access to the other grader's comments. If a student is confused by any of the comments, they should feel free to consult committee members for clarification.

**Need for extensions:** If a student encounters circumstances that create barriers to their ability to submit their comprehensive exams on time, they can ask for an extension by requesting one from the comps chair and their committee members. Because each situation

is likely highly unique, there is no standard set of extensions for comprehensive exams, but will be based on the unique circumstances of the student. The request should provide an explanation of the unique situation(s) that have created the extension request and a new proposed deadline. The extension request can be made separately for each part of the comprehensive exam. The committee members and chair will review the request and will then approve, modify, or decline the request.

## Comps Rating Form Part 1

Student \_\_\_\_\_ Grader \_\_\_\_\_

Grade:

Unsatisfactory	Needs Improvement	Questionable	Competent	Excellent
1	2	3	4	5
Reject/Fail	Major Revision	Minor Revision	Pass (comments offered for consideration with mentor)	Pass

Instructions to graders: Please provide a grade on the scale above, with consideration for the grading elements listed below. Add comments regarding specific areas requiring either Minor or Major Revision for each grading element below. Comments must be provided for any grade of 3 or lower to guide the student for revision of their comps. You can provide feedback on grades of 4 or 5 as well if you wish.

Conceptual Skills

Item	Comments
Integrated and critically evaluated the literature in the area beyond just 1 specific set of hypotheses	
Recognized current state of knowledge and theory in a broad area of research	
Generated and applied novel ideas, theories, or methods to a current body of literature	
Connected findings to other literatures or other relevant, evidence-based theoretical perspectives	

Methodological Skills

Item	Comments
Critically considered methods across studies in a broad research area and determined strengths and limitations within the body of work	
Considered methodological advances that would help strengthen a body of research	

Included all methodological elements for a literature review (see comps guidelines)	
Included all methodological elements for an empirical paper (see comps guidelines)	

### Writing Skills

Item	Comments
Produced a document that is structured as a submission to a quality journal	
Integrated ideas by theme and idea, not simply “abstract stacking”	
Showed good organization	
Ideas were focused and easy to follow logically	
Showed adequate grammar, spelling, and punctuation	

## Comps Rating Form Part 2

Student \_\_\_\_\_ Grader \_\_\_\_\_

Grade:

Unsatisfactory	Needs Improvement	Questionable	Competent	Excellent
1	2	3	4	5
Reject/Fail	Major Revision	Minor Revision	Pass but revisions suggested to consider with mentor	Pass

Instructions to graders: please provide a grade on the scale above, with consideration for the grading elements listed below. Add comments regarding specific areas requiring either Minor or Major Revision for each grading element below. Comments must be provided for any grade of 3 or lower in order to guide the student for revision of their comps. You can provide feedback on grades of 4 or 5 as well if you wish.

Item	Comments
Student showed ability to provide empirically supported biopsychosociocultural considerations of the case they are presenting	
Student utilized assessment data and was able to consider what additional assessment data could have been informative for the case, with appropriate empirical citations.	
Student demonstrated appropriate decision making regarding diagnostic impressions and case conceptualization	
Student provided theoretical and empirical support for their choice of treatment	
Student critically considered at least one other treatment option for the client, with empirical support for this consideration	
Student demonstrated appropriate decision making regarding choice of treatment for the client in question	
Student showed consideration of feedback from the client from various sources as well as other contextual issues and their effects on the course and process of treatment for the client and how it evolved over time.	
Student demonstrated appropriate consideration of any ethical/professional issues that arose during the case.	

### **E. Thesis and Dissertation**

Students may register for PSY 6950, Thesis (1-8 hrs. per semester not to exceed 35 hours overall), while working on their master's theses and PSY 8950, Dissertation (1-15 hours per semester, not to exceed 35 hours overall) while working on their dissertations. See Section X.P through X.S of this manual for information on thesis and dissertation committees, proposal and defense meetings, and deadlines and time limits. For students who enter the doctoral program having completed a master's thesis elsewhere, the thesis requirement *may* be waived; a copy of the thesis must be provided to the Admissions Chair, the Director of Clinical Training, and the student's faculty mentor and must receive approval from these individuals prior to the thesis requirement being waived. Students may have a complete waiver of the requirement, be required to complete a thesis equivalency project, or complete a new thesis, following standard procedures.

### **F. Internship**

Students are required to complete a one-year APA-accredited internship. Exceptions to the accreditation requirement must be approved by the Clinical Section before the student accepts an internship.

Students should be aware of the costs associated with application for and completion of the internship. Travel to internship interviews may be costly. In addition, university stipends and tuition waivers are typically not available for students who are off-campus on internship. As a result, registration for credits, access to health insurance, deferring student loans, or accessing financial aid may all be issues that surface during the internship year. Students are advised to stay abreast of current university policies governing these issues and to seek out their mentor/advisor for assistance with planning their coursework and internship schedule.

Students who wish to apply for internship are required to have successfully defended their dissertation proposal prior to being allowed to apply. Students must formally request permission to apply for internship in the spring semester prior to the fall that they plan to apply (see below). The deadline for successful defense of the proposal is October 1<sup>st</sup> in order to apply for that academic year. Confirmation of a passed proposal will need to be provided to the Director of Clinical Training prior to the Director signing the readiness for internship forms that are a required part of the internship application.

For students who are planning to apply to internship in the following fall semester, materials requesting permission to apply must be submitted to the Director of Clinical Training before the last three weeks of the spring semester. These materials include: a brief letter to the Clinical Section members requesting approval to apply for internship, which highlights the student's readiness for internship; a list of proposed internship sites; and a summary of the student's intervention, assessment, supervision, and support hours. These materials will be discussed by section members, who will then vote on approving the student for internship application. This decision will be communicated to students by the Director of Clinical Training with a brief memo.

Prospective interns are asked to submit the following materials to the Internship and Training Committee by October 1<sup>st</sup> of the application year. The materials must be in final draft form and must have been reviewed and signed by the student's faculty mentor/advisor prior to being submitted.

1. curriculum vita;

2. completed APPIC form;
3. sample cover letter or letters (not for every site);
4. statement of progress, including any unfulfilled requirements; and
5. a list of prospective internship sites (in potential order of preference).

The Internship and Training Committee will review the materials and provide feedback to the student applicants.

Students should provide the Director of Clinical Training with official copies of acceptance letters for internships and also with completion letters once their internships are completed. In addition, for every semester that students are on internship (including summer), they should register for STDY 9000 (0 credits) with the Director of Clinical Training, in order to ensure continued library privileges and financial aid during the internship year and to document the internship on their transcripts.

### **G. Schedule for Doctoral Training**

Although the program can be completed in five years, the program may take longer to complete, especially for students who elect to complete an additional major area of study and/or seek academic careers. Whereas the schedule below is a general guideline to follow, specific deadlines of which students need to be aware include the following:

**The second Monday of April of students' first year:** Thesis prospectus must be submitted to the Director of Clinical Training (see Thesis Proposal and Defense Meeting Deadlines in Section XI for more information).

**The Friday of the 1<sup>st</sup> week of classes for Spring Semester of students' second year:** Thesis proposal must be approved (see Thesis Proposal and Defense Meeting Deadlines in Section XI for more information).

**The last day of classes of Fall Semester of students' third year:** Thesis must be successfully defended (see Thesis Proposal and Defense Meeting Deadlines in Section XI for more information)

**October 1<sup>st</sup> of fifth year:** Dissertation proposal must be successfully defended.

Missing any of these deadlines will typically result in an automatic Type II evaluation letter.

Note: students are required to complete PSY 6710, PSY 6740, and PSY 6730 prior to entering practicum in their second year. Second year students are required to complete PSY 6760 and PSY 6750 concurrent with their first year in practicum. The normal schedule for clinical training in the doctoral program is shown below:

#### **First Year**

##### **Fall Semester:**

- PSY 5700 Clinical Orientation
- PSY 6111 Advanced Statistics for the Behavioral Sciences
- PSY 6100 Data Management
- PSY 6710 Clinical Psychopathology
- PSY 6740 Fundamentals of Psychotherapy
- One additional course (Discipline Specific Knowledge or elective for a major area of study) or PSY 7930/7940 (readings/research)

##### **Spring Semester:**

- PSY 6112 Introduction to Linear Regression Analysis
- PSY 6120 Advanced Research Methods
- PSY 7740 Adult Psychotherapy
- PSY 6730 Fundamentals of Clinical Assessment
- PSY 7930 Readings in Psychology or PSY 7940 Research in Psychology

### **Second Year**

- PSY 6760 Diversity Issues in Research and Practice
- PSY 6750 Issues in Professional Psychology
- Additional Assessment Course (PSY 7730 Adult Assessment or PSY 7732 Child and Adolescent Assessment)
- PSY 7920 Clinical Practicum (3CR per semester)
- Required Discipline Specific Knowledge courses or electives for major areas of study
- Approved thesis proposal by Friday of the first week of classes in spring semester

### **Third Year**

- PSY 7920 Clinical Practicum (3 CR per semester)
- Begin Traineeship (PSY 7925 or 7910)
- Discipline-Specific Knowledge courses
- Electives in other major areas of training
- Successful defense of thesis by last day of classes in Fall semester
- Complete doctoral comprehensive exam

### **Fourth Year**

- Have approved dissertation proposal by Oct 1 if applying to internship
- Discipline-Specific Knowledge courses
- PSY 8920 Supervision
- Electives
- Complete Traineeship (PSY 7925 or 7910)

### **Fifth Year and Beyond**

- Have approved dissertation proposal no later than Oct 1st
- Internship or completion of Discipline Specific Knowledge or elective courses and dissertation

## **VI. Elective Training in Clinical Child Psychology**

The Clinical Child Psychology major area of study is devoted to training graduate students to conduct research with and provide clinical services to children, adolescents, and families. Graduate students completing training in the Clinical Child area of study train in the Center for Intervention Research in Schools ([www.oucirs.org](http://www.oucirs.org)), which is dedicated to conducting cutting-edge research and providing innovative training experiences for students and professionals. Our current research focuses on the development and evaluation of school-based interventions for youth with attention-deficit hyperactivity disorder (ADHD), as well as other problems such as depression, conduct, anxiety and the impairments (e.g., peer relations, academic problems) that are common for students with these difficulties. Additional research interests include studying ADHD as a risk factor for family conflict and dating violence as well as identifying ways to engage children, parents and teachers in effective therapeutic services. The Center for Intervention Research in Schools is committed to providing high-quality training experiences that prepare graduate students to conduct interdisciplinary treatment outcome research.

Graduate students are also trained to be knowledgeable and effective clinical practitioners. Students in the Clinical Child area of study receive clinical training in evidence-based assessment and intervention techniques for children, adolescents, and families in the context of the Ohio University Psychology and Social Work Clinic. Child-focused traineeship sites provide additional experiential training opportunities that prepare students for research and practice in an interdisciplinary climate. Traineeship sites include schools, community mental health centers, residential treatment centers, and medical hospitals. These advanced clinical training opportunities help students develop the competencies necessary for interdisciplinary assessment, consultation, collaboration, and coordination of service delivery.

### **Requirements**

Training in the Clinical Child area of study is designed to train graduate students interested in conducting sound clinical research as well as learning and applying evidence-based treatments for child and adolescent mental health disorders. Specific goals are as follows:

1. To learn and apply evidence-based clinical assessment and intervention strategies with children and adolescents with mental health concerns across home and school settings.
2. To receive training in school consultation skills and the behavioral management of child classroom behavioral problems.
3. To develop skills to read and critically evaluate the theoretical and research literature in developmental psychology and in developmental psychopathology and intervention.
4. To conduct independent research projects including, but not limited to, thesis and dissertation studies focusing on child or adolescent psychology, or on a topic that has implications for children's mental health.
5. To develop skills in study design and technical writing sufficient for publication in high quality peer-reviewed outlets and submission of successful grant proposals.
6. To attend and present at national and/or international professional research conferences in child and adolescent psychology.

1. **Required Courses:**
  - a. PSY 6712 Psychopathology of Childhood and Adolescence
  - b. PSY 7732 Child and Adolescent Assessment
  - c. PSY 7742 Child and Adolescent Psychotherapy
  - d. Complete at least three semesters (9 CR) of PSY 7920 Clinical Child Practicum
2. **Internship:**

Students are required to complete an APA-accredited internship in clinical child psychology or one with a ½ year rotation (or equivalent) in clinical child psychology.
3. **Research Experience:**
  - a. Independent research typically done as a thesis or dissertation will focus on topic in child or adolescent psychology, or on a topic that has implications for children's mental health.
  - b. A minimum of one first-author poster or paper presentation on a topic in child psychology or at a national or international professional meeting.
  - c. Collaboration with a faculty member on a submitted or published article or chapter or a submitted or funded grant application.

## **VII. Elective Training in Clinical Neuropsychology**

Training in the clinical neuropsychology area of study follows the Houston Conference Guidelines. Coverage of the Generic Psychology Core and the Generic Clinical Core occurs as required elements of the general training in clinical psychology. Neuropsychology-specific requirements are listed below.

### **Foundations for the Study of Brain-Behavior Relationships (complete at least 2):**

- a. PSY 7210 Neuropsychology
- b. BIOS 5135 Human Neuroscience Laboratory (human brain dissection)
- c. PSY 6220 Physiological Psychology
- d. PSY 6210 Human Psychophysiology
- e. PSY 7240 Psychoneuroimmunology
- f. PSY 7270 Psychopharmacology and Psychotherapy

### **Foundations for the Practice of Clinical Neuropsychology**

- a. At least one year of clinical experience in one or more of the neuropsychology practica or traineeships available to our students.
- b. Completion of an APA-accredited internship in clinical neuropsychology

### **Research in Clinical Neuropsychology**

- a. Independent research typically done as a dissertation on a topic in neuropsychology
- b. A minimum of one first-author poster or paper presentation on a topic in neuropsychology at a professional meeting
- c. Collaboration with a faculty member on a submitted or published article or chapter or a submitted or funded grant application in a neuropsychology area

## VIII. Elective Training in Quantitative Concentration

Sciences tend to be highly quantitative. Quantitative methods can improve theory development and representation, measurement, and data analysis. The Department of Psychology as well as other programs within Ohio University provide a breadth of courses in quantitative methods. Graduate students in both clinical and experimental psychology may want to avail themselves of this resource. To facilitate that process, a quantitative concentration is provided for those interested. Below are the requirements of the concentration and the options available to fulfill those requirements.

The requirements of the quantitative concentration include 18 hours (6 courses) of quantitative coursework as well as a completed project that includes a strong quantitative component. Note the coursework can overlap with other requirements (e.g., completing the quantitative concentration will include the third required quantitative course for all students as well as provide the scholarly tool required for experimental students) and the project can be incorporated within one's thesis or dissertation.

All students in the quantitative concentration will take a foundational course in math. Generally, a background in calculus is needed to perform well in many of these courses. Moreover, the coursework will typically provide (a) broad exposure to analytic techniques as well as (b) deep exposure to a specific quantitative approach. Specific quantitative approaches include mathematical and computational modeling, psychometrics, and various data analysis specializations (see sample course sets below). Moreover, one can emphasize learning about basic mathematical principles as well as applied quantitative methods. The specific coursework undertaken will be determined by the student in consultation with a committee that includes the student's advisor and no less than two faculty affiliated with the quantitative concentration. To facilitate this process a list of possible courses (not exhaustive) from various departments is provided below followed by sample programs depending on foci.

1. Department of Psychology (PSY) – All require PSY 6112 as a prerequisite
  - 6115 Introduction to Bayesian Data Analysis
  - 7110 Multivariate Statistics
  - 7120 Advanced Testing Principles
  - 7130 Advanced Regression Analysis
  - 7150 Structural Equation Modeling
  - 7170 Health Statistics
  - 7310 Psychophysics and Theories of Perception
  - 7350 Concept Learning & Categorization
  - 7360 Mathematical Modeling of Cognition
  - 8901 Advanced seminars in psychology (must be oriented toward mathematical modeling, measurement, or statistics)
  
2. Department of Mathematics (MATH) – prerequisites (prereq.)
  - 5200 Applied Linear Algebra
  - 5301 Advanced Calculus I
  - 5302 Advanced Calculus II (prereq. MATH 5301)
  - 5320 Vector Analysis

- 5500 Theory of Statistics  
 5510 Applied Statistics (prereq. MATH 5500)  
 5520 Stochastic Processes (prereq. MATH 5500)  
 5530 Statistical Computing (prereq. MATH 5500)  
 5620 Linear and Nonlinear Optimization  
 Or  
 5630 Discrete Modeling and Optimization  
 6510 Linear Models (prereq. MATH 5510)  
 6520 Experimental Design (prereq. MATH 5510)  
 6530 Time Series Analysis (prereq. MATH 5302 & MATH 5510)
3. Department of Education (EDRE) – All require PSY 6111 as a prerequisite  
 7110 Theory and Techniques of Test Development  
 7120 Item Response Theory and Modern Educational Measurement (prereq. EDRE 7200 or PSY 6111)  
 7600 Multivariate Statistical Methods in Education (substitute for Psy 7110; prereq. PSY 6112)  
 7610 Computer Science Applications in EDRE (prereq. 7600)
4. Engineering (EE)  
 5003 Computational Tools for Engineers  
 5213 Feedback Control Theory
5. Computer Science (CS)  
 5800 Artificial Intelligence  
 6420 Artificial Intelligence in Medicine (prereq. CS 5800)  
 6800 Advanced Topics in Artificial Intelligence (prereq. CS 5800)  
 6830 Machine Learning

### Sample Programs

Option 1 (Linear modeling)	Option 2 (Observational Emphasis)
MATH5200 (Applied Linear Algebra) MATH5500 (Theory of Statistics) MATH5530 (Statistical Computing) PSY6115 (Intro to Bayesian Data Analysis) PSY7130 (Advanced Regression Analysis) PSY7150 (Structural Equation Modeling)	MATH5500 (Theory of Statistics) PSY6115 (Intro to Bayesian Data Analysis) PSY7130 (Advanced Regression Analysis) PSY7150 (Structural Equation Modeling) PSY8901 (Meta-analysis) EDRE7120 (Item Response Theory)
Option 3 (Longitudinal)	Option 4 (Experimental Design)
MATH5500 (Theory of Statistics) MATH5510 (Applied Statistics) MATH6530 (Time Series Analysis) PSY7130 (Advanced Regression Analysis) PSY6115 (Intro to Bayesian Data Analysis) PSY7150 (Structural Equation Modeling)	MATH5500 (Theory of Statistics) MATH5510 (Applied Statistics) MATH5530 (Statistical Computing) MATH6520 (Experimental Design)

	PSY6115 (Intro to Bayesian Data Analysis) or PSY7130 (Advanced Regression Analysis) PSY7150 (Structural Equation Modeling)
Option 5 (Math & Computational Modeling with Cognitive Emphasis)	
MATH 5200 (Applied Linear Algebra) or MATH 5320 (Vector Analysis) MATH 5500 (Theory of Statistics) MATH 5630 (Discrete Modeling and Optimization) or EE 5003 (Computational Tools for Engineers) CS 6830 (Machine Learning) or CS 5800 (Artificial Intelligence) or EE 5213 (Feedback Control Theory) PSY 7360 (Mathematical Modeling of Cognition) PSY 7310 (Psychophysics & Theories of Perception) or PSY 7350 (Concept Learning and Categorization)	
Option 6 (Applied Computational Modeling)	
MATH5620 (Linear and Nonlinear Optimization) EE 5003 (Computational Tools for Engineers) EE 5213 (Feedback Control Theory) PSY7130 (Advanced Regression Analysis) or PSY6115 (Introduction to Bayesian Data Analysis) PSY 7360 (Mathematical & Computational Models of Cognition) CS 6830 (Machine Learning) or CS 5800 (Artificial Intelligence)	
Option 7 (Psychometrics/Measurement Emphasis)	
MATH5200 (Applied Linear Algebra) MATH5500 (Theory of Statistics) PSY 7110 (Multivariate Statistics or EDRE 7600) PSY 7120 (Advanced Testing Principles or EDRE 7110) PSY7150 (Structural Equation Modeling) EDRE 7120 Item Response Theory and Modern Educational Measurement or EDRE 7610 Computer Science Applications in EDRE	

## IX. Student Evaluations

### **A. Guidelines for Annual Evaluations that occur in early spring semester of each year**

1. Mentors/Advisors and students should meet in the first two weeks of spring semester to discuss student performance during the past calendar year in all relevant areas (coursework, research, practice, placements, work assignments, etc.).
  - a. All students are required to fill out, review with their mentors/advisors, and submit to the Director of Clinical Training, the *Annual Graduate Student Report and Evaluation of Professional Activities* prior to the beginning of student evaluations. The form will be sent to the students by the Director of Clinical Training at the end of fall semester and should be returned to the Director of Clinical Training by the end of the first two weeks of the spring semester (approved by the mentor/advisor, either by signature on the form or by email confirmation of the approval).
2. Mentors/Advisors should review their students' permanent files and make note of all of the following in a draft letter using the templates for evaluation letters appropriate for their level of training:
  - a. grades, especially those of PR, I, and any grades below B-;
  - b. deadlines met or failed for thesis proposals and final meetings, comprehensive examinations, and dissertation proposals;
  - c. ratings from teaching assignments and assistantship duties;
  - d. progress toward degree requirements;
  - e. professional conduct and personal behavior that bears upon the profession;
  - f. accomplishment of the yearly dissemination of research requirement (2<sup>nd</sup> year students and up); and
  - g. other pertinent information.
3. The Clinic Director will prepare a brief summary of all clinical supervision ratings from practicum and traineeship placements, with focus on areas that need improvement and areas of exceeding expectations, to present to the faculty.
4. The Director of Clinical Training will provide templates for the evaluation letters at the beginning of the spring semester; mentors/advisors should fill in as much information as they can in the template prior to the scheduled meetings where students are reviewed.
5. Mentors/Advisors will report pertinent information from their meetings with their advisees and reviews of the advisees' files to a meeting of the clinical faculty for discussion. The mentors/advisors will serve as their advisees' representatives during the meeting. Feedback and comments will be solicited from other faculty/supervisors and from the Clinic Director. During the meeting, the bases of evaluation will include: 1) academic progress and performance, 2) research, 3) clinical skills, 4) professional and ethical behavior, and 5) GA/RA Duties. Unsatisfactory evaluations will automatically result from failure to meet the thesis and dissertation proposal or defense deadlines, poor academic progress (receipt of a grade lower than B- or presence of many PRs and Is), evidence of unprofessional

- behavior, and failure of any part of the comprehensive examination, but may also result from other concerns in research or clinical training.
6. Following the meeting, the student's mentor/advisor will complete the evaluation letter summarizing the evaluations in each category and specifying the recommendations, if any, from the evaluation. Evaluation letters must be co-signed by the Director of Clinical Training before they are distributed. Letters should be given to students within the first half of the spring semester. Evaluation letters will include an overall rating of student performance, as well as ratings in each of the five evaluation categories: 1) academic progress and performance, 2) research, 3) clinical skills, 4) professional and ethical behavior, and 5) GA/RA Duties. The lowest rating (which is the highest number) obtained in categories 1 through 5 will determine the overall evaluation letter rating. The rating system used is as follows:

**Type I.** The student is generally considered as being on schedule with respect to fulfilling the requirements of the clinical program. Any minor deficiencies of the student's record (e.g., an outstanding PR) are noted. Areas where the student requires additional training and expertise are suggested.

**Type II.** The student has a deficiency (e.g., one grade below a "B-", failure to meet a deadline, failure of comps, low clinical competency rating) that has led them to no longer be on schedule with respect to fulfilling the requirements of the program. The deficiency is described; any steps suggested to correct the problem are also noted. It is anticipated that the student will correct the deficiency between receipt of a Type II letter and a deadline established by the Clinical Section. Failure to correct the deficiency within the prescribed time may be cause for dismissal from the program. A formal remediation plan (see below) will be developed, if necessary, and will be attached to the evaluation letter.

**Type III.** Academic performance (e.g., 2 grades less than a "B-" in any given year) or professional behavior has seriously jeopardized the student's continuation in the clinical program. In this case, a formal remediation plan must be developed and attached to the evaluation letter, unless this rating results in dismissal of the student from the program.

**Type IV.** On the basis of unsatisfactory performance, the student is subject to immediate dismissal from the clinical program.

### **B. Remediation Plans**

Students who have obtained evaluation letters suggesting a need for improvement or who had remediation plans may be further evaluated at any time, to check on progress towards addressing areas of remediation (and individualized based on their remediation plans and deadlines). Depending on the circumstances, these evaluations may also include a formal letter to be placed in the student's folder, or feedback may be provided to the student by the mentor/advisor. In addition, if any faculty member, supervisor, instructor, or other person involved in the training of students asks for a formal evaluation of a student, that can be conducted at any time. Remediation plans will be unique to the student

circumstances and involve a detailed plan, review of progress towards remediation, and deadlines for meeting remediation goals. A template for a remediation plan appears below.

<u>Competency Domain/ Essential Components</u>	<u>Problem Behaviors</u>	<u>Expectations for Acceptable Performance</u>	<u>Trainee's Responsibilities/ Actions</u>	<u>Supervisors'/ Faculty Responsibilities/ Actions</u>	<u>Timeframe for Acceptable Performance</u>	<u>Assessment Methods</u>	<u>Dates of Evaluation</u>	<u>Consequences for Unsuccessful Remediation</u>

### **C. Dismissal from the Program**

Bases for *potential* dismissal from the program include but are not limited to:

- a. two failures of any part of the comprehensive examination.
- b. failures to meet specified deadlines for progress in the program.
- c. two consecutive Type II letters.
- d. unresponsiveness to recommendations and requirements from a previous evaluation; failure to meet a remediation plan successfully.
- e. departure from the standards of ethical and/or professional behavior and laws governing psychologists and the practice of psychology.
- f. 2 grades below a "B-".
- g. a Type III letter (as noted above, a Type IV letter is automatic dismissal).

### **D. Continuation in the Doctoral Program**

For students entering with the bachelor's degree, a formal vote is required for continuation for doctoral training following completion of the M.S. Students are to inform the Director of Clinical Training when they have successfully defended their theses. Once a student has informed the Director of Clinical Training that they have completed the thesis, the Clinical Section will meet to review the student's progress in the program and vote on whether the student will be continued into the doctoral program. It is expected that this vote will take place either within the same semester of the student's successful thesis defense or the beginning of the following semester, should the thesis be defended at the end of a semester. Students' academic, research, and clinical

competencies will be reviewed, as well as their professional behavior, prior to a vote. In order to be continued for doctoral training, students will need to have evidenced satisfactory progress regarding academic, research, and clinical competencies and to evidence high professional and ethical standards for behavior. The student must be favorably endorsed by two faculty members (the student's mentor/advisor and one additional faculty member) for admission into the doctoral program. Following presentation of these endorsements, the Clinical Section (including the Clinic Director) will vote on admission of the student to doctoral training. A two-thirds affirmative vote is necessary for continuation in the program.

## **XI. Other Section and Departmental Policies and Procedures**

### **A. Mentors/Advisors**

Prior to being admitted into the clinical program, students are assigned a faculty mentor. If at any time the student or the mentor decides that the match is not appropriate or optimal, the student may attempt to change mentors. However, the availability of an alternate mentor cannot be guaranteed. If at any time a student secures a new mentor, it is the student's responsibility to inform the Director of Clinical Training and the Assistant Chair for Graduate Studies of the change. If the assigned mentor is a faculty member in the experimental section, the student will also be assigned an academic advisor from the Clinical Section. The academic advisor is to be a member of the student's thesis and dissertation committees and be involved in assisting the student with programmatic planning.

### **B. Appropriate Titles**

In all correspondence outside of the training clinic, students should refer to themselves as Graduate Student as a title. This is to prevent misunderstanding by individuals outside of clinical psychology about the degree status of our students.

### **C. International Student Status**

International students should work closely with the International Student and Faculty Services Office to ensure that they are following all updated policies and procedures for maintaining their student status. This includes completing CPT paperwork for when completing practicum/traineeship and internship training and for maintaining consistent enrollment.

### **D. Student Representatives**

Each year, clinical graduate students select one student to represent them at meetings of the Clinical Section and one student to represent them at meetings of the department faculty. The student representatives are voting members of their respective groups. The student representative to the Clinical Section meetings is invited to participate in all discussions and decision-making of the section, with the exception of the evaluations of his or her peers by the faculty and student grievances that are related to evaluative decisions by the faculty. The student who is the representative to the meetings of the department faculty may also attend Clinical Section meetings if she or he wishes. In addition, there is one student representative who serves on the Internship and Training Committee, the Comprehensive Examination Committee, and the Clinic Advisory Committee. Students also serve on ad hoc committees such as faculty recruitment committees.

### **E. Financial Aid**

The department provides financial aid to almost all its students for five years. The general policy is that students receive tuition waivers and a stipend to help offset living expenses for five years. Financial aid is awarded on merit, and holders of these awards are expected to carry out their responsibilities appropriately. If, in the judgment of the

Clinical Section, a student is not meeting their responsibilities or is otherwise not showing merit, financial aid can be suspended temporarily or terminated permanently.

Students who receive a stipend are expected to spend about 15 hours per week in service to the department. First-year and second-year students normally assist a faculty member with classroom work. Third- and fourth-year students normally teach a course or assist faculty members as research associates. Students funded through research grants may work more than 15 hours and may have slightly different stipends than other students, dependent on the grant award.

Offers of financial aid are, of course, contingent on the availability of funds, but funding has been relatively stable for a number of years. The department's priorities for awarding funding are the first- through fifth-year students; thus students who take an extra year (or more) are unlikely to receive either tuition waiver or a stipend.

### **F. GA Appointments**

Students who are awarded a stipend are assigned the responsibilities of a Graduate Associate, which includes potentially serving as a Teaching Assistant (TA), Research Associate (RA), or Instructor of Record (IOR). TAs are assigned to a faculty member(s) and assist those faculty members for about 15 hours per week with classroom work or administrative activities. The GA assignments last through the week of final examinations. The Assistant Chair for Graduate Studies makes GA assignments, generally a week or two before a new semester begins. Nearly all first-year students are appointed as GAs.

IORs normally teach lower-level undergraduate courses. In the spring semester each year, a two-credit-hour teaching seminar is offered to prepare students to teach. The seminar is a nuts-and-bolts course on how to prepare lectures, how to make up examinations, how to develop rapport with a class, etc. This class must be completed prior to becoming an IOR. During the first teaching assignment, students are also registered in a teaching practicum, to provide them with further training and support as they begin their teaching responsibilities. In the third and/or fourth years, students may teach a course..

### **G. Major Medical Insurance Plan**

The university provides a major medical insurance plan that protects students against major medical and surgical expenses. The insurance plan is mandatory for every graduate student who is registered for at least seven credit hours unless the student submits evidence of coverage by a comparable private insurance plan.

The insurance plan covers the period of September 1 through August 31. Students must be registered for at least seven hours during the semester in which the insurance is initiated. Students are covered for the remaining period through August 31 regardless of the number of hours for which they are registered in subsequent semesters. For further information about the insurance plan, students should contact the business office of the Student Health Service in Hudson Health Center.

Certain students are eligible to receive insurance with lower enrollment than seven hours. Students who are on internship, are working solely on a thesis, are working solely on a dissertation, or have a J1 visa are eligible for insurance if they register for one

credit hour in two or more consecutive semesters. For further information, students should see the Assistant Chair for Graduate Studies.

## **H. Therapy and Assessment Practica**

**Faculty.** A practicum supervision contact hour is defined as one hour of contact between a supervisor and his or her supervisees or class. The optimum range for enrollment in a therapy practicum is five to six students, although occasionally practicum run at seven students or four students.

**Students.** The section uses a team approach to practicum training under PSY 7920 (Clinical Practicum). Students must complete a minimum of 4 semesters (12 credit hours) of PSY 7920. Students will be assigned to treatment teams for practicum training by the Director of Clinical Training and the Director of the Psychology Clinic in consultation with the PSY 7920 practicum supervisors. Although it may not be possible every semester, the section will attempt to have at least one child and one adult supervisor assigned to practicum each semester and, to the extent possible based on the kinds of client referrals to the training clinic, will try to accommodate the training needs of those pursuing elective training in clinical child.

All practicum assignments will be through the department's Training Clinic. Three sections of PSY 7920 are typically scheduled each semester (if possible and dependent on the makeup of student cohorts) and clinical faculty will supervise the PSY 7920 practicum for one or two semesters each year. Faculty will supervise all cases, planning appropriate assessment and therapy experience for students based on client needs and clinical requirements. Students and supervisors should follow the Policies and Procedures manual for the Training Clinic when providing clinical services there.

When students apply for internship, they will need to provide potential internship sites with information about their practicum and traineeship experiences. Because different internship sites have different requirements for how they want the information reported to them, students will need to maintain fairly detailed records of their experience. The Association of Psychology Postdoctoral and Internship Centers (APPIC)-member internship programs use the AAPI form, which is linked to Time2Track for documenting clinical experiences. Students are required to maintain a record of their clinical hours by utilizing the Time2Track program available to students through the department. Since it is a web-based program, students will have access to it from any computer. Students are required to update their hours on a monthly basis and to turn in a hard copy of their accumulated hours to the Clinical Section to be reviewed at the time of yearly evaluations. The Clinic Director will review the Time2Track data on a regular basis.

The following are some general guidelines based on suggestions developed by the APPIC that students might find helpful.

1. A practicum hour is a clock hour. This may actually be a 45 to 50-minute client hour, but is calculated by actual hours, not semester hours nor number of hours per week multiplied by number of weeks in the term.
2. Direct services are actual clock hours in direct service to clients. Direct services include:

- a. direct intervention with clients, subdivided by format of intervention (e.g., individual, family, group) and setting location (e.g., department clinic, hospital, school);
  - b. assessment activity subdivided into formal psychometric and interview/observation/diagnostic techniques; and
  - c. other psychological experiences with students and/or organizations, which includes
    - i. Supervised supervision that students render to less advanced students in the context of learning supervision skills.
    - ii. Program development/outreach programming
    - ii. Outcome assessment of projects or programs
    - iii. Systems intervention/organizational consultation/performance improvement
    - iv. Other activities (e.g., prevention)
3. Time spent about the client, but not in the actual presence of the client, is recorded as Support Activities. Quantifiable activities documented under support activities include:
    - a. Case conferences
    - b. Case management; consultation with other professionals on specific cases
    - c. Didactic training, seminars, grand rounds
    - d. Progress notes, clinical writing, chart review
    - e. Assessment scoring/interpretation and report writing; and
    - f. videotape and audiotape review
  4. Practicum hours must be supervised. The supervision that students receive may be broken down into one-to-one and group supervision.
    - a. One-to-one supervision hours are regularly scheduled, face-to-face individual supervision with the specific intent of dealing with psychological services that students render.
    - b. The hours recorded in the group supervision category should be actual hours of group focus on specific cases. If a practicum course incorporates both didactic and experiential components in the course activity, the didactic portion should not be recorded as supervision activity. This may necessitate breaking the hours spent in a practicum course into supervision and didactic activities by actual clock hours. APPIC offers the following examples to clarify recording of such activity: “For example, if I present on the ‘Psychosocial Issues of HIV Infection’ using examples of cases, it is didactic activity. However, if I present a specific case involving HIV infection and generate a case conference/group supervision response, it would be recorded in supervision. Likewise, Grand Rounds that consists of in-service education on specific topics would not be considered supervision for the purposes of documenting practicum hours.”
  5. Students also need to calculate the number of clients assessed and treated across a range of client diversity characteristics, including race/ethnicity, sexual orientation, disabilities, and gender. Note that these categories are

not mutually exclusive; some individuals will be counted in more than one category. For families, couples or groups, students should count each individual member as a separate client.

Additional Pointers:

1. Assessment and intervention hours refer to direct contact with clients/patients. Practice administrations of assessments or interventions to colleagues, fellow students, or practice clients (i.e., pseudoclients) do not count towards contact hours.
2. When calculating assessment experience, students will need to include number of assessments that they administered and scored as well as the number for which they wrote an integrated report.
3. The calculation of assessment experience also includes the writing of integrated reports. In order to count as an integrated report, APPIC requires the following assessment information to be present in the report: 1) client history; 2) clinical interview; and 3) at least two tests from one or more of the following categories: *Personality assessments* (objective, self-report, and/or projective), *Intellectual assessments*, *Cognitive assessments*, and/or *Neuropsychological assessments*. As noted by APPIC, this “information is synthesized into a comprehensive report providing an overall picture of the patient/client.” Triage/intake evaluations in the clinic can count as integrated assessment reports if both cognitive screening (such as WASI-II) and personality assessment/self report instruments are given in addition to the history and interview. For child psychoeducational evaluations, achievement tests are cognitive in nature and thus an evaluation involving parent and/or child interviews, rating scales, intelligence tests, and achievement tests are integrative in nature. To gain additional assessment and integrated report writing experience, students can complete Advanced Practicum (7925), which involves more complex psychological, psychoeducational, and neuropsychological assessments for adult cases presenting to the training clinic. Child practica typically involve both intake assessments and more comprehensive and integrated assessments and reports.

**I. Practicum at Capacity**

The section recognizes the importance of the training in the Training Clinic, which typically occurs throughout students’ second and third years in the program. It is also recognized that at times it is a valuable training experience for some students to continue with their work in the clinic past their required four semesters of practicum. For example, client needs sometimes suggest the importance of continuity of care with the same student clinician or students may benefit from additional training experiences. The guidelines below are designed to summarize the parameters of practicum training in the PSWC past the students’ third year.

Students who have completed their required four semesters of practicum in the clinic may be permitted to enroll in an additional practicum if there is space available. Given the requirements for second and third year students, they are given first priority for case assignments and space in practica. Advanced students may have the opportunity to be placed for a 5<sup>th</sup> or 6<sup>th</sup> semester into a practicum as an advanced student member, but this

opportunity is typically limited to those occasions where we need to fill a practicum to capacity and does not allow us to open up additional practicum sections beyond those we typically offer in any given semester.

- 1) As soon as the DCT and Clinic Director become aware of an opening in a practicum section, they will notify eligible advanced students of this opportunity and provide a deadline for requesting placement in the practicum.
- 2) Students would request to be placed into the extra practicum section by notifying the DCT and Clinic Director, who determine practicum placements.
- 3) Students should include in their request their rationale for wanting to have this placement and also have the approval of their mentor. Their rationale might include, but is not limited to, a need for additional hours, a desire to continue with long term clients, or to gain supervisory experience.
- 4) If more students make a request than there are open spots available, the DCT, Clinic Director, and practicum supervisor(s) will determine which students can participate based on the rationale provided by the student(s) and on their progress in the program.
- 5) Students completing this more advanced placement would sign up for the 7920 course number for practicum section they are joining.
- 6) Duties and responsibilities of that student could include direct service hours, supervision of less advanced students, co-leading group supervision, etc., at the discretion of the faculty supervisor.
- 7) If the student is able to complete supervisory experiences as part of this practicum placement, they can request that this practical supervisory experience count towards the required practical supervisory experience within the Supervision course (similar to the students who provide supervision to less advanced students when they serve as GAs in the adult and child assessment courses). The approval of such is at the discretion of the instructor of the course.

#### **J. English Fluency Prior to Beginning Practical Training**

If a graduate student in the doctoral program was determined by Ohio University to be required to take the VET test prior to being allowed to teach at Ohio University, that student is also required to take the VET test prior to being in practicum their second year. This information will be shared with relevant students during the First Year Orientation. In addition, any graduate student for whom the Clinical Section has concerns regarding their English fluency after the first year of the program could be directed by the Clinical Section to take the VET test prior to being in practicum in the second year; these students will be informed about this requirement by their faculty mentor and/or their yearly evaluation letter.

#### **K. Background Checks Prior to Beginning Practical Training**

Every applicant who receives and accepts our offer of admission to the clinical program is subject to a background check intended to identify potential risks that might impede placement at health, education, and human service practicum sites and on internship. A background check that reveals a felony conviction could result in immediate dismissal from the program; other infractions may prevent a student from being able to successfully complete selective training experiences and/or the program. This background

check will be conducted during a student's first year in the program and will be paid for by the Ohio University Psychology and Social Work Clinic. It is possible that certain traineeship or internship training sites may require you to repeat a background check, and it will be the student's responsibility to pay for any repeated background checks.

### **L. Traineeship Appointments**

Clinical students normally serve a traineeship of 15 to 16 hours per week in their third and fourth years. For students entering with their master's degree and who have completed prior practical training, it is possible that they can start their traineeship in their second year (if the Section faculty agree this is appropriate and if the traineeship supervisor determines they are ready for placement at the traineeship site). The traineeship provides supervised clinical experience at a variety of mental health facilities, including placements in inpatient, outpatient, VA, clinical child, clinical health, and clinical neuropsychology settings. Traineeships are usually scheduled in blocks of 9 to 12 months, although most are 12 months. Students should consult with their mentors/advisors as to how they wish to fulfill this requirement.

In the late fall semester of each year, the Director of Clinical Training and/or the Clinic Director will hold an informational meeting to inform students about traineeship sites that are available for the upcoming year. Students will be informed of the clinical experiences available, population served, and specific requirements for eligibility at each site. Over winter break, students will need to prepare application materials for the sites they are interested in. At the very least, this will include a CV, a cover letter specific to each site, and a summary of clinical experiences and hours (which could be part of the cover letter, although some programs want a specific AAPI style summary, which students can print from Time2Track). By noon on the first day of classes in spring semester students should provide to the Internship and Traineeship committee a copy of their CV, a sample cover letter, a summary of clinical experiences and hours, and a list of traineeship sites to which they plan to apply; the committee will review these materials and provide students with feedback. After students have applied to various sites, the traineeships themselves will arrange for interviews and will make offers. Traineeships will inform the Director of Clinical Training and the Clinic Director about whom they will interview and also about offers to students. Should students receive more than one offer, they can decide from amongst the sites interested in them as to where they will be placed in the upcoming year. Following placement, a letter of agreement is signed by the site, the student, and the Clinic Director.

Every semester that a student is on an external traineeship they must register for 1CR of PSY7910 (Fieldwork) with either the Director of Clinical Training or the Clinic Director. This is important for maintaining student malpractice insurance. If the traineeship is in our Training Clinic, the student will register for Advanced Clinical Practicum (PSY 7925).

### **M. Traineeship Travel**

Students who travel to external traineeships that are more than 30 miles from their home to their placement will receive a 400-dollar William Snyder Scholarship to help alleviate travel costs. Students must provide evidence (such as a google map from their home to the placement) that their placement is more than 30 miles one way in travel.

Students can receive this scholarship only once during their time in the program. Receipt of the scholarship will be facilitated by the Director of Clinical training after traineeship decisions have been finalized in the spring semester.

#### **N. Program Sanctioned Training Hours**

For students entering the program with a master's degree who completed clinical experiences outside of the doctoral program and for those students who opt to obtain additional clinical experiences other than the traineeships that are required and assigned by the Clinical Section, they must have their supervisors fill out the Program-Sanctioned Training Experience Form (available from the Director of Clinical Training), if they want to have the hours accrued count toward training hours for internship applications. For students entering the program with a master's degree, they must give this form to the supervisor(s) at their prior clinical placements to complete; this should be returned to the Director of Clinical Training. For students who opt to obtain additional clinical experiences while in the doctoral program, they must have this form signed by the supervisor at the site **prior to** the initiation of the training experience. Further, the potential training experience must be reviewed and approved by the Director of Clinical Training **prior to** its initiation. In addition, students who complete clinical experiences that could count as pre-internship direct client hours (see above) as part of their research labs should complete the Program Sanctioned Training Hours (Research) form (available from the research supervisor or from the Director of Clinical training) together with the research supervisor who served as the clinical supervisor for this experience. Of note, not all experiences will be program sanctioned; they must meet criteria for being clinical experiences and must be supervised consistent with accreditation standards.

#### **O. Policy on Working with Diverse Clients in Practica or on Traineeship**

In our APA-accredited program, we are committed to a training process that ensures graduate students develop the knowledge, skills, and attitudes to work effectively with members of the public who embody intersecting demographics, attitudes, beliefs, and values. When graduate students' attitudes, beliefs, or values create tensions that negatively impact the training process or their ability to effectively treat members of the public, the program faculty and supervisors are committed to a developmental training approach 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 clients/patients.

For some trainees, integrating personal beliefs or values with professional competence in working with all clients/patients may require additional time and faculty support. Ultimately, though, to complete our program successfully, all graduate students must be able to work with any client placed in their care in a beneficial and noninjurious manner. 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 client populations or refuse to develop professional competencies because of conflicts with their attitudes, beliefs, or values. If trainees do not feel comfortable or capable of providing competent services to a client because it conflicts with the trainee's beliefs or values, it is the trainee's responsibility to bring this issue to the attention of their

supervisor. Because client welfare and safety are always the first priority, decisions about client assignment and reassignment are the responsibility of the faculty/supervisors.

#### **P. Thesis and Dissertation Committees**

**Thesis committees** Thesis committees must include three members. At least two of the three members must be Tenure Track psychology faculty, one of whom must be the chair. The third member of the committee may be a Tenure Track or Instructional faculty member from the Department of Psychology or a Tenure Track faculty member from another department at Ohio University. Exceptions are permitted with the pre-approval of the Assistant Chair of Graduate Studies. Additional committee members (beyond the required three) are also permitted. Once the committee has been formed, its membership should not change. If some need arises for changing the membership, see the Assistant Chair for Graduate Studies. All members of a thesis committee must approve the thesis proposal as well as the completed thesis.

Members of thesis and dissertation committees are expected to physically attend both the proposal and final defense meetings. If physical attendance is foreseeably problematic or overly restrictive and rescheduling prohibitive or otherwise infeasible, other arrangements may be made (e.g., video conferencing or phoning in) with the approval of both the committee chair and the Assistant Chair of Graduate Studies. For unforeseen events where other arrangements can be made (e.g., illness prevents physical attendance, but not virtual attendance), the committee chair will have the discretion to determine how to proceed, informing the Assistant Chair of Graduate Studies of the circumstances as soon as possible.

For all required forms for thesis proposal and defense, please see the “Checklist and Timeline for Psychology Master’s Degree” on the Department of Psychology website.

**Dissertation committees** Dissertation committees consist of five members and three of them must be Tenure Track psychology faculty. One of the three Tenure Track psychology faculty members must chair the committee. The fourth member must be a Tenure Track I faculty member from another department at Ohio University who serves as the college representative. The fifth member may be anyone with a doctorate in their field (e.g., Ed.D., M.D.) and may or may not be affiliated with Ohio University. Exceptions to this committee structure may be permitted with the pre-approval of the Assistant Chair of Graduate Studies. Once the committee has been formed, its membership should not change. If some need arises for changing the membership, see the Assistant Chair for Graduate Studies. All members of a dissertation committee must approve the dissertation proposal as well as the completed dissertation.

Members of thesis and dissertation committees are expected to physically attend both the proposal and final defense meetings. If physical attendance is foreseeably problematic or overly restrictive, and rescheduling prohibitive or otherwise infeasible, other arrangements may be made (e.g., video conferencing or phoning in) with the approval of both the committee chair and the Assistant Chair of Graduate Studies. For unforeseen events where other arrangements can be made (e.g., illness prevents physical attendance, but not virtual attendance), the committee chair will have the discretion to determine how to proceed, informing the Assistant Chair of Graduate Studies of the circumstances as soon as possible.

For all forms, including approval forms for the proposal meeting, committee members, and the defense meeting, please see the “Checklist and timeline for Ph.D. Degree on the Department of Psychology website.

### **Q. Format of Thesis and Dissertation**

Students are required to prepare a detailed proposal for their theses and dissertations. Generally, the proposals will include an extensive literature search, rationale for their projects, and specific hypotheses. The methodology will detail all of the procedures that are to be utilized, including instruments, proposed participants, and a summary of the statistical procedures to be utilized.

Although the proposals need to be detailed and cover relevant background information and procedures to be utilized, the final thesis and dissertation projects should be in the format of a journal article. The Clinical Section utilizes a journal submission format because students who successfully complete our graduate program in Clinical Psychology are expected to demonstrate a wide range of competencies in research domains. Although not all of our students intend to move on to a professional position in research or academia, our department currently strives to prepare all students for this option; in addition, such training is consistent with and expected in a Scientist Practitioner model of training. Specific guidelines for the format of the thesis and dissertation include the following:

**Proposal Draft:** The standard proposal format requires the student to demonstrate comprehensive and critical review of the research that serves as a foundation for their study. As proposed projects may be outside of committee members’ areas of expertise, an extensive review of the theoretical and empirical literature may be necessary to evaluate the merits and needs of project hypotheses and design.

**Proposal Meeting:** Students will initiate their 2-hour proposal meeting with a short presentation (10-15 minutes). This is to allow sufficient time for critique and discussion by the committee about the proposed project. The student and their mentor should take careful note of committee members’ critiques, concerns, and requested revisions during the proposal meeting so that the student can formally respond to these issues at the time of the defense meeting (see below). Prior to the close of the proposal meeting, the student’s mentor should confirm with committee members which of these issues are necessary for the student to address as they proceeds with the project and prepares the final draft to submit to the committee.

**Final Draft:** The final draft of thesis and dissertation projects will be formatted as a manuscript prepared for publication. Students will format sections, content, and citations using APA publication guidelines for submitted manuscripts. Final drafts will vary in length from student to student; however, overall length will fall within a range appropriate to journal submission requirements in the student’s area of research. At the very least, this will require more succinct introduction, discussion, and reference sections relative to the proposal document. In the methods section, students should include the level of methodological detail that would be necessary for publication of the study in a peer-reviewed journal. The results section may remain more comprehensive than a typical journal manuscript, as students should include a comprehensive review of all statistical strategies used in order to test research hypotheses, including initial analysis of data and statistical test assumptions.

In addition to the traditional manuscript format, final drafts to the committee will include additional content areas as Appendices. The additional sections may be removed or revised upon final preparation for submission for publication outside the university. Appendix sections are listed below.

- a. **Introduction:** If deemed necessary by the committee, the student may include an Appendix (A) to the submitted document, which would address shortcomings in the proposal introduction that were identified by the committee and that cannot be addressed in a shorter manuscript (e.g., a review of an important issue that had been neglected by the student in the proposal draft, a rewrite of a particular section of the original proposal that does not fit into the flow of the final manuscript's introduction, a complete rewrite of the original proposal introduction).
- b. **Methods:** Copies of the instruments used in the study and detailed review of psychometric properties of instruments used in the study should be placed in Appendix B. Before submitting the document to the College of Arts and Sciences, however, copyrighted measures will need to be removed from the Appendix.
- c. **Statistical Analyses:** Supplemental, post-hoc, and exploratory analyses can appear as Appendix C to the document. The student and their mentor can decide which supplemental statistical analyses can be placed in the body of the document and which can appear as Appendix C.
- d. **Limitations.** Students will include an examination of project limitations and their potential impact on the results. If there are limitations to the study that warrant discussion during the dissertation defense but, due to journal style, may not be presented in a detailed way in the main body of the defense document, the student can either orally present a detailed examination of study limitations during their defense meeting and/or opt to include a longer limitations section as an Appendix (D) to the main document.
- e. **Tables & Figures.** Tables and figures should be submitted as separate documents attached to the draft of the manuscript text. Titles and footnotes should be included with the tables and figures and not on a separate page.

Students should also note that additional formatting may be necessary before submitting the final draft to Arts and Sciences. Please refer to the A&S website for specific formatting instructions.

**Cover Letter:** In addition to the defense document described above, the student should provide each committee member with a cover letter, in which they address the committee members' critiques, concerns, and requested revisions that were raised during the proposal meeting. The format of the letter should list, point by point, the specific critique, concern, or requested revision, and the specific way in which the student has addressed or will address the issue (e.g., specific places in the defense document that address an issue, changes to the methodology, additional hypotheses that were tested, indicating the concern will be discussed during the defense meeting presentation rather than in the written document).

**Defense Meeting:** The defense meeting format will differ from the proposal meeting in length (2 ½ hours), presentation requirement, and audience present.

Defense meetings will include a longer presentation from the student (approximately 45 minutes) about their project and will take a format similar to a job talk

or colloquium presentation, followed by oral examination/questions from the committee regarding the project and document. Students are encouraged to use Powerpoint or other visual aids as part of their presentation. Students are reminded that during their presentation they can provide details beyond that provided in their defense document. For example, a student may choose to respond to an issue raised at the proposal meeting during their defense presentation rather than in the submitted document.

For dissertation and thesis projects, meetings will be open to the public during the presentation and questioning. Non-committee members will have the opportunity to ask questions of the student following completion of committee questions.

Students are advised to consider that, although their written document is much shorter, they are still likely to have to answer detailed questions about rationale for study, methodology, statistical analyses, and discussion/ implications/limitations of their study.

Following questions, committee members will conduct a closed evaluation of the student, dismissing both the student and the audience during this process.

Students defending their dissertation and thesis will need to schedule their defense meeting and submit their document to committee members at least two weeks in advance. At this time, students must also submit a proposal announcement form to the Chair of Graduate Studies, who will post the time, date, and location of the meeting via e-mail and in department and college postings.

### **R. Thesis Proposal and Defense Meeting Deadlines**

At a minimum, each student must complete a brief, 3-5 page thesis prospectus prior to the second Monday of April of their first year. This prospectus must be reviewed and approved by the student's mentor and submitted to the Clinical Section director prior to the deadline. The prospectus may include a brief outline and overview of the relevant literature and may include a methodology and timeline for the completion of the thesis. If students do not meet this deadline, they will receive an automatic Type II letter at the end of the year.

Students should have an approved thesis proposal by the Friday of the first week of classes during Spring Semester of their second year. Those students not meeting this deadline will get an automatic Type II evaluation at the end of the year (even if they have proposed between the deadline and the end of year evaluations) and will be reviewed by the Clinical Section for possible action to get them back on schedule. If students do not have a thesis proposal accepted by their committee by the last day of classes during Spring semester of their second year, they will be automatically dismissed from the program. The purpose of this policy is to ensure that students make appropriate progress toward completion of the thesis by the completion deadline; that deadline is the last day of classes in Fall Semester of the third year.

Thesis research will take a lot longer than students may think. If students work on their thesis proposal during the Spring semester of their first year in the context of the Advanced Research Methods course (PSY6120), this likely will facilitate progress on the project. The research proposal that students prepare in spring semester of their first year should further prepare them for their thesis proposal.

In order to facilitate meeting proposal and defense deadlines, it is recommended that students start trying to schedule the meeting two or three weeks in advance of when they want it to occur. People are busy, and it may take several days just to schedule the

meeting. Students are not allowed to set up a meeting until their thesis director says they can. Also, the director must approve the final copy of the document before it can be distributed to other members of the committee. Students are not allowed to start collecting data before the committee approves the thesis proposal. The thesis committee may require changes in procedures that render such pre-collected data useless, which means a student will have wasted a lot of time and effort as well as some of the department's materials and resources.

Once the thesis proposal is approved, students should begin preparing the materials for the project. The department provides some funding to help defray the costs of the research project (see section on "Research Support"). The main office administrators will help students get the materials they need.

If a student does not expect to be able to meet the fall semester of the third year deadline for completing the thesis, they may appeal to the Clinical Section for an extension of the deadline. An appeal is appropriate if circumstances that were beyond the student's control delayed completion of the thesis. Personal illness, significant equipment failure, and lack of appropriate participants when using a special population are among the reasons that may be acceptable. Procrastination or lack of adequate planning do not count. Students should submit appeals as soon as they know that they will not be able to make the deadline. **Note that the section will consider requests for extensions only from students whose thesis proposals were approved by the Friday of the first week of classes during spring semester of their second year.** Continuation of funding will be contingent on either completing the thesis on time or a successful appeal for an extension of the deadline.

In the case when the section does not support the student's appeal, if the student completes the thesis between the end of Fall semester and the last day of classes of Spring semester of their third year, funding will be resumed at the beginning of the following semester after the student successfully defends their thesis. **If the thesis is not successfully defended by the last day of classes during the third year, the student will be automatically dismissed from the program.**

### **S. Deadlines for Candidates for the M.S. and Ph.D. Degrees**

Master's and doctoral degrees are awarded in March, June, August, and November. Once a student decides upon the semester in which they wish to be awarded the degree, they will have several deadlines to meet in order to be awarded the degree. These deadlines are established by the College of Arts and Sciences and change slightly from year to year. Students should contact the Assistant Chair for Graduate Studies or the College of Arts and Sciences for the schedule established for a given academic year. The dates will be for the following:

1. **Registration.** Students must be registered for at least one graduate credit any semester in which they receive service from the university. Having the meeting to defend the thesis or dissertation counts as a service; turning in the final copies of the thesis or dissertation counts as a service; under most circumstances, you must also register for the semester in which you officially graduate. Exceptions to the latter situation are listed in the University Graduate Student Handbook.

2. **Last day to apply for graduation and pay fee for conferral of degree:** Students can either go to the second floor of Chubb Hall to complete a short form and pay a graduation fee or apply for graduation online.
3. **Last day to arrange to take oral examination on dissertation:** Students must report the time and place of the dissertation defense to the office of the Dean of the College of Arts and Sciences. To do this, students should complete the form “Arrangements for the Oral Examination on the Dissertation” which is available online.
4. **Last day to take oral examination on dissertation or thesis.**
5. **Last day to turn in final copies of dissertation or thesis to the College of Arts and Sciences.** Students should see TAD information on the Graduate College webpage for information on how to prepare the final copies and the deadlines for such in any given semester.
6. **Date degree candidates must have all required work completed.** This date corresponds to the last day of the semester.

A few pointers. **The thesis or dissertation copies that students give to committee members must be delivered to them at least two weeks in advance of the meeting.** As mentioned above, students should start setting up the time and date for the meeting well in advance of the meeting; it takes time to find a time at which that many people can be available. Finally, students should be forewarned that it may be difficult to schedule a meeting in the summer. Most faculty are not on contract in the summer and so are not obliged to be available for thesis and dissertation meetings. Some faculty members will make themselves available even though they are not on contract. If a student thinks they will need a summer meeting, they are advised to find out as far in advance as they can whether committee members will be available.

### **T. Final Copies of Theses and Dissertations**

Once the thesis or dissertation committee has approved the work, students should submit final copies of the work to the College of Arts and Sciences. Here are some guidelines for preparing the final copies.

The appropriate style for submitting theses and dissertations is given in the current edition of the *APA Publication Manual*. Please be familiar with that style and use it in the preparation of thesis and dissertation documents. The purpose of the *Manual* is to help authors prepare manuscripts for submission to APA journals. Given that students are required to have their theses and dissertations in the format of a journal article, it is essential that students follow the procedures in the *APA Publication Manual* very closely. However, The College of Arts and Sciences annually produces a pamphlet entitled, *Directions for the format and presentation of theses and dissertations*. This document is also available on the internet at <http://www.cas.ohiou.edu/grad>. The instructions in this pamphlet take precedence over the instructions given in the *APA Publication Manual*. If students have questions about how to prepare the documents, they are welcome to check with the Assistant Chair for Graduate Studies.

#### **U. Time Limits for Completion of the M.S. and Ph.D. Degrees**

Students in the doctoral program in clinical psychology typically receive the M.S. degree as a step toward the Ph.D. Most commonly that degree is awarded at the end of fall semester of their third year. The university has set a limit of six years for completing the master's degree. The six years begin in the semester in which the student enters the program, and the student must graduate by the final semester of the sixth year.

The university has set a limit of seven years for completing a Ph.D. degree. The seven years begin in the semester in which the student enters the program, and the student must graduate by the final semester of the seventh year. The time periods for the M.S. and Ph.D. degrees run concurrently.

Students entering the program with a master's degree have the same time for completing the Ph.D. as those entering with a bachelor's degree. The university automatically assigns students entering with master's degrees 34 credit hours when they enter the program.

#### **V. Degree Conferral and Participation in the Graduation Ceremony**

The doctoral degree cannot be conferred until the student completes **all** of the requirements of our program, including the required APA-accredited internship. This applies to all graduation times (May, August, and December). For students whose internships end after July 1<sup>st</sup>, but who wish to graduate in August, all requirements of the program, including the required APA-accredited internship, must be on schedule to be completed prior to the dates for completion of requirements as posted by the Registrar. If a student has all requirements except for internship completed, and the internship will be completed prior to the final Registrar date for completion of requirements for an August graduation, the student can apply for summer graduation, and the Graduate Chair can provide a clearance for graduation, pending official notification that the internship has been completed. Students need to communicate clearly with their internship site to make sure official notification is sent to the Graduate Chair immediately upon official completion of the internship, so that the graduation clearance can proceed and the student can graduate in August.

#### **W. Extension of the Seven-Year Deadline**

In the circumstance that a student is not able to complete the doctoral program within the seven-year limit, they may request a one-time one semester extension from the Dean of the College of Arts and Sciences (see the Academic Policies section of the Graduate Catalog). Students should note that they are not guaranteed of obtaining an extension if they request one.

Students who require an extension beyond the one-semester extensions must obtain approval for readmission from the Clinical Section (see the Academic Policies section of the Graduate Catalog). To receive an extension or readmission, students must appeal to the section in writing with a rationale for requesting an extension or readmission. Approval by the section requires a positive vote by 2/3rds of the clinical faculty. Criteria for readmission are listed in the Graduate Catalog. As part of the readmission and extension, the section may require the student to complete additional coursework, retake comprehensive examinations, update the dissertation, or fulfill degree requirements that have been added (See the Graduate Catalog).

## **X. Oversubscribed Clinical Courses**

Rarely, student demand for courses exceeds available space. In an attempt to deal with such situations, the Clinical Section has developed policies for oversubscribed courses.

When clinical courses are oversubscribed, the section (through the Director of Clinical Training) will determine who will enroll in the courses on the basis of criteria that make sense for that particular course. The general basis will be that students who need the course the most will receive enrollment preference. Typically students who are more senior in their programs (i.e., closer to internship) will have priority. Priority given on the basis of seniority may be limited to students who are completing the program in a timely manner and who remain on schedule.

When seniority conflicts with needs for specific training in an elective area of study, however, students who are in the major area of study for which the course is required (i.e., child or health or neuropsychology) may be given priority over students not pursuing the additional elective training. For repeatable courses (e.g., practicum), priority will be given to more senior students unless they have outstanding PRs for previous offerings of that course.

When feasible, faculty will try to meet demand by adding another section during that semester, but the reality usually will be that such additions to the schedule will occur during a subsequent semester. On occasion, there may be nothing that the section can do until the next time the course is regularly scheduled.

## **Y. Departmental Student Grievance Procedure**

Purpose. To provide undergraduate and graduate students with a procedure for appealing decisions made by faculty, administrators, committees, and sections in the Department of Psychology.

Province. These procedures are to be used for appeals bearing on policies and procedures developed within the Department of Psychology; they are not appropriate for appeals on issues for which the policy or procedure was established by a different administrative unit. For example, a student who wishes to appeal a grade should follow the grievance procedure given in Section IV.C.3 of the *Faculty Handbook*.

Procedures for appeals. The first step in the appeal process for an undergraduate student is to discuss the issue with the Assistant Chair for Undergraduate Studies; a graduate student should discuss the issue with the Assistant Chair for Graduate Studies. In either case, the assistant chair will work to resolve the student's problem. If the assistant chair is unable to resolve the problem to the student's satisfaction, then, at the student's request, the assistant chair will notify the Chair of the Judicial Committee of a coming grievance. The Judicial Committee will conduct a hearing (see the departmental policy on the Judicial Committee). If the student or the instructor is not satisfied with the recommendations of the Judicial Committee, either party may appeal to the department chair. If the student or the instructor is not satisfied with the decision of the department chair, either party may appeal to the Dean of the College of Arts and Sciences.

Special provisions. Consultation with the Ohio University Ombudsman is available to a student at any stage of a grievance process, although many grievances may be settled at the departmental level.

A grievance against either of the assistant chairs is to be filed first with the other assistant chair. A grievance against the department chair is to be filed directly with the Judicial Committee, which then makes its recommendations directly to the Dean of the College of Arts and Sciences.

### **Z. Judicial Committee.**

**Functions:** The Judicial Committee acts as an appeals or mediation board upon request by a student or faculty member after normal channels of appeal or negotiation within the Department of Psychology have been used. The functions of the Judicial Committee are (a) to hear requests for reconsideration of decisions made by committees, sections, faculty members, and departmental administrators and to hear grievances on other matters of dispute or concern within the department; (b) to mediate, as may be needed; and (c) to make recommendations for action or for policy change or policy development to pertinent persons, committees, sections, or groups.

**Membership:** The Judicial Committee has five members, two elected by the Clinical Section, two elected by the Experimental Section, and the Chair of the Judicial Committee, who is appointed by the department chair. The elected members serve two-year, staggered terms. The department chair and the two assistant chairs are ineligible to serve on the Judicial Committee.

**Procedures:** To initiate an appeal, a person shall present a request for appeal in writing to the Chair of the Judicial Committee, stating in detail the nature of the request or grievance together with his or her reasons for initiating the appeal. The Chair of the Judicial Committee will make arrangements to convene the Judicial Committee to conduct the hearing. The appellant may have a supporting person (faculty mentor/advisor, other student, colleague, university ombudsman, etc.) present at the hearing.

Matters relating to evidence, documentation, witnesses, consultants, records, and reports will be the responsibility of the Judicial Committee. The Chair of the Judicial Committee shall vote only in cases of tied votes among elected members. A summary report of the findings and recommendations of the Judicial Committee will be given to the appellant and to the department chair, as well as to the pertinent persons, committees, or groups.

### **AA. Grade Appeals (From Section IV.C.3 of the *Faculty Handbook*)**

The instructor assigned to a class has full responsibility for grading, subject to the appeal process described in this section. In unusual circumstances (e.g., death, incapacity, or indefinite inaccessibility of the instructor), the departmental chairperson is responsible for the final grade, subject to appeal by the student to the dean as described in this section.

The burden of proof for a grade change is on the student, except in those cases involving charges of academic dishonesty. A student appealing a grade must make a concerted effort to resolve the matter with the instructor of the course. Failing such a resolution, the student may appeal the grade to the department chair or school director. The chair/director must attempt a resolution acceptable to both the student and the instructor but does not have the authority to change the grade. The department chair or director may enlist departmental grievance procedures to assist in resolving the grade appeal at the departmental level. If the resolution at the departmental level is unsuccessful within the semester following submission of the grade and the student wishes to appeal, the

chair/director shall forward the appeal to the dean of the college for action. If the chair/director is the instructor, the student appeals directly to the dean.

If the dean concludes that the student has insufficient grounds for an appeal, there can be no further appeal by the student. If the dean concludes that sufficient grounds do exist for an appeal, the dean shall appoint a faculty committee of five members to consider the case. If a majority on the committee decides that the grade should be changed and the instructor does not accept the recommendation, the committee can authorize the Registrar to change the grade. The decision of the committee is not subject to further appeal. In appeal cases in which the dean is the instructor, the role of the dean will be assumed by the Provost. In those appeal cases involving courses taught by faculty from more than one college, the Dean of University College will review the appeal and, if necessary, appoint the appeals committee.

### **BB. Research Support**

Each student has access to a research allowance from departmental funds to help defray the costs of thesis, dissertation, and nondegree research. These funds can be used to cover such research costs as supplies, small equipment needs, and mailing costs.

Students may also apply on a competitive basis for departmental funds to support research. These funds may be used to carry out a pilot investigation needed to make a grant application more competitive, to carry out an investigation that is not possible without some financial support (e.g., to pay subjects, to cover extensive mailing costs, or to pay for professional preparation of stimulus materials), or to cover thesis and dissertation costs above the allowance available to all students. Students requesting these funds should write a brief description of the project explaining why the funds are necessary for the project or how the project enhances grant possibilities. The funding request is submitted to the department chair. These additional awards will typically be no larger than \$500.

The Department website maintains a list of other university funds available to students to support their research.

### **CC. Travel Support**

College of Arts and Sciences provides up to \$500 for one trip to present research at a conference for a limited number of students each year. Solicitations for this funding will be made three times a year, coordinated by the Assistant Chair of Graduate Studies. Students should apply for this funding first prior to seeking funding from the department. If they are unsuccessful in receiving this funding, students can be reimbursed for up to \$250 when they are the presenting author on a paper, symposium, or poster at a professional conference or up to \$150 if they are attending a conference as a non-presenting author on a paper, symposium, or poster through the department. Within a fiscal year, a student may be reimbursed for one trip. The trip must be approved by the department chair prior to the travel. After the trip, receipts must be presented for travel expenses in accordance with university policies and procedures.

## **XI. History of Changes to this Manual**

### 2000-2001

- Internship committee changed to the Internship and Training Committee with increased responsibility for practica and traineeship placements.
- History and Systems requirement modified so that the alternative test was eliminated. All students are now required to complete the course.
- A brief description of potential costs associated with the internship was added.
- Changes in the section regarding the 260 hour limit to include current policy.

### 2001-2002

- Changes to the time limit section to match the graduate catalog.
- Child clinical internship requirement wording changed (½ year child rotation on internship required)

### 2002-2003

- Extra detail regarding the comps process
- Deletion of references to stipend increase when MS degree awarded
- Addition of required prospectus at the end of the first year
- Changes and updates in the Health Track requirements
- Addition of clinical program requirements checksheet

### 2003-2004

- Change PSY789 to 2 CR (total of six quarters, or 12CR, needed to graduate)
- Students register for Advanced Clinical Practicum (PSY889) while on traineeship
- Cultural Diversity (PSY788) added as a required course
- Revision of student evaluations (i.e., ratings provided in each of five categories)

### 2004-2005

- Research requirement reduced from 4 to 2 courses (or equivalent)
- “Specialization” terminology replaced with “Track”
- Curriculum revision (deletion of PSY650; PSY750A/B mandatory in year 1)
- Addition of PSY626 as a required course
- Revisions to comprehensives grading procedure
- Curriculum revision regarding courses that no longer satisfy our breadth requirement. Deletion of PSY 728, PSY 748A, PSY 884, PSY 762A, PSY 762B, PSY 763A, PSY 764A, PSY 764B)

### 2005-2006

- Revisions to comprehensive exam grading procedures
- Curriculum revision (addition of 641A (Psychoeducational Assessment), mandatory in year 1; addition of 894 (Advanced Clinical Seminar), mandatory in year 2)
- Specification that dissertation proposals must be defended in order for the students to apply for internship
- Addition of a brief section at the very beginning of the manual, titled, Use of this Manual
- Changes to clinical admissions procedures

### 2006-2007

- Curriculum revision (addition of PSY 692 (Research Seminar)) for all first and second year students, each academic quarter.
- Required practicum hours changed from 2 quarter hours for 6 quarters to 3 quarter hours for 6 quarters (i.e., 18 hours now required, instead of 12)
- Change to evaluation procedure, such that, ratings in categories 1 through 5 will determine the overall evaluation letter rating that students receives
- The last section pertaining to the *260 hour limit* was deleted
- Addition (under *financial aid*) of a statement about the maximum limit for receiving funding

#### 2007-2008

- Addition of a section on Program Mission and Objectives
- The elimination of PSY 641A as a program requirement; movement of Personality (PSY 633) to Fall quarter (first year) and Personality Assessment I to Winter Quarter (first year).
- Revision of the information required for APPIC
- Revision of thesis and dissertation format information

#### 2008-2009

- Addition of PSY 894Y (Advanced Seminar in Clinical Supervision) as a requirement for all students
- Addition of a required applied supervisory experience (i.e., PSY 894Z, serving as a GA for an assessment course, or co-supervising a group supervision with faculty supervisor, or other experience approved by the DCT).
- Revision of thesis and dissertation format information

#### 2009-2010

Revision of thesis and proposal deadlines and consequences for missing the deadlines (pgs. 39-40 clinical manual)

- Elimination of PSY 680 (Health Psychology) as a biological breadth requirement; elimination of PSY 707 (Psycholinguistics) and PSY 708 (Judgment) as cognitive and affective aspects of behavior course requirements; and elimination of PSY 736 (Advanced Social Psychology) and PSY 761 (Survey of Industrial and Organizational Psychology) as social aspects of behavior course requirements

#### 2010-2011

- Added information about students required to document clinical hours with Time2Track program
- Revised deadline for students applying for internship to submit materials to the committee
- Eliminated PSY 623 as a course requirement and moved PSY 626 to the spring quarter (from the winter quarter)
- Revised grading for comps such that a third grader is required if there is a 3 point discrepancy between raters
- Added that students need to obtain 24 direct contact hours to obtain credit for an individual practicum (PSY 789)

#### 2011-2012

- Added information about Program Sanctioned Training Experiences
- Added a section that outlines important deadlines

- Added information to the section on “Continuation in the Doctoral Program” outlining students’ responsibility to inform the Director of Clinical Training when they have completed their theses so that the continuation vote can take place.
- Removed statement about requiring 24 direct contact hours to obtain credit for an individual practicum (PSY 789)

#### 2012-2013

- Added information on degree conferral and participation in the graduation ceremony
- Corrected various typographical errors and cleaned up some formatting

#### 2013-14

- Added language about needing to consider faculty workload/staffing in terms for section committees
- Added language for procedures to receive approval to apply for internship to the yearly evaluation section
- Added language about procedures for waiving courses, getting theses approved, and having approval of outside clinical hours obtained from prior graduate work for student’s entering with a master’s degree
- Added language about the master’s degree and thesis requirements
- Added requirement to have master’s clinical hours approved by their prior supervisors
- Added details on time limits for program requirements
- Added details about student members on various committees
- Made changes to training sequence based on section approved changes to course sequences
- Updated student funding section based on current departmental policies
- Added Conscience Clause language per recommendations from APA

#### 2014-2015

- Added language about Group II faculty participating in Clinic Section meetings and on student votes
- Added language about changes to traineeship procedures
- Clarified that MA students cannot waive practica but may be able to start traineeship early
- Updated information about GAships and teaching opportunities/experiences
- Clarified that missing any deadline results in automatic type II evaluation letter
- Added English fluency requirements
- Updated thesis/dissertation committee language

#### 2015-2016

- Removed track language and added details about all specialty training consistent with discussion in section
- Updated all training information to new Standards of Accreditation
- Added information about Background Checks, which was approved by section
- Updated internship and comprehensive exam information based on feedback from respective committees
- Removed the course checklist, as the Advising Center now offers graduate students an Excel macro to track completion of the program

- Added in section-approved information regarding practicum at capacity
- Added in information about tracking research hours that count towards clinical hours
- Removed information about being able to walk in May commencement when completing internship in August, as the university no longer allows this

#### 2016-2017

- GRC passed new bylaws; used their descriptions of the student rep positions to update manual
- added comments about upcoming changes to comprehensive exams (manual needed to be finalized before final changes were made)
- added clinic advisory committee
- added 7926 teaching practicum
- added resource for international students
- added that students and supervisors need to follow the Clinic Policies and Procedures Manual when working in clinic
- added changes to traineeship procedures as per the traineeship sites
- added text about members of thesis/and dissertation committees needing to physically attend meetings (university policy)

#### 2017-2018

- updated admissions procedures based on minor changes voted in by section
- updated comps based on new procedures voted in by section
- added in waiving of History and Systems if completed at the undergraduate level
- added requirement regarding yearly research dissemination to additional requirements of the program
- added appropriate use of student titles
- updated traineeship procedures based on how traineeships wish to run this procedure in the future

#### 2018-2019

- added another reminder that handbook policies/procedures and program requirements may change and students should stay informed
- Added that the Internship and Training Committee will also review traineeship application materials
- Added new references on proper ways to do reviews and MAs for comps
- Added more guidance on page limits to comps
- Updated the internship approval section to reflect changes to annual student evals
- Added requirement that certain courses be completed at certain times
- Updated student evaluation section to reflect the new timeline and procedures
- Added in remediation procedures and remediation plan template

#### 2019-2020

- Updated the forward
- Updated Internship and Traineeship Committee information
- Updated course requirements
- Updated Comprehensive Exam section (per changes requested by students)

- Updated Integrated Report section of Assessment hours
- Updated Traineeship appointment section
- Added in the STDY 9000 registration requirement for internship

#### 2020-2021

- Updated DCT duties/responsibilities
- Removed third stats requirement per section vote after student request
- Updated comps procedures based on student feedback and committee feedback
- Updated course requirement for traineeship registration to Fieldwork
- Updated reference to thesis/dissertation forms
- Added new traineeship travel information based on new procedure section voted in
- Added in new shadowing for first years procedure as voted on in section
- Updated research and travel funding based on CAS and department budget changes

#### 2021-2022

- Reorganized and clarified sections based on student use feedback
- Updated SPEAK test information to VET test per university changes
- Removed clinical health as elective major area of study after section discussion
- Updated course numbers for Advanced Practicum and Fieldwork based on new policy adopted to support faculty workload for practicum supervision at CAS
- Added new rules voted in by faculty for comps revision deadline