

**GRADUATE STUDENT HANDBOOK**

**CLINICAL PROGRAM**

**DEPARTMENT OF PSYCHOLOGY**

**UNIVERSITY OF KENTUCKY**

**2024-2025**

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## INTRODUCTION

We're glad to have you as part of the Clinical Program in the Department of Psychology at the University of Kentucky!

**We are a Clinical Program that trains the next generation of psychological clinical scientists,** and this handbook is designed to provide you with information about our Program's requirements, policies, and procedures. It supplements the information available on our [Program's website](#), the [Graduate Catalog](#), and the Graduate School's [Thesis & Dissertation Preparation](#) instructions. To be fully informed of all important requirements and procedures, you should read all the aforementioned material/documents, which are available online. It is your responsibility to inform yourself of all relevant requirements and procedures. Although the faculty will strive to facilitate your progress through the Program, it is unlikely that we will remind you of every required procedure. If you have questions about any of this material, please consult with one or both Co-Directors of Clinical Training (DCTs), the Director of Graduate Studies (DGS), or your advisor. Currently, the DCTs are Drs. Jessica Burris and Mary Beth Diener McGavran and the DGS is Dr. Mike Bardo.

Rules and requirements are always subject to change. You will be informed of changes through email circulated within the Department or Program. It is important that you read these emails carefully to remain aware of changes in procedures relevant to your graduate training. You should also meet regularly with your advisor to discuss your progress and to clarify any uncertainties that may arise.

Sometimes changes in rules, policies and procedures are suggested by students. If you have an idea about how to improve an aspect of the Program, please discuss it with your advisor, the DCTs, or your student representatives on the Clinical Faculty-Student Liaison Committee, described in the "Student Representation" section of this handbook.

The Program faculty are committed to facilitating the successful completion of the doctoral degree by every admitted student. We will work closely with you to assist you in making steady progress toward your professional goals. If problems arise that impede your progress, it is important that you discuss them with your advisor so that appropriate steps can be taken to resolve them. The information in this handbook will assist you in setting goals and monitoring progress across the course of your training.

A high priority in our Program is that individuals respect each other, and respect differences associated with race, ethnicity, socioeconomic status, gender identity, sexual orientation, religiosity, disability, and other aspects of identity.

**The Clinical Program is fully accredited by the American Psychological Association's Office of Program Consultation and Accreditation** (750 First Street, NE, Washington, DC, 20002-4242; 202-336-5979). If you have questions about accreditation, talk to the DCTs. Alternatively, you may contact APA's Office of Program Consultation and Accreditation by phone (202-336-5500) or email ([apaaccred@apa.org](mailto:apaaccred@apa.org)) for general information about accreditation. **The Clinical Program is also accredited by the Psychological Clinical Science Accreditation System.** More information about PCSAS accreditation can be found on their website at <http://www.pcsas.org> or by contacting their Executive Director, Joseph Steinmetz, by phone (479-301-8008) or email ([steinmetz@pcsas.org](mailto:steinmetz@pcsas.org)).

We wish you the best of luck for success in the Program!

Sincerely,  
Drs. Jessica Burris and Mary Beth Diener McGavran  
Co-Directors of Clinical Training

## TRAINING MODEL

**The Clinical Program is devoted to training clinical scientists and to the promotion of an integration of science and practice.** We understand the scientific method as the appropriate basis for clinical psychology: it provides the strongest basis for developing new knowledge in our field, and clinicians should provide those services that are shown scientifically to be effective. We train our students to be leading researchers, critical consumers of the scientific literature, and clinicians who depend on scientific findings to guide their applied activities. All our students are expected to conduct original research, and most of our graduates make ongoing contributions to the scientific literature over the course of their careers. We are members of the Academy of Psychological Clinical Science, which is a group of leading, university-based training programs that understand the scientific method as the basis for the field of clinical psychology.

Successful applicants to our Program usually have strong research interests they intend to pursue during their training. We anticipate that some students will enter the Program without fully formed professional goals, and so will consider research, teaching, and delivery of clinical services as possible career activities. Our Program offers sufficient breadth and flexibility to train students for careers that involve all three. All students will receive rigorous training in both research and practice and will both conduct scientific research and apply science-based methods in clinical practice. In addition, classroom teaching and supervisory experiences are available to clinical students.

There are many career paths open to clinical psychology scientists. Most of our graduates receive academic medical center or psychology department faculty appointments. Both types of appointments typically involve clinical research, and many academic medical center appointments also involve clinical service delivery. Other common appointments that our graduates obtain include psychology staff positions at Veterans Affairs Medical Centers or in private practice. Ongoing conversations between students and their advisors, other faculty members, other scientists, and other professional psychologists assist students in clarifying their professional goals and tailoring their training to support them. It is our goal to train students to bring an empirical, science-based approach to all their professional activities, regardless of their ultimate career paths.

## REQUIREMENTS FOR GRADUATION

### Coursework

The curriculum provides breadth of coverage in traditional and contemporary science-based aspects of clinical psychology, as well as considerable freedom in choice of electives after the 1st year. The Program emphasizes broad exposure to the major areas of clinical psychology; beyond this, you and your advisor will develop a plan of study most relevant to your interests. Areas you might choose to emphasize include multicultural psychology, health psychology, neuropsychology, psychopathology, substance use, psychotherapy, and research and statistical methodologies.

The Program is committed to coverage of issues around diversity, identity (e.g., race, gender), and inclusion within the curriculum. Program faculty have incorporated relevant material into their courses, and there is a required seminar on multicultural psychology. Additionally, it is possible for clinical students to complete the College of Arts and Sciences' Graduate Certificate in Diversity and Inclusion and more information about that program can be found at <https://online.as.uky.edu/diversity-inclusion>.

## Required Program Courses

- Introduction to Clinical Psychology (PSY 629)
- Psychological Assessment and Practicum (PSY 630, 631, 632, and 633)
- Psychopathology (PSY 603)
- Systems of Psychotherapy (PSY 636)
- Research Design (PSY 616)
- Psychological Statistics (PSY 610 and 611)
- History and Systems (PSY 620)
- Broad Training in Cognitive and Affective Psychology (PSY 780)
- Broad Training in Social Psychology (PSY 780) or Social Proseminar
- Broad Training in Physiological Psychology (PSY 780) or Physiological Proseminar
- Broad Training in Developmental Psychology (PSY 780) or Developmental Proseminar
- Ethics (PSY 710)
- Multicultural Psychology (PSY 710 or, with permission, EDP 616)
- One additional, advanced Topical Seminar in Clinical Psychology (PSY 710) emphasizing clinical science and integrative topical training (e.g., Transdiagnostic Treatment Approaches)
- Professional Issues in Clinical Psychology (PSY 780), which students attend in their 1<sup>st</sup> year, and both attend and register for in their 2<sup>nd</sup> – 4<sup>th</sup> year
- Practicum in Psychological Assessment and Intervention (PSY 637 and PSY 639). **Whenever you provide clinical services as part of the Program, you must be registered for a practicum course.** PSY 637 (1-3 credits) is taken in the Fall and Spring and PSY 639 (0 credit) is taken in the Summer. In your 2<sup>nd</sup> year, you will take a 2-credit supervision course in both Fall and Spring, with a mix of individual and group supervision meetings (both PSY 637). Across your 3<sup>rd</sup> and 4<sup>th</sup> years, you must take at least three Fall/Spring semesters of a 3-credit advanced group supervision course (PSY 637). The group supervision courses you take in the summer (PSY 639) do not count toward to the requirement of advanced group supervision. Additionally, to reiterate, beyond the three required 3-credit advanced group supervision courses, you must register for group supervision (PSY 637 and/or 639, as appropriate) each semester that you engage in clinical training as part of the Program. In other words, if you do clinical work in your 5<sup>th</sup> year, then you must register for PSY 637/639 each semester in which you do this clinical work, with the credit for these courses ranging from 1-3 depending on time commitment.
- Dissertation Residency Credits (PSY 767)
- Internship (PSY 708)

## Academic Milestone-Related Courses

- Master's Thesis Research (PSY 790) can be taken to formalize research in advance of the qualifying exam. It is not a required course but can be used to reach "full-time status".
- Qualifying Exam Defense (PSY 757) is a new course that is designed for the semester where the qualifying exam defense will occur. It can only be taken once. It is not a required course.
- Dissertation Residency Credits (PSY 767) should be taken post-qualifying exam. At least two semesters of this course are required by the Graduate School. More information is below under "Residency Requirements".

## Elective Courses

Many students take electives. Elective courses providing advanced coverage of a variety of topics are available most Fall and Spring semesters. Consult the online Graduate Catalog via myUK to see what

is being offered for a given semester and talk with your advisor about what is best for you.

## Course Waivers

Prior to admission to the Program, course credit is not given for courses taken at other institutions. However, a waiver of required course work for graduate work in psychology completed elsewhere may be arranged with approvals on a course-by-course basis. A student may petition for a course waiver if they can demonstrate that they have obtained the background, knowledge, and skills in the area that the required course in question covers. The required level of knowledge and competency typically occur through satisfactory completion of a prior graduate course that is similar to or more advanced than the required course in question. If you are interested in pursuing a course waiver, then speak with your advisor first and then DCTs about the application process. At the least, it will be necessary to provide your transcript and course syllabi to the DCTs who will coordinate the material review with the relevant instructors of record at the University of Kentucky. The DCTs will make a final decision about course waivers, and if approved, this decision will be documented in your student file.

## Sample Course Schedule

Fall Semester	Spring Semester
<b>1<sup>st</sup> Year</b>	
PSY 610: Psychological Statistics I	PSY 611: Psychological Statistics II
PSY 629: Intro to Clinical Psychology	PSY 616: Research Design
PSY 630: Assessment I	PSY 632: Assessment II
PSY 631: Practicum in Assessment I	PSY 633: Practicum in Assessment II
PSY 603: Psychopathology	1 additional required course
PSY 780: Professional Development *	PSY 780: Professional Development *
<b>2<sup>nd</sup> Year</b>	
PSY 637: Practicum	PSY 637: Practicum
PSY 636: Systems of Psychotherapy	1 additional required course
1 additional required course	1 additional required course
PSY 790: Master's Thesis Research	PSY 790: Master's Thesis Research
PSY 780: Professional Development	PSY 780: Professional Development
<b>Summer Semester:</b> PSY 639, as appropriate	
<b>3<sup>rd</sup> Year</b>	
PSY 637: Practicum	PSY 637: Practicum
1 additional required course	1 additional required course
1 additional required course	1 additional required course
PSY 790: Master's Thesis Research	1 elective course
PSY 780: Professional Development	PSY 780: Professional Development
<b>Summer Semester:</b> PSY 639, as appropriate	
<b>4<sup>th</sup> Year</b>	
PSY 637: Practicum	PSY 637: Practicum
1 elective course	1 elective course
PSY 780: Professional Development	PSY 780: Professional Development
<b>Summer Semester:</b> PSY 639, as appropriate	
<b>5<sup>th</sup> Year</b>	
PSY 637: Practicum	PSY 637: Practicum
PSY 767: Dissertation Residency	PSY 767: Dissertation Residency
<b>Summer Semester:</b> PSY 639, as appropriate	

6 <sup>th</sup> Year	
PSY 708: Internship	PSY 708: Internship

\* 1<sup>st</sup> year students will attend and participate in this course, but not register for it.

**See the Curriculum Maps in the Appendix for course mapping, academic milestones, and competency coverage all shown together.** There is a document that you will be expected to manage and update annually to help ensure you are on track with the Program requirements and in good academic standing with the Graduate School.

To help you plan a course sequence beyond your 1<sup>st</sup> year, we provide some information about when to expect courses. We try to use an every-other-year rotation with the required foundational courses (e.g., Ethics, History and Systems, Broad Training in X Psychology/Proseminar) and at least one PSY 710 (e.g., Multicultural Psychology, Transdiagnostic Treatment Approaches). However, with grant buyouts, sabbaticals, and leaves (plus the fact that the Proseminars are offered by non-Clinical Program faculty), we cannot guarantee our course offerings far in advance. Please routinely speak with your advisor and the DCTs about course offerings and how to plan your schedule year-to-year.

### Residency

**This Program requires in-person training during the academic year (i.e., Fall and Spring semesters) for a minimum of three years.** That said, most students live in the Lexington, Kentucky area for the full duration of their pre-internship Program experience. Importantly, if you are doing any clinical work as part of the Program, then you must do so from within the state of Kentucky (even if you have already completed the minimum 3-year residency).

The Graduate School also has residency requirements which refer, in part, to full-time registration. **The Graduate School requires that after you have satisfactorily completed the qualifying exam you complete at least two semesters of full-time dissertation residency.** To fulfill the Graduate School dissertation residency requirement, you must register for at least two semesters of the 2-credit PSY 767 course (note that this course alone constitutes full-time status), which most students take during the Fall and Spring semester of the 5<sup>th</sup> year. If your dissertation takes more than two semesters to complete, you will be required to register for and pay the in-state tuition for the 2-credit PSY 767 every semester until you successfully defend your dissertation (even if you are on internship). For this reason, you are strongly encouraged to defend your dissertation before leaving for internship. Please see the Graduate Catalog for more details about residency requirements.

### Academic Milestones

The Program has established an ideal timeline for completion of the academic milestones involved in a doctoral degree. In many cases the Program's deadlines precede those set by the Graduate School. This is because 1) our accrediting bodies expect degree completion in a timely manner and 2) we want to be on par with other highly regarded clinical psychology doctoral programs. Importantly, in no case do the Program's deadlines extend what is set by the Graduate School. Thus, if you are on track with our Program, then you should be in good academic standing with the Graduate School. When reviewing the table below, please keep in mind that our Program is designed to be completed in 6-7 years, inclusive of a year-long internship.

Master's Thesis Deadlines	
<b>Proposal</b>	2 <sup>nd</sup> year, last day of the Fall semester
<b>Defense</b>	3 <sup>rd</sup> year, last day of the Fall semester *

<b>Qualifying Exam Deadlines</b>	
<b>Defense</b>	4 <sup>th</sup> year, last day of the Spring semester <i>The above deadlines apply to the written component of the exam. The oral component of the exam must occur no more than six weeks after the written exam with a firm deadline of occurring within five years of enrolling in the Program.</i>
<b>Dissertation Deadlines</b>	
<b>Proposal</b>	5 <sup>th</sup> year, last day of the Fall semester ** <i>If you plan to apply for internship during your 5<sup>th</sup> year, then the deadline is October 15th**</i>
<b>Defense</b>	6 <sup>th</sup> year, last day of the Spring semester *

\* The Graduate School has its own deadlines for degree conferral. For instance, if a student wants their Master's degree conferred in December, the Graduate School might require submission of the final copy of the thesis for approval by November 1<sup>st</sup>, which would be earlier than the last day of the Fall semester. Thus, you should attend to the Graduate School's deadlines as well as the Program's.

\*\* Lots of APPIC internships have November 1<sup>st</sup> as their application due date and the DCTs will not submit their letter of recommendation without a completed proposal; hence, there is an October 15th deadline for 5<sup>th</sup> year students who want to apply for internship that year.

## **Master's Thesis**

The Master's thesis is an opportunity to learn basic research skills under the mentorship of a faculty member. As with the dissertation, the written component of the thesis should be a publication-ready document, both in terms of its length and its quality. As what is probably your first independent research project, the thesis is meant to be a pragmatic study not a definitive one; nonetheless, the thesis should represent a real contribution to the scientific literature.

## **The Committee**

You will be assigned an advisor for your 1<sup>st</sup> year based on the research interests you described when you applied and interviewed for the Program and which faculty member expressed interest in mentoring you when admissions decisions were being made. This advisor typically serves as the chair of your Master's thesis committee and helps you identify a research question, appropriate study or available dataset, analytic plan, etc. This person also oversees the written and oral components of your thesis, though advisors differ in how involved they are and how much direction they give. Notably, in addition to your advisor/thesis chair, the clinical faculty member who teaches Research Design (PSY 616) also helps with the thesis in some ways, as one course assignment is a fully drafted proposal.

A thesis committee consists of three faculty members. Your thesis chair will assist you in choosing two other faculty members to serve on the committee. For the thesis, one committee member must be a Full member of the Graduate Faculty and one other must be at least an Associate member. If your advisor is not a member of the Department, then you are strongly encouraged to have the other two people on the committee be clinical faculty members. If your advisor doesn't know if your committee "fits the bill" and meets the requirements of the Graduate School, the Department Manager who assists with the administrative aspects of Psychology graduate programs (Tamra Nowitzki, Kastle 106B) and/or the DGS can help you.

## **The Proposal**

Your thesis chair will assist you in developing your thesis proposal. The thesis proposal typically



consists of a brief presentation and written document that includes a title page, abstract, introduction, methods, and references. When you and your chair agree that you are ready to propose your thesis, you will schedule a proposal meeting with your thesis committee and give each member a copy of the written document (at least two weeks in advance of the meeting). At the meeting, you will present a summary of your project, and your committee will ask questions and discuss it with you. The purpose of this meeting is to refine the project and determine a timeline for its completion.

## **The Defense**

The Graduate School will not allow you to defend your thesis if there is a missing, “I”, or “S” grade on your transcript. You should check your most recent transcript online at myUK well in advance of the defense to be sure all grades are recorded.

Once you’ve completed the project and finished the written document (which will now include a results and discussion), your chair will instruct you to schedule a defense meeting. At least two weeks prior to the meeting, you will give each member a copy of the written document. At the meeting, you will once again present a summary of your thesis, and your committee will ask questions and discuss it with you. You will be asked to leave the room twice during this meeting so your committee can discuss your readiness for the defense (at the beginning) and outcome of the defense (at the end).

## **Important Paperwork for the Graduate School**

You must submit online for an *Application for Degree* within the first 30 days of the semester in which you intend to defend your thesis. Additional information about this can be obtained online at <https://gradschool.uky.edu/studentforms> as well as from the appropriate Department Manager, or the Graduate School Office in Patterson Office Tower. Additionally, your thesis chair and the DGS must sign a *Thesis Approval Form for Final Copy* and the *Final Examination Recommendation* form. These forms are then submitted to the Graduate School at least two weeks before the scheduled defense. Upon receipt of these forms, the Graduate School will prepare a Final Examination card that all committee members sign at the defense to indicate a pass or fail vote. After all members of the committee have signed the card, the DGS will also sign and return the card to the Graduate School.

If at the end of the defense the committee finds your thesis to be acceptable, you must prepare a final copy and submit it to the Graduate School for approval. See this website for details: [Thesis & Dissertation Preparation](#) on the formatting and see <https://gradschool.uky.edu/key-dates> for the deadline for submission of this final copy. If your committee finds your thesis to be unacceptable, you may be required to rewrite and redefend your thesis. The most typical outcome is that the committee passes you on the thesis defense, with the condition that specified revisions will be made and approved by your thesis chair before the final copy is submitted to the Graduate School. Please note that you will not receive a Master’s degree until the Graduate School approves your final copy of the written document.

## **Graduate Student Advisory Committee**

Students who fail to propose and/or defend the Master’s thesis on time fall under the purview of the Graduate Student Advisory Committee (GSAC) and may be required to meet with this Department-level committee to discuss the delay and plans for addressing it. For more information GSAC and what steps they can take in response to students’ failure to complete the thesis on time can be found in the Appendix.

## **Qualifying Exam**

The purpose of the qualifying exam is to verify that you have the level of knowledge and competence within the field of clinical psychology to become a candidate for the doctoral degree. As such, it is highly unlikely you would be ready to begin the qualifying exam until you have taken most, if not all required courses for the Program. Furthermore, the Graduate School requires the DGS to submit a petition for each student who wishes to take any class “post-quals.” Please note that the DCTs work closely with the DGS to ensure clinical students can enroll in practicum courses (PSY 637 and 639) without interruption post-quals, as these are required from an ethical, legal, and accreditation standpoint. Still, you should discuss the timeline of your qualifying exam (both proposal and defense) with your advisor to make sure you have a plan that works.

## **The Committee**

Your advisor will likely chair your qualifying exam committee and will assist you in choosing three other faculty members to serve on your “Advisory Committee” (which the Graduate School expects you to form at least one year in advance of the qualifying exam defense). If your primary advisor is not a Full member of the Graduate Faculty then you will need a co-chair who is a Full member. In addition, if your primary advisor is not a member of the clinical faculty then you will need a co-chair who is a clinical faculty member. In total, the committee must have a “core” of four members, all of whom are Graduate Faculty members and at least 3 who are Full members. If you want someone on your committee who is not a Graduate Faculty member, that is fine, but that person would be a non-voting member and not part of the “core” (so your committee might have 5 instead of 4 members). Importantly, one member of the committee must serve as the “outside member,” and as such, must be from a UK Department other than Psychology. If there is any doubt, you should check with the Department Manager who assists with the administrative aspects of Psychology graduate programs (Tamra Nowitzki, Kastle 106B) and/or the DGS to make sure the composition of your committee meets all requirements. Once your committee is set, you need to notify the Graduate School via an online form available here: <https://gradschool.uky.edu/studentforms> If there any changes to your committee, then you will also need to notify the Graduate School.

Your primary advisor will help you choose which qualifying exam option is best for you in terms of your training and career goals (see below for the options). This person will also oversee your qualifying exam, though advisors will give much less input on the qualifying exam than the thesis because of the nature of the task at hand. Your qualifying exam is how you will demonstrate near-readiness to be independent, so you should approach completing the written exam and preparing for the oral defense as if you are independent.

## **The Proposal**

Our Program has three options for the qualifying exam:

- Theoretical paper or major literature review (e.g., systematic review, meta-analysis)
- Grant proposal akin to a NIH or NSF fellowship application
- Case study that uses a clinical science approach

The first two options are excellent for students who desire an academic or research career, with the first also being great for students who desire a teaching career. The third option is great for students who are pursuing a clinically focused career path. That said, any student can pursue any option, and they all require a thorough review of the empirical literature, integration across multiple topic areas, consideration of the clinical and/or public health impact of the work, and a rigorous work product.

The qualifying exam proposal meeting typically doesn't involve anything written in advance, but your committee chair might require you to prepare something (e.g., a Specific Aims page for a NIH grant proposal). During the meeting, you will share your plan for the qualifying exam with your committee, they will ask questions, and you will discuss and agree upon a final plan. Like the thesis, the purpose of this meeting is to refine the project and determine a timeline for its completion.

## **The Defense**

The Graduate School will not allow you to defend your qualifying exam if there is a missing or "I" grades on your transcript. You should check your most recent transcript online at myUK well in advance of the defense to be sure all grades are recorded.

The qualifying exam has two official components: written and oral. The written component is the theory/review paper, grant proposal, or case study that you agreed to do. The oral component is a meeting where you will be questioned extensively about the written component.

Once you've completed the written component to your advisor's/committee chair's satisfaction, they will instruct you to send the document to the rest of your committee and schedule a defense meeting to occur no sooner than two weeks after you sent the document and no later than six weeks after you send the document. In advance of this meeting, the entire committee will read your document and judge whether it constitutes a passing performance. This pass or fail decision will be communicated to your committee chair. If you pass the written component of the qualifying exam, then you are ok to proceed with the oral component. If you fail the written component, then your committee may design remedial procedures that it judges to be reasonable. Assuming you submit a passing document post-remediation, you can proceed with the meeting.

As stated earlier, at the defense meeting, your committee will ask you a ton of questions. You will need to be ready to defend the significance of your research question or case scenario, your methodological approach (which still applies to a case study), your judgment and decision-making, your conclusions, etc. You might also be questioned about what you learned in the courses you've taken and how that material is relevant to your written product. As a qualifying exam, your committee will evaluate your performance across the Program competency areas (e.g., ethics, research, assessment, intervention, individual and cultural diversity). Like the thesis, you will be asked to leave the room near the end of this meeting, so your committee can discuss the outcome of the defense.

If your committee finds you passed the defense, then you become a doctoral candidate and the following semester you should begin enrollment in Dissertation Residency (PSY 767). Depending on what you and your advisor planned, you might proceed immediately with a dissertation proposal. If you did not pass the defense, then the committee will determine under which conditions another oral exam may be administered. The minimum time between the oral exams is four months and the maximum is one year. A third exam is not permitted, so students who fail the exam twice will be terminated from the Program.

## **Important Paperwork for the Graduate School**

In addition to notifying the Graduate School about your Advisory Committee (which you must do at least one year before you plan to defend), you must submit an online request to schedule the oral component of *The Qualifying Exam* at least two weeks prior to the date of the defense. You may submit this form to the Graduate School here: <https://gradschool.uky.edu/studentforms> . After a successful qualifying exam defense, there might be a form to submit to Graduate School. Please

consult with the appropriate Department Manager (Tamra Nowitzki, Kastle 106B) about any such paperwork.

The Graduate School requires that students who have not completed the doctoral degree within five years of completing the oral component of the qualifying exam must successfully repeat the oral defense to continue in the Program. Of course, the Program's timeline for completion of the doctoral degree would have students done far in advance of these five years (see table above). Still, if you have questions about this window for completion of the qualifying exam and doctoral degree, please refer to the Graduate Catalog.

## **Dissertation**

### **The Committee**

Your "Advisory Committee" for the qualifying exam will likely serve as your dissertation committee. If you would like or need to make a change to this committee, then you must submit a form to the Graduate School at this website: <https://gradschool.uky.edu/studentforms> . Additionally, when it is time for you to defend your dissertation, the Graduate School will assign an outside examiner to your committee. There is nothing you or your advisor need to do regarding the addition of this individual.

### **The Proposal**

Your dissertation chair will assist you in developing your proposal, although you will likely find that you receive less assistance than you did with your thesis because you are a more advanced clinical scientist. Like the thesis, the dissertation proposal typically consists of both an oral and written component. The oral component involves a meeting with your committee where you discuss your plans for your dissertation. The written component typically includes a title page, abstract, introduction, methods, and references, but if you did a grant proposal for your qualifying exam, then the format may differ (e.g., title page, abstract, specific aims, significance, innovation, approach, and bibliography). Once you have passed the qualifying exam, and once your chair indicates that you are ready to propose your dissertation project, you can proceed with the proposal meeting and provide each member a copy of the written document (at least two weeks in advance of the meeting). At the meeting, you will present a summary of your project, and your committee will ask questions and discuss it with you. The purpose of this meeting is to refine the project and determine a timeline for its completion.

Students are required to propose their dissertation by the last day of the Fall semester of their 5<sup>th</sup> year. If you have not done so, then you are required to hold a meeting with your dissertation chair and at least two other members of your dissertation committee to discuss the reason for the delay and a plan to address it. This meeting must occur by February 1<sup>st</sup> of the spring semester of your 5<sup>th</sup> year. Your dissertation chair will write a summary of this meeting, which will be placed in your file. If you do not hold this meeting, or if a remediation plan is not put in place as part of this meeting, then a Student Advisory Committee or Probationary Committee could be created for you. If you choose to wait until your 6<sup>th</sup> year to apply for internship, then you will be required to have made considerable progress on your data collection before the DCTs will submit a letter of recommendation for you. If you have concerns about your progress on your dissertation as you begin to work on your internship applications, please talk to your advisor and the DCTs.

### **The Defense**

The Graduate School will not allow you to defend your dissertation if there is a missing, "I", or "S"

grade on your transcript. You should check your most recent transcript online at myUK well in advance of the defense to be sure all grades are recorded.

As with the thesis, the dissertation should be a publication-ready document, both in terms of its length and its quality. Additionally, your dissertation should now be in an APA format. Once you've finished the written document (or once you're nearly there), your chair will instruct you to schedule a defense meeting. At least two weeks prior to the meeting, you will give each member a copy of the written document. At the meeting, you will once again present a summary of your dissertation, your committee will ask questions about it and discuss it with you. You will be asked to leave the room twice during this meeting so your committee can discuss your readiness for the defense (at the beginning) and outcome of the defense (at the end).

### **Important Paperwork for the Graduate School**

You must submit online to the Graduate School an *Application for Degree*. To be eligible for degree conferral, you must file this form within the first 30 days of the Fall or Spring semester / the first 15 days of the 8-week Summer semester in which you expect to defend your dissertation. These forms are valid for one semester, so if you do not defend that semester, you must submit a new application. Please keep in mind that completion of internship is a required element of the PhD in clinical psychology, so for example, if you defend your dissertation in December 2024 and your internship goes until July 2025 then you will be conferred the doctoral degree in August 2025 (not December 2024 or May 2025).

Once your dissertation chair (and committee members) approves of you doing so, you must submit online to the Graduate School a *Notice of Intent to Schedule a Final Doctoral Examination* at least 8 weeks before you intend to defend your dissertation. This form is what will trigger the Graduate School to select an appropriate Outside Examiner (e.g., a faculty member in Gender and Women Studies, Family Medicine, or Counseling Psychology) for the defense meeting. This person will be someone who has some understanding of and interest in the topic of the dissertation and someone who is available during the timeframe when you indicate that you plan to defend.

You must also submit online with the Graduate School a *Request for Final Doctoral Examination* at least 2 weeks before the scheduled date of your defense. If you have not already, send a copy of your dissertation to everyone on your committee (including the Outside Examiner) now.

You have 60 days following a successful defense meeting or the end of the semester in which you plan to graduate (whichever is earlier) to submit a *Dissertation Approval Form for Final Copy* and a copy of the dissertation formatted according the Graduate School's specifications (see [Thesis & Dissertation Preparation](#)). The Graduate School may request changes to the formatting of your dissertation, which you are obligated to make by a certain deadline if you want your degree in a given semester (see <https://gradschool.uky.edu/key-dates> ).

There is a lot of paperwork associated with the dissertation and doctoral degree conferral. Please consult with your advisor about this paperwork to make sure it all gets submitted properly and on time. All required forms are available at <https://gradschool.uky.edu/studentforms> . Additional information about all required paperwork can be found online as well as from the appropriate Department Manager (Tamra Nowitzki, Kastle 106B).

## Clinical Work

**While the Program does not specify a minimum number of clinical contact hours, most students need at least 500 direct contact hours in this Program to meet doctoral competency requirements and qualify for internship readiness.** Many students accrue more than 500 hours due to their taking advantage of multiple advanced training experiences. Indeed, most students will complete their work at the Harris Center plus at least two practicum placements.

### **Jesse G. Harris, Jr. Psychological Services Center (The Harris Center)**

The Program operates its own Psychological Services Center, the Harris Center, an outpatient clinic serving individuals from the local community. The Harris Center provides generalist clinical training and serves as foundational clinical training for our Program. The Harris Center primarily provides individual therapy to adults, but children, adolescents, couples and families can also receive therapy services. Additionally, group psychoeducational classes, group therapy, and psychological evaluations are also provided. The clinic is staffed by a full-time Director and Clinical Program faculty member (Dr. Amber Billingsley, licensed psychologist), part-time psychiatric resident, clinical students, and undergraduate clinic assistants. All clinical students begin seeing patients at the Harris Center in their 2<sup>nd</sup> year and most continue to do so through their 4<sup>th</sup> year. All clinic rooms at the Harris Center are equipped with audiovisual recording systems as recording is required for supervision and training purposes. These recordings are strictly confidential, and students and supervisors alike are responsible for maintaining the confidentiality of these recordings. The Harris Center manual describes its policies and procedures in detail and there is also a handbook that addresses diversity and inclusivity at the Harris Center. You will receive access to the latest version of these materials and undergo an in-depth orientation before you begin seeing patients at the Harris Center. Please read the Harris Center materials thoroughly each year to stay abreast of any important changes.

- **Students are required to accrue a total of 200 direct contact hours during their 2<sup>nd</sup> through 4<sup>th</sup> year in the Program.** This clinical activity must reflect these specifications:
  - at least 100 of the 200 total hours must be in-person contact hours,
  - at least 100 of the 200 total hours must be from individual therapy sessions, and
  - the 100 hours of individual therapy must involve at least four different patients (with at least 4 sessions per person).
- **Students must complete at least 4 comprehensive psychological assessments.**
- Students in their 2<sup>nd</sup> year are expected to obtain at least 30 direct contact hours with patients at the Harris Center. During the 2<sup>nd</sup> year, students are provided with a minimum of one hour of weekly individual supervision in the Fall semester and weekly group supervision in the Spring semester.
- Students in their 3<sup>rd</sup> and 4<sup>th</sup> year are expected to obtain at least 85 direct contact hours with patients at the Harris Center. During both years, students are provided with what is typically three hours of weekly group supervision every semester.
- Students in the 2<sup>nd</sup> year are expected to complete at least one assessment. Students in their 3<sup>rd</sup> year are expected to complete at least one assessment. The last two required assessments can both be completed in the 4<sup>th</sup> year, if not sooner. Supervision of assessments is done in an individual format.

If any clinical work is being done as a student, Kentucky requires that you are registered for academic credit corresponding to this work. For our Program, registration for PSY 637 is required in the Fall and Spring and registration for PSY 639 is required in the Summer. Registration and supervision must be in place regardless of your year in the Program (e.g., a 5<sup>th</sup> year student accruing “extra” hours at the Harris Center or working at a practicum must be registered for PSY 637 and/or 639, as appropriate).



The requirement to register for PSY 637/639 will be waived if you become certified by the State Board of Psychology and arrange to be supervised by someone approved by the Board. Becoming certified requires that you pass the state certification exam, which you may take after earning your Master's degree. If you intend to pursue this option, please consult with the DCTs early in the process.

**The expectation of contact hours (and assessments) accrued per year are benchmarks to be used to ensure you complete the required 200 hours (and 4 assessments) by the end of your 4<sup>th</sup> year.** It is possible to be "low" or "behind" on hours/assessments after the 2<sup>nd</sup> year and then "make-up" hours in the 3<sup>rd</sup> year, or for the same to happen across your 3<sup>rd</sup> and 4<sup>th</sup> year in the Program. Attention to one's hours is imperative, and you will receive a summary report of your hours at least twice a year. You should consult with your Harris Center supervisor, the Harris Center Director and/or the DCTs if you have concerns about your Harris Center hours. If Harris Center training requirements are not met by the end of the 4<sup>th</sup> year, students must complete them in their 5<sup>th</sup> year. Application for internship may be delayed if Harris Center requirements are not met in a timely manner as outlined above.

The Program's policies on both telesupervision and practicum training are available in the Appendix.

### **Practicum Training Opportunities**

Most students have their first practicum placement during the 2<sup>nd</sup> or 3<sup>rd</sup> year and are at a different practicum placement each subsequent year. A practicum is an arranged program of supervised clinical training at a facility or institution that provides psychological services. Examples of such facilities include medical centers, inpatient psychiatric hospitals, Veterans Affairs clinics, community mental health clinics, and private practice groups. In these settings, students provide supervised clinical services that might involve psychoeducation, assessment, therapy, and/or consultation. The specific professional activities at the practicum site vary based on site. Typically, practicum involve a 1-year commitment to 10-20 hours per week of supervised clinical experience.

**In our Program, a practicum must: 1) be Program sanctioned, 2) have placements approved by the DCTs and supervised by the Program, and 3) be approved *before* training begins.**

Additional characteristics of a practicum are:

- A practicum must involve clinical contact experience (e.g., assessment, therapy).
- Consultation experience (e.g., consultation and liaison service) that involves direct patient contact, either with a patient or someone involved in their treatment (e.g., parent, teacher) is an acceptable practicum experience.
- Assessments must be reviewed individually, not as a mean of scores.
- Group-based clinical contact experience must involve a discussion of specific group members, in addition to group process.
- A practicum must involve supervision by a licensed psychologist. Tiered supervision models are acceptable if the person ultimately responsible for supervision is a licensed psychologist (e.g., a postdoctoral trainee supervises a practicum student, and the postdoc's provision of supervision is overseen by a licensed psychologist, or an intern supervises).
- Regular, direct clinical supervision from a psychologist licensed in the state in which the services are conducted is required.

Any clinical work outside the Harris Center and not approved by the Program as a practicum training experience is considered work or other non-practicum clinical training experience and any contact hours accrued as part of it will not count toward doctoral training hours as part of this Program and

will not be verified by the DCTs. Professional liability insurance does not cover work that is not an official part of our training program. Additionally, clinical hours accrued in a terminal master's Program do not count toward doctoral training hours as part of this Program and will not be verified by the DCTs.

### *Practicum Placement Positions*

Typically, four students per year are placed at the Harris Center for a 10-20 hours per week practicum. These practicum positions provide supervised training and clinical contact hours that are above and beyond the required Harris Center training. The clinical experience includes intakes, case presentation and triage, and crisis management plus non-clinical supervision of undergraduate students. These practicum positions may provide administrative experience as well. Each student may be selected for a Harris Center practicum placement at one point during their training. This placement may be inappropriate for beginning (2<sup>nd</sup> year) therapists.

External practicum placements positions within the community and on campus are available. Positions may vary slightly year to year depending on supervisor availability. Children and adolescents are seen as outpatients in several private practices and as inpatients through Adolescent Medicine at Good Samaritan Hospital. Additional training opportunities may be available in the summer through special programs and through "pop up" opportunities at private and public schools in the Lexington area. Adults are seen in varying clinical settings and include opportunities to work with: people with severe mental illness at Eastern State Hospital; veterans and their families at the Veterans Affairs clinics; diverse medical populations at Bluegrass Health Psychology, Adolescent Medicine Clinic and Orofacial Pain Center; and undergraduate and graduate students at the University's Counseling Center. Additionally, neuropsychological assessment experience is available at Kentucky Neuroscience Institute, some Veterans Affairs clinics, and Norton Neuroscience Institute.

### *Practicum Placement Assignment*

The goal of practicum placement is to meet each student's training goals while accommodating placement directors' preferences and addressing students' funding needs. The process of practicum placement is complex and involves multiple steps. Details of the Program's practicum placement policy and approach can be found in the Appendix, so only a summary follows.

Early in the Spring semester, you will be asked to submit to the practicum placement coordinator (Dr. Mary Beth Diener McGavran) your curriculum vitae, current training goals and list of which practicum sites could help you meet those goals. The coordinator will then arrange for you to interview at one or more sites. Some placement directors prefer to interview more students than they have slots, and to express preferences for the students to be placed with them. Students interviewing at these sites will have other interviews at alternative sites. After interviews have been completed and both students and placement directors have expressed their preferences, the coordinator will assign students to placements in a manner satisfactory to as many people as possible. In addition to students' and placement directors' preferences, factors to be considered include how much and what kind of clinical experience each student wants or needs, whether a student has a history of obtaining top choice or less preferred placements, and whether the student will have a good chance of obtaining a preferred placement the following year. Funding is also a factor in assignments of placements.

**Students are not allowed to make their own arrangements for practicum placements.** You must go through the aforementioned process. The process ensures that we allow equitable access to training opportunities, keep the Harris Center as a core training site, maintain relationships with sites, and meet funding demands. If you have a particular clinical training interest that is not currently



available, or if you learn of a potential practicum placement that is not yet established, please bring it to the attention of the DCTs. Similarly, if you have questions or concerns about practicum placements, please discuss them with the DCTs.

### *Practicum Placement Policy*

As you know, each student in the Program is required to obtain supervised clinical experience during their doctoral training. Typically, students will have 2–4 year-long practicum training experiences in addition to their Harris Center training experiences. Practicum experiences will depend on each student's training goals, but students are expected to have enough diversity and amount of training to meet the clinical competencies required to qualify for internship and to match at an APA- or CPA-accredited internship site.

To ensure students receive high quality clinical training which meets nationally recognized professional standards and students' training needs, the Program maintains a liaison with all sites. The practicum placement coordinator collaborates with placement directors to develop training opportunities, place students, resolve problems during the training year, and evaluate students' progress at mid- and end-of-year.

### **Internship**

**The Program requires completion of an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited internship.** Before you can apply for internship, you must have met the competency and training requirements of the Program, and the DCTs must sign off on your readiness for internship. If an internship is not completed satisfactorily, then a doctoral degree in clinical psychology cannot be awarded. Before the University will confer your doctoral degree, a letter from your internship director confirming your satisfactory completion of the internship must be received by the Program and saved in your student file.

During the Spring semester before you begin your year-long internship (most start in July, August, or September), you must register for PSY 708 (0 credit hours, no tuition) for the Fall semester of your internship year. Then, in the Fall semester of your internship year, you must register for PSY 708 for the Spring semester of your internship year. You will also need to register for a Summer semester of PSY 708, either at the beginning or end of your internship year. If you have defended your dissertation before you go on internship, then you will only be registered for PSY 708 during your internship year and you will complete three semesters of it (i.e., Fall, Spring, and Summer).

Informational meetings about internship will be held each year, at which time you can learn how to prepare for the application process and what you can expect as an intern. Watch your emails and the Professional Issues in Clinical Psychology course schedule for notification about these meetings. Additionally, the DCTs will meet with students who are applying to internship to discuss their application materials, internship sites, and interview prep. Finally, the internship application process and frequently required relocation/move out-of-state can be expensive, so you are encouraged to plan ahead and budget for this training expense.

### **OPTIONAL SPECIALIZATIONS**

The Program offers optional specializations in Health Psychology and Neuropsychology. These are summarized here, and more information is available online and from the coordinators of the concentration areas (Dr. Kate Leger for Health Psychology and Dr. Justin Karr for Neuropsychology).

## **Health Psychology**

The Health Psychology concentration is achieved via multidisciplinary training that encompasses coursework, research, and clinical work. **This concentration is designed to prepare Clinical Psychology students for doctoral internship and postdoctoral fellowship training in clinical health psychology and behavioral medicine.** Clinical students wishing to be noted as having specialized in Health Psychology must fulfill the following requirements and have the coordinator of this concentration along with the DCTs confirm completion of all requirements. A letter certifying completion of the Health Psychology Concentration may be placed in the student file upon request. All students who are pursuing and eventually complete this specialization are encouraged to report doing so on their CV, as appropriate.

Please see the Health Psychology Concentration website for additional information about this special concentration: <https://psychology.as.uky.edu/health-psychology-concentration> and feel free to contact the coordinator Dr. Kate Leger at [kate.leger@uky.edu](mailto:kate.leger@uky.edu) as well.

### **Coursework**

There are two required psychology courses plus one required allied discipline course. The required graduate courses in the Department of Psychology are Survey of Health Psychology (PSY 626/BSC 626) and Proseminar in Physiological Psychology (PSY/PGY 627). The allied discipline course is the student's choosing, in consultation with their advisor, and can reflect specific areas of interest (e.g., stress, psychosocial oncology, behavioral factors in health and disease, etc.). These courses may be offered in the any number of Departments, including but not limited to Behavioral Science, Gerontology; Kinesiology and Health Promotion; Epidemiology; Health, Behavior, and Society, etc.

### **Research**

At least one research project in the field of Health Psychology must be completed. Thesis and dissertation research are the most obvious means of fulfilling this requirement, although an independent research project would also be sufficient. If the project is a thesis or dissertation, a member of the core faculty should be on the student's committee. Regardless, a proposal for a research project to meet this requirement should be submitted to and approved by one of the Health Psychology Core Faculty before undertaking the project. A final copy of the project should be provided to the Health Psychology Concentration coordinator. Please see the Health Psychology Concentration website for a list of affiliated faculty.

### **Clinical Work**

Clinical Psychology students must complete a minimum of 500 hours of relevant practicum experience (i.e., address health-related issues and/or work as part of an inter-professional care team). This hours-related requirement is equivalent to one year of a 10-hour per week placement, though ideally a student pursuing this specialization would complete two relevant practicum. Such practicum placements should reflect the student's interests and can include training at Bluegrass Health Psychology, Orofacial Pain Center, Veterans Affairs Medical Center, or other relevant placement opportunities (e.g., the Clinic for Emotional Health's sleep practicum rotation). Once the required practicum is complete, the student should notify the DCTs and Health Psychology Concentration coordinator in writing.

## **Neuropsychology**

**The Clinical Neuropsychology Concentration is organized to meet the Houston Conference guidelines for doctoral training in clinical neuropsychology, aligning with a Major Area of Study under the taxonomy for education and training in clinical neuropsychology (per the Clinical Neuropsychology Synarchy).** This means students within this concentration will 1) complete a minimum of three neuropsychology courses, 2) complete two relevant practicums, 3) engage in additional coursework, practicum, or didactics in neuropsychology, and 4) complete a dissertation in neuropsychology. This concentration is designed to prepare Clinical Psychology students for doctoral internship and postdoctoral fellowship training in clinical neuropsychology. Neuropsychology training involves a pathway toward competency to enter the discipline, preparing trainees to pursue Board-Certification in Clinical Neuropsychology under the American Board of Professional Psychology (ABPP-CN).

Students in the Clinical Neuropsychology Concentration may take additional time to complete the Program due to the additional coursework and practicum availability. Some Concentration requirements may be modified or waived on an individual basis at the discretion of the Neuropsychology Concentration coordinator.

Clinical students wishing to be noted as having specialized in Neuropsychology must fulfill the following requirements and have the concentration coordinator along with the DCTs confirm completion of all requirements. A letter certifying completion of the Neuropsychology Concentration may be placed in the student file upon request. All students who are pursuing and eventually complete this specialization are encouraged to report doing so on their CV, as appropriate.

Please see the Clinical Neuropsychology Concentration website for additional information about this special concentration: <https://psychology.as.uky.edu/neuropsychology-concentration> and feel free to contact the coordinator Dr. Justin Karr at [jkarr@uky.edu](mailto:jkarr@uky.edu) as well.

### **Course Work**

There are two required psychology courses: 1) PSY 710: Neuropsychological Assessment, 2) PSY 710: Advanced Clinical Neuropsychology, and 3) ANA 802: Neuroanatomy.

### **Research**

At a minimum, a student's dissertation must be in the field of Neuropsychology. However, students are expected to engage relevant in co-authored or first-authored publications throughout their training in the Program.

### **Clinical Work**

At least two practicum involving neuropsychological assessment or intervention experience must be completed. Recently, this clinical training has occurred at Kentucky Neuroscience Institute, the Veterans Affairs Medical Center, and Norton Neuroscience Institute in Louisville, Kentucky.

### **Other Training Experiences**

The University of Kentucky Department of Neurology grand rounds, Bluegrass Area Neuropsychology Group meetings, [Association of Neuropsychology Students and Trainees](#) programming, and other

seminars (e.g., Dean's lecture series) are available to augment the required course work, research, and clinical work.

## **STUDENT REPRESENTATION, ADVISING, AND EVALUATION**

### **Student Representation**

There are two ways in which student voices are formally represented among the faculty. First, two clinical students serve on the Department's Faculty-Student Liaison Committee and meet with the Associate Chair 2-4 times a year to bring student issues to the attention of Department leadership. As part of this appointment, these students attend all normal faculty meetings, which tend to occur monthly during the academic year. Second, these same students serve as Program-specific Faculty-Student Liaisons, and in doing so meet with the DCTs at least once each semester and attend all regular clinical faculty meetings, which also tend to occur monthly during the academic year. Each year, student liaisons are tasked with creating and administering an anonymous survey among all clinical students to get input about the Program and then summarizing and presenting the findings to the clinical faculty (in a way that protects anonymity). Importantly, student liaisons should bring things to the faculty and report back from the faculty, doing so in a way that represents all students, provides equitable access to information, and strives for continual quality improvement at the Program and Departmental level. The clinical student representatives for this year are Abigayle ("Abbey") Feather (3<sup>rd</sup> year) and Grace Seymour (2<sup>nd</sup> year).

### **Working with Your Advisor**

You will be assigned an advisor for your 1<sup>st</sup> year based on the research interests you described when you applied and interviewed for the Program and which faculty member expressed interest in mentoring you when admissions decisions were being made. This advisor will help guide you through your 1<sup>st</sup> year and is your go-to person for questions and help with accessing institutional resources. Additionally, this advisor typically becomes the chair of your Master's thesis committee, although you can have someone else serve as chair. We recognize that students' interests may change over time and that not all students will remain with the advisor they have in the 1<sup>st</sup> year, but most students do retain the same advisor throughout the Program. Still, changing advisors creates no ill will and if it's in a student's best interests to do so, then that's fine.

Advisors have different mentoring styles. However, it is reasonable to expect that your advisor will teach you research skills (e.g., discuss ideas, direct data analysis), discuss your training and career goals (e.g., various career paths that match your preferences and skills), help with professional development (e.g., advise on conference abstracts or award applications), give general advice (e.g., about courses), and be personable, approachable, and supportive.

Advisors also have different expectations of their students. However, your advisor will probably want you to stay in regular contact (e.g., meet with them at least every two weeks), put in the effort it takes to succeed in the Program (e.g., view graduate school like a fulltime job, come prepared to class and supervision, read empirical articles in your research area even if they aren't assigned reading), collaborate with your peers (e.g., orient more junior students to the lab or train them in a study protocol), take responsibility for your behavior and performance (e.g., look in this handbook or online for the answer to your questions before you ask someone else), and ask for help when you need it.

## **Mentor-Mentee Expectations Form**

To facilitate successful working relationships, and in response to student feedback, a Mentor-Mentee Expectations Form was created (see Appendix). On this form, students and advisors work together to set goals for each semester, taking into consideration students' competing priorities, responsibilities, and commitments and advisors' expectations about students' contributions to the lab. Once completed, this form is signed by both parties and provided to the DCTs as documentation that a successful "working meeting" occurred.

## **Student Records**

Student records are stored electronically and include documentation of progression through the Program. Student records include a collection of:

- Mid-year evaluation letters (1<sup>st</sup> year only),
- Competency evaluation forms (annually),
- End-of-year evaluation letters (annually),
- Practicum placement evaluation forms (if applicable),
- Advisory committee meeting records (if applicable),
- Probationary committee meeting records (if applicable),
- Internship progress reports, competency evaluations, and/or completion letter (provided by internship directors).

Apart from the transcript (which is maintained by the Office of the University Registrar), student records are jointly managed by the DCTs and a Department manager. You may request a copy of your file if you want to review it; most of the contents therein will have been prepared by or shared with you in advance of entry into your file (e.g., the Student Competency Evaluation Form and end-of-year letter). These electronic documents will be stored confidentially on a secure server maintained by the College of Arts and Sciences and are kept indefinitely.

Student records are treated as confidential and are not shared or released unless it is necessary to do so. For example, American Psychological Association Commission on Accreditation site visitors must be able to review student files to ensure they are complete because that is mandated as part of its administrative regulations. FERPA allows this disclosure without a separate permission being required.

## **Mid-Year Evaluation Letter**

Shortly after the end of your first semester in the Program, the clinical faculty will meet to discuss your progress to date. Your performance in the classroom, your lab, and your fellowship/TA/RA position (as applicable) plus your professional behavior will be discussed, with input from all relevant parties. For example, if your advisor isn't a clinical faculty member, then the DCTs will connect with that person to learn about your research activities. After this discussion, a letter summarizing the evaluation of your performance in the first semester will be prepared and a copy will be shared with you by the DCTs.

## **End-of-Year Evaluation Letters**

Each year, shortly after the end of your Spring semester, the clinical faculty will meet to discuss the progress of every student in the Program. Students' performance in the classroom, lab, Harris Center and practicum placement (as applicable), fellowship/TA/RA position plus professional behavior will be

discussed, with input from all relevant parties. Additionally, progress toward academic milestones (e.g., Master's thesis defense) and Program competencies (e.g., research, ethics, assessment, communication and interpersonal skills) are also discussed and evaluated, with data from various sources (e.g., advisors, self-report evaluation form, clinical supervisors' observations). After this discussion, a letter summarizing the evaluation of your performance across the year will be prepared and a copy will be shared with you by the DCTs in May or June. This letter will include narrative comments and numerical ratings (for students who have not yet defended their qualifying exam) for these categories: 1) coursework, 2) research, and 3) clinical work. The letter will also include a statement either confirming that you made good progress during the year, or describing the ways in which your progress was insufficient and could be improved. If your progress is insufficient, the letter will include specific suggestions for change. Regardless, if you have any questions or concerns related to the end-of-year letter, please speak with your advisor or the DCTs.

### **Student Advisory Committees**

A Student Advisory Committee (SAC) is intended to be supportive not punitive. SACs can be assembled for multiple reasons, such as:

- students failing one or more classes;
- students are at risk of not achieving an academic milestone on time (e.g., Master's thesis);
- students are at risk of falling below the Program's high standards (e.g., wavering ethical deportment, clear instance of plagiarism);
- students show difficulty mastering Program competencies (e.g., assessment, intervention, interpersonal skills and communication, etc.); and
- students show difficulty demonstrating critical skills (e.g., strong writing, deeply understanding empirical literature).

SACs should serve as an aid to students to help them address any weaknesses in their training or performance. SACs will be composed of a minimum of two clinical faculty members, with students having some say in who serves on the SAC. Remediation plans will be tailored to each student, with available resources, action items, expected outcomes, and timelines specified. A summary of each SAC meeting will be written by the student, circulated among the SAC for input and confirmation, revised if necessary and then placed in the student's file by one of the DCTs or the student's advisor. If a student's training or performance doesn't improve enough to meet the expectations of their SAC, a student may be placed on probation.

### **Student Impairments and Probationary Committees**

Please note that the probation policy and procedures described here are internal to the Program and independent of the Graduate School's probation procedures, which concern academic deficits alone. See the Office of the Academic Ombud website at <https://ombud.uky.edu/administrative-regulation/ar-5-rules-relating-attending-university/542-academic-probation> .

The Program is designed to train *clinical* psychology scientists. Due to the nature of clinical practice, a variety of situations or conditions (other than academic failure, lack of progress toward academic milestones, and inadequate mastery a Program competency) may impinge on a student's ability to engage in clinical psychology doctoral training. The clinical faculty will use the probation procedures described below to help ensure students with impairments potentially interfering with clinical practice are not awarded degrees necessary for clinical practice. As examples, the situations/conditions listed below may trigger investigation and/or action by the clinical faculty, though they are not the only situations/conditions that could lead to probation:

- commission of felonious or other significant illegal activity;
- major APA ethics violation as determined by the clinical faculty;
- significant psychopathology resulting in impaired performance in clinical training or practice, as judged by the clinical faculty;
- interpersonal dysfunction or clinical skill deficit resulting in impaired performance in clinical training or practice as judged by the clinical faculty; and
- significant substance use resulting in impaired performance in clinical training or practice as judged by the clinical faculty.

Wherever possible, and in collaboration with the student in question, the clinical faculty will attempt to help remediate whatever issue is raising concern. To this end, a probationary committee (composed of a minimum of two clinical faculty members) may be assembled and a chair will be assigned. You will be notified about being put on probation via a letter from the DCTs, a letter which will also inform you who is on the probationary committee and the reason for the probation.

Like a SAC, a probationary committee is meant to help the student on probation address whatever difficulty is interfering with their training or performance. Remediation plans will be tailored to each student, with available resources, action items, expected outcomes, and timelines specified. A summary of each committee meeting will be written by the chair, circulated among the committee for input and confirmation, and placed in the student's file.

Students must arrange a meeting (ideally in person) with their probationary committee within two weeks of being notified about probation. At the first meeting, your committee will determine what will be required for you to return to good standing in the Program, and deadlines by which these requirements must be met. Students' probationary status will be reviewed each semester. If you meet the requirements of your probationary committee within the specified deadlines, you will return to good standing in the Program. If you do not, your termination from the Program will be considered if remediation efforts are not extended. All decisions regarding students' probationary status (and termination) will be made by a majority vote among all clinical faculty, upon recommendation of the probationary committee, and communicated to students by letter from the DCTs.

### **Grievance Procedure**

A clinical student who has a grievance (such as, a concern about unfair treatment or unethical behavior by one or more faculty members) should discuss the matter with one or both DCTs. If both DCTs cannot be impartial, the student may discuss the matter with another clinical faculty member. If after this discussion the student wishes to pursue a formal grievance, the student should submit to the DGS a written document describing the grievance. The DGS will then appoint two impartial members of the clinical faculty and one impartial member of the experimental faculty to review the grievance and make recommendations to the DGS. The DGS will then decide what to do based on all available information and communicate this decision in writing to all concerned parties. If the student's grievance involves the DGS, the student may follow the above steps with the Department Chair. If the Chair is not impartial, the Associate Chair will appoint an impartial member of the faculty to complete these steps. A student who is dissatisfied with the results of these procedures may pursue the grievance procedures of the Office of the Academic Ombud. Information about the Academic Ombud can be found at <https://ombud.uky.edu/students> .

Records of formal grievances will be kept on file, but these files are independent of student files. These electronic documents will be stored confidentially on a secure server maintained by the College of Arts and Sciences and are kept for 10 years.

We also want to make sure you know how to proceed if you have a concern with respect to treatment based on personal status or identity (e.g., race, gender, religious status or affiliation, sexual orientation, etc.). Examples of concerns students may have include: a student feeling disrespected or mistreated due to some personal or social characteristic (e.g., race, sexual orientation); a student could feel that other students disrespected or mistreated a patient or peer for similar reasons; a student could feel that language is being used that is disrespectful or hurtful (e.g., racial slur); a student could feel a non-tolerant or non-inclusive environment exists in their lab or the Program or Department. Of course, there are other possibilities.

We encourage students with any concerns like those outlined above raise them with the DCTs and/or Director of the Harris Center. If none of those three persons are impartial, the student can speak with the DGS, Associate Chair or Chair. If none of those options are possible, the Academic Ombud is always available. Steps to be taken in response to such concerns vary on a case-by-case basis, depending on the nature of the situation. As with other concerns, the intent of the Program is to provide successful remediation, should concerns exist about the behavior of a student or faculty member. With respect to students, possible steps include meeting with the student, formation of a Student Advisory Committee that requires specific remediation-based actions, and formation of a Probation Committee, which also specifies remedial steps to be taken. More extreme steps are possible, including asking students to take a leave of absence from or permanently leave the Program.

## **FINANCIAL SUPPORT**

The Program guarantees financial support for each student in the Fall and Spring semesters of their 1<sup>st</sup> – 4<sup>th</sup> years. Although funding is not guaranteed for students in their 5<sup>th</sup> year, in the past, all students desiring funding have obtained it. The types of funding that may be available to students include fellowships, teaching assistantships, research assistantships, and paid clinical placements.

### **Fellowships**

In addition to grant-funded T32 fellowship training programs, several fellowships are available through the Graduate School. Fellowships do not require a workload; they are meant to protect students' time so they can focus on their studies and research. Most fellowships currently pay roughly \$20,000 for one year and cover tuition. All fellowships are very competitive. Each fellowship has its own eligibility requirements, usually including stringent GRE and/or GPA criteria. Publication records and awards previously won are also often considered in the eligibility for and/or awarding of fellowships. Some of the fellowship applications involve self-nomination, but in most cases the Department nominates students for these fellowships by submitting application packets to a College or University level selection committee, which sometimes includes a Psychology faculty member but often does not. Decisions about whom to nominate for these fellowships, or who to recommend for a self-nomination, are usually made by a few Psychology faculty members (usually the Department's Admissions and Awards Committee) after a review of student's CV or other materials (e.g., unofficial transcript). In general, faculty try to nominate students who seem to have the best chance of being awarded a fellowship. Faculty will also consider whether the student is able to make good use of the opportunities provided by the fellowship. Nominated students become part of a pool of competitors from across the College or University. The clinical faculty make every effort to include strong letters of recommendation in each application packet pertaining to a clinical student but can exert no control over the decision-making process once the packet has been submitted. Fellowships recently given to Clinical Psychology students include the Lyman T. Johnson Fellowship, Dissertation Year Fellowship and Presidential Graduate Fellowship.



More information about University-funded fellowships is available from the DGS, or the Graduate School website available at <https://gradschool.uky.edu/fellowships>

Students may submit their own research grants to extramural funding agencies, the most common one being the National Institutes of Health. These grants are very competitive, and students typically do not apply for them until their 4<sup>th</sup> or 5<sup>th</sup> year. If awarded, a National Research Service Award (NRSA) from the National Institutes of Health functions as a fellowship award that provides a stipend, some tuition support, and money for the proposed research project and training experiences. If you are interested in preparing and submitting an NRSA, please discuss it with your advisor.

### **Teaching Assistantships (TAs)**

According to the University's Administrative Regulations, teaching assistants are graduate students who are employed to teach courses, support primary instructors in a recitation or lab setting, or provide other instructional support (e.g., grading) to a primary instructor. In the Department, and to the extent possible, we seek to match fulltime teaching assistantships (TAs) and research assistantships (RAs) biweekly stipends to promote equity in funding for graduate students. Full-time (maximum of an average of 20 hours per week) TAs currently pay approximately \$21,000 for the academic year (i.e., Fall and Spring semesters) and cover tuition. Half-time (maximum of an average of 10 hours per week) TAs during the academic year are sometimes available, with a reduced stipend amount and only half of the tuition waived. Whenever a TA position is offered, the stipend amount and any applicable tuition coverage is described in detail, so students know what to expect for the semester or year. Neither the Program nor the Department have control over the amount of TA stipends or tuition covered as these are set by the College and University.

Some students will be funded by a TA the entire time they're in the Program while other students may never be funded by a TA. If a student is assigned a TA, then the course(s) they're assigned to will match as closely as possible their unique knowledge, skills, and interests. For the most part, the decision about who gets which course assignment is made at the Department not the Program level. The exception is the TA associated with the 1<sup>st</sup> year Assessment courses. In this case the TA is typically selected by the DCTs (in close partnership with the Instructor of Record) from among those advanced students (typically, 3<sup>rd</sup>–5<sup>th</sup> year) with special interest in and advanced competencies in assessment.

Students who have passed the qualifying exam may be eligible for and may receive a TA to teach an undergraduate course as the Instructor of Record (i.e., someone who teaches independently). Typically, these TA positions are reserved for students who are committed to a teaching career, which is often evidenced by pursuit of the [Graduate Certificate in College Teaching and Learning](#). If you are interested in this sort of TA, please speak with your advisor about if and when they might be available, what you can do to prepare for it and how to pursue it.

When allocating TAs to clinical students, priorities include funding the incoming class, funding students who are post-qualifying exam to teach courses not covered by Department faculty, and funding students who do not have other sources of funding. Of course, any student who would prefer a TA over other forms of funding may request one. Operating within the priorities just described, these TA requests will be considered carefully.

Please read the University's Administrative Regulations on Teaching, Research and Graduate Assistantships at <https://regs.uky.edu/administrative-regulation/ar-52> for more information.

## **Research Assistantships (RAs)**

According to the University's Administrative Regulations, research assistants are graduate students who are employed to assist with faculty research. In our Program, all students contribute to research, with many leading independent projects in addition to assisting with projects led by their advisor and/or another graduate student. The distinction between graduate students simply contributing to a faculty member's research program and having research assistantships (RAs) concerns whether the student is paid for their effort on a particular project as opposed to contributing to a project solely for their training and professional development. As a clinical scientist program, we expect all students to take advantage of opportunities to contribute to research.

Research grants obtained by faculty members often include funded positions for graduate students. Faculty members who obtain these grants have considerable flexibility in offering RAs to the student(s) of their choice. A faculty member with a grant may distribute an announcement about the project and RA position through the Department listserv or other communication channels, or they may invite a small group of students to apply, or they may offer the position to a single student. Alternatively, a faculty member may reach out to the DCTs about a RA position and ask them to nominate 1-3 students with the requisite knowledge and skills to apply. If you are interested in RAs, then you should let your advisor and the DCTs know so they can inform you about any they learn about during your time in the Program.

In the Department, and to the extent possible, we seek to match fulltime TA and RA biweekly stipends to promote equity in funding for graduate students. Full-time (maximum of an average of 20 hours per week) RAs currently pay approximately \$21,000 for the academic year (i.e., Fall and Spring semesters) and cover tuition. Some RAs also provide summer funding because assistance is needed throughout the calendar year. Part-time and hourly (4-10 hours per week) RAs are sometimes available, with both stipend amounts and tuition coverage being variable. Whenever a RA position is offered, the stipend amount and any applicable tuition coverage is described in detail, so students know what to expect for the semester or year. Neither the Program nor the Department have control over the amount of RA stipends or tuition covered as these are set by the University in coordination with the grant sponsor (e.g., National Institutes of Health).

Some students will be funded by a RA the entire time they're in the Program while other students may never be funded by a RA. If a student receives a RA, then the project they're assigned to work on will likely match their unique knowledge, skills, and interests.

The main purpose of a RA is to help the faculty member achieve the *a priori* objectives of their grant-funded project. This might involve any number of tasks, from the sublime (e.g., first authoring a peer-reviewed manuscript from the project's dataset) to the ridiculous (e.g., making photocopies, entering data), depending on the nature of the project and what needs to be done. Reappointment of a RA position depends at least in part on the student's collegiality and productivity.

Please read the University's Administrative Regulations on Teaching, Research and Graduate Assistantships at <https://regs.uky.edu/administrative-regulation/ar-52> for more information.

## **Paid Clinical Placements**

A few practicum placement positions offer a stipend (currently, the Harris Center Assistant Director position and Eastern State Hospital positions), some of which also cover tuition (currently, the Harris Center Assistant Director position). Eligibility for these positions varies. The stipend amount and whether tuition is also covered are determined by the agency/organization offering the placement. As

such, these matters may not be under the purview of the Department or Program. In some cases, an additional source of funding is necessary with these placement positions. As part of the practicum placement assignment process, students will be told key information related to funding so they can make informed decisions about which practicum they'd like to pursue.

### **Summer Funding**

The Program does not guarantee any financial support in the Summer beyond what is outlined in the offer of admission. Some fellowships, research assistantships, and paid clinical placements extend their funding through part or all of the summer, but that is not under the Program's purview. Occasionally, the Department offers TAs in the summer and students may apply for these positions whenever they're available. Similarly, if the Department offers RAs in the summer, then students may apply for these positions. As a unique experience, clinical students interested in working with children/adolescents may wish to consider traveling out of town for the summer to work in summer treatment programs for children. Dr. Michelle Martel is familiar with several such programs and can give you more information. Other opportunities for summer funding occasionally become available and either the Department or DCTs will keep you informed about these opportunities arise via email.

### **Miscellaneous Awards**

There are also several awards for which clinical students may be eligible. Details about these awards are either communicated annually via email from the various awards coordinator, or available online.

1. Predoctoral Research Award: This award is administered by the Program and serves to acknowledge the best empirical article published by a student in advance of beginning work on their dissertation.
2. Visiting Distinguished Faculty Award: This award is administered by the Graduate School and provides funding to bring a nationally recognized academic leader to campus to serve as the Graduate School's Outside Examiner for a student's dissertation. More information is available at <https://gradschool.uky.edu/visiting-distinguished-faculty-program>
3. Jesse G. Harris, Jr. Dissertation Award: This award is administered by the Program. This award was established to support and acknowledge exceptional dissertation studies done by Clinical Psychology students. It is a \$1,000 cash award that clinical students who have completed their dissertation proposal may apply for within a specified award period.
4. The Rachel Steffens Memorial Award: This award is administered by the Program. Rachel was a treasured Program alumna. To honor her memory, there is a \$500 cash award that clinical students who have completed their dissertation may apply for within a specified award period.

### **Policy on Outside Employment**

The Program is designed to be fulltime. Successful completion of the Program in a timely manner requires fulltime effort. Regular employment responsibilities outside the scope of the Program (i.e., activities that are not clinical placements, TAs, or RAs, and have not been arranged or approved by clinical faculty) are problematic in several ways. First, this work may interfere significantly with students' development of the knowledge and competencies required to be in good standing with the Program. In addition, unsanctioned clinical training activities are not counted as hours for internship applications or licensure as a psychologist, so in some ways, they are a "waste of time." Third, students' professional liability insurance does not cover these activities. Finally, work outside of Program-approved activities may violate University and/or state regulations. For these reasons, we have developed the policy below on paid or volunteer activity outside the Program.

## **Clinical Activity**

Clinical students are not permitted to engage in paid or volunteer clinical activities outside of the Harris Center, practicum placements, or other clinical training activities officially sanctioned by the Program (e.g., serving as an interventionist on a study led by a clinical faculty member). Factors to be considered in evaluating such activities include but are not limited to the appropriateness of the activity for the student's professional development, adequacy of the supervision provided, and time required. Students who become aware of a paid or volunteer clinical activity that would contribute to their professional development should talk with the DCTs or placement coordinator about developing this opportunity as an official training opportunity affiliated with the Program. Again, student professional liability insurance only covers clinical work that is an official part of our Program.

## **Paid Nonclinical Activity**

During the academic year (i.e., Fall and Spring semesters), pre-internship clinical students are not permitted to engage in regular paid employment outside the scope of the Program (i.e., activities that are not clinical placements, TAs, or RAs, and have not been arranged or approved by clinical faculty). The University has regulations regarding how much paid work students may do while enrolled as a graduate student. If in doubt, please discuss with the DCTs and the Department's payroll manager.

## **Summer Activity**

Students without Program-approved summer funding may take on outside paid positions during the summer months (approximately, May 15 – August 15). However, the DCTs must approve the position if it involves clinical training to ensure that it meets our standards and involves adequate supervision. Leisure activities, such as hobbies, non-clinical volunteer work, community event planning, etc., are not covered by this policy.

## **RESOURCES FOR PSYCHOLOGY GRADUATE STUDENTS**

The Department is committed to supporting our students. The University has numerous resources available to graduate students and one goal of the Department's Inclusive Excellence Committee is to make the process of accessing these resources as transparent as possible, so everyone has what they need to succeed. Please check this website to see a compilation of some resources: <https://psychology.as.uky.edu/need-support>. Additionally, there is more information about resources on campus related to computing/information technology, finances, wellness, childcare, academic disputes, etc. available at <https://gradschool.uky.edu/student-resources-0>.

## **APPENDIX: OTHER IMPORTANT INFORMATION, FORMS, AND POLICY STATEMENTS**

1. Consumer Disclosure: Educational Requirements for Licensure
2. Curriculum Map and Academic Milestones
3. Annual Program Student Competency Evaluation Form
4. Annual Practicum Student Evaluation Form
5. Goals and Expectations Form
6. Guidelines on Practicum Placements
7. Policy on Telesupervision
8. Graduate Student Advisory Committee Guidelines

## **University of Kentucky Clinical Psychology Consumer Disclosure Information: Educational Requirements for Licensure in Psychology**

The Clinical Psychology Program in the Department of Psychology at University of Kentucky (referred to as “our Program”) makes every effort to provide education that is compliant with national standards and to prepare students to practice clinical psychology. As recognition of our compliance with national standards, our Program is accredited by the American Psychological Association and Psychological Clinical Science Accreditation System (PCSAS). The practice of psychology, however, is regulated at the state level. State licensing authorities, commonly referred to as “State Boards,” determine the specific educational and training requirements for licensure in their State. Of note, some States require post-doctoral training as well as examinations beyond educational and training requirements. As such, a PhD degree from our Program is insufficient, in and of itself, to meet licensure requirements in some states. Also, please note that to obtain licensure as a “Health Services Provider,” you may need an additional 1-2 years of supervised practice following your doctoral degree.

If you are planning to pursue professional licensure or certification, it is strongly recommended that you contact the appropriate licensing entity in the state for which you are seeking licensure or certification to obtain information and guidance regarding licensure or certification requirements before beginning an academic Program. Given that State requirements for licensure or certification vary and may change over time it is also strongly recommended that you review licensing or certification requirements as you get closer to seeking licensure or certification. You are encouraged to review the Association of State and Provincial Psychology Boards’ online tool which is linked below. It summarizes requirements for most states and territories. You are also encouraged to directly confirm state licensing requirements directly with the state you are interested in seeking licensure or certification.

The Clinical Psychology Program, to the best of its ability, determined that the curriculum offered by our Program meets or does **not** meet the educational requirements for licensure or certification to practice psychology in each of the States listed on the table that appears on the next page. For States in which the Program’s educational offerings do not meet a specific State’s requirements for licensure or certification, students may be required to obtain alternate, different, or more courses, or more experiential or clinical hours. These findings are accurate, to the best of our ability, as of January 1, 2024.

ASPPB operates a handbook on licensing and certification requirements for psychologists. You may find their website helpful for reviewing state licensing requirements in specific states. However, please know that each state’s licensing laws are subject to change at any time. For the most current licensing requirements, please contact the licensing board directly. The link for the ASPPB information is here: <http://psybook.asppb.org/>

In the table, an asterisk indicates that earning a doctoral degree from a Program accredited by the American Psychological Association (APA) is deemed to meet the educational requirements for licensure in that State. The Clinical Psychology PhD Program in the Department of Psychology at University of Kentucky is currently accredited by APA and PCSAS. Please note that this table does **not** include an evaluation of state-specific requirements beyond that of educational or curricular requirements.

State or Territory	Program satisfies educational/curriculum requirements?			State Professional Association or License Authority and Notes
	Yes	No	Indeterminate	
Alabama	X*			<a href="http://www.psychology.alabama.gov/default.aspx">http://www.psychology.alabama.gov/default.aspx</a>
Alaska	X*			<a href="https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/BoardofPsychologists.aspx">https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/BoardofPsychologists.aspx</a>
Arizona	X*			<a href="https://psychboard.az.gov/">https://psychboard.az.gov/</a>
Arkansas	X*			<a href="https://psychologyboard.arkansas.gov/">https://psychologyboard.arkansas.gov/</a>
California		X		<a href="https://www.psychology.ca.gov/">https://www.psychology.ca.gov/</a> Although a doctoral degree in Clinical is required, additional coursework may be required in California, including pre-license curriculum or training in human sexuality (10 contact hours); alcoholism/chemical dependency detection and treatment (one semester or quarter); child abuse assessment (7 hours); and spousal/partner abuse, detection and intervention strategies (15 contact hours).
Colorado	X*			<a href="https://dpo.colorado.gov/Psychology">https://dpo.colorado.gov/Psychology</a>
Connecticut	X*			<a href="https://portal.ct.gov/DPH/Public-Health-Hearing-Office/Board-of-Examiners-of-Psychologists/Board-of-Examiners-of-Psychologists">https://portal.ct.gov/DPH/Public-Health-Hearing-Office/Board-of-Examiners-of-Psychologists/Board-of-Examiners-of-Psychologists</a>
Delaware	X*			<a href="https://dpr.delaware.gov/boards/psychology/">https://dpr.delaware.gov/boards/psychology/</a>
District of Columbia	X*			<a href="https://dchealth.dc.gov/service/psychology-licensing">https://dchealth.dc.gov/service/psychology-licensing</a>
Florida	X*			<a href="https://floridaspsychology.gov/">https://floridaspsychology.gov/</a>
Georgia	X			<a href="https://sos.ga.gov/index.php/licensing/plb/44">https://sos.ga.gov/index.php/licensing/plb/44</a>
Hawaii	X*			<a href="http://cca.hawaii.gov/pvl/boards/psychology/">http://cca.hawaii.gov/pvl/boards/psychology/</a>
Idaho	X*			<a href="https://ibol.idaho.gov/IBOL/BoardPage.aspx?Bureau=PSY">https://ibol.idaho.gov/IBOL/BoardPage.aspx?Bureau=PSY</a>
Illinois	X*			<a href="https://www.idfpr.com/profs/psych.asp">https://www.idfpr.com/profs/psych.asp</a>
Indiana	X*			<a href="https://www.in.gov/pla/psych.htm">https://www.in.gov/pla/psych.htm</a>
Iowa	X*			<a href="https://www.idph.iowa.gov/Licensure/Iowa-Board-of-Psychology">https://www.idph.iowa.gov/Licensure/Iowa-Board-of-Psychology</a>
Kansas	X*			<a href="https://ksbsrb.ks.gov/">https://ksbsrb.ks.gov/</a>
Kentucky	X			<a href="http://psy.ky.gov/Pages/default.aspx">http://psy.ky.gov/Pages/default.aspx</a>
Louisiana	X			<a href="http://www.lsbep.org/">http://www.lsbep.org/</a>
Maine	X*			<a href="https://www.maine.gov/pfr/professionallicensing/professions/psychologists/">https://www.maine.gov/pfr/professionallicensing/professions/psychologists/</a>
Maryland	X*			<a href="https://health.maryland.gov/psych/Pages/Home.aspx">https://health.maryland.gov/psych/Pages/Home.aspx</a>
Massachusetts	X*			<a href="https://www.mass.gov/orgs/board-of-registration-of-psychologists">https://www.mass.gov/orgs/board-of-registration-of-psychologists</a>
Michigan	X			<a href="https://www.michigan.gov/lara/0,4601,7-154-89334_72600_72603_27529_27552---,00.html">https://www.michigan.gov/lara/0,4601,7-154-89334_72600_72603_27529_27552---,00.html</a> NOTE: Beginning in March 30, 2022, a one-time training in identifying victims of human trafficking must



				be completed before licensure
Minnesota	X*			<a href="http://www.psychologyboard.state.mn.us/">http://www.psychologyboard.state.mn.us/</a>
Mississippi	X*			<a href="https://www.psychologyboard.ms.gov/Pages/default.aspx">https://www.psychologyboard.ms.gov/Pages/default.aspx</a>
Missouri	X*			<a href="https://pr.mo.gov/psychologists.asp">https://pr.mo.gov/psychologists.asp</a>
Montana	X*			<a href="http://boards.bsd.dli.mt.gov/psy">http://boards.bsd.dli.mt.gov/psy</a>
Nebraska	X*			<a href="http://dhhs.ne.gov/licensure/Pages/Psychology.aspx">http://dhhs.ne.gov/licensure/Pages/Psychology.aspx</a>
Nevada	X*			<a href="http://psyexam.nv.gov/">http://psyexam.nv.gov/</a>
New Hampshire	X*			<a href="https://www.oplc.nh.gov/psychologists/">https://www.oplc.nh.gov/psychologists/</a>
New Jersey		X		<a href="https://www.njconsumeraffairs.gov/psy/">https://www.njconsumeraffairs.gov/psy/</a> In addition to a doctoral degree from an APA accredited Program, New Jersey requires additional semester credits that what we usually offer in: <ul style="list-style-type: none"> <li>• Personality Theory and Human Development Theory;</li> <li>• Learning Theory and/or Physiological Psychology;</li> <li>• Psychopathology;</li> <li>• Psychological therapy/counseling</li> </ul>
New Mexico	X*			<a href="http://www.rld.state.nm.us/boards/Psychologist_Examiners.aspx">http://www.rld.state.nm.us/boards/Psychologist_Examiners.aspx</a>
New York	X*			<a href="http://www.op.nysed.gov/prof/psych/">http://www.op.nysed.gov/prof/psych/</a>
North Carolina	X*			<a href="http://www.ncpsychologyboard.org/">http://www.ncpsychologyboard.org/</a>
North Dakota	X*			<a href="http://ndsbe.org/index.html">http://ndsbe.org/index.html</a>
Ohio	X*			<a href="https://psychology.ohio.gov/">https://psychology.ohio.gov/</a>
Oklahoma	X			<a href="https://www.ok.gov/psychology/">https://www.ok.gov/psychology/</a>
Oregon	X*			<a href="https://www.oregon.gov/psychology/pages/index.aspx">https://www.oregon.gov/psychology/pages/index.aspx</a>
Pennsylvania	X*			<a href="https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Psychology/Pages/default.aspx#.VqG6GN9VhBc">https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Psychology/Pages/default.aspx#.VqG6GN9VhBc</a>
Rhode Island	X*			<a href="https://health.ri.gov/licenses/detail.php?id=241">https://health.ri.gov/licenses/detail.php?id=241</a>
South Carolina	X*			<a href="https://lir.sc.gov/psych/">https://lir.sc.gov/psych/</a>
South Dakota	X*			<a href="https://dss.sd.gov/licensingboards/psych/psych.aspx">https://dss.sd.gov/licensingboards/psych/psych.aspx</a>
Tennessee	X*			<a href="https://www.tn.gov/health/health-Program-areas/health-professional-boards/psychology-board/psych-board/about.html">https://www.tn.gov/health/health-Program-areas/health-professional-boards/psychology-board/psych-board/about.html</a>
Texas	X			<a href="http://www.tsbep.texas.gov/index.php">http://www.tsbep.texas.gov/index.php</a>
Utah	X*			<a href="https://dopl.utah.gov/psych/index.html">https://dopl.utah.gov/psych/index.html</a>
Vermont	X*			<a href="https://sos.vermont.gov/">https://sos.vermont.gov/</a>
Virginia	X*			<a href="http://www.dhp.virginia.gov/psychology/">http://www.dhp.virginia.gov/psychology/</a>
Washington	X*			<a href="https://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/Psychologist.aspx">https://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/Psychologist.aspx</a>
West Virginia	X			<a href="https://psychbd.wv.gov/Pages/default.aspx">https://psychbd.wv.gov/Pages/default.aspx</a>
Wisconsin	X			<a href="https://dsps.wi.gov/pages/Professions/Psychologist/Default.aspx">https://dsps.wi.gov/pages/Professions/Psychologist/Default.aspx</a>
Wyoming	X*			<a href="https://psychology.wyo.gov/">https://psychology.wyo.gov/</a>

## Curriculum Worksheet for Student Use

Name:	Year in Program:		Date:
Knowledge/Competency/Training Area	Course	Year and Semester	Grade <sup>1</sup>
<i>Example: Introduction to Clinical Psychology</i>	<i>PSY 629</i>	<i>2024 Fall</i>	<i>A</i>
Psychopathology	PSY 603		
Psychological Statistics I	PSY 610		
Psychological Statistics II	PSY 611		
Research Design	PSY 616		
Introduction to Clinical Psychology	PSY 629		
Psychological Assessment I	PSY 630 & 631		&
Psychological Assessment II	PSY 632 & 633		&
Systems of Psychotherapy	PSY 636		
History and Systems	PSY 620		
Ethics	PSY 710		
Cognitive and Affective Psychology	PSY 780		
Developmental Psychology			
Multicultural Psychology			
Physiological Psychology			
Social Psychology			
Advanced Seminar in Clinical Psychology	PSY 710		
Advanced Integrative Knowledge Assignment	PSY 710		
Professional Issues in Clinical Psychology <sup>2</sup>	PSY 780		
Professional Issues in Clinical Psychology <sup>2</sup>	PSY 780		
Professional Issues in Clinical Psychology <sup>2</sup>	PSY 780		
Advanced Practicum in Assessment and Intervention	PSY 637		
Advanced Practicum in Assessment and Intervention	PSY 637		
Advanced Practicum in Assessment and Intervention	PSY 637		
Harris Center: 200 hours <sup>3</sup>	N/A		
Harris Center: 4 assessments <sup>3</sup>	N/A		
Dissertation Residency	PSY 767		
Dissertation Residency	PSY 767		
Master's proposal (due by 2 <sup>nd</sup> year, last day of Fall)			
Master's defense (due by 3 <sup>rd</sup> year, last day of Fall)			
Quals defense (due by 4 <sup>th</sup> year, last day of Spring)			
Dissertation proposal (due by 5 <sup>th</sup> year, last day of Fall)			

<sup>1</sup> An A or B is required as a passing grade. <sup>2</sup> Enter fall and spring course info in the same row. <sup>3</sup> Document when requirement is met.



# Curriculum Worksheet with Competency Map

Competency Requirements		Minimum level of competency to meet requirements: Grade of B or higher in listed courses	List Graduate Course and Date (can double-dip courses)	Date Completed
<b>Discipline Specific Knowledge</b>				
Category 1: History and Systems		PSY 620		
Category 2: Discipline Specific Knowledge				
1a.	Affective Aspects of Behavior	780 Directed Readings from all 780 courses or any equivalent class		
1b.	Biological Aspects of Behavior	780 Broad training in Physiological Psychology or any Bio class		
1c.	Cognitive Aspects of Behavior	780 Broad training in Cognitive Psychology or any Cog class		
1d.	Developmental Aspects of Behavior	780 Broad training in Developmental Psychology or any Dev class		
1e.	Social Aspects of Behavior	780 Broad training in Social Psychology or any Soc class		
Category 3. Advanced Integrative Knowledge		PSY 710 DBT or Child Psychopathology or other 710 (PTSD,		
Category 4. Methods of Inquiry/Research				
4a.	Research Methods	PSY 616 Methods		
4b.	Statistical Analysis	PSY 610 & 611 Statistics		
4c.	Psychometrics	PSY 630/1 Assessment		
<b>Profession-Wide Competencies<sup>1</sup></b>				
(Not listed by APA) Psychopathology		PSY 603		
1. Research		Cat. 4 above & research requirements below		
2. Ethical and Legal Standards		PSY 710 Ethics; PSY 780; PSY 637; research mentorship		
3. Individual and Cultural Diversity		PSY 710 Multicultural and infused in all courses; PSY 637		
4. Professional values/attitudes/behavior		PSY 780; PSY 637; lab meetings		
5. Communication/Interpersonal Skills		PSY 780; PSY 637		
6. Assessment		PSY 630/1 & PSY 632/3; PSY 637		
7. Intervention		PSY 629; PSY 637; PSY 710		
8. Supervision		Material within PSY 637; 2 <sup>nd</sup> year and PSY 780		
9. Consultation and Intp/Interdisciplinary skills		PSY 637 and PSY 780 and practicum		
Research Requirements	Requirements/Deadlines	Anticipated Completion	Date Completed	
Masters Proposal	End of Fall semester of 2 <sup>nd</sup> year			
Masters Defense	DUE no later than last day of Fall semester of 3 <sup>rd</sup> Year			
Research Presentation	Thesis proposal end of 1 <sup>st</sup> year; Full thesis presentation end of 3 <sup>rd</sup> year			
Qualifying Exams	Must pass before proceeding with dissertation proposal			
Dissertation Proposal	<b>DUE no later than</b> Nov 1 of Internship Application Year			
Dissertation Defense	Try to Defend Before You Leave for Intemship!			

# University of Kentucky Clinical Psychology Student Competency Evaluation Form

Name:

Profession-wide competencies, followed by Program goals and accompanying additional competencies, are listed below. The competencies that students are expected to attain to meet the following goals are rated as follows:

- 1: cannot yet perform the skill; needs more work
- 2: can perform the skill under supervision
- 3: can perform the skill independently

For each skill, the required level of mastery at the end of training at UK is given in bold type. Students are expected to assess their level of competency each year, and then their mentor will review and add input. The evaluation of competencies will be finalized during discussion with all clinical faculty at the end of each year based on evaluations, course assignments and grades, training accomplishments, etc. This evaluation will be one tool used to help direct future training needs.

## Profession-Wide Competencies

### I. Research

- *Student demonstrates the largely independent ability to formulate research or theory questions that are of sufficient quality and rigor to have the potential to contribute to the scientific, psychological, or professional knowledge base* 1 2 **3**
- *Student is able to conduct empirical research from data collection to report preparation for publication.* 1 2 **3**
- *Student is able to prepare presentations of their research ideas and findings in consultation with a faculty member, and they will conduct such presentations independently.* 1 2 **3**
- *Student prepares research presentations* 1 2 **3**
- *Student delivers research presentations* 1 2 **3**
- *Student evaluates the underlying scholarship of research articles* 1 2 **3**
- *Student evaluates the quality of research hypotheses* 1 2 **3**
- *Student evaluates the nature of the sample* 1 2 **3**
- *Student evaluates the validity of the data analyses* 1 2 **3**
- *Student evaluates the resulting conclusions* 1 2 **3**

### II. Ethics

- Student is able to provide organized responses to complex questions about ethical dilemmas and ethical issues. 1 2 **3**
- Student is able to describe the implications of the current APA ethical principles for both science and practice. 1 2 **3**
- Student demonstrates that they have considered the ethical implications of their decisions in psychotherapy. 1 2 **3**
- Student is able to describe the implications of the current APA Code of Conduct for both science and practice. 1 2 **3**
- Student is able to describe the implications of relevant laws, regulations, rules, and policies governing health service psychology at the local level. 1 2 **3**

- Student is able to describe the implications of relevant laws, regulations, rules, and policies governing health service psychology at the state level. 1 2 3
- Student is able to describe the implications of relevant laws, regulations, rules, and policies governing health service psychology at the regional level. 1 2 3
- Student is able to describe the implications of relevant laws, regulations, rules, and policies governing health service psychology at the federal level. 1 2 3
- Student is able to describe the implications of relevant professional standards and guidelines. 1 2 3
- Student is able to recognize ethical dilemmas as they arise. 1 2 3
- Student is able to apply ethical decision-making processes in order to resolve the dilemmas. 1 2 3
- Student conducts self in an ethical manner in all professional activities. 1 2 3

### III. Individual and Cultural Diversity

Students in the Program will acquire and demonstrate knowledge, awareness, sensitivity, and skills for working with diverse individuals and communities who embody a variety of cultural and personal backgrounds and characteristics. Cultural and individual differences and diversity include, but are not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status.

- *Student demonstrates and understanding of how their personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves.* 1 2 3
- *Student demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in research* 1 2 3
- *Student demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in training* 1 2 3
- *Student demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in supervision* 1 2 3
- *Student demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in consultation* 1 2 3
- *Student demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles.* 1 2 3
- *Student demonstrates the ability to apply a framework for effective work with areas of diversity not previously encountered.* 1 2 3
- *Student demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with her/his own* 1 2 3
- *Student demonstrates the requisite knowledge base and ability to articulate an approach to working effectively with diverse individuals and groups.* 1 2 3
- *Student is able to apply this approach effectively in professional work.* 1 2 3

### IV. Professional Values and Attitudes

- *Student behaves with integrity* 1 2 3
- *Student demonstrates professional deportment* 1 2 3
- *Student develops a sense of professional identity* 1 2 3
- *Student understands her/his accountability to others* 1 2 3
- *Student demonstrates concern for the welfare of others* 1 2 3
- *Student engages in self-reflection regarding professional functioning* 1 2 3

- *Student engages in activities to maintain and improve effectiveness* 1 2 3
- *Student demonstrates interest in and openness/responsiveness to feedback and supervision* 1 2 3
- *Student responds to increasingly complex situations with a greater degree of independence as they progress across levels of training* 1 2 3

## V. Communication and Interpersonal Skills

- *Student develops and maintains effective relationships with colleagues* 1 2 3
- *Student develops and maintains effective relationships with organizations.* 1 2 3
- *Student develops and maintains effective relationships with supervisors.* 1 2 3
- *Student develops and maintains effective relationships with supervisees.* 1 2 3
- *Student develops and maintains effective relationships with those receiving professional services.* 1 2 3
- *Student produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated.* 1 2 3
- *Student demonstrates a thorough grasp of professional language and concepts.* 1 2 3
- *Student demonstrates effective interpersonal skills and the ability to manage difficult communication well.* 1 2 3

## VI. Assessment

- *Student will understand the basic theory behind psychological assessment, including means for evaluating the validity of an assessment tool:* 1 2 3
- *Student is able to select and apply assessment methods drawing from the best available empirical literature that reflects the science of measurement* 1 2 3
- *Student is able to collect relevant data using multiple sources and methods as appropriate to the identified goals of the assessment* 1 2 3
- *Student is able to collect data with respect to relevant diversity characteristics of the service recipient* 1 2 3
- *Student is able to interpret assessment results, following current research and professional standards, to inform case conceptualization, classification, and recommendations* 1 2 3
- *Student demonstrates ability to guard against decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective* 1 2 3
- *Student communicates orally the findings and implications of assessments in an accurate, effective, and sensitive manner to a range of audiences* 1 2 3
- *Student communicates in writing the findings and implications of assessments in an accurate, effective, and sensitive manner to a range of audiences* 1 2 3

## VII. Intervention

- *Student establishes and maintain effective relationships with the recipients of psychological services* 1 2 3
- *Student develops intervention plans based on the empirical literature that are specific to the service delivery goals* 1 2 3
- *Student implements interventions based on the current scientific literature, assessment findings, diversity characteristics, and contextual variables* 1 2 3

- *Student demonstrates the ability to apply the relevant research literature to clinical decision making* 1 2 3
- *Student modifies intervention approaches when appropriate, based on the empirical literature and other data* 1 2 3

**VIII. Supervision**

- *Student demonstrates knowledge of supervision models* 1 2 3
- *Student demonstrates knowledge of supervision practices* 1 2 3

**IX. Consultation and interprofessional/interdisciplinary skills**

- *Student demonstrates knowledge of and respect for the roles and perspectives of other professions* 1 2 3
- *Student demonstrates knowledge of consultation models* 1 2 3
- *Student demonstrates knowledge of consultation practices* 1 2 3

Comments:

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Advisor's signature                      Date                                      Student's signature                      Date

# University of Kentucky Clinical Psychology Student Practicum Evaluation Form

Practicum Student:

Date:

Clinical Supervisor:

Site:

Dates of Training:

Practicum evaluations must be based, at least in part, on live or electronic direct observation of work. Each competency does not need to be observed, but the scope of the observation should be broad enough to contribute meaningfully to this evaluation. These ratings are based on the following: (Check all that apply)

## LIVE OBSERVATION OPTIONS:

- Co-Therapy
- Live observation
- Review of Video

## ADDITIONAL OPTIONS:

- Review of work samples
- Feedback from staff
- Feedback from patients
- Outcome measures

### Clinical Supervisor:

Please rate the practicum student's performance in each area of competence covered by this training experience. **Note: Rating of Level 4 not expected for many items until trainee is ready to advance to internship.** Expectations of trainees vary depending on training level. Ratings for a practicum student early in their training will likely be 1s and 2s. Advanced trainees who are ready to proceed to internship will often be at a higher level. Lower ratings for advanced students indicate a newer developing competency or a competency that needs additional attention and work.

Please also include narrative comments and summaries, as well as any recommendations you may have for additional experience needed in future practicum experiences.

Please review your assessment of the student's accomplishments in each of these areas of competency, as well as any other feedback or recommendations, with the practicum student.

## Competency Level Rating Guide

**Competency Level 1** = Novice level. Close supervision needed as trainee is beginning to develop this skill. Modeling required.

**Competency Level 2** = Intermediate level. Trainee needs less intensive supervision; Modeling and direct observation are sometimes required. Knowledge and skill are developing but performance is inconsistent.

**Competency Level 3** = Intermediate level. Knowledge and application of skill are developing, and performance is becoming more consistent and adept.

**Competency Level 4** = Advanced level. Little modeling needed. Trainee at a level appropriate to advance to internship.

**NA** = not assessed or not able to rate based on experiences at this practicum

## Communication and Interpersonal Skills

### Competency Level:

1) Maintains effective interpersonal relationships with colleagues and supervisors	1	2	3	4	NA
2) Communicates clearly with patients, treatment team, and referral sources	1	2	3	4	NA
3) Manages difficult communications effectively	1	2	3	4	NA
4) Communication (verbal, written, and nonverbal) is professionally appropriate	1	2	3	4	NA
5) Clinical documentation is accurate, clear, and concise	1	2	3	4	NA

Comments:

## Assessment

### Competency Level:

1) Applies knowledge of DSM and functional and dysfunctional behavior to make diagnoses	1	2	3	4	NA
2) Provides differential diagnoses	1	2	3	4	NA
3) Selects assessment measures with attention to issues of reliability and validity	1	2	3	4	NA
4) Selects appropriate measures to address clinical questions	1	2	3	4	NA
5) Interprets assessment results of the client	1	2	3	4	NA
6) Uses assessment results to inform decision making	1	2	3	4	NA
7) Communicates assessment results accurately and effectively orally and in writing	1	2	3	4	NA

Comments:

## Intervention Skills

Please comment on the type of interventions the trainee has conducted (e.g., individual therapy, group interventions, brief, etc.):

### Competency Level:

1) Develops responsive and effective relationships with clients					
2) Develops evidence-based intervention plans	1	2	3	4	NA
3) Able to integrate science, assessment findings, individual characteristics and contextual variables in treatment planning	1	2	3	4	NA
4) Ability to focus on key issues, quickly and thoroughly	1	2	3	4	NA
5) Applies the relevant literature to clinical decision making	1	2	3	4	NA
6) Evaluates intervention effectiveness and modifies intervention as indicated, using outcome data or other appropriate information	1	2	3	4	NA
7) Adapts intervention goals based on ongoing evaluation of effectiveness	1	2	3	4	NA
8) Effectively documents clinical interventions	1	2	3	4	NA

Comments:

## Research Competencies Related to Clinical Practice

### Competency Level:

1) Applies research literature to practice					
2) Can identify and discuss relevant research associated with evidence-based treatment and practice	1	2	3	4	NA
3) Demonstrates strong knowledge of scientific method (e.g., hypothesis testing with clients; use of data in decision-making)	1	2	3	4	NA

Comments:



## Ethical & Professional Issues

### Competency Level:

1) Knowledge of APA Ethical Principles and Code of Conduct	1	2	3	4	NA
2) Able to apply relevant laws and regulations to clinical work	1	2	3	4	NA
3) Applies APA Ethics code to clinical work	1	2	3	4	NA
4) Seeks supervision appropriately	1	2	3	4	NA
5) Utilizes supervision appropriately	1	2	3	4	NA
6) Forthcoming with difficulties/problems	1	2	3	4	NA
7) Recognizes ethical dilemmas and applies ethical decision-making processes in order to resolve dilemmas	1	2	3	4	NA

Comments:

## Individual and Cultural Diversity

### Competency Level:

1) Recognizes own cultural history, attitudes, and biases	1	2	3	4	NA
2) Monitors how own cultural identity may impact interactions with others	1	2	3	4	NA
3) Develops rapport with clients from diverse backgrounds	1	2	3	4	NA
4) Applies a framework to work effectively with clients from diverse backgrounds	1	2	3	4	NA
5) Works effectively with individuals whose worldviews or demographics create conflict with their own	1	2	3	4	NA

Comments:

## **Professional Values, Attitudes, & Behaviors**

### Competency Level:

1) Reliable and dependable	1	2	3	4	NA
2) Open about mistakes and areas of weakness	1	2	3	4	NA
3) Maintains professional interactions with staff and clients	1	2	3	4	NA
4) Demonstrates compassion and concern for clients	1	2	3	4	NA
5) Manages time effectively	1	2	3	4	NA
6) Engages in self-reflection regarding personal and professional functioning	1	2	3	4	NA
7) Non-defensive and responsive to feedback	1	2	3	4	NA

Comments:

## **Consultation and Interprofessional /Interdisciplinary Skills**

### Competency Level:

1) Recognizes situations in which consultation is appropriate	1	2	3	4	NA
2) Consults with psychologists and professionals from other disciplines as necessary for the care of clients	1	2	3	4	NA
3) Effectively coordinates care with other providers	1	2	3	4	NA
4) Demonstrates knowledge of and respect for the unique role of other professionals in a collaborative treatment approach	1	2	3	4	NA
5) Effectively interacts with other disciplines on interdisciplinary teams	1	2	3	4	NA

Comments:

Trainee comments:

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Supervisor Signature

Trainee Signature

## Clinical Psychology Doctoral Program Mentor-Mentee Expectations

<b>Mentor name</b>	
<b>Mentee name</b>	
<b>Semester, year</b>	

*This document serves to clarify and document expectations and goals at the outset of the fall and spring semesters, though it can also be used for the summer months. This document is meant to provide transparency about the priorities and workload of graduate student mentees as well as the resources and support available from faculty mentors. This document can be revisited throughout the semester/summer, and it can be revised during the semester/summer should mentors and mentees deem it appropriate. Please appreciate that this document is not intended to be used in an evaluative way.*

**Mentee's academic, clinical, and professional commitments:** In whatever way you choose, depict the mentee's basic workload and commitments including coursework, teaching or research assistantship, fellowship seminars or other requirements, clinical work at the Harris Center, clinical work at a practicum site, service obligations (e.g., APA committee member, Graduate Student Congress representative), and recurring professional development activities (e.g., grant writing bootcamp, CELT workshop series). It may be helpful to provide an estimate of associated hours per week for each line item and/or a calendar that shows a typical weekly schedule.

**Mentee's lab responsibilities:** Describe the mentee's responsibilities within the mentor's lab (e.g., coordinate lab or project meetings; supervise undergraduate students; regulatory activities; participant recruitment, intervention delivery, and/or data collection efforts; community outreach or engagement; project management; assistance with another student's study).

**Mentee's goals:** Describe the mentee's goals in each area, as applicable.

<b>Academic</b>	
<b>Research</b>	
<b>Clinical</b>	
<b>Professional</b>	

**Mentor's support:** Describe what the mentor can and will do to support the mentee in achieving their goals. You might consider the frequency and nature of meetings, provision of scholarly products that can be used as examples or templates, extent and frequency of feedback on projects or products, use of a shared "to do list" or project tracking system, connecting mentee's with on- and off-campus resources, allocation of funds to support research or professional development, etc.

**Mentor signature:** \_\_\_\_\_

**Mentee signature:** \_\_\_\_\_

Please submit this completed and signed form online [here](#).

# University of Kentucky Clinical Psychology Practicum Guidelines

**Students are not allowed to make their own arrangements** for practicum placements; students must go through the formal placement process. The process ensures that we allow equitable access to training opportunities, meet funding demands, keep the Harris Center as a training opportunity, and maintain ongoing relationships with supervisors and practicum sites. If you have a particular interest for clinical training, feel free to discuss it with the faculty liaison and/or the DCT.

If you have questions about how placements are assigned, please discuss them with the DCT or the placement coordinator.

## **Student requirements/expectations:**

### 1. Registration for PSY 637 (and PSY 639 during the summer)

Students who are doing any type of supervised clinical training **MUST** register for PSY 637 in each semester in which the work takes place, including each summer session (PSY 639). It is the student's responsibility to ensure that they are registered correctly.

### 2. Professional Liability Insurance

The University carries insurance to cover students who are participating in university training and scholarly activities. In addition, it is your responsibility to buy professional liability insurance for students-in-training each year. You must send a copy of your policy to the practicum coordinator no later than August 15<sup>th</sup> of each training year. You cannot participate in practicum/clinical training activities without current liability insurance on file with the practicum coordinator. Insurance for students currently costs \$35-\$40 per year and is your responsibility.

### 3. Professional conduct

Students are required to adhere to the ethical principles and standards guiding the practice of clinical psychology while in their practicum placement. They are also required to conduct themselves professionally, use good judgment, and successfully establish and maintain relationships with site personnel. Students at training placement sites should be aware of their professional role and conduct themselves in a manner reflective of this role (e.g., appropriate dress, promptness, respectfulness, and maturity).

**Dress:** As professionals, all student trainees are expected to dress in an appropriate manner while at their placement site. Placement sites may vary in the expected level of professional dress, but students should err on the side of more professional dress rather than less professional dress. Clothing should be clean and in good repair with commensurate personal hygiene. Dress as you would expect to see a professional in a medical office. If you are unsure about your clothing, err on the conservative side.

**Promptness:** It is therapeutically and professionally important to be on time for all appointments and practicum placement meetings.

### 4. Taking Time Off:

Students may wonder if it is acceptable to go out of town between semesters or at other times when classes are not in session. Please verify the vacation and leave policy with your practicum site. You may take time off, but there are several

considerations. *First*, discuss your plans with your supervisor and get time off cleared in advance. *Second*, you may need to make contingency plans for your clients. Discuss this need with your supervisor; the specific needs and plans will vary by site. Related to this issue, when appropriate, be sure your clients know you will be gone and when the next appointment will be. In general, it is not considered appropriate to miss more than two weeks at any one time unless that has been discussed and cleared well in advance.

If an extended absence becomes necessary, please contact the practicum liaison.

## 5. Expected training hours

Student hours may vary at each site, but it is expected that students will be on site at their practicum sites for 8 – 14 hours per week. Students usually attend practicum no more than two days a week, with the exception of the 20-hour-a-week clinical placements (these are identified and arranged in advance). Please arrange approval with mentor and practicum liaison in advance of committing to a placement if you will need to be there more than two days a week to avoid interfering with your other commitments. Training will be a mix of direct service and support/educational hours.

Practicum placements usually start in August and end in May or June. Be sure to clarify start and end dates with supervisors on site.

## Training requirements/expectations for practicum site

1. Supervision: Primary responsibility for supervision of practicum students is assumed by a member of the agency staff. Specific modalities and meeting arrangements may vary by site, but all activities must be supervised by a licensed psychologist. An intern or professional from another area (e.g. Social Work) is acceptable as part of the training team if the trainee also has access to a licensed psychologist to discuss their work (for example, a seminar lead by a licensed psychologist or as part of a hierarchical supervision team).

The on-site supervisor is expected to orient practicum student to the agency, provide weekly, ongoing supervision (e.g., usually one hour per week of individual contact) and be available for consultation and guidance as needed, and, in general, assume responsibility for providing student with an appropriate training experience. The supervisor maintains legal and ethical responsibility for clients.

- Regular supervision (usually defined as weekly supervision) by a licensed health services provider psychologist is required. Specific modalities and meeting arrangements may vary by site, but all activities must be supervised by a licensed psychologist. An intern or professional from another area (e.g. Social Work) is acceptable as part of the training team if the trainee also has access to a licensed psychologist to discuss their work (for example, a seminar lead by a licensed psychologist or as part of a hierarchical supervision team).
- Use of direct observation or video observation by supervisor is required. Training and evaluation cannot be conducted on self-report by practicum student alone; some direct observation or review of video recorded sessions must occur. This requirement is best practice and required by APA. Audio recordings alone are not acceptable.

2. Telesupervision: Program policy allows no more than 50% of supervision occur via telesupervision. A minimum of half of supervision must occur in person for advanced students only. Beginning students must have in-person supervision. It is also a requirement that supervisors observe some work directly or via video recordings; discussion of work without observation is not enough.

3. PSYPACT is not relevant to student trainees. Students must be in the state of KY to conduct any and all clinical training. Supervisors may be post-docs or interns who are supervised themselves. However, the supervisor with final responsibility must be licensed as a psychologist with a health service provider designation in the state of KY.

4. Evaluations: The on-site supervisor will be asked to evaluate student performance at the end of the training period. For longer training opportunities, we will use a mid-training evaluation and final evaluation. Informal feedback can be expected on an ongoing basis. The supervisor should review the evaluation of student work with the student and offer the opportunity to address questions and concerns. Some supervision must be live or based on video-recorded observation.

- Clinical practicum sites will be routinely evaluated to ensure that students are receiving appropriate clinical training and supervision. If there is inadequate supervision, ethical violations on the part of the setting and/or clinical supervisors, including any pending investigations by licensing boards, or lack of direct clinical contact or training, then the practicum arrangement between the program and the practicum setting can be discontinued.
- Practicum site supervisors will submit clinical competency evaluations at the mid-year point and again at the end of the year. These competency evaluations will be used to judge appropriate progress through the program and will be included in the annual student evaluations/progress reports.



**To be completed by site supervisor and practicum student:**

In addition to the above guidelines, the parameters or expectations that are important at this site are

1. Name of supervisor:
2. Days of the week/times student expected to be present:
3. Use of telehealth and/or telesupervision (describe):
4. Process for arranging time off:
5. Other important parameters at this site:

**Approved and accepted by:**

\_\_\_\_\_

Student

\_\_\_\_\_

Date

\_\_\_\_\_

Site Supervisor

\_\_\_\_\_

Date

Please return signed copy to the faculty liaison, currently Mary Beth McGavran at [mary.beth.mcgavran@uky.edu](mailto:mary.beth.mcgavran@uky.edu). Thank you for providing training to our student. We really appreciate the opportunities and training provided.

# University of Kentucky Clinical Psychology Telesupervision Policy

Use of telesupervision was necessitated and first initiated in 2020 in response to the COVID-19 pandemic as a means of allowing training and supervision to continue without interruption, while at the same time maximizing the health and safety of student trainees and supervisors. As per the current regulations put forth by APA Commission on Accreditation (last updated in 2024), “there must be guidelines and limits on the use of telesupervision in accredited programs.” The following policies and procedures regarding the use of telesupervision represent the guidelines and limits for our Program.

## *Rationale:*

Telesupervision is utilized as an alternative form of supervision when in-person supervision is not practical or safe. Our rationale is that the use of telesupervision allows for continuation of high-quality training in extenuating circumstances that might preclude in-person supervision.

## *Consistency with Training Aims and Outcomes:*

Telesupervision allows supervisors to be engaged and available to student trainees, to oversee patient care, and to foster student trainee development, even in circumstances that preclude in-person interactions. In these ways, it is fully consistent with and can facilitate, our training aims. Supervisors work to ameliorate the drawbacks of telesupervision by discussing inherent challenges of the format with students and collaboratively working to identify strategies for maximizing the effectiveness of training in this format. This can include discussion of potential for: miscommunication, environmental distractions, temptation to multitask, technology failures, lack of dedicated workspace, etc. Supervisors set clear expectations and learning objectives at supervision outset and regularly check in on these throughout the supervisory relationship.

## *How and When Telesupervision is Used:*

Telesupervision is used in place of in-person supervision when meeting physically is not possible or is not safe (such as extenuating schedule, travel, life event, or public health emergency situations). Because our Program recognizes that there are unique benefits to in-person supervision such as professional socialization, recognition of subtle, nonverbal, and affective cues, and a more nuanced assessment of interactions and competencies, telesupervision is not used for the sole purpose of convenience more than 50% of required supervision times. Telesupervision is implemented via a HIPAA-compliant videoconferencing platform. Supervisors and supervisees may access telesupervision either from their individual offices and in some cases from a secure and confidential space within a home.

## *Trainee Participation:*

Consistent with APA policies, students who are completing their first practicum experience must be supervised in person and cannot participate in telesupervision. Advanced trainees (i.e., 3<sup>rd</sup> year and beyond) may be afforded the opportunity to have telesupervision as an option for receiving supervision when telesupervision is indicated due to health and safety or for other reasons as agreed upon with the supervisor, if consistent with APA standards and Program policies.

## *Supervisory Relationship Development:*

Ideally, in-person meetings between supervisor and supervisee are encouraged (if safety can be reasonably assured in the case of public health emergencies). This can be especially important early on in supervisory relationship development. Supervisors will also check in regularly on how

supervisees are experiencing the telesupervision format. Supervisors are readily available via phone between supervision sessions for consultation and for informal discussions. Such availability for consultation and socialization, as well as the Program's commitment to the learning and development of student trainees, serves to foster development of strong supervisory relationships.

*Professional Responsibility for Client Care:*

The supervisor conducting the telesupervision continues to have full oversight and professional responsibility for all client care.

*Management of Non-scheduled Consultation and Crisis Coverage:*

Supervisors are available by phone in the event of need for consultation between sessions. Supervisors can be invited to virtual patient sessions to assist in co-facilitation in the event telehealth is being utilized and if there are any client situations that necessitate intervention or support of supervisors.

*Privacy/Confidentiality of Clients and Trainees:*

Supervisors and supervisees will only conduct supervision that pertains to discussion of confidential client information from settings in which privacy and confidentiality can be assured, whether this be in the office or in a home-based setting. A videoconferencing platform used at our in-house clinic, Zoom Healthcare, provides end-to-end encryption and meets HIPAA standards. The VA and other external practicum sites may use different video conferencing platforms, but these platforms must be HIPAA compliant and full encryption.

*Technology Requirements and Education:*

Telesupervision will occur via Zoom Healthcare or other platform at practicum site that meets encryption and HIPAA standards. Students will complete telehealth training, specific training on utilizing Zoom Healthcare or relevant platform, and training on being prepared for supervision, be this in-person or via teleconference. Supervisors are also trained in these same topic areas.

# Graduate Student Advisory Committee (GSAC) Guidelines

(Revised, February 2024)

## Organization and Authority

The University of Kentucky (UK) Department of Psychology Graduate Student Advisory Committee (GSAC) consists of three faculty members, one from each doctoral program. This committee is an extension of the responsibility and authority of the Director of Graduate Studies. The Chair of the Department, in consultation with the Director of Graduate Studies, will select the faculty representatives. The primary responsibilities of this committee are restricted to the academic standing of students progressing toward the master's degree. (The academic standing of students beyond the master's degree are largely managed by programs, though GSAC is available for consultation.) Problems involving unethical behavior, cheating, plagiarism, etc., represent problems beyond the scope of GSAC, although students may appeal termination decisions arising from such problems to the committee. All decisions of GSAC require a simple majority vote of the full committee, and each faculty member on the committee will have one vote; impasses will be resolved by the Director of Graduate Studies. The decisions of GSAC are binding on all graduate programs, subject only to: (1) veto by the Graduate Faculty of the Department (by a simple majority of those voting), or (2) joint veto by the Director of Graduate Studies and the Department Chairperson.

## Student Progress

During every year of graduate training, each student's progress will be discussed by all faculty members within the student's doctoral program, either (a) Clinical, (b) Developmental, Social and Health (DSH) or (c) Cognitive Neuroscience. Each student will then receive written feedback reflecting their major assets and limitations and any other major points relevant to the student's standing in their program and progress toward the doctoral degree. This evaluative letter should be put in each student's file. Currently, the Graduate School does not require copies of this progress letters/evaluations. In addition to the written feedback, it is desirable for each faculty mentor to meet with each of their students individually to discuss the student's progress and performance that year.

The Graduate Faculty of each program is required to define good progress toward completion of the doctoral degree. This information should be included in the program's Graduate Student Handbook, which should be easily accessible by all students. It is recommended that the consequences of lack of good progress are also included in the handbook.

## Departmental Course Requirements

The Department of Psychology identifies certain categories of requirements for all its graduate students, categories which have been approved by the faculty. These categories include: (a) psychological foundations—research design and statistics; (b) breadth in the discipline of psychology—these vary by program area, but are specified as a departmental requirement of two psychology proseminars outside the graduate student's area (the breadth requirement for students in the DSH area includes the general expectation that Developmental (PSY 625), Social (PSY 624), and/or Health (PSY 626) Psychology proseminars will be completed); and (c) courses which have been identified by program areas as required for students specializing in those programs. Approval and final authority for all three categories of requirements rest with the departmental faculty.

While the model underlying these kinds of requirements is one of proseminar courses (or in clinical, the PSY 780 online courses) taught at UK, the Department of Psychology does recognize alternative, equivalent procedures for satisfying the requirements outlined above. The alternative means of potentially getting credit for prior graduate work is described below.

*Credit for previous work.* An enrolled graduate student in the Department of Psychology may petition for exemption from one or more courses in any of the three categories of requirements, offering as a basis for this exemption work previously done in a recognized graduate program at

another institution or in another program at UK. This petition for exemption should be presented to the student's area coordinator(s).

It is the responsibility of the student to provide the area coordinator(s) adequate material upon which Department of Psychology faculty can base the judgment about exemptions. This material should include (at minimum) the student's transcript and the syllabus for the completed course. Note that the student may be asked to provide other materials: any text used in the course, test materials, papers written by the student for the course, and notes taken during the course. It is the responsibility of the student to organize this material and present it to the area coordinator(s). The area coordinator(s) will contact the Department of Psychology faculty member who regularly teaches, or most recently taught, the course, and they will jointly determine if the student's prior course is an adequate substitute. Note that if a prior course is not taught in the Department of Psychology, a faculty member who teaches a similar course at UK will be contacted. If the course is an adequate substitute, this decision will be documented in the student's file.

### **Student Grades**

*Grade point average.* A student is automatically subject to dismissal from the program if their cumulative GPA falls below 3.0 after the equivalent of one year of graduate studies (i.e., 18 hours of graduate credit).

*"C" grades.* A student is subject to dismissal from the program if they accumulate two "Cs" in their academic work within the Department of Psychology. In addition, a student who receives a "C" in a required course must demonstrate proficiency at the "B" level by retaking the course the next semester the course is offered, or through arrangements agreed to jointly by the student and instructor who issued the grade.

*Incomplete grades.* Students will automatically be prevented from registering for additional coursework under the following conditions: (a) an "I" grade is not completed one semester after it is issued or (b) a "C" in a required course is not cleared up the next semester the course is offered. As soon as any of these requirements are completed satisfactorily the student may continue registering for new work in their training program.

### **Progress Toward Master's Degree**

To complete the steps toward the Ph.D. in a reasonable amount of time, it is important that students complete the master's degree before the end of the students' third year. Departmental policy regarding financial support for students is an added reason for speedy completion of the master's degree. Students in their first three years of graduate study have the highest priority for funding through the department. Thus, any delay past the recommended guideline allows the student less than two years to complete the major hurdles of qualifying exams and dissertation research if the student realistically expects to receive departmental financial support throughout their graduate career. Each step toward the master's must be noted in students' file. Progress toward the master's degree should be as follows:

<b>Semester</b>	<b>Target Milestone</b>	<b>If Milestone is Not Completed</b>
End of Semester 3 (Fall, Year 2)	Proposal, oral and written	Student and advisor may be asked to meet with GSAC to discuss the delay.
End of Semester 5 (Fall, Year 3)	Defense, oral and written	Student and advisor contacted by GSAC.  GSAC will meet with the student to ensure that they are on course for completing their master's degree by the end of the third year.

		<p>Note that GSAC would meet separately with the student and their advisor whenever both have been requested to appear before GSAC.</p> <p>GSAC may require that the student not be allowed to register for classes until the defense is completed.</p>
Start of Semester 7 (Fall, Year 4)	Defense, oral and written	<p>GSAC will again meet with the student to set a timetable for the student to complete the degree.</p> <p>Student may be given an additional year to complete their master's thesis, but it could be longer based upon a petition or advisement of program-specific student advisory committee.</p> <p>GSAC will request that a letter outlining the specific timetable be drafted by the student's master's committee. Letter must state that failure to complete the timeline will lead to the student being subject to dismissal from the program.</p> <p>Once approved by GSAC, the letter will be signed by the master's committee members, the student, GSAC and the DGS.</p> <p>If the student does not complete their master's thesis by the timetable agreed upon, the student is subject to dismissal from the program.</p>

*Note that if the student in question's advisor is a member of GSAC, that GSAC member will not be involved in the GSAC decisions with respect to this student. Instead, the DGS or Department Chair will serve as a replacement on the GSAC for that student.*

Regarding the thesis defense itself, in the event of a failure, the thesis committee may recommend conditions under which the candidate may be re-examined, if re-examination is deemed appropriate. The minimum time between examinations is four months. A second examination must be taken within one year after the first examination. Should any vacancies on the master's committee occur between the two examinations, the Dean of the Graduate School shall appoint replacements. A third examination is not permitted, thus failure of two master's thesis defenses would lead to dismissal from the program.

*Appeals procedures.* Students may appeal any decision of the GSAC. Students have the option of having a student representative from their area involved in their appeal. All students receiving official recommendations from the GSAC will be informed of the appeals procedures available to them. Students appealing GSAC decisions should initially submit a written appeal outlining relevant arguments and extenuating circumstances involved in their appeal. Students are encouraged to submit appeals any time such information is relevant to committee decisions in their view. GSAC is responsible for keeping records reflecting the number of pro and con votes on all decisions as well as written appeals prepared by students.

Students may also appeal academic disputes to the UK Ombud.

*Waiving the master's thesis requirement.* Students who have completed an empirical thesis on an appropriate topic at another institution may have the requirement for completion of a master's thesis in the UK Department of Psychology waived through the following process:

1. The student should notify, in writing, their assigned advisor as well as the area coordinator of their program area that they desire to have the requirement for completion of a thesis in the graduate program in psychology waived.
2. To be eligible for this consideration, the thesis must have been formally accepted as completed at the outside institution, and written documentation to this effect must be provided. Students matriculating in the department who have not yet defended the thesis at the outside institution have one year from the start of classes in the graduate program at UK to exercise this option.
3. The thesis will be reviewed by the student's assigned advisor as well as one other faculty member chosen in consultation with the area coordinator(s). These two reviewers will render an opinion, in writing, to the area coordinator(s) regarding the acceptability of the outside thesis as a substitute for completion of a thesis at UK. In the event of a disagreement between the two readers, the area coordinator(s) will appoint a third reader as a "tie breaker".
4. If the readers of the thesis judge the thesis acceptable as a substitute for one completed in the graduate program at UK, the area coordinator(s) will write a letter to this effect to the Director of Graduate Studies as well as the Chair of GSAC with a copy placed in the student's file.
5. If the readers determine that the thesis is not acceptable as a substitute for a thesis completed at UK, the area coordinator(s) must also notify the DGS and Chair of GSAC to this effect. In the case of this outcome, the student may be held to the usual deadlines for completion of a thesis at the discretion of GSAC. GSAC will notify the student of its decision in this regard in a timely fashion.
6. Students who submit a thesis as a substitute, but have it rejected by the readers may appeal the decision to GSAC, which will have final discretion in the matter.