



INSTITUTE FOR THE
PSYCHOLOGICAL SCIENCES

Doctor of Psychology (PsyD) Program Training Handbook

2026-2027

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Doctor of Psychology (PsyD) Program Training Handbook

Forward

IPS Vision

The Institute for the Psychological Sciences will be an international center for scholarship and professional training dedicated to the development of a psychology grounded in an integral Catholic-Christian view of the human person. Maintaining the highest academic standards, it will educate new generations of psychologists as well as professionals in psychology-related fields and open new areas of research for psychological theories that explore the relationship of psychology and the Catholic-Christian understanding of the human person.

IPS Mission

The Institute for the Psychological Sciences is an institution of higher education offering Master's and Doctoral degrees. It is affiliated with the Legionaries of Christ. The Institute is dedicated to the renewal of the Catholic Christian intellectual tradition and the integration of the theoretical and empirical bases of psychology and a Catholic view of the human person. The Institute seeks to provide students an effective academic and educational environment that supports the integration of the psychological sciences and a Catholic understanding of the person through teaching and learning both knowledge and necessary clinical skills. It assists students intellectually and professionally as they prepare themselves to respond to their vocation as mental health or helping professionals. The Institute's mission also involves dialogue about its integrative approach with practitioners and scholars, nationally and internationally.

PROGRAM AND TRAINING OVERVIEW

This handbook provides an overview of the clinical skills, procedures, practicum, and internship requirements and opportunities available to students in the Doctor of Psychology (PsyD) Degree Program at the Institute for the Psychological Sciences (IPS or the Institute). This document is adjunct to other program and institutional publications such as the *PsyD Catalog* and *Divine Mercy University Student Handbook*. **All students are responsible for reading and becoming familiar with the requirements of the PsyD program outlined in this handbook.** This document is subject to ongoing review and revisions and students will receive updates as issued. Students are bound by the most recent policies and procedures of the IPS and DMU. It is important for students to read and consider the handbook as a whole rather than isolate certain passages: information of relevance to a certain issue may be given in different sections of the handbook. Students must familiarize themselves with the entire handbook and refer back to it throughout their time in the PsyD program.

I. PsyD Program Overview

The PsyD Program is designed to provide students with a coordinated, progressive and logical sequence of clinical training to facilitate their development as emerging professionals. The training program is aimed at fostering specific clinical competencies. A number of these competencies are achieved in the context of formal coursework. Many others are developed through carefully supervised clinical experiences. The clinical training sequence is a planned course of study incorporating didactic and supervised experiential training. In order to ensure that students are adequately formed in their clinical and professionalism skills, in addition to clinical coursework, students are required to complete a minimum of 1,500 hours of clinical practicum/externship as well as a 2000 hour pre-doctoral internship. The initial year of practicum training occurs in the IPS Center for the Psychological Services (IPS Center) and additional training occurs in off-site externship clinical settings. At the IPS Center, supervision is provided by on-site supervisors, who provide regular feedback to the student regarding their progress.

Admission to, and progression through, the clinical practicum/externship is in part contingent upon satisfactory academic progress and successful completion of all program requirements, including each practica/externship training placement as outlined in the Catalog section: Demonstration of Competencies Related to Psy.D. Program Goals and Objectives, and in later sections of this handbook.

Practicum course training is facilitated by supervision provided at training sites, combined with seminars instructed by IPS faculty. Students in active clinical training, aside from those on internship, are only able to do so under a training contract and are required to be enrolled in the corresponding practicum training course. While site supervisors retain primary legal responsibility for the student's supervision and caseload, the practicum seminar courses extend this training and facilitate extensive exploration of integration issues.

Clinical and academic training culminates in the final year of the program, where students complete a 2000 hour pre-doctoral internship. Internship training is typically a full-time on site placement where

students receive supervision, training, and didactics relevant to their clinical work and professional development.

The doctoral program is based on a *practitioner-scholar model*. As such, a substantial amount of students' time will be spent applying/refining psychological knowledge and skills in clinical contexts. The PsyD Program is designed to produce competent practitioners of clinical psychology who are poised to continually enhance their practice with ongoing developments in the field.

A key distinction in the program at IPS is the fact that all instruction occurs within the Catholic Christian worldview. The IPS's Christian commitment brings with it additional implications for clinical training. First, the religious context is viewed as a '*value-added*' component of clinical training. Students do not receive a weakened or compromised professional training because of the religious component of the program. Second, students are expected to go beyond the field's minimal ethical standards and function in a manner consistent with Christian ethical principles. Finally, students are required to become proficient in integrating a Catholic Christian perspective in all of their professional work.

I.A. PsyD Program Competencies

Graduation with a degree in clinical psychology requires more than adequate grades and scholarly ability. Students must reach adequate levels of competency in psychological assessment and psychotherapy, and possess the ability to exercise good clinical judgment, ethical reasoning, respect for diversity, and professionalism. It is the solemn responsibility of IPS to serve as a gatekeeper for the profession and to ensure that students are suitable.

The Psy.D. competencies measure student attainment of the program's goals and objectives required to earn the Psy.D. degree. Each Psy.D. student is required to achieve, progress, and retain these competencies to graduate from the program. Further, each student is expected to demonstrate continuous and progressive proficiency in the wide variety of competencies as they respond to increasingly complex situations with a greater degree of independence across all levels of their education and training.

The progressive achievement of these competencies are assessed throughout all years of the program. A wide variety of methodologies for assessing student competencies are utilized including: clinical rating scales in clinical courses, evaluation of course related assignments, evaluations from practicum placements and internship supervisors, the PsyD comprehensive exam, and ratings made through the dissertation process.

For more information, see the PsyD Program Catalog.

I.B. APA-Required Competencies

The information in the following table is taken directly (and modified minimally for the purpose of clarity) from APA's [Committee on Accreditation Implementing Regulations \(IR\), Section C: IRs Related to the Standards of Accreditation Part 8: Profession-Wide Competencies](#) included below.

C-8 D Profession-Wide Competencies (Commission on Accreditation, October 2015; revised, July 2017, November 2020, April 2021, February 2022)

The Commission on Accreditation (CoA) requires that all trainees who complete accredited training programs, regardless of substantive practice area, degree type, or level of training, develop certain competencies as part of their preparation for practice in health service psychology (HSP). The CoA evaluates a program's adherence to this standard in the context of the SoA sections that articulate profession-wide competencies at the doctoral (Section II.B.1.b), internship (Section II.A.2), and post-doctoral (Section II.B.1) levels.(p. 15)

Trainees are expected to respond professionally in increasingly complex situations with a greater degree of independence across levels of training.

I.B.1. Ethical and Legal Standards (p. 16)

Doctoral students must act in a manner consistent with current ethical and legal standards of the field. At a minimum, this requires competency in each of the following areas:

- Be knowledgeable of and act in accordance with each of the following:
 - The current version of the APA Ethical Principles of Psychologists and Code of Conduct;
 - Relevant laws, regulations, rules, and policies governing health service psychology at the organizational, local, state, regional, and federal levels; and
 - Relevant professional standards and guidelines.
- Recognize ethical dilemmas as they arise and apply ethical decision-making processes in order to resolve the dilemmas.
- Conduct self in an ethical manner in all professional activities.

I.B.2. Individual and Cultural Diversity (pp. 16-17)

Effectiveness in health service psychology requires that students develop the ability to conduct all professional activities with sensitivity to human diversity, including the ability to deliver high quality services to an increasingly diverse population. Therefore, trainees must demonstrate knowledge, awareness, sensitivity, and skills when working with diverse individuals and communities who embody a variety of cultural and personal background and characteristics. The Commission on Accreditation defines cultural and individual differences and diversity as including, but not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status. The CoA recognizes that development of competence in working with individuals of every variation of cultural or individual difference is not reasonable or feasible.

Doctoral students are expected to, at a minimum:

- Demonstrate an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves; and
- Demonstrate knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities, including research, training, supervision/consultation, and service; and
- Demonstrate the ability to integrate awareness and knowledge of individual and cultural differences, including intersectionality, in articulating an approach to working effectively with diverse individuals and groups.
- Demonstrate the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews differ from their own.

Trainees are expected to:

Doctoral students:

- Demonstrate the requisite knowledge base, ability to articulate an approach to working effectively with diverse individuals and groups, and apply this approach effectively in their professional work.

Interns:

- Demonstrate the ability to independently apply their knowledge and approach in working effectively with the range of diverse individuals and groups encountered during internship.

I.B.3. Professional Values and Attitudes (Professionalism) (p. 17)

Doctoral students must demonstrate a commitment to professional values and attitudes consistent with professional standards and are expected to respond professionally in increasingly complex situations with a greater degree of independence across levels of training.

At a minimum, students are expected to:

- Behave in ways that reflect the values and attitudes of psychology, including integrity, deportment, the integration of science and practice, professional identity, accountability, and concern for the welfare of others.
- Engage in self-reflection regarding one's personal and professional functioning; engage in activities to maintain and improve performance, well-being, and professional effectiveness.
- Actively seek and demonstrate openness and responsiveness to feedback and supervision.

I.B.4. Communication and Interpersonal Skills (p. 17)

The CoA views communication and interpersonal skills as foundational to education, training, and practice in health service psychology. These skills are essential for any service delivery/activity/interaction, and are evident across the program's expected competencies.

Doctoral students must demonstrate effective communication and interpersonal skills. At a minimum, students are expected to:

- Develop and maintain effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services.
- Produce and comprehend oral, nonverbal, and written communications that are informative and well-integrated; demonstrate a thorough grasp of professional language and concepts.
- Manage difficult communication well.

I.B.5. Assessment (pp. 17-18)

Doctoral students must demonstrate competence in conducting evidence-based assessments consistent with the scope of health service psychology.

At a minimum, students are expected to:

- Demonstrate current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, including consideration of client strengths and psychopathology.
- Demonstrate understanding of human behavior within its context (e.g., family, social, societal and cultural).
- Select and apply assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity considerations and contextual influences (e.g., family, social, societal, and cultural) of the service recipient.
- Interpret assessment results, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective.
- Communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

I.B.6. Intervention (p. 19)

Doctoral students demonstrate competence in evidence-based interventions consistent with the scope of Health Service Psychology. Intervention is being defined broadly to include but not be limited to psychotherapy. Interventions may be derived from a variety of theoretical orientations or approaches. The level of intervention includes those directed at an individual, a family, a group, an organization, a community, a population or other systems.

At a minimum, this includes the ability to:

- Establish and maintain effective relationships with the recipients of psychological services.
- Develop evidence-based intervention plans specific to the service delivery goals informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables. This includes the ability to modify and adapt evidence-based approaches effectively when a clear evidence-base is lacking.
- Evaluate intervention effectiveness and adapt intervention goals and methods consistent with ongoing evaluation.

I.B.7. Supervision (p. 18)

The CoA views supervision as grounded in science and integral to the activities of health service psychology.

Supervision involves mentoring and monitoring trainees and others in the development of competence and skill in professional practice and the effective evaluation of those skills. Supervisors act as role models and maintain responsibility for the activities they oversee.

At a minimum,

Doctoral students are expected to:

- Demonstrate knowledge of supervision models and practices.
- Demonstrate knowledge of contemporary evidenced-based supervision literature.

Interns are expected to:

- Apply this knowledge in direct or simulated practice with psychology trainees, or other health professionals. Examples of direct or simulated practice examples of supervision include, but are not limited to, role-played supervision with others, and peer supervision with other trainees.

I.B.8. Consultation and Interprofessional/Interdisciplinary Skills (p. 18)

The CoA views consultation and interprofessional/interdisciplinary interaction as integral to the activities of health service psychology. Consultation and interprofessional/interdisciplinary skills are reflected in the intentional collaboration of professionals in health service psychology with other individuals or groups to address a problem, seek or share knowledge, or promote effectiveness in professional activities.

At a minimum,

Doctoral students and Interns are expected to:

- Demonstrate knowledge and respect for the roles and perspectives of other professions.

Doctoral students are expected to:

- Demonstrates knowledge of consultation models and practices.

Interns are expected to:

- Apply this knowledge in direct or simulated consultation with individuals and their families, other healthcare professionals, interprofessional groups, or systems related to health and behavior.

I.B.9. Research (through the integration of science and practice) (p. 16)

Doctoral students must demonstrate competency in the integration of science and practice. The CoA recognized science as foundational to the HSP. In order to successfully complete programs accredited in HSP, Doctoral students must demonstrate competency through knowledge, skills, and competence sufficient to produce new knowledge, to critically evaluate and use existing knowledge to solve problems, and to disseminate research. This area of competence requires substantial knowledge of scientific methods, procedures, and practices.

At a minimum, doctoral students are expected to:

- Demonstrate the substantially independent ability to conduct research or other scholarly activities (e.g., critical literature reviews, dissertations, efficacy studies, clinical case studies, theoretical papers, program evaluation projects, and program development projects) that are of sufficient quality and rigor to have the potential to contribute to the scientific, psychological, or professional knowledge base.
- Critically evaluate and disseminate research or other scholarly activity via professional publication or presentation at the local (including the host institution), regional, or national level.

I.B.10. Education

Psychologists are expected to have competencies in educational skills including providing instruction, disseminating knowledge, and evaluating acquisition of knowledge and skill in professional psychology.

At minimum, doctoral students are expected to:

- Demonstrates awareness of theories of learning and how they impact teaching.
- Demonstrates knowledge of application of teaching methods.

(American Psychological Association, 2022, February, pp. 15-19; [Revised Competency Benchmarks, 2011](https://www.apa.org/ed/graduate/benchmarks-evaluation-system) retrieved from <https://www.apa.org/ed/graduate/benchmarks-evaluation-system>).

II. Organizational Structure

II.A. IPS Faculty Roles

The **Dean of the Institute for Psychological Sciences (IPS Dean)** and **Director of the PsyD Program (PsyD Director)** is responsible for the effectiveness of the academic program and its programs goals and objectives, and student learning outcomes. These include oversight for the academic, budget, faculty, policies and procedures, and academic appeals.

The **Assistant Director of the PsyD Program** assists the PsyD Director in the oversight of the program focusing on its curriculum, policies and procedures, and APA requirements as well as student support for students progress through the program.

The **Director of Clinical Training (DCT)** has responsibility and authority for the continued development, implementation, and oversight of the clinical training sequence in the PsyD Program as delegated by the Director of the PsyD Program. The DCT maintains information about students' clinical

skill development, reflected through practicum evaluations and other coursework measures of development of clinical skills. The DCT is the primary liaison with practicum and internship agencies. Other duties include approving students' practicum arrangements; serving as a consultant to students and faculty on practicum and internship matters; maintaining practicum and internship information resources; developing and disseminating all policies and procedures that apply to practicum placements and internships; and interpreting/applying those policies to specific cases.

The ***Assistant Director of Clinical Training (DCT)*** works hand in hand with the Director of Clinical Training in the continued development, implementation, and oversight of the clinical training sequence in the PsyD Program as delegated by the Director of the PsyD Program.

The ***Practicum Director of Divine Mercy Training*** is responsible for and oversees the operation and development of the practicum training placement at Catholic University Counseling Center in collaboration with the Director of the Counseling Center and the PsyD Program's Director of Clinical Training.

Clinical Faculty is the term used for a member of the IPS faculty who provides consultation and oversight at the Institute level as the instructor of a clinical practicum class. Ordinarily, the faculty member is not privy to identifying information about clients seen by students at their practicum sites. Consequently, the site supervisor retains primary responsibility for student supervision. The clinical faculty promotes and monitors student skill development throughout the year and conveys information about this to the DCT.

II.B. Training Director & Supervisor Roles

The ***Training Director*** of the practicum or internship site has responsibility and authority for the continued development, implementation, and oversight of the student's clinical training sequence. The Training Director coordinates the supervision of all students functioning at the training site and serves as a liaison with the site supervisors for the purposes of identifying appropriate cases for coursework and maintaining quality supervision. The Training Director is also responsible for coordinating and collaborating with the IPS PsyD DCT regarding the student's progress, areas of concern or remediation, and to provide information about the nature, implementation, and development of the training sequence.

The ***Site Supervisor*** provides overall supervision at the practicum site and may delegate other site personnel to work with the student. The site supervisor will typically be a licensed clinical psychologist, and may at times be a faculty member of IPS (in such cases, students should clarify at the beginning of a clinical experience the role of the supervisor/faculty).

However, there may be situations where supervision by another mental health professional occurs. Such arrangements are acceptable provided the following conditions are met:

- Supervision by another mental health professional is secondary or adjunctive to the student's primary supervision under a licensed clinical psychologist.

The student does not perform services that are outside of the mental health professional's scope of practice (e.g., a psychiatrist or social worker supervising psychological testing would not be appropriate).

The student is obtaining supervised clinical experience in an area contained within the scope of practice for clinical psychology.

The supervisor must be a licensed mental health professional or a clinical psychologist under the supervision of a licensed clinical psychologist (e.g. a post-doctoral resident).

The student receives approval from the DCT office.

CLINICAL TRAINING

III. Expectations & Competencies

When undergoing clinical training it is important for students to recognize that they are setting out to join a profession which is demanding, personally as well as professionally. To be a clinical psychologist requires knowledge and technique, and the attainment of clinical competencies described in this handbook. Yet good clinical practice also requires - even presupposes - a high degree of self awareness, self regulation and the capacity to relate effectively with others in a wide range of challenging situations. Important virtues and attributes underlying success in clinical training might include humility, openness to learning, resilience, grit, tact, flexibility, articulacy, organizational skills, compassion, a capacity to think broadly and insightfully outside of one's own perspective and a high degree of personal maturity and integrity.

Thus, to prepare to work as a clinical psychologist is a complex process - in which formal clinical training plays a vital role, though so does the character, approach, and attitudes of the trainee. Not everyone is suitable to be a clinical psychologist or for the apprenticeship type role necessitated by formal clinical training: acceptance into the PsyD program does not guarantee success.

It is the responsibility of students to work constructively with clinical faculty and supervisors so that each student may maximize the possibilities for their development. It is also the responsibility of students to seek to work on themselves to cultivate and develop the required virtues and attributes which underlie the process of training and indeed subsequent good clinical practice. This may at times prove uncomfortable, learning new skills and knowledge and confronting substantial personal challenges. There is the potential for difficulty and distress; but also personal and professional growth and development.

Clinical training involves realizing clear goals and competencies - and the context and setting for them is qualitatively a relational and human one. Assessment will occur in a progressive fashion with clear expectations and standards being set and more being expected of students as they pass through the training program. The DCT, will then write the clinical reference which assesses a student's level of competency in their internship application. Students should attend carefully to the expectations outlined in this section.

The foundation for all progress in training is an ability first of all to understand and accept the limitations, demands, and responsibilities of the endeavor. It is in such a spirit that the Clinical Training Handbook should be read – with the desire to engage respectfully and enthusiastically in a complex process of growth and development in which the requirements and information set out in this handbook play a crucial part.

III.A. Methods of Instruction, Training, & Evaluation***

This section is in the process of being revised. The revised version will be published once approved.

III.B. Professional Conduct

Throughout their clinical experiences, students are expected to conduct themselves in a professional manner which reflects well on the Institute's commitment to treat all people with dignity and respect. Students must learn to embrace new learning and change in their clinical experience, while simultaneously taking high levels of academic credits - and do so while maintaining their equilibrium and good judgment. Working under stress, and learning to regulate that in healthy ways, should become the new norm.

It is common for beginning students to feel uneasy about assuming real world clinical responsibilities. Students are not expected to start their practicum experience already proficient in professional competencies. They should, however, take their clinical responsibilities seriously, operating under appropriate supervision in a teachable, self-aware manner. Students will be assessed not only on their clinical work but how they conduct themselves in clinical settings, manage application and administrative procedures and maintain relationships with clinical staff and faculty across multiple sites and contexts.

III.B.1. Professionalism Ratings

Professionalism is a required competency for each student in the program and is formally evaluated each semester by clinical supervisors (Appendix E) and faculty (Appendix R). Professionalism ratings below '3 - Functional Proficiency' may adversely affect academic standing and progress through the program.

III.B.2. Punctuality, Responsibility, Ethics and Professionalism

As a psychologist there is a high degree of responsibility inherent to the profession, therefore it is expected that students function on an appropriate professional level at all times. It is necessary for students to comply with direction from supervisors and clinic staff in an open and honest manner. A high degree of collegiality is necessary to work with fellow trainees and clinical staff in an optimal and respectful fashion. Students are expected to develop good organizational, timeliness, self assessment, self regulation, and self care strategies. Personal therapy and developing support networks may often be helpful features. Students should be open with their supervisors and training staff where they are having

problems implementing adequate professional standards of behavior and seek help to develop a plan to realize appropriate remedies.

III.B.3. Care of Clients

Of special concern is the maintenance of ethical behavior: nowhere is this more important than in care of clients. Clients should not be discussed casually or at inappropriate times. Confidential records should be handled with great care and the privacy of clients always carefully protected. Adherence to the principles and ethical standards of the American Psychological Association (APA) is necessary. This document may be obtained from the APA website at: <https://www.apa.org/ethics/code>

The general guiding principle is that students practice in a competent manner that does “no harm” to clients. **By embarking on a doctoral degree program in clinical psychology, one accepts the restrictions this places on individual freedoms in the service of client care.** When accepting a client into one’s caseload, the student is making a commitment to that individual which goes beyond mere contractual obligations. Due to the nature of therapeutic relationships, the intimate details of lives that are often shared, and the inherent vulnerability and difference in power within the relationship, it is incumbent upon the student-therapist to consider the client’s welfare in many contexts. These considerations and appropriate steps are consistent with those taken by professionals in the field at all levels of training and practice. This means that students must:

- a. request additional supervision if needed
- b. be self-aware and open about their own limitations
- c. expeditiously inform the site supervisor of significant problems with cases or client emergencies
- d. seek adjunctive training as needed beyond that which may be provided in the formal structure of the program. This may take the form of additional reading, consultation, training seminars, or certifications.

The following examples of the type of situations that a student might confront are offered for consideration; however, note that many unique circumstances may arise in particular cases [the student should always consult the supervisor when the correct action is uncertain]:

- The student-therapist is responsible for ensuring continuity of care with their clients. This will require careful planning (including adequate notice periods) of vacations or other trips during which the student will be unavailable to the client. There may be circumstances that it may not be possible to take a break when preferred from clinical training and client care (e.g. during a university term at a counseling center or with high risk clients). Trainees need site supervisor approval prior to scheduling or taking any form of leave.
- Students who are considering a leave of absence from the program must inform their site supervisor, the DCT, and their academic advisor in order to support continuity of care for their clients, understand the impact on their clinical training, and provide the site time to address the change in staff and care of clients.
- Many clients may choose to seek therapy from students of the IPS because of the Institute’s unique mission. This may present challenges in the ethical context of *dual relationships* because of common social or religious activities attended simultaneously with the student’s public identity as a ‘clinical psychology student’. It is the student’s obligation to ensure that no client is placed in an awkward or

inappropriate position by social interactions which may occur out of the context of therapy. This may involve absenting themselves from activities or contexts in their life outside of the school.

- It is a challenge to understand what it means to have a public identity as a clinical psychology student. It might be tempting to talk openly about one's general experiences of therapy and impressions of clinical work in a social context to friends or in a small community or online (see section on Social Media Use). Yet, rarely does one fully understand the circumstances of those being addressed and the potential sensitivities there may be around mental health. Comments may be taken with authority when not intended or they may be misunderstood or even communicated directly back to clients. If for instance a student light heartedly spoke disparagingly of therapy at a social gathering, there is a risk of harm to people who hear this who are considering or already in therapy with another provider at the IPS Center or elsewhere. The reputations of students - and the clinics and schools they are associated with - and the well being of the public may be harmed. It is necessary to recognize the responsibility of a public identity and exercise considerable care, and often simply avoid discussing one's professional activities in social contexts.

III.B.4. Activities relating to Mental Health outside IPS

Students should not undertake clinical work or work connected to mental health - such as outreach projects, consultation, supervision, psychotherapy, assessment, clinical presentations, teaching in the area of psychology - outside of an agreed externship or internship or direct and explicit supervision by an IPS faculty member. Within an externship or internship, students should see clients only on the premises of the agency [or an agency-approved site] and only during regularly established agency client hours.

Despite the inconvenience this may cause, it is unethical and often even illegal for a student to engage in clinical activities outside of a recognized supervised externship or the scheduled hours of operations at a clinic, while in graduate school. Any students who hold an independent mental health license must inform the DCT Office at the outset of their time in the program or at the time of licensure (if this occurs after enrollment in the program) if they wish to undertake any independent clinical work while in the program.

This requirement applies to students who have completed their internship and are seeking to continue their clinical work. In such cases, post-intern students may only undertake clinical practice under a training agreement between the student, site, and program (i.e. Appendix G) and the student must be enrolled in an onsite practicum course (i.e. PSY901, PSY902) when training. Because the work is post-internship, students should be aware that the hours they accrue would not count to degree requirements and the hours likely would not count towards licensure as post-doc or pre-internship hours. Additionally, post-internship clinical work can only be compensated per training handbook requirements in the form of a stipend or salary and not on a commission or hourly basis (See [IV.B.3. Conditions to apply during Practicum Placement \(IPS Center or External Site\)](#) subsection "c Compensation"). Any financial arrangements must be discussed and approved by the DCT office and students should also consult the Financial Aid office regarding any potential impact on their financial aid. Finally, for students post-internship we strongly recommend that they do not engage in clinical

training so that they can focus their time and efforts on the remaining program requirements (typically their dissertation).

In keeping with the APA Ethics code, students should not represent their status/enrollment in the PsyD program as a qualification or evidence of expertise as part of their work under the separate mental health license (e.g. in a biography on a practice website, to their patients/clients, etc.). Moreover, students must notify all practicum/internship supervisors and training directors of their independent mental health license and discuss the appropriate limits of their roles. Students are strongly encouraged to consult with their licensing board and professional liability insurance providers (both for their separate license and for their work as a doctoral student) for additional guidance and clarification. Similar considerations and potential limitations to training may occur for those paneled with insurance providers under their separate independent mental health license.

All students should abide by IPS policy concerning publications, postings, interviews and presentations in a public or semi-public setting in relation to the mental health field or Divine Mercy University, gaining permission from the Program Director prior to engaging in any such activity (See DMU Catalog).

It is important in developing a long term career trajectory and successful internship application, to build up a full and impressive CV through appropriate professional activities and networking. Opportunities for this are often offered outside Divine Mercy University. Examples might include taking part in external clinical research projects, giving academic presentations at conferences, writing for psychology journals or publications, engaging in additional clinical 'Continuing Education' training at outside organizations, and becoming active in professional associations.

In such circumstances, students should consult the Program Director well in advance of committing to any such activity. It may be that supervision, permission or oversight by a faculty member can facilitate the activity - but no student should assume that permission will be forthcoming. Students should exercise caution and if in doubt consult the DCT office as to the correct procedures.

III.B.5. Social media use

Students are required to exercise particular prudence with regard to online presence and social media use in two respects:

1. The policy above on public or semi-public comment connected to mental health applies to online presence.
2. In light of their public role as a student psychologist, students are required to consider the APA Ethics Code in connection with personal internet use and social media. It is necessary to pay special attention to the principles of beneficence, non-maleficence, and integrity and the sections on privacy, confidentiality, multiple relationships, and therapy.

It is important to be conscious that anything posted online is potentially public and may be seen by clients or those who may know them. Facebook, X (i.e. Twitter), Instagram, LinkedIn, YouTube, Tiktok, Yelp (and other ratings websites), Reddit, dating websites/apps, and chat rooms are particularly problematic. Even if precautions are taken to restrict access, students should be aware that others may

repost or report their personal information, images and other material. It should also be acknowledged that it is not routinely possible to confirm or know the identity of other users of online platforms.

Some self disclosure online is almost inevitable, though there are some precautions it is necessary to take. These include but are not limited to:

1. Students should consult with their supervisors to set firm boundaries with their clients in Informed Consent proceedings concerning social media use. It is common to make a mutual commitment routinely not to access personal information or engage in processes of online ratings about mental health services. It is good practice to discuss strategies to address any inadvertent boundary violations which might occur.
2. Students are advised to minimize needless identifiable online presence, and/or restrict access to personal information whenever possible. They should routinely consider when thinking of posting material, how this content might be used or misunderstood by clients and conceivably how it might distort and interfere with therapy.
3. Students should never 'friend/follow' or accept being 'friended/followed' by a client online.
4. Students should exercise caution regarding self disclosure to other online users unless sure of their identity
5. If students are unsure how to proceed or become aware of an online multiple relationship or boundary violation they should consult their supervisor in the first instance and take matters to their academic advisor or DCT if unsure how to proceed.

III.B.6. Complete all administrative requirements

As professionals in training, students are responsible for organizing, completing, and submitting their administrative tasks in a timely and cooperative manner. Included in administrative professionalism is prompt communication about areas of confusion, difficulty, or causes for delay.

Examples of administrative duties are not limited to but include:

- a. Completing client records in a timely and professional manner
- b. Submitting all required practicum documentation, as outlined below, along with any additional documentation
- c. Maintaining personal copies of practicum documentation (Proof of liability insurance coverage, appendices, signed record of training hours, etc. - only documents which do not contain identifiable client information)
- d. Being available for required work hours.
- e. Feedback from students regarding agencies and supervisory experiences is necessary and encouraged at all times. This information is vital to the IPS's efforts at building and maintaining the highest quality of clinical training. It is important that students be honest and open in their feedback. In addition, the IPS encourages open and frank discussion between its students and their supervisors.

III.B.7. Supervision

Students operate clinically under the license of their supervisor. They should act with respect given the trust being shown in them. Students are required to prepare for supervision, bringing questions and

material connected to their recent sessions or issues. They are required to be open concerning their progress and development - particularly when they are encountering difficulties. Students should also be open with their supervisor about their experience of the client and all details which may be relevant. They must inform the supervisor (and Clinic Director or on duty supervisor) immediately of any risk management issues. Students must implement what the supervisor requests of them in an honest way. Should problems develop in the student- supervisor relationship which are not easily resolved using good communication skills, students should consult the DCT office. See the Supervision section below for further details.

III.B.8. Communication

As part of their academic and clinical work, students are responsible for communicating with a wide variety of professionals, including supervisors, faculty members, potential training sites, and staff members. In all such communication, students are expected to engage in a respectful, timely, and responsible manner. Included in professional communication is gracious awareness and at times acknowledgement of other's time and efforts on behalf of the student. This awareness should also take the form of reviewing relevant materials and consulting other resources (e.g. Orientation slides, personal notes, asking peers, etc.) to find answers to questions as a first step.

A significant amount of communication occurs over email. In light of this, it is incumbent on students to familiarize themselves with appropriate email etiquette at the professional level.

III.B.9 Appropriate Professional Titles & Signature Lines

Students have the ethical and professional obligation to describe their academic and clinical roles accurately and appropriately. This includes when speaking with others as well as in email signature lines.

Doctoral Student - 1st year on until completion of dissertation proposal AND comprehensive exams

PsyD Candidate - After successful completion of dissertation proposal AND comprehensive exams

Clinical Psychology Extern - Typically 2nd-4th year when in practicum training

Clinical Psychology Intern - Typically in 5th year when on internship training

Students should also be mindful to use appropriate professional titles when interacting with professors, staff, and training partners at practicum and internship sites, unless given other direction. For example, Dr. Jones, Dean Smith, Mr. Gonzales, Mrs. Robbins, etc.

III.B.10 Use of Artificial Intelligence in Clinical Training

The incorporation of Artificial Intelligence resources is an emerging domain of the field and practice of psychology. Although there may be benefits to these new resources, there is not a sufficient research base to indicate best practices for integrating Artificial Intelligence resources into clinical practice in a manner that protects and serves patients. (For more information see APA Statement: Artificial Intelligence and the Field of Psychology - Policy Statement, August 2024) Moreover, given the importance of development in the core competencies of the profession of psychology through clinical

training activities, the use of Artificial Intelligence resources in clinical training may interfere with the trainee's ability to develop the appropriate knowledge, clinical judgment, skills, and attitudes that are essential for their development.

In light of these concerns, the use of Artificial Intelligence resources in clinical training activities should be undertaken with extreme caution and in many cases is prohibited. In all cases, any use of Artificial Intelligence resources must be disclosed and reviewed with the primary supervisor prior to being incorporated into treatment or treatment documentation. Given the essential ethical and legal standards of maintaining confidentiality (e.g., VA Legal Codes, HIPAA, APA Ethics Code, etc.), trainees may NOT input a patient's clinical information into Artificial Intelligence programs. Artificial Intelligence resources should NOT be used to generate the primary content included within a client's medical record. Examples of unacceptable use of Artificial Intelligence resources in clinical settings include but are not limited to: clinical notes, reports, or documentation, generation of treatment plans, communication to patients, supervisors, sites, cover letters to patients or training sites, etc.

In keeping with the broader DMU Catalog policy regarding "Use of Artificial Intelligence in Writing" (p. 32), ChatGPT and other Artificial Intelligence resources cannot be considered primary or secondary sources.

For additional guidance, students are directed to speak directly with their site supervisors & training director and consult with the DCT office as needed. Students may also consult APA's (2025) "[Ethical Guidance for AI in the Professional Practice of Health Service](#)" guidance document.

III.B.11 Professional Development Meetings

To educate students on the nature, purpose, and skills required for competency in professionalism as graduate students, members of the professional field, and as clinical trainees, the DCT holds bi-weekly meetings focused on professional development throughout the first academic year. The meetings include a complete review of this training handbook helping students to understand how the academic and clinical training sequence is structured to educate and form them in the core clinical competencies of professional psychology. Throughout the year, students are encouraged to:

- Grow in self-reflection promoting their learning, growth, and self-care;
- Identify (often a variety of) career goals and interests;
- Formulate training paths that progressively build towards these goals; and
- Engage proactively in their professional community within the classroom, university, and broader professional community.

These meetings serve a number of purposes. First, they help students to acclimate to the rigors and expectations of doctoral-level academics through the discussion of the necessary skills and attitudes to succeed in higher level education. The meetings also provide information on how to engage effectively and appropriately in clinical training activities. The meetings serve as a space of support and opportunity for clarification when questions or issues arise outside of classes or about concerns that

apply to multiple classes. Finally, these meetings help to prepare students for the practicum sequence beginning in the summer following their first year.

IV. Clinical Training Sequence

The dedicated Clinical Training sequence involves a four-year program. It involves a planned, sequential and developmental progression building prescribed competencies. The primary mechanism is direct supervised experience of clinical work in clinical settings both internal and external to IPS. This is complemented by the acquisition of necessary skill and knowledge gained through the academic PsyD curriculum. The sequence introduces increased breadth as well as depth with on-going opportunities to gain supervised practice in a variety of areas of clinical practice.

Students generally begin their dedicated clinical training in their second year. It begins with a year-long training experience at the IPS Center for Psychological Services (i.e., PsyD-2) supervised generally by IPS clinical faculty. Students then go on in their third and fourth year of the PsyD program to obtain agreements with local outside agencies as additional practicum training. In order to be well prepared for the rigors of internship training as well as to increase eligibility during internship applications, the predominant focus of practicum training should be on the provision of therapy with adjunctive training opportunities focusing on clinical assessment. Put another way, the program requires that students complete a minimum of two practicum placements focused on training in individual, group, or couples therapy. In light of this focus, students are required to seek approval from the DCT prior to accepting a year long practicum placement that offers only assessment training.

In addition to these practicum experiences, students are required to be enrolled in clinical practicum classes every time they take up an externship placement as part of the IPS curriculum. The practicum course sequence parallels the practicum training sequence such that the activities, structure, focus, and expectations regarding student participation in the practicum courses evolve as students progress in their training. These classes provide clinical consultation and discussion on relevant topics with a licensed clinical psychologist given from the perspective of the training models taught through the Institute. Topics covered in the practicum courses include: case conceptualization; professional development; knowledge, awareness, sensitivity, and skills when working with diverse individuals and communities; ethical considerations and decision making; self-care; navigating professional issues at training sites; and the integration of a Catholic-Christian view of the person. If students are in clinical training between the Summer and Fall semesters, they will be given the opportunity for regular consultation with the DCT office to support their training needs.

Typically, in the fifth year of the PsyD program, clinical training culminates in the pre-doctoral internship. This final year of clinical training is a 2000 hour, full-time experience for which students apply upon completion of necessary program requirements. Internship applications are accepted at internship sites nationally and internationally (i.e., Canada). The process is a competitive one, and students are expected to be enrolled in a full-time clinical internship at a fully established and accredited site as prescribed below.

Progression through, the clinical practicum/externship is contingent upon satisfactory academic progress and successful completion of all program requirements, including training placements. Students should make sure to grasp two factors:

1. The completion of appropriate documentation for the DCT office, as detailed throughout this handbook is of vital importance to progress through the PsyD program. Without it, there is not the proof required to support the contention that clinical training has actually taken place - without which, graduation and, subsequently, licensure becomes highly problematic.
2. Early in clinical training, students must explore and begin to formulate long term career goals. These should guide the student in assembling evidence showing focus, motivation and the development of clinical skills in ways explicitly relevant to the kind of clinical sites where they wish to apply for internship. ***Students are strongly advised to consult their academic advisors, supervisors, and/or the DCT throughout their training on finding appropriate ways to facilitate a successful internship application and subsequent career path.***

Further details on documentation and preparing for internship are in the respective sections below.

IV.1 Students Out of Sequence

As going “off-sequence” could be detrimental to a student successfully completing the PsyD program, students must complete an “Out-of-sequence Request Form” (see Appendix S), and agree to all conditions as stated. Students should refer to the policies in the PsyD Catalog under “PsyD Enrollment Status” and “PsyD Curriculum”.

See Appendix U for an overview of the PsyD Program Curriculum’s required, progressive course sequence.

IV.A. Clinical Predoctoral Practicum Placements

IV.A.1 Clinical Hours Requirements

The pre-internship clinical experience, ‘Practicum’ or ‘Externship’ requires a minimum of 1,500 total hours of supervised experience, which are typically obtained over three years of practicum/externship training. This requirement should equip students for advanced clinical training during internship, facilitate a competitive internship application, and meet the licensure requirements for pre-internship hours in most jurisdictions. (Virginia's legal training requirements for clinical hours can be found here: [18VAC125-20-54. Education requirements for clinical psychologists.](#)) However it is incumbent upon individual students to check that their training hours meet particular requirements of the state, territory, or country where they intend to practice. (For additional information, see [Psy.D. in Clinical Psychology: Professional Licensure Disclosures](#)). The total hours requirements are broken up accordingly:

1. A minimum of 1500 hours of supervised professional experience is required of each student before they begin an internship placement. Practicum start and end dates (and breaks for holidays etc.) vary but if a student were to work for at least 40 weeks for each of their Practicum placements and attend

8 hours a week for the Introductory Practicum and 16 hours a week for the Intermediate and Advanced placements - $((8 \times 40) + (16 \times 40) + (16 \times 40) = 1600)$ this should be easily achieved.

- a. If you consistently exceed 16 hours a week of practicum hours, you must consult with the DCT.
2. A minimum of 765 hours (a little more than half of the 1500) must be obtained from service-related activities, such as: psychotherapy, clinical interviews, psychological assessment, therapy note and report writing, case presentations, and consultations. Of this figure at least **475 hours shall involve direct or 'face to face' patient/client contact.**
3. The remaining minimum of 735 hours (the remaining half of the 1500 approximately) must be obtained from supervision and other support hours such as reading clinical manuals and research to inform treatment, practicing assessment protocols, skills training, clinic meetings and administrative activities. Of this figure **a minimum of 150 hours shall involve direct individual supervision.**

Several factors are important to note. First, these figures are *minimums* for graduation - it is likely that many students will exceed them and this is recommended. Second, the PsyD program policy requires that students receive one hour of supervision for every four hours of client contact, each week; and at least one hour of individual supervision for every assessment battery. Students should note - and their supervisors are required to commit to this requirement (See Appendix G) - that as client numbers rise so does the provision of supervision. Third, supervision must be provided by a doctoral level psychologist appropriately credentialed for the jurisdiction in which the program is located. Supervision can be provided by doctoral interns or post-doctoral fellows in psychology, under the supervision of a psychologist appropriately credentialed for the jurisdiction.

A more detailed breakdown of types of hours - what distinguishes direct client contact, other service related activities and support hours - is given in the [Gaining and Recording Clinical Hours Section](#) below. Different types of supervision and consultation are also distinguished there. For the sake of clarity and convenience, the *minimum* requirements for the acquisition of hours are summarized in the table below:

Table: *Minimum Hours Necessary to Fulfill Pre-Internship Supervised Experience Requirements*

Program Year	Minimum Direct service-related client face-to-face (interviews, treatment, assessment)	Minimum of Other service-related (report-writing, case presentations, consultations)	Minimum Individual Supervision	Minimum of Other (support) estimates	Minimum Total
2nd year	75	50	20*	105	250
3rd year	200	120	65	240	625
4th year	200	120	65	240	625
Total	475	290	150*	585	1,500

* These supervision hours represent minimum requirements - weekly supervision throughout the year in the IPS Center during the Introductory Practicum ensures these levels are significantly higher. In all cases, individual supervision should always be 1 hour of supervision for every four hours of face to face direct service. Group

supervision can be supplemented for a second hour of individual supervision at a rate 1 hour of group supervision for every two hours of face to face direct service. Put another way, students must always receive at least 1 hour of individual supervision per week.

These requirements are based upon the American Psychological Association *Model Licensure Act* (2010), the Association of State and Provincial Psychology Boards (ASPPB) *Guidelines on Practicum Experience for Licensure* (2009) and the Virginia Administrative Code (18VAC125-20-65. Supervised Experience).

IV.A.2. Introductory Clinical Experience

The requirement of 250 hours minimum of supervised professional experience for the Introductory Clinical Practicum which occurs in the second year of the program requires 1 year long placement at the [Catholic University of America \(CUA\) Counseling Center](#).

In addition to direct service hours, students will be expected to participate in didactics, meetings, projects, group work and in-service training as deemed appropriate and scheduled by the Center Training Director. These might consider such areas as the legal and ethical issues of practice, the practical issues of practice, case management or record keeping, as well as the administrative structure and functioning of clinical settings. There are no 'set days' of the week for this placement; students are expected to be available throughout the working week at the discretion of the Center Training Director. Additional expectations regarding the introductory clinical experience requirements at CUA are agreed upon and documented in [Appendix G: CUA Introductory Practicum Agreement](#).

IV.A.2.a. Introductory Practicum Repeat Policy

Per the PsyD Program requirements, a student must receive 'satisfactory' ratings (at least of '3') on their Appendix E: Clinical Site Evaluation of Extern for successful completion of practicum training at the introductory practicum site. If a student receives a rating below a 3 on their Fall competency evaluation, their eligibility to apply for and accept externship training placements will be determined by the DCT, Training Director of the introductory practicum site, and their individual supervisor. Along with this determination a remediation plan following the policies outlined for remediation in the PsyD Training Handbook will be developed.

A student may be determined to be provisionally eligible to participate in the local externship application process. In such cases, the student's clinical competencies will be reevaluated approximately 2 weeks prior to formal acceptance of an externship offer (no earlier than mid-February). At the time of this reevaluation the student must receive satisfactory ratings on all domains in order to accept an externship training offer.

If a student is determined to be ineligible for external training and/or a student receives a rating below a 3 on their Spring or Summer competency evaluations, that student will be required to continue in the introductory practicum site in a pre-agreed capacity to remediate identified areas that are below satisfactory rating. In such cases, a plan will be developed to give the student the opportunity to remediate and demonstrate competency in the areas rated below a 3 so that they are able to achieve a passing grade for their introductory clinical experience in accordance with the PsyD program's remediation policies.

IV.A.3. Intermediate Clinical Experience

The requirement of 625 hours of supervised professional experience for the Intermediate Clinical Practicum which occurs in the third year of the program entails a year-long placement of an average of 16 hours per week experience in off-site externship clinical settings. Students are expected to identify and secure placement at an externship site approved by the Director of Clinical Training. Details of this nature of this process are given below in the Specific Guidelines section.

IV.A.4. Advanced Clinical Experience

The requirement of 625 direct client contact hours of the advanced clinical externship is typically initiated in the Fall of the 4th academic year, and continues until the beginning of Internship training. The same conditions apply as given above for Intermediate Clinical Experience.

IV.A.5. Additional Practicum & Summer Placements

It has become more common for some students to seek out additional externships over the summer, at sites which offer short term placements to conduct assessments. This is in no way expected; though some students with no assessment experience or limited face to face hours may choose to broaden their experience and strengthen their CV.

If students intend to apply for a summer placement, it is necessary to receive approval from the DCT, who will work with the student to ensure this additional training placement fits in with academic commitments and compliments their training progression. There is no formal application process such as exists for full academic year placements. Opportunities over the summer may be advertised via the Greater Washington Clinical Psychology Programs Council's (GWCPPC) externship index list (<https://psychpracticum.gmu.edu/externships/>), via email, or word of mouth. Students must upload an Appendix G and other documentation as directed (See documentation section for more information).

Students may undertake a third year of externship for one of three reasons: students are out of sequence and must complete remaining coursework before Internship, students need to remediate prior to Internship, students wish to gain additional clinical hours or experience before applying for Internship.

In cases where a student's clinical skills and experience are judged to be in need of improvement prior to the pre-doctoral internship, a student may be formally required to do an additional practicum during the program in order to appropriately establish his or her clinical competency. In all cases, the decision and its consequences, based on the recommendations of the PsyD Program Director, student's academic advisor most familiar with the student's progress, the DCT (and in some cases, the student's direct supervisor), will effectively place the student under formal Remediation (see Remediation section below).

If taking an additional externship year outside of the normal training sequence, it is necessary to abide by all regulations and documentation relating to externship placements as detailed in this handbook. Please note all students on externship placements of any kind, over summer or during the full academic year, must register for and attend a Practicum class, in the year and required sequence. This applies even if the full sequence of pre-internship practicum placements (Introductory, Intermediate, Advanced)

has already been completed. It also applies to students, out of sequence taking an additional externship year, who are on full year placements at an externship site who for whatever reason have their externship extended beyond the end of the spring semester. These students need to register for the Summer Term Practicum class.

Students who are seeking clinical training/work following the completion of their internship should see section [III.A.4. Activities relating to Mental Health outside IPS](#) for clarification regarding program requirements.

Students who are interested in extending their site placement should see section [IV.C.1.b.1 Extending Site Placement](#).

IV.B. Specific Clinical Training Guidelines

IV.B.1. Gaining and Recording Clinical Hours (Completed in ELC)

Students must work and account for every hour they spend on clinical placements. If they are to meet the hours' requirement given above, they must work their full required hours - a minimum of 8 hours/16 hours a week, depending on whether they are in their Introductory or Intermediate/Advanced Practicum.

Should a student feel that they do not have enough work to do (they don't have many clients or projects despite requests for more), they are expected to use the time in 'Preparation' or 'Didactic' hours to serve and facilitate their clinical work (reading of clinical manuals or watching therapy videos or practice assessment procedures, etc. to prepare for and facilitate their placement). As part of their broader professional development, it is important for students to make this transition to developing self-directed skill/knowledge acquisition pertinent to their clinical work. Clinical psychologists try to gain an in-depth understanding of multiple clinical subjects, and this project has no 'completion date': they update, research, and develop constantly as a career-long occupation to facilitate their clinical work.

Hours should be recorded in 'Experiential Learning Cloud (ELC)' (formerly Tevera) (<https://divinemercy.tevera.app/#/logon>), via the 'Timesheets' section found in the landing page. ELC is an online platform that aids in documenting a student's clinical training forms, training progress, site placement, supervision, and licensure tracking. Please ensure that you follow the account registration instructions sent via email at the start of your practicum year. The purpose of logging and later verifying your training hours is to provide the necessary evidence that the hours occurred to meet program, internship application, and licensure requirements.. Crucially, students are required to provide this level of detail to describe their clinical experience on the APPIC application form for Internship *and* on state licensing board application forms, should licensure be pursued. The procedure for Hours Tracking is as follows:

a. Training Placement Hours Tracking:

It is necessary for students to log their hours each week in ELC under the 'Timesheets' section. Students should then complete the 'Weekly Hours Report' assignment in the corresponding DCT Course on a weekly basis.

- b. **Supervisor Signature:** Each student should initiate and submit their 'Semester Hours Summary Report' electronically via ELC to their site supervisor for review and approval. Their supervisor will sign the report to verify that the hours are an accurate summary of the student's training experiences.. This signed form should be completed in ELC at the end of the Fall and Spring semesters and again in the summer when a student's last practicum placement for the year ends. Please note that only the reports signed by the supervisor are evidence of hours completed. As stated previously in the handbook, students are strongly encouraged to keep copies of all signed hours for their records.
- c. **Multiple supervisors:** If a student has a supervisor for assessment and another for therapy at the same time at the same site, or the supervisor changes halfway through the term, there are two options depending on the circumstances.
- It is acceptable to have only one overall supervisor or a Training Director sign off for all the hours if they can attest that the hours took place.
 - Alternatively, two or more supervisors can sign the same hours report, indicating the type of hours they are each signing off on and the semester in which this work took place (via the 'comment' or 'attachment' options on the ELC task).
- d. **Need for accurate updated reporting:** only fully signed 'Semester Hours Summary Report' at the end of each semester, and the end of summer count as hours accrued. If there is no proof that hours were carried out, they cannot be counted towards final totals for purposes of graduation requirements, internship applications, or licensure. Students with inadequate numbers of hours will be denied clearance to apply for internship. If there are queries about filling in the timesheets or this process please consult the DCT Office.
- e. **Regular hours reporting:** in order to establish that students are on track to meet the required pre-doctoral internship clinical training hours requirement and are receiving sufficient clinical experience at their placement, students will submit hour summaries at regular intervals throughout the training year. These reports are not signed by the site supervisor as they are informal in nature. The DCT will review these reports to verify the student's progress or address training needs as relevant. These assignments include:
- Mid-Semester Hours Reports (summarizes you total training hours at your particular site through the assignment due date)
 - Cumulative Hours Reports (Summarizes your clinical training hours to date for all training placements. Be sure to select the correct time frame (e.g. start date of *first* training placement and the due date of the assignment).
 - Final Summary of all Practicum Hours (DCT400 task. This report should capture ALL hours you've tracked for your Practicum courses to date. Please select the date range that captures the very first timesheet you entered through the final Practicum timesheet you entered. Your total Practicum hours should equal at least 1,500 hours including a minimum of 475 direct service hours.)

- f. **Official Clinical Hours Categories:** The categories listed on the ‘Timesheets – Time Entry’ have been carefully selected to reflect what is required for the APPIC internship process and to reflect what many states include on licensure application forms. Each hour accrued must be placed in a category. The hours category descriptions listed below are included in the ‘Activities’ drop down menu in the ‘Timesheets – Time Entry Section’. The ‘face-to-face’ specifier does *not* include incidental contact with clients/patients outside of the specified therapy session. Telemental health and telesupervision have been included.

Please note that ‘observing’ another clinician providing clinical services is considered ‘Didactic’ when the student is not engaging or intervening in any way. If the student is also providing clinical interventions, these hours are considered ‘co-therapy’ or ‘co-led’ and can be recorded under the appropriate service hour category. Students should consult with their supervisor, who signs off on their hours, to clarify any confusion about how to record co-led or observational hours.

DIRECT SERVICE HOURS: Time spent in providing clinical services

- Individual Therapy (in-person): Providing/co-leading individual tx, all ages
 - (if observing → record in Didactic)
- Individual Therapy (telehealth):
- Group Therapy: Providing/co-leading group tx, all types, all ages
 - (observing only → Didactic)
- Group Therapy (telehealth):
- Family Therapy: Providing/co-leading family tx, all types, all ages
 - (observing only → Didactic)
- Family Therapy (telehealth):
- Couples Therapy:(in-person)Providing/co-leading couples therapy
 - (observing only → Didactic)
- Couples Therapy (telehealth):
- Intake: Conducting intake/clinical interview, all ages (for therapy cases only)
- Intake (telehealth):
- Career Counseling (in-person)
- Career Counseling (telehealth)
- School Counseling
 - Consultation (in-person)
 - Consultation (telehealth)
 - Direct Intervention (in-person)
 - Direct Intervention (telehealth)
 - Other
- Assessment/Feedback: Clinical interview (for assessment cases), collateral interviews, testing, feedback
 - Neuropsychological Assessment (in-person)
 - Neuropsychological Assessment (telehealth)
 - Assessment Feedback (in-person)
 - Assessment Feedback (telehealth)
 - Psychodiagnostic Test Administration (in-person)
 - Psychodiagnostic Test Administration (telehealth)
 - Other Psychological Assessment Experience
- Organizational (in-person):
 - Providing organizational consultation or outreach (delivery of end product e.g. presentation)
- Organizational (telehealth):
- Other Psychological Interventions
 - Sports Psychology/Performance Enhancement
 - Medical/Health Related Interventions
 - Substance Abuse Interventions

- Consultation (direct Service)
- Other Direct Service Interventions

SERVICE-RELATED HOURS: Time spent in activities directly related to clinical services

- Clinical Writing/Progress Note Writing:
 - Clinical writing (notes, treatment plan, discharge summary)
- Test Scoring/Interpretation:
 - Scoring and interpretation of psychological tests/measures
- Assessment Report writing:
 - Psychological report writing
- Phone/Case Management:
 - Case management activities (e.g., scheduling, finding referrals)
- Case Presentation (led):
 - Formal case presentation (by you) in seminars, didactic trainings, conferences (non-academic, not Prac or Clinical Classes)
- Consultation:
 - Receiving case consultation from licensed professional (non-psychologist) (not in class)
- Coordinate Community Resources
- Intervention/Treatment Planning
- Observation
- Video/Audio Recording Review

SUPERVISION HOURS: Time spent receiving supervision from licensed psychologists

- Individual supervision (in-person):
 - Receiving individual supervision from a licensed psychologist
- Individual supervision (telesupervision):
- Group supervision:
 - Receiving dyad/group supervision from a licensed psychologist
- Group supervision (telesupervision):
- Supervision by Psychology Intern/Post-doc (in-person)
- Supervision by Psychology Intern/Post-doc (telesupervision)
- Supervision by Psychology Intern/Post-doc (in-person)
- Supervision by Psychology Intern/Post-doc (telesupervision)

SUPPORT HOURS: Time spent on clinical manuals, research, assessment, training, meetings, and admin tasks

- Seminars/Didactic Training
- Psychoeducational Group or Workshop
- Preparation/Reading/Research
- Staff Meeting
- Other Administrative Activities
- Case Conferences (Attended)
- Grand Rounds (Attended)
- Professional Development
- Other

IV.B.2. Application Process for Intermediate and Advanced Clinical Placement

Towards the end of the Fall semester of the second and third years (and all years prior to the final pre-Internship year) students are expected to begin to prepare applications for a practicum placement or 'externship' which is external to IPS. In the DC metro area available practicum placement sites are principally to be found in the 'Greater Washington Clinical Psychology Programs Council (GWCPPC) Externship Guidelines'. George Mason University maintains a list of available sites, which all agree to

abide by certain guidelines with regard to applications and maintaining high standards. Details are to be found at <https://psychpracticum.gmu.edu/council-guidelines/>

Students are required to abide by the following regulations:

- a. **Number of Applications:** students should apply to a minimum of 8 sites exclusively from the GWCPPC though students are encouraged to apply to more than this - it is good to apply to a range of sites and maximize opportunities (typically 12-15 applications). Please note it is necessary to:
 - i. Keep explicit records (e-mails, application forms, covering letters, applications for references for that site) to show that you have made these applications. These may be requested by the DCT on demand.
 - ii. Post a list of proposed sites - and any subsequent amendments - in your ELC DCT course. See '[IV.C.1. Experiential Learning Cloud \(Formerly Tevera\) Documentation Submission](#)' section for more information.
- b. **Students should apply only to sites they are free to attend & which provide the hours & supervision required:** it is each student's responsibility to check that the sites they are applying to are suitable.
 - i. Although GWCPPC sites subscribe to a set of agreed standards, these may not be identical to the requirements outlined above for the Practicum training. It is the responsibility of each student to check that sites where they are applying are prepared to provide the hours they need. [Appendix G: External Practicum Agreement](#) has a complete list of requirements.
 - ii. The majority of sites have mandatory training days (e.g., Wednesdays at Psychiatric Inpatient Hospital or Thursdays at All-American University Counseling Center). It is the responsibility of each student to identify and apply only to those sites which offer training on days that do not conflict with the classes scheduled during the semester of their externship, including the required 700 and 800/900 level practicum courses (see below).

<u>Externship (Year)</u>	<u>Days of Scheduled Courses</u>	<u>Available Training Days</u>
Intermediate PSY 700-level (3rd year)	Tuesday & Thursday	Monday, Wednesday, &/or Fridays
Advanced PSY 800/900-level (4th/5th year)	Monday & Wednesday	Tuesday, Thursday, &/or Friday

Currently the courses that are offered in the typical course sequence at IPS for 3rd years are scheduled on Tuesday & Thursdays. This includes the 700 practicum courses. The courses that are offered in the typical course sequence for 4th year are scheduled on Monday and Wednesday. This includes the 800 and 900 practicum courses. **Students will not be allowed to take an externship whose mandatory training days conflict with their course schedule.**

Please note that for students who have approved plans for taking courses out of sequence it is necessary to plan applications carefully and check with the Registrar, DCT, and/or Program Director concerning their intended course load and clinical training for the following academic year.

- c. **Sites outside the GWCPPC list:** There are some sites with which IPS has a relationship which are not included in the GWCPPC list. Some sites also randomly send out updates to the DC-area DCTs; and these updates may not be reflected on the GMU website. Updates regarding externship opportunities will be emailed to students by the DCT office. If students locate a site which is not in the GWCPPC list, written approval from the DCT Office is required prior to contacting the site or submitting an application. Permission is only given in exceptional circumstances.
- d. **Balanced and Pragmatic Applications.** Students are required to make balanced and strategically astute applications to externship sites. Two principles are important here. First it is necessary to optimize training experience by ensuring high quality experience is gained with a variety of different supervisors, client populations, and sites. This variety assists clinical development and provides options for internship. Second, the externship application process is highly competitive in this area. It is important to ensure that students secure an externship site - without this they cannot progress in the PsyD program. Students must take into account a number of factors:
 - i. Their clinical interests, long term career goals and the new areas of experience students wish to develop through externship training. It is good practice to consult with your academic advisor, the DCT office, and/or your supervisors about your plans.
 - ii. The value of consulting with students in the years above about their experiences and determining if the training at these sites fit with training goals.
 - iii. Applying to sites where there is a higher probability of acceptance
 - 1. Sites who have a high number of places to award (e.g. Children's Hospital, Family Services at Catholic Charities, etc.)
 - 2. Sites which have taken students from DMU before (talk to students in the year above)
 - 3. Sites for which a student can put together a strong application given prior clinical experience, dissertation/research interests or academic strengths

Students should use these criteria to produce a balanced application – including a few ‘reach’ sites and many more sites where the chances of getting in may be higher. Although it is good to seek to develop new skills and remedy gaps in experience, sites should be avoided which would seem clearly unsuitable – for instance neuropsychology training sites if a student has no interest in biological sciences and failed cognitive assessment class.

It is not permissible effectively to restrict applications according to only one criteria – only one theoretical orientation, convenient geographical area, one type of site or population or one religious affiliation. Similarly it is not permitted, outside of exceptional circumstances, for a student to continue at a site at which they have already had an externship.

While it is appropriate for students to express preferences and seek out the best training, the realities of a highly competitive application process in the DC metro area and the need to secure broadly based experience, mean that some students may have to accept training which is not ideal and which may be stretching or difficult for them. Other possible difficulties include, that accepting a less than ideal training placement may involve several hours travel time or moving accommodation closer to the area of the clinic. Students must work within the regulations given here to secure training - otherwise they cannot progress in the PsyD program.

The Psy.D. program is responsible for providing students with a broad and general training, including theoretical orientations, secular and non-secular practicum experiences, and a diversity of client types (i.e., child, individual, marital, group), so that students are adequately and appropriately prepared as clinical psychologists. **Students' practicum training sites must be approved by the program prior to the student committing to a practicum site.** If a site does not meet the program's training requirements, academic credit may not be awarded and graduation requirements may not be met, resulting in the student having to have additional practicum experiences to meet the broad and general requirements.

- e. **Consultation:** During the entire process of practicum site selection, students should regularly consult with the DCT and other resources [e.g., faculty advisor, supervisors] as necessary about their progress and preferences. This is especially important if a requirement in this Handbook appears unclear.
- f. **Timeline for Application Process:** Students should demonstrate good organizational skills, diplomacy and professionalism in managing this process. It is often complicated by exams, travel, student and faculty obligations towards the end of the Fall term, the Christmas break, and preparations for the Spring term - this makes it all the more important for students to be on top of their preparations.

- i. **DECEMBER**

- 1. Attend a group meeting with the DCT office to review requirements, recommendations, and to answer any questions.
- 2. Re-read this Program Training Handbook, including [Appendix G: External Practicum Agreement](#), the contract students and most Practicum sites will sign, detailing the nature of the training placement
- 3. Read and explore the website maintained by the George Mason University (GMU) DCT which contains descriptions of the great majority of externships and the regulations on applications: <http://psychpracticum.gmu.edu/externships/>. This website is updated in the early Spring, but students should begin familiarizing

themselves with the sites listed as early as possible (much of the information remains the same year to year)

4. Prepare CVs and cover letters. Consult supervisors/academic advisors and/or the DCT office to review these materials.
5. Contact potential referees. Students should be prepared to provide referees with information if requested on the student's notable clinical achievements, interesting cases, learned techniques, their CV, interests and the kind of sites where they will apply.
 - a. If requesting a letter of reference from an IPS faculty member, students are required to include the following information as part of their initial request:
 - i. A copy of their updated CV.
 - ii. A list of courses taken from the faculty member and the grade earned in each course.
 - iii. If the faculty member is your dissertation chair or committee member, where you are in the process.
 - iv. If you have been the faculty member's Teaching/Graduate Assistant, which semesters and for which classes.
 - v. The year you were at the IPS Center.
 - vi. If the faculty member was your supervisor, how long and what years, what kinds of clients, how many assessments, etc.
 - vii. Any leadership roles you have had at IPS and how long you were in them.
 - viii. Highlights from your CV including notable Presentations in Research Symposium, Awards, Scholarships, etc. that you have received during your time at IPS.
 - ix. Please state if there is a particular strength, experience, or skill that you have demonstrated or required in connection to the faculty member. Please provide details of this while maintaining any relevant confidentiality requirement, if applicable.
 - x. Your goals in the field of psychology.
 - xi. A list of sites, to whom the letter should be addressed including the person's full title, site name and address, and email.
 - xii. The deadline for the letters.
6. Recognize that supervisors and faculty are under no obligation to review a particular application or provide references - indeed they may judge that they are not the best person to do so. Be professional, flexible, courteous and appreciative at all times.
7. Note if a site requires transcripts: be **proactive** in requesting them from the Registrar. Please note the timelines indicated by the Registrar's Office (<https://divinemeracy.edu/registrar/transcript-request/>). They may not be able to rush requests. Be professional and considerate.

8. It is a competitive process; it is vital for students to fully engage in the process. While the program places students in their introductory practicum, students are responsible for making timely applications to Intermediate and Advanced Practicum sites so that they will acquire a placement during the normal cycle. In the event a student fails to secure a placement, the student may be without a practicum for that year and be required to extend the time in the program by at least one year.

ii. JANUARY

1. Finalize CV and cover letters
2. Finalize site selection. **Each student is required to upload their list as well as an updated copy of their CV to ELC ON OR BEFORE January 10th.** Any amendments to the list should also be uploaded in subsequent weeks with details of any changes. Be sure to return to ELC to check for a response from the DCT office regarding your list. It is very common that you will be asked to revise your list before DCT approval.
 - a. Students are required to provide a detailed list of the sites they intend to apply to for externship training using: [Appendix V: Psy.D. Externship Site List Form](#). A word/google doc copy of Appendix V can be requested from the DCT office.)
3. Follow up with referees providing them with the details of all sites (be accurate with contact details!) where references are to be sent. As a guideline students should give their referees **a minimum of 14 business days** notice to create and send letters of recommendation
4. In mid to late January, complete and submit applications according to the indicated due dates of particular sites. Most are due in February (though it is important to check!) but it is best to apply 2 to 4 weeks in advance if possible. Some sites can cease to consider applications if they feel they have already found their new externs: do not leave it to the last minute. Send in the application **in the exact manner indicated**. If the application is required by email, do not mail a copy, and vice versa.
5. If clarification is needed about the nature of the application process or particular character of any specific site, the student should **ask the DCT first**. Only if further clarification is required, should students contact the site -- and then, be extremely professional and courteous in communications
6. Begin to prepare for interviews by reviewing anticipated questions. Consult with supervisors and faculty and practice with other students. In Practicum classes and/or in a separate meeting during January there will be discussion of (1) interviewing for an externship site placement and (2) understanding the application/offers procedures.

iii. FEBRUARY

1. If a site believes that there may be a match with a student, invitations will be sent out requesting that they attend for an interview.

2. Act professionally and courteously in all dealings with sites:
 - a. Do not be late to the interview (if through emergency circumstances there is a delay, contact the site to explain and apologize and also do so upon arrival). Put another way, be sure to be early for all interviews.
 - b. Be appropriately dressed in business attire.
 - c. Be prepared having read about and researched the site and the kind of work which goes on there. Students should be able to talk about themselves both as clinicians and people in a relaxed manner. It is necessary to discuss clinical interests and experiences, to state why this is a good fit; and have relevant questions to ask (not already answered in the site's publicity materials).
3. If students have had a difficult experience or problems with a site, they should let the DCT know *immediately*. Be transparent - many difficulties can be resolved if addressed in a prompt and explicit manner.
4. Write or e-mail a brief letter of thanks after attending an interview unless otherwise directed by the site in their instructions online or elsewhere.
5. It is possible that students may be offered an externship by one or more sites directly after or even at the interview. It is important for students to state that the offer is very much appreciated but the DCT requires all students to consult with them before a response can be given. (See [GWCPPC Guidelines](#) for additional information about responding to offers).

iv. MARCH

1. Reread the [GWCPPC Guidelines](#). Because IPS is part of the GWCPPC, students must abide by the rules agreed to by all universities and sites in the GWCPPC guidelines. These can change every year - study them carefully. In brief, all offers should be responded to on 'Universal Acceptance Day' (commonly termed 'Call Day') which takes place generally in early to mid March.
2. Develop a rank list of the sites you interviewed with based on your career (including internship) goals, training experience, and experience during the interview process. Review this list with the DCT office to receive approval of your selected training placement prior to Call Day.
3. Call Day can be a stressful day. Check the latest Call Day procedures on the [GWCPPC Guidelines](#) website prior to the day itself to ensure they are thoroughly understood. Once an offer has been accepted, it is necessary to fulfill this commitment short of extraordinary circumstances and with DCT permission.
4. Remember that all sites in the GWCPPC list have valuable experience to offer and that few students get all that they want during most application rounds. The DCT is available on Call Day to advise students as required.
5. As soon as Call Day is over you must contact the DCT Office formally at dct.ips@divinemeracy.edu with details of what has occurred.

- a. If you have accepted an offer send an email with the details (name, address, contact details for the Training Director at the site, proposed start/end date if known)
 - i. If you declined any other offers, send a list of declined offers along with the information described above.
 - b. If you have not been placed, it may still be possible to find a site, particularly if you act quickly. Call the DCT or make an appointment immediately to develop a strategy and work on your application skills.
6. If a student fails to match with a site on Call Day, it is the student's responsibility to immediately identify alternative practicum sites and petition the program for permission to apply to the sites to avoid lapses in practicum training. If the student is unable to identify, have it approved, and be accepted by the alternative site, the student may not have a practicum and be required to extend the time in the program by at least one year.

v. **APRIL**

1. Reread [Appendix G: External Practicum Agreement](#) in the Training Handbook. See the ELC section for information about how to initiate the completion of the training agreement. Students should inquire concerning any other contracts an external site wishes to propose at this stage (See Conditions of Practicum section and Due Dates for documents below).

IV.B.3. Conditions to apply during Practicum Placement (IPS Center or External Site)

a. **The Practicum Agreement ([Appendix G](#))**

The Practicum Agreement is the contract signed by the student concerned, the Training Director at the external practicum site, and the DCT. This agreement states the specific and required training experiences as well as the objectives, activities, and responsibilities of each of the three parties. As with all practicum documentation it is the responsibility of the student to ensure that it is signed by them, the Training Director at their Practicum site, the DCT, and that a copy is uploaded onto the student's ELC account *the semester before they are scheduled to begin*. This should occur on or before May 1st. **Students in their final pre-internship year:** should notice in particular the proposed start/end dates for their last externship placement which are recorded on Appendix G: if dates extend beyond the end of the Spring semester, they need to consult the DCT office ASAP.

When a practicum site has its own internal contract or agreement used as a matter of course for its training program, a student must submit this to the DCT office as soon as possible. The placement is not final until Appendix G, which forms the contract between DMU/IPS and the externship site, is completed. If the external site wishes to change terms in the contract please inform the DCT office as soon as possible with relevant details. The contract may need to be vetted by lawyers and the terms negotiated. If Appendix G or the external site's own contract is not signed and uploaded as required students may be withdrawn from the site and be unable to proceed.

- b. **Termination of Clinical Responsibilities Should Coincide with End of the Practicum:** With their supervisors' guidance and approval, students must manage their caseload and other clinical responsibilities, including a plan to terminate all client work by the end of the placement. Students must not abandon their clients or prematurely terminate therapy relationships but must instead ensure that an adequate transition to an alternative service provider occurs.
- c. **Compensation:** In some cases, students may be compensated for the work they perform while on practicum. In such cases, compensation should be in the form of a salary or stipend. A "percentage of fees" arrangement may **not** be used as the basis for compensation.
- d. **Property Rights** No client-related material should be taken from IPS, the IPS Center, externship or internship sites. No property or intellectual property including assessment materials or handbooks or teaching or didactic materials should be taken away from IPS, the IPS Center or externship sites unless permission is given in advance by the relevant authorities.
 - i. If a student wishes to develop a de-identified assessment report or a case summary, they must do so under supervision and receive their supervisor's explicit permission to maintain a copy of this work. Supervisors are required to verify that the written work is thoroughly de-identified and appropriate for future use. Students are encouraged to maintain sample reports for the purpose of future practicum and internship applications.
- e. **Professional Liability Insurance:** The practice of psychology carries with it inherent liabilities, which the student acknowledges (see [Appendix A: Waiver of Liability](#)). **All PsyD students are required to carry and continue to maintain professional liability insurance to recommended standards.** Students should ensure that the policy covers in class activities, such as role plays, etc. Students should note that professional liability insurance policy will generally only provide protection for the student while he or she is enrolled in the PsyD program and involved in required activities for clinical training. The policy does not cover the student while engaging in non-school related activities. Failure to comply with this requirement may result in removal from the site. Information on obtaining liability insurance is available from the DCT upon request.

IV.B.4. Conduct at Practicum Sites

The student has an ethical responsibility to fulfill contractual commitments unless relieved of them explicitly by the DCT and the practicum site. Students are expected to comply with the regulations at external sites and the IPS Center in a cooperative, respectful, and collegial manner and to attend meetings as requested. Training should be a priority - above and beyond personal convenience. See professionalism section above, [Appendix G](#) for more information about expectations and requirements.

IV.B.4.a. Navigating changes & difficulties during the course of a placement

Should difficulties occur and their resolution not be immediately and obviously possible with a student's supervisor or training director, students must consult the DCT. The DCT office can help the student consider whether their complaint has grounds and how best to find a way forward, which is respectful of

legitimate training needs, student development, and the site's role as a sponsoring training clinic and independent agency.

If a student is unwilling or unable to complete a practicum or seeks changes in the terms of the contract/agreement with the site, he or she must immediately notify the DCT. Such events include the consideration of a leave of absence from the program. This must be done prior to any declarations to or discussions with the site. The student will not contract with a new practicum placement without the approval of the DCT.

It should be noted that unexpected transitions and terminations of placements often interfere with the progressive and cumulative nature of clinical training. Consequently, switching practice sites will generally *not* be approved unless serious reasons dictate the need for such changes. Often premature endings of a practicum means that no further clinical training will take place that year and a student may have to delay their progress through the PsyD program.

It is important to note that if students change supervisor or practicum site they will also need to fill in all attendant documentation to describe the change, such as Appendix G and Appendix O.

C. Clinical Training Documentation

Throughout the clinical training at IPS/DMU, students are required to submit and retain various key documents to track and verify that they have met program requirements and for licensure purposes. Complete and timely submission of documentation is a requirement to progress through the program, to apply for internship (see [Appendix I](#)), and to graduate.

Each student is given an account in ELC upon beginning coursework at IPS and given instruction to help them navigate the system.

Students will have access to ELC throughout their time at IPS and following graduation. Students will very likely need the information stored on ELC to facilitate licensure and other professional applications (e.g. signed hour logs, supervisor information, etc.). **It is advised that all students keep their own copies of the documents they submit to their ELC account - in particular their signed clinical hours and competency evaluations (Appendix Es).** The official file will remain accessible to the DCT office at IPS but the retrieval of information may incur significant delays and students are asked to minimize demands upon administrative staff post graduation.

It is the responsibility of each student to assemble the documentation required for clinical training and complete their ELC tasks on time. This includes material dependent on the action of other people - for instance supervisors upload their evaluations ([Appendix E](#)), contracts with externship sites require the Training Director to sign and return the form to students to upload ([Appendix G](#)) or clearance for internship application ([Appendix I](#)), which requires signatures from multiple faculty members. As the documentation is being done to enable a particular student's graduation, it is in the interests of that student, and their responsibility, to use their professional skills to ensure the process occurs.

Students are strongly advised to act early in arranging to meet deadlines and develop excellent planning, organizational, and communication skills. Students should note that faculty, training directors, and supervisors are often quite busy or may be out of the office, and a given student's requirements may not be their first priority. Tact and planning on the part of the student are essential. If serious problems arise, after significant, sustained and careful application by students to secure the documents, the DCT should be consulted.

At the end of each semester audits will be taken by the DCT office of each account. Students who have failed to gain required uploads and forms in the way requested will be subject to remediation.

IV.C.1. Experiential Learning Cloud (ELC) Documentation Submission

All of the documents listed in section IV.C.2 will be submitted through Experiential Learning Cloud (ELC hereafter). (<https://divinemeracy.tevera.app/#/logon>) This platform will serve as the repository for all of the clinical documentation submitted during your time at DMU and will enable students and the DCT office to easily access records and uploads. Training will be given - and materials will be made available - through the DCT office to help students navigate ELC.

IV.C.1.a ELC “Courses”:

Each student will be enrolled in ELC courses that correspond either to their academic courses or their training year.

IV.C.1.a.1 ELC for Academic Courses:

In order to be enrolled in the ELC academic complement to an academic course, each student must complete the ‘ELC/Tevera Registration Assignment’ located in the assignments section of each of their academic classes. This assignment should be completed within the first week of class. Students should select the course professor as the evaluator/signer. This assignment should be completed within the first week of each course, including the dissertation course, for all semesters (Fall, Spring, & Summer). These courses will allow professors to complete the assessments of student’s clinical and professional competencies. (See [Appendix C](#) and [Appendix R](#)). Certain clinical courses may also require that video assignments be submitted through the ELC course.

IV.C.1.a.2 ELC for Training Documentation:

In order to complete and store all required training documentation, students will be placed into set DCT courses within ELC for each academic/clinical training year. These courses function alongside ELC’s Site Placement and Hours Tracking system. These DCT courses will begin on July 1 and extend through June 30th to capture all training that occurs with that academic year. If a student wishes to extend their site placement, they should contact the DCT to make the appropriate adjustments in ELC.

Year in Program	ELC Course	ELC Site Process
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First Year Students	DCT 100	none
Second Year Students	DCT 200	New PSYD IPS Center Practicum Placement
Third Year Students	DCT 300	New PSYD Externship Practicum Placement
Fourth Year Students/OOS Students*	DCT 400	New PSYD Externship Practicum Placement
Fifth Year Students/Interns	DCT 500	New PSYD Internship Placement Process
Summer only Practicum	DCT 050	New PSYD Externship Practicum Placement
Dissertation Only Students	DCT 600	none

*Out of Sequence (OOS) Students who are completing an additional year prior to internship will be placed in the DCT400 course.

**Students who are completing additional training placements outside of the typical sequence (most often during the summer) will be added to an additional course wherein they can complete the additional required training documents (e.g. Appendices G, D, E, F, & O as well as signed hours)

IV.C.1.b ELC Site Placement Process

In addition to courses, ELC has a separate system whereby students can track their training sites, training contracts, supervisor information, and thereby track their clinical hours. This process is called 'Site Placement' and includes pre-application tasks that confirm a student's eligibility to participate in clinical training at the introductory level and at the externship level. (See [Appendix L: PsyD Program Clearance to Begin Clinical Training](#) & [Appendix L: PsyD Program Clearance to Begin Externship Training](#)).

In order to establish a training contract with a site, students must initiate two tasks: [Appendix G: Practicum Agreement](#) & [Appendix H: Site Information Form](#). These tasks are then shared with the site training director who provides greater information about the training program and agrees to the training contract requirements. (Please note, for practicum/externship placements, you will need to provide your new site's supervisor/training directors email twice - once for 'Person who completes the assignment' and again for 'site representative'). These forms are reviewed and approved by the DCT. For sites that require a separate contract (e.g. Federal sites), students should notify the DCT office who will then work with the site to complete the necessary alternative paperwork.

Once a training agreement has been established, students will then add a supervisor by initiating the "[Appendix O: PsyD Supervisor Information Form - Practicum](#)" or "[Appendix O: PsyD Supervisor Information Form - Internship](#)" to document and verify their supervisor's qualifications. This form is reviewed and approved by the DCT. Students may add multiple supervisors.

Following the completion of these tasks, the DCT office approves the site placement and the student is then enabled to log hours under their training site and supervisor within ELC.

IV.C.1.b.1 Extending Site Placement

Placement extensions fall under the policy outlined in [IV.A.5. Additional Practicum & Summer Placements](#). If you are interested in extending your site placement (or need to correct/modify your training dates), you must email the DCT to seek approval for the change.

Once you receive approval from the DCT, you can extend a training placement in ELC within the site placements workspace. Please view the following instructions for more details:

<https://community.lumivero.com/s/article/extending-your-placement-at-a-site>.

IV.C.1.c ELC DCT “Assignments”:

The documents outlined in section “IV.C.2. Documentation Due Dates” will be collected through the “Assignments” tab located in ELC on the left hand side. The assignments for training documentation will span the whole academic year: July 1st - June 30th of the following year, and submissions will be made at various points throughout the year. (See IV.C.2. Documentation Due Dates for a list of the assignments and corresponding due dates)

IV.C.1.c.1 ELC Site/Supervisor/Clinical Extern Evaluations:

Evaluative information pertaining to the site, the site supervisor, and the clinical trainee’s competencies will be collected through the DCT Courses. *Everyone must be enrolled in one of the DCT courses listed above in order to access and submit required documentation.* You will have one set-of-three evaluations (see below) per semester - Fall, Spring and Summer - and will be required to submit the following at the end of the semester:

- ☐ Appendix D: Student Evaluation of Practicum Site
- ☐ Appendix E: Site Evaluation of Practicum Trainee/Extern*
- ☐ Appendix: F: Student Evaluation of Site Supervisor

*Each student’s supervisor will complete Appendix E in ELC. It is the student’s responsibility to initiate this form in ELC, check that their supervisor has received the email whereby they can complete the form, and follow-up as necessary to ensure its completion.

IV.C.2. ELC Documentation Due Dates

The following chart lists due dates by academic semester. Please note that this chart is not comprehensive but serves as a quick reference guide. It should be read in the context of information given throughout this handbook. Some forms depend on events, instead of or as well as having a scheduled submission date - for instance Appendix O if supervisors should change. Students who are out of sequence should take particular care in using it.

First Year (no clinical placement)		
Fall Semester	Spring Semester	Summer Semester
● DUE Aug. 22: Appendix A: Waiver	● DUE May 25: PsyD	● DUE June 1: Appendix G:

- of Liability ● DUE Aug. 22: Appendix B: Student Ethical Agreement ● DUE Aug. 22: Appendix N: Professional Activities ● DUE Aug. 22: Proof of Insurance ● DUE Sept. 15: Appendix J: Affidavit Handbook Review	Program Clearance to Begin Clinical Training (In Site Placement Process)	Signed Site Agreement for <i>next years' IPS Center/CUA placement</i>
Second Year:		
Fall Semester (PSY 601)	Spring Semester (PSY 602)	Summer Semester (PSY 603)
● DUE Aug. 22: Appendix A: Waiver of Liability ● DUE Aug. 22: Appendix B: Student Ethical Agreement ● DUE Aug. 22: Appendix J: Affidavit Handbook Review ● DUE Aug. 22: Appendix N: Professional Activities ● DUE Aug. 22: Proof of Insurance ● DUE Aug. 22: Appendix O: PsyD Supervisor Information Form ● DUE Oct. 15: Mid-Semester Hours Report (Fall) ● DUE Dec. 1: Appendix D: Student Evaluation of Site ● DUE Dec. 1: Appendix E: Site Evaluation of Student ● DUE Dec. 1: Appendix F: Student Evaluation of Supervisor ● DUE Dec. 1: Signed Hours Report (Fall) Official Signed Record of Clinical Hours	● DUE Jan. 10: Externship Application Site List (App V) & Updated CV Upload of externship sites to which you are applying ● DUE Jan. 10: PsyD Program Clearance for Externship Training (In Site Placement Process) ● DUE Mar. 15: Mid-Semester Hours Report (Spring) ● DUE May 1: Appendix D: Student Evaluation of Site ● DUE May 1: Appendix E: Site Evaluation of Student ● DUE May 1: Appendix F: Student Evaluation of Supervisor ● DUE May 1: Signed Hours Report (Spring) Official Signed Record of Clinical Hours ● DUE May 1: Appendix G: Signed Site Agreement for <i>next years' placement</i>	<i>The following applies to those continuing their Spring externship throughout summer and/or those in a summer-only externship:</i> ● DUE June 10: Appendix G: Signed site agreement for <i>summer-only placements</i> ● DUE Aug. 31: Appendix D: Student Evaluation of Site ● DUE Aug. 31: Appendix E: Site Evaluation of Student ● DUE Aug. 31: Appendix F: Student Evaluation of Supervisor ● DUE Aug. 31: Signed Hours Summary Report (Final)* Official Signed Record of Clinical Hours <i>*should be completed on last day of training</i>
Third Year:		
Fall Semester (PSY 701)	Spring Semester (PSY 702)	Summer Semester (PSY 703)
● DUE Aug. 22: Appendix A: Waiver of Liability ● DUE Aug. 22: Appendix B: Student Ethical Agreement ● DUE Aug. 22: Appendix J: Affidavit Handbook Review ● DUE Aug. 22: Appendix N: Professional Activities ● DUE Aug. 22: Proof of Insurance ● DUE Aug. 22: Appendix O: PsyD Supervisor Information	● DUE Jan. 10: Externship Application Site List (App V) & Updated CV Upload list of externship sites to which you are applying ● DUE Mar. 15: Mid-Semester Hours Report (Spring) ● DUE April 1: Appendix K (Request for Clearance to take comprehensive exams) ● DUE April 30: Dissertation	<i>The following applies to those continuing their Spring externship throughout summer and/or those in a summer-only externship:</i> ● DUE June 10: Appendix G: Signed site agreement for <i>summer-only placements</i> ● DUE Aug. 31: Appendix D: Student Evaluation of Site ● DUE Aug. 31: Appendix E: Site Evaluation of Student

- Form ● DUE Sept. 15: Appendix W: Telesupervision Addendum (if applicable) ● DUE Oct. 15: Mid-Semester Hours Report (Fall) ● DUE Dec. 1: Appendix D: Student Evaluation of Site ● DUE Dec. 1: Appendix E: Site Evaluation of Student ● DUE Dec. 1: Appendix F: Student Evaluation of Supervisor ● DUE Dec. 1: Signed Hours Report (Fall) Official Signed Record of Clinical Hours ● DUE Dec. 1: Cumulative Hours Report (Fall)	Proposal (In order to be eligible to apply for internship in the Fall semester) ● DUE May 1: Appendix D: Student Evaluation of Site ● DUE May 1: Appendix E: Site Evaluation of Student ● DUE May 1: Appendix F: Student Evaluation of Supervisor ● DUE May 1: Signed Hours Report (Spring) Official Signed Record of Clinical Hours ● Due May 1: Appendix G: Signed Site Agreement for next years' placement	● DUE Aug. 31: Appendix F: Student Evaluation of Supervisor ● DUE Aug. 31: Signed Hours Summary Report (Final)* Official Signed Record of Clinical Hours <i>*should be completed on last day of training</i> ● DUE Aug. 31: Cumulative Hours Report (Summer) ● <i>*APPIC Portal Opens July 15</i>
Fourth Year:		
Fall Semester (PSY 801)	Spring Semester (PSY 802)	Summer Semester (PSY 803)
● DUE Aug. 22: Appendix A: Waiver of Liability ● DUE Aug. 22: Appendix B: Student Ethical Agreement ● DUE Aug. 22: Appendix J: Affidavit Handbook Review ● DUE Aug. 22: Appendix N: Professional Activities ● DUE Aug. 22: Proof of Insurance ● DUE Aug. 22: Appendix O: PsyD Supervisor Information Form ● DUE Sept. 15: Appendix W: Telesupervision Addendum (if applicable) ● DUE Sept. 15: Appendix I: Clearance to apply for Internship ● DUE Sept. 15: Full Hours to Date: Report capturing all hours to date used for AAPI ● DUE Sept. 15: Internship Site List: Upload a completed excel worksheet of Internship sites to which you are applying ● DUE Oct. 15: Mid-Semester Hours Report (Fall) ● DUE Dec. 1: Appendix D: Student Evaluation of Site ● DUE Dec. 1: Appendix E: Site Evaluation of Student ● DUE Dec. 1: Appendix F: Student Evaluation of	● (if applicable) DUE Jan. 10: Externship Application Site List (App V) & Updated CV Upload list of externship sites to which you are applying ● DUE Mar. 1: Updated Internship Site List (indicating interviews) ● DUE Mar. 15: Mid-Semester Hours Report (Spring) ● DUE May 1: Appendix D: Student Evaluation of Site ● DUE May 1: Appendix E: Site Evaluation of Student ● DUE May 1: Appendix F: Student Evaluation of Supervisor ● DUE May 1: Signed Hours Report (Spring) Official Signed Record of Clinical Hours ● DUE May. 1: Cumulative Hours Report (Spring) ● DUE May 1: Internship Match Letter and/or Agreement (Upload in Site Placement Process)	<i>The following applies to those continuing their Spring externship throughout summer and/or those in a summer-only externship:</i> ● DUE June 10: Appendix G: Signed site agreement for summer-only placements ● DUE June. 10: Appendix W: Telesupervision Addendum (if applicable) ● DUE Aug. 15: Appendix D: Student Evaluation of Site ● DUE Aug. 15: Appendix E: Site Evaluation of Student ● DUE Aug. 15: Appendix F: Student Evaluation of Supervisor ● DUE Aug. 15: Signed Hours Summary Report (Final)* Official Signed Record of Clinical Hours <i>*should be completed on last day of training</i> ● DUE Aug. 15: Cumulative Hours Report ● DUE Aug. 15: Final Summary of all Practicum Hours

- Supervisor ● DUE Dec. 1: Signed Hours Report (Fall) Official Signed Record of Clinical Hours ● DUE Dec. 1: Cumulative Hours Report (Fall)		
Internship Year (5th Year):		
Fall Semester (PSY 890)	Spring Semester (PSY 890)	Summer Semester (PSY 890)
● DUE Aug. 22: Appendix A: Waiver of Liability ● DUE Aug. 22: Appendix B: Student Ethical Agreement ● DUE Aug. 22: Appendix J: Affidavit Handbook Review ● DUE Aug. 22: Appendix N: Professional Activities ● DUE Aug. 22: Proof of Insurance ● DUE Aug. 22: Appendix O: PsyD Supervisor Information Form ● DUE Dec. 1: Appendix D: Student Evaluation of Site ● DUE Dec. 1: Copy of Site Evaluation of Intern ● DUE Dec. 1: Appendix: F: Student Evaluation of Supervisor ● DUE Dec. 1: Official Signed Record of Clinical Hours (Copy of signed hours record from site)	● DUE May 1: Appendix D: Student Evaluation of Site ● DUE May 1: Copy of Site Evaluation of Intern (If your site does 2 evals, upload PDF saying this) ● DUE May 1: Appendix: F: Student Evaluation of Supervisor ● DUE May 1: Official Signed Record of Clinical Hours (Copy of signed hours record from site)	<i>The following applies to those continuing their internship throughout summer:</i> ● DUE Aug. 15 (or by last training day): Appendix D: Student Evaluation of Site ● DUE Aug. 15 (or by last training day): Copy of Site Evaluation of Intern ● DUE Aug. 15 (or by last training day): Appendix: F: Student Evaluation of Supervisor ● DUE Aug. 15 (or by last training day): Official Signed Record of Clinical Hours (Copy of signed hours record from site) ● DUE at completion of internship: Student Certificate of Internship Completion
Dissertation Only Students (Out of Sequence - Post Internship):		
Fall Semester	Spring Semester	Summer Semester
● DUE Aug. 22: Appendix A: Waiver of Liability ● DUE Aug. 22: Appendix B: Student Ethical Agreement ● DUE Aug. 22: Appendix J: Affidavit Handbook Review ● DUE Aug. 22: Appendix N: Professional Activities ● DUE Aug. 22: Proof of Insurance	n/a	n/a

IV.C.3. Licensure Application Support:

Many states require the DCT or Program Director to attest to clinical hours attained by the student while at IPS. For this reason, students are reminded to save copies of all documentation submitted, especially records of clinical hours. **At least one month processing time is required for IPS to process these requests.**

The [Google Form \(https://forms.gle/y5bPEnZyfAfRmWMy7\)](https://forms.gle/y5bPEnZyfAfRmWMy7) must be completed to start the process, with the required licensure forms attached. Graduates are required to complete their portion of the licensure forms. This typically includes:

1. University and practicum details
2. Contact information
3. Report of clinical hours

Submission of all hours records used to complete the forms, and a detailed explanation of the categorization of hours required on the form, will greatly aid in the verification process. Please be aware that we are not able to complete the verification if you do not have copies of your documentation/hours, or if blank forms are submitted.

D. Pre-doctoral Clinical Internship/Residency

As noted in the Academic Catalog, students are expected to be enrolled in an full-time clinical internship completed in one year at an approved internship site. Hours to be accrued during internship include at least 500 hours of face-to-face client contact and a total of 2,000 hours (including direct service hours and support hours).

IV.D.1. Preparation For Pre-Doctoral Internship:

It is highly recommended that students begin preparing for internship at the time they begin the PsyD program. The following recommendations may provide some assistance in this process.

- a. **Identify desired career path or paths.** Doing so will enable a student to identify potential externships and internship sites that facilitate their long term professional goals.
- b. **Research state (or international) licensure requirements:** Obtain information regarding the state licensing requirements and laws in the geographical areas the student would consider practicing following graduation to insure the internship is suitable.
- c. **Keep thorough records:** keep all coursework including all syllabi, copies of clinical hours and documentation concerning practicum experiences, and related work experiences.
- d. **Check the APPIC Directory** (<https://membership.appic.org/directory/search>). Becoming familiar with the online APPIC Application for Psychology Internships Portal is helpful in order to use the specified categories for documenting clinical work experiences. Reviewing the requirements for a variety of sites which are of interest to the student can guide current clinical work experiences.

- e. **Develop evidence to show ‘a match’ with internship sites:** Students should note early in their training that the APPIC application process will be easier, and their application stronger, if they develop career goals and act to build evidence they are a good ‘match’ for the kind of internship sites students are interested in. Students should accumulate skills and experiences, focused on their desired internships. For popular internship sites it is rarely enough to do the minimum. The relevance of examples often depends on the kind of site students seek. However, broadly useful activities might include the completion of dissertation prior to internship; winning student awards or engaging in professional associations; publishing or presenting internally at the university or, with relevant permission from Program Directors, in external publications or conferences; and completing a summer externship. Students should consult with their academic advisor, the DCT office, and supervisors on an ongoing basis to help build an appropriate CV - and abide by all regulations governing student conduct in any professional fields outside the university (See Expectations of Students above).
- f. **APPIC Website & Resources (www.appic.org):** gain access to full details of the internship application and match process and sign up for Email Lists (i.e., listserve) early in the clinical practicum training sequence to stay apprised of changes.
- g. **Ensure six conditions are met prior to Fall of internship application:**
- i. Be in good standing in the PsyD program, with no outstanding remediation plans which raise serious concerns to the Program Directors and/or DCT about candidate’s suitability and readiness for internship training. See “[VI. Remediation](#)” section of this handbook for clarification about remediation and internship application procedures.
 - ii. Successfully and fully complete their dissertation proposal, that is have their proposal approved, by April 30th of the year the student intends to apply for internship.
Exceptions regarding this deadline are based on compelling reasons and must be approved by the Director of the PsyD Program prior to the April 30th deadline.
 - iii. Make a reasonable case that the student can estimate that by October 1st they will have achieved at least 310 face-to-face client contact hours, 191 other direct service related hours, 99 supervision hours and 387 other support hours. That is a total of 987 total clinical hours (see above for definition). The remaining 513 hours required to meet the minimum total of 1500 as detailed above will be completed during the final year prior to the internship start date
 - iv. Demonstrate feasibility of completing all required coursework and the Clinical Skills Competency evaluations.
 - v. Successfully and fully complete written and oral Comprehensive Exams by September 15th.
 - vi. Demonstrate adequate emotional maturity, stability and professional conduct in the opinion of supervisors, DCT, and program directors.

IV.D.2. Official Request for Approval to Apply for Internship Training:

Students need approval to apply to pre-doctoral internship training sites. Approval is obtained by completion and submission of a fully signed [Appendix I: Request for Clearance to Apply for Pre-](#)

doctoral Internship, which must be endorsed by the student's Dissertation Chair, the Director of Research Training, PsyD Program Co-Director, and the Director of Clinical Training. After endorsement by the required parties, this form must be uploaded to ELC later than September 15 of the Fall semester in which the student wishes to apply for internship training. In addition to Appendix I, students must submit copies of signed documentation detailing all of their clinical hours accrued across the program, a proposed list of sites they wish to apply to, and an up-to-date Curriculum Vitae.

Internship applications, including registering for the match, should not be formally initiated prior to an official response from the DCT, who will respond within two weeks of receiving the completed Request for Clearance to Apply for Pre-doctoral Internship (Appendix I). ***It is very important to begin preparing for clearance for internship as early as possible in the 3rd year given the detailed requirements of Appendix I***

IV.D.3. Applying to an Internship Site:

Within the Psy.D. program, seeking internship training is considered a student driven process for several reasons. Primarily, the student is pursuing their own professional goals and interests and as such is in the best position to develop and implement the decisions and steps appropriate to these goals. Secondly, the Association of Psychology Postdoctoral and Internship Centers (APPIC), which oversees the application and training process, shares this approach. With this said, the DCT office has overall governance of the process - it approves who can and cannot apply and it regulates to some degree the types of sites to which a student can apply (see below). Along with a student's academic advisors the DCT office also seeks to be available to support students through advice and assistance throughout the process.

The primary resource for navigating the internship application process is found in the APPIC website (www.appic.org). Internship sites require students to submit the APPIC Internship Application Form called the [APPIC Application for Psychology Internships \(AAPI\)](#) through the Portal on the APPIC website (www.appic.org). APPIC houses a directory of potential internship sites (<https://membership.appic.org/directory/search>), which is typically updated annually in August for the following internship training year. Students should directly review each site's information to determine its specific application procedures. Obtaining an internship is a highly competitive activity.

All students are required to apply only to APA accredited internships during Phase I- these sites guarantee high standards, 'complete' an APA accredited PsyD degree such as is offered at IPS, and avoid possible problems with subsequent licensure. If a student does not match at an APA Accredited site in the first phase of the match, a student is expected to apply to a majority of APA accredited sites (e.g. no less than 75% of applications) in the second phase of the match. Per IV.D.7, a student can seek approval from the DCT to apply to additional APPIC sites in the second phase of the APPIC Match, should these sites still be available. Students seeking non-APA accredited sites should complete the "IPS DCT Non-Accredited Internship Approval Request Form" for each site they wish to apply for. A copy of the form is available upon request from the DCT office. Approval is based on the DCT's office completing a review of the training site's material evidencing that the non-accredited training program is of developmentally appropriate quality and is adequate to prepare the student for independent practice at the conclusion of

the training year. Please note, APPIC has a policy that limits the statements that internship programs can make about their accreditation process (<https://www.appic.org/About-APPIC/APPIC-Policies/Public-Statement>).

On a case-by-case basis, students may petition the Dean to pursue a part-time clinical internship. In such cases where the internship is extended beyond one year, the placement must be completed within 24 months of the beginning date of the placement.

The following requirements, recommendations, and resources provide some assistance in this process.

- a. **APPIC Match website.** Students use a national service to apply for internship. The system is known as the APPIC Match. It forms a central means to win a place and governs the process. Detailed information about the matching process is available at the APPIC web site (www.appic.org) and as procedures are complex and change every year, it is important that all students study the process in depth using up to date information. All application materials and references are exchanged through APPIC which organizes two rounds to 'match' sites and suitable candidates. The deadlines for applications to sites vary but tend to begin in late October and the whole process of interviewing and 'matching' lasts into the late spring for any students involved in the second round. ***All IPS students must read and abide by all guidelines and regulations given by APPIC in their applications.***
- b. **Students should apply to a minimum of 15 APA accredited internship sites in Phase I.** Their initial choice of these sites must be uploaded to their ELC account by September 15th (additions and changes may be made if needed and pending approval). Students should use the provided excel sheet to submit their initial site list and should complete all required domains. (The site list template can be found here: [IPS Internship Site List - 2026-2027 Template](#))

In selecting sites priority should be placed on gaining a match with an internship site. The Internship application process is highly competitive. Not matching in the first round of the APPIC match will severely decrease choice of site. Students should be guided by their career goals, training experience, and preferences but not restrict their applications so as to make placement unlikely. Similar conditions apply as was discussed with Externship sites as to compiling a 'balanced application' (see earlier section: [IV.B.2.d](#)).

1. The application may include 3-5 'reach sites' (prestigious names, popular areas of the country such as the North East and California, high ratio of applicants to slots, i.e., 1 slot for every 25+ applicants). The list should always include at least 4-5 'safety' sites (in the South or MidWest, with relatively low ratio of applicants to spots, i.e., 1 slot for every 10 applicants). A site may also be counted in the 4-5 safety sites if the student is currently or has been an extern at the site, has previously been offered a comparable externship position at the same site, or the student significantly exceeds all the internship training requirements.
2. Students should not overly restrict their applications. They should not have more than half of sites in only one area of the country (e.g., DC metro area) or only one kind of site (e.g. Eating Disorder focused internships, college counseling centers, or Christian clinics).

3. It is necessary to apply to a majority of sites which have relevance to existing experience on externship (e.g., students should not have a majority of applications to University Counseling Centers if they have no prior experience in this kind of work.)
4. Students should consult with existing IPS students on internship and consider applying to recommended sites with a history of taking students from IPS - recent history is available from the DCT office.
5. Internship sites that are 'Accredited on Contingency' or are not APA accredited cannot be applied to during Phase 1.
6. Students are required to meet with the DCT at least once before September 31st regarding their site selection, and must come to the meeting with their fully completed site list using the Internship Site List Template, and in accordance with the site selection guidelines in this section.

Students are not required to put sites on their list they really don't want to go to! However they are required to be realistic and prioritize being placed at an APA accredited site. Most students do not get everything they want in an internship; most have to move to an area of the country they do not know and they may not be able to follow all of their interests. The likelihood of compromise is true for all students from all programs nationally. There will be time to pursue multiple areas of practice after graduation. All APA accredited sites offer a high level of training which promises to establish students as professional psychologists. Flexibility and adaptation are necessary qualities to gain an internship.

During Phase 2 and in the subsequent Post-Match Vacancy periods of the APPIC internship match process, students may apply to sites that are not accredited by APA. We still require that students apply to a majority of APA accredited sites if any are available (e.g. 75% of sites should be fully APA accredited). Students seeking non-APA accredited sites should complete the "IPS DCT Non-Accredited Internship Approval Request Form" for each site they wish to apply for. A copy of the form is available in ELC.

- c. **On application materials, students should identify the school as the Institute for the Psychological Sciences, Divine Mercy University.** If asked to provide contact information about the DCT office, the student should use the DCT email (dct.ips@divinemercy.edu) *not* the Director of Clinical Training's individual email.

APPIC DPA Number	347
Institution	Divine Mercy University
Program Type	Clinical
Degree	PsyD

- d. Importance of application materials. Students should take great care to ensure that their curriculum vitae, their completed APPIC application forms and essays, and written correspondence are of very high quality. This usually takes a number of months to prepare

adequate drafts suitable to a number of different sites. It is best done in consultation with psychologists familiar with the student and their work. The DCT, academic advisors, and supervisors MUST be consulted and are available to assist students. There are a number of useful resources available to assist students in preparing for internships (see attached list of suggested articles following the table in [Appendix T](#)). More information about the required written materials can be found here: [AAPI Program Materials](#).

- e. **References.** Letters of recommendation from professors or supervisors who will provide positive, detailed and strongly supportive endorsements. **Make this request prior to October 1st, since application deadlines from various internship sites can be as early as November 1st.** Similar conditions apply as was discussed with Externship sites as to what information should be included in a request for a letter of recommendation (see earlier section: [IV.B.2.f.1.5](#)).

Your recommenders may not be aware of how to use the portal or where to look for guidance. We recommend including links to the [APPIC video](#) as well as to [the relevant APPIC webpage](#) to make their work easier. You can also provide the AAPI support email in case they have difficulty navigating the process (letters@liaisoncas.com).

One strong recommendation is to include the following in an email to your recommenders: “after referees complete an SRF for a student, they will have the option to click a box to initiate the “Re-use” feature, endorsing the use of their SRF for all future applications. If they do not check that box, each time a student identifies them as a referee for a new site, that recommender will be pinged again to complete a new SRF. APPIC suggests that recommenders generally submit a universal SRF to go to all sites and thus, use the “Re-use” feature. If, in the rare circumstance a referee wants to tailor a particular letter but generally wants to use a universal letter, they can toggle the “re-use” feature on and off.”

- f. As part of the APPIC Application for Psychology Internships (AAPI), the Director of Clinical Training is required to verify the student’s readiness for internship training and provide a letter of support for the student. Students should request this letter from the DCT office following approval to apply to internship. Allow at least 10 business days from the date of request for the letters of request to be prepared and submitted.
- g. Students should inform the DCT Office by email using dct.ips@divinemeracy.edu address when they have received an invitation to interview at an internship site to which they have applied. This will allow the DCT Office to answer questions and provide support to students including providing guidance on interview techniques prior to scheduled interview. Following the match, students are required to update their site list to include all applied to sites, whether they were interviewed, and if they would like to share their rankings. This information will be used to help future applicants.

IV.D.4. Specific Requirements to begin Pre-Doctoral Internship training:

*(Please note that the requirements to **begin** the pre-doctoral internship training are more stringent than the requirements to **apply** for a pre-doctoral internship.)*

- a. At least four conditions must be met to begin a pre-doctoral internship.

- i. Students must have successfully completed both their written and oral PsyD Comprehensive Examinations.
 - ii. Students must have successfully completed at least 475 face-to-face client contact hours and at least 1500 total clinical hours.
 - iii. Students must have completed all coursework in the PsyD curriculum (excluding the Dissertation defense)
 - iv. Students must have had their dissertation proposal approved
- b. Any student not meeting these requirements prior to the beginning of the predoctoral internship will not be permitted to begin the pre-doctoral internship even if one has been secured until all requirements are successfully completed. See the Pre-Doctoral Internship Application Process that includes timelines guidelines.

IV.D.5. Pre-doctoral Internship Evaluation:

Evaluation of the student, the site supervisor, and the internship site are completed on a regular basis throughout the internship year. All evaluations are sent to the DCT at the IPS. All evaluations and documentation are due as detailed in Documentation section above:

- a. During the internship year, the student will be evaluated by the site supervisor biannually using the site's own evaluation or Clinical Site Evaluation of Extern/Intern form (Appendix E).
- b. The student will evaluate the site supervisor tri-annually using the Student Evaluation of Site Supervisor(s) form (Appendix F).
- c. The student will evaluate the internship site on a tri-annual basis using the Clinical Practice Site Evaluation form (Appendix D).

At the end of the internship training year, students are required to submit Appendix D and Appendix F, a signed copy of their completed hours, as well as request his or her internship site to send an official Letter of Completion to the DCT at the IPS confirming the student's successful completion of the internship placement.

IV.D.6 Non-accredited Pre-doctoral Internship Requirements

When a student seeks to apply to an non-accredited internship after Phase 1 of the internship match process, they must request program approval in order to do so on a site by site basis. Provisional approval may be granted during the application phase based on an initial review of the site's training information. Formal approval, which would allow the student to rank and thereby match with a non-accredited internship site is granted based on a thorough review of the site's training plan.

For formal approval, student should complete the "[Doctoral Program in Clinical Psychology Non-Accredited Internship Approval Request Form - Assessment of Training Quality](#)" form based on the site's APPIC directory profile, training handbook, communication with the internship's training director, and/or any other relevant sources of information (e.g. site's website, supervisor biography & CVs, etc.). Formal approval is based on the DCT's office completing a review of the training site's material such that there is sufficient evidence to support that the non-accredited internship training program:

- Is of developmentally appropriate quality to adequately prepare the student for entry level independent practice at the conclusion of the training year as defined by APA CoA Internship IR C-8 I. Profession-Wide Competencies (2015, p. 71).
- Provides developmentally appropriate and systematic training experiences that are graded in complexity sufficient for the intern to develop entry-level professional functioning by the conclusion of the training year
- Provides quality supervision by appropriately credentialed psychologists sufficient for the intern to develop entry-level professional functioning by the conclusion of the training year
- Appropriately and regularly evaluates the intern's performance on all profession-wide competency with clearly outlined expectations regarding increasing levels of independence in increasingly complex clinical activities as they progress over the course of the training placement.

Approval and verification of the above requirements are documented in the DCT's section of the "Doctoral Program in Clinical Psychology Non-Accredited Internship Approval Request Form - Assessment of Training Quality" form.

IV.D.7. Non-Accredited Pre-doctoral Internship Supervision Requirements

In keeping with the American Psychological Association's internship regulations, IPS interns are required to receive 4 hours of supervision per week of which 2 hours should be direct face-to-face supervision with their primary supervisor(s). Supervision on internship should meet the requirements described in Standard II.C.3.b-c of the Standards of Accreditation (SoA). See below for a copy of the standard.

"C-14 I. Required Supervision in Internship Training Programs (https://digital.apa.org/accreditation-files/policies_procedures/apa-ir-section-c-082224.pdf)

Standard II.C.3.b-c of the Standards of Accreditation (SoA) for internship programs states that:

- Interns receive at least 4 hours of supervision per week.*
- One or more doctoral level psychologists, who are appropriately training and licensed, are involved in ongoing supervisory relationships with an intern and have primary professional responsibility for the cases on which supervision is provided. The supervisor(s) must conduct a total of at least 2 hours per week of individual supervision with the intern during the course of the year.*

The purpose of this Implementing Regulation is to clarify the supervision required for interns.

Supervision is an intervention provided by a more senior member of a profession to a more junior colleague or colleagues who typically (but not always) are members of the same profession. This relationship: a) is evaluative and hierarchical, b) extends over time, and c) has the simultaneous purposes of enhancing the professional functioning of the more junior person(s); monitoring the quality of professional services offered to the clients that she, he, or they see; and serving as a gatekeeper for the particular profession the supervisee seeks to enter (Bernard & Goodyear, 2014).

Two weekly hours of individual supervision must be conducted by a doctoral-level licensed psychologist who is involved in an ongoing supervisory relationship with the intern and has primary professional clinical responsibility for the cases on which he/she provides supervision. An intern may have different primary supervisors engaged in providing individual supervision during the course of the training year. Supervisory hours beyond the two hours of individual supervision must be supervised by professionals who are appropriately credentialed for their role/contribution to the program. These 2 additional hours of supervision should be consistent with the definition of supervision provided above. These interactive experiences can be in a group or individual format and must be provided by appropriately credentialed health care providers. The primary doctoral-level licensed psychologist supervisor maintains overall responsibility for all supervision, including oversight and integration of supervision provided by other mental health professionals with psychological research and practice.” (APA, 2025, p 81)

E. Introduction to Supervision

This section is to be read to complement the IPS Center training and the IPS Center or External Site Supervisor Contract.

IV.E.1. Supervision Hours Requirement.

Please note that IPS requires that the supervision ratio to clinical service is one hour of individual supervision to every four hours of direct service provided at each training site. It is the student’s responsibility to ensure that they are receiving this ratio of supervision at their current site. Please track this ratio throughout the semester, in order to problem solve if necessary. This is critical for licensure requirements; if this requirement is not met, the DCT office may not be able to attest that students have met all licensure requirements. Students must contact the DCT office if this ratio is not met.

IV.E.2. Overview of Supervision.

Supervision is the process through which students receive their most personal and intensive professional training. Supervision is a unique type of tutorial relationship in which a person with less experience submits his/her work for scrutiny and feedback by a person with more experience.

The supervisory session typically focuses upon a work sample presented (e.g., videotape of a therapy session or written protocol) along with the variety of issues that may arise in the context of the work. The focus of the supervision will vary with the training level and needs of the student. Generally, through the supervisory process, students are assisted in:

- Providing appropriate and timely care to clients

- Gaining and incorporating knowledge relevant to the practice of assessment and therapy,

- Developing specific assessment and therapy skills, and

- Developing a coherent model for integrating the Catholic understanding of the human person in clinical practice.

Developing and incorporating knowledge of the self as clinician, including considerations of transference and countertransference, diversity, and professional identity, in the service of the client and the development of appropriate and ethical clinical skills.

IV.E.3. Styles of Supervision.

It is important to note that although all faculty at IPS share the same general goals, they vary widely in their personal styles and approaches. In any case, faculty and supervisors will endeavor to promote an atmosphere of openness, and it is expected and essential that the student will be receptive to the feedback and guidance provided. This may at times touch upon issues for which a student has some sensitivity. Therefore, it is important to be clear that the supervision process is distinct from personal therapy, and should never be construed as such, by either supervisor or supervisee. Should either party perceive that the issues discussed lend themselves to a more therapeutic encounter, this should be raised immediately and appropriate referral and consultation sought. It is not uncommon for trainees to seek personal therapy during their training, and the IPS faculty is supportive of such efforts. The distinction between supervision and therapy should not preclude discussion of issues related to personal professional style, diversity, feelings about a client, or supervisee's reactions being discussed in supervision.

IV.E.4. Context for Supervision.

Supervision will occur within both individual and group contexts. Individual supervision enables the supervisor to provide consistent, on-going and uninterrupted attention to the work of the individual supervisee. It is here that it is more likely for a student to address their individual responses to a client and process feelings and reactions.

Group supervision is based upon the premise that participants can learn a great deal from witnessing others' case presentations, viewing differing styles of interaction, and hearing the insights of other supervisees. In addition, making presentations before small group supervision will enhance the student's skill in organizing case materials and functioning in professional settings. It is equally acceptable that the same supervisor provide both individual and group supervision or that each is provided by different supervisors. *If one of the supervisory hours is not provided by a licensed, doctoral level psychologist, the licensed, doctoral level psychologist must be the primary supervisor while the other supervisor acts in a secondary capacity.* In all circumstances, the primary supervisor must have responsibility for the care provided by the student within the agency.

IV.E.5. Dual Relationships with Supervisors:

It is unethical for students to receive supervision from persons when such supervision creates a conflictual dual relationship. This includes receiving supervision from one's own therapist, spouse, close relative, or friend. It is also unethical to engage in dual relationships of a sexual or romantic nature with a supervisor, as the APA Ethical Guidelines state.

IV.E.6. Telesupervision Policy:

Definitions

In-person supervision is “supervision of psychological services where the supervisor is physically in the same facility as the trainee”.

Telesupervision is defined as “supervision of psychological services through a synchronous audio and video format where the supervisor is not in the same physical facility as the trainee” (APA Implementing Regulation C-13D).

Normative Practice

The primary modality of supervision for students is in-person supervision. This is recommended by APA standards, is favored by licensing standards in some states [ASPPB, 2020 Supervision Guidelines, C-E], and is in the best interests of effective training and optimal care of patients.

Benefits to in-person supervision include, but are not limited to: opportunities for professional socialization and assessment of trainee competence, recognition and processing of subtle, nonverbal, and emotional or affective cues and interactions in supervision, all of which are essential aspects of professional development, ensuring quality, and protecting the public.

([APA Standard C-13 D](#))

In applying for extern and internship positions, students should take care to ensure the provision of in-person supervision by a licensed clinical psychologist is a priority in their deliberations and they should carefully research the supervision requirements for licensure in their chosen state.

Rationale for using Telesupervision: Consistency with program aims

Although in-person supervision is to be the normative practice, it is recognized that there are reasons why telesupervision may at times be acceptable:

- a. The use of technology has increasingly become part of clinical practice, increasing efficiency, accessibility to services and continuity of care. Students benefit from having familiarity with contemporary practice, including the use of telehealth, in training.
- b. There may be circumstances where telesupervision is the only practical way to access supervision - for instance where one or other party is ill, there are scheduling problems with meeting, or there is a need to consult given clinical emergencies outside of normal hours. Telesupervision through increased flexibility thus can promote access and continuity in training
- c. It is consistent with program aims that students have the opportunity to apply to and work at a broad range of training sites, including smaller agencies and those serving underserved or rural areas with limited staffing and at times multiple clinical locations. Telesupervision may be the only practical way to facilitate such training experiences - and ensure clinical psychologists are the primary supervisors of students, an important condition for a practicum or internship placement.

Policies regarding the use of Telesupervision

To maintain the efficacy of clinical training and abide by [APA Implementing Regulation C-13D](#), it is required that students and their sites should adhere to the following policies when utilizing telesupervision:

- **How and when Telesupervision may be used.**

- Telesupervision does not normally occur as a regularly scheduled practice, during the first year of clinical training (Introductory Practicum). Telesupervision may occur only to provide continuity of care in the event of illness or in crisis type situations.
- After a completed and satisfactory first year of clinical training, more regular telesupervision is permissible. However, telesupervision should not constitute more than 49% of the total number of hours of supervision required to fulfill practicum or internship requirements.

- **Fitness for Telesupervision**

- Students are required to receive training from their training site in both HIPAA compliance and appropriate engagement in telesupervision as well as any relevant site policies regarding telesupervision prior to engaging in telesupervision to ensure client privacy & confidentiality.
- Should supervisor/training site evaluations during the first year of clinical training suggest that a student has notable problems in their training or is struggling adequately to utilize supervision, the student may be required by the Director of Clinical Training to apply only to sites where supervision is regularly scheduled as occurring in person and telesupervision only in exceptional circumstances

- **How the standards of supervision and client privacy and confidentiality will be maintained**

- All supervision meetings should be conducted in a professional and HIPAA compliant manner, maintaining privacy and client confidentiality. This should include at a minimum:
 - each party having regular access to a private room with adequate soundproofing - supervision should not occur with either party outdoors or in a room shared with others (including classrooms, the library, shared areas of an apartment, in a car etc.}.
 - meetings conducted in a professional manner as if they were occurring in person i.e. they do not occur while exercising, eating dinner, playing with pets, being inappropriately dressed etc.
 - a safe and reliable internet connection, adequate hardware, and anti-virus/spyware software, HIPAA compliant communication including videoconference or online platforms, document or screen sharing arrangements, phone, email or texts
- Supervisors should discuss the potential limitations of telesupervision with their supervisees at the outset of their supervisory relationship and as pertinent throughout the relationship.
 - Such topics might include the lack of professional socialization, impoverished nonverbal, affective cues and interactions, difficulty assessing the therapeutic stance of supervisees during in person therapy, any sense of the supervisee feeling distanced from the supervisor and thus failing to disclose necessary information.
 - Supervisors should document steps being taken to note, remedy or guard against such deficiencies.

- **How telesupervisors may maintain full professional responsibility for their supervisees and ensure clinical coverage occurs to support training**
 - When seeing an in-person client, the site/telesupervisor must provide the student with access to an on site licensed clinician. Should the student see a client over telehealth, the site and supervisor must have arrangements whereby the student has contact details for their supervisor and/or other coverage licensed clinicians so that the student may receive real time assistance and oversight.
 - All telesupervisors should be as familiar with the standards and practices of the training site and PsyD program, as they should for in-person supervisors. In particular, arrangements should be made to facilitate telesupervisors engaging in direct observation of students' work, whether by using audio/video recordings, being present during telehealth sessions, or making in person visits.
- **How difficulties with Telesupervision policies may be resolved**
 - Students or supervisors who have significant concerns about the practice of telesupervision given these policies should report their concerns to the Site Training Director and the DCT Office as soon as possible.
 - Failure adequately to comply with these policies may result in the withdrawal of a student from the training site.

Student Responsibilities in the Application Process

As discussed, students should strongly favor applying to sites which offer in person supervision. It is the responsibility of students to inquire as to the proposed supervision arrangements of training sites during the application process. Where sites propose the regular scheduling of telesupervision it should be considered:

- a. whether the student is in a position to comply with the above telesupervision guidelines
- b. whether the sites and their supervisors are able or willing to comply with telesupervision policies
- c. whether the student feels confident in their ability to develop the necessary supervisory rapport for appropriate clinical care and training (e.g. to address barriers to rapport building via telesupervision directly with the supervisor and to collaborate to address these barriers.)

Students should be familiar with the above minimum requirements for telesupervision. Training sites will be required to make a written commitment as part of their Appendix G agreement with Divine Mercy University to meet the conditions given above (See [Appendix W](#) - which can be initiated in your DCT Course). If the site is unable to do this, or to make alternative arrangements for in person supervision, the student will be unable to take up the training position. As it may be difficult for students to secure alternative training provision at this stage in the application process, it is imperative that students conduct a thorough evaluation of the quality of supervision prior to accepting an externship or internship.

V. Academic Clinical Experience

V.A. Clinical Skills Ratings

At the end of each of the clinical courses taken by a student, the instructor rates the student using Clinical Rating Scales (see [Appendix C: Evaluation of Students' Clinical Skills](#) for a sample) which cover the following four areas: specific clinical skills, responsiveness and use of supervision, ethical reasoning and judgment, and the ability of the student to integrate a Catholic Christian perspective into their work. Each course in which such evaluation takes place is considered a clinical competency. In order to pass the clinical competency for a given course, the student must have a score of '3 - Functional Proficiency' (on a 5-point scale) in all areas assessed. In addition, in the case where a student receives a rating score below 3 for any of the areas assessed, the student will be required to complete remediation in order for the competency to be considered "passed." PsyD students must pass all Clinical Skills Competencies

Basic Clinical Skills Competency Areas and Courses of Assessment:

PSY 516 Basic Interviewing and Clinical Skills
PSY 608 Cognitive / Behavioral Assessment Skills
PSY 613 Personality Assessment Skills
PSY 609 Adult Psychotherapy Skills
PSY 610 Child Psychotherapy Skills
PSY 611 Marital Psychotherapy Skills

Advanced Clinical Skills Competency Areas and Courses of Assessment:

PSY 724 Advanced Adult Psychotherapy Skills
PSY 735 Advanced Adolescent and Family Therapy Skills
PSY 830 Psychologist-Consultant, Supervisor, Educator
PSY 836 Advanced Personality Assessment Skills

V.B. Comprehensive Examination Process

To assess students' general competence in clinical psychology and integration of psychology with philosophy & theology, comprehensive exams are scheduled to be taken following the third year Spring semester of the program. Comprehensive exams assess the theoretical and applied skills that students have acquired in the classroom and through their practicum experiences. In addition, students demonstrate acumen with research and statistics, as well as an understanding and application of relevant diversity issues, adherence to ethical standards of practice, appropriate integration of a Catholic-Christian view of the human person in clinical work, and the ability to communicate professionally and effectively. Finally, students demonstrate integrative reasoning by analyzing, assessing, and summarizing the clinically relevant subject matter of a clinical case.

The PsyD Comprehensive Exam includes both a written, and an oral component. The written portion consists of several questions administered via Canvas across two days, and the oral portion consists of one case-conceptualization, which is presented to faculty on-campus.

Students must achieve an 80% or better on each sub-part of both the written and the oral components to successfully pass the comprehensive exam and subsequently apply for internship.

V.C. Graduation Requirements

In order to qualify for graduation, the following must be successfully completed within seven academic years from the date of admission to the Psy.D. Program: 122 credit hours of coursework; a minimum of 1,500 hours of pre-internship clinical training, comprehensive exams, a doctoral dissertation, and a pre-doctoral internship. It is the responsibility of each student to successfully fulfill all of their degree requirements.

In addition to the academic and clinical requirements, it is necessary for students to be cleared of all library obligations and to present a satisfactory clearance of financial accounts prior to graduation. Students who have not made satisfactory financial arrangements will not have access to any student services, including transcripts, diploma verifications, transfer credits, or enrollment in courses or for another program.

The Institute confers degrees upon the recommendation of the faculty and by the authority of the Board of Directors, three times a year: August, September, and December. Students whose degrees are conferred in August or December are encouraged to participate in the following annual May Commencement. Degree conferral and Commencement dates are posted in the Academic Calendar (<https://divinemeracy.edu/university-calendar/>). The Graduation Fee covers all aspects of the degree completion process and will be applied to all student accounts of degree candidates, regardless of participation in the Commencement ceremony.

Students who are eligible for graduation (degree candidates) must submit an Application to Graduate form to the Registrar at the time of registration for their final semester to obtain a final degree audit and receive the approval of their respective program director. Materials related to the Commencement exercises, including orders of invitations and regalia, will be distributed approximately 90 days prior to the degree conferral date.

Participation in the Commencement ceremony is allowed only if all coursework and degree requirements have been completed prior to the event. However, because of the unique schedule of some predoctoral-internship experiences, students who have completed all other degree requirements prior to the Commencement, except for outstanding pre-doctoral internship hours (which can be reasonably completed by the end of summer according to the individual sites' schedules), may be eligible to walk at the Commencement with the approval of the Director of the PsyD Program and Registrar. This special participation does not signify or ensure degree conferral. Once all degree requirements have been completed with the successful conclusion of the pre-doctoral internship, degree conferral will occur in August. (See Official Catalog for further details).

VI. Remediation

VI.A. Remediation Policy

In keeping with APA Standards of Accreditation for Health Service Psychology and as stated in the Psy.D. Program Catalog,

“Graduation with a degree in clinical psychology requires more than adequate grades and scholarly ability. Students must reach adequate levels of competency in psychological assessment and psychotherapy, and possess the ability to exercise good clinical judgment, ethical reasoning, respect for diversity, and professionalism. It is the solemn responsibility of IPS to serve as a gatekeeper for entrance into the profession. Students who are unable to meet the required competencies are subject to remediation policies, which may include being dismissed from the program.” (“Competencies”)

In line with this competency requirement, the following remediation process outlines standard corrective measures intended to assist students who have not met sequential program requirements pertaining to developing, maintaining, and progressing in their academic, professional, and clinical competencies. The remediation process is focused on assisting the student in meeting the program requirements in a timely manner for continued progression through the program. At each level/tier of remediation, the student is notified of any identified problems and/or deficiencies as well as the requirements for the student to resolve the concern(s).

A student who fails to meet the minimum clinical, course, and/or program standards is required to complete a remediation process. The remediation process may be triggered automatically by ratings below ‘3 - Functional Proficiency’ on regularly scheduled evaluations. Alternatively the process may be initiated outside of such reports in response to problems as they arise in the course of academic, professional, or clinical functioning. The remediation process may also be initiated in response to a lapse in professionalism as judged by the professional competencies in which the student will have been expected to be proficient. Please note, academic concerns may be incorporated into the remediation process when perceived to be relevant or they may have separate processes that work in parallel with remediation procedures.

While the remediation tiers are meant to be followed stepwise, exceptions can occur in which a tier (or more) may be skipped if the issue at hand is deemed severe enough by the instructor(s)/supervisor(s) and/or DCT, and the Director(s) of the PsyD Program.

Students should be aware that external training sites may have their own remediation processes. In such cases, the site and the PsyD’s program’s remediation processes may operate collaboratively or independently depending on the nature of the concerns and/or level of training. With that said, the IPS program remediation process will ultimately govern the student’s status and progress in the program, while external sites decide a student’s status in their training program.

The remediation process is overseen by the Director of Clinical Training office often in collaboration with course instructor(s), clinical training supervisor(s), and IPS program officials, including the

student's academic advisor. Records of remediation steps are kept by the DCT office, may become a part of the student's record, and may be reported to outside parties as described below.

VI.A.1. Remediation Status & Internship Eligibility

The Association of Psychology Postdoctoral and Internship Centers (APPIC) oversees the psychology internship application and training process. As such, APPIC has outlined specific requirements for doctoral programs to verify that a student is eligible and ready for the rigors of internship level training and clinical practice. Included in APPIC's Doctoral Program Associate policies is the following requirement:

"In general, a student is deemed "ready" for internship only if they currently meet the doctoral program's internship readiness/eligibility criteria (e.g., comprehensive examinations, dissertation progress, specific competencies) and are not currently on probation or completing a performance improvement plan (e.g., learning, developmental, remediation plan, etc.) for standards or competencies that are relevant to internship training." ([See APPIC DPA Policies 4a-4c](#))

In keeping with this policy, a student must be in good academic and clinical training standing in order to be eligible to apply for internship. A student who has not successfully and fully completed remediation for Tiers 3-5 is *ineligible* to apply for internship and/or participate in the national match process. Please see policies outlined under each remediation tier for more specific information regarding disclosure of past and current remediative status in the DCT verification letter that is required in the internship application packet.

VI.B. Remediation Tiers

The tiers described below outline the remediation process.

VI.B.1. Tier 1: Verbal Notification (VN)

A Verbal Notification is the first phase of helpful correction. A VN is given by the immediate instructor(s)/supervisor(s) of the student when an academic, clinical, or professionalism issue is seen as in need of more corrective attention than deemed usual. Students are expected to respond to a verbal notification by correcting the area(s) of concern in a timely manner and maintain expected performance.

If a student receives multiple verbal notifications regarding the same or similar behavior and/or does not correct areas of concern, they may be subject to higher tiers of remediation.

Verbal notifications are reported to the DCT, who keeps an official record of all remediative steps and the student's progress. VNs are not recorded in the student's file nor are they disclosed to outside programs (e.g. training sites, on internship applications, licensing boards, etc.).

VI.B.2. Tier 2: Personal Performance Improvement Plan (PPIP)

A Personal Performance Improvement Plan is the second phase of correction. The development of PPIP is initiated by the instructor(s)/supervisor(s) alongside the DCT, usually in response to an unresolved

Verbal Notification, poor academic performance, or a rating below a '3 - Functional Proficiency' on any clinical, course, and/or program competency ratings/requirements.

A PPIP will usually be drawn up collaboratively between the DCT, the instructor(s)/supervisor(s) who identified the issue, and the student. The PPIP requires that the student provide a written reflection on the area(s) of concern, accurately identify factors that contributed to poor performance, and develop a written plan to improve their performance in the short and long term. The student will receive feedback on this plan from the instructor(s)/supervisor(s) as part of the corrective process. The student is then required to follow this plan in order to achieve expected functioning within one evaluation period (typically occurring at the end of each semester) and to maintain this level of functioning for one additional evaluation period. For concerns related to evaluated competencies, the student must achieve at least a rating of '3 - Functional Proficiency' in the domain(s) of concern within one evaluation period and maintain this level of competency for one additional evaluation period.

A record of this phase is kept by the DCT and is documented in the student's file. Remediation at this tier is not officially reported in the student's internship application or to external parties.

VI.B.3. Tier 3: Formal Performance Improvement Plan (FPIP)

A Formal Performance Improvement Plan is the third phase of correction. A FPIP is issued directly from the DCT, usually in response to an unresolved PPIP or significant academic, clinical, and/or professionalism concerns. The FPIP is developed by the DCT office and includes a summary of the problematic issue(s) at hand, the corrective steps to be taken, including achieving satisfactory clinical and academic performance, and the time frame for completion. The typical timeframe for completion of a FPIP is one evaluation period (typically occurring at the end of each semester) to achieve expected functioning and two additional evaluation periods to maintain this level of functioning. For concerns related to evaluated competencies, the student must achieve at least a rating of '3 - Functional Proficiency' in the domain(s) of concern within one evaluation period and maintain this level of competency for two consecutive evaluation periods in the domain(s) of concern.

Students on remediation tier 3 or above are not eligible for additional service and training opportunities including: SLC membership or filling in for SLC members at program events, cohort representation at official program events (e.g., admissions days, etc.), etc.

Please note, confirmed/determined academic integrity issues automatically result in a minimum of Tier 3 remediation. If at any time in the program another confirmed issue of academic integrity arises, the student is automatically placed under review for dismissal from the program by the Student Professional Development Committee even if remediation for the initial academic integrity issue is resolved. See DMU Catalog section of 'Academic Integrity' for more information.

A record of this phase is kept by the DCT and is documented in the student's file. If the areas of concern are present at an external practicum training site or immediately prior to the student beginning an external practicum, the DCT office may collaborate with site supervisor(s) to support the remediation process and the student's long-term success.

In keeping with APPIC policies, remediation at this tier is officially reported in the student's internship application if this level of remediation is active at the time of application. Put another way, if a student has fully and successfully completed a FPIP prior to applying to internship training sites, the resolved FPIP will not be reported on their application. If a FPIP is not resolved at the time of the internship match, the student must withdraw from the match process in keeping with APPIC policies.

VI.B.4. Tier 4: Corrective Action Plan (CAP)

A Corrective Action Plan is the fourth phase of correction. A CAP is issued directly from the DCT, usually in response to an unresolved FPIP or serious academic concerns. A CAP is developed by the DCT office and includes a summary of the problematic issue(s) at hand, the corrective steps to be taken, including achieving satisfactory clinical and academic performance, and the time frame for completion. The typical timeframe for completion of a CAP is one evaluation period (typically occurring at the end of each semester) to achieve expected functioning and three additional evaluation periods to maintain this level of functioning on all clinical, course, and/or program competencies and academic requirements. On a CAP, the student has one evaluation period to reach '3 - Functional Proficiency' and three consecutive evaluation periods of maintaining ratings of at least '3 - Functional Proficiency'. Moreover, a student on a CAP is required to successfully complete a full year of training at the '3 - Functional Proficiency' level for all ratings across all evaluation periods prior to being eligible for more advanced training.

A record of this phase is kept by the DCT and is documented in the student's file. If the areas of concern are present at an external practicum training site or immediately prior to the student beginning an external practicum, the DCT office will collaborate with site supervisor(s) to support the remediation process and the student's long-term success. A student at this level of remediation may not participate in the internship match process in keeping with APPIC policies. Additionally, a record of this remediation process may be reported as part of the student's practicum and internship applications regardless of status (e.g. complete, in progress, etc.). The DCT office may also be required to report the remediative steps to additional external parties (e.g. licensing boards, post-doctoral training sites, as part of the DCT's response to any information requests, etc.).

VI.B.5. Tier 5: Clinically-at-Risk (CR)

As the fifth and final phase of correction, the Clinically-at-Risk tier indicates grave concerns about the student's current academic/clinical performance and ability to complete program requirements. Notification of CR status is issued jointly from the DCT and Director(s) of the PsyD Program, usually in response to an unresolved CAP or major academic concerns.

A programmatic response and plan to address concerns at this level of remediation is developed collaboratively between the DCT, the Director(s) of the PsyD Program, student's academic advisor, and if applicable the instructor(s)/supervisor(s) who reported the issue. Remediation at the CR tier consists of a written summary of the problematic issue(s) at hand, the corrective steps to be taken, and the time frame for completion. A student at this level of remediation may not be eligible to engage in more advanced clinical training (e.g., advanced practica, pre-doctoral internships, etc.) until specific remediative steps have been fully and successfully completed. A student who is deemed clinically at risk is then required to successfully complete at least a full year of training at the '3 - Functional Proficiency'

level for all ratings across all evaluation periods prior to being eligible for more advanced training. This timeframe may be extended based on the nature of the area of concern(s). Failure to fully and successfully complete all the steps within the plan in the specified time frame may lead to the dismissal of the student from the PsyD program.

A record of this phase is kept by the DCT and in the student's file, is disclosed to current and potential training supervisor(s), and is officially reported on the student's internship application regardless of remediation status at the time of application. In keeping with APPIC policies, a student at this level of remediation is not eligible to participate in the internship match process. The DCT office may also be required to report the remediative steps to additional external parties (e.g. licensing boards, post-doctoral training sites, as part of the DCT's response to any information requests, etc.).

VI.C. "At-Risk"

A student who fails to successfully complete a remediation plan, has multiple remediation plans, and/or in the matters of serious gravity (e.g., severe ethical violations), will be deemed "at risk."

A student determined to be "at-risk" may be dismissed from the program in accordance with the PsyD program's academic policies (See VI.D. Dismissal from the Program for more information) and *DMUCatalog*.

VI.D. Dismissal from the Program

A Student who fails to successfully complete a Remediation: Clinically-At-Risk Plan, who is not making adequate progress in the doctoral program, or who engages in conduct that poses an extreme risk will be evaluated by the Student Professional Development Committee (SPDC) for a comprehensive academic and clinical review of relevant documentation provided by those involved in their training throughout the program. As part of this process the student will be invited to provide documentation on their behalf. Recommendations from the SPDC committee will be strongly considered in the determination of a program dismissal. However ultimately the decision of whether the student should continue in the program rests with the IPS Dean.

V. References

This section will continue to be updated by the DCT Office in future iterations of the Handbook.

American Psychological Association. (n.d.). Section C: IRs Related to the Standards of Accreditation. *Implementing Regulations*. https://irp-cdn.multiscreensite.com/a14f9462/files/uploaded/Section%20C_1.15.2020%20update.pdf

VI. Appendices

Note: All forms must be submitted electronically. Paper forms will not be accepted.

Appendix A: Waiver of Liability



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Doctoral Program in Clinical Psychology Waiver of Liability

(To be signed by student and given to the DCT for student's permanent file)

Students are advised that malpractice in psychotherapy may result in liability. Therefore, students are required to have and maintain appropriate liability protection in full force throughout the duration of their enrollment in the PsyD program. Students must provide documentation that includes a valid certificate of insurance updated each academic year to the PsyD program, and at any time upon request.

The PsyD Program, Institute for the Psychological Sciences, and Divine Mercy University assumes no responsibility to defend, hold harmless or indemnify any student sued for malpractice whether or not the lawsuit is successful.

Student Signature

Student Printed Name

Date



**INSTITUTE FOR THE
PSYCHOLOGICAL SCIENCES**

**Doctoral Program in Clinical Psychology
Student Ethical Agreement**

(To be signed by student and given to the DCT for student's permanent file)

Please read and sign below

1. I hereby attest that I have read and understand the American Psychological Association Ethical Principles of Psychologists and Code of Conduct* and will practice in accordance with these standards, as well as the standards of the Institute for the Psychological Sciences. Any breach of these ethics or any unethical behavior on my part may result in my removal from the Practicum site or Internship site; a failing grade; and documentation of such behavior will become part of my permanent record.
2. I agree to adhere to the administrative policies, rules, standards, practices and program requirements of the internship and clinical placement site.
3. I understand that it is my responsibility to keep the Director of the PsyD program, the Director of Clinical Training, and all supervisor(s) informed regarding my externship and internship placements.
4. I understand that I will not be issued a passing grade on my practicum course (PSY 601, PSY 602, PSY 701, PSY 702, PSY 703, PSY 801, PSY 802, PSY 803, PSY 901, PSY 902, PSY 903) unless I demonstrate a satisfactory proficiency in skill, knowledge, and competence; complete course requirements; and complete requirements of the PsyD program at the given level of my training.

Student Signature

Student Printed Name

Date

****A copy of the Ethical Principles of Psychologists and Code of Conduct is on long-term reserve in the IPS Library. The IPS Code of Conduct can be found in the IPS Program Catalog.***



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Example Doctoral Program in Clinical Psychology Evaluation of Students' Clinical Skills

COMPLETED IN ELC (SAMPLE SCREENSHOT BELOW)

PSY 516 Clinical Rating Scale

This evaluation is intended to help the faculty and IPS assess the student's progress and readiness to pursue further graduate study in clinical psychology. This form is intended as a guide only, feel free to include additional comments that you think would help the student's development as a professional psychologist.

PROGRAM GOAL 2: INTEGRITY IN PRACTICE

OBJECTIVE A: KNOWLEDGE OF DIVERSITY AND INTEGRATION OF MULTICULTURAL COMPETENCE IN ALL AREAS OF PRACTICE

Goal 2: Objective A.*	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
1. Considers cultural, ethnic, or religious identity.	☐ 0	☐ 1 Clinical remediation or corrective training required.	☐ 2 Clinical remediation or corrective training required.	☐ 3	☐ 4	☐ 5

Rubric Score:

Rubric Mean:

PROGRAM GOAL 2: INTEGRITY IN PRACTICE

OBJECTIVE B: ETHICAL DECISION MAKING AND JUDGMENT

Goal 2: Objective B.*	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
1. Sound knowledge of legal & ethical principles.	☐ 0	☐ 1 Clinical remediation or corrective training required.	☐ 2 Clinical remediation or corrective training required.	☐ 3	☐ 4	☐ 5

2. Ability to reason through legal & ethical dilemmas.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
3. Adherence to legal & ethical practices in clinical work.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5

Rubric Score:

Rubric Mean:

PROGRAM GOAL 2: INTEGRITY IN PRACTICE

OBJECTIVE G: RESPONSIVENESS TO SUPERVISION

Goal 2: Objective G.*	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
1. Initiative in identifying needs and learning new skills.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
2. Open to new ideas and techniques/ nondefensiveness.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
3. Utilizes constructive criticism/applies feedback well.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5

Rubric Score:

Rubric Mean:

CORRECTIVE INSTRUCTION FOR PROGRAM GOAL 2

Are ANY of the items for Objectives A, B or G under Program Goal 2 below 3? Please indicate "yes" or "no". If "yes", the student is in need of corrective instruction.

Goal 2, Objective A, B or G under 3?

☐ Yes ☐ No

PROGRAM GOAL 3: ASSESSMENT AND DIAGNOSIS

OBJECTIVE A: INTAKE EVALUATION

PSY 516 Clinical Rating Scale Rubric	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
1. Ability to gather relevant information.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5

Rubric Score:

Rubric Mean:

CLINICAL REMEDIATION FOR PROGRAM GOAL 3

Is the item for Objective B under Program Goal 3 below 3? Please indicate "yes" or "no". If "yes", the student is in need of corrective instruction.

Goal 3, Objective B under 3?

☐ Yes ☐ No

PROGRAM GOAL 4: THERAPEUTIC INTERVENTION

OBJECTIVE C: BUILDING AND MAINTAINING THE THERAPEUTIC RELATIONSHIP

Goal 4: Objective C.*	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
1. Treats patient with dignity and respect.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
2. Initiation and termination of interaction.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
3. Builds and maintains empathy.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5

4. Appropriate use of support/engagement skills.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
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Rubric Score:

Rubric Mean:

PROGRAM GOAL 4: THERAPEUTIC INTERVENTION

OBJECTIVE D: PSYCHOTHERAPY SKILLS

Goal 4: Objective D.*	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
1. Non-verbal attending skills.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
2. Maintenance of appropriate boundaries.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
3. Appropriate insight into own behaviors and feelings.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
4. Does not use self-disclosure inappropriately.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5
5. Can confront/structure effectively when necessary.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5

Rubric Score:

Rubric Mean:

CLINICAL REMEDIATION FOR PROGRAM GOAL 4

Are ANY of the items for Objectives C or D under Program Goal 4 below 3? Please indicate "yes" or "no". If "yes", the student is in need of clinical remediation.

Goal 4, Objective C or D under 3?

☐ Yes ☐ No

PROGRAM GOAL 6: CLINICAL PRACTICE FROM A CATHOLIC PERSPECTIVE

OBJECTIVE B: CATHOLIC INTEGRATION IN CLINICAL PRACTICE

PSY 516 Clinical Rating Scale Rubric	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
Catholic Report Writing 1. Apply a Catholic understanding of the person to select appropriate interviewing techniques for the development of a genuine helping relationship.	☐ 0	Clinical remediation or corrective training required. ☐ 1	Clinical remediation or corrective training required. ☐ 2	☐ 3	☐ 4	☐ 5

Rubric Score:

Rubric Mean:

CORRECTIVE INSTRUCTION FOR PROGRAM GOAL 6

Are ANY of the items for Objectives B under Program Goal 6 below 3? Please indicate "yes" or "no". If "yes", the student is in need of corrective instruction.

Goal 6, Objective B under 3?

☐ Yes ☐ No

PSY 516 Total Summary:

Total Score:

Total Mean:

Comments:

Instructor Signature:

Date

Student Signature:

Date

Director of Clinical Training Signature:

Date

* Please do not print screenshots, they are for illustrative purposes only.

** Students may access their evaluation results in ELC once the form has been completed by the instructor.

Appendix D: Student Evaluation of Practicum Site



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Doctoral Program in Clinical Psychology Student Evaluation of Practicum Site COMPLETED IN ELC (SAMPLE BELOW)

INSTRUCTIONS

Students, please complete the following evaluation of your practicum site.

Your Email:

Your Full Name:

Agency/Practicum Site Name:

Supervisor Name:

Training Start Date:

Training End Date:

Term:

☐ Fall (through December 1)

☐ Spring (through May 1)

☐ Summer (May 2 - end of training year)

☐ Summer only

Training Year (e.g. 2022-2023):

Training Experiences:

INSTRUCTIONS

Students, please complete the following evaluation of your practicum site.

	N/A	Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Somewhat Satisfied	Very Satisfied
Amount of clients	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Types of clients	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Provision of necessary testing supplies	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Availability of necessary testing supplies	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Availability of space (therapy rooms, testing tables, etc.)	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Training facilities (video, audio, observation)	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

ADMINISTRATIVE SUPPORT / MILIEU:

INSTRUCTIONS

Students, please complete the following evaluation of your practicum site.

	N/A	Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Somewhat Satisfied	Very Satisfied
Thorough orientation to facility and procedures (within first two weeks)	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Introduction to other staff	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Consistent relay of messages	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Assistance in obtaining needed materials	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Consistency in scheduling appointments for clients	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Consistently available office space	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

Other Comments:

Student Signature:

Date

Director of Clinical Training Signature:

Date

* Please do not print screenshots, they are for illustrative purposes only.

* Students may access a copy of their feedback in ELC, once the form has been submitted.

Appendix E: CUA Counseling Center Evaluation of Extern



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Doctoral Program in Clinical Psychology CUA Counseling Center Evaluation of Extern COMPLETED IN ELC (SAMPLE BELOW)

Extern Name:

Agency/Practice Site:

Supervisor:

Term:

Year:

Methods of Evaluation (check appropriate box):

- | | |
|---|---|
| ☐ Review of Written Work/Reports | ☐ Direct Observation/Co-facilitation |
| ☐ Review of Raw Test Data | ☐ Seminars/Staffing |
| ☐ Discussion of Clinical Interaction | ☐ Audio/Videotape |
| ☐ Comments from Other Staff | ☐ Case Presentation/Discussion |
| ☐ Live supervision/shadowing | ☐ Other: |

Supervision setting (check appropriate box):

- ☐ Group
- ☐ Individual
- ☐ Other:

Evaluation Process:

In each section, use the following rating scale to reflect the student's performance in the area identified

Rating Scale

In the following sections, use the following rating scale to reflect the student's performance in the area identified.

5. Mastery: Definite area of strength, skill level comparable either to autonomous level of functioning at pre-doctoral internship level practice.

4. Advanced Proficiency: An area of superior competency, but supervision may be needed to strengthen competence with more complex cases.

3. Functional Proficiency (MLA): *An area of developing competency, routine, on-going supervision required for advancement in skill area.*

2. Marginal Proficiency: *An area of weakness, marginal competency displayed, requires more structured supervision to achieve minimum standards of functional proficiency. **This rating will flag students for remediation.***

1. Inadequate Proficiency: *A major area of weakness, little or no competency displayed, alternative placement, training or additional coursework needed. **This rating will flag students for remediation.***

Section 1. Independent and Professional Functioning	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
RESPONSIBILITY: Ability to follow through and complete assigned tasks; ability to work independently and assume responsibility for actions	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INITIATIVE: Shows keen interest, initiative, and willingness to be involved; participates in staff meetings and/or organizational events	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TIME MANAGEMENT: Punctuality client services and agency meeting and seminars; attendance; meeting deadlines as required (e.g., case notes, closing files, returning phone calls)	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
RECORDS: Ability to maintain complete records and all pertinent client information, notes are clear and concise, filing is in compliance with HIPAA	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PROFESSIONAL CONDUCT: Compliance with agency guidelines, staff. Willingness to follow directions and guidance from Training Director, agency administrative staff, etc.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
COLLEGIALITY: Works well with clients and clinical staff (including proper attire, conduct, speech); cooperates with other staff and co workers	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PROBLEM SOLVING: Ability to conceptualize, analyze, synthesize, and evaluate information obtained, utilizes critical thinking skills to resolve dilemmas	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF-AWARENESS: Ability to critically evaluate own strengths and weaknesses in clinical practice and the larger organizational scheme	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 2. Knowledge of the Psychological Sciences as Applied to Clinical Practice	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
CURRENT RESEARCH: Stays informed on current research in clinical and scholarly literature	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
APPLIED KNOWLEDGE: Ability to utilize current research for implementing best-practice standards and skills	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 3. Ethical Functioning	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
KNOWLEDGE: Knows legal/ethical considerations pertinent to each case; identifies ethical concerns	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE-Therapy: Ability to adhere to ethical practices and procedures; ability to make sound ethical reasoning and judgment; maintains confidentiality; implements adequate informed consent procedures	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE-Case Management: Ability to adhere to ethical standards and able to	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

make sound judgments on the discontinuation/ transfer of care of clients						
Section 4. Diversity Awareness	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
KNOWLEDGE: Demonstrates foundational knowledge of the diversity considerations concerning the human person; student is able to assess the appropriate diversity considerations that play a role in the treatment of the individual under consideration.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE: Ability to implement clinical interventions based upon knowledge of diversity issues	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF: Awareness of how student's own diversity impacts his/her performance and the views of the client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 5. Supervision Utilization	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
AVAILABILITY: Meets consistently with supervisor	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
OPENNESS: Willing to be observed, reviews/critiques own tapes; raises questions or problems; shows appropriate insight into own behaviors/feelings, knows own strengths and weaknesses	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
USE OF FEEDBACK: Ability to handle constructive criticism well; open to new ideas and techniques; ability to incorporate suggestions from previous supervision sessions into current functioning	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PREPARATION-Written: Ability to organize material into written reports, case summaries, letter writing, etc.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PREPARATION-Oral: Ability to make clear oral reports, verbal communication, etc.; able to articulate rationale for conceptualization and related treatment of client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 6. Assessment and Diagnosis	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
CLINICAL INTERVIEWING: Ability to gather information during intake sessions sufficient to assess mental status, obtain pertinent history for diagnostic formulation and treatment recommendations; identifies needed referrals	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INTAKE EVALUATION: Ability to gather sufficient collateral data, including medical records, previous psychiatric/psychological evaluations, and interviews with relevant significant others	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
KNOWLEDGE OF ASSESSMENT: Ability to choose appropriate psychological tests for presenting concerns	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

ADMINISTRATION AND SCORING OF ASSESSMENT: Ability to administer and score psychological tests in standardized manner	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INTERPRETATION OF ASSESSMENT: Ability to interpret psychological tests appropriately	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
CASE FORMULATION: Ability to conceptualize cases based on data gathered from interviews and standardized assessment tools	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
DIAGNOSIS: Ability to generate appropriate diagnostic hypotheses and articulates justification for conclusions	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TREATMENT RECOMMENDATIONS: Ability to make appropriate treatment recommendations and communicating treatment goals and process to clients and other relevant professionals	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
REPORT WRITING: Ability to integrate, synthesize, and organize into written format the social, clinical, and assessment data collected from relevant sources	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 7. Therapeutic Intervention (Part 1)	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
THEORETICAL KNOWLEDGE: Ability to identify and explain theoretical foundations guiding case formulation and intervention	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TREATMENT PLANNING: Ability to develop and organize treatment according to best practices; utilizes evidence-based treatments appropriately based on presenting issues and diagnoses	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
DISCHARGE: Ability to develop a plan for termination of therapy based on treatment progress, client's needs, or any foreseen and unforeseen circumstances	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
APPLICATION: Ability to implement treatment plan goals and objectives; ability to apply theoretical constructs in a therapeutically beneficial way	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 7. Therapeutic Intervention (Part 2)	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
LISTENING: Appropriate use of support and empathy skills; Appears to have good non-verbal attending skills; Knows how to use silence effectively	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
CRISIS MANAGEMENT/ SPECIAL CIRCUMSTANCES: Ability to bridge ethics and law to practice by identifying situations where emergency management and/or mandated reporting are necessary; ability to follow-through identified procedures needed to resolve crisis or other special circumstances	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

PROCESS: Possesses understanding of interpersonal processes; ability to adjust treatment plan in session based on contextual needs in session	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF: Ability to portray calmness, confidence, and relaxed demeanor even when stressed in session; ability to front effectively when necessary; aware of how transference and countertransference impact interventions; ability to use self disclosure appropriately, ability to intervene with clients through self correcting as mistakes or ruptures occur	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
RESPECT AND ENCOURAGEMENT: Ability to treat the client with dignity while motivating them and encouraging new learning	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
RAPPORT: Demonstrates a capacity for empathy and a capacity to form a therapeutic alliance and a holding environment for the client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
BOUNDARIES: Ability to initiate and terminate sessions in a timely and therapeutically beneficial way; possesses skills in ending therapeutic relationships	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 8. Self-Care	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
KNOWLEDGE: Ability to identify the factors of self-care relevant to healthy functioning as a therapist	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE: Ability to carry out and monitor self-care activities that promote healthy functioning as a therapist	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

SUMMARY

Has the student received any ratings below 3? If so, the student will need to create and complete a remediation plan.

☐ Yes

☐ No

Comment:

In your opinion as site supervisor, should this student be given a passing grade?

☐ Yes

☐ No

Comment:

Summary of Evaluation/Additional Comments Areas of strength include:

Please describe areas of deficiency/weakness, need for additional supervision or training:

Recommendations for further training:

Supervisor Signature:

Date

Student Signature:

Date

Director of Clinical Training Signature:

Date

* Please do not print screenshots, they are for illustrative purposes only.

** Students may access their evaluation results in Tevera once the form has been completed by the supervisor

Appendix E: Clinical Site Evaluation of Extern



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Doctoral Program in Clinical Psychology Clinical Site Evaluation of Extern COMPLETED IN ELC (SAMPLE BELOW)

Extern Name:

Agency/Practice Site:

Supervisor:

Term:

Year:

Methods of Evaluation (check appropriate box):

- | | |
|---|---|
| ☐ Review of Written Work/Reports | ☐ Direct Observation/Co-facilitation |
| ☐ Review of Raw Test Data | ☐ Seminars/Staffing |
| ☐ Discussion of Clinical Interaction | ☐ Audio/Videotape |
| ☐ Comments from Other Staff | ☐ Case Presentation/Discussion |
| ☐ Live supervision/shadowing | ☐ Other: |

Supervision setting (check appropriate box):

- ☐ Group
- ☐ Individual
- ☐ Other:

Evaluation Process:

In each section, use the following rating scale to reflect the student's performance in the area identified

Rating Scale

In the following sections, use the following rating scale to reflect the student's performance in the area identified.

5. Mastery: *Definite area of strength, skill level comparable either to autonomous level of functioning at pre-doctoral internship level practice.*

4. Advanced Proficiency: *An area of superior competency, but supervision may be needed to strengthen competence with more complex cases.*

3. Functional Proficiency (MLA): *An area of developing competency, routine, on-going supervision required for advancement in skill area.*

2. Marginal Proficiency: *An area of weakness, marginal competency displayed, requires more structured supervision to achieve minimum standards of functional proficiency. **This rating will flag students for remediation.***

1. Inadequate Proficiency: *A major area of weakness, little or no competency displayed, alternative placement, training or additional coursework needed. **This rating will flag students for remediation.***

Section 1. Independent and Professional Functioning	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
RESPONSIBILITY: Ability to follow through and complete assigned tasks; ability to work independently and assume responsibility for actions	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INITIATIVE: Shows keen interest, initiative, and willingness to be involved; participates in staff meetings and/or organizational events	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TIME MANAGEMENT: Punctuality client services and agency meeting and seminars; attendance; meeting deadlines as required (e.g., case notes, closing files, returning phone calls)	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
RECORDS: Ability to maintain complete records and all pertinent client information, notes are clear and concise, filing is in compliance with HIPAA	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PROFESSIONAL CONDUCT: Compliance with agency guidelines, staff. Willingness to follow directions and guidance from Training Director, agency administrative staff, etc.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
COLLEGIALITY: Works well with clients and clinical staff (including proper attire, conduct, speech); cooperates with other staff and co workers	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PROBLEM SOLVING: Ability to conceptualize, analyze, synthesize, and evaluate information obtained, utilizes critical thinking skills to resolve dilemmas	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF-AWARENESS: Ability to critically evaluate own strengths and weaknesses in clinical practice and the larger organizational scheme	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 2. Knowledge of the Psychological Sciences as Applied to Clinical Practice	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
CURRENT RESEARCH: Stays informed on current research in clinical and scholarly literature	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
APPLIED KNOWLEDGE: Ability to utilize current research for implementing best-practice standards and skills	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 3. Ethical Functioning	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
KNOWLEDGE: Knows legal/ethical considerations pertinent to each case; identifies ethical concerns	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE-Therapy: Ability to adhere to ethical practices and procedures; ability to make sound ethical reasoning and judgment; maintains confidentiality; implements adequate informed consent procedures	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE-Case Management: Ability to adhere to ethical standards and able to	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

make sound judgments on the discontinuation/ transfer of care of clients						
Section 4. Diversity Awareness	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
KNOWLEDGE: Demonstrates foundational knowledge of the diversity considerations concerning the human person; student is able to assess the appropriate diversity considerations that play a role in the treatment of the individual under consideration.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE: Ability to implement clinical interventions based upon knowledge of diversity issues	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF: Awareness of how student's own diversity impacts his/her performance and the views of the client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 5. Supervision Utilization	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
AVAILABILITY: Meets consistently with supervisor	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
OPENNESS: Willing to be observed, reviews/critiques own tapes; raises questions or problems; shows appropriate insight into own behaviors/feelings, knows own strengths and weaknesses	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
USE OF FEEDBACK: Ability to handle constructive criticism well; open to new ideas and techniques; ability to incorporate suggestions from previous supervision sessions into current functioning	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PREPARATION-Written: Ability to organize material into written reports, case summaries, letter writing, etc.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PREPARATION-Oral: Ability to make clear oral reports, verbal communication, etc.; able to articulate rationale for conceptualization and related treatment of client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 6. Assessment and Diagnosis	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
CLINICAL INTERVIEWING: Ability to gather information during intake sessions sufficient to assess mental status, obtain pertinent history for diagnostic formulation and treatment recommendations; identifies needed referrals	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INTAKE EVALUATION: Ability to gather sufficient collateral data, including medical records, previous psychiatric/psychological evaluations, and interviews with relevant significant others	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
KNOWLEDGE OF ASSESSMENT: Ability to choose appropriate psychological tests for presenting concerns	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

ADMINISTRATION AND SCORING OF ASSESSMENT: Ability to administer and score psychological tests in standardized manner	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INTERPRETATION OF ASSESSMENT: Ability to interpret psychological tests appropriately	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
CASE FORMULATION: Ability to conceptualize cases based on data gathered from interviews and standardized assessment tools	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
DIAGNOSIS: Ability to generate appropriate diagnostic hypotheses and articulates justification for conclusions	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TREATMENT RECOMMENDATIONS: Ability to make appropriate treatment recommendations and communicating treatment goals and process to clients and other relevant professionals	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
REPORT WRITING: Ability to integrate, synthesize, and organize into written format the social, clinical, and assessment data collected from relevant sources	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 7. Therapeutic Intervention (Part 1)	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
THEORETICAL KNOWLEDGE: Ability to identify and explain theoretical foundations guiding case formulation and intervention	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TREATMENT PLANNING: Ability to develop and organize treatment according to best practices; utilizes evidence-based treatments appropriately based on presenting issues and diagnoses	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
DISCHARGE: Ability to develop a plan for termination of therapy based on treatment progress, client's needs, or any foreseen and unforeseen circumstances	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
APPLICATION: Ability to implement treatment plan goals and objectives; ability to apply theoretical constructs in a therapeutically beneficial way	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
CRISIS MANAGEMENT/ SPECIAL CIRCUMSTANCES: Ability to bridge ethics and law to practice by identifying situations where emergency management and/or mandated reporting are necessary; ability to follow-through identified procedures needed to resolve crisis or other special circumstances	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 7. Therapeutic Intervention (Part 2)	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
LISTENING: Appropriate use of support and empathy skills; Appears to have good non-verbal attending skills; Knows how to use silence effectively	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

PROCESS: Possesses understanding of interpersonal processes; ability to adjust treatment plan in session based on contextual needs in session	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF: Ability to portray calmness, confidence, and relaxed demeanor even when stressed in session; ability to front effectively when necessary; aware of how transference and countertransference impact interventions; ability to use self disclosure appropriately, ability to intervene with clients through self correcting as mistakes or ruptures occur	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
RESPECT AND ENCOURAGEMENT: Ability to treat the client with dignity while motivating them and encouraging new learning	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
RAPPORT: Demonstrates a capacity for empathy and a capacity to form a therapeutic alliance and a holding environment for the client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
BOUNDARIES: Ability to initiate and terminate sessions in a timely and therapeutically beneficial way; possesses skills in ending therapeutic relationships	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 8. Self-Care	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
KNOWLEDGE: Ability to identify the factors of self-care relevant to healthy functioning as a therapist	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE: Ability to carry out and monitor self-care activities that promote healthy functioning as a therapist	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

SUMMARY

Has the student received any ratings below 3? If so, the student will need to create and complete a remediation plan.

☐ Yes

☐ No

Comment:

In your opinion as site supervisor, should this student be given a passing grade?

☐ Yes

☐ No

Comment:

Summary of Evaluation/Additional Comments Areas of strength include:

Please describe areas of deficiency/weakness, need for additional supervision or training:

Recommendations for further training:

Supervisor Signature:

Date

Student Signature:

Date

Director of Clinical Training Signature:

Date

* Please do not print screenshots, they are for illustrative purposes only.

** Students may access their evaluation results in ELC once the form has been completed by the supervisor.



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Doctoral Program in Clinical Psychology Clinical Site Evaluation of Intern

(To be completed by non-accredited internship sites if the sites form has not been approved by the IPS DCT)

COMPLETED IN ELC (SAMPLE BELOW)

Purpose and Use of This Evaluation Form

This evaluation form is used to assess doctoral interns training at non-accredited internship sites to ensure that all training experiences meet the standards required for graduation from an APA-accredited doctoral program.

This form is explicitly aligned with the APA Profession-Wide Competencies (PWCs) and is designed to evaluate and document the intern's development toward entry-level independent practice in health service psychology.

Supervisors are asked to rate interns using a developmental scale reflecting increasing levels of independence, complexity, and professional competence across all domains of training.

Evaluations must be completed at mid-year and end-of-year, and must be based on:

- Direct observation of clinical work
- Review of written documentation and assessment reports
- Supervision interactions
- Case presentations and interdisciplinary feedback (as applicable)

INSTRUCTIONS

Supervisors, please complete the following evaluation of your intern trainee. If the trainee has multiple supervisors, this form can be completed by each supervisor and multiple forms submitted to the program or all supervisors may complete the form together including salient comments from each supervisor in the final section or in an attachment.

Student/Intern Name:

Internship Site:

Supervisor(s):

Rotation/Training Track(s):

Term: ☐ Mid-Year (~ 6 months into internship) ☐ End of Internship ☐ Other:

Date:

Methods of Evaluation (check appropriate box):

- | | |
|---|---|
| ☐ Review of Written Work/Reports | ☐ Direct Observation/Co-facilitation |
| ☐ Review of Raw Test Data | ☐ Seminars/Staffing |
| ☐ Discussion of Clinical Interaction | ☐ Audio/Videotape |
| ☐ Comments from Other Staff | ☐ Case Presentation/Discussion |
| ☐ Live supervision/shadowing | ☐ Other: |

Supervision setting (check appropriate box):

- ☐ Group
- ☐ Individual
- ☐ Other:

Evaluation Process:

In each section, use the following rating scale to reflect the intern's performance in the area identified

Rating Scale

In the following sections, use the following rating scale to reflect the student's performance in the area identified.

5. Mastery: *Definite area of strength/expertise, skill level comparable to autonomous level of functioning at post-doctoral or early career level practice. Intern trainee as evidenced the ability to fully function at the independent level in the competency. Intern trainee as evidenced mastery of the fundamental and advanced skills and can likely teach others this competency. Generally performs without need for supervision, but consults as appropriate.*

4. Advanced Proficiency (MLA End of Internship): *An area of entry-level practice competency as evidenced by the ability to independently function in a broad range of clinical and professional activities; the ability to generalize skills and knowledge to new situations; and the ability to self-assess when to seek additional training, supervision, or consultation. Supervision or consultation may be needed to strengthen competence with more complex cases or to further refine more advanced skills.*

3. Functional Proficiency (MLA Mid-Year Internship): *An area of developing competency, routine, on-going supervision required for advancement in skill area. Intern trainee is able to demonstrate appropriate independent functioning and competence in this domain across a range of clinical situations, including situations of increasing complexity.*

2. Marginal Proficiency: *An area of weakness, marginal competency displayed, requires more structured supervision to achieve minimum standards of functional proficiency. Intern trainee's*

*competencies are consistent with intermediate practicum level trainee ability (e.g. adept at simple techniques, identifies and applies theory or interventions in a basic manner but struggles to adapt to more complex presentations, etc.) **This rating will flag students for remediation.***

1. Inadequate Proficiency: Intern trainee is functioning at a novice level A major area of weakness, little or no competency displayed, alternative placement, training or additional coursework needed. Intern trainee requires significant support and close/live supervision to move towards competency. **This rating will flag students for remediation.**

Section 1. Independent and Professional Functioning PWC IV: Professional Values & Attitudes & PWC IX: Consultation & Interprofessional Skills	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
RESPONSIBILITY: Ability to follow through and complete assigned tasks; ability to work independently and assume responsibility for actions	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INITIATIVE: Shows keen interest, initiative, and willingness to be involved; participates in staff meetings and/or organizational events	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TIME MANAGEMENT: Punctuality client services and agency meeting and seminars; attendance; meeting deadlines as required (e.g., case notes, closing files, returning phone calls)	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
RECORDS: Ability to maintain complete records and all pertinent client information, notes are clear and concise, filing is in compliance with HIPAA	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PROFESSIONAL CONDUCT: Compliance with agency guidelines, staff. Willingness to follow directions and guidance from Training Director, agency administrative staff, etc.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
COLLEGIALITY: Works well with clients and clinical staff (including proper attire, conduct, speech); cooperates with other staff and co workers	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PROBLEM SOLVING: Ability to conceptualize, analyze, synthesize, and evaluate information obtained, utilizes critical thinking skills to resolve dilemmas	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF-AWARENESS: Ability to critically evaluate own strengths and weaknesses in clinical practice and the larger organizational scheme	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 2. Knowledge of the Psychological Sciences as Applied to Clinical Practice PWC I: Research	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
CURRENT RESEARCH: Stays informed on current research in clinical and scholarly literature	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
APPLIED KNOWLEDGE: Ability to utilize current research for	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

implementing best-practice standards and skills						
Section 3. Ethical Functioning	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
PWC II: Ethical & Legal Standards						
KNOWLEDGE: Knows legal/ethical considerations pertinent to each case; identifies ethical concerns	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE-Therapy: Ability to adhere to ethical practices and procedures; ability to make sound ethical reasoning and judgment; maintains confidentiality; implements adequate informed consent procedures	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE-Case Management: Ability to adhere to ethical standards and able to make sound judgments on the discontinuation/ transfer of care of clients	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 4. Diversity Awareness	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
PWC III: Individual & Cultural Diversity						
KNOWLEDGE: Demonstrates foundational knowledge of the diversity considerations concerning the human person; student is able to assess the appropriate diversity considerations that play a role in the treatment of the individual under consideration.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE: Ability to implement clinical interventions based upon knowledge of diversity issues	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF: Awareness of how student's own diversity impacts his/her performance and the views of the client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 5. Supervision Utilization	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
PWC V: Communication & Interpersonal Skills & PWC VIII: Supervision						
AVAILABILITY: Meets consistently with supervisor	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
OPENNESS: Willing to be observed, reviews/critiques own tapes; raises questions or problems; shows appropriate insight into own behaviors/feelings, knows own strengths and weaknesses	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
USE OF FEEDBACK: Ability to handle constructive criticism well; open to new ideas and techniques; ability to incorporate suggestions from	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

previous supervision sessions into current functioning						
PREPARATION-Written: Ability to organize material into written reports, case summaries, letter writing, etc.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PREPARATION-Oral: Ability to make clear oral reports, verbal communication, etc.; able to articulate rationale for conceptualization and related treatment of client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 6. Assessment and Diagnosis PWC V: Communication & Interpersonal Skills & PWC VI: Assessment	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
CLINICAL INTERVIEWING: Ability to gather information during intake sessions sufficient to assess mental status, obtain pertinent history for diagnostic formulation and treatment recommendations; identifies needed referrals	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INTAKE EVALUATION: Ability to gather sufficient collateral data, including medical records, previous psychiatric/psychological evaluations, and interviews with relevant significant others	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
KNOWLEDGE OF ASSESSMENT: Ability to choose appropriate psychological tests for presenting concerns	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
ADMINISTRATION AND SCORING OF ASSESSMENT: Ability to administer and score psychological tests in standardized manner	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
INTERPRETATION OF ASSESSMENT: Ability to interpret psychological tests appropriately	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
CASE FORMULATION: Ability to conceptualize cases based on data gathered from interviews and standardized assessment tools	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
DIAGNOSIS: Ability to generate appropriate diagnostic hypotheses and articulates justification for conclusions	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TREATMENT RECOMMENDATIONS: Ability to make appropriate treatment recommendations and communicating treatment goals and process to clients and other relevant professionals	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
REPORT WRITING: Ability to integrate, synthesize, and organize into written format the social, clinical,	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

and assessment data collected from relevant sources						
Section 7. Therapeutic Intervention (Part 1) PWC VI: Assessment & PWC VII: Intervention	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
THEORETICAL KNOWLEDGE: Ability to identify and explain theoretical foundations guiding case formulation and intervention	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
TREATMENT PLANNING: Ability to develop and organize treatment according to best practices; utilizes evidence-based treatments appropriately based on presenting issues and diagnoses	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
DISCHARGE: Ability to develop a plan for termination of therapy based on treatment progress, client's needs, or any foreseen and unforeseen circumstances	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
APPLICATION: Ability to implement treatment plan goals and objectives; ability to apply theoretical constructs in a therapeutically beneficial way	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
CRISIS MANAGEMENT/ SPECIAL CIRCUMSTANCES: Ability to bridge ethics and law to practice by identifying situations where emergency management and/or mandated reporting are necessary; ability to follow-through identified procedures needed to resolve crisis or other special circumstances	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 7. Therapeutic Intervention (Part 2) PWC V: Communication & Interpersonal Skills, PWC VI: Assessment, & PWC VII: Intervention	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
LISTENING: Appropriate use of support and empathy skills; Appears to have good non-verbal attending skills; Knows how to use silence effectively	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PROCESS: Possesses understanding of interpersonal processes; ability to adjust treatment plan in session based on contextual needs in session	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SELF: Ability to portray calmness, confidence, and relaxed demeanor even when stressed in session;	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

ability to front effectively when necessary; aware of how transference and countertransference impact interventions; ability to use self disclosure appropriately, ability to intervene with clients through self correcting as mistakes or ruptures occur						
RESPECT AND ENCOURAGEMENT: Ability to treat the client with dignity while motivating them and encouraging new learning	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
RAPPORT: Demonstrates a capacity for empathy and a capacity to form a therapeutic alliance and a holding environment for the client	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
BOUNDARIES: Ability to initiate and terminate sessions in a timely and therapeutically beneficial way; possesses skills in ending therapeutic relationships	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Section 8. Self-Care PWC II: Ethical & Legal Standards & PWC IV: Professional Values & Attitudes	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency (MLA Mid-Year Internship)	Advanced Proficiency (MLA End of Internship)	Mastery
KNOWLEDGE: Ability to identify the factors of self-care relevant to healthy functioning as a therapist	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
PRACTICE: Ability to carry out and monitor self-care activities that promote healthy functioning as a therapist	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

SUMMARY

Has the student received any ratings below MLA appropriate for the evaluation timeframe (e.g. mid-year (3 - Functional Proficiency) or end of year (4 - Advanced Proficiency))? If so, the student will need to create and complete a remediation plan in coordination with the PsyD program..

☐ Yes

☐ No

Comment:

Is the intern on track to function (mid-year expectation) or functioning at entry-level for independent practice (end of year expectation)?

☐ Yes ☐ No

Would you recommend this intern for independent practice?

☐ Yes ☐ No ☐ N/A (Mid-Year evaluation)

Comment:

Summary of Evaluation/Additional Comments Areas of strength include:

Please describe areas of deficiency/weakness, need for additional supervision or training:

Recommendations for further training:

Supervisor Signature: _____ Date _____

Student Signature: _____ Date _____

Director of Clinical Training Signature: _____ Date _____

* Please do not print screenshots, they are for illustrative purposes only.

** Students may access their evaluation results in ELC once the form has been completed by the supervisor.

Appendix F: Student Evaluation of Site Supervisor(s)



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Doctoral Program in Clinical Psychology Student Evaluation of Site Supervisor(s) COMPLETED IN ELC (SAMPLE BELOW)

INSTRUCTIONS:

Students, please complete the following evaluation for your primary site supervisor & upload a copy of your hours for the semester.

Email:

Your Full Name:

Agency/Practicum Site Name:

Supervisor Name:

Term:

☐ Fall (through December 1)

☐ Spring (through May 1)

☐ Summer (May 2 - end of training year)

☐ Summer only

Training Year (e.g. 2022-2023):

SUPERVISION TIME BY MODE AND TYPE OF SUPERVISION

INSTRUCTIONS

Students, please complete the following evaluation for your primary site supervisor.

1. How often did you meet with your site supervisor to discuss counseling or related activities?

☐ Once a week

☐ Twice a week

☐ Three times a week

☐ Other:

NOTE: Percentages for #4-8 must add up to 100%

2. How many hours per week (hh.mm) were spent in individual supervision?

3. How many hours per week (hh.mm) were spent in group supervision? (If none, enter 0)

4. What percentage of time spent in supervision was dedicated to video review? (If none, enter 0)

5. What percentage of time spent in supervision was dedicated to audio review? (If none, enter 0)

6. What percentage of time spent in supervision was dedicated to co-therapy? (If none, enter 0)

7. What percentage of time spent in supervision was dedicated to live supervision? (If none, enter 0)
8. What percentage of time spent in supervision was dedicated to verbal case review? (If none, enter 0)

SUPERVISOR EVALUATION

Please rate your satisfaction with the supervision you received on practicum/internship.

1. Rapport established with supervisee:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

2. Theoretical knowledge of psychotherapy:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

3. Assistance with conceptualization:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

4. Giving specific guidance on techniques or approaches:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

5. Encouraging questions/sharing of problems with cases:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

6. Allowing for expressions of personal style differences:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

7. Offering criticism or guidance in a constructive manner:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

8. Accessibility and dependability:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

OTHER

Please rate your satisfaction with the communication between the practicum/internship and IPS:

☐ Not Satisfied ☐ Partly Satisfied ☐ Satisfied ☐ Very Satisfied ☐ Extremely Satisfied ☐ N/A

Please list any other comments you have regarding this site supervisor:

Student Signature:

Date

Director of Clinical Training Signature:

Date

* Please do not print screenshots, they are for illustrative purposes only.

** Students may access their evaluation results in ELC once the form has been completed by the supervisor

Appendix G: CUA Introductory Practicum Agreement



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

CUA Introductory Practicum Agreement

This Agreement is made this ____ day of _____, 202__, by and between the Divine Mercy University's Institute for the Psychological Sciences doctoral program in clinical psychology (hereinafter "PsyD Program") and the **CUA Counseling Center** (hereinafter "Practicum Site").

Student Name _____ (hereinafter "Student")

Beginning Date of Training _____

Ending date of training _____

Practicum Site: CUA Counseling Center, N.E. Washington, DC

Practicum Training Director _____

(Must be a licensed clinical psychologist; Include credentials, e.g., PhD, PsyD, unless otherwise agreed in writing with PsyD program)

Training opportunities available for the Student at the Practicum Site *(completed by Practicum Site)*

Please select all that apply below.

1. Interventions/Therapy

- Individual Psychotherapy
- Marital/Family
- Child/Adolescent
- Group
- Other: _____

2. Assessments

- Intake Interviewing
- Personality Testing
- Cognitive/Neuropsych Assessment

3. Supervision

- Individual Supervision
- Group Supervision
- Case Conference/Staff Meetings

4. Other (please list/describe)

- Outreach
- _____
- _____

Purpose

The purpose of this Agreement is to specify the terms and conditions that will exist between the PsyD Program, the Practicum Site, and the Student.

The Practicum Program

The introductory practicum is a requirement for students in the doctoral program in clinical psychology to provide opportunities for students to adequately form their clinical skills through a systematic program of supervised clinical practice at a practicum site. Supervision will be provided by on-site supervisors, who will provide regular feedback to the student regarding their progress.

Goals and Objectives of Practicum Experience

The goals and objectives of the practicum experience are to provide training opportunities to help the student achieve and demonstrate profession-wide competencies, as well as program-specific competencies, in the following areas: (1) Research; (2) Ethics/Standards; (3) Individual Differences/Cultural Diversity; (4) Professional values, attitudes, and behaviors; (5) Communication and Interpersonal skills; (6) Assessment; (7) Intervention; (8) Supervision; (9) Consultation and interdisciplinary skills, all of which must be in alignment with the Goals, Objectives, and Competencies of the Psy.D. Program as provided in the addendum to this Agreement.

PsyD Program Responsibilities

1. To notify the Student that they must adhere to the administrative policies, rules, standards, schedules, and practices of the Practicum Site;
2. To ensure that the PsyD Program is available for consultation with both the Practicum Site Supervisor, and Student;
3. To notify the Student and Practicum Site of any changes in the academic ability of the Student to continue in the Practicum Site.

Student Responsibilities

1. To fulfill all responsibilities as listed in the PsyD Program's *Doctor of Psychology (PsyD) Program Training Handbook* and in this Agreement;
2. To adhere to the administrative policies, rules, standards, schedules, and practices of the Practicum Site;
3. To obtain appropriate insurance coverage for clinical activities at the Practicum Site;
4. To timely notify the PsyD Program of any problem in relation to the quality of training provided at the Practicum Site;
5. To provide written and timely feedback about the practicum experience at the Practicum Site using the "Student Evaluation of Practicum Site" form and "Student Evaluation of Site Supervisor(s)" form.

Practicum Site Responsibilities

1. To provide appropriate training opportunities in clinical psychology for introductory practicum trainees:
 - a. To provide an "organized sequential series" of experiences, integrated with the organizational mission, to assist students in preparing for and meeting requirements for licensure.
 - b. To provide supervised experiences, didactics, and developmentally integrated training aimed at developing competencies listed under Goals and Objectives of Practicum Experience.
2. To provide adequate and sufficient opportunities for the student to engage in a variety of clinical psychology activities under supervision of a licensed clinical psychologist, and for evaluating and documenting the student's performance by completing evaluation forms which will be delivered to the site at the end of each semester.
 - a. To provide the Student a minimum of 250 hours of training hours, unless otherwise agreed in writing with the PsyD program.

- b. To ensure that the student receives at least 75 practicum hours in direct service to clients (face to face) at the CUA Counseling Center. Students may engage in up to 3 individual client sessions per week and if appropriate receive permission from the PsyD Director of Clinical Training to increase to 4 sessions per week
 - i. Assess level of supervisee's clinical skills and titrate training activities to optimize patient care and effective clinical training for the supervisee.
- 3. To provide qualified and appropriate supervision
 - a. To abide by all applicable state laws governing the supervision of student trainees.
 - b. To provide qualified and appropriate supervision by a supervisor who is trained, credentialed, and prepared in their discipline and in the health service psychology activities being supervised. The assigned supervisor(s) should be legally authorized for independent practice in their jurisdiction and legally responsible for the direct service being provided or the assigned supervisor should be working under the supervision of a licensed clinical psychologist who is overseeing their work as a supervisor. Appropriate supervision meet the following minimum requirements:
 - i. Providing a minimum of one hour of individual in-person face-to-face supervision for up to 4 hours of client contact, each week.
 - ii. Group supervision or clinic meetings (i.e., didactic experiences) can be offered in addition to the minimum 1 hour of individual supervision.
 - iii. To provide direct observation (i.e., in-person observation) using in-room or one-way mirror observation of direct service contact, live simultaneous audio-video streaming, or audio or video recording ([APA IR C-14 Direct Observations](#)) of the Student's work using audio/visual tapes, observation, and/or live supervision. Direct observation should occur no less than three times a year, that is during each evaluation period to inform evaluation of the student's clinical competencies.
- 4. To give feedback on the Student's performance using the "Appendix E: Clinical Site Evaluation of Extern" form.
- 5. To provide the Student with adequate work space, telephone, office supplies, support, and staff to conduct professional activities;
- 6. To ensure that practicum training is scheduled by the Practicum Site so as not to interfere with the Student's coursework and timely completion of mandatory program requirements.
- 7. To ensure the quality of the practicum site, including allowing the PsyD Program regularly scheduled site reviews.
- 8. In person supervision is required for all regularly scheduled meetings. Telesupervision may be utilized only in exceptional circumstances such as to ensure continuity of care in light of student/supervisor illness or managing emergency situations out of hours. In such circumstances, the supervisor is responsible for ensuring that the student/supervisor is aware of how to appropriately and ethically engage in telesupervision (e.g. from a private location, via a secure connection, appropriate de-identification, etc.)

Complaints, Conflicts, and Discipline

Any disciplinary issues, conflicts, or student complaints will be managed jointly and consistent with each organization's currently existing disciplinary and employee conflict resolution policies. The student's service provision agreement may be terminated prior to the end of the time commitment if the Student engages in inappropriate conduct.

Supervision

The Practicum Site has agreed to assign a clinical psychologist as the supervisor for IPS practicum trainees. The Practicum Site has also agreed that at the beginning of training they will provide the program and a student the following information regarding the assigned supervisor:

- Full Name & Title
- Address
- Graduate educational History, including name of the institution granting the degree, degree type, year earned
- Licensure certification or registration information, including granting jurisdiction, title, license or identification number
 - If the assigned supervisor is an unlicensed psychologist (e.g. post-doc), the Practicum site agrees to provide the information above as well as the same information for the supervisor overseeing the unlicensed psychologist's supervision of IPS practicum trainees

Notices

Notices, communication, and correspondence regarding this Agreement shall be sent to:

PsyD Program:

Wadzie Chikungwa, Ph.D., MFT, IPS Psy.D. Director of Clinical Training
 PsyD Program, Institute for the Psychological Sciences at Divine Mercy University
 45154 Underwood Ln., Sterling, VA 20166
 Email: dct.ips@divinemercury.edu; Phone: 703-416-1441, extension 474

Practicum Training Director:

Christina (Seung Yoon) Lee, Psy.D., M.T.S.
 PsyD Program, Institute for the Psychological Sciences at Divine Mercy University
 45154 Underwood Ln., Sterling, VA 20166
 Email: clee.ips@divinemercury.edu

Practicum Site Director:

Suzanne Hollman, Ph.D., Psy.D.
 Catholic University of America Counseling Center
 620 Michigan Ave., N.E. Washington, DC 20064
 McMahon Hall 315
 Email: nortier@cua.edu ; Phone: 202-319-5765

Termination

The Practicum Site may recommend to the PsyD Program the withdrawal of a student if the achievement, academic progress, adjustment, or health of the student does not warrant continuation

or if the student's behavior fails to conform to applicable regulations of Practicum Site. Such recommendation shall be provided in advance writing to the PsyD Program Director of Clinical Training and shall specify the basis for the Practicum Site recommendation. Either the PsyD Program or the Practicum Site may, for cause, discontinue the assignment of any student any time upon advance written notice during the period of this Agreement.

Indemnification

The Practicum Supervisor and Practicum Site agree to indemnify, defend, and hold harmless the PsyD Program and its employees, agents, servants, officers, trustees, and representatives (in their individual and official capacities) from any and all liability, loss, or damage that they or any of them or any third parties incur or sustain as a result of any claims, damages, actions, causes of action, judgments, costs, or expenses, including attorneys' fees, which result from, arise out of, or occur during the course of this Agreement.

Amendments

Any modifications to this Agreement shall be signed by all parties and attached to this Agreement.

Approval and Acceptance of Agreement

The practicum shall not begin prior to Approval and Acceptance of the Agreement by all parties and the beginning date specified above and until written approval is received by the Practicum Site, Student, and the PsyD Program.

Approval and Acceptance by

CUA Practicum Training Director	Name with credentials (Ph.D., Psy.D.)	Title
	Signature	Date
CUA Counseling Center Director	Name with credentials (Ph.D., Psy.D.)	Title
	Signature	Date
IPS PsyD Student	Name	Title
	Signature	Date
IPS PsyD Program	Wadzie Chikungwa, Ph.D., MFT)	Title IPS Psy.D. Director of Clinical Training
	Signature	Date

original signed Agreement shall be returned to the PsyD Program Director of Clinical Training. Copies should be maintained by the Practicum Site and the Student.

CUA Introductory Practicum Agreement Addendum

Goals and Objectives of Practicum Experience from Psy.D. Program Goals, Objectives and Competencies

Goal 1: Foundations in Psychological Sciences and Research: Graduates will attain foundational knowledge of biological, cognitive, history and systems of psychology, psychological measurement, psychopathology, research design, and statistical methods. Graduates will have the skills necessary to conduct their own psychological research.

Objective 1.c. Students will develop: Ability to apply psychological sciences and outcomes research

Competency 1.c.2. Students will demonstrate the ability to: Discuss relevant outcome research and its limitations on conclusions based on the context of intervention. (e.g., diversity issue, multiple diagnoses, complexity of cases etc.)

Goal 2: Integrity in Practice: Graduates will be knowledgeable in the areas of diversity and ethics, and display critical thinking, self-aware/reflective practice, and self-care. Graduates will demonstrate responsiveness to supervision, collegiality, and professional comportment in professional practice.

Objective 2.a. Students will develop: Knowledge of diversity, and integration of multicultural competence, in all areas of professional practice

Competency 2.a.1. Students will demonstrate the ability to: Integrate issues of diversity, broadly defined, across all areas of professional practice.

Objective 2.b. Students will develop: Ethical decision making and judgment

Competency 2.b.1. Students will demonstrate the ability to: Integrate knowledge of ethical principles and guidelines, moral reasoning, and basic legal principles in all areas of professional practice.

Objective 2.c. Students will develop: Critical thinking skills

Competency 2.c.1. Students will demonstrate the ability to: Conceptualize, apply, analyze, synthesize, and evaluate information gathered by observation, experience, reflection, reasoning, or communication as a guide.

Objective 2.d. Students will develop: Self-awareness/reflective practice

Competency 2.d.1. Students will demonstrate the ability to: Critically evaluate one's own development and areas of strength and weakness.

Objective 2.e. Students will develop: Self-care skills

Competency 2.e.1. Students will demonstrate the ability to: Identify the components of self-care.

Competency 2.e.2. Students will demonstrate the ability to: Develop and monitor a personal self-care plan.

Objective 2.f. Students will develop: Collegiality

Competency 2.f.1. Students will demonstrate the ability to: Demonstrate collegiality, cooperate with other staff and coworkers in a team milieu, work well with clients, peers, staff, faculty, present a favorable impression to other professionals and demonstrate good judgment (both personally and professionally), appropriate etiquette and professional acumen.

Objective 2.g. Students will develop: Responsiveness to supervision

Competency 2.g.1. Students will demonstrate the ability to: Seek out and receive feedback non-defensively, make changes and integrate them into behavior.

Goal 3. Assessment and Diagnosis: Graduates will be able to: conduct clinical interviewing; perform intake evaluation; demonstrate knowledge in the administration, scoring, and interpretation of psychological assessment; integrate multiple sources of test data and clinical interview information into a written report; diagnose; and develop a treatment plan;

Objective 3.a. Students will develop: Intake evaluation skills

Competency 3.a.1. Students will demonstrate the ability to: Gather information during an intake session using clinical interviewing skills.

Competency 3.a.2. Students will demonstrate the ability to: Gather collateral data sufficient to assess mental status, obtain pertinent history for diagnostic formulation and treatment recommendations; identify needed referrals.

Objective 3.b. Students will develop: Knowledge of administration, scoring, and interpretation of psychological assessment

Competency 3.b.1. Students will demonstrate the ability to: Choose appropriate psychological assessment instruments.

Competency 3.b.2. Students will demonstrate the ability to: Administer and score psychological assessment in a standardized manner.

Competency 3.b.3. Students will demonstrate the ability to: Make appropriate interpretations of results.

Objective 3.c. Students will develop: Ability to Integrate test data and clinical interview information into a comprehensive written report

Competency 3.c.1. Students will demonstrate the ability to: Integrate test data with information collected from interviews and collateral sources to generate clinical hypotheses, conclusions, and recommendations.

Objective 3.d. Students will develop: Diagnosis and treatment planning skills

Competency 3.d.1. Students will demonstrate the ability to: Generate appropriate diagnostic hypotheses and articulate justification for conclusions.

Competency 3.d.2. Students will demonstrate the ability to: Develop appropriate treatment recommendations by communicating the treatment goals and process to clients and others.

Goal 4: Therapeutic Intervention: Graduates will be able to demonstrate case conceptualization, treatment planning, building and maintaining the therapeutic relationship, psychotherapy skills, crisis management of urgent and special circumstances, and discharge planning;

Objective 4.a. Students will develop: Case conceptualization skills

Competency 4.a.1. Students will demonstrate the ability to: Demonstrate an explanation of problems consistent with a theoretical orientation, based on data gathering from interviews and standardized assessment tools consistent with a theoretical orientation.

Objective 4.b. Students will develop: Treatment planning skills

Competency 4.b.1. Students will demonstrate the ability to: Develop and organize a treatment PLAN to address the problems consistent with the conceptualization and best practices.

Objective 4.d. Students will develop: Psychotherapy skills

Competency 4.d.6. Students will demonstrate the ability to: Apply basic intervention skills such as intervening with clients by self-correcting as mistakes or ruptures occur: 4.d.6. Process skills

Objective 4.e. Students will develop: Crisis management skills

Competency 4.e.1. Students will demonstrate the ability to: Identify situations where emergency management (e.g. Mandated reporting) is required and to possess the ability to safeguard clients and manage risk in such situations.

Objective 4.f. Students will develop: Discharge Planning

Competency 4.f.1. Students will demonstrate the ability to: Develop a plan for termination of therapy based on treatment progress, client's needs, or any foreseen and unforeseen circumstances.

Goal 5: Professional Roles: Graduates will be able to function in a variety of required roles of professional psychologists to include consultant, educator, supervisor, practice manager, and program evaluator. They will be able to work collaboratively within interdisciplinary teams and with clients.

Objective 5.d. Students will develop: Competence related to Role of Practice manager

Competency 5.d.1. Students will demonstrate the ability to: Demonstrate basic competence in planning and organizing work and administration.

Appendix G: External Practicum Agreement



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

External Practicum Agreement

This Agreement is made this ____ day of _____, 202__, by and between the Divine Mercy University's Institute for the Psychological Sciences doctoral program in clinical psychology (hereinafter "PsyD Program") and _____ (hereinafter "Practicum Site").

Student Name _____ (hereinafter "Student")

Beginning Date of Training _____ **Ending date of training** _____

Practicum Site _____

Practicum Supervisor _____

(Must be a licensed clinical psychologist; Include credentials, e.g., PhD, PsyD, unless otherwise agreed in writing with PsyD program)

Training opportunities available for the Student at the Practicum Site (completed by Practicum Site)

Please select all that apply below.

1. Interventions/Therapy

- Individual Psychotherapy
- Marital/Family
- Child/Adolescent
- Group

2. Assessments

- Intake Interviewing
- Personality Testing
- Cognitive/Neuropsych Assessment

3. Supervision

- Individual Supervision
- Group Supervision
- Case Conference/Staff Meetings

4. Other (please list/describe) _____

Purpose

The purpose of this Agreement is to specify the terms and conditions that will exist between the PsyD Program, the Practicum Site, and the Student.

The Practicum Program

The external practicum is a requirement for students in the doctoral program in clinical psychology to provide opportunities for students to adequately form their clinical skills through a systematic program of supervised clinical practice at a PsyD Program-approved practicum site. Supervision will be provided by on-site supervisors, who will provide regular feedback to the student regarding their progress.

Goals and Objectives of Practicum Experience

The goals and objectives of the practicum experience are to provide training opportunities to help the student achieve and demonstrate profession-wide competencies, as well as program-specific competencies, in the following areas: (1) Research; (2) Ethics/Standards; (3) Individual Differences/Cultural Diversity; (4) Professional values, attitudes, and behaviors; (5) Communication and Interpersonal skills; (6) Assessment; (7) Intervention; (8) Supervision; (9) Consultation and interdisciplinary skills, all of which must be in alignment with the Goals, Objectives, and Competencies of the PsyD. Program as provided in the addendum to this Agreement.

PsyD Program Responsibilities

1. To assign a PsyD Program faculty member to facilitate communication between the PsyD Program and the Practicum Site;
2. To notify the Student that they must adhere to the administrative policies, rules, standards, schedules, and practices of the Practicum Site;
3. To ensure that the PsyD Program faculty are available for consultation with both the Practicum Site Supervisor, and Student;
4. To notify the Student and Practicum Site of any changes in the academic ability of the Student to continue in the Practicum Site.

Student Responsibilities

1. To fulfill all responsibilities as listed in the PsyD Program's *Doctor of Psychology (PsyD) Program Training Handbook* and in this Agreement;
2. To adhere to the administrative policies, rules, standards, schedules, and practices of the Practicum Site;
3. To obtain appropriate insurance coverage for clinical activities at the Practicum Site;
4. To timely notify the PsyD Program of any problem in relation to the quality of training provided at the Practicum Site;
5. To provide written and timely feedback about the practicum experience at the Practicum Site using the "Student Evaluation of Practicum Site" form and "Student Evaluation of Site Supervisor(s)" form.

Practicum Site Responsibilities

1. To provide appropriate training opportunities in clinical psychology:
 - a. To provide an "organized sequential series" of experiences, integrated with the organizational mission, to assist students in preparing for and meeting requirements for licensure.
 - b. To provide supervised experiences, didactics, and developmentally integrated training aimed at developing competencies listed under Goals and Objectives of Practicum Experience.
2. To provide adequate and sufficient opportunities for the student to engage in a variety of clinical psychology activities under supervision of a licensed mental health professional, and for evaluating and documenting the student's performance by completing evaluation forms which will be delivered to the site at the end of each semester.
 - a. To provide the Student a minimum of 625 hours of training hours, unless otherwise agreed in writing with the PsyD program.
 - b. To ensure that the student receives at least 200 practicum hours in direct service to clients (face to face) at the Practicum Site, unless a lesser figure is agreed in writing with the PsyD program.
3. To provide qualified and appropriate supervision

- a. To abide by all applicable state laws governing the supervision of student trainees.
- b. To assign a Practicum Supervisor who is trained, credentialed, and prepared in their discipline and in the health service psychology activities being supervised, legally authorized for independent practice in their jurisdiction, and legally responsible for the direct service being provided. Supervisors who perform the direct observation must be competent in performing the supervised activity, as well as in providing supervision ([APA IR C-14 Direct Observations](#)). The Practicum Supervisor must be a licensed clinical psychologist with appropriate credentials, unless otherwise agreed in writing with the PsyD program. The Supervisor must have the time, availability, and the interest for training the Student.
- c. To provide direct observation (i.e., in-person observation) using in-room or one-way mirror observation of direct service contact, live simultaneous audio-video streaming, or audio or video recording ([APA IR C-14 Direct Observations](#)) of the Student's work using audio/visual tapes, observation, and/or live supervision; this Agreement shall be a minimum of:
 - (1) for psychotherapy, one hour of face-to-face supervision per 4 hours of client contact, each week
 - (2) for assessments, one hour of face-to-face supervision per assessment battery.
4. To give feedback on the Student's performance using the "Clinical Site Evaluation of Extern" form.
5. To provide the Student with adequate work space, telephone, office supplies, support, and staff to conduct professional activities;
6. To ensure that practicum training is scheduled by the Practicum Site so as not to interfere with the Student's coursework and timely completion of mandatory program requirements.
7. To ensure the quality of the practicum site, including allowing the PsyD Program regularly scheduled site reviews.
8. To provide in-person supervision whenever possible as the preferred medium for all students. Telesupervision is permitted, should there be no alternative, but the site must abide by provisions below (APA Standard C-13 D and ASPPB, 2020 Supervision Guidelines, C-E):
 - a. Telesupervision may occupy no more than 49% of the total number of hours of supervision required to fulfill practicum requirements.
 - b. The training site is responsible for ensuring all telesupervision takes place in a professional and HIPAA compliant manner as well as to educate the trainee about any relevant site policies regarding telehealth platforms and telesupervision.
 - c. Supervisors should discuss the potential limitations of telesupervision with their supervisees at the outset of their relationship and as needed throughout the course of training.
 - i. Such topics might include the absence of professional socialization, impoverished nonverbal, affective cues and interactions, difficulty assessing the therapeutic stance of supervisees, any sense of the supervisee feeling distanced from the supervisor and thus failing to disclose necessary information etc.
 - ii. Supervisors should document steps being taken to note, remedy or guard against barriers to effective engagement in telesupervision
 - d. Special attention should be paid to ensuring students have a chance to consult with telesupervisors as needed outside of regular meeting times (or that other coverage clinicians are provided) and that telesupervisors can meet the requirement for direct observation as detailed above. Telesupervisors should be as familiar with the standards and practices of the training site and this PsyD program, as are in person supervisors.
 - e. The regular use of telesupervision requires sites to complete and sign an addendum to this document summarizing the nature and rationale of telesupervision for their training program as well as how sites meet the expectations named above.

Complaints, Conflicts, and Discipline

Any disciplinary issues, conflicts, or student complaints will be managed jointly and consistent with each organization's currently existing disciplinary and employee conflict resolution policies. The student's service provision agreement may be terminated prior to the end of the time commitment if the Student engages in inappropriate conduct.

Supervision

The Practicum Site has assigned the following supervisor

Name		Title
Street Address		
City	State	Zip
Email		Phone

Program/Field of Study: *Please do not use abbreviations

Highest Degree Earned	Year Earned	*Granting Institution
Highest Degree Earned	Year Earned	*Granting Institution
Highest Degree Earned	Year Earned	*Granting Institution

Supervisor Licensure, Certification, or Registration Information

Granting Jurisdiction 1	Title	ID#
Granting Jurisdiction 2	Title	ID#
Granting Jurisdiction 3	Title	ID#

Notices

Notices, communication, and correspondence regarding this Agreement shall be sent to:

PsyD Program: Psy.D., Director of Clinical Training
PsyD Program, Institute for the Psychological Sciences at Divine Mercy University
45154 Underwood Ln., Sterling, VA 20166
Email: dct.ips@divinemercy.edu; Phone: 703-416-1441, extension 123

Practicum Site: Contact Person

Name		Title
Street Address		
City	State	Zip
Email		Phone

Termination

The Practicum Site may recommend to the PsyD Program the withdrawal of a student if the achievement, academic progress, adjustment, or health of the student does not warrant continuation or if the student's behavior fails to conform to applicable regulations of Practicum Site. Such recommendation shall be provided in advance writing to the PsyD Program Director of Clinical Training and shall specify the basis for the Practicum Site recommendation. Either the PsyD Program or the Practicum Site may, for cause, discontinue the assignment of any student any time upon advance written notice during the period of this Agreement.

Indemnification

The Practicum Supervisor and Practicum Site agree to indemnify, defend, and hold harmless the PsyD Program and its employees, agents, servants, officers, trustees, and representatives (in their individual and official capacities) from any and all liability, loss, or damage that they or any of them or any third parties incur or sustain as a result of any claims, damages, actions, causes of action, judgments, costs, or expenses, including attorneys' fees, which result from, arise out of, or occur during the course of this Agreement.

Amendments

Any modifications to this Agreement shall be signed by all parties and attached to this Agreement.

Approval and Acceptance of Agreement

The practicum shall not begin prior to Approval and Acceptance of the Agreement by all parties and the beginning date specified above and until written approval is received by the Practicum Site, Student, and the PsyD Program.

Approval and Acceptance by

Practicum Site	Name with credentials (Ph.D., Psy.D.)	Title
	Signature	Date
IPS PsyD Student	Name	Title
	Signature	Date
IPS PsyD	Name with credentials (Ph.D., Psy.D.)	Title

Program	Signature	Date
----------------	-----------	------

The original signed Agreement shall be returned to the PsyD Program Director of Clinical Training. Copies should be maintained by the Practicum Site and the Student.

External Practicum Agreement Addendum

Goals and Objectives of Practicum Experience from Psy.D. Program Goals, Objectives and Competencies

Goal 1: Foundations in Psychological Sciences and Research: Graduates will attain foundational knowledge of biological, cognitive, history and systems of psychology, psychological measurement, psychopathology, research design, and statistical methods. Graduates will have the skills necessary to conduct their own psychological research.

Objective 1.c. Students will develop: Ability to apply psychological sciences and outcomes research

Competency 1.c.2. Students will demonstrate the ability to: Discuss relevant outcome research and its limitations on conclusions based on the context of intervention. (e.g., diversity issue, multiple diagnoses, complexity of cases etc.)

Goal 2: Integrity in Practice: Graduates will be knowledgeable in the areas of diversity and ethics, and display critical thinking, self-aware/reflective practice, and self-care. Graduates will demonstrate responsiveness to supervision, collegiality, and professional comportment in professional practice.

Objective 2.a. Students will develop: Knowledge of diversity, and integration of multicultural competence, in all areas of professional practice

Competency 2.a.1. Students will demonstrate the ability to: Integrate issues of diversity, broadly defined, across all areas of professional practice.

Objective 2.b. Students will develop: Ethical decision making and judgment

Competency 2.b.1. Students will demonstrate the ability to: Integrate knowledge of ethical principles and guidelines, moral reasoning, and basic legal principles in all areas of professional practice.

Objective 2.c. Students will develop: Critical thinking skills

Competency 2.c.1. Students will demonstrate the ability to: Conceptualize, apply, analyze, synthesize, and evaluate information gathered by observation, experience, reflection, reasoning, or communication as a guide.

Objective 2.d. Students will develop: Self-awareness/reflective practice

Competency 2.d.1. Students will demonstrate the ability to: Critically evaluate one's own development and areas of strength and weakness.

Objective 2.e. Students will develop: Self-care skills

Competency 2.e.1. Students will demonstrate the ability to: Identify the components of self-care.

Competency 2.e.2. Students will demonstrate the ability to: Develop and monitor a personal self-care plan.

Objective 2.f. Students will develop: Collegiality

Competency 2.f.1. Students will demonstrate the ability to: Demonstrate collegiality, cooperate with other staff and coworkers in a team milieu, work well with clients, peers, staff, faculty, present a favorable impression to other professionals and demonstrate good judgment (both personally and professionally), appropriate etiquette and professional acumen.

Objective 2.g. Students will develop: Responsiveness to supervision

Competency 2.g.1. Students will demonstrate the ability to: Seek out and receive feedback non-defensively, make changes and integrate them into behavior.

Goal 3. Assessment and Diagnosis: Graduates will be able to: conduct clinical interviewing; perform intake evaluation; demonstrate knowledge in the administration, scoring, and interpretation of psychological assessment; integrate multiple sources of test data and clinical interview information into a written report; diagnose; and develop a treatment plan;

Objective 3.a. Students will develop: Intake evaluation skills

Competency 3.a.1. Students will demonstrate the ability to: Gather information during an intake session using clinical interviewing skills.

Competency 3.a.2. Students will demonstrate the ability to: Gather collateral data sufficient to assess mental status, obtain pertinent history for diagnostic formulation and treatment recommendations; identify needed referrals.

Objective 3.b. Students will develop: Knowledge of administration, scoring, and interpretation of psychological assessment

Competency 3.b.1. Students will demonstrate the ability to: Choose appropriate psychological assessment instruments.

Competency 3.b.2. Students will demonstrate the ability to: Administer and score psychological assessment in a standardized manner.

Competency 3.b.3. Students will demonstrate the ability to: Make appropriate interpretations of results.

Objective 3.c. Students will develop: Ability to Integrate test data and clinical interview information into a comprehensive written report

Competency 3.c.1. Students will demonstrate the ability to: Integrate test data with information collected from interviews and collateral sources to generate clinical hypotheses, conclusions, and recommendations.

Objective 3.d. Students will develop: Diagnosis and treatment planning skills

Competency 3.d.1. Students will demonstrate the ability to: Generate appropriate diagnostic hypotheses and articulate justification for conclusions.

Competency 3.d.2. Students will demonstrate the ability to: Develop appropriate treatment recommendations by communicating the treatment goals and process to clients and others.

Goal 4: Therapeutic Intervention: Graduates will be able to demonstrate case conceptualization, treatment planning, building and maintaining the therapeutic relationship, psychotherapy skills, crisis management of urgent and special circumstances, and discharge planning;

Objective 4.a. Students will develop: Case conceptualization skills

Competency 4.a.1. Students will demonstrate the ability to: Demonstrate an explanation of problems consistent with a theoretical orientation, based on data gathering from interviews and standardized assessment tools consistent with a theoretical orientation.

Objective 4.b. Students will develop: Treatment planning skills

Competency 4.b.1. Students will demonstrate the ability to: Develop and organize a treatment PLAN to address the problems consistent with the conceptualization and best practices.

Objective 4.d. Students will develop: Psychotherapy skills

Competency 4.d.6. Students will demonstrate the ability to: Apply basic intervention skills such as intervening with clients by self-correcting as mistakes or ruptures occur: 4.d.6. Process skills

Objective 4.e. Students will develop: Crisis management skills

Competency 4.e.1. Students will demonstrate the ability to: Identify situations where emergency management (e.g. Mandated reporting) is required and to possess the ability to safeguard clients and manage risk in such situations.

Objective 4.f. Students will develop: Discharge Planning

Competency 4.f.1. Students will demonstrate the ability to: Develop a plan for termination of therapy based on treatment progress, client's needs, or any foreseen and unforeseen circumstances.

Goal 5: Professional Roles: Graduates will be able to function in a variety of required roles of professional psychologists to include consultant, educator, supervisor, practice manager, and program evaluator. They will be able to work collaboratively within interdisciplinary teams and with clients.

Objective 5.d. Students will develop: Competence related to Role of Practice manager

Competency 5.d.1. Students will demonstrate the ability to: Demonstrate basic competence in planning and organizing work and administration.

Sample Addendum for Ad Hoc or Summer Training:

'Addendum to Appendix G - Ad Hoc Testing Placement with SITE NAME

Date:

This ad hoc placement is adjunctive in nature and therefore will not meet the outlined hours and requirements described in 2a & 2b of the 'Practicum Site Responsibilities' section of Appendix G . Instead the student will complete a minimum of 1 and maximum of # psychological assessments as part of this placement. These assessment experiences will occur on the weekends and require that the student be available between ? and ?pm. As stated in 3.c.2 of the 'Practicum Site Responsibilities' section of Appendix G the student will receive 1 hour of individual supervisor at a minimum for each assessment. The student will be notified in advance of the opportunity to complete a psychological assessment and can agree or decline based on availability following the completion of ? assessments. If the student and site wish to continue the placement following ? end date or beyond the agreed upon number of assessments, they agree to consult with the student's Director of Clinical Training for approval.

[Any other site requirements that aren't captured in App G or modifications to what is outlined in App G]

[The student will be able to de-identify the psychological assessment(s) for use in future training applications following supervisory review and approval.]



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Psy.D. Site Information Form - Practicum

Have you completed this form already for this training year?

☐ Yes

☐ No

If yes, please provide the name of the student that you completed this form for earlier this year: [small text box]

You do not need to complete the rest of this form:

SITE CONTACT INFORMATION

Site Name:

Street Address:

City:

State:

Zip:

Phone:

Fax:

Website:

Authorized Site Representative

First Name:

Last Name:

Title:

Direct Phone Number:

Email:

SITE DESCRIPTION

Site Overview (Please provide a brief description of site & training):

Site Practicum Training Level:

☐ Beginner

☐ Intermediate

☐ Advanced

Type of Site:

☐ Academic Teaching

☐ Community Mental Health Center

☐ Consortium

☐ Correctional Facility

☐ Health Maintenance Organization

☐ Hospital/Medical Center

☐ Independent Practice

☐ Medical School/Center

☐ Military Medical Center

- | | | |
|---|--|---|
| ☐ Psychiatric Facility | ☐ School District or System | ☐ University Counseling Center |
| ☐ University (non-Medical) | ☐ VAMC | ☐ Other: |

Services Provided By Trainee:

- | | | |
|---|-------------------------------------|---------------------------------------|
| ☐ Administration | ☐ Assessment | ☐ Consultation |
| ☐ Psychotherapy | ☐ Research | ☐ Supervision |
| ☐ Teaching | ☐ Other: | |

Client Populations Served:

- | | | |
|--|---|---|
| ☐ Adolescents | ☐ Adults | ☐ Addiction and/or Chemical Dependency |
| ☐ Children | ☐ Couples | ☐ Deaf and Hard of Hearing |
| ☐ Persons with Disabilities | ☐ Families | ☐ Homeless |
| ☐ Inpatients | ☐ LGBTQ+ | ☐ Low Income |
| ☐ Older Adults | ☐ Rural | ☐ Students |
| ☐ Urban | ☐ College/Young Adult | ☐ Military |
| ☐ Male Only | ☐ Female Only | ☐ Eating Disorders |
| ☐ Domestic Violence | ☐ Severe, Persistent Mental Illness (SPMI) | ☐ Other: |

Are recordings allowed?

- | | | | |
|--------------------------------|--------------------------------|-------------------------------|---------------------------------|
| ☐ Video | ☐ Audio | ☐ None | ☐ Other: |
|--------------------------------|--------------------------------|-------------------------------|---------------------------------|

SIGNATURES

AUTHORIZED SITE REPRESENTATIVE

I hereby certify that all the information above is, to my knowledge, complete and accurate.

Authorized Site Representative Signature:

Date

PROGRAM FACULTY MEMBER OR ADMINISTRATOR

Program Faculty Member or Administrator Signature:

Date



**INSTITUTE FOR THE
PSYCHOLOGICAL SCIENCES**

Psy.D. Site Information Form - Internship

SITE CONTACT INFORMATION

Site Name:

Street Address:

City:

State:

Zip:

Phone:

Fax:

Website:

Link to training handbook:

Site Training Director Information

First Name:

Last Name:

Title:

Direct Phone Number:

Email:

SITE DESCRIPTION

Site Overview (Please provide a brief description of site & training):

Site Accreditation Status:

☐ Full APA

☐ Full CPA

☐ Other:

Type of Site:

☐ Academic Teaching

☐ Community Mental Health Center

☐ Consortium

☐ Correctional Facility

☐ Health Maintenance Organization

☐ Hospital/Medical Center

☐ Independent Practice

☐ Medical School/Center

☐ Military Medical Center

☐ Psychiatric Facility

☐ School District or System

☐ University Counseling Center

☐ University (non-Medical)

☐ VAMC

☐ Other:

Services Provided By Intern:

- | | | |
|---|-------------------------------------|---------------------------------------|
| ☐ Administration | ☐ Assessment | ☐ Consultation |
| ☐ Psychotherapy | ☐ Research | ☐ Supervision |
| ☐ Teaching | ☐ Other: | |

Client Populations Served:

- | | | |
|--|---|---|
| ☐ Adolescents | ☐ Adults | ☐ Addiction and/or Chemical Dependency |
| ☐ Children | ☐ Couples | ☐ Deaf and Hard of Hearing |
| ☐ Persons with Disabilities | ☐ Families | ☐ Homeless |
| ☐ Inpatients | ☐ LGBTQ+ | ☐ Low Income |
| ☐ Older Adults | ☐ Rural | ☐ Students |
| ☐ Urban | ☐ College/Young Adult | ☐ Military |
| ☐ Male Only | ☐ Female Only | ☐ Eating Disorders |
| ☐ Domestic Violence | ☐ Severe, Persistent Mental Illness (SPMI) | ☐ Other: |

Are recordings allowed?

- | | | | |
|--------------------------------|--------------------------------|-------------------------------|---------------------------------|
| ☐ Video | ☐ Audio | ☐ None | ☐ Other: |
|--------------------------------|--------------------------------|-------------------------------|---------------------------------|

SIGNATURES

I hereby certify that I have reviewed all information above with my internship training director and it is, to my knowledge, complete and accurate.

Student Signature:_____

DCT Signature:_____

Appendix I: Request for Clearance to Apply for Pre-Doctoral Internship



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Request for Clearance to Apply for Pre-Doctoral Internship

Instructions:

Each student is to supply necessary information on form and is to meet with their Dissertation Chairperson, the Director of Clinical Training and the Director of the PsyD Program for evaluation and approval in that order. Please review each section carefully to provide the required information. In particular, students must complete the hours table AND paperwork checklist prior to seeking DCT approval. **Once the form is complete, please submit along with your site list & hours excel sheet and an updated copy of your CV to the DCT office via ELC. The fully signed form is due on September 15th.**

SECTION I

Applicant Name _____

Date Entered PsyD Program _____ Projected Start of Internship _____

Dissertation Chairperson Clearance

Requirement

- *Doctoral Dissertation Proposal successfully defended.*

I certify that the PsyD student's dissertation proposal has been approved and is cleared to apply for internship.

Dissertation Chairperson _____ Date _____

Director of Research Training (DRT) _____ Date _____

Director of Clinical Training Clearance

By October 1 of the internship application year, these *minimum* requirements will have been fulfilled

- 310 face-to-face client contact hours
- 191 other direct service related hours
- 99 supervision hours
- 387 other support hours
- 987 total practicum hours (estimated up until October 1st)

- The remainder of the required hours, 165 face to face client contact hours, 99 other direct service hours, 58 supervision hours and 223 other support hours - 545 in total (to make up 1500 total clinical hours for all practicum training), will be completed prior to internship start date.

Students should complete the table below.

Total <u>Face-to-Face therapy</u> hours (in person + remote) by Oct 1	
Total <u>Face-to-Face intake</u> hours (in person + remote) by Oct 1	
Total <u>Face-to-Face assessment</u> hours (in person + remote) by Oct 1	
Total Practicum Face-to-Face Client Contact hours by Oct 1 (i.e. total of 3 rows above)	
<i>Estimated Additional</i> Face-to-Face Client Contact Hours to be collected (prior to internship start date)	
Total other Direct Service-Related Hours on Externship/Practicum(s) by Oct 1	
<i>Estimated Additional</i> other Direct Service-Related Hours to be collected (prior to internship start date)	
Total Supervision Hours on Externship/Practicum(s) by Oct 1	
<i>Estimated Additional</i> Supervision Hours to be collected (prior to internship start date)	
Total Externship/Practicum Hours by Oct 1	
<i>Estimated Additional</i> Externship/Practicum Hours (prior to internship start date)	

Clinical Documentation Clearance

By November 1 of the internship application year, students are required to ensure that the following clinical documentation was successfully submitted. To do so, students must review their ELC records and check each box below to confirm that the file(s) are marked complete in ELC. An 'Additional Year' section has been added for students who completed a 4th externship training placement. Please mark 'n/a' if this does not apply.

☐ Introductory: Apps A, B, J & N

☐ Introductory: Proof of Insurance

☐ Introductory: App G & App O

☐ Introductory: Fall App D, E & F

☐ Introductory: Fall Signed Hours

- ☐ Introductory: Spring App D, E & F

- ☐ Introductory: Spring Signed Hours

- ☐ Introductory: Summer App D, E & F

- ☐ Introductory: Summer Signed Hours

- ☐ Foundational: Apps A, B, J & N

- ☐ Foundational: Proof of Insurance

- ☐ Foundational: App G & App O

- ☐ Foundational: Fall App D, E & F

- ☐ Foundational: Fall Signed Hours

- ☐ Foundational: Spring App D, E & F

- ☐ Foundational: Spring Signed Hours

- ☐ Foundational: Summer App D, E & F

- ☐ Foundational: Summer Signed Hours

- ☐ Advanced: Apps A, B, J & N

- ☐ Advanced: Proof of Insurance

- ☐ Advanced: App G & App O

- ☐ Advanced: Fall App D, E & F

- ☐ Advanced: Fall Signed Hours

- ☐ Advanced: Spring App D, E & F

- ☐ Advanced: Spring Signed Hours

- ☐ Advanced: Summer App D, E & F

- ☐ Advanced: Summer Signed Hours

- ☐ Additional Year: Apps A, B, J & N

- ☐ Additional Year: Proof of Insurance

- ☐ Additional Year: App G & App O

- ☐ Additional Year: Fall App D, E & F

- ☐ Additional Year: Fall Signed Hours

- ☐ Additional Year: Spring App D, E & F

- ☐ Additional Year: Spring Signed Hours

- ☐ Additional Year: Summer App D, E & F

- ☐ Additional Year: Summer Signed Hours

Students who have completed additional training rotations are required to list all additional clinical documentation and verify submission of documentation on a separate page attached to this form.

Director of Clinical Training Clearance

I certify that the PsyD student has met criteria related to clinical training and is cleared to apply for internship.

Director of Clinical Training (DCT) _____ Date _____

Director of PsyD Program Clearance

Requirements

- *Basic Clinical Skills Competency Probes: Passed*
- *Advanced Clinical Skills Competency Probes: Passed*
- *PsyD Clinical Comprehensive Exam-Written: Passed*
- *PsyD Clinical Comprehensive Exam- Oral: Passed*

I certify that the PsyD student has made adequate progress on completion of course work and completion of the PsyD Comprehensive Examination Process and is cleared to apply for internship

Director of the PsyD Program _____ Date _____

SECTION II: Statement of Understanding

I understand that final clearance to begin my pre-doctoral internship is contingent upon the following factors:

- *Satisfactory progress towards completion of my doctoral dissertation.*
- *Adequate completion of all required coursework and practicum placements*
- *Completion of the Clinical Comprehensive Examination, Component PsyD-II*
- *Remaining a student in good standing at the IPS*
- *Demonstration of adequate emotional maturity, stability and professional conduct for internship level clinical training.*

I also understand that I am required to apply to APPIC-approved internship sites and that I am obligated to accept such an internship should the opportunity arise.

Consideration of approval for APPIC only internships may occur after reasonable efforts have been applied to securing an APA-approved internship site. Before such a process begins, I will provide sufficient documentation to demonstrate that the proposed site will fulfill the expectations of an APA-approved site. This documentation will be submitted to the Director of Clinical Training for approval. I understand that approval is not guaranteed and will be considered on a case-by-case basis.

Student Signature _____

Date _____



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Affidavit of Handbook Review

(To be signed and submitted each year in the Fall semester by the student and submitted for student's permanent file) (Revised 08/11/2020)

By signing below, I indicate that I have read and understood the contents of the Doctor of Psychology (PsyD) Program Training Handbook, and agree to abide by its policies and procedures. Further, I agree to incorporate any changes to this Handbook into its contents upon notification by the Director of Clinical Training, Department Chair, or the Academic Dean. I further understand that:

- Enrollment in the PsyD program requires a substantial financial commitment. I understand that I must be prepared to meet the financial obligations required without unduly compromising progress in the program through excessive reliance on outside employment.
- Enrollment in the PsyD program requires a substantial commitment and focus of time. Deviation from “on-progress” status (i.e., normal progress is to complete the program, including the clinical internship, within 5 years) is considered to be a serious concern. Lack of continuous progress toward completion of degree requirements may result in formal remediation and possible termination from the program.
- I am required to be registered full-time (as stipulated in the catalog), on a continuous basis, and to be in residency for the duration of my doctoral training at the IPS (with the exception of the clinical internship which will likely require location away from the IPS).
- Enrollment in the PsyD program requires that students engage in methods of instruction that are essential to the development and evaluation of professional competencies, including but not limited to: role plays, audio/video recordings, individual/group supervision, and self-reflection exercises. (Please see sections: ???, ???, and ??? for more information). I understand that I am required to participate in these education, training, and evaluation methods.
- I accept that it is my responsibility to ensure that all necessary clinical documentation related to internal and external training will be submitted as required and detailed in the Clinical Documentation section of the PsyD Program Training Handbook.
- I understand that placement in pre-doctoral internship is very competitive. IPS requires students to apply to multiple sites throughout the United States and not only in the Washington, D.C. metro area. Therefore, I am open to the likely possibility of needing to relocate in order to complete the pre-doctoral internship requirement.

Student Signature _____ Date _____

Printed or typed name of student _____

Appendix K: PsyD Program Clearance for Comprehensive Exam: Clinical Competencies



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

PsyD Program Clearance for Comprehensive Exam

(Revised 07/2025)

COMPLETED IN ELC (SAMPLE BELOW)

Student Name _____

Basic & Advanced Clinical Competency Ratings

PsyD students must pass both the Basic and Advanced Clinical Competency Ratings.

Basic Clinical Competency Ratings

Semester Passed	Course	Skills Rating
	Psy 516	Basic Interviewing and Clinical Skills
	Psy 608	Cognitive / Behavioral Assessment Skills
	Psy 609	Adult Psychotherapy Skills
	Psy 610	Child Psychotherapy Skills
	Psy 611	Marital Psychotherapy Skills
	Psy 613	Personality Assessment Skills

Advanced Clinical Competency Ratings

Semester Passed	Course	Skills Rating
	Psy 724	Advanced Adult Therapy Skills
	Psy 734	Advanced Child, Marital, and Family Therapy Skills
	Psy 836	Advanced Personality Assessment Skills

**If not yet passed, the date the course is scheduled to be completed and evaluated (i.e., "Will be completed Spring 20xx")*

Student Signature

Date

I certify that the student named above has passed all Clinical Rating Scales.

Director of Clinical Training

Date

I certify that the student named is approved to take the PsyD Comprehensive Exams.

Director of the PsyD Program

Date

Appendix L: PsyD Program Clearance to Begin Clinical Training



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

PsyD Program Clearance to Begin Clinical Training COMPLETED IN ELC (SAMPLE BELOW)

I, _____, am seeking programmatic approval to begin clinical training in the Summer of _____ at the IPS Center for Psychological Services.

I have passed/am on track to pass the classes listed below, which are required in order for me to be eligible to begin practicum training.

Please indicate the semester (Fall, Spring, Summer) and Year the course was/will be passed.

Course #	Course Name	Semester & Year Passed (e.g. Fall 2023)
PSY 512	Law, Ethics and Psychology*	
PSY 516	Basic Interviewing and Clinical Skills**	
PSY 610	Child Psychotherapy**	
PSY 507	Psychopathology*	
PSY 609	Adult Psychotherapy Skills**	
PSY 827	Cultural, Religious, Individual. Diversity*	

*These classes must be passed at a B or above prior to initiating training.

**These class Clinical Rating Scales must be passed at a 3 or above prior to initiating training.

I understand that clearance to begin clinical training is contingent upon the following factors:

- Remaining a student in good standing in the PsyD program, including meeting course expectations listed above.
- Demonstration of adequate emotional maturity, stability, and professional conduct for clinical training as evidenced by all Appendix R ratings.

This documentation will be submitted to the Director of Clinical Training for review and faculty approval. I understand that approval is not guaranteed and will be considered on a case-by-case basis.

Student Signature

Date

I certify that the student named above has passed all requirements and demonstrated appropriate professionalism throughout the first two semesters of the PsyD program thereby indicating readiness to begin the introductory practicum placement at the IPS Center for Psychological Services.

Director of Clinical Training

Date



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

PsyD Program Clearance for Externship Training **COMPLETED IN ELC (SAMPLE BELOW)**

I, _____, am seeking programmatic approval to begin clinical training in the Summer/Fall of _____ at an external practicum training placement..

I understand that clearance to begin clinical training at an external training site is contingent upon the following factors:

- Remaining a student in good standing in the PsyD program
- Demonstration of adequate emotional maturity, stability, and professional conduct for clinical training as evidenced by all Appendix R ratings.
- Receiving passing ratings ('3 - Satisfactory' or above) on all Clinical Competencies evaluated in the Fall, Spring, & Summer Appendix E: IPS Center Evaluation of Extern or passing required remediation steps.

This documentation will be submitted to the Director of Clinical Training for review and faculty approval. I understand that approval is not guaranteed and will be considered on a case-by-case basis.

Student Signature

Date

I certify that the student named above has passed all clinical competency requirements and demonstrated appropriate professionalism throughout their training at the IPS Center thereby indicating readiness to begin the externship training process.

Director of Clinical Training

Date

Appendix M: PsyD Program Comprehensive Exam Scoring Summary Form Component; PsyD-II: Case Presentation (Oral)



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Psy.D. Program Comprehensive Exam Scoring Form Component PsyD-II: Case Discussion – Oral

Date: _____

Student Name: _____

Examiner: _____

	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
Scale	1	2	3	4	5
Program Goal 1: Foundations in Psychological Sciences and Research (Question 5)					
a. Application of the psychological sciences and outcomes research (Obj, c.2)	☐	☐	☐	☐	☐
Program Goal 2: Integrity in Practice (Question 3)					
a. Knowledge of diversity & integration of multicultural competence in all areas of professional practice (Obj, a.1)	☐	☐	☐	☐	☐
b. Ethical decision making and judgment (Obj, b.1)	☐	☐	☐	☐	☐
Program Goal 3: Assessment and Diagnosis (*Question 4)					
a. Intake evaluation (Obj, a.2) (*Covered in Question 1)	☐	☐	☐	☐	☐
b. Integration of multi-source test data and clinical interview information into a comprehensive report (Obj, c.1)	☐	☐	☐	☐	☐
c. Diagnosis (Obj, d.1)	☐	☐	☐	☐	☐
d. Treatment planning recommendations (Obj, d.2)	☐	☐	☐	☐	☐

- Turn page over -

(Revised 06/09/2020)

Program Goal 4: Therapeutic Intervention (Question 1)

a. Case conceptualization (Obj, a.1)

☐☐☐☐☐

b. Treatment planning (Obj, b.2)

☐☐☐☐☐

c. Psychotherapy skills (Obj, d.6)

☐☐☐☐☐

Program Goal 5: Professional Roles (Educator)

(Ability to articulate and disseminate case information orally)

a. Educator (Obj, b.1)

☐☐☐☐☐

Program Goal 6: Clinical Practice from a Catholic Integrative Perspective (Question 2)

a. Knowledge of the human person from the Catholic perspective (Obj, a.1)

☐☐☐☐☐

b. Catholic integration in clinical practice (Obj, b.6)

☐☐☐☐☐

Qualitative Comments:

(Revised 06/09/2020)



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

PsyD Student Professional Associations and Activities

COMPLETED IN ELC (SAMPLE BELOW)

An important component of a student's development as a professional psychologist is to become part of the larger community of psychologists through membership in professional associations. Active membership in such organizations fosters awareness of current knowledge and best practices in the field, as well as allowing opportunities for scholarship and leadership. Accordingly, all students enrolled in the Psy.D. program are required to be members of at least one professional mental health association. We strongly encourage each student to review this form with their academic advisor at least once a year.

Are you a member of a Professional/Research Society?* ☐ Yes ☐ No

Please indicate in which of the following associations or societies you are a member.

- American Psychological Association (APA)
- American Psychological Association of Graduate Students (APAGS)
- Asian American Psychological Association (AAPA)
- Association of Black Psychologists (ABPsi)
- Catholic Psychotherapy Association (CPA)
- International Psychology (APA Division 52)
- National Latina/o Psychological Association (NLPA)
- Society for the Psychological Study of Ethnic Minority Issues (APA Division 45)
- Society for the Psychology of Religion and Spirituality (APA Division 36)
- Society of Clinical Psychology (APA Division 12)
- Society of Indian Psychologists (SIP)
- Other

If 'Other', please list all:

Please provide the TOTAL NUMBER of societies you are a part of from above: _____

Please provide the NUMBER of leadership roles or activities in these societies you held (for example, roles in local, state/provincial, regional, or national organizations) WITHIN THE LAST ACADEMIC YEAR ONLY?* _____

If you are in one of these roles, please list your title and the organization as well as your time in the role. If No, write 'n/a':

Please provide the NUMBER of scholarly books or book chapters you published WITHIN THE LAST ACADEMIC YEAR ONLY. (Publications "in press," "under review," or "submitted" should not be counted here.)* _____

Please list each publication using APA style. If 0, write 'n/a':

Please provide the NUMBER of articles you published in professional or scientific journals WITHIN THE LAST ACADEMIC YEAR ONLY. _____

Please list each article in APA style and include Doi or URL. If 0, write 'n/a':

Please provide the NUMBER of workshops, oral presentations, and/or poster presentations you gave at professional meetings/conferences/organizations (including the DMU Research Symposium) WITHIN THE LAST ACADEMIC YEAR ONLY.* _____

Please list each activity using APA style. If 0, write 'n/a':

[Text Box]

Please provide the NUMBER of presentation(s) on a psychological topic you gave to a lay or community audience WITHIN THE LAST ACADEMIC YEAR ONLY?* _____

Please list each presentation using APA Style. If 0, write 'n/a':



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Psy.D. Supervisor Information Form - Practicum

COMPLETED IN ELC (SAMPLE BELOW)

(To be completed by the student or their supervisor and submitted to the DCT at the beginning of the year or whenever a supervisor change occurs.)

Supervisor Information

First Name: _____

Last Name: _____

Title: _____

Site Name: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Office Phone: _____

Alternative Phone: _____

Email: _____

Type of Training offered: ☐ Beginner Practicum ☐ Intermediate Practicum ☐ Advanced Practicum

Placement Start Date: _____

Placement End Date: _____

Supervisor Education:

Highest Degree Earned: _____

Granting Institution: _____

Year Earned: _____

2nd Highest Degree Earned: _____

Granting Institution: _____

Year Earned: _____

Supervisor License Information:

Qualification/Title	Authority/Jurisdiction	License Number/ID	Expires
Qualification/Title	Authority/Jurisdiction	License Number/ID	Expires
Qualification/Title	Authority/Jurisdiction	License Number/ID	Expires

Please do not use abbreviations

Training Facility Information

- ☐ Check box if training facility information is the same as *supervisor information* listed above

Institution: _____

Training Director Name: _____

Training Director Email: _____

Street Address: _____

Office Phone: _____

Alternative Phone: _____

Site Supervisor Signature: _____



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Psy.D. Supervisor Information Form - Internship

COMPLETED IN ELC (SAMPLE BELOW)

(To be completed by the student, reviewed with their supervisor, and submitted to the DCT at the beginning of the year or whenever a supervisor change occurs.)

Supervisor Information

First Name: _____

Last Name: _____

Title: _____

Site Name: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Office Phone: _____

Alternative Phone: _____

Email: _____

Supervisor Role: ☐ Primary ☐ Secondary ☐ Assessment ☐ Group ☐ Other

If other, please specify: _____

Placement Start Date: _____

Placement End Date: _____

Supervision Start Date: _____

Supervision End Date: _____

Supervisor Education:

Highest Degree Earned: _____

Granting Institution:_____

Year Earned:_____

2nd Highest Degree Earned:_____

Granting Institution:_____

Year Earned:_____

Supervisor License Information:

Qualification/Title	Authority/Jurisdiction	License Number/ID	Expires
Qualification/Title	Authority/Jurisdiction	License Number/ID	Expires
Qualification/Title	Authority/Jurisdiction	License Number/ID	Expires

*Please do not use abbreviations

Training Facility Information

- ☐ Check box if training facility information is the same as *supervisor information* listed above

Signatures

I hereby certify that I have reviewed all information above with my supervisor and it is, to my knowledge, complete and accurate.

Student Signature:_____

DCT Signature:_____



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Personal Performance Improvement Plan

(template)

Student:

Semester:

Date:

Instructor/Supervisor:

Course/Practicum Site:

This plan was created in response to the area(s) of concern which initially arose in the {SEMESTER} of {YEAR}.

Specific Clinical/Professional Competencies In Need Of Improvement:

[template]

Summary of Concerns

[template]

Plan for Immediate & Sustained Improvement

[template]

Consequences of Failing Completion

[template]

Psy.D. Student

Date

Instructor/Supervisor

Date

Director of Clinical Training

Date

Appendix Q: Remediation Form: Tiers 3-5 Template



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Remediation Form: Tiers 3-5 Template

(template)

Student:

Semester:

Date:

Instructor/Supervisor:

Course/Practicum Site:

Specific Clinical/Professional Competencies In Need Of Improvement:

[template]

Summary of Concerns

[template]

Steps to Be Taken & Timeline

[template]

Consequences of Failing Completion

[template]

Psy.D. Student

Date

Instructor/Supervisor

Date

Student's Academic Advisor

Date

Director of Clinical Training

Date

PsyD Program Director

Date



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Faculty Rating of Students' Professionalism

COMPLETED IN ELC (SAMPLE BELOW)

Student Name:

This evaluation is intended to help the faculty and IPS assess the student's progress and readiness to pursue further graduate study in clinical psychology, specifically in the area of professionalism. This form is intended as a guide only; feel free to include additional comments that you think would help the student's development as a professional psychologist.

STUDENT PROFESSIONALISM RATINGS

Students' professionalism is rated by all faculty. Any rating below 3 will render an "unsatisfactory" professionalism rating on students' end of semester evaluation, and may necessitate a remediation plan.

SECTION 1: INDEPENDENT AND PROFESSIONAL FUNCTIONING

	N/A	Inadequate Proficiency	Marginal Proficiency	Functional Proficiency	Advanced Proficiency	Mastery
Responsibility: Ability to follow through and complete assignments and tasks; ability to work independently and assume responsibility for actions; timely submission of practicum-related paperwork (if applicable).	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Initiative: Shows keen interest, initiative, and willingness to be involved; participates in discussions.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Time Management: Punctuality; attendance; meeting deadlines as required (e.g., assignments, paperwork); Does not arrive late or leave early from classes or meetings.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Professional Conduct: Complies with program guidelines and interacts respectfully and professionally with faculty and staff. Follows directions and guidance from Program administration and faculty.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Collegiality: Works well with faculty and peers (including proper attire, conduct, speech).	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

COLLEGIABILITY: Works well with clients and clinical staff (including proper attire, conduct, speech); cooperates with other staff and co-workers.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Problem Solving: Ability to conceptualize, analyze, synthesize, and evaluate information obtained; utilizes critical thinking skills to resolve dilemmas; respectful.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
Self-Awareness: Ability to critically evaluate own strengths and weaknesses in the classroom.	☐ N/A	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

Rubric Score:

Rubric Mean:

Additional Comments:

Instructor Signature:

Date

Student Signature:

Date

Director of Clinical Training Signature:

Date

* Please do not print screenshots, they are for illustrative purposes only.

** Students may access their evaluation results in ELC once the form has been completed by the supervisor

Appendix S: Student Proposal to go Out-of-sequence and Affidavit of Responsibility



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Student Proposal to go Out-of-sequence and Affidavit of Responsibility COMPLETED IN SIGN-NOW (SAMPLE BELOW)

(To be signed by student, student's Academic Advisor and Program Director)

I, _____ request to take the following course/s outside of the established PsyD curriculum sequence.

Please list courses you propose to postpone/take out of sequence and your plan for timely completion of degree requirements:

- Enrollment in the PsyD program requires a substantial commitment and focus of time. Deviation from “on-progress” status (i.e., normal progress is to complete the program, including the clinical internship, within 5 years) is considered to be a serious concern. Lack of continuous progress toward completion of degree requirements will result in formal remediation and possible termination from the program. (From Affidavit of Handbook Review)
- I am required to be registered full-time, on a continuous basis, and to be in residency for the duration of my doctoral training at the IPS (with the exception of the clinical internship which will likely require location away from the IPS). (From Affidavit of Handbook Review)
- Students are advised that taking courses outside of the established curriculum sequence could adversely impact completion of the clinical training sequence - including ability to take up externships, complete comprehensive examinations and be eligible for internship when desired. Students are expected to abide by all requirements set out in the Clinical Training Handbook, whether or not they go ‘out of sequence’ with their academic studies. The student agrees to abide by rules stated in training agreements with IPS training sites and external training sites.
- Students must be aware that there may be potential consequences of enrolling in and completing a reduced course load (i.e, either below full-time status or out of the Typical Course Sequence). Consequences may include, but are not limited to, potential reduction of financial aid awards, SEVIS status, degree completion time, financial liabilities, etc.

- The student is responsible for taking necessary action with the corresponding offices (i.e., Financial Aid, Student Accounts, International Student Office, Registrar, Academic Advisor) to comply with appropriate policies and requirements.
- The student agrees to meet the enrollment requirements and standards of IPS. The student must be aware that in going out of sequence they take a risk. The student must meet with their academic advisor to develop a plan; no guarantees can be made that this plan will mitigate adverse effects. It is not possible to guarantee the future availability of particular classes at a particular time or that any student's proposals for adaptations to the normal guidelines and regulations concerning the clinical training sequence or academic requirements will be accommodated. The availability of courses a student who is out-of-sequence may take will be highly restricted due to course prerequisites, current course scheduling and Practicum requirements.
- Student is aware that the duration of their time in the program cannot exceed seven years.

This form must be completed each semester that a student is out of sequence.

Approval and Acceptance by

Student Name	Academic Advisor Signature
Student Signature	Date
Date	Program Director Signature
	Date

Appendix T: Pre-Doctoral Internship Application Timeline & Articles

Application Process	Components	Timeline
Dissertation Proposal	See Dissertation Handbook	April 30th
PsyD Comprehensive Exams	Written Exam Oral Exam	Summer Semester
Reread Training Handbook Sections on Internship Applications	IV.D. Pre-doctoral Internship/Residency	<i>By August 1st</i>
Subscribe to APPIC Listserv	https://www.appic.org/E-Mail-Lists/Choose-a-news-list/Match-News Note, some emails may not be relevant as they may be part of the previous year's application phases.	<i>August 1st</i>
Register for the AAPI (APPIC Application for Psychology Internships) Centralized Application Service.	Review the AAPI application requirements and learn how to access the various sections.	<i>August 1st</i>
Draft Essays	Draft 4 Essays that are part of AAPI 1. Autobiographical statement 2. Theoretical Orientation 3. Diversity 4. Research Interests	<i>End of Summer Semester</i>
Develop initial site list	1. Browse directory 2. Review websites 3. Read training manual/materials 4. Develop a list of site specific information to be included in application and/or cover letter. <i>Note: This is a time-consuming process. Please budget accordingly.</i>	<i>August 15th</i>
Update CV	Update your CV with all additional training information from the past year & draft information for the coming year (e.g. new externship and/or assistantship, etc.)	<i>August 1st</i>
Transcripts	Recommendation: Request as soon as possible.* <u>*If you are retaking Comprehensive Exams, wait until you have successfully & fully passed to request your transcripts.</u> Be sure to follow the Registrar's instructions for requesting a transcript and be mindful of their timeline to produce and send these out. Allow for sufficient time to meet your first deadline. Here is APPIC's guide for electronic transcript submission. Please note that AAPI Online personnel require 7-10 working days to upload transcripts once received and	<i>August 1</i>

	giving yourself a wide margin will help you resolve any issue that may arise with your transcripts. ²	
Informally Inquire about Letters of Recommendation	Reach out to potential letter writers and ask if they would be willing to write a strong letter of reference on your behalf. Notify them that there is a standard form for the letter.	<i>Early August/First few weeks of externship</i>
Revise Essays & CV	Meeting with Academic Advisor to receive feedback about essays & CV	<i>August 31st</i>
Revise Site List	Using Site List Excel Sheet, review and revise your selected sites to fit with recommendations from the training handbook and updates sites have made to their information	<i>August 31st</i>
Appendix I: Request for Clearance to Apply for Pre-Internship)	Begin completing Appendix I ● Fill out all sections required Seek needed signatures allowing approximately 1 week for each office to respond and complete their portion of the form. Please proceed in the following order ● DRT Clearance ● Program Director Clearance ● DCT Clearance	Begin by August 15th
Draft Cover Letters	We recommend that you draft initial Cover Letters based on site type (e.g. VA, Counseling Center, CBMHC, etc.). Once these are ready and refined then develop specific site letters. Meet with Academic Advisor to receive feedback on initial drafts	<i>September</i>
Finalize Site List	Complete Site List Excel Sheet	By September 15
Request for Clearance to Apply for Pre-Internship)	● Submit Fully Completed & Signed Appendix I ● Upload updated CV ● Submit Site List excel worksheet ● Submit Full Hours Report	Due September 15 in ELC
Receive Approval from DCT	● To participate and register for the Match ● Of site list with recommendations for changes (e.g. additions or subtractions)	<i>September 25th</i>
Formally Request Letters of Recommendation	Following approval from DCT office, formally request letters of recommendation See Training Handbook section for requirements regarding what information to share with letter writers. Be sure to provide the Standard Reference Form, information about how they will receive a link to submit letters https://recommendations.liaisoncas.com/recommendation	<i>September 28th</i>

	/ui/login#/login), and option to have their letter apply to all other applications. Also let them know that it is best to complete the letter in a word document and paste it into the internet form so that they do not lose any work.	
Submit Hours	• Submit finalized hours in AAPI • Request DCT Verification To support verification of your hours please be sure to have completed all weekly hours logs in ELC	<i>October 1</i>
DCT Verification	Areas that we need to verify include total hours, dissertation progress, completion of comprehensive exams, etc.	<i>~ October 15th</i>
Finalize All Materials	Meet with your academic advisor to review and finalize your Essays, Cover Letters, Case Summaries, Sample Reports, etc.	<i>~ October 20th</i>
Match Registration	You may <u>NOT</u> register until you receive written permission from the DCT Office. When you receive approval sign-up and pay for the match: https://natmatch.com/psychint/	<u>Must be complete by October 30th</u>
Submit Applications*	1. Complete full AAPI 2. Include LORs 3. Cover Letters 4. Transcript 5. Essays and any additional requirements from individual training sites. 6. Writing sample* (if required by site) 7. DCT Certification	November 1 (Please note if there are later deadlines)
Mock Interviews	DCT will email information about scheduling mock internship interviews Sign up and complete all mock interviews	<i>November 13th</i>
Interviews	Schedule and complete interviews Follow-up inquiries (e.g., reach out to TD or current interns as needed) We recommend sending thank you emails following your interviews. These should be short and include specific details about the site and/or interview process that you are grateful for and excited for if you matched with them.	<i>~ Mid-December - January</i>
Resubmit Site List	Update your Site List Excel Sheet to indicate all sites that you applied to, received interviews from, did not hear back from, or where you did not receive an interview. Submit by email to the DCT office.	February 1
APPIC Phase I Rankings*	Deadline for submission of Rank Order Lists for Phase I of the Match.	<u>APPIC Match Dates TBA in August</u>

APPIC Phase I Match Day*	10:00 AM ET - Match results will be distributed to internship programs and applicants. Academic programs will also receive the Match results for each of their students. 11:00 AM ET - Internship Training Directors and the applicants to whom they have matched may contact each other after this time. <u>Email DCT office with your results by noon.</u>	<i>APPIC Match Dates TBA in August</i> Results of Phase I of the Match will be released to applicants, training directors, and DCTs of academic programs.
APPIC Phase II*	Deadline for applicants to submit applications to programs that are participating in Phase II of the Match. <i>DATE TBA:</i> Final Phase II site list available in directory	<i>APPIC Match Dates TBA in August</i>
	Deadline for submission of Rank Order Lists for Phase II of the Match.	<i>APPIC Match Dates TBA in August</i>
	APPIC Phase II Match Day: Results of Phase II of the Match will be released to applicants, training directors, and DCTs of academic programs. <u>Email DCT office with your results by noon.</u>	<i>APPIC Match Dates TBA in August</i>
APPIC Phase III (Clearing House)*	The APPIC Post-Match Vacancy Service begins operating and remains open through October 31	<i>APPIC Match Dates TBA in August</i>

*More information re: application requirements, specific deadlines, and details about the match on the APPIC website. We recommend that you check this to verify deadlines listed here.

² The applicant also submits one official copy of all graduate transcript(s) directly to the application service via regular mail. These transcripts are verified as official, scanned into the system, and attached to each application that is submitted by the applicant. Undergraduate transcripts are no longer allowed as a supplemental upload but programs may request a copy AFTER the match for appointment reasons. Some universities will not separate the undergraduate transcripts from the graduate transcripts and these are permissible.

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Appendix U: Psy.D. Curriculum - Required Progressive Sequence

Psy.D. CURRICULUM - 2026-2027 Required Progressive Sequence

Color Coded

FALL

SPRING

SUMMER

ACADEMIC YEAR 1

LIB 500 Library/Information Use & Research 0
 INT 510 The Person: Integrating Perspectives I 2
 PSY 504 Psychological Measurement 3
 PSY 512 Law, Ethics and Psychology 3
 PSY 516 Basic Interviewing & Clinical Skills 3
 PSY 610 Child Psychotherapy 3
 PSY 597 Psychology Overview I 1
14 credit hours
 (15 credit hours (ch) if PSY 597 is required)

INT 511 The Person: Integrating Perspectives II 2
 PSY 507 Psychopathology 3
 PSY 608 Cognitive/Behavioral Assessment 4
 PSY 609 Adult Psychotherapy 3
 PSY 827 Cultural, Religious, Individ. Diversity 3
 PSY 832 Integrative Dissertation Seminar 2
 PSY 598 Psychology Overview II 1
17 credit hours
 (18 ch if PSY 598 is required)

PSY 605 Developmental Psychology 3
 PSY 721 Cognition & Emotion 3
 PSY 899 Dissertation (1) 1
7 credit hrs

ACADEMIC YEAR 2

INT 615 Flourishing: Freedom & Moral Dev't 3
 PSY 613 Personality Assessment 4
 PSY 718 Research Design for Psych Sciences 3
 PSY 822 Biological Bases of Behavior 3
 PSY 899 Dissertation (2) 1
 PSY 601 PsyD Introductory Practicum I 2
16 credit hours

INT 625 Flourishing: Relationships, Vocations 3
 PSY 611 Marital Psychotherapy 3
 PSY 503 Personality Theories 3
 PSY 836 Adv. Personality Assessment 4
 PSY 899 Dissertation (3) 1
 PSY 602 PsyD Introductory Practicum II 2
16 credit hours

PSY 736 Adv Child Psychopathology 2
 PSY 825 Social Bases of Behavior 3
 PSY 899 Dissertation (4) 1
 PSY 603 PsyD Introductory Practicum III 2
8 credit hours

ACADEMIC YEAR 3

PSY 500 History and Systems of Psychology 3
 PSY 724 Advanced Adult Psychotherapy 4
 PSY 735 Adv. Adolescent and Family Therapy 3
 PSY 899 Dissertation (5) 1
 PSY 701 Foundational Clin. Prac/Externship I 2
13 credit hours

PSY 820 Group Psychotherapy 3
 PSY 729 Advanced Statistical Methods 3
 PSY 899 Dissertation (6) 1
 PSY 702 Foundational Clin. Prac/Externship II 2
 PSY 897-7 Psychology of Trauma 2
11 credit hours

PSY 760 Professional Roles/Issues 2
 PSY 899 Dissertation (7) 1
 PSY 703 Found. Clin. Prac/Ext. III 2
 PSY 799 PsyD COMPREHENSIVE EXAM 0
5 credit hours

ACADEMIC YEAR 4

PSY 830 Psychologist-Consult/Sprvs/Educator 3
 PSY 899 Dissertation (8) 1
 PSY 801 Adv. Clinical Practicum/Externship I 3
7 credit hours

PSY 823: Psychopharmacology (ELECTIVE) 2
 PSY 840: Human Sexuality (ELECTIVE) 2
 PSY 899 Dissertation (9) 1
 PSY 802 Adv. Clinical Practicum/Externship II 3
8 credit hours

ACADEMIC YEAR 5

PSY 890 Pre-Doctoral Internship (off campus) 0 PSY 890 Pre-Doctoral Internship (off campus) 0 PSY 890 Pre-Doctoral Internship 0

Maroon = Phil & Theology
 Blue = clinical skills
 Green = clinical experience
 Purple = research
 Red = assessment
 Orange = general research

Appendix V: Psy.D. Externship Site List Form



INSTITUTE FOR THE PSYCHOLOGICAL SCIENCES

Student Proposed Externship Site Application List

COMPLETED IN ELC (SAMPLE BELOW)

(A Word/Google Doc Version of this form can be found here: [Appendix V Psy.D. Externship Site List Form](#))

Instructions:

Each student is to supply necessary information on this form to the best of their ability. **The site list should be submitted to the DCT office via ELC by January 10th and must be approved prior to a student applying.** We recommend that in addition to conversations with the DCT office, students speak with their academic advisors and current clinical supervisors regarding their training goals and appropriate training placements.

SECTION I - Student Information

Student Name: _____

Applying for Training Year: 202 ____ - 202____

I am a:

- ☐ Rising 3rd year (with training availability on Monday, Wednesday, and Fridays during the next training year)
- ☐ Rising 4th year (with upcoming training availability on Tuesday, Thursdays, and Fridays during the next training year)
- ☐ Out of Sequence (with upcoming training availability on Tuesday, Thursdays, and Fridays during the next training year)

Current Training Placement: _____

Previous Training Placement: _____

Previous Training Placement: _____

Projected Start of Internship: Fall 202____

SECTION II - Training Goals

Briefly summarize your training goals. Consider what population(s) you'd like to focus on, specialty (e.g. assessment, marital therapy, group therapy, generalist, etc.) and/or the setting of your training (e.g. College Counseling Center, Inpatient Hospital, VA, etc.). You may also want to include your ideal internship placement(s) and a link to their APPIC profile(s). You may list more than one training goal. Remember you are not finalizing your training path, but reflecting on your goals as they are now so that your potential externship placements can begin to build towards this path.

[illegible]

SECTION III - Proposed Site List

Please review the [Training Handbook's externship application requirements \(Section IV.B.2\)](#) as well as the [GWCPPC guidelines](#) prior to adding a site to your list below. Prior to accepting a training placement, you must complete any missing information below. During an interview you will be able to ask the site about any missing information. Please note, you are required to apply to a minimum of 8 sites, though we recommend applying to 12-15 training sites and have provided space for 16 sites. *Please copy and paste each site description to add a site beyond the 16 possible or delete any unused site options. There is a separate section below for summer only placements.*

Summary List Sites:

Please list the names of each site you are applying for here and then complete the site description for each site in the section below.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____
16. _____

Site 1:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 2:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 3:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 4:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 5:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 6:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 7:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 8:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 9:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 10:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 11:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 12:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 13:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 14:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 15:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 16:

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

SECTION IV - Proposed Summer Placement Site List

At times based on training goals and/or the need for additional training hours, students elect to pursue summer only training placements. If you wish to apply for such a placement, list the sites below. Please review the [Training Handbook's externship application requirements \(Section IV.B.2\)](#). Summer placements are considered separate from a full year placement and require DCT approval (which is typically swift). Students need to meet with and ask their academic advisor for an email to the DCT office supporting their desire to pursue a summer placement. Unless otherwise outlined in their remediation plan, students on remediation are **not** eligible for summer placements without written permission from the DCT office.

Site 1 (Summer Only):

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Start & End Dates: _____

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 2 (Summer Only):

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Start & End Dates: _____

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 3 (Summer Only):

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Start & End Dates: _____

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 4 (Summer Only):

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Start & End Dates: _____

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Site 5 (Summer Only):

Site Name: _____

Training Director (Name & Title): _____

Training Director Email: _____

Link to Site's Website/training brochure: _____

Is the site listed on the GWCPPC directory? ☐ Yes ☐ No

Required Training Start & End Dates: _____

Required Training Days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Required Training Days do not conflict with my academic schedule: ☐ True ☐ False

Training level is described as: ☐ Beginner ☐ Intermediate ☐ Advanced ☐ Not Described

If the site has training tracks, which track are you applying for?

(Please note, from a program perspective you may apply for multiple tracks though a site may state otherwise. Note, students are not permitted to apply for assessment only or primarily assessment focused tracks unless granted an exception by the DCT office.)

Does the site use telesupervision? ☐ Yes ☐ No ☐ Unsure

If yes, is telesupervision the primary or exclusive form of supervision? ☐ Yes ☐ No ☐ Unsure

Would you provide teletherapy? ☐ Yes ☐ No ☐ Unsure

If yes, is teletherapy the primary or exclusive form of therapy? ☐ Yes ☐ No ☐ Unsure

In reviewing the site's training description, to the best of my knowledge this site meets all the conditions listed in the DCT handbook (see Appendix G for more information).

☐ Yes ☐ No

Explain any discrepancies or aspects you are unsure of (quick list is fine).

Appendix W: Telesupervision Addendum to Appendix G



**INSTITUTE FOR THE
PSYCHOLOGICAL SCIENCES**

Telesupervision Addendum to Appendix G

(Revised 3.16.2026)

COMPLETED IN ELC (SAMPLE BELOW)

This Addendum to the "Appendix G: External Practicum Agreement" is made this ____ day of

_____, 202__, by and between the Divine Mercy University's Institute for the Psychological

Sciences doctoral program in clinical psychology (hereinafter “PsyD Program”) and _____ (hereinafter “Practicum Site”).

Student Name _____
(hereinafter “Student”)

Beginning Date of Training _____

Ending date of training _____

Practicum Site _____

Practicum Supervisor _____

(Must be a licensed clinical psychologist; Include credentials, e.g., PhD, PsyD, unless otherwise agreed in writing with PsyD program)

As part of their accrediting function and in order to maintain standards of clinical training, the American Psychological Association requires that programs take steps to ensure that telesupervision does not result in a diminution of standards of supervision ([APA Implementing Regulation C-13D](#)). Please complete the following to detail how training standards and best practices will be maintained:

1 Intended use of telesupervision

Select **one** option below that best describes your site’s approach to telesupervision.

- As a primary mode of supervision - Please note telesupervision cannot constitute more than 49% of the minimum required hours of supervision and should be used only when in person supervision is impractical
- As a secondary mode of supervision to provide additional opportunities to complement in person primary supervision
- To facilitate supervision in exceptional circumstances - e.g. when either the telesupervisee or supervisor is ill or when clinical emergencies arise outside of hours or the coverage on call clinician is unavailable
- Other: [TEXT BOX]

Complete the following if you are planning to utilize telesupervision in any way.

Please indicate with a checkmark that your program includes the following practices consistent with our program’s policies and with best practices as outlined by ([APA Implementing Regulation C-13D](#), [APA Telehealth Guidelines 2024](#)). Some categories include “select all that apply” options to provide additional information about your program.

2 Telesupervision Confidentiality Training

Students are trained in the required HIPAA standards and use of telehealth to protect client privacy & confidentiality.

- Yes
- No (Please explain why not below)

[TEXT BOX]

Please select all that apply.

- Telesupervision policies & best practices reviewed during site orientation
- Confidentiality, HIPAA requirements, and appropriate clinical and ethical requirements to telehealth/telesupervision discussed at the onset of supervision and reviewed as needed
- Other: [TEXT BOX]

3 Limitations of Telesupervision

Telesupervisors discuss with telesupervisees at the start of supervision the potential limitations of telesupervision.

- Yes
- No (Please explain why not below)

[TEXT BOX]

4 Recognizing & Addressing Potential Barriers to Effective Telesupervision

Your training site/telesupervisor takes steps to remedy or guard against potential barriers to effective engagement in telesupervision.

- Yes
- No (Please explain why not below)

[TEXT BOX]

Select from the following list all of the protective and/or remedying steps that your site/site telesupervisors take:

- Provide opportunities for professional socialization within as well as outside of telesupervision.
- Directly discuss the importance of building rapport as a supervision dyad at the outset of telesupervision identifying concrete strategies to develop a strong alliance.
- Directly discuss the barriers to building rapport as a supervision dyad at the outset of telesupervision identifying concrete strategies to addressing concerns.
- telesupervisors & telesupervisees are responsible for regularly checking in about supervisory rapport over the course of the training year.
- The telesupervisory dyad discusses the need for and agrees that both parties are responsible for naming and addressing concerns related to impoverished nonverbal affective cues and interventions.
- The telesupervisory dyad addresses that telesupervision may pose difficulties assessing in person therapeutic stance and skillset.
- The telesupervisory dyad directly discusses and identifies concrete steps to address/protect against barriers to disclosure given the sense of distance from the telesupervisor.
- Other:

[TEXT BOX]

If in the course of training you determine that telesupervision is not an effective approach for the telesupervisee, steps are taken by the telesupervisor/training site to address this concern and provide adequate supervision based on the telesupervisee's specific needs (e.g. provide feedback to telesupervisee, increase frequency of in person supervision, reduce frequency or use of telesupervision, provide feedback to the program, etc.)

- Yes
- No (Please explain why not below)

[TEXT BOX]

5 Telesupervisor Availability & Responsibilities

Telesupervisors discuss with telesupervisees at the start of supervision their role, responsibilities, and qualifications, including those related to the provision of telesupervision.

- Yes
- No (Please explain why not below)

[TEXT BOX]

The telesupervisor maintains full professional responsibility for clinical cases conducted by telesupervisee.

- Yes
- No (Please explain why not below)

[TEXT BOX]

The telesupervisor establishes and maintains regular supervision meetings times with the telesupervisee.

- Yes
- No (Please explain why not below)

[TEXT BOX]

Telesupervisors are familiar with the standards and practices of the training site and familiar with the populations it serves.

- Yes
- No (Please explain why not below)

[TEXT BOX]

6 Crisis Consultation Availability

The telesupervisor provides consultation ('on call' or 'ad hoc supervision') to assist the telesupervisee with crisis situations and outlines how the telesupervisee can access the telesupervisor outside of the regularly scheduled supervision meeting.

- Yes
- No (Please explain why not below)

[TEXT BOX]

The site provides licensed clinicians for consultation ('on call' or 'coverage supervisors') to assist the telesupervisee with crisis situations should the telesupervisor be unavailable or unreachable.

- Yes
- No (Please explain why not below)

[TEXT BOX]

The telesupervisee is made aware of crisis consultation resources and policies during orientation and regularly thereafter.

- Yes
- No (Please explain why not below)

[TEXT BOX]

7 Direct Observation

The telesupervisor conducts direct observation of the telesupervisee's clinical work as part of regular assessment of the student's developing competencies at least once per evaluation period.

Examples of direct observation include: using in-room or one-way mirror observation of direct service contact, live simultaneous audio-video streaming, or audio or video recording of the Student's work using audio/visual tapes, observation, and/or live supervision. Direct observation should occur no less than three times a year, that is during each evaluation period to inform evaluation of the student's clinical competencies. (See [APA IR C-14 Direct Observations](#))

- Yes
- No (Please explain why not below)

[TEXT BOX]

For any of the above categories (#1-7), please explain why an option was not selected and how your site's use of telesupervision is still in keeping with best practices.

[TEXT BOX]

Approval and Acceptance by

Practicum Site	Name with credentials (Ph.D., Psy.D.)	Title
	Signature	Date
IPS PsyD Student	Name	Title
	Signature	Date
IPS PsyD	Name with credentials (Ph.D., Psy.D.)	Title

Program	Signature	Date
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