HANDBOOK OF THE
CLINICAL PSYCHOLOGY GRADUATE PROGRAM

UNIVERSITY OF MARYLAND
COLLEGE PARK, MD
2026-2027

By signing this document, I agree to abide by program rules and requirements, as described herein. I understand that this Handbook functions as a guide for students regarding program requirements; however, the requirements may change (and students must abide by these changes) if changes are required by the University of Maryland or the American Psychological Association (APA) or Psychological Clinical Science Accreditation System (PCSAS).

After reading the handbook and signing this document after your new student orientation, please send a copy to the graduate studies coordinator (psycphd@umd.edu) so it can be included in your file.

Print Name: _____

Signature: _____

Date: _____

Handbook of the Clinical Psychology Graduate Program
2026-2027
Last Updated: July 20, 2026

I. WELCOME TO OUR PROGRAM

The Department of Psychology and the Doctoral Program in Clinical Psychology (i.e., *Clinical Program*) welcomes you to graduate study at the University of Maryland (UMD) at College Park. Our doctoral degree's CIP code is 42.2799 (Research and Experimental Psychology, Other). From the outset, you should appreciate that graduate education involves an open collegial relationship among faculty and students who share responsibility for the learning process. This *Handbook* presents a summary of the Clinical Program, Psychology Department, and University requirements for obtaining the doctoral degree. You should review the *Handbook's* contents throughout the course of your study and be familiar with its contents throughout your tenure in the Clinical Program. In addition, you should make certain that you have an up-to-date copy of the UMD *Graduate Catalog* and the *Schedule of Classes* for the coming semester. Nothing in this Handbook supersedes the regulations established by the UMD Graduate School or the Department of Psychology.

The Department publishes the *Graduate Manual* which summarizes the requirements for obtaining a doctoral degree. Should these requirements change after you enter the department, you should assume that the requirements in effect at the time of your admission apply (unless you formally adopt the new manual requirements in their entirety). You should discuss the implications of any change with your mentor and/or the Director of Clinical Training (DCT). A copy of the *Graduate Manual* is available on the Department's web page. If students have any questions regarding policies and procedures, they should refer to the Department's Graduate Manual, the Graduate School, and or email the Graduate Studies Office (PSYCPhD@umd.edu). While there are many resources at your disposal, questions about program requirements should always be discussed with your mentor and/or the DCT.

You should note the location of your mailbox in the main Psychology Department. Please check your mailbox weekly and your email daily to remain informed about program and department events and important issues. Many Department and Clinical Program communications are sent only through email and you will be responsible for complying with and/or responding to any communications sent via email. In using email, students are required to use their official UMD email account (@umd.edu or @terpmail.umd.edu). By using the University system this ensures accurate email delivery and avoids complications in tracking multiple, and changing, email addresses through other email systems (e.g., gmail). Although students may use other email systems for personal communications, the Clinical Program will only use the address issued by the UMD Psychology Department.

For students involved with the Psychology Clinic, there are mailboxes for paperwork and communications with the clinical staff located in the Psychology Clinic. This mailbox should be checked weekly when you are registered for Clinical Laboratory, seeing clients, and/or conducting research in the Psychology Clinic. Email addresses, phone numbers, and office locations for Faculty and Staff are posted on the UMD Psychology website.

A record of your progress is maintained by the Graduate Studies Office (email: PSYCPhD@umd.edu). All student paperwork (University or otherwise) is processed through the

Graduate Studies Office. Submit all defended master's, third year projects, and dissertations to psycphd@umd.edu.

In addition to copies of letters of notification regarding all formal actions taken by the Graduate Committee, the following are placed in the file maintained by the Graduate Studies Office:

Application for Admission
Signed admissions letter
Payroll Forms
Remission of Tuition Forms
Research Competence Forms
Approved Program Form (for Master's Degree)
Nomination of Committee Form (Master's & PhD)
Report of Examining Committee Form (Master's & PhD)
Diploma Applications (for graduation - Master's & PhD)
Transition to Independence and Expertise (TIE) Project Proposal and Evaluation Forms
Admission to Doctoral Candidacy Forms
Registration Forms
TA evaluations by faculty & TA contracts
Grade Sheets
Assistantship Questionnaire (per semester)
Petition for Waiver of Regulation Form
Fellowship Nomination Forms Submitted
Supplemental Grade Report Form
Leave of Absence Requests (signed by mentor) and department/program response
Health Insurance Form
Time Extension Form
Course Exemption Approvals
Change of Advisor Form
Student progress forms and annual evaluation letters / Notification of formal program actions
Master's Thesis, TIE Project, and Dissertation, along with final documents (master's, TIE, dissertation)
Non-Program Clinical or Research External Placement Approval Form
Completed evaluation forms and letters from externship/internship agencies

At the end of each academic year, students must complete the **UMD Clinical PhD Program Curriculum Worksheet (Appendix A**) and the **Cumulative and Annual Student Report Form (Appendix B). Along with these forms, students must submit an updated CV. All forms are due by 8/30 to the student's mentor, Director of Clinical Training, and submitted to the Graduate Studies Office** (PSYCPhD@umd.edu). For information on developing a CV, you can visit the APS web site for an article *here.* For students applying to internship, the Curriculum Worksheet must also be reviewed and signed by the DCT by the first of October prior to applying to internship. The Curriculum Worksheet and the Cumulative and Annual Student Report Forms are designed to assist with curriculum planning, assist the faculty in anticipating program needs such as course scheduling and student support, and offer an

accurate and convenient record of progress. This information is used by the faculty to evaluate progress in the program as well as to complete the American Psychological Association (APA) Annual Report required of all APA accredited programs.

II. DESCRIPTION OF THE PROGRAM

A. Mission Statement

The Clinical Program at the UMCP has been accredited since 1963 by the American Psychological Association (American Psychological Association, Office of Program Consultation and Accreditation, 750 First Street, NE • Washington, DC • 20002-4242 • Phone: 202-336-5979 • TDD/TTY: 202-336-6123). Since 2017, the Clinical Program has also been accredited by the Psychological Clinical Science Accreditation System (PCSAS; Alan G. Kraut, Executive Director; 1800 Massachusetts Ave NW, Suite 402, Washington, DC 20036-1218 USA; Phone: (301) 455-8046; Email: akraut@pcsas.org). The Clinical Program's focus on clinical science is reflected in our membership in the Academy of Psychological Clinical Science. In this model, there is an active integration of research and practice. The Clinical Program curriculum reflects this integration by involving students throughout their graduate career in the design, implementation and publication of clinical research. In addition, there is an explicit effort directed toward relating that research to the understanding of clinical phenomena and to the development, dissemination, and implementation of clinical interventions.

The Clinical Program prepares clinical psychologists who are well versed in the scientific method of inquiry and skilled in the science and art of practice. In addition to the scientific foundations of basic psychology, education includes understanding psychological and biological theories of psychopathology and implementing evidence-based assessment and treatment techniques.

Students participate in practicum training (both on and off campus) which is designed to provide opportunities to gain clinical experience, and to integrate didactic education and research experience with clinical phenomena and disorders. During the first three years, students complete practicum training in the on-site Psychology Clinic under the direct supervision of the Clinical Faculty. After achieving competency in their required clinical work within the Psychology Clinic, students may gain additional clinical experience to increase breadth in several program-approved on- and off-campus settings throughout the Baltimore-Washington, DC area provided they have successfully defended their Master's Thesis, achieved research and clinical competence, and are on time with respect to other program requirements. Exceptions to these requirements must be approved by the Director of Clinical Training. Students typically pursue external practica during their 4th and 5th years in the program.

Education as a clinical scientist includes clinical research training. Under the mentorship of faculty, graduate students learn to formulate and carry out clinically-relevant research projects related to the psychopathology, assessment, intervention, and prevention of maladaptive human behavior. Additionally, students can conduct research addressing basic theoretical issues that form the foundation of clinical psychology. By conducting basic and clinical research, students engage in a process of inquiry that is both scientifically rigorous and clinically relevant.

In addition to an emphasis on individual differences that affect human behavior, the Clinical Program curriculum reflects the importance of cultural factors in understanding and modifying emotional and behavioral functioning. As such, the Clinical Program values diversity of culture, lifestyle, and orientation in its students and faculty. Conceptually, the Clinical

Program emphasizes the relevance of cultural pluralism and human diversity. The Clinical Program's didactic, practicum, and research experiences also sensitize students to adjustment and maladjustment across diverse cultures, settings, and life circumstances.

B. Clinical Psychology Graduate Program Goals

GOAL 1: To provide education and training in relevant theories of emotional and behavioral functioning. Goal 1 will be achieved by:

- Providing courses that present critical overviews of the foundations of clinical psychology, the major theories of emotional and behavioral functioning, and the etiology of psychological dysfunction
- Providing practicum experiences, known as Clinical Laboratory, that combine clinical training with further education in the scientific bases of psychopathology - students become knowledgeable in the scientific and empirical literature relevant to the psychopathology of the client for whom they will provide treatment
- Engaging in clinical research activities that will contribute to the knowledge base of psychopathology and intervention

GOAL 2: To provide education and training in relevant theories of clinical interventions, supervision and consultation. Goal 2 will be achieved by:

- Providing courses that present critical overviews of the foundations of clinical psychology, the major theories of etiology, pharmacological and psychosocial interventions, supervision, consultation, and the empirical bases for these interventions
- Providing clinical practicum experiences, (Clinical Laboratory) that combine clinical training with further education in the scientific bases of psychosocial interventions - students become knowledgeable regarding the scientific and empirical literature relevant to appropriate evidence-based assessments and interventions, as well as research design issues necessary to critically evaluate this literature
- Providing advanced clinical practicum students with training in models of supervision and consultation
- Engaging in clinical research activities that will contribute to the knowledge base of clinical interventions

GOAL 3: To provide students with the knowledge and skills necessary to function as independent clinical researchers. Goal 3 will be achieved by:

- Providing courses that present critical overviews of the foundations of clinical psychology, clinical research design and methodology, statistics, psychopathology, and advanced seminars in select areas of psychopathology
- Providing practicum experiences (Clinical Laboratory). The philosophy of Clinical Laboratory is that every client is considered as a single-case design, whereby the effects of

any intervention are carefully and continuously monitored in order to inform clinical decision making
- Requiring students to actively work in the research program of their research mentor where they will be actively engaged in clinical research, and present and publish the results of their efforts throughout their graduate careers
- Requiring completion of the Master's Thesis, Transition to Independence and Expertise (TIE) Project, and Dissertation Thesis

GOAL 4: To provide an environment that encourages scholarly debate and critical thinking, supports theoretical and methodological diversity, expects scientific and scholarly productivity from its faculty and students, and respects individual creativity and collaborative approaches to inquiry. Goal 4 will be achieved by:
- Providing courses, clinical training, and research experiences where a diversity of theoretical views and empirical methods are presented
- Providing special program offerings such as the Clinical Case Conference and the Clinical and Research Issues Seminar Series (CRIS Series) that allow for the presentation and scholarly debate of topical issues among faculty and students
- Participating in departmental colloquia, research team presentations, and organized symposia focusing on current developments in clinical science in terms of theory, research, and practice

GOAL 5: Aspire to infuse a focus on multiculturalism, cultural humility, and diversity throughout the program's climate, classes, research, clinical work, and makeup of the faculty and student body. Goal 5 will be pursued by:
- Providing courses that emphasize cultural considerations in readings and other course materials throughout the entire course experience (as opposed to one "diversity week")
- Cultivating an inclusive atmosphere in which faculty and students all strive to be open to feedback on microaggressions they commit, to own up to individual and collective contributions to maintaining white supremacy in academia, and to commit to specific anti-racist action and approaches
- Inviting speakers to program and department level meetings to present on diversity-related topics in clinical research and applied clinical skills, with student and faculty input
- Providing specific training in clinical work with underrepresented and marginalized clients, including through internal practica and with guest speakers
- Implementing programming designed to recruit and retain underrepresented students and faculty

GOAL 6: To provide students with knowledge and skills to move towards operating as independent clinicians/therapists. Goal 6 will be achieved by:

- Providing practicum experiences that teach and provide feedback on common factors and basic counseling techniques
- Introduce and train students to implement a variety of manualized interventions flexibly, to gain experience in the process of learning and applying new treatment approaches
- Recommending external practicum experience to gain exposure to clinical work in a variety of settings
- Requiring presentation of a case example to the program in CRIS, including addressing questions and feedback from faculty and peers

C. UMD Clinical Program's Technical Standards (i.e., expectations for a variety of skills essential to success in the program)

Earning a degree from the Clinical Psychology Doctoral Program requires mastery of a coherent body of knowledge and skills. Doctoral students must acquire substantial competence in the discipline of clinical psychology as specified in the APA and PCSAS Standards of Accreditation and must be able to relate appropriately to clients/patients, fellow students, faculty and staff members, and other health care professionals. Combinations of cognitive, behavioral, emotional, intellectual, and communication abilities are required to perform these functions satisfactorily. These skills and functions are not only essential to the successful completion of the Clinical Psychology Doctoral Program, but they are also necessary to ensure the health and safety of clients/patients, fellow students, faculty and staff members, and other health care providers. Students are expected to monitor their functioning and seek appropriate professional support if health or personal circumstances begin to interfere with safe and effective training, research, or clinical service delivery.

In addition to required academic achievement and proficiency, the Technical Standards described below set forth additional qualifications the Clinical Psychology Doctoral Program considers essential for successful completion of its curriculum. Therefore, in order to successfully progress through, to be approved for internship, and to qualify for graduation from the Clinical Psychology Doctoral Program, current students in the Clinical Psychology Doctoral Program must satisfy these Technical Standards. Students who are unable to meet these standards may be recommended for remediation or may be terminated from the program, consistent with policies articulated in the Clinical Program Handbook.

Attitudinal, Behavioral, Interpersonal, and Emotional Attributes. As a human behavior-centered discipline, we value a strong understanding of and appreciation for the complexity of issues relating to diversity. Doctoral students must be able to relate to clients/patients, fellow students, faculty and staff members, and other health care providers with honesty, integrity, and dedication and in a nondiscriminatory manner. They must be able to understand and use the power, special privileges, and trust inherent in the psychologist-client/ patient relationship for the client/patient's benefit and to know and avoid the behaviors that constitute misuse of this power. Doctoral students must demonstrate the capacity to examine and deliberate effectively about the social and ethical questions that define psychologists' roles and to reason critically about these questions. They must be able to identify personal reactions and responses, recognize multiple points of view, and integrate these appropriately into clinical decision-making. In research teams, doctoral students must demonstrate the ability to interact appropriately with research participants, other students, and faculty and staff members. Doctoral students must be able to collaborate well with others on joint projects (e.g., effectively accept and provide input).

A clinical psychology student must be able to use fully their intellectual ability, to exercise good judgment, to complete client/patient care responsibilities promptly, and to relate to clients/patients, families, fellow students, faculty and staff members, and other health care providers with courtesy, compassion, maturity, safety, and respect for dignity. The ability to participate collaboratively and flexibly as a member of an interprofessional team is essential. Doctoral students must be able to display these traits and demonstrate professional conduct expected of clinical psychologists in spite of multiple and varied academic, teaching, and research responsibilities, in addition to clinical training expectations. Doctoral students must be able to modify behavior in response to constructive criticism. They must be open to examining personal attitudes, perceptions, and stereotypes (especially those that may negatively impact client/patient care and professional relationships). Doctoral students must be able to take responsibility for their behavior, which includes being open to feedback from their supervisors, academic instructors, and research advisors. Doctoral students must be open and empathic with others and show respect for different viewpoints, perspectives, and opinions. They must strive to work collaboratively with others in the classroom, laboratory, clinic, and in all other academic or professional settings. They must convey genuine interest in other people and demonstrate affect tolerance (i.e., appropriately manage emotions in academic and professional settings). As an essential part of conducting research or clinical practice, doctoral students effectively tolerate uncertainty and ambiguity. They must be emotionally mature (e.g., intellectually and emotionally open to receiving feedback and making changes in response to feedback). Doctoral students must be able to advocate for their own needs in the workplace without being inappropriately aggressive. They must also be able to seek appropriate resources and build relationships needed to advance in their academic or professional career.

The study and ongoing practice of clinical psychology often involves taxing workloads and appropriate management of stressful situations. A doctoral student must have the physical and emotional stamina to maintain a high level of functioning in the face of multiple demands on their time and energy.

Critical and Evaluative Skills. Doctoral students must possess a range of intellectual skills that allows them to master the broad and complex body of knowledge that comprises clinical psychology education. Doctoral students must be able to critically evaluate their own and others' research, including the ability to identify limitations in the research literature or design of a specific study, to critique a manuscript as an ad hoc reviewer, and to "make psychological sense" of their own data. They must be able to use theory to inform the conceptualization, design, and interpretation of research. Additionally, doctoral students must be able to effectively understand the theoretical literature in their identified substantive research area and to integrate their understanding of the literature in scientific writing and presentations. They must further demonstrate an ability to generate novel hypotheses and to design a study that follows from those hypotheses.

Doctoral students must be able to analyze and synthesize information from a wide variety of sources and must demonstrate sophisticated critical thinking skills. They must be able to learn effectively through a variety of modalities including, but not limited to: classroom instruction, clinical supervision, small group discussion, individual study of materials, independent literature review, preparation and presentation of written and oral reports, and use of computer-based technology.

Because the practice of psychology is governed by the ethical principles set forth in the current APA Ethics Code and by current state and federal laws, including the State of Maryland

Psychology Board Laws and Regulations, COMAR 10.36.05 Code of Ethics and Professional Conduct, a clinical psychology doctoral student must have the capacity to learn and understand these ethical standards and legal requirements and to perform consistent with those principles and mandates as a student in the Clinical Psychology Doctoral Program.

Communication Skills. Doctoral students must be able to ask effective questions, to receive answers perceptively, to record information about client/patients, and to provide effective psychoeducation to clients/patients. They must be able to communicate effectively and efficiently with clients/patients, their families, fellow students, faculty and staff members, clinical supervisors in varied practicum settings, and with other members of the health care team in a manner that is assertive but not aggressive or argumentative. This includes verbal and non-verbal communication (e.g., interpretation of facial expressions, affects, and body language). Mastery of both written and spoken English is required; students' written and verbal communication must demonstrate an ability to perform necessary integrative and interpretive functions.

Commitment to Diversity and Inclusion. The University is committed to equality of educational opportunity and to cultivating culture of acceptance and inclusion in which diversity is integral, authentic, intrinsically valued, and visible. The University prohibits discrimination on grounds protected under Federal and Maryland law and Board of Regents and University policies. University programs, activities, and facilities are available to all without regard to race, color, sex, gender identity or expression, sexual orientation, marital status, age, national origin, political affiliation, physical or mental disability, religion, protected veteran status, genetic information, personal appearance, or any other legally protected class.

References. American Psychological Association (2010). Ethical principles of psychologists and code of conduct. Retrieved from http://apa.org/ethics/code/index.aspx.
State of Maryland Psychology Board Laws and Regulations, COMAR 10.36.05 Code of Ethics and Professional Conduct: https://health.maryland.gov/psych/Pages/lawsregs.aspx#regulations
UMD Department of Psychology Mission Statement: https://psyc.umd.edu/about-us/diversity
UMD Accessibility & Disability Service: https://www.counseling.umd.edu/ads/ University of Maryland Disability & Accessibility Policy and Procedures:
https://www.counseling.umd.edu/global/docs/ads/policy/disabilityandaccessibilitypolicy.pdf
University of Maryland Non-Discrimination Policy and Procedures:
https://president.umd.edu/administration/policies/section-vi-general-administration/vi-100b

D. Full-Time Program and Scheduling

The Department of Psychology does not offer a part-time program. Students must be registered as full time. It is not possible to obtain graduate education appropriate for a Ph.D. on a part-time basis in our Department. The Clinical Program is a 12-month program. Stipend support for Clinical Program students extends across the full calendar year. As a result, students are required to meet academic, clinical, research, and other training obligations throughout the year including times when classes are not in session such as winter break and summer. The following should be considered when students are planning their work and private schedules.

The Psychology Department expects students to be available for various TA obligations including mandatory training and orientation meetings in mid-late August. The Department's view is that student contracts for the fall start the third week in August, and therefore students are

required to be available for department obligations during this time. In order to avoid conflicts with these department obligations, vacation travel should not be scheduled during the last two weeks of August.

Clinical research presents unique demands that students must anticipate. Research obligations may need to be scheduled in the early morning, evening, or on weekends. Research with clinical populations may occur at locations off-campus (e.g., area hospitals and clinics). Discussions with your research supervisor will help you plan accordingly so that schedule conflicts or other logistical difficulties are avoided.

Clinical work with clients requires a full-time commitment. The training Clinic is open year-round and students should plan to be available to see clients when the Clinic is open. Clients' needs should be considered before scheduling time away for research, conferences, workshops, or vacation. Any planned time away from the Clinic exceeding one week must be approved by the Clinical Supervisor, Psychology Clinic Director, and the Research Mentor. Continuous absence of more than two weeks is typically not permitted; requests for absence more than two weeks require approval from the Clinical Faculty. In the case of an emergency, students should notify the DCT along with their Clinical Supervisor, and Research Mentor, and course instructors as soon as possible so we can assist in finding coverage for clinical and research activities.

There is ample time for vacation and self-care. It is best to schedule days off during official Clinic closures. As a general rule, the Psychology Clinic is closed whenever the University is Closed. This includes closure for holidays, inclement weather, and unexpected emergency situations.

The Psychology Clinic is closed annually on the following days:
Martin Luther King Day
UMD Spring Break
Memorial Day
Juneteenth
July 4th
Labor Day
Thanksgiving
the day after Thanksgiving
UMD Winter Break
*The exact dates by calendar year are available here

Given the above considerations, in scheduling vacation time it is a student's responsibility to avoid conflicts with department and program meetings, courses, clinical obligations, and research responsibilities. Before making travel plans, students must consult with the research mentor, graduate office, their course instructors, and clinical supervisors. Please note that course instructors are under no obligation to accommodate student vacations and any travel plans should be made around course schedules. The UMD academic calendar is published years in advance and students and their family members are encouraged to consult these calendars in making travel arrangements.

Beyond vacation, students should also be mindful of scheduling conflicts created by research and clinical experiences such as attending conferences or specialized trainings, as well as externship duties. It is expected that a student will plan accordingly to limit any conflicts, but in cases where this is unavoidable, students should notify all class instructors and the organizer of any mandatory meetings (e.g., orientation meeting discussed above, or Clinical Program

Meetings) at the start of the semester or at least one month in advance if a conflict arises after the semester has begun. If this period cannot be honored, the student should seek guidance from their mentor and/or the DCT once the conflict is identified.

When making housing decisions students should keep in mind the above 12-month commitments and the need to be available for clinical and research obligations on campus or at affiliated research sites throughout the work week (and sometimes weekends). Although the region offers many options to choose from, students should be aware that some housing locations will create enormous time burdens given the commuting distance and the highly congested roadways within DC and the beltway. Students are strongly encouraged to consider housing locations that will simplify their commute to campus. Although housing decisions are obviously a personal choice, ultimately students must meet all program expectations and obligations regardless of the commuting burdens they may encounter.

E. Clinical Program Residency Requirement

Graduate students in psychology will be in-residence in the local community for the duration of the PhD program, with the exception of departmentally approved supplementary training at other institutions. Exceptions to this policy are rare. In order to be considered for an exception to the residency requirement, students must meet the following criteria: Entering the 4th or 5th year of training; Completion of all required coursework; In good standing within the Program; Has satisfactorily completed the TIE Project; Has proposed their dissertation and completed data collection if applicable; Must have accrued sufficient hours to apply for internship. Additionally, if the student wishes to retain their stipend and tuition waiver while not in residence, the source of such funding must be independently obtained research funding (e.g. mentor-funded RA, or University-based or other fellowship). If a student feels they meet the criteria for an exception to the residency policy, they must receive permission from their mentor and the DCT.

F. Student Stipends and Funding Sources, Residency Decisions and Tuition Impact, and NRSA-specific information

Current policy is that department stipends go only to students in the first five years of the program. This includes stipend and tuition support. Continued funding is not guaranteed, and requests must be made to the Director of Graduate Studies; funding is contingent on good academic standing within the department and academic probation or other disciplinary matters may lead to termination of departmental support. **Students should assume that no department funding will be available beyond the fifth year.** After the fifth year, students will be responsible for tuition and fees. Thus, it is important for students to plan accordingly to ensure timely completion of graduate school, department, and program requirements within five years.

Students are responsible for paying all required tuition during internship and should plan accordingly. Students who have not completed their dissertation prior to internship will be required to register and pay for 6 credits of PSYC 899 (Dissertation Research) and 1 credit of PSYC 639 (Internship in Professional Psychology), along with semester mandatory fees. Students who have completed their dissertation will have to be enrolled in at least one credit of PSYC 639 in the fall and spring of their internship year. If students have completed their dissertation and are not on campus or using campus resources, they can request that the mandatory fees be waived (contact psycphd@umd.edu to submit the waiver).

Funding sources prior to the internship year include the following:

Teaching Assistantships - generally include a full stipend with tuition remission for up to ten hours per semester. Specific assignments to regular courses are the responsibility of the Director of Graduate Studies. Every effort is made to match students with courses in which they have knowledge and interest.

Research Assistantships - may vary from year to year and from faculty member to faculty member. If it is a grant position, it may or may not pay the same as a teaching assistantship or involve tuition remission and fringe benefits. If you are on a GA-ship, please consult with DCT about your summer research credits as this may vary from students on TA-ships.

Psychology Department Fellowships - highly competitive awards which provide tuition remission and a full stipend.

Other Funding Sources. Students are encouraged to explore predoctoral research awards and fellowships. These mechanisms can provide excellent experience in grant writing and contribute to a student's professional development as a clinical scientist. Below is a brief list of award resources, including UMD Dissertation Fellowships and fellowships from NIH, NSF, and other agencies that are awarded as the result of competitive review. Mentors should be consulted early in the application process.

UMD Awards

The Jacob K. Goldhaber Travel Grant and the International Conference Student Support Award (ICSSA) help defray the expenses incurred by UMD graduate students who are traveling to scholarly, scientific, or professional conferences to present papers, posters, or other scholarly material. Students may receive each award twice during their graduate education at UMD, once before the achievement of candidacy (including master's students) and a second time after the achievement of candidacy. To be eligible, students must be presenting a paper, poster, or other types of presentation and must be enrolled at UMD at the time of travel.

Graduate School Ann G. Wylie Dissertation Fellowships: Each spring, the Graduate School will award a number of Ann G. Wylie Dissertation Fellowships. As of 2007, each fellowship will carry a stipend of $10,000. Recipients also will receive candidacy tuition remission and $400 toward the cost of health insurance. The fellowships provide financial support for either the fall or the spring semester and are intended for students who are in the final stages of writing their dissertations, whose primary source of support is unrelated to their dissertations, and who expect to receive their degrees in the following year. Each doctoral program may nominate up to two students.

External Funding Opportunities

NIH Ruth L. Kirschstein National Research Service Award (NRSA)
National Science Foundation (NSF) Graduate Research Fellowship Program
American Psychological Association (APA) Minority Fellowship Programs
APA Scholarships, Grants and Awards
APA Science Directorate Student Travel Award

Note: Students interested in applying to these fellowships should consult with the Graduate Office prior to submission to understand how the grant will impact their funding and health insurance. In addition, tuition coverage may be more limited so students will need to work with the DCT in order to fall within the allowable amount. Please consult with DCT when registering for credits each semester, including summer credits.

Residency and In-State Tuition. Our program recognizes that students have many options in terms of where to live in the DC-Maryland-Virginia region, and students are free to make decisions about where to live based on what works best for them. It is important to note, however, that residency status can impact in-state tuition status for students funded through external grants (and potentially limit the number of credits that can be covered by this funding). Therefore, our program encourages students who live in Maryland to pursue formal classification of Maryland residency with the university, especially for students interested in pursuing external funding. Information on residency classification (and reclassification) is available **here.**

NSF- and NRSA-specific Information. Prior to submission of an external grant (NSF, NIH, NRSA), students should connect with the graduate office to discuss how the fellowship or grant may impact their funding (i.e., stipend amount) and health insurance.

Students who are funded through TA/GA positions with the psychology department receive in-state tuition status (regardless of residency). However, if a student transitions to funding they receive through external grants and did not establish Maryland residency upon admission to the graduate program, the in-state tuition rate will no longer be offered (fellows/trainees funded solely on these grants are not considered employees of the university).

To our knowledge, NSF GRFP awards cover the credits required by our program without in-state tuition; however, this may change and requires checking the policy prior to applying for the award.

NRSA awards, by contrast, cover 60% or up to $16k annually towards tuition cost. Federal training grants covering only partial tuition for fellows may be eligible for an institutional match of fellowship tuition assistance. Upon written agreement with The Graduate School, tuition assistance may be awarded to training grants on a 60% (grant) / 40% (GS) matching basis. However, the graduate school only supports tuition for the Fall/Spring semesters (10 credits max) and does not provide tuition support for the winter term or summer sessions during which our students are registered for credits. There are several options students with NRSA funding may be able to pursue to cover the cost of tuition. These students should work with the DCT and program on a case-by-case basis toward the best solution for their circumstances. Options include:

- .5 TA (teaching assistantship)—dependent on funding and availability, and only applies to the term(s) during which the student serves as a TA (although this option is discouraged as it puts greater burden on the student)
- .5 RA (research assistantship)—dependent on research mentor funding. Note: RA duties cannot overlap between NRSA and mentor's grant (although this option is discouraged as it puts greater burden on the student)
- Residency reclassification for in-state tuition status
- Individualized curriculum plan with consultation by DCT and mentor (this is the most common solution)

G. Students with Non-US Citizenship

We support our international students, and we value their status in our program. We want to make our international students aware of potential challenges that may arise as a result of their citizenship status so we can help our students plan accordingly.

In terms of advising, the ISSS Office is where international students receive guidance at UMD. International students should also familiarize themselves with Curricular Practical

Training (CPT), Optional Practical Training (OPT), and STEM OPT (summarized here). The Department of Psychology is categorized as a STEM program.

Tuition and Fees. The allocation of funding and tuition fees are the same for international and domestic students. However, international students cannot work on overload, meaning they cannot exceed or hold more hours/appointments than their full-time paid assistantship during fall, spring, and summer terms. In addition, even when international students have already defended their dissertation before going on internship, they are required to register in the summer of their graduation, whereas domestic students' summer registration can be waived. In addition, they must be registered as a full-time student during their internship year, which will incur tuition costs. We want our international students to be aware of these additional costs so they can prepare sufficiently. This is to maintain their visa status. Because the policies and protocols change, we recommend students contact the Office of International Students and Scholars (ISSS), specifically if their funding or enrollment status changes.

Once a student is admitted into our program, the Graduate School and the Office of International Students & Scholars will follow up regarding the process of F1 visa and I-20. It is important during this period to follow through with the Graduate School's request for additional documents in a timely manner.

Fellowships. International students need to confirm whether they are eligible for fellowships, as US citizenship is often a requirement (e.g., NRSA, NSF).

Internships and External Practicum. International students need to confirm that they are eligible to apply/be admitted to an internship or external placements. Some sites do not accept students without US citizenship (e.g. VA System internships; NIMH externships). For internships, check the APPIC website. For each external practicum/externship, international students need to apply for CPT authorization every year through ISSS. The total weekly hours of externships cannot exceed 20 hours per week to be considered part of CPT. Full time CPT is needed for internship and the training year may be shortened by a few days so it is not a full year because one full-time CPT will impact eligibility to apply for OPT, which is needed for post-doc positions. This paperwork is handled by ISSS.

Post-Doctoral Fellowships and Employment. We advise our international students that they need to leave sufficient time between the end of internship and the start of a postdoctoral fellowship as they will need extra time to navigate their visa/permit status.

H. Working with Your Mentor: Faculty Mentoring and Advising

A major resource for achieving the stated educational goals is the faculty mentor. Students are matched to a mentor who is a member of the Clinical or Department Faculty with whom they share research interests. This match typically occurs during the application process when students and faculty have an opportunity to discuss their research interests and training goals. It is a Clinical Program requirement that the mentor chair the Master's and Doctoral committee except in unusual circumstances which must be approved by the Clinical Faculty. The doctoral committee must include the mentor and at least one additional member of the Clinical Faculty and one other Departmental Faculty Member for a total of three Departmental Faculty. Where particular expertise is needed, the third departmental faculty also may be from the Clinical Program or another related Department.

Per the departmental policy, the graduate students should work with their primary faculty mentor and/or area head to identify an appropriate secondary academic/career advisor. The secondary faculty mentor is responsible for meeting with the student at least annually and should

remain open to additional meetings if requested. The secondary mentor's role is to provide a supportive environment in which the student can discuss their progress and career ambitions. The secondary mentor is not expected to work directly with the student on research projects; however, such collaborative opportunities should not be discouraged when they appear to be in the student's best interests. More information can be found on the department's doctoral program's overview. A student's goals may be well served with additional research experiences with other faculty in the Clinical Program or other faculty in Psychology or a related Department. This should be discussed with the mentor and an appropriate plan put in place to ensure this additional experience will not interfere with the student's primary responsibilities. Students are also permitted to have primary mentors outside of the clinical core faculty, although these circumstances must be approved by the Clinical Faculty. In these instances, the students will also need a Clinical Faculty Mentor who will work with the student and Primary Research Mentor to ensure the student meets the clinical program requirements.

Students are encouraged to discuss any matter, personal or professional, with their mentor that might potentially interfere with meeting program/department requirements and with progress and continuation in the Clinical Program. Awareness of such matters enables the mentor and the Clinical Program to guide and support students in selecting a proper course of action. Moreover, the earlier this is done the more likely suitable options can be developed and pursued.

Ideally, a research mentor remains constant throughout a graduate student's career; however, changes in mentor are permitted. Please review the Graduate School's Procedures for Changing Advisors. It is advisable that any issues that underlie the desire for a mentor change first be discussed in a collaborative manner with the initial mentor to determine if steps can be taken to prevent the need for a change (e.g., willingness by a mentor to support a new direction of research, resolution of interpersonal or stylistic differences); however, the decision to make a change ultimately is up to the student. Changes can be made at any time but may be most easily accommodated between the completion of the Thesis and start of the Dissertation. Once the decision is made to change mentors, the student should meet with the potential mentor and determine his/her availability to supervise a new student. If the faculty member agrees, the student should notify the current mentor of the planned change. Obtain a **Change of Mentor Form (Appendix C)** from the Graduate Studies Office and have it signed by all parties and the DCT. Finally, ensure that the change is recorded in your academic record in the Graduate Studies Office (PSYCPhD@umd.edu).

Mentors may also decide to terminate the mentor-mentee relationship. Mentors should first seek consultation and support from the DCT and Director of Graduate Studies to assist the mentor and mentee in resolving any issues and hopefully restore the mentor-mentee working relationship. If the issues cannot be resolved, the student should meet with potential mentors. The student should work with the DCT to proceed with the change of mentor process.

Although we encourage students to secure a new faculty mentor prior to terminating their current mentor-mentee relationships, we recognize that there will be times when this is not the case. Students are permitted to remain in the program for 4 months without a mentor. If the student has not secured a new mentor after 4 months, the student will be terminated from the graduate program. During this period, without a mentor in the department, the student will be placed on a probationary period (probation due to no mentorship) by the department until a mentor is secured or the student leaves the program.

I. Guidelines for Faculty Advisors for Working with Graduate Students

These guidelines were developed to assist faculty and students in understanding the minimum expectations for faculty regarding advising doctoral students in our graduate program.

General expectations

- Faculty and students are expected to treat one another with respect.

Research

- Faculty and students will be engaged in research/scholarly work.
- In addition to working on research with the faculty advisor, students may be invited to participate in research activities led by other faculty. The other faculty member should either consult with the student's primary advisor prior to inviting the student to participate in his or her projects or ask the student to first discuss the opportunity with his or her mentor.
- Faculty will facilitate a fair and transparent process of determining order of authorship on research projects with students. See APA's authorship guidelines: https://www.apa.org/research/responsible/publication/

Meetings

- Faculty should have regular contact with their students.
- In the first three years, advisors meet at least biweekly with the advisee. Weekly meetings are encouraged.
- In subsequent years, advisors meet at least monthly (in person or by phone) with the advisee until the dissertation is completed. It is the student's responsibility to schedule the meetings.

Faculty leaves (e.g., sabbatical, family, medical)

- With the exception of emergency situations, faculty will notify their students of planned faculty leaves from the university at least two months in advance of the leave.
- Faculty also will assist students in planning to ensure their progress in the program during the faculty leave.

Responses to emails

- Typically, faculty will return emails within one week (excluding holidays, vacations, sabbaticals, leaves, and breaks from the university).

Turn-around times

- Typically, faculty will return drafts within two weeks (excluding holidays, vacations, sabbaticals, leaves, and breaks from the university).
- When this turnaround time is not possible, faculty will let the student know a date by which feedback can be expected.
- Faculty should receive requests for letters of recommendation at least one month in advance of the due date.

Feedback

- Faculty are expected to provide constructive feedback on drafts received from the student throughout the writing process.

Annual evaluations

- Faculty will discuss the annual evaluation with the student within two weeks of the faculty meeting in which the student is discussed.

Concerns regarding the advising relationship

- When the advisee-advisor relationship is not going well, the advisor and student may brainstorm possible solutions (e.g., identify steps both advisor and student might take to

improve the relationship, identify new strategies for working together, connect with other faculty in addition to the advisor, formation of a support committee to assist in remediation, work on other research teams, change advisors). Please see Grievance Procedures outlined below in the Clinical Handbook.

- Faculty can refer students to the Director of Clinical Training to discuss their concerns regarding the advising relationship.

Procedures for changing advisors

- Ideally, the student and advisor discuss concerns in their relationship and are able to resolve any issues.
- If a student wants to change advisors, the student talks with other faculty to see if they are willing to take on the role of advisor.
- The student should notify and consult with the Director of Graduate Studies.
- Once a new advisor is identified, the student talks with the current advisor regarding the decision to change advisor and completes the change in advisor form.
  If a faculty member or student ends the advisor-mentee relationship prior to the identification of a new advisor, the student has four months to find a new faculty advisor in the program or the student will be terminated from the Graduate Program. During this period of time without a mentor in the department, the student will be placed on a probationary period (probation due to no mentorship) by the department until a mentor is secured or the student leaves the program.
- The faculty advisor may also decide to terminate their role as primary advisor/mentor.
- Requests for termination of the student-advisor relationship by either party shall be made in writing to the Director of Graduate Studies, and a written notice of termination shall be provided to both the advisor and the student by the end of the semester in which the request for termination is made. The student is required to secure the commitment of a new advisor within 4 months of the notice of termination. Failure to obtain a new advisor is grounds for termination from the program.

J. List of Clinical Faculty

Edward Bernat, Ph.D., Associate Professor (Phone 301-405-8374; ebernat@umd.edu)
Dr. Bernat received his degree from the University of Michigan in 1997 where he also completed his postdoctoral training. His research is focused on brain mechanisms that underlie individual differences in cognitive and affective processing relevant to psychopathology. A primary focus is on cognitive-executive and regulatory deficits underlying impulse control (externalizing) problems such as substance use/abuse, antisocial behavior, and psychopathy. Methodologically, his work employs advanced time-frequency decomposition techniques with EEG/MEG signals. This includes amplitude measures that can delineate active brain regions and functional connectivity measures to characterize dynamic communication among areas. Integration of these EEG/MEG decomposition approaches with MRI/fMRI is currently being advanced. Dr. Bernat serves as a primary research mentor to graduate students.

Jack J. Blanchard, Ph.D., Associate Provost and Professor (Phone 301-405-8438; jblancha@umd.edu)
Dr. Blanchard received his Ph.D. in clinical psychology from the State University of New York at Stony Brook. Dr. Blanchard's research has examined the reciprocal influence of emotion and

interpersonal behavior to understand clinical outcomes in schizophrenia and other psychotic disorders. Dr. Blanchard recently completed an NIMH-funded study examining neural (fMRI), cognitive, and behavioral correlates of affiliative deficits in psychosis. In an ongoing NIMH grant study, Dr. Blanchard and Dr. Alex Shackman (Co-Principal Investigators) are examining neural and behavioral correlates of paranoia in psychosis. This study will combine MRI results with smartphone and actigraphy-based assessments to provide a richer integration of neural responding and *in vivo* behavior. Dr. Blanchard's teaching interests include adult psychopathology and empirically supported approaches to clinical assessment and intervention. Dr. Blanchard is committed to training future clinical scientists and he has received the *Excellence in Teaching Mentorship Award* from the College of Behavioral and Social Sciences. In 2016 Dr. Blanchard was named the first holder of the Joel and Kim Feller Professorship. He was Co-Director of the Clinical Program from 2003-2005, served as Director of the Clinical Program from 2005-2012, and served as Chair of the Department of Psychology from 2012-2017. Since 2019 Dr. Blanchard has been an Associate Provost. Dr. Blanchard serves as a primary research mentor to graduate students.

Yevgeny Botanov, Ph.D., Assistant Clinical Professor and Assistant Director of Clinical Training (ybotanov@umd.edu)
Dr. Botanov received his doctorate in clinical psychology from the University of Kansas, completed his internship at Northwestern University Feinberg School of Medicine, and specialized in Dialectical Behavior Therapy through a fellowship at the Behavioral Research and Training Clinics at the University of Washington. Before joining UMD, he was an Assistant Professor at Millersville University and Penn State York. His professional interests explore effective and efficacious mental health interventions, especially for depression and suicide. Additionally, he is interested in clinical science literacy or how the (mis)understanding of science affects clinical practice for both consumers and clinicians. Dr. Botanov does not serve as a primary research mentor to graduate students.

M. Colleen Byrne, Ph.D., Clinical Professor & Director, Psychology Clinic (Phone 301-405-8159; colbyrne@umd.edu)
Dr. Byrne received her degree from Emory University in 1998. She completed her internship at the James A. Haley Veterans Hospital in Tampa, Florida. She pursued postdoctoral training with children and adolescents at the Beyond Words Center for Social Skills Training in Atlanta, Georgia. Dr. Byrne served as head of the child team at East Ridge Community Mental Health Center in Martinsburg, West Virginia. She joined the UMD faculty as the Psychology Clinic Director in 2001. Broadly, Dr. Byrne focuses on psychopathology and the emotional development of children, adolescents, and young adults. She practices psychotherapy from a combined interpersonal and cognitive-behavioral perspective. Dr. Byrne does not serve as a primary research mentor to graduate students.

Andrea Chronis-Tuscano, Ph.D., Professor (Phone 301-405-9640; achronis@umd.edu)
Dr. Chronis-Tuscano received her Ph.D. from the State University of New York at Buffalo and completed a clinical internship at the University of Chicago. She joined the faculty of the UMD in 2002. Dr. Chronis-Tuscano' research focuses broadly on understanding early predictors of developmental outcomes for children with Attention- Deficit/Hyperactivity Disorder (ADHD) and developing novel treatments which target these early risk and protective factors across the

lifespan. Much of this research has addressed issues related to maternal parenting and psychopathology (e.g., depression, ADHD). A secondary line of research seeks to examine the trajectory of young children displaying early behavioral inhibition, including the development of psychopathology, and to intervene by targeting key moderators of outcome (e.g., parenting and social relationships). Increasingly, Dr. Chronis-Tuscano's research utilizes hybrid effectiveness implementation designs in school and pediatric primary care settings using telehealth. Dr. Chronis directs the Maryland ADHD Program and SUCCEEDS College ADHD Clinic. Dr. Chronis-Tuscano serves as a primary research mentor to graduate students.

Christina Danko, Ph.D., Associate Clinical Professor and Program Director for the Master of Professional Studies in Clinical Psychological Science (cdanko@umd.edu)
Dr. Danko received her PhD in Clinical Psychology, Child track, from DePaul University in 2014 and completed an APA-accredited internship at Louisiana State University Health and Sciences Center. Dr. Danko completed a clinical postdoctoral fellowship at Mt. Washington Pediatric Hospital in Baltimore, Maryland, and a postdoctoral fellowship with Dr. Andrea Chronis-Tuscano at the University of Maryland. She joined the UMCP faculty as an Assistant Research Professor in 2017 and then as an Assistant Clinical Professor for the Master of Professional Studies in Clinical Psychological Science program in 2019. Dr. Danko's research at the Maryland ADHD Program investigates the impact of evidence-based interventions on the treatment and prevention of mental health disorders for young children and their families. She also supervises the clinical work of graduate student clinicians and teaches courses in the clinical psychology doctoral program. Dr. Danko does not serve as a primary research mentor to graduate students.

Andres De Los Reyes, Ph.D., Professor (Phone 301-405-7049; adlr@umd.edu).
Dr. De Los Reyes received his Ph.D. in 2008 from Yale University. He joined the faculty of the University of Maryland (UMD) in 2008, where he is currently a Professor of Psychology, and Director of the Comprehensive Assessment and Intervention Program (CAIP). His research seeks to improve our understanding of the discrepant results that commonly arise in mental health research. This is an area of research that he described in his 2024 book, *Discrepant Results in Mental Health Research* (Oxford University Press), and about which he teaches a class at UMD (PSYC459A: Discrepant Results in Mental Health Research). Dr. De Los Reyes has received funding for his work from the Institute of Education Sciences, National Science Foundation, and National Institutes of Health, and his articles have appeared in such journals as the *Psychological Bulletin*, *Psychological Review*, *Annual Review of Clinical Psychology*, and *Psychological Assessment*. He is a Fellow of the American Psychological Association (APA) and Association for Psychological Science. In 2013, he was a recipient of the *Distinguished Scientific Award for an Early Career Contribution to Psychology* from the APA. In 2022, he served as the *Fulbright Canada Research Chair in Mental Health* at the University of Regina. Dr. De Los Reyes served two terms as Editor of the *Journal of Clinical Child and Adolescent Psychology* (2017-2026). He was also elected to two terms on the APA's *Board of Educational Affairs* (BEA; 2017-2022), and he served as BEA Chair in 2019. He currently serves as an elected member of APA's *Publications and Communications Board* (2025-2031), Co-Chair (with Ye Tong) of the revisions to *The Standards for Educational and Psychological Testing* (2024-2028), and Chair of the *Coalition for Psychology in Schools and Education* (2024-2027). Dr. De Los Reyes serves as a primary research mentor to graduate students.

Lea Rose Dougherty, Ph.D., Professor and Director of Clinical Training (Phone 301-405-5464; ldougher@umd.edu)
Dr. Dougherty received her Ph.D. in Clinical Psychology from Stony Brook University. She completed her training with an APA-accredited internship at Yale University School of Medicine. Dr. Dougherty's research interests lie broadly in the examination of the etiology and course of depression from a developmental, life-span perspective. Within this domain, her research focuses on four areas: (1) an examination of the developmental origins of risk for depression; (2) understanding the phenomenology of depression and mood dysregulation in preschoolers and establishing empirically-based assessment approaches for affective disorders in very young children; (3) understanding the etiology, phenomenology, course, associated characteristics and neurobiological basis of irritability in youth; and (4) investigating the effects of early experience and stress on brain development. Dr. Dougherty has served as DCT of the Clinical Program since August 2018. Dr. Dougherty serves as a primary research mentor to graduate students.

Jessica Magidson, Ph.D., Associate Professor (Phone 301-405-5095; jmagidso@umd.edu)
Dr. Jessica Magidson received her Ph.D. in clinical psychology from the University of Maryland College Park in 2013. She completed her predoctoral clinical internship in Behavioral Medicine and an NIMH postdoctoral fellowship in Global Mental Health, both at Massachusetts General Hospital (MGH)/Harvard Medical School. She was subsequently an Instructor and then Assistant Professor at Harvard Medical School and on staff at MGH in Psychiatry before returning to join the faculty at UMCP in January 2018. She started as the Director of the Center for Substance Use, Addiction & Health Research (CESAR) in January 2023. She also directs her psychology lab, the Global Mental Health and Addiction Program, which promotes bidirectional learning and capacity building across local and global research sites. Her research focuses on the implementation of lay-delivered substance use interventions in resource-limited settings in the US and sub-Saharan Africa. She currently has six NIH-funded trials to evaluate peer-delivered behavioral interventions for substance use and medication adherence locally and globally. Dr. Magidson's teaching and clinical interests include the treatment of adult psychopathology using cognitive behavioral therapy and mindfulness-based interventions. Dr. Magidson serves as a primary research mentor to graduate students.

Ethan Mereish, Ph.D., Associate Professor (Phone 301-405-5874; emereish@umd.edu)
Dr. Mereish received his Ph.D. from Boston College in 2014. He completed his predoctoral clinical internship at Harvard Medical School and a T32 postdoctoral research fellowship at the Center for Alcohol and Addiction Studies at Brown University. Dr. Mereish directs the Lavender Lab at the University of Maryland. His NIH-funded research program focuses on understanding the effects of social, psychological, and cultural determinants of suicide, substance use, and other health outcomes for lesbian, gay, bisexual, transgender, and queer (LGBTQ+) and racially and ethnically minoritized youth and young adults. Specifically, his work examines the harmful effects of oppression-based stressors (e.g., discrimination) on mental health and substance use, and the mechanisms that help explain their impact. His research also identifies factors that promote resilience and resistance and develops accessible and culturally affirming interventions. His work is community-engaged and leverages multiple methodologies, including experimental, experience sampling, and qualitative methods, and is informed by intersectionality theory with a

grounded commitment to social justice and health equity. His current NIAAA-funded longitudinal study examines the impact of intersectional oppression-based stressors and structural oppression (e.g., structural racism and cisheterosexism) on substance use and mental health outcomes among racially and ethnically minoritized LGBTQ+ adolescents, as well as factors that mitigate these effects. Dr. Mereish serves as a primary research mentor to graduate students.

Alexander Shackman, Ph.D., Professor (Phone 608-358-5025; 301-405-9482; shackman@umd.edu)
Dr. Shackman received his Ph.D. in Biological Psychology with a distributed minor in Neuroscience from the University of Wisconsin-Madison in 2008. He subsequently completed postdoctoral fellowships in the Departments of Psychology and Psychiatry at Wisconsin. The mission of Dr. Shackman's lab is to have a deep impact on the fields of affective and translational neuroscience. To that end, the lab strives to perform innovative studies that can lead to important discoveries, to widely disseminate those discoveries, and to mentor trainees to become top-notch scientists and clinicians. Most of the research uses brain imaging techniques, such as fMRI, and is geared toward identifying the mechanisms that link individual differences in anxiety to the development of psychopathology. Other key techniques include peripheral physiology and behavioral assays, such as smart-phone-based experience sampling and economic games. The lab is particularly focused on characterizing the mechanisms by which anxiety alters the processing of threats and punishments in a way that enhances the likelihood of risk avoidance and behavioral inhibition. Clinically, this work promises to enhance our understanding of how emotional traits and states modulate risk, facilitate the discovery of novel brain-based endophenotypes and biomarkers, and set the stage for developing improved interventions. The lab provides an excellent opportunity for trainees to cultivate the skills necessary to secure positions at top research universities while working in a positive, supportive environment. Dr. Shackman serves as a primary research mentor to graduate students.

Henry Willis, Ph.D., Assistant Professor (hawillis@umd.edu)
Dr. Willis received his Ph.D. from the Clinical Psychology program at the University of North Carolina at Chapel Hill and completed an APA-accredited internship at Montefiore Hospital/Albert Einstein College of Medicine. Subsequently, he completed postdoctoral research training at Columbia University's School of Social Work and University of Pennsylvania's School of Social Policy and Practice, and he completed postdoctoral clinical training working with children and adults at Madison Park Psychological Services in New York City. Dr. Willis joined the faculty at UMD in 2023. His research interests include exploring the relationship between online and offline racial discrimination and mental health outcomes, understanding sociocultural protective factors (i.e., racial identity) and how they impact psychopathology within African Americans, creating cultural adaptations of evidence-based treatments, and utilizing mobile-health technology to increase access to mental health treatments for underserved populations. Dr. Willis serves as a primary mentor to research graduate students.

K. Licensure in Clinical Psychology: Professional Licensure Disclosure (Consumer Information and Disclosures, Title 4, Department of Education, 34 CFR 668.43)

Although state licensure is available in clinical psychology, the University of Maryland's program does not directly lead to such licensure upon graduation. The professional preparation

you receive in our program, however, will assist you in such pursuits. Students should consult with individual home state licensing boards or visit the Association of State and Provincial Psychology Boards (ASPPB) for further information (http://psybook.asppb.org/ https://asppb.net/licensure/ https://asppbcentre.org/snapshot/). You are welcome to contact the DCT with questions in this regard and we will do our best to assist you in your career planning.

Currently, the UMD Clinical Psychology Doctoral Program is accredited by both APA (American Psychological Association) and PCSAS (Psychological Clinical Science Accreditation System). APA accreditation is recognized in all 50 states as providing required education for psychology license eligibility. State Boards of Psychology determine training requirements for licensure and typically include post-doctoral training, supervision requirements, as well as examinations beyond the educational requirements, so a doctoral degree from UMD College Park in Clinical Psychology is not sufficient to meet licensure requirements in most states. Students should confirm state licensing requirements directly with the state they are interested in licensure. ASPPB (Association of State and Provincial Psychology Boards) has provided a resource of information here that they plan to update annually, though generally the most up to date information is available on the websites for individual state boards.

Typically, clinical psychology licensure entails: (1) completion of an approved education program; (2) completion of an APPIC (Association of Psychology and Postdoctoral Internship Centers) accredited full-time one year internship; (3) completion of a post-doctoral fellowship with supervised clinical experience as required by each state (some states do not require a post-doc); (4) passing the national (EPPP—Examination for Professional Practice in Psychology) and state oral and/or written examinations; and (5) completion of any additional state-specific licensure requirements (typically background checks and credential verifications, but some states have some specific training requirements as well).

UMD College Park clinical program graduates have successfully obtained licensure in many states. Please see the table below for information about how UMD College Park's program satisfies the educational requirements of each state. You should directly contact specific State Licensing Board(s) for the most accurate and up-to-date information on educational and other requirements for licensure. The information in this table focuses specifically on curriculum and training. States may impose other specific requirements not addressed in the summaries below. Notably, the UMD Clinical Psychology Doctoral Program currently meets educational licensing requirements in the state of Maryland.

Please see Appendix P (also available on our website **here**) for a state by state listing of our recent understanding of educational requirements and how well UMD College Park's clinical program fits with the educational requirements of each state. You should directly check the web sites of the State Licensing Board(s) you are interested in for the most accurate and up to date information on educational and other requirements for licensure, as there is no guarantee that our summary or ASPPB's is entirely accurate and up to date. The information in Appendix P focuses specifically on curriculum and training (there may be specific requirements of clinical hours, specific types of supervision hours, and other requirements not addressed in Appendix P).

III. CURRICULUM REQUIREMENTS

This section summarizes Department and Clinical Program requirements. As noted, current department requirements are described in detail in the Graduate Manual. In brief, the Department's requirements for graduate students include the following as of August 2025: Students must take two statistics courses (PSYC 601 and 602), one additional statistics course or

methods course, and three departmental core classes. Note: If a student takes two core courses in their specialty area (e.g., Child Psychopathology and Adult Psychopathology), only one can count toward the three core courses. The other two core courses must be in other specialty areas to demonstrate adequate breadth of knowledge in the field of psychology. Departmental core classes are denoted below.

A. Clinical Program Progress

Each student and their mentor are responsible for the student progressing through the Clinical Program in a timely manner. Keep in mind that **not all core or elective courses are offered every year** and some courses may be taken out of the sequence presented below. The sequence presented below (with the exception of the first year) is presented only for illustrative purposes. Although the model presented allows for completion of program requirements within the first four years (with internship in the fifth), on average students are in residence for five years with internship conducted in the sixth. Duration of training is often determined by a student's research focus and the time required to complete the thesis and dissertation research projects. **Please see Appendix D for a sample course schedule including requirements by year. Note: this sequence is subject to change based on course offerings.**

B. Sample Schedule

Reminder: Students funded by NRSA fellowships or graduate assistantship lines funded on a mentor's grant need to consult the DCT before registering for winter or summer courses, given constraints with tuition remission. Alert the DCT when an NRSA award is going to start, when the student will advance or has advanced to candidacy, and whether the student has formally been classified with residency in the State of Maryland by the University.

FIRST YEAR:

The first year of the Clinical Program primarily is designed to provide a general foundation in theory, methodology, quantitative methods, and relevant historical and current issues necessary to function in a scientifically oriented clinical training program. During this year, students enrolled in the Clinical Program typically take the following required courses:

PSYC 601 Quantitative Methods I
PSYC 602 Quantitative Methods II
PSYC 622 Research Methods in Clinical Psychology or **PSYC 798C**: Research Methods in Developmental Psychology or **PSYC 798D**: Secondary Data Analysis for Psychologists will be taken in the first or second year
PSYC 625 Psychological Assessment Methods (first year or summer)
PSYC 643 Ethics, Diversity, and Professional Issues in Clinical Psychology (previously called Ethical and Professional Issues in Clinical Psychology)
PSYC 799 Master's Research (5 credits in Summer)
PSYC 623 Child Development & Psychopathology OR **PSYC 624** Adult Psychopathology
PSYC 630 Behavioral and Cognitive Behavioral Interventions for Adults or **PSYC 632** Behavioral and Cognitive Behavioral Interventions for Children & Adolescents

FIRST YEAR Summer Course Registration: PSYC 625 (3 credits) and PSYC 799 (5 credits). *Note:* Students are required to complete a minimum of 6 credits total of PSYC 799 Master's Research prior to receiving the Master's Degree. All students should be registered for 8 credits in the summer unless they are not receiving full tuition remission (such as through grants or fellowships).

SECOND AND THIRD YEARS:

The second and third years of the Clinical Program are designed to provide the student with a graded series of diverse didactic and clinical laboratory experiences that broaden knowledge of the science of psychology generally and the substantive bases of clinical psychology specifically. The Clinical Program's educational objectives are achieved during these years through four overlapping elements, i.e., Coursework, Clinical Laboratory, Research and Clinical Competence, and the Qualifying Examination (i.e., TIE Project). The necessary coursework is described below. All other elements can be found in the remainder of the handbook.

Coursework

In addition to completion of departmental core courses to acquire breadth in the science of psychology, students enroll in the following required clinical core courses and Master's or Pre-Candidacy Research:

PSYC 623 Child Development and Psychopathology or **PSYC 624** Adult Psychopathology
PSYC 630 Behavioral and Cognitive Behavioral Interventions for Adults or **PSYC 632** Behavioral and Cognitive Behavioral Interventions for Children & Adolescents
PSYC 622 Research Methods in Clinical Psychology or **PSYC 798C**: Research Methods in Developmental Psychology or **PSYC 798D:** Secondary Data Analysis for Psychologists will be taken in the first or second year
PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (Fall 2020 onward); prior to Fall 2020 PSYC 612 Affective Science Perspectives on Temperament & Personality
PSYC 629 Clinical Laboratories
PSYC798Z Fundamentals of Social Psychology
PSYC798E Foundations of Cognition
PSYC 799 Master's Research
PSYC 898 Pre-Candidacy Research

SECOND YEAR Summer Course Registration: PSYC 629 Clinical Laboratory (3 credits) and PSYC 799 Master's Research (5 credits). *Note:* Students are required to complete a minimum of 6 credits of PSYC 799 Master's Research prior to receiving the Master's Degree. Once the Master's Degree is conferred on the student by the University, the student will register for PSYC 898 Pre-Candidacy Research (5 credits) under the mentor's section. All students should be registered for 8 credits in the summer unless they are not receiving full tuition remission (such as through grants or fellowships).

THIRD YEAR Summer Course Registration: PSYC 629B-E Clinical Laboratory (3 credits) and PSYC 629F Foundations of Supervision and Consultation (1 credit); PSYC 638 Externship

(DCT Dougherty's section # 0102) (1 credit) *if the student is starting their externship in the summer of their third year;* students should also register for 3 credits of research under their mentor's section (PSYC 799 or PSYC 898 or PSYC 899). Students should register for PSYC 799 if they did not complete the Master's Degree; PSYC 898 if they completed their Master's but have not advanced to candidacy; and PSYC 899 if they have advanced to candidacy. If a student is not doing a clinical externship, they should register for 4 Research Credits. All students should be registered for 8 credits in the summer unless they are not receiving full tuition remission (such as through grants or fellowships).

Note: **Students who have advanced to candidacy will be automatically enrolled in PSYC 899 for 6 credits in the Fall/Spring semesters until they defend their dissertations. In the summers, PSYC 899 is a variable credit course (1-8 credits). Students can assign the number of variable credits as outlined here.**

FOURTH AND FIFTH YEARS:
During students' fourth and fifth years, they will complete any remaining departmental/APA or clinical core courses and electives. Once students advance to candidacy, they are required to register for PSYC 899 Dissertation Credits (6 credits) during the Fall and Spring Semesters. They only need to register for 6 credits of PSYC 899 Dissertation Credits in the Summer Session if they are defending their dissertation during the Summer Session. If students have not advanced to candidacy in their fourth year, they should register for PSYC 898 Pre-Candidacy Research under their mentor's section. Fourth year students must register for at least 1 credit (1-3 credits) of PSYC 629 Clinical Laboratory during the fall and spring semesters as all fourth-year students remain actively engaged in aspects of clinical lab (either through clinical supervision, peer supervision or consultation training). Fifth year students would also need to register for PSYC 629 if they are involved in Clinical Laboratories (clinical supervision, peer supervision, consultation). If students are on Externship, they should register for one credit of PSYC 638 Externship.

FOURTH and FIFTH YEAR Course Registration:

PSYC	Complete any remaining Departmental/Area/Clinical Core Classes or Elective Courses
PSYC 899	Dissertation Credits
PSYC 629	Clinical Laboratories
PSYC 638	Externship

FOURTH YEAR Summer Course Registration: PSYC 629 Clinical Laboratory (3 credits); PSYC 638 Externship (DCT Dougherty's section # 0102) (2 credits); PSYC 899 (3 credits). *Note:* If students have not advanced to candidacy, they should register for PSYC 898 Pre-Candidacy Research (3 credits) under their mentor's section. If students are not involved in a Clinical Externship, they should register for 5 research credits under their mentor.

FIFTH YEAR Summer Course Registration: If students are going on Clinical Internship and not engaging in clinical training at the UMD or external placements in the summer of the fifth year, they do not register for any summer session courses. If students are remaining for a sixth year, they register for PSYC 629 Clinical Laboratory (3 credits), PSYC 638 Externship (DCT

Dougherty's section # 0102) (2 credits), and PSYC 899 (3 credits). If students are not involved in a Clinical Externship, they should register for 5 research credits under their mentor.

STUDENTS ON CLINICAL INTERNSHIP: The Graduate School does not require students to register in the summer unless they are graduating in the summer. The departmental requirement is that students on internship must be registered for 1 internship credit (PSYC 639) in the Fall and Spring semesters only, which also fulfills the Graduate School's requirement of continuous registration of at least 1 credit. If the student who is on internship has not yet defended his/her/their dissertation, then the student will be automatically registered for PSYC 899 (6 credits) in the Fall and Spring semesters until they defend their dissertation (in addition to registering for PSYC 639 1 credit for internship each semester).

For which section of research should you register?
PSYC 799: Master's Research
PSYC 898: Pre-advancement to candidacy research
PSYC 899: Advanced to candidacy research/dissertation

*Students should sign up for research credit under their Advisor's section. See this *link* to determine Advisor's section number.

NOTE: *A minimum grade of B is required for satisfactory completion of clinical core courses. A grade of B- or less will result in a formal review of the student's clinical development and could result in dismissal from the program and/or establishment of a faculty committee to review and monitor the student's progress. The University's current requirement of a minimum overall GPA of 3.0 for graduate degrees is unchanged.*

Students must complete Clinical Program and Department core courses (statistics/methods plus 3 other core courses) before advancement to candidacy (typically at the end of the third year). The Department guarantees that core courses will be offered according to the schedule below. With this schedule in mind, students are encouraged to plan accordingly to ensure that all of the required courses are completed by the end of the fourth year. Because the Clinical Program does not control when the department core courses are offered, a good rule is for students to take at least one department core course whenever these courses are offered during each semester of the second and third year (this will allow department and APA requirements to be achieved in a timely manner and avoid problems with deadlines and course availability later in training). At times, it may be necessary to take a course in the fourth year.

C. Schedule of Department Courses (although this is subject to change):

**Departmental Core Courses are denoted with an asterisk*

Fall Semester:
***PSYC 601** Quantitative Methods I
PSYC 614 Emotion/Biology
***PSYC 623** Child Development and Psychopathology or ***PSYC 624** Adult Psychopathology
***PSYC 798Z** Fundamentals of Social Psychology (2 credits)

PSYC 798D: Secondary Data Analysis for Psychologists (even year fall semesters)
Spring Semester:
***PSYC 602 Quantitative Methods II*PSYC 607 (formerly PSYC 798E)** Foundations of Cognition (2 credits) **PSYC 630** Behavioral and Cognitive Behavioral Interventions for Adults or **PSYC 632** Behavioral and Cognitive Behavioral Interventions for Children & Adolescents
PSYC 798C: Research Methods in Developmental Psychology (odd year spring semesters)

D. Graduate Program and APA Requirements

Department Core Courses. To ensure breadth of psychological knowledge, the Psychology Department requires a minimum of six courses. This requirement consists of three departmental core courses (one of which can be a clinical core course if two clinical core courses are taken) plus two quantitative courses (PSYC 601 and 602) and a research methods class (clinical students take PSYC 622, 798C or 798D). **These courses must be completed before admittance to candidacy**. In addition, because the Clinical Program is accredited by the American Psychological Association (APA), students must be able to demonstrate competence in a variety of areas of psychology other than clinical psychology.

APA requires that all students obtain a breadth of ***Discipline Specific Knowledge (DSK)*** in the following areas: History and Systems of Psychology, Affective Aspects of Behavior, Biological Aspects of Behavior, Cognitive Aspects of Behavior, Developmental Aspects of Behavior, Social Aspects of Behavior, Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas, Research Methods, Quantitative Methods, and Psychometrics. Students can obtain this knowledge through a variety of learning experiences.

Students must obtain foundational- and graduate level-knowledge in the following areas: Affective, Biological, Cognitive, Developmental, and Social (ABCDS) aspects of behavior. Foundational level knowledge can be obtained prior to the start of our graduate program in the above discipline-specific knowledge areas by either (1) a grade of B or greater in an undergraduate seminar course in the discipline-specific knowledge area or (2) a score of 70% or greater on the GRE Psychology Subject Test in the discipline-specific knowledge area. The student must provide documentation and seek approval of the foundational knowledge (i.e., transcript, course syllabus, GRE Psychology Subject Test Results) to the DCT. All requests must be requested in writing (See **Curriculum Request Form, Appendix E);** once approved, the approved request will be included in the student's academic record.

The following courses fulfill APA Discipline Specific Knowledge (DSK). One course may cover multiple knowledge areas; however, the two areas must be formally evaluated and graded separately, with supporting documentation. There are currently two ways for a course to count for two knowledge areas. For example, PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences is specifically designed to cover two areas, Affective Aspects of Behavior and Biological aspects of behavior. The course does this by clearly delineating in the syllabus how each area is separately addressed, and students in the course are evaluated separately and get one grade for each area. The second way a course can count for more than one area applies to courses that have a developmental focus but count for a non-developmental DSK area. For example, PSYC 819D Attachment Across the Lifespan: Theory, Research, and Clinical Implications counts in the Social Aspects of Behavior area but has a developmental focus. In order to also count in the Developmental Aspects of Behavior area, a student must complete our program's Developmental Course Overlay, which is an exam

administered and graded by the clinical faculty. This allows the program to formally evaluate and provide a grade for the developmental area that is added to the student's file, while the grade in the course, reflected on the student's transcript, documents performance in the other DSK area.

Students should choose courses with the assistance of their mentors and the DCT to select the training plan that best fits the student's training needs/goals. Students must fulfill APA requirements, as well as the Departmental Requirements detailed above. Departmental Core Courses are denoted with an asterisk*.

Note: All DSK and clinical core courses are required to include all primary sources on the syllabus so that the UMD Clinical Program and the accrediting bodies (APA, PCSAS) can evaluate adequate coverage. Primary sources must represent the current state of the area of study (i.e., sufficient coverage of primary sources from the past 5-10 years). Each year, the DCT will review course syllabi to ensure this criterion is met. Prior to registering for a course, please consult with the DCT to confirm the course continues to meet this requirement.

1. **History and Systems, including the origins and development of major ideas in the discipline of psychology:** Students meet the Foundational- and Graduate-level knowledge in History and Systems of Psychology by passing the following courses (and passing the H&S evaluations within each coure) and passing the History and Systems of Psychology assessment/evaluation as part of the TIE Project (detailed below):
   PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (Fall 2020 and after) or PSYC 612 Affective Science Perspectives on Temperament and Personality (prior to Fall 2020)
   PSYC622 Clinical Research Methods or PSYC 798C or PSYC 798D
   *PSYC 623 Child Development and Psychopathology
   *PSYC 624 Adult Psychopathology
   PSYC 625 Assessment
   PSYC 630 Adult Interventions
   PSYC 632 Child Interventions
   PSYC 643 Ethics, Diversity and Professional Issues of Clinical Psychology

   In each of these courses, readings covering History and Systems are integrated across the classes. H&S will be evaluated in each of these classes as outlined in their syllabus and evaluated as part of the third year TIE project (detailed below).

2. **Affective Aspects of Behavior, including topics such as affect, mood, and emotion:** *PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences. (Prior to Fall 2020, students met the Foundational- and Graduate-level knowledge in Affective Aspects of Behavior by taking *PSYC 612 Affective Science Perspectives on Temperament and Personality.)

3. **Biological Aspects of Behavior, including multiple biological underpinnings of behavior such as neural, physiological, anatomical, and genetic aspects of behavior:** Options are available to fulfill Foundational and Graduate Level Knowledge in the Biological Aspects of Behavior.

*PSYC 606 Human Biopsychology (foundational and graduate level)
*PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (foundational and graduate level)

4. **Cognitive Aspects of Behavior**, **including topics such as learning, memory, thought-processes, and decision-making**: Several options are available to fulfill foundational and graduate level knowledge in Cognitive Aspects of Behavior.
   *PSYC 607 Human Learning and Cognitive Psychology (foundational and graduate level knowledge)
   *PSYC798E Foundations of Cognition (foundational and graduate level knowledge)
   PSYC 757 Developmental Cognitive Neuroscience (graduate level knowledge)
   *PSYC 789K Social and Cognitive Aspects of Behavior (Foundational and Graduate level) (no longer offered as of 2025)
   PSYC 743 Social Cognition (Graduate level)
   EDHD 721 Cognitive Development & Learning (foundational and graduate level knowledge)
   EDHD 722 Learning Theory and the Educative Process (Foundational and Graduate level knowledge)
   EDHD 760 Advanced Educational Psychology (Graduate level knowledge)
   EDHD 775 Physiological Development and Neuroscience (Graduate level knowledge)

5. **Developmental Aspects of Behavior, including transition, growth, and development across an individual's life and that covers more than one developmental period (e.g., infancy, childhood, adolescence, adulthood, or late life)**: Several options are available to fulfill foundational and graduate level knowledge in Developmental Aspects of Behavior. Some courses cover both foundational and graduate level knowledge in developmental aspects of behavior. Other courses can fulfill the graduate level knowledge only if the student completes a Developmental Course Overlay, which is an exam that is administered and graded by the clinical faculty while a student is enrolled in specific approved courses denoted by ^{DCO}. Essentially, this allows the faculty to separately evaluate the student's performance in the Developmental DSK and show that the student has demonstrated knowledge in this area with a grade of B or better, through a graded evaluation independent of the grading in the graduate course that covers a separate DSK area. Students must notify the DCT by email when registering for one of these courses to request approval to be evaluated using the Developmental Course Overlay. For more information, please discuss with your mentor and the DCT.
   *PSYC 611 Advanced Developmental Psychology (foundational and graduate level)
   *PSYC 623 Child Development and Psychopathology (foundational and graduate level)
   ^{DCO}PSYC 757 Developmental Cognitive Neuroscience (graduate level)
   ^{DCO}PSYC 819D Attachment Across the Lifespan: Theory, Research, and Clinical Implications (graduate level)
   EDHD 690 Foundations of Human Development (foundational and graduate level)
   ^{DCO}EDHD 720 Social Development and Socialization Processes (graduate level)
   ^{DCO}EDHD 721 Cognitive Development & Learning (graduate level)
   ^{DCO}EDHD 750: Culture Context and Development (graduate level)

6. **Social Aspects of Behavior,** including topics such as group processes, attributions, discrimination, and attitudes. Several options are available to fulfill foundational and graduate level knowledge in Social Aspects of Behavior.
   *PSYC 604 / PSYC 798Z Fundamentals of Social Psychology (Foundational and Graduate level)
   *PSYC 789K Social and Cognitive Aspects of Behavior (Foundational and Graduate level) (no longer offered as of 2025)
   PSYC798P Stereotyping and Prejudice (Graduate level)
   PSYC 798 Graduate Seminar in Social Psychology, Attraction and Relationships (Graduate level)
   PSYC 743 Social Cognition (Graduate level)
   PSYC 819D Attachment Across the Lifespan: Theory, Research, and Clinical Implications (Graduate level)
   PSYC798P: Stereotyping and Prejudice Graduate Seminar (Graduate level)EDHD 720 Social Development and Socialization Processes (Foundational and Graduate level knowledge)
   EDHD 750: Culture Context and Development (Graduate level)

7. **Quantitative Methods, including topics such as quantitative, mathematical modeling and analysis of psychological data, statistical description and inference, univariate and multivariate analysis, null hypothesis testing and its alternatives, power, and estimation:** All students fulfill discipline specific knowledge in quantitative methods by taking *PSYC 601 Quantitative Methods I and *PSYC 602 Quantitative Methods II.

8. **Research Methods, including topics such as strengths, limitations, interpretation, and technical aspects of rigorous case study; correlational, experimental, and other quantitative research designs; measurement techniques; sampling; replication; theory testing; qualitative methods; mixed methods; meta-analysis; and quasi-experimentation:** Options are available to fulfill discipline specific knowledge in Research Methods:
   PSYC 622 Clinical Research Methods
   PSYC 798C Research Methods in Developmental Psychology
   PSYC 798D Secondary Data Analysis for Psychologists

9. **Psychometrics, including topics such as theory and techniques of psychological measurement, scale and inventory construction, reliability, validity, evaluation of measurement quality, classical and contemporary measurement theory, and standardization:** All students fulfill discipline specific knowledge in Psychometrics by taking
   PSYC 625 Psychological Assessment: Psychometric Principles, Testing & Behaviors and/or PSYC 629A Clinical Laboratory: Foundations of Clinical Assessment and Intervention (prior to 2024)
   PSYC 629B Clinical Laboratory: Assessment Practicum

As noted above, the Department strives to offer core courses according to the schedule outlined in section III. However, because the Clinical Program does not control when the above

departmental core courses are offered, a good rule is for students to take at least one of the above courses whenever they are offered during each semester of the second, third, and fourth year. Following this will allow department and APA requirements to be achieved in a timely manner and avoid problems with deadlines and course availability later in training).

A student who has obtained graduate credit for a similar graduate course(s) at another institution before entering the UMD may request acceptance of that course as meeting a core requirement. The substitution must be approved by the area(s) offering the course in question.

As described in the Graduate Handbook, other options exist for meeting department core requirements. If interested, that material should be reviewed, and potential options discussed with the mentor.

E. Graduate Program Requirements for Students Entering with Advanced Standing (Transfer of Credit)

Please see the Graduate School's Transfer of Credit Policy. Students admitted to the Clinical Program with a Master's degree may satisfy departmental core requirements upon approval of transferred equivalent course of up to 6 credits. The determination that a course is equivalent to a core course offered in the Clinical Program is to be made by the faculty member who regularly teaches that particular core course followed by approval by the Graduate Committee. If approved, the student may be allowed to take 4 rather than 6 core courses instead. The 4 core courses must include the two quantitative courses (PSYC 601 and PSYC 602) and 2 additional core courses outside the student's specialty area.

In the case of the quantitative core courses, the student's proficiency will be evaluated by quantitative faculty (those regularly teaching 601 and 602). The quantitative faculty will administer an examination, and based on the student's performance will recommend:

1. That the student take both 601 and 602, or
2. That the student take one of them, or
3. That the student be exempted from both 601 and 602.

Students will not be exempted from the third required quantitative/methodology course (satisfied within the clinical area by PSYC 622, PSYC 798C or PSYC 798D). Students entering the program with a Master's Thesis defended at another institution may also potentially redefend this Master's Thesis at UMD to meet the Master's thesis requirement. See below **"Redefending Master's Thesis Awarded by Another Institution".**

Students who completed the UMD Master of Professional Studies (MPS) in Clinical Psychological Science Program. The UMD MPS in Clinical Psychological Science is a terminal Master's degree program focused on developing students' research and clinical skills within an evidence-based clinical science framework. Two courses (6 credits) taken in the MPS program can be waived–pending review and approval by the DCT and Director of Graduate Studies. Students also have to complete at least a minimum of 30 credits (including at least 6 credits of PSYC 799) to earn the Master of Science Degree in Psychology. The remaining 24 credits will typically consist of departmental core and clinical core courses.

IV. BEYOND COURSEWORK: OTHER PROGRAM AND DEPARTMENTAL REQUIREMENTS

A. Clinical and Research Issues Seminar (CRIS) Series

The field of clinical psychology is so broad that no Clinical Faculty can hold expertise in all of its many facets. Furthermore, it is important for development as a graduate student in the UMD Clinical Program and as a clinical psychologist that there are opportunities for faculty and students to come together and discuss issues of importance for the field. The proximity of institutions such as the National Institute of Mental Health and the American Psychological Association means that interesting speakers visit the Washington D.C. area from all parts of the world. In addition, the Clinical Program invites speakers of particular interest to faculty and students. Suggestions for speakers for the CRIS series are always welcome and should be addressed to the Assistant DCT. CRIS meetings will be held approximately bi-weekly throughout the fall and spring semesters. Meetings are held monthly on Mondays 1-2pm (the schedule of CRIS presentations will be distributed at the beginning of each semester and can be obtained from the Clinical Program Office). Attendance is mandatory, so plan other commitments (including externship days) accordingly. Students should reserve this day and time slot on non-CRIS meeting weeks for meetings with their student committees.

B. Clinical Case Conference (takes place within the context of CRIS)

Presentation of clinical work before a forum of one's peers is a common work experience for many clinical psychologists. Furthermore, the opportunity to hear other clinicians conceptualize and present case material is an important learning experience. As part of the clinical training at the UMD, all students present one clinical case. Clinical case conferences are part of the yearly CRIS schedule. Attendance is mandatory, so plan other commitments (including externship days) accordingly.

C. Research Competence and the Master's Thesis

The department requires demonstration of research competence, which is an evaluation of the student's ability to function as a clinical researcher and includes demonstration of designing, conducting and defending a Master's Thesis. Research Competence also includes active engagement in research with the mentor, authorship or presentations at regional or national conventions, satisfactory research evaluations, and satisfactory demonstration of professional competence and research ethics. This requirement should be met by the fifth semester in the Clinical Program (Fall of the 3rd year). Meeting this goal ensures timely progress toward completing the TIE Project, proposing and defending the dissertation, and completing the clinical internship.

D. Qualifying Examination/Transition to Independence and Expertise (TIE) Project

The Clinical Program's Qualifying Examination consists of the **Transition to Independence and Expertise (TIE) Project.** The TIE Project is a training mechanism that facilitates the transition from the role of a trainee who requires substantial guidance and supervision from their mentor(s), to the role of an independent investigator capable of designing, executing, and defending a dissertation project. The TIE Project is an evaluative educational experience that integrates at least two content areas that have been covered in students' coursework and research and fulfills APA's requirement in **Advanced Integrative Knowledge in Scientific Psychology.** Basic content areas include biological, cognitive, social, affective, and developmental science. In addition, the TIE Project is an evaluative educational experience for APA's **History and Systems of Psychology**. History and Systems of Psychology is infused

across several core courses in our Clinical Doctoral Program (Ethics, Assessment, Child Development and Psychopathology, Adult Psychopathology, Child Interventions, Adult Interventions, and Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences) and is evaluated as part of the TIE Project.

Goals of TIE Project:

- Promote development of student's area(s) of expertise
- Promote advanced integrative knowledge in the student's clinical research program
- Foster an understanding of the historical context, including the development of major ideas that are addressed in the TIE Project
- Promote critical thinking
- Facilitate transition to the independence required to design, execute, and defend a dissertation project.
- Promote skills required to function as a clinical scientist (e.g., grant or manuscript writing, data analysis, generating research questions).
- Provide training on how to receive and respond to peer review commentary (e.g., as one would expect to do on a manuscript or grant submission).
- Create a procedure for which the "end product" will be an independent piece of scholarship (e.g., manuscript/training grant submission/conference presentation).

E. Timeline for Meeting Program Requirements

YEAR ONE
Statistics and required clinical core courses completed. Active engagement in research within the mentor's lab should lead to development of Master's Thesis ideas by the end of this year. In the summer after year one, student will begin clinical assessment training in the UMD Psychology Clinic.

YEAR TWO
Clinical and Departmental core courses should be taken each semester. Clinical Laboratory should be taken in the fall, spring, and summer terms. To meet the Research Competence requirement by the Fall semester of their third year, the Master's Thesis proposal should be approved *no later* than the Fall semester of the second year. We encourage students to complete their Master's Thesis by the summer of the second year and no later than the fall of the third year.

YEAR THREE
Any remaining Clinical and Departmental core courses should be taken. Clinical Laboratory should be taken in the fall, spring, and summer terms. During Year 3, students should complete their TIE Project. The TIE Project is a piece of scholarship that will typically begin after defense of the Master's Thesis but before the proposal stage of the Dissertation. We encourage students to complete the Master's Thesis requirement no later than the start of Year 3. This timeline allows for completion of the TIE Project in a timeline that does not conflict with other program elements such as pursuit of clinical externship experiences and proposal of the Dissertation project. Students should typically expect to complete the TIE Project during the Spring/Summer of Year 3. However, for some self-initiated projects proposed by students (e.g., training grant proposal that, if funded, may represent the student's dissertation) a TIE Project may commence earlier in training. Under these circumstances, the student works with their mentor to plan out an appropriate timeline for the project, and the student seeks approval of this timeline at the TIE Project Proposal stage.

YEAR FOUR or YEAR FIVE
Approval of dissertation proposal. The dissertation proposal must be approved before applying for the pre-doctoral internship. The deadline for having the dissertation proposal fully approved (i.e., with all committee members' signatures) is October 1 in the fall semester in which the student applies for internship. Students not having an approved proposal by October 1 will not be allowed to apply for internship. Therefore, students should allow ample time for both the dissertation defense and any potential revisions required by the dissertation committee. The Clinical Program strongly recommends that dissertation data collection be complete prior to leaving for internship. Ideally, the student will defend the dissertation prior to internship.

YEAR FIVE or YEAR SIX
Internship completed. Dissertation defended.

F. MASTER'S THESIS

The *Graduate Student Handbook and website* should be consulted for information and forms. At the time of the Thesis proposal meeting, the committee will complete the Psychology Department's Thesis/Dissertation Proposal Form. Students must also complete the Nomination of Thesis or Dissertation Committee Form and **submit to the Graduate Office at least six weeks prior to the scheduled defense.** Upon approval of this form, additional forms will be generated by the Registrar's Office, which will be sent to the student and chair. The Graduate Studies Office can also provide a copy of *Graduate School Requirements for Theses and Dissertations* which explains the required style, format of the thesis and gives clear examples to guide the preparation of the material for acceptance by the Graduate School. Thesis and dissertation proposals should be set up in the same style as the final product.

The following departmental guidelines apply:

1) It is expected that the research topic is directly related to the research program and/or interests and expertise of the mentor. This ensures that the mentor: (a) has both the interest and expertise relevant to the research project; (b) can help locate and interpret

relevant literature; and (c) can anticipate the methodological and practical problems associated with completing the research.

2) Discussion and familiarity with the mentor's research program will assist in designing an appropriate proposal.
3) The schedule for conducting the project should reflect a realistic estimate of the time required to recruit a sample, carry out the study, obtain the necessary measures, analyze the data and prepare the report. Problems to be anticipated include, for example, sampling difficulties, equipment availability, securing and maintaining cooperation from community agencies, securing Institutional Review Board (IRB) approval, and the availability of faculty to serve as committee members. Some have suggested that to arrive at a realistic schedule, plot out a feasible timeline and multiply it by three. Try to stick to the timetable as much as possible. If progress is not being made on the thesis each week or deadlines are being missed, consultation with the mentor is necessary.
4) The final product should be written in a style, format, and length commensurate with top journals in clinical psychology or a related field and/or the student's particular subdiscipline. In doing so, this will require the student to focus on the core arguments for their proposed work. This should be placed in the context of the literature most relevant to their research question (as would be seen in a journal article). Practically, this means the student will not be expected to provide an exhaustive literature review or a discussion on any information that might be perceived by a journal reviewer as generally relevant but not specific to the current study.

Master's Theses should adhere to the following guidelines:

Proposal Stage

1. Title
2. 500-1000 word introduction that includes specific aims and hypotheses
3. Full method section
4. Data Analysis Plan
5. Design Considerations Section
6. References
7. Appendices, if necessary
8. Tables and Figures are optional and can be included as needed for clarity such as outlining order of study procedures.

The guidelines outlined above are intended to give students/mentors the most flexibility in what the end product is so it is the most scientifically rigorous it can be. We intend the proposal to be a "sketchbook" where the committee agrees on the general plan so the student can move forward. Given that the proposal is a "contract" in some respects, the more minimal we keep it, the more leeway students and faculty have in creating the final product that will be submitted for publication. Faculty/students can take into account journal outlet, etc. in developing the final project. **The Master's Thesis proposal and defense can be held in the same meeting, with approval of the research mentor.**

Defense Stage

For the defense the manuscript should be written in the format of a full-length article for an appropriate peer reviewed journal. While there are no firm page requirements, full theses will likely be between 25 and 35 pages (including the body of the manuscript, references, and Tables/Figures).

Scheduling the meetings to defend the thesis is the student's responsibility. Time should be allowed to coordinate schedules, arrange a room, and submit written materials to the committee at least ten (10) working days prior to the meeting. A committee consisting of three faculty members from the department will make a judgment concerning the Master's Thesis. At least one of these faculty members must be the mentor. The procedures for scheduling such a review should be discussed with the mentor. The Master's Thesis Committee must evaluate the thesis and complete the departmental forms following the thesis defense meeting; the signed forms and a copy of the Master's Thesis must be submitted to the Graduate Studies Office (PSYCPhD@umd.edu).

Earning a Master's Degree

The Clinical Doctoral Program does not offer a terminal Master's Degree but students may earn a Master's Degree along the way toward the doctoral degree. Once the Master's Thesis has been successfully defended, a student may apply for the Master's Degree (i.e., Master of Science in Psychology). The degree requires 30 credits: the research thesis (PSYC 799 6 credit hours) and 24 course credit hours, including three quantitative courses (PSYC 601, PSYC 602, and PSYC 622) and other departmental core and clinical program core courses. The 24 course credit hours would typically involve the first 24 credit hours that students earn toward the doctoral degree. When a student anticipates graduating in a given semester, they should apply for graduation via Testudo by the graduation deadline for that semester. Important Graduation Forms and Deadlines are sent by the Graduate Office every semester. All forms must be routed to the Graduate Office for processing and departmental approval. The student should follow these deadlines in order to graduate in that semester. If a graduation deadline is not met, the graduation application along with its submitted associated forms, will roll over to the next semester until all requirements are completed.

Redefending Master's Thesis Awarded by Another Institution

Students entering the program with a Master's Degree for which they successfully defended a Master's Thesis may potentially redefend this Master's Thesis at UMD to meet the Master's Thesis requirement of demonstrating Research Competence. To do so, students should speak with their advisor about the suitability and rigor of their prior Master's Thesis to a Clinical Psychology Doctoral Program. If given approval to proceed, students should contact departmental administrators to inform them of this plan and to obtain the most recent version of the "**Redefending Master's Thesis" form (Appendix F**). Students should then form a Master's Thesis committee consisting of their advisor and two other faculty and schedule a time and a location for the defense. Two weeks before the defense, students must submit the thesis document to committee members for review as originally written; students may not edit a previously written thesis at all before re-defending the thesis at UMD. However, students may make new slides for their defense presentation. If the committee approves the previously defended Master's Thesis, students will submit the "Redefending Master's Thesis" form, signed

by all three committee members, to the department and this will be kept in the student's academic file to demonstrate completion of the Master's Thesis component of research competence. If students would also like to be awarded a Master's Degree from UMD, instead of just meeting departmental research competence requirements, they should keep in mind that they must first complete all coursework, including 6 credits of PSYC 799, and that there will be additional forms to complete. They should reach out to departmental administrators to obtain copies of the most up to date forms and should plan to submit these forms at least six weeks before the planned defense date.

G. CLINICAL AREA'S QUALIFYING EXAMINATION

Transition to Independence and Expertise (TIE) Project. The Clinical Program's Qualifying Examination consists of the **Transition to Independence and Expertise (TIE) Project.** The TIE Project is a training mechanism that facilitates the transition from the role of a trainee who requires substantial guidance and supervision from their mentor(s), to the role of an independent investigator capable of designing, executing, and defending a dissertation project. The TIE Project provides an evaluative educational experience that integrates at least two content areas that have been previously covered in students' coursework and research and fulfills APA's requirement in **Advanced Integrative Knowledge in Scientific Psychology.** Basic content areas include biological, cognitive, social, affective, and developmental science. In addition, the TIE Project is an evaluative educational experience for APA's **History and Systems of Psychology**. History and Systems of Psychology is infused across several core courses in our Clinical Doctoral Program (Ethics, Assessment, Child Psychopathology, Adult Psychopathology, Child Interventions, Adult Interventions, and Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences) and is evaluated as part of the TIE Project.

The TIE Project aims to promote development of student's area(s) of expertise; promote advanced integrative knowledge in the student's clinical research program; foster an understanding of the historical context, including the development of major ideas that are addressed in the TIE Project; promote critical thinking; facilitate transition to the independence required to design, execute, and defend a dissertation project; promote skills required to function as a clinical scientist (e.g., grant or manuscript writing, data analysis, generating research questions); provide training on how to receive and respond to peer review commentary (e.g., as one would expect to do on a manuscript or grant submission); and create a procedure for which the "end product" will be an independent piece of scholarship (e.g., manuscript/training grant submission/conference presentation).

TIE Timeline. The TIE Project is a piece of scholarship that will typically begin after defense of the Master's Thesis but before the proposal stage of the Dissertation. We encourage students to complete the Master's Thesis requirement no later than the start of Year 3. This timeline allows for completion of the TIE Project in a timeline that does not conflict with other program elements such as pursuit of clinical externship experiences and proposal of the Dissertation project. Students should typically expect to complete the TIE Project during the Spring of Year 3 or the Summer preceding Year 4. However, for some self-initiated projects proposed by students (e.g., training grant proposal that, if funded, may represent the student's dissertation), a TIE Project may commence earlier in training. Under these circumstances, the student works with their mentor to plan out an appropriate timeline for the project, and the student seeks approval of this timeline at the TIE Project Proposal stage. *Note:* Students must successfully propose the TIE Project before

starting an external clinical placement (i.e., 2-day clinical placement). Exceptions can be requested to the Director of Clinical Training.

Procedure for TIE Project

1. *Identify and delineate area(s) of expertise:* In consultation with the student's mentor, the TIE Project begins with the student successfully articulating the area(s) of expertise that will be promoted via the project. The term "successfully articulating" denotes an ability to describe, in relatively few words, the background, rationale, and scope of the student's research project and area of expertise. The student will submit the "TIE Project Proposal Form" (detailed below), which includes a statement (ideally 500 words or less) that describes the research topic/area of expertise, identifies the two or more content areas (biological, cognitive, social, affective, and developmental sciences) that will be integrated within the project, and outlines the timeline for project completion.
2. *Project proposal:* Following the delineation of the student's area of expertise, the student, in collaboration with their mentor, identifies a project that falls within the aims and scope of the student's areas of expertise and serves as an advanced integrative knowledge educational experience. The student identifies 2 Reviewers. Reviewers should be informed that they will be asked to provide feedback on the student's TIE Project (e.g., similar to what they would complete for manuscript or grant reviews). At least one of the 2 Reviewers should be departmental faculty. The other Reviewer can be an outside faculty member. . In circumstances in which the student and Mentor see fit to select Reviewers from outside of the University of Maryland (e.g., student's area of expertise falls outside the scope of faculty available to serve as Reviewers), the student should consult the mentor for approval. The student uses the **"TIE Project Proposal Form" (Appendix G)** to describe the project. Students should send their mentor and 2 Reviewers the "Tie Project Proposal Form" for their review and approval. In approving the project, the committee should consider whether the project fulfills the following criteria: (a) facilitates the student's transition to independent scholarship (i.e., ability to complete the Dissertation); (b) fits the student's stage of professional development; (c) can be feasibly executed within the proposed time frame; and (d) articulates the content areas that will be included as part of the Advanced Integrative Knowledge requirement.
3. *Project Format:* The following formats are examples of acceptable TIE Projects: (a) *Manuscripts targeted for publication in a peer-reviewed journal* (e.g., empirical paper, qualitative review, quantitative review, or theory paper); or (b) *Grant application targeted for submission to a funding body,* including NSF Doctoral Dissertation Research Improvement Awards, NIH National Research Service Award (NRSA) F31, NIH Dissertation Award R36, and private foundation grants (e.g., Ford Foundation Fellowship). The NSF Graduate Research Fellowship application is not an acceptable format. Private foundation grants also vary in their format and require approval from the DCT. If a project option that a student wishes to pursue does not fit the options above, the student must request approval from the Director of Clinical Training.
4. *Project Timeline.* Within the "TIE Project Proposal Form," the student works with their mentor to create a timeline for completing the TIE Project, including intermediate benchmarks to ensure that the project progresses in a timely fashion. These benchmarks may include drafting the Introduction for a manuscript or completing the "Approach" section of a grant application. During this period, the student has the ability to solicit feedback or advice from the mentor.

5. *Submitting TIE Project Proposal.* The student will submit the "TIE Project Proposal Form" to his or her TIE Project Committee members via email for approval. Committees also have the option to meet in person to discuss the proposal. For instance, if any committee member has concerns, the committee member can alert the student's mentor, and the Committee will meet to discuss the proposal. The student's mentor will sign and date the form verifying that the Committee approved the proposal. The "TIE Project Proposal Form" must be submitted to the Graduate Studies Office (PSYCPhD@umd.edu).
6. *TIE Project Submission:* The student independently submits their TIE Project for evaluation by the mentor and two Reviewers. As an Appendix to the TIE Project, the student will detail the historical context of the major ideas that are covered in the student's TIE Project (typically no more than 1-page).
7. *Review process:* Students submit the TIE Project to their mentor and two Reviewers for evaluation. Reviewers will be given one month to complete their reviews. Reviewers submit their evaluations to the student and the mentor.
8. *Response to peer commentary:* A key component of the TIE Project involves providing the student with training in not only preparing and submitting scholarly work, but also responding to peer commentary about this work. To this end, included in the TIE Project is an expectation that the student complete a revised document that addresses the Reviewers' and mentor's feedback. **The student is expected to respond to the Reviewers' commentary within 30 days' receipt of the feedback.**
9. *Timeline for reviews and decisions for revised TIE Project:* **After the student submits their revised TIE Project and response to peer commentary, the Reviewers will read over these documents and complete their evaluation within two weeks. The mentor and two Reviewers will determine whether the TIE project meets expectations or not.** Under most circumstances, a revised TIE Project based on the first round of reviews will be sufficient for the Committee to formally accept the student's TIE Project. Additional rounds of TIE Project revisions should only be requested for significant remaining concerns. By "significant," we mean revisions that a student made (or refrained from making) that did not adequately address concerns raised by Reviewers and/or the mentor about elements of the TIE Project germane to key project components, such as study rationale, data-analytic plan, or study design. The mentor and Reviewers should not request additional revisions for minor concerns with the TIE Project, such as word choice or formatting of TIE Project components (e.g., tables and figures). A TIE Project with only minor concerns remaining should trigger acceptance of the TIE Project, with the assumption that the student will correct such concerns before submission of the TIE Project to the funding agency (if grant) or journal (if manuscript).
10. *Acceptance of TIE Project:* If approved, the TIE committee members (the mentor and two Reviewers) will complete the **"TIE Project Evaluation Form" (Appendix H)**. The Committee will evaluate the student on the following: 1) development in his/her/their area(s) of expertise; 2) demonstration of critical thinking skills and the ability to engage in research more independently, albeit commensurate with the student's developmental level; 3) ability to respond to the reviewers' feedback; 4) demonstration of satisfactory integration of 2 or more content areas of psychology (i.e., successfully completing APA Advanced Integrative Knowledge requirement); and 5) demonstration of satisfactory knowledge of the historical context of the research project (i.e., successfully fulfilling APA's Discipline Specific Knowledge in History and Systems of Psychology). The Committee will complete the "TIE Project Evaluation Form" and all members of the Committee will sign the form.

11. *Post-acceptance expectations:* On the "TIE Project Evaluation Form" (in the comments section)**,** the Mentor and Student should state plans for the TIE Project following its fulfillment of degree requirements (i.e., manuscript or grant submission, conference presentation), including the outlet (journal name, funding body, conference name) and the timeline for submission.
12. *Forms.* Upon successful completion of the TIE Project, the student must have the committee complete the **"TIE Project Evaluation From" (Appendix H)** and return the form to the Graduate Studies Office (PSYCPhD@umd.edu). Also, submit the approved TIE Project, including the History component, to the Graduate Studies Office (PSYCPhD@umd.edu).
    In some circumstances, the student's Timeline may have been accelerated. See TIE Timeline above. For example, the student may have submitted the TIE Project to a funding agency/journal and already received peer-reviewed feedback prior to receiving feedback from the TIE Project Committee. In these circumstances, the student can respond to the external reviewers' comments and the TIE Project Committee can review and evaluate the adequacy of the student's response to the external reviewers.

H. DOCTORAL CANDIDACY

Please refer to the Graduate School's Policies and Procedures for the Doctoral Dissertation and Examination. The Graduate School requires that formal admission to Doctoral Candidacy be attained within five years of admission. **Students are eligible for advancement to candidacy after completion of their Master's Thesis, Comprehensive Exam (i.e., TIE Project), all Clinical and Department core courses, and with the approval and support of the clinical area.** Students must apply for admission to Doctoral Candidacy with the Graduate School no later than the end of the semester in which they have advanced to Level 3 of the doctoral program (i.e., having completed all departmental core and area courses and completed a TIE Project). The Graduate School requires that students gain admission to candidacy no later than 5 years after they have matriculated.

The Graduate Committee applies four basic criteria to evaluating a student for admission to candidacy: (1) a minimum of a 3.0 grade point average in departmental core courses; (2) a minimum grade point average above 3.0 in courses other than core (grades received in research and independent study courses are not considered in calculating the GPA); (3) demonstration of research competence; and (4) recommendation of the area faculty. The Clinical Faculty makes its recommendation for advancement to candidacy on the basis of its evaluation of the overall adequacy of the student's academic, clinical, and research performance. In addition, the faculty considers whether the student has demonstrated emotional maturity, ethical fidelity, sound professional judgment, and appropriate professional conduct.

A student must be admitted to candidacy at least two semesters (including the semester in which an application is made) prior to the conferring of the doctoral degree. The **Application for Admission to Candidacy for the Degree Doctor of Psychology (Appendix I)** is available from the Graduate Secretary and must be submitted to the department for final action and transmission to the Graduate School. In addition, the Clinical Program requires students to complete the **UMD Clinical Program Curriculum Worksheet (Appendix A)** and review the worksheet with their Mentor. **The Mentor must review and sign the UMD Clinical Program Curriculum Worksheet form. Mentors must verify that 1) all clinical and departmental core courses are complete and 2) the Master's Thesis and TIE Project are complete prior to signing the Admission to Candidacy for the Degree Doctor of Psychology Form (Appendix I).** The

student must submit the signed UMD Clinical Program Curriculum Worksheet form and the Admission to Candidacy for the Degree Doctor of Psychology Form to the Graduate Studies Office (PSYCPhD@umd.edu).

All program requirements, including the dissertation and internship must be completed within a **four-year period** after admission to candidacy. Extensions of this deadline are granted only under unusual circumstances. Failure to meet this deadline may result in termination from the doctoral program by the Graduate School. Should that occur, re-admission is typically contingent on approval of the Clinical Faculty and completion of additional requirements (e.g., coursework, completion of a TIE Project). Graduate students are required by the graduate school to be continuously registered in courses each semester, including during the internship year. Graduate students who fail to register without obtaining formal exemptions from the Graduate School are in breach of the current "Minimum Registration Requirements" as stated in *The Graduate Catalog*. Students failing to register for two consecutive semesters (including the current semester) will be notified that they will be dismissed from the Graduate School for failure to comply with the continuous registration requirement. Students advanced to doctoral candidacy are required to enroll in 6 credit hours of PSYC 899 (Doctoral Dissertation Research) each semester (even when on internship). Please note that this will impose limitations on other courses (e.g., electives) that students can enroll in as the cap is currently 10 credit hours per semester. It is the student's responsibility to plan accordingly.

I. Dissertation Research

The dissertation represents an opportunity to design, conduct, and defend a systematic study that contributes to the knowledge base, and thereby advances the field of clinical psychology. The research method used should be appropriate to the study's purpose and reflect the current state of knowledge about the topic. Dissertation proposals evolve out of a student's research activities and require close collaboration with the mentor.

Critical to a successful dissertation is the dissertation committee. The Committee must include a minimum of five members. Each Dissertation Examining Committee will have appointed to it a representative of the Dean of the Graduate School. The Dean's Representative should have some background or interest related to the student's research. The Dean's Representative must be a tenured member of the Graduate Faculty at the UMCP and must be from a graduate program other than the home program of the chair and co-chair (if one exists) of the examination committee. This member represents the Graduate Dean and must be a tenured member of the Graduate Faculty. The Clinical Program requires that at least three of the five members must be full-time departmental faculty; two of these three must be full-time clinical faculty and it is recommended that the third should be full time departmental, but not clinical, faculty. If circumstances are such that a departmental faculty member is not available, another Clinical Faculty may be included. One of the full-time clinical faculty members is the research mentor. It is necessary to consult with the mentor in the selection of committee members. The *Graduate Student Handbook* should be consulted for specific guidelines regarding the Dissertation Committee and Graduate School requirements. The forms used for the Dissertation Proposal/Defense are the same as those used for the Master's Thesis Proposal/Defense (i.e., the Thesis/Dissertation Proposal Form and the Nomination of Thesis or Dissertation Committee Form; the forms must be submitted to the Graduate Office. Additional Departmental and University forms will be provided by the Graduate Studies Office (PSYCPhD@umd.edu).

Approved Dissertation Proposal and Defense documents should be sent to the Graduate Studies Office (PSYCPhD@umd.edu) after the committee approval.

The mentor should be knowledgeable about significant aspects of the dissertation research area. He/she should not simply oversee a project in which someone outside the department provides all the expertise except in highly unusual circumstances.

At minimum, dissertation data collection should be completed prior to going on internship. ***However, students are strongly urged to complete the dissertation in residence, preferably before internship.*** If not in residence, there is less likelihood for collaboration with the research mentor. Efforts to communicate with the mentor, conduct the study, analyze and interpret results, and set up committee meetings are extremely difficult to manage from a long distance. Often, the inability to consult directly with the mentor and other committee members introduces unforeseen complications that may cause significant delays in the dissertation.

The demands of internship training rarely allow sufficient time for dissertation research. A student should consult with the mentor before planning to work on any phase of the dissertation research while on internship. Be aware that some faculty will not chair dissertations for students who are not in residence.

In terms of support for dissertation research, it is possible to obtain undergraduate volunteers to help with the research, usually if the faculty mentor is willing to provide Independent Study credit (PSYC 478/479) to the undergraduate. Details of offering PSYC 478/479 can be obtained from the Undergraduate Secretary. Furthermore, there are University and private sources which offer research funding for dissertation research. Also, the National Institute of Mental Health (NIMH), the American Psychological Association (APA), and other federal agencies provide various funding mechanisms that can provide dissertation support. Students are encouraged to seek out these resources and should consult with the mentor about the various possibilities. The successful receipt of external funding, even in modest amounts, demonstrates the ability to engage in fundable research and is an important addition to your curriculum vitae.

Once students advance to candidacy, they must register for PSYC 899 Dissertation Credits (6 credits) during the Fall and Spring semesters until they defend their dissertation (including while on internship). If students are defending their dissertation during the summer session, they must register for 6 credits of PSYC 899 for the summer session. **It is strongly encouraged that students defend their dissertations prior to internship as it greatly reduces students' tuition and mandatory fees. If they defend prior to internship, they do not need to register for PSYC 899 Dissertation Credits. The Department will submit a request to the Registrar's Office to have PSYC 899 waived and to waive the mandatory fees.**

J. Internship

Pre-doctoral internships provide full-time, intensive training in clinical skills for a one year period. Among others, requirements for application to clinical internship include:

(a) Attainment of clinical competence (b) Formal admission to Doctoral Candidacy by the Graduate School, and (c) Successful completion of a dissertation proposal.

Note: Dissertation proposals must be formally accepted by the committee before **October 1** to allow a student to apply for internship (i.e., all revisions and edits required by the committee are completed and all committee members have approved the proposal); a student cannot apply for an internship, or register for the APPIC Match, incumbent on successful completion of a dissertation proposal as well as program permission to register.

Students' mentors must be informed *before* any application for internship is initiated. The student's mentor must complete the **Certification of Readiness for Pre-Doctoral Internship (Appendix J)** before any application will be approved by the Director of Clinical Training. The Certificate of Readiness must be submitted to the **Graduate Studies Office** (PSYCPhD@umd.edu) **and DCT for review**.

Between August and September, there is a meeting to discuss applications for internship. This meeting allows time for questions about internships. Students are strongly discouraged from applying to an internship that is not accredited by the APA or CPA and attendance at a non-APA/CPA approved internship must be approved by the DCT and the clinical faculty prior to application. Approval to attend a non-APA approved internship will be granted only in the most unusual circumstances. See below for a description of our program's procedures for pursuing a non-APA accredited internship.

Most APA approved programs are members of the Association of Psychology Postdoctoral and Internship Centers (APPIC). A recent copy of APPIC's guide to internships is kept on file in the Clinical Program Office. Information about APPIC application and selection procedures is distributed at the September meeting. The standardized APPIC application form, and program information on APPIC internships, can be obtained at http://www.appic.org. Internship offers are made via the APPIC computerized matching system. Consult with your faculty mentor regarding the match system.

Procedures for Pursuing a Non-APA Accredited Internship. Students typically complete their internship requirement through an APA-approved internship, and we strongly encourage students to go this route. Occasionally, unusual circumstances warrant an exception to this norm and students may, with the approval of their Advisor, the DCT, and the Clinical Faculty pursue a non-APA approved internship experience to satisfy the internship requirements. First, students must discuss their interest in pursuing a non-APA accredited internship with their advisor and the DCT. At that time, the DCT will advise the student of the required information that must be obtained for the Program to determine the quality and adequacy of the internship experience and to approve such a site for a potential match. Each of the six aspects below will be evaluated by the DCT and the Clinical Faculty. The Program will follow the processes described below to determine the quality and adequacy of the internship:

1. **Nature and appropriateness of the training activities:**
   The DCT will contact the Internship Training Director (TD) to request the following materials for review:
   a. Internship Handbook.
   b. Description of training activities/experiences, including mandatory and optional activities.
   c. Any other materials related to training during the year.

This information will be reviewed by the DCT who determines the suitability of the internship site. If additional training needs are identified, the DCT will contact the Internship TD to discuss these. The DCT will verify with the Internship TD the specific experiences that the student will have if they attend the internship (e.g., rotations, didactics, supervision). The DCT will maintain contact with the student on internship to ensure that the training experience is consistent with the materials provided.

2. **Frequency and quality of supervision:**

The DCT will review the materials provided by Internship TD to determine the frequency and nature of supervision. It is expected that the intern will receive a total of at least 4 hours of supervision per week including at least 2 hours of individual face-to-face supervision. Additional information will be requested from the TD if required.

3. Credentials of the supervisors:
The internship program's materials will be reviewed by the DCT to ensure that supervisors are appropriately credentialed (licensed, doctoral-level psychologists). The DCT will contact the Internship TD to verify the credentials of the specific psychologists who will provide primary supervision.

4. Evaluation of student performance:
The DCT will request and review the evaluation forms used in the training program and will review information in the Internship's handbook. The Directors will determine if the evaluation procedures are consistent with those used in the Program with the APA's Standards of Accreditation. If the evaluation processes and/or forms are deemed insufficient, the DCT will contact the Internship TD to discuss the information that is required for the evaluation. The Program will request copies of the mid-year and final evaluation forms.

5. Demonstration of interns' competency at the appropriate level:
The DCT will review the Internship Handbook, other training information, and the evaluation forms and make a preliminary determination as to whether the expected internship competencies are appropriate. The APA Standards of Accreditation for internship training will be used as a guide for determination of appropriate competencies. The DCT and clinical faculty review these materials at a clinical faculty meeting and vote on whether or not the expected internship competencies are appropriate based on the nature of the training experiences, manner of evaluation of student performance, and our own programmatic expectations regarding the student's expected competencies at the completion of internship. The DCT then communicates the faculty's decision regarding demonstration of competency to the internship TD, and the DCT monitors evaluation outcomes as the training year progresses. Any concerns about these competencies will be discussed with the Internship TD and must be resolved prior to approving the internship site.

6. Documentation of evaluation:
All information obtained from the internship site and all correspondence will be placed in the student file. Mid-year and final evaluations will also be placed in the student file.

Internship & Registration

All students advanced to doctoral candidacy must be continuously registered for at least one credit hour each semester, even during the internship year. Graduate students who fail to register without obtaining formal exemptions from the Graduate School are in breach of the current "Minimum Registration Requirements" as stated in *The Graduate Catalog*. Students failing to register for two consecutive semesters (including the current semester) will be notified that they will be dismissed from the Graduate School for failure to comply with the continuous registration requirement. Students advanced to doctoral candidacy are required to enroll in 6 credit hours of PSYC 899 (Doctoral Dissertation Research) each semester, including during the internship year if they did not defend their dissertation prior to the start of internship. When a

student has completed and defended their dissertation prior to internship, the student can petition to waive the required enrollment in 899 while they are on internship (this is ultimately determined by the graduate school). Even in this instance, students must remain continuously enrolled (taking a 1 credit internship course, PSYC 639 Internship). **Students on internship, and beyond, are responsible for paying tuition to remain continuously registered.**

We strongly encourage students to defend their dissertation prior to starting their internship year. This has significant financial implications. For instance, if a student has defended their dissertation prior to internship, the student will register for 1 credit of PSYC 639 for the Fall and Spring semesters, and the student will be charged a fee of $200 per credit per semester. In contrast, if a student has not defended their dissertation, the student must register for 6 credits of PSYC 899 and 1 credit of PSYC 629 each semester and will be charged the standard tuition rate.

Internship & Graduation Deadlines

As an APA- and PCSAS-approved program, the Clinical Program requires the completion of a pre-doctoral internship to satisfy the requirements for the Ph.D. Students are not able to graduate until all program requirements have been met including successful completion of the pre-doctoral internship (even if the dissertation has been defended prior to, or during, the internship). Further, students must meet graduate school requirements and deadlines for obtaining the Ph.D. (e.g., graduate school deadlines for conferring the degree in August will not be met if a student's internship is not completed until August 31). UMD confers degrees in May, August, and December. Commencement ceremonies are held in May and December. For a complete schedule of deadlines for submission of the Graduation Application please see the Schedule of Graduate School Deadlines *here.* The Psychology Department has permitted clinical students to participate in the May commencement ceremony (but not formally graduate) while on internship, if all other degree requirements have been met including successful defense of the dissertation. Students interested in participating in the commencement ceremony should check with the Clinical Program and the department graduate office to confirm their eligibility.

V. BEYOND COURSEWORK: RESEARCH, TEACHING AND OTHER EXPERIENCES

A. Student Research Expectations

The UMD clinical psychology doctoral program adheres to a clinical science training model; thus, a significant amount of students' training and learning occurs through active and ongoing involvement in research. Research by its nature is collaborative; therefore, we aim to provide our students with collaborative research experiences within the mentor's laboratory and, when possible, across laboratories. We also strive for a balance in students' research experiences between students' independent research projects and research projects being conducted within their laboratory. The majority of students' independent research will be through the Master's thesis, TIE Project, and Dissertation, and there is also the expectation that students will collaborate and be actively engaged in their laboratory's research. These opportunities provide the student with valuable research skills in the collection of data, management of research studies, collaborative teamwork, and data analyses, all of which are foundational skills for a clinical scientist.

Each graduate student and the faculty mentor are expected to complete together the *Graduate School's Statement of Mutual Expectations (SME)* document at the beginning of each

academic year. The SME will assist the student and mentor in developing an individual research training plan that balances independent research projects and research experiences that benefit the collective nature of the laboratory. Our student research expectations apply to all students, regardless of the source of the student's funding (teaching assistantship, research assistantship, or fellowship), although we recognize that students on research assistantships supported by their faculty mentor's grant will have a larger expectation to contribute to ongoing lab research (approximately 20 hours per week).

Training under a research mentor. Students are encouraged to work closely with their faculty mentor to receive training in clinical phenomena and clinical science training methods and data analytic approaches, as well as manuscript preparation and publication. While the mentor is the primary research collaborator, students may become involved with other faculty and other projects. However, the primary mentor must be informed of and approve all research projects.

When members of the faculty have grant support to conduct research, the faculty member may partially or fully support one or more graduate students, who function as graduate research assistants. Responsibilities of a research assistant typically involve the collection and analysis of data, contact with community organizations, recruitment of participants, and so forth. Such research assistantships provide financial support for the student and opportunities to participate, on an ongoing basis, in all aspects of a research program. Also, students may collaborate as a volunteer with a faculty member in the conduct of a research project. Such experiences frequently involve the student in the planning and preparation stages preceding the project, such as instrument development, findings, recruitment of subjects, etc. Moreover, such a process often results in the publication of research findings or a presentation of these findings at a professional conference. The student may also have the opportunity to share in manuscript preparation, revision, and authorship.

Student research with human or animal subjects. The UMD College Park Institutional Review Board (IRB) is the committee designated by the institution to review, approve, and periodically monitor all research involving human or animal subjects. Forms and regulations can be found at the UMD IRB homepage here. All applications for the Institutional Review Board (IRB) must be submitted through the electronic database IRBNet.org.

All students should be aware that when conducting any research with human or animal subjects (regardless of where the participants are recruited by the student, and regardless of whether such research represents pilot work, an independent study, thesis, or dissertation), there must be IRB approval before any subject recruitment, data collection, or any other contact with potential participants is undertaken. Retroactive approval from the IRB will not be granted, and the Graduate School will not clear a dissertation that involves human or animal subjects without IRB approval. Note: IRB approval at UMD must be obtained even if the study has the approval of the IRB which governs the off-campus location of the study (e.g., at the VA or Medical School), although it may be possible that only one institution holds the IRB of record. In such situations, the student should speak with his/her faculty supervisor and consult directly with the UMD IRB manager as to how to proceed. Obtaining approval is deemed evidence of the student's understanding of the substantive bases of the principles of ethical and professional use of research participants within a scientifically sound research design. The mentor is responsible for monitoring the student's adherence to these principles. Any changes in design, procedure, or method of data collection must be reviewed and approved by the mentor and the IRB.

B. Students Engaging in Global Health Research

The UMD Clinical Program highly values and supports students' training in global health. We recognize that international travel is often required to conduct students' research. Student travel for research should be planned and approved by the student's mentor. The student and mentor should consider the student's obligations in the research lab, coursework, and clinical training as they plan the global health research experience. Students with a global health focus can travel to their research sites during the winter and summer months in between the Fall and Spring academic semesters. Students who are not taking classes and are not funded by a teaching assistantship or research assistantship (funded by their mentor) can travel during the academic semesters (e.g., NRSA-funded student). Students may also be able to travel during the academic semesters if they are not taking classes and the travel is supported by the research assistantship. Travel longer than 2 weeks must be approved by the Clinical Faculty and will depend on the student's academic standing within the program. Arrangements for the student's therapy clients in the clinic and/or at externship sites must be made *prior to scheduling travel* and must be approved by the UMD Director of Clinical Training and Clinic Director and the student's external placement's clinical supervisor(s). Travel longer than two weeks during the summer of the first year is discouraged as this would interfere with the start of the clinical practicum training in the UMD Psychology Clinic.

C. Teaching Experiences

Students are encouraged to gain some teaching experience before completing the doctoral degree. There are several ways to accomplish this goal:

Teaching Assistantships - Teaching Assistants assigned to Psychology 100, the Psychology lab courses (400, 410, 420, and 440), and graduate statistics core (601, 602) typically do some teaching. The nature and the amount of the teaching depend upon the instructor of the course and must be negotiated with that individual.

Guest Lectures - Faculty sometimes ask students to guest lecture on a particular topic in their course. This usually occurs when the student is a TA in the course. It may, however, also occur because of a student's interest or expertise on a particular topic.

Teaching a Department Course - Some graduate students are assigned as instructors to undergraduate courses for which they have appropriate background. Such teaching rarely occurs prior to advancement to doctoral candidacy. Students interested in teaching a course should talk with their faculty mentor and then with the Director of Graduate Studies.

D. Membership in Professional Organizations

An important part of graduate education is involvement in professional organizations. Benefits associated with membership in such organizations include: (1) networking with current and future colleagues; (2) opportunities to present research and ideas to the larger profession; (3) establishing key contacts for jobs, externship and internship possibilities; and (4) significant steps in part of the socialization process to become a psychologist. All students are encouraged to join at least one professional organization related to their clinical and scientific interests.

Most of the key professional associations have student memberships at discount rates. Among those which students may consider joining are: The American Psychological Association (APA), the American Psychological Association - Graduate Students (APAGS), the Association for Psychological Science (APS), the Association for Behavioral and Cognitive Therapy (ABCT), the Maryland Psychological Association (MPA); Society for Research in

Psychopathology (SRP). Many students also join Division 12 (Society for Clinical Psychology), Section 3 of Division 12 (Society for a Science of Clinical Psychology. SSCP), Division 27 (The Society for Community Research and Action) and Division 9 (Society for the Psychological Study of Social Issues) of the American Psychological Association. There may also be professional organizations within a student's general area of research (e.g., addictions, developmental psychopathology) in which the student should consider membership.

Numerous professional organizations focus specifically on issues related to cultural, ethnic, racial, lifestyle, gender, and sexual orientation diversity. Interested students should contact the APA's Office of Ethnic and Minority Affairs to obtain an updated listing of relevant APA Divisions. Additionally, students should obtain information from their mentor and other faculty about APA-affiliated and independent ethnic associations such as:

1. The American Indian Psychological Association
2. Asian American Psychological Association
3. Hispanic American Psychological Association
4. Association of Black Psychologists

Some of these associations have local chapters in the greater Washington D.C. area. In addition to the professional associations mentioned above, there are specialty interest professional associations you may wish to join, such as the American Group Psychotherapy Association or the Association of Women in Psychology.

VI. BEYOND COURSEWORK: APPLIED CLINICAL TRAINING IN UMD PSYCHOLOGY CLINIC INTERNAL PRACTICA AND EXTERNAL CLINICAL PRACTICA (EXTERNSHIPS)

A. Preparation for Clinical Training

Typically, in June after your first year you will begin the practical components of clinical training, starting with PSYC 625 Clinical Assessment: Psychometric Principles, Testing, and Behavior in which you learn how to conduct psychoeducational assessments. This will likely impact the frequency and duration of time you spend on campus and in the Psychology Clinic. Specifically, you will need to keep blocks of time open to learn standardized administration and to practice critical, foundational therapy skills.

Personal psychoeducational assessment. As you progress in your training to administer cognitive (IQ, Achievement, Memory) tests, it is important to understand the ethical boundaries set forth by the APA ethics code regarding psychoeducational assessments and maintaining the integrity of assessment measures (Roberts and Goff, 2022). Once you have been trained to administer these tests, it will become much more difficult to access the proper psychoeducational assessments for yourself due to potential conflicts of interest and bias, and because familiarity with testing materials can inadvertently affect the accuracy and validity of the assessment results (Messick, 2018; Finn & Metcalfe, 2019; Kane, 2020). This means that if you believe you may need or are seeking educational accommodations, you may need to get assessed (or re-assessed) before initiating your assessment training (typically June after your first year in the program). Ideally, speak with your research mentor, the DCTs, and/or the Clinic Director for guidance as soon as possible after entering the program.

Proactive self-care. Adjusting to the rigor and pace of graduate training can be hard, and learning to work with clients can be difficult emotionally. So, preparation for personal and

interpersonal distress is important. Practicing self-care and seeking mental health treatment when needed is crucial for doctoral trainees because it ensures they maintain their own well-being, which is foundational for effectively supporting others. Personal mental health challenges can hinder their ability to empathize, focus, and provide unbiased care. By prioritizing their own mental health, trainees can improve resilience, self-awareness, and emotional stability. It is recommended that trainees engage in proactive self-care to manage stress. It is also strongly recommended that trainees seek out professional support for mental health conditions before the start of clinical training and assess their mental health needs throughout training.

B. Psychology Clinic

The Department of Psychology and University invest substantial funds to create and maintain the Psychology Clinic. The Clinic is a secure facility requiring use of the UMD ID card to enter clinic rooms. At the beginning of each semester, students should make sure that their ID cards will operate the card reader. If not, contact the Clinic Director. The suite of rooms in the Clinic includes therapy rooms and observation rooms equipped with one-way mirrors and audio/visual equipment. Rooms can be scheduled by entering information into the Clinic's electronic medical record called *Titanium Schedule*. It is the student's responsibility to confirm room reservations and to restore the room to its original order following its use. Please remove all material and return the furniture to its original place. Access to the suite is available to all students in the Clinical Program. Training in the use of the Clinic's A/V and electronic medical record systems occurs annually and all students working within the clinic are expected to be proficient in the use of this equipment.

Dr. Colleen Byrne serves as the *Director of the Psychology Clinic*. She is responsible for the direct management of the Psychology Clinic on a day-to-day basis. The Director is available for clinical emergencies when the student's clinical supervisor is not. When enrolled in Clinical Laboratory, it is the student's responsibility to have the on-call supervisor's and Clinic Director's phone numbers so that there is access to supervision at all times.

As noted previously, given that clinical services are provided by students, it is absolutely essential that all students demonstrate appropriate professional behavior. This includes strict adherence to all clinic procedures and policies (as summarized in the ***Psychology Clinic Procedures Manual on the U drive at U:\colbyrne\Psychology Clinic\Clinic Policies and Procedures Manual***).

All required documentation should be completed in a timely manner. Supervisors should be fully informed of all clinical activities and time away from the Clinic. Students are required to follow clinical policies, adhere to the APA ethics code, and follow all applicable state laws. Lack of professional conduct (including failure to follow clinic procedures; inappropriate or unprofessional behavior towards clients, faculty, staff, or fellow students; and violations of the APA ethics code or Maryland laws and regulations pertaining to the practice of psychology) will be grounds for termination from the Clinical Program.

There is a *Clinic Intake Coordinator* who usually is an upper-level doctoral student in clinical psychology. The Clinic Intake Coordinator reports to the Clinic Director and assists her with various clinic related activities. There is also a part-time *Clinic Administrator Assistant* in the Psychology Clinic. This person provides record-keeping and other administrative services to the Clinic. The Clinic's administrative staff are not available to the graduate students who have typing needs, except as these arrangements are made on a contract basis outside of normal

working hours. Thus, students cannot ask the administrative staff to type reports, make phone calls, or generally conduct their business except in rare instances when this is cleared in advance with the faculty or departmental supervisor. Similarly, the administrative assistants are not permitted to furnish graduate students with supplies (e.g., paper, envelopes, paper clips, etc.). Students are responsible for their own supplies. The administrative assistants cannot allow graduate students to use their equipment (e.g., computers, printers, and typewriters), and they cannot grant admission into their offices after working hours. Printers in the Psychology Clinic offices are to be used only for work directly relating to that office and are not to be used to print out course papers, thesis, dissertations, personal emails or letters, articles from the library databases, or pages from the internet.

C. Research within the Psychology Clinic

Given the research focus of the Clinical Program, we certainly expect dual use of clinic resources (for both clinical training and research). However, it is also important that clinical and research activities within the clinic are coordinated so that the basic mission of the clinic as a training center can be achieved. The clinical faculty has composed the following guidelines for students and faculty to follow:

- Students and faculty should seek to use other department rooms/offices and lab research space whenever possible. Departmental rooms can be reserved through the Chair's office.
- If clinic rooms are needed owing to the nature of the research (e.g., treatment outcome studies), lack of other appropriate space in the department, or for some other specific reason, this should be coordinated with the Clinic Director (Dr. Byrne). Such coordination will avoid conflicts and maximize efficiency.
- When using clinic rooms for research, please show consideration for your colleagues by 1) limiting room reservations for research subjects to reflect actual need (i.e., don't overbook), and 2) "unblocking" rooms if there are no subjects signed up or there are cancellations or no shows.
- Clinic computers should be used for non-clinic activities only if there is some special need. Computers in advisors' labs and the general grad student computer lab should be used for such tasks as data entry. Also, please note that computer supplies such as toner and paper are charged to the clinic (and we cannot afford to fund research activities on the clinic budget) – DO NOT use the Clinic printer for *printing Dissertations, Master's theses, reprints, class assignments, etc.*).
- Undergraduate RAs should be properly trained and supervised within the clinic. Concerns regarding professionalism and confidentiality are paramount.

D. Definition of a Clinical Practicum / Externship

Clinical hours accrued under the following definition of a clinical practicum can be included in the APPIC Application for internship. A clinical practicum must:

Be program sanctioned. All practicum placements must be approved and supervised by the doctoral program. Practicum placements must be approved before the practicum experience begins; clinical experience cannot be retrospectively approved as a practicum. Any clinical experience that has not been approved by the doctoral program for practicum is considered work or other non-practicum clinical experience.

*Provide a clinical training experience***.** A practicum experience must involve clinical contact and clinical activities (e.g., assessment/evaluation and/or treatment). Consultation experience (e.g., consultation and liaison service) that involves direct client contact, either with a client or someone involved in their treatment (e.g., parent, adult child, teacher) is an acceptable practicum experience.

Provide clinical supervision. All practicum experience must involve case level supervision. Group therapy experience must involve a discussion/case conceptualization of specific group members, in addition to group process. Assessments must be reviewed individually, not as a mean of scores. At least one-hour per week of direct, individual clinical supervision from a psychologist licensed in the state in which state services are conducted is required for external practica. Should the primary onsite supervisor be an unlicensed psychologist or a non-PhD supervisor, the off-site supervising psychologist must be a licensed psychologist.

Note: internal practica through the UMD Psychology Clinic satisfy the above criteria.

E. UMD Psychology Clinical Internal Practica (PSYC 629 Supervision Courses)

PSYC 629 Clinical Laboratory

Clinical Laboratory provides the student with clinical training along with further training in the scientific bases of psychopathology, psychological interventions, interviewing methods, ethics, and professional behavior. Continuous enrollment in Clinical Lab is required starting in the summer after 1st year through at least the end of summer session of the 3rd year. Satisfactory completion of the Clinical Laboratory requirements is determined based on competency evaluations of the student, as judged by the Clinical Faculty. As graduate student therapists, students will provide professional mental health services to clients. Once students begin, they are committed, year-round, to the best interests of their clients. **Any time away from the Psychology Clinic for longer than one week must be approved by your Clinical Supervisor and Research Mentor as well as the Psychology Clinic Director. Two continuous weeks is the longest that students can plan to be away without approval from the Clinical Faculty.** (See section on Psychology Clinic below and the Psychology Clinic Manual for more information.)

***During the summer of the students' first year in the program, students begin Clinical Laboratory and start seeing clients in the Psychology Clinic. **Students are required to purchase student liability insurance over the course of their clinical training in the Psychology Clinic.** Two options include:

(a) The Trust (https://www.trustinsurance.com/Products-Services/Student-Liability) and

(b) American Professional Agency (https://www.americanprofessional.com/). Fees are approximately $35 per year.

NOTES:

Commitments to clients treated in Clinical Laboratory extend beyond the semester until the intervention is successfully concluded (including all written reports, correspondence, and case notes). Students are expected to finish their interventions even if it continues into another semester or until a satisfactory referral can be made.

Students are supervised and evaluated continuously in Clinical Laboratory. Also, there is a formal evaluation on a set of specific competencies at the end of each term. This includes the

evaluation of interpersonal skills and behavior, as well as maturity, responsibility, and general professional conduct.

In some instances, a student may not be ready for externship according to the usual time frame. Faculty may determine that an externship placement should not occur until necessary clinical competencies and/or progress in the program are met (e.g., a student may be out of progress or there are other research, clinical, or academic issues that are best addressed with full-time availability on campus).

F. Sections of PSYC 629 Clinical Laboratory

Students are required to take PSYC 625, two sections of PSYC 629B, one section of PSYC 629F and PSYC 629F, and any four sections of therapy practicum (including PSYC 629 C, D, or E).

- PSYC 625 provides hand-on experience learning the informed consent procedure, clinical interviewing, the clinic intake form, risk assessments and reporting procedures, clinic note taking procedures (in Titanium), intake report writing and case conceptualization, common child and adult psychoeducational tests (e.g., WAIS, WISC, WPPSI, Woodcock Johnson, etc.), and psychodiagnostics/educational report writing).
- PSYC 629B Clinical Laboratory: Assessment Practicum (twosemesters). The student will complete psychodiagnostics/psychoeducational integrated assessment batteries and reports. Supervisors will oversee training in measures, testing with clients, and report writing.
- PSYC 629C Clinical Laboratory: Adult Therapy Practicum. Students will have a caseload of 3-5 adult clients. Didactics, experiential learning experiences, and clinical supervision will be provided in empirically supported treatments (e.g., motivational interviewing, CBT, exposure/response prevention, mindfulness-based therapy, DBT).
- PSYC 629D Clinical Laboratory: Child and Adolescent Therapy Practicum. Students will have a caseload of 3-5 child/adolescent clients. Didactics, experiential learning experiences, and clinical supervision will be provided in empirically supported treatments (e.g., parent-child interaction therapy, CBT, behavioral parent training, exposure/response prevention, DBT for adolescents, family therapy).
- PSYC 629E Clinical Laboratory: Diversity Training Therapy Practicum. This practicum is a semester-long practicum for advanced students in the UMD Psychology Clinic dedicated to diversity and multicultural therapy training. This practicum is focused on diversity training specific to clinical work with ethnoracial minority clients; it includes instruction on skills and strategies to address racism, microaggressions, and other topics in therapy while also maintaining a focus on client strengths. Students learn about a variety of multicultural approaches for therapy, reflect on their own lived experiences and identities, and put what they learn into practice in their work with clients.
- PSYC 629F Clinical Laboratory: Fundamentals of Supervision and Consultation (students take this course (1 credit) during the summer after their third year in the program). This course will cover 1) models and processes of supervision as well as issues related to ethics, diversity, professionalism, and self-care, and 2) roles and perspectives of other health care professionals and instruction in effective interdisciplinary consultation. Students will serve as peer supervisors for one client of a more junior therapist, meeting weekly with that therapist for one hour. Students will receive supervision of the peer supervision and consultation learning experience from the clinical supervisor who is the instructor for the Peer Supervision & Consultation class. At least once per semester the instructor will conduct direct observation of the peer supervisor's meetings with the junior student and provide

feedback. Students in their 4th & 5th years are eligible to serve as peer supervisors (approval is required by the Clinic Director and Director of Clinical Training). In this case, students will receive supervision of the peer supervision and consultation experience from their PSYC 629 Clinical Lab Supervisors.

- PSYC 629G: Anti-Oppression Institute for Clinicians. Awareness of the ways issues of diversity, inclusion, and equity intersect with the clinical context has greatly increased—accompanied by growing calls for clinical psychology programs to consider ways to deepen the cultural competency and cultural humility of clinicians in training. One way to enhance learning about issues of identity, culture, power, and oppression is through human relations activities, critical thinking, deep reflection, and interpersonal dialogue. This course explores a number of critical questions aimed to sharpen contemporary clinical trainees' understanding of oppression—as it relates to themselves, others, and the institutions they work within. This class will be offered in the winter/spring and will meet bi-weekly.

G. Nature and Responsibilities of the Agency/Placement for External Practica (Externship Sites)

The agency must meet APA Professional Practice Guidelines and must agree to provide adequate training, supervision, and accountability for their trainees. It must conform to all other regulations such as state licensing regulations and supervision guidelines established by ASPPB and APA. To pre-approve clinical externship training experiences, the direct Clinical Supervisor for each rotation or externship site must complete a survey agreeing to meet our standards for clinical training and supervision which are detailed below. The primary clinical supervisor for an external placement or externship must complete the **External Practicum Supervisor Agreement Form (Appendix M)** which verifies the external practicum meets the criteria outlined below.

Criteria for Approving an Externship Site

Potential Externship sites are put through an initial vetting process in which clinical faculty speak directly with the Director of Training for the site to ensure that they meet the following criteria:

- The externship must be no more than 16-20 hours per week and no more than 2 days on site (including report writing), and flexible enough to allow participation in all of the student's responsibilities as a graduate student such as research, classes, attending CRIS, clinical responsibilities (such as peer supervision in the Clinic), and meetings at the University.
- The externship must not interfere with progress through the program. If the faculty finds that the student is failing to meet our program expectations and deadlines, the faculty may require termination of the student's placement in a timely and professional manner.
- The placement agency must meet the faculty's standards for competent service, adequate training, and must provide adequate research opportunities and/or clinical training.
- If the externship site provides remuneration for services, prior approval by the DCT is required (please see details below).
- The externship must provide an on-site, doctoral-level psychologist who meets ASPPB standards for supervision: ASPPB.net
- Clinical Supervisors must agree to perform direct observation of the trainee conducting therapy/assessment at a minimum of 1 time per semester.

- Clinical supervision will be provided to the trainee at a minimum of one time per week.
- Externship training experience will provide a didactic experience for the extern.
- Clinical Supervisors agree to provide a written evaluation of the trainee twice per year **(see Appendix L)** to the Director of Clinical Training.
- The Externship Site verifies that less than 50% of clinical supervision will consist of tele-supervision (exceptions made for the Global Coronavirus Pandemic). Although we discourage the use of tele-supervision for trainees, we do not prohibit it if its use is less than 50% of all supervision provided. However, clinical supervisors must provide justification for its use to our program and must ensure that tele-supervision is used appropriately for the developmental level of the trainee.
- The Externship Site enters into a legal agreement with the University of Maryland via a Memorandum of Understanding (MOU) regarding the responsibilities of each site for the externship experience.

Additionally, clinical faculty conduct regular site reviews of approved externship to ensure adherence to quality and training standards. Specifically,

- Clinical supervisors for each placement/rotation complete a yearly supervisor agreement form attesting that they agree to provide the appropriate amount, type, and frequency of clinical supervision.
- Student externs complete a site review form for each placement/rotation every year or at the end of their training period if less than 12 months.
- Clinical faculty carefully review these evaluations to maintain quality/training standards.

Occasionally, students have opportunities to conduct clinical work in their research lab or in other settings that are not traditional external practicum agencies (e.g., conducting psychological assessments for a research study). In this case, if the student would like to count the hours on their APPIC application, they must make their mentor, the DCT and the Director of the Training Clinic aware of this opportunity. A doctoral level psychologist must be identified who is providing ongoing supervision of the cases. If the primary supervisor of the work is not a doctoral level psychologist, the program must provide on-going weekly opportunities for students to discuss their clinical work with a doctoral level psychologist appropriately credentialed for the jurisdiction in which the program is located.

H. Student Readiness for External Practicum

Students' readiness for all professional activities must be approved by the clinical faculty *before* students apply for external clinical placements, using the program form developed for that purpose (**Clinical Readiness for Externship Form, Appendix N).** Students should complete this form and return it to the Graduate Studies Office (PSYCPhD@umd.edu). After students successfully defend their Master's Thesis, attain research competence, and meet clinical competency (as evaluated by performance in Clinical Laboratory), students may pursue other training opportunities and placements which complement their clinical work in the department. It is highly recommended, but not required, that students complete an externship before applying for internship. In some instances, students may request to pursue an external placement (e.g., a therapist for the Summer Treatment Program for ADHD, two-week selective mutism camp, etc.) before they have completed their Master's Thesis. This exemption requires approval by the student's mentor, the Clinic Director, and Director of Clinical Training.

Decisions regarding externships and external placements are made on an individual basis by the Clinical Faculty. In some instances, an externship may not be appropriate for a student,

and faculty may determine that an externship placement should not occur or should be delayed. For example, a student may be out of progress or there may be other research, clinical, or academic issues that are best addressed with the student being available on campus in a full-time capacity. Once these issues are resolved, the faculty may determine that the student is ready. If a student is delayed in meeting any program milestones or has ever requested an extension for program milestones, they must meet with the DCTs before they can be approved for any external practicum, even if they have already engaged in an external practicum previously.

I. Responsibilities of the Student Seeking an External Clinical Practicum (Externship)

The student is expected to participate in research, attend courses, complete TA/RA assignments, and participate in required program workshops, meetings, CRIS meetings, Psychology Clinic responsibilities, etc. The Clinical Program is a full-time 12-month program. Program responsibilities take precedence over all outside activities, including the externship. Mentors must be consulted before approaching outside professionals or placements.

Sites not already on the pre-approved externship list must be formally approved by the Clinic Director and Director of Clinical Training before accepting an outside professional commitment. To get this process started, email the training director's contact information to the Clinic Director. Note that approving a site can take 3-6 months because UMD and the externship site must enter into a contractual MOU agreement. A list of pre-approved externship sites is on the U drive. Adequate sites must meet criteria listed above.

Students must verify that ***malpractice coverage*** is provided by the externship site. Students must also purchase insurance for themselves. Two options include: (a) The Trust (https://www.trustinsurance.com/Products-Services/Student-Liability) and (b) American Professional Agency (https://www.americanprofessional.com/).

Although rare, on occasion students may receive ***remuneration*** (financial compensation) resulting from professional work conducted on externship. Before accepting an externship placement that would involve remuneration, it is the responsibility of the student to seek their advisors' approval, with the understanding that the work completed in exchange for remuneration not unduly interfere with the student's graduate studies and assistantship duties (e.g., teaching and research assistantships). Different expectations apply for international students. International students must refrain from receiving remuneration for off-campus work such as paid externships, unless they have official authorization from the campus' office of International Student and Scholar Services (ISSS). International students may receive remuneration for on-campus work that totals up to 20 hours total per week during the school year, and that may consist of full-time work on-campus during summers and vacation periods. F-1 students may work on-campus without authorization. J-1 students, however, need authorization even for on-campus work. Therefore, international students regardless of visa status must always check with ISSS first before taking on extra work on or off campus.

Students should discuss problems which arise during the externship with their faculty mentor, the Clinic Director, and Director of Clinical Training.

At the conclusion of the *training* experience, students should complete the online survey, Student's Evaluation of Externship Practicum, in which the student provides information on what was done, quality and amount of supervision, the educational value of the experience, and recommendations for the same or similar placements for other students. This will help faculty decide if the site needs to be removed from the pre-approved list.

J. Involvement and Role of Mentor in the External Clinical Practicum (Externship)

One of the responsibilities of a mentor is to approve all activities which are not directly sponsored by the Clinical Program. In addition, all outside commitments including externships and external placements must be approved a priori by the Director of Clinical Training who will review requests that have been approved by the mentor.

The student and mentor (in consultation with the clinical faculty) must attend to the following: a) adherence to the rules and ethical principles of both the University and the American Psychological Association, and b) state laws, University regulations, and Clinical Program policies governing the provision and reimbursement of psychological services and the type and level of training necessary.

Mentors must have detailed information about an externship opportunity prior to the student's interview for a position. Before attending any interviews ensure that **the Clinical Readiness for Externship Form (Appendix N)** has been completed with the graduate student and then reviewed and signed by the Director of Clinical Training.

K. Externship Application Guide

Students applying for externship should read through the below guide to find answers to commonly asked questions and to prepare throughout the application and interview process.

When do you apply for externships?

You apply for externships in the winter of your third year (to complete in your fourth year) and the winter of your fourth year (to complete in your fifth year). The applications are due at the beginning of February. The exact date differs every year, so be sure to check that you are aware of the deadline for the current year. Application brochures should have that information, or you can contact sites directly to ask if needed.

In terms of your timeline, it's a good idea to confirm that letter writers can and will write you a letter by late December (this gives them around ~ 1 month notice before the deadline). When you apply during your third year, it is probably best to start working on cover letters and your CV relatively early in January, as you will need more to prepare for applications. The next year, it will be easier to re-use/adapt materials, and you will probably find it a lot faster to prepare and submit applications.

Do you have to do an externship?

No, you do not. You can choose to stay in the clinic, as a backup, or even on top of your externship (students often do this in their fourth year).

What do you need to do to apply?

Typically, you need:

- a cover letter tailored to that site (ask for examples from older students!)
- a clinically oriented CV, focused primarily on clinical training and skills and less on research experiences and skills (ask for examples from older students!)
- two letters of recommendation, though some sites don't require letters of recommendation (e.g., DC VA) and rarely some sites will ask for three letters. Note that letters don't have to be tailored to each site.

Sometimes sites also ask for:

- deidentified piece of clinical writing (e.g., assessment report)
- a list of all the assessment measures you have done (you can copy this from time to track)
- a letter of readiness from the Director of Clinical Training. This is different from a letter of recommendation in that it just says you are on track with program milestones and approved by the program to apply for externships.

Who should write your letters of recommendation?

This should be past or current clinical supervisors, not your research advisor unless your research advisor can also speak to your clinical skills.

How do you figure out where to apply?

These are all good ways to decide where to apply. Note that they are not mutually exclusive:

- Talking to students in our program who have similar interests and have already done externships about where they applied and what they thought of the sites through interviews or placements. This may give you really good information on sites, but not all sites offer the exact same externships each year so be sure to check what is actually being offered (like at the George Mason website).
- George Mason University has a website where sites post their brochures each year (https://psychpracticum.gmu.edu/externships/). This starts to get updated in December and is typically fully updated by early January. This would be the most comprehensive source, just note that you must scroll through a bunch of sites that may be less interesting to you.
- The UMD list of approved sites is also important to consult. Some sites offer externships but there could be contractual issues between that institution and UMD so you may not actually be able to go there even if you get an offer. Or, in a case where it's just a new site, this identifies for you that there will be more administrative work to do in advance of starting. This document should be kept relatively up to date on the program ELMS page or Colleen can tell you if a site is approved already. Note that the spreadsheet on ELMS is divided into adult and child tabs, which may not always be completely up to date/accurate. It's probably a good idea to look at both tabs regardless of whether you are interested in child or adult sites.
- Location. Keep in mind that sites may be throughout the DMV and consider how you would get there.
- Type of setting/role you want: Would you prefer inpatient or outpatient? Would you prefer to work with only psychologists or with other providers too?

How many should you apply for?

This depends somewhat on your interests and how broad they are. Typically, people apply to ~4-6 positions. Note that at some sites you can apply for multiple positions via separate applications, at some sites you can submit one application in which you rank multiple positions (meaning this one application may equal several applications in a way), and at other sites you can only apply for one position (meaning out of their available rotations you must select one, or they only have one rotation).

What happens after applying?

Sites, and even rotations within a site, have different time frames getting back to students to offer or decline interviews to them. Typically, all interviews take place between the first week in February and the first week in March. Broadly, there seems to be a trend that child-focused sites move faster to schedule interviews than adult-focused sites.

What should I prepare for interviews?

In addition to questions about the site, you should prepare answers to a few interview questions that sites may ask. Not all sites will ask about these things, but many will, and you can also take pieces of these answers and use them for other questions:

- why you are interested in this site and your longer-term career goals
- specific skills you are looking to gain at that site
- an example of a difficult situation with a client and how you dealt with it
- an example of an ethical challenge you have experienced and how you dealt with it
- an example of a case that illustrates your therapy approach/orientation
- an example of how you value diversity in therapy
- examples of your clinical strengths and weaknesses
- an example of a question you worked through in supervision

It is a very good idea to practice answering these questions out loud with your classmates. Talking about clinical work is different than talking about research so it's good to get practice talking in a more clinically oriented way. This also allows you to practice and give each other feedback and ideas.

What questions should I ask sites during interviews?

These are all good questions to ask during an externship interview:

- What can they share about the patient population and common presenting problems?
- What types of interventions are most used?
- How are caseloads assigned?
- What do they look for in an extern?
- What are the hours?
- What are the days externs can be there?
- When does the externship start and end in the year?
- How many clinical hours do externs typically get?
- Are there didactics, what do they focus on, and when are they offered?
- What is the structure of supervision?
- What do they tend to focus on in supervision?
- How does collaboration work with other providers?
- How does the site use telehealth (if at all)?
- What can they share about specific rotations beyond what is in the brochure?

How much of a time commitment is it and what days am I allowed to go on externship?

Externships are not allowed to be more than 16-20 hours per week and typically take up two days per week. Sometimes a site will allow or prefer one day a week. We are not allowed to go on externship on Mondays in our program, meaning you can go Tuesday through Friday. Unfortunately, there are sometimes sites that prefer Mondays but usually you should be able to work out another day with them. Beyond that, there are no restrictions beyond any class or lab responsibilities you may have.

What should you do if you have one offer but are still waiting for other interviews/to hear from other sites?

Always acknowledge all emails from sites. It's absolutely ok to hold multiple offers, but don't hold on to offers just to hold on to them if you know you wouldn't want to go to that site. If you are interested in a site but are also waiting for other interviews to happen still or are waiting on other offers you are excited about too, then try to give sites a date by which you will be able to let them know (e.g. the date by which other sites have told you they will let you know and you will therefore have full information).

How do I accept an offer and what is the DC Consortium?

The DC Consortium is something that many programs participate in as their students apply for externships. Basically, this means that participating programs agree that their students will not accept a placement until a specific day each year (sometime in early-to mid-March). This sometimes means that sites will also not make offers until close to or on that acceptance day, because they know students can't accept anyway. However, UMD does not participate in the consortium. This means that if you receive an offer that you would like to take, you can accept it whenever you want! In interviews, you may have interviewers ask if you are/if UMD is in the consortium and whether you must follow consortium guidelines, which can be confusing. The answer is no, we are not in the consortium, and you don't have to follow the guidelines, meaning you can accept an offer whenever it is received.

When do externships start?

This can vary a lot by site and rotation. They typically start in July or August but sometimes as early as June and sometimes as late as September. This information should be in the brochure they post, or you can contact them to ask or clarify in an interview. Keep in mind any other responsibilities you have (like a summer class) or time off that you would like to have in the summer and how the externship aligns with your schedule.

What happens if there is a problem at your externship or your externship shuts down?

Communicate with Colleen and Lea if there is an issue in your externship so they can help you decide how to handle it. Also, communicate with them if your externship shuts down. There will be ways to find supplemental hours or a new site if needed, though it may not be as closely related to your interests.

L. Timeline and Order of Steps for External Clinical Practica (Externships)

Mid-fall the semester before applying (applications are typically due in late February/early March):

- Discuss externship with your research mentor.
- Complete the **Clinical Readiness for Externship Form (Appendix N) with your mentor and forward to the Director of Clinical Training**. Submit the completed form to the Graduate Studies Office (PSYCPhD@umd.edu). Readiness will be discussed in a Clinical Faculty meeting and any concerns noted by your research mentor or any other faculty will be conveyed to you ASAP.
- Review the list of pre-approved sites on the U drive. If a site to which you are planning to apply has not been approved by our program, alert the Clinic Director so the Clinic Director can contact the site for approval.
- Note that UMD and the externship site (not the rotation) must enter into a legal contractual relationship (MOU). This is a one-time process that takes a minimum of 3-6 months. Also, there is a slight chance that UMD legal will reject the externship site's contract, meaning that UMD students cannot participate in an externship at that site. This means it is best to apply to some sites that are already approved and have contractual agreements with UMD in place already.

Mid-December through January:

- Contact externship directors or external placement supervisors to seek application. If required, ask for letters of recommendation from prior and/or current supervisors.

At least 1 month before application due date:

- When you have selected several sites, email information to your letter writers including:
  Your CV
  Date you entered the Clinical Program
  Dates you were under their supervision
  List of interactions you have had with letter writer (thesis/dissertation committees, courses, program committees, etc.) with dates
  Reminders about interesting cases
  List of externship and/or external placement contact persons, letter due dates, and methods of letter submission

Before starting your externship:

- You must verify that you are covered under your externship site's liability insurance and you must purchase student liability insurance. Two options include: (a) The Trust (https://www.trustinsurance.com/Products-Services/Student-Liability) and (b) American Professional Agency (https://www.americanprofessional.com/). The University does not provide liability coverage for externship or internship.

VII. CLINICAL PROGRAM GOVERNANCE

A. Student Representative

One to two graduate students act as liaison between students and faculty. The Student Representative(s) attends faculty meetings. The primary purpose of the Student Representative(s)

is to ensure that there is a formal mechanism whereby students have input into the Clinical Program. The Student Representative(s) will be responsible for conveying suggestions or concerns of the students to the faculty and for reporting back to students. The Student Representative(s) will not be present when review of student files, review of individual student progress, or other confidential matters are being discussed. At the beginning of each academic year, students will be asked to nominate potential student representatives. Students who are willing to accept the nomination, who are in good academic standing, and have been approved by the Clinical Faculty to serve in the position will be included on a ballot for all clinical students to then vote. Student representatives must be in good academic standing to remain in the position. Student representatives also take a lead role in the planning and implementation of the Clinical Program's Interview Day.

B. Peer Mentors

All first-year students will be assigned by the faculty a peer mentor at the start of their incoming semester. Peer mentors will be current clinical psychology graduate students in good academic standing (ideally third year students and beyond). Peer mentors will support the first-year students in the transition to graduate school and will help them navigate program and departmental requirements.

C. Clinical Doctoral Program Graduate Student Committees

Graduate student committees are intended to involve students in program activities, including the selection of clinical training opportunities, and to serve as a mechanism to acquire student input and to provide students with training in professional development (e.g., networking with invited speakers, developing novel ways to incorporate clinical science into our in-house training clinic). Workload on student committees is intended to be minimal. With input from students, the Student Representative and DCT will assign students to one of four committees each year.

<u>Clinical Science Training Committee</u>
Committee members stay current with the literature regarding evidence-based interventions, assessments, routine outcome monitoring measures, and models of supervision/consultation. They summarize information for the Clinic Director and make recommendations for implementation of evidence-based practices in our in-house training clinic.

<u>Social Events Committee</u>
Committee members plan social events for faculty and graduate students to provide an opportunity for informal interaction outside of the work environment. For interview day, committee members assist the Faculty with arranging the Student/Applicant Social Event.

<u>CRIS/Clinical Training Workshop Committee</u>
Committee members assist the Assistant DCT in identifying, contacting, and scheduling speakers for CRIS research talks and clinical training workshops.

<u>Diversity Committee</u>
The mission of the Clinical Psychology Diversity Committee is to facilitate training and education in diversity related issues in research and clinical practice to produce culturally

competent practitioners and researchers. Committee members will represent the Clinical Area by participating in organizing the Department's Diversity Science Colloquium Series (e.g., selecting speakers). In addition, the committee will work with the faculty to develop novel ways/initiatives to promote recruitment of graduate students from underrepresented and diverse groups. The Diversity committee will also work with the CRIS/Clinical Training Workshop and Clinical Science Training Committees to integrate diversity science into their initiatives. Additionally, the diversity committee will serve as diversity liaison between graduate students and faculty, promote diversity among faculty and students in our department, encourage practical application of diversity training throughout our curriculum, and promote awareness of university/community events related to diversity.

D. Clinical Program Meetings

In addition to the Program's bimonthly CRIS meetings, the DCT and the Assistant DCT will hold an open meeting with each cohort of clinical students at least once per year to discuss aspects of the Clinical Program. These meetings will provide an opportunity to discuss program guidelines and training experiences and solicit student feedback. We want to highlight that although student feedback is *welcome and encouraged*, the Program has to consider multiple factors with respect to changing program guidelines, including guidelines and policies of the UMD Graduate School and our accrediting bodies (APA, PCSAS) and the philosophy/training goals of the program. Nevertheless, we strive to create an environment that welcomes feedback and is open to continued improvement.

The DCTs will also hold regular meetings with students applying for internship to assist with application and interview preparation. In addition, following the APPIC internship match, the DCTs will organize a meeting with all students about applying for internship. The students who recently went through the APPIC match process will hold a Q&A during the meeting. The DCTs will also organize a similar meeting for students applying for externship: Students who recently applied and were matched to an externship site will meet with earlier cohorts to review the process. In addition, the Assistant DCT and Clinic Director will hold a meeting each Fall semester with students to discuss external practicum guidelines, including any clinical work taking place in one's research lab or related context.

VIII. STUDENT RESOURCES, RIGHTS, RESPONSIBILITIES, AND PROGRESS

Accessibility and Disability Services. The program affirms that seeking accommodations is a responsible and professional step toward ensuring equitable access to training. Students who pursue accommodations will not be penalized or evaluated negatively on the basis of their disability status or use of approved accommodations. The program recognizes that stigma surrounding physical and psychological disabilities can be particularly salient in health service psychology training. We are committed to fostering an environment in which students can seek accommodations without fear of judgment, bias, or adverse evaluation. Consistent with professional ethical standards, students are encouraged to seek appropriate supports that enable them to engage fully in training. Utilizing approved accommodations reflects proactive professional responsibility rather than diminished competence.

Students who seek reasonable accommodations for physical, mental or emotional disabilities should contact the University's Office of Accessibility and Disability Service (ADS). The ADS Office will determine a student's eligibility for and recommend appropriate

accommodations and services. ADS determines eligibility for accommodations and recommends appropriate supports. The program does not independently diagnose or evaluate disability status. At the request of the student, ADS will then share the student's accommodations with the instructor via the ADS portal. The instructor and student will meet to discuss the student's needs and develop a plan for appropriate accommodations. The instructor is not permitted to share the student's ADS information with anyone other than the student and ADS representative, unless the student provides permission. If the student chooses, the student can consult the DCT and/or the student's mentor for additional support to navigate accommodations for course work and clinical training. The DCT will ensure that the student achieves APA's competency areas for a doctoral degree in clinical psychology, while also meeting the student's accommodations. Information regarding a student's disability status will be shared only on a need-to-know basis in accordance with university policy and ADA guidelines.

Some common examples of accommodations include extended time for exams or assignments, use of a computer for note taking or assignments, and access to class slides. Graduate training in clinical psychology also includes training in clinical assessment and psychotherapy. The program will work with students to support these aspects of the training as well. For example, Q-interactive, Pearsons 1:1 iPad administration system, supports examiners with disabilities by reducing physical, motor, and sensory barriers through a paperless, iPad-based, two-device system. It offers digital accessibility options, enabling professionals with motor, learning, or sensory limitations to conduct assessments. Our program supports the use of Q-interactive.

Our goal is to accommodate examiners with disabilities in conducting psychological assessments in a manner that does not impact the standardized administration of tests, and thus their validity. Our program recognizes that there is not a single set of accommodations that will work for the individual needs of all examiners with disabilities to complete any type of assessment battery. Instead, in conceptualizing an appropriate accommodation, one needs to consider both the needs of the examiner and the type of psychological assessment being conducted. It is further presumed that not all accommodations will work for the same examiner across all types of assessment batteries. Sometimes an examiner may not require accommodations to complete part of an assessment independently, while at other times they may require more assistance through additional accommodations.

Finally, if a student has concerns that the ADS accommodations are not being upheld, we encourage the student to consult with ADS, the DCT, Director of Graduate Studies or Chair of the Department for immediate assistance.

Student Mental Health Resources. For mental health services, we highly recommend seeking therapy from a provider within your insurance network as that will offer students the most affordable options. Moreover, Ms. Simone N. Warrick-Bell, M.A., LCPC is the Graduate Academic Counselor for the Graduate School at UMD (301-405-0296; slivings@umd.edu). She assists graduate students in finding therapists in the community. Her program and our program have chosen to not keep a list of therapists because maintaining a list is challenging due to therapists moving, closing, and/or discontinuing insurance participation. Lists may seem helpful but can be frustrating when they are not current. Ms. Warrick-Bell is available to support students seeking an off- campus provider. Here is her landing page (https://gradschool.umd.edu/gradcounselor) which has curated resources to graduate students including parenting, 8 dimensions of wellness including mental health, self-advocacy, wellness

programs, students with disabilities and mental health tips. Additionally, here is a restorative rest guide for graduate students and a link to university-related mental health resources: https://mentalhealth.umd.edu/for-students/graduate-student-resources .

Student Support and Grievances. The following steps are available to students who feel that they have been unjustly or unfairly treated. The information presented below represents a synthesis of program, department, and university policies to respect the rights of students to express their concerns and have them redressed but may not be a complete listing of options.

Student Support Committees

Faculty or students can initiate Student Support Committees comprised of the student's mentor and two other clinical faculty members (tenure or non-tenure track faculty). These committees are to facilitate remediation for students dealing with academic or clinical training issues or mentor-mentee issues. Having a support committee does not necessarily indicate that the student is falling below program expectations. The goal of the support committee is to aid in the early stages of problems and to develop a plan to remediate any problems.

Grievance Procedures

For specific concerns related to sexual harassment, please see **Sexual Harassment Guidelines (Appendix K).** Clinical students should be aware that the faculty support and encourage students to express concerns. Members of the faculty also assist students in identifying and implementing strategies to resolve students' concerns. Students occasionally experience problems with certain aspects of the graduate program or sometimes with individual faculty members. Along these lines, below are several recommendations regarding the process through which students ought to express concerns:

1. The student is encouraged to discuss these problems first with her or his advisor. If another faculty member is involved, discuss the matter with the mentor and with that member of the faculty if possible. If multiple students share the concern, appointing a spokesperson to describe the difficulty and explore solutions with the faculty member may be helpful.
2. If the problem exists across multiple faculty or poses a "program" issue, a student may request that the Student Representative bring the matter before the Clinical Faculty. The Student Representative attends clinical faculty meetings as necessary and can serve to communicate concerns and requests from students to the faculty. In many cases, discussion of the problem in that form can occur without identifying specific faculty or students.
3. The student can bring the matter to the attention of the DCT or another faculty to whom the student feels comfortable discussing the situation. The Clinical Program also designates the Clinical Program's Ombudsperson (typically the DCT serves this role), a faculty member who assists students in resolving complaints, usually through recommendations or mediation.
4. To assist in resolving the problems, faculty or students can make a request to the DCT to initiate a support committee. Support committees consist of the student and his or her mentor and two other Clinical Faculty or Professional Track Faculty members. The purpose of the support committee is to develop a remediation plan and to assist the student and/or faculty member in resolving the specified problem(s). A support

committee will typically meet periodically across two consecutive semesters to assist with problem resolution.

5. Each year or semester, Research Mentors and Clinical Supervisors complete student evaluations/progress reports. Both Research Mentors and Clinical Supervisors must review the feedback with the student and the student must sign the form indicating that the evaluation was discussed with the student. In instances for which the student disagrees with the faculty's evaluation, the student is encouraged to discuss his or her concerns directly with the Research Mentor or Clinical Supervisor.
6. If the above steps do not resolve the issue, students may discuss their concerns with the Psychology Department Director of Graduate Studies or the Psychology Department Chair. The Department of Psychology Gradate Program has developed a set of procedures to assist students in resolving grievances (See Department of Psychology's Graduate Grievance Policy and Procedure).
7. Students also have access to safe and transparent reporting mechanisms that are unaffiliated with the clinical area and evaluation of students. We encourage our students to seek consultation and support from the new ombudsperson for graduate students: **Dr. Wade Jacobsen from Criminology. His email is wcj@umd.edu.** Also, we encourage students to seek consultation from the Director of Graduate Studies, Dr. Jen Wessel. And, if students feel comfortable, we encourage them to consult with the Clinical area's DCT, Dr. Lea Dougherty. We also encourage students to discuss limits of confidentiality with whomever they consult. For example, UMD faculty are mandatory reporters and are required to report any threat to self or others or potential harassment. Lastly, the Department also has a bias incident reporting mechanism that is monitored by the department's Diversity Committee's Rapid Response Team: https://umdsurvey.umd.edu/jfe/form/SV_06ZuAUj7eJnQVqR . We also want to remind students that most times when you make a report, you will not learn the outcome or mechanisms of action due to privacy laws related to FERPA and employment.

Student Remediation, Probation and Dismissal

Based on the student evaluation processes (see *Student Evaluations* detailed below), if a concern is raised with a student, the DCT has the option of developing an informal or program-level remediation plan. We have a **two-stage process**, with a ***"Progress Watch or Warning"* stage that precedes *Probation*.** "Progress Watch" entails an informal or program-level remediation plan developed in collaboration with the DCT, the student, and any necessary faculty. This often entails the formation of a Support Committee. A Support Committee serves to facilitate remediation for students dealing with academic or clinical training issues. The goal of the support committee is to provide assistance in the early stages of problems and to develop a plan to remediate any problems. The remediation plan details the specific identified concerns, targets of remediation, and a detailed plan for remediation, including behavioral indices of improvement. Ideally, the student and DCT agree to the informal or program-level remediation plan; however, if necessary, the DCT can implement an informal or program-level remediation plan without the student's agreement. If the student completes the informal or program-level remediation plan successfully, as agreed upon by the student and the DCT, the informal remediation plan will be removed from the student's file, and no additional action will be taken. A digital copy will be kept in the DCT's personal files for purposes of accreditation or administrative review. If the student does not successfully complete the remediation plan within the agreed-upon timeframe specified in the remediation plan, the DCT has the option to establish

a *formal* remediation plan that would include involvement of the Director of Graduate Studies and other faculty as needed for increased accountability and oversight. Should these procedures ultimately fail in behavioral improvement, escalating the concerns through Probation procedures with the Director of Graduate Studies is the next step.

A student's inability to thrive in the Program at a professional and/or productive level may be due to medical or mental health issues of a personal nature. A student is never under any obligation to disclose these personal issues to the Program, Faculty, or the Director of Graduate Studies. The Program holds all students to the same expectation of PhD-level trainees, regardless of personal matters. If these matters interfere with a student's ability to function properly in advancement in the Program, the student will be encouraged to seek assistance and/or the treatment necessary for them to maintain the minimum standard of performance set forth by the Program. Reasonable accommodations will also be provided at the discretion of the DCT and/or the Accessibility and Disabilities Service (ADS). At any time during the student's tenure in the Program, she or he or they is/are eligible to request a Leave of Absence as outlined by the Department's Graduate Manual. Initiating a Leave of Absence is entirely at the student's discretion and will not be at the behest of the Program. Should a student decide to take a Leave of Absence, the DCT and other faculty if necessary, will develop a plan for reintegrating the student back into the Program after the leave is over.

Probationary status is reserved for students with difficulties sufficiently serious to raise the possibility of eventual dismissal. Probation can occur for academic, clinical training or personal reasons, such as failure to meet academic deadlines, research incompetence, and ethical and professional shortcomings. The normal or expected developmental difficulties associated with becoming a clinical psychologist, either in practice or research, do not ordinarily warrant probationary status. The problems that may warrant probation and even dismissal include but are not limited to failure to correct identified deficits in meeting administrative requirements (attendance, charting), failure to respond to supervision, and other difficulties interfering with either clinical functioning that puts client well-being in jeopardy, ethical or professional incompetence, or research functioning that jeopardizes the responsible and ethical conduct of research. Please refer to the ***Clinical Program's Technical Standards*** detailed above that outline the Program's expectations. Clinical psychologists provide services to the public, and thus certain interpersonal skills are necessary to work effectively with those who seek psychological services. Therefore, program evaluations and decisions that a student may continue in the program will include evaluation of the professional and interpersonal skills necessary to function as an effective clinical psychologist. Given that clinical services are provided by students, it is essential that all students demonstrate appropriate professional behavior. This includes adherence to all clinic procedures and policies (as summarized in the Psychology Clinic Procedures Manual). All required documentation should be completed in a timely manner. Supervisors should be fully informed of all clinical activities and students are required to follow clinical policies, adhere to the APA ethics code, and follow all applicable state laws. Lack of professional conduct (including failure to follow clinic procedures; inappropriate or unprofessional behavior towards clients, faculty, staff, or students; violations of the APA ethics code or Maryland laws and regulations pertaining to the practice of psychology) will be grounds for probation or termination from the Clinical Program.

When a student is put on Academic Probation, a Probation Committee is formed consisting of three faculty members and the student. The Probation Committee will work with the student placed on probation to develop a remediation plan. The DCT, clinical supervisors,

and/or research mentor will collaborate in this process as appropriate. During the ensuing 12 months, the student will meet with the Probation Committee to discuss progress on the plan. The Probation Committee will provide a written evaluation of the student's progress at the end of six months and again at the end of the probationary period (12 months). This written evaluation provides the student with substantive, written feedback on the extent to which the corrective actions in the remedial plan have or have not been successful in addressing the issue or concern of a grievance. If the probationary status is not resolved favorably by the end of the 12 months, the student will be terminated from the Graduate Program.

Changing Primary Advisors

All students are assigned a primary advisor upon admission to the Clinical Program. Students are also expected to identify a second mentor who meets one to two times per year for professional guidance and development. Although students typically remain with their assigned advisor throughout their graduate careers, there are occasions in which students may need to switch advisors. These occasions include, but are not limited to, cases in which (a) the student discovers that his or her interest do not fit with their assigned advisor, (b) the faculty member decides to terminate his or her role as primary advisor, or (c) the death or departure of the faculty member from the university. Requests for termination of the student-advisor relationship by either party shall be made in writing to the Director of Graduate Studies, and a written notice of termination shall be provided to both the advisor and the student by the end of the semester in which the request for termination is made. The student is required to secure the commitment of a new advisor within 4 months of the notice of termination. Failure to obtain a new advisor is grounds for termination from the program. More information about primary and secondary/multiple mentors and changing mentors can be found in the **Graduate Student Mentorship Policy**.

Student Termination/Dismissal or Departure from the Clinical Program

A student's status in the program may be terminated for a number of reasons. Termination could be initiated by the student (e.g., relocation, changing career plans, displeasure with the program) or the Clinical Program. If a student's status is terminated, the Program seeks to understand the factors leading to the termination/departure. Before leaving the program, the student will be encouraged to meet with the DCT for an exit interview so the DCT can understand the circumstances contributing to the departure. The DCT will also meet with the student's advisor or any other parties to gather relevant information. The DCT will make every effort to understand the reasons for the departure to determine the role the Program may have played in the departure. The Program strives to continuously improve. Information gathered will be shared, if deemed appropriate, with the clinical faculty so the faculty can discuss whether program changes are necessary. If the departing student's mentor is the DCT, the Assistant DCT will conduct the exit interviews.

Grades and Incompletes

The traditional A through F grading system is used in department graduate courses. In some independent study, special projects courses, clinical laboratory, and thesis and dissertation credit hours, a grade of S (satisfactory) or P (pass) may be assigned. The assignment of grades is made by the instructor of record in the course. According to the Department Graduate Handbook: A minimum average of B must be attained across all departmental core courses. In

addition, a minimum average of B must be maintained across all core and specialty area courses (grades for individual reading and research courses, area wide meeting courses, and thesis and dissertation credits are excluded in the calculation of this average). If either average is less than "B", the student is on probation.

In our Clinical Program, students are considered in good standing when they complete their courses on schedule with grades of "B" or better in graded courses (courses with grades lower than "B" are retaken) and a Satisfactory in all didactic practica. Any course grade of less than "B" must be retaken. Two grades of "B-" or below in different courses results in automatic termination from the program. Obtaining a second grade of "B-" or below through repeating a course, does not count as a second "B-" or below, and does not result in automatic termination from the program.

Student progress will be evaluated by the specialty area at least annually. The Department requires annual written reviews of a student's progress through the program until the student has achieved candidacy. Students meet with their advisors and/or DCT to discuss reviews of their performances.

There are two department requirements for advancement to doctoral candidacy; a minimum 3.0 average in Departmental courses, and an overall GPA that exceed 3.0 (excluding research and reading courses). In addition, clinical faculty endorsement of advancement to candidacy includes multiple factors including demonstration of professional competence, responsibility, judgment, responsiveness to supervision, etc.

A grade of I (Incomplete) indicates that the instructor has postponed the assignment of a grade until such time as the work has been completed. There are several important points to note about the grade of I. First, assignment is solely at the discretion of the instructor. A student may request an I for any course; however, faculty require justification for why coursework cannot be completed on time. Second, the assignment of an I requires an explicit written agreement, including a time limit about when the work will be completed. If the agreement is not kept, the I may be changed into an F.

The Graduate Committee regularly reviews the progress of any student with multiple I (s) on his/her record.

A. University and Department Requirements

The University has two basic deadlines: (1) a student must be admitted to candidacy for the doctorate program within five years after admission to the doctoral program; and (2) students must complete the entire program for the degree, including the dissertation and final examination, during a four-year period after admission to candidacy, or nine years after admission to the doctoral program, whichever is greater. Please see the departmental policy below regarding the **Department's Milestone Expected Completion Dates**, which can also be found in the Graduate Manual.

1. Master's Proposal **(Fall, Year 2**) [The department does not require completion of Master's degree]
2. Master's Defense* / Research Competency **(Fall, Year 3)**
3. Qualifying Exam **(Spring, Year 3 / Fall, Year 4)**
4. Advancement to Candidacy for PhD **(Spring, Year 3 / Fall, Year 4)** [Usually concomitant with Qualifying Exam]
5. Dissertation Proposal **(Year 4)**
6. Dissertation Defense (**Year 5)**

7. Clinical Internship **(Year 6)**

The clinical area has two additional suggested timelines: (1) a student should achieve Research Competence by the end of the fifth semester (i.e., end of the Fall semester of the third year); Research Competence includes completion of the Master's Thesis; and (2) a student should successfully complete the Comprehensive Exam (i.e., the TIE Project) and departmental and clinical program core courses by the end of the third year following matriculation. Therefore, meeting these timelines facilitates students' advancements to candidacy by the end of the third year.

B. Continuous Registration

All students advanced to doctoral candidacy must be registered for at least one credit hour each semester. Graduate students who fail to register without obtaining formal exemptions from the Graduate School are in breach of the current "Minimum Registration Requirements" as stated in The Graduate Catalog. Students failing to register for two consecutive semesters (including the current semester) will be notified that they will be dismissed from the Graduate School for failure to comply with the continuous registration requirement. Students advanced to doctoral candidacy are required by the Graduate School to enroll in 6 credit hours of PSYC 899 (Doctoral Dissertation Research) each semester, including during the internship year if they did not complete their dissertation prior to internship. Students who have completed their dissertation will have to be enrolled in at least one credit. If students have completed their dissertation and are not on campus or using campus resources, they can request that the mandatory fees be waived. According to the Graduate School, students who successfully submit their final dissertation by the first day of the summer that they are completing internship can petition for a waiver that would enable them to not enroll in summer credits during the semester that they graduate. Students are responsible for paying all required tuition during internship and should plan accordingly.

C. Leave of Absence

The University may grant leaves of absence for all graduate students who need to interrupt their studies for childbearing, adoption, dependency care or illness. A leave of absence will stop the time-to-degree clock. Students who have advanced to candidacy may apply for leaves of absence.

Procedure. Leaves of absence must be approved by the student's advisor, the specialty area, and the Graduate Committee. The request for a leave of absence must be submitted in writing to the Director of Graduate Studies. The request must state the reason that the leave is being requested and when the student intends to return.

Time Limitation. A leave of absence will be granted only to students who are in good academic standing. Except for unusual circumstances (e.g. military service), requests will be granted for only one year. If a student fails to return after the specified period of time, he or she must then reapply for graduate admission. At that time, the student's specialty area and the Director of Graduate Studies will reexamine the credentials of the candidate and determine whether to readmit the student.

D. Student Evaluations

Students are evaluated formally by their research mentor/advisor and the Clinical Faculty each year. Students also receive evaluations from their clinical supervisors (onsite and external practicum research supervisors) each semester.

End of Semester Clinical Supervisor Evaluations. At the end of each semester, clinical supervisors complete the **Clinical Supervisor's Evaluation of Trainee Form (Appendix L)**. This evaluation form is completed on all students registered in Clinical Laboratory (PSYC 629), seeing clients in the clinic, or on externship, by their clinical supervisors. The evaluation is completed by the primary Clinical Supervisor and evaluates the competency level of student's clinical skills, use of supervision, and professional behavior.

Student Annual Evaluations. Once per year (at the beginning of the Fall semester), the clinical faculty review the progress of all students in the Clinical Program. Students are responsible for keeping the mentor informed of student progress by completing the **Cumulative and Annual Student Report (Appendix B)** and updating their CV, which are due **August 30th** to their mentor, the DCT, and submitted to the Graduate Studies Office (PSYCPhD@umd.edu). Using this information and feedback from the student's mentors, instructors and supervisors, the faculty evaluate the student's progress in the Clinical Program. At the time of the annual review by the Clinical Faculty, all grades, compliance with department and program requirements, and reports from clinical supervisors are also reviewed to ensure satisfactory progress. Students receive a written letter summarizing the evaluation completed by their Research Mentor/Advisor and co-signed by the Program DCT. In cases where problems are encountered, the clinical faculty will follow procedures outlined above (see *Student Remediation, Probation, and Dismissal Procedures*).

E. Malpractice Insurance

Students are required to purchase malpractice insurance during the course of their clinical training at UMCP and while on externship and internship. Two options include: (a) The Trust (https://www.trustinsurance.com/Products-Services/Student-Liability) and (b) American Professional Agency (https://www.americanprofessional.com/). Proof of student insurance should be submitted to the Clinic Director each year (requests for verification will be sent in June). Students conducting externship clinical activities need to confirm with their externship or external placement site whether or not they are covered by the site. It is the student's responsibility to ensure that he or she has malpractice coverage on externships or any off campus clinical activities.

F. Office Space

Office space is re-assigned each year (and sometimes at the end of a semester) based on faculty and student needs. However, every effort is made to maintain the original assignments so that continuity is achieved on a longer-term basis. Exchanging of office space among students is not permitted unless it is cleared with the Director of Graduate Studies.

Priority for office space goes to students who have a specific need and is assigned as follows: (a) On TA assignments in which there is a need to see undergraduate students. Full-time TAs have priority over 1/2-time or 1/4-time TAs. (b) Serving specific area or department functions, such as teaching a course, assisting the Admissions Committee, serving as Coordinator to the Minority Affairs Committee, or functioning as a research assistant. (c) Working on ongoing faculty-student research projects (not just doing thesis or dissertation with

specific faculty members). (d) Serving other special program functions that would logically be enhanced by having relatively small, private office space.

Students not meeting any of these criteria should expect to be assigned to relatively large "pool" areas. In some instances, desks may have to be shared. Students who are beyond their fifth year in the program have low priority for office assignment if their role in the department does not demand it (e.g., course instructor).

G. Student Social Media Policy

UMD recognizes that the Internet provides the community with unique opportunities to participate in interactive discussions and share information on particular topics using a wide array of social media platforms such as Facebook, LinkedIn, Instagram, etc.. A student is advised to use appropriate professional and ethical judgment when using social media. All students must adhere to the national standards of practice associated with HIPAA and FERPA. Under HIPAA no individual associated with UMD may disclose any client or research participant identifying information. Any information about clients, supervisees, or research participants (this includes any demographic descriptor, such as age, sex, race, etc.) including pictures of them, their work, or your work related to them (e.g., case notes, testing forms, emails, etc.) should not be shared online under any circumstances. In accordance with the standards of this policy, no UMD student may do any of the following: ● Disclose the name, age, race/ethnicity or any identifying information regarding a client, supervisee, or research participant ● Disclose the contact information of a client ● Disclose statements or information shared by a client outside of session beyond supervision or consultation ● Take pictures of a client and/or share pictures of a client online ● Disclose the diagnosis of a client or research participant ● Share pictures or verbal descriptions of a client's treatment plan, progress notes, research or assessment results

Under ethical and legal (FERPA) guidelines, students' educational records should be treated confidentially. Information related to students, including identifying information, grades, performance on exams, etc., should not be disseminated online. Therefore, in accordance with FERPA, no UMD student may do the following: ● Disclose a student's identifying information (name, year, etc.) ● Disclose parts of a student's academic record (exam scores, essays, GPA, etc.) ● Disclose the disciplinary status of a student (suspension, demerit, etc.) ● Disclose whether a student is disabled and/or in need of accommodations. Failure to adhere to these national standards will be considered grounds for discipline, up to and including dismissal from the program. A former student in withdrawn or dismissed status may not claim to be an active student of UMD on any social networking site.

The following points act as suggestions for social media users within the UMD program. While failure to adhere to these suggestions may not result in disciplinary action, individuals who choose not to implement these suggestions must accept external risks (failure to acquire jobs, risking libel and defamation suits, having clients and students access private information, etc.) at their own discretion. The institution does not assume any liability or risk for a student's posting online.

1) Students are advised to use pseudonyms if they are easily found online and use the most restrictive privacy settings for all social media accounts. This point is advised to protect students from being found online by their clients or students having their private information disseminated among these groups. It is also advised to prevent the creation of potentially harmful multiple relationships.

2) Students are advised to create separate social media accounts for personal and professional purposes. Again, this is advised to help students avoid multiple relationships and protect graduate student privacy.
3) Online postings should not include content or images that are harassing, discriminatory, defamatory, threatening, disparaging, libelous, or otherwise illegal or injurious to other students, clients, faculty, staff, or administration.
4) Students are cautioned against posting images of their practicum, fieldwork, or externship sites, whether it is their office, the bathroom, or their therapy rooms, as doing so may compromise the safety of their clients in confidential spaces.
5) Students should not post images of their clients even if their faces are not visible. Although students may not recognize their client by their clothing, jewelry, hair, etc., it is possible that another individual may and this will impugn upon both the client's right to confidentiality and possibly their safety.
6) Students are advised against posting images of the curriculum being used with clients as not only could this be a copyright issue, but it may also provide others with information about client diagnoses and issues, which are confidential.
7) Students are advised against posting quotes from students' papers or quotes that delineate interactions between themselves and their students, as students may respond negatively and potentially file a complaint due to misconceptions about confidentiality.
8) Students are advised against posting images that show their students' faces. This is to protect the confidentiality of students.
9) Students should not post information related to their students' evaluations of them whether they are positive or negative, as again, students may respond negatively and potentially file a complaint. Additionally, students may lose trust in the confidentiality of the system for filing evaluations.
10) In all of their online activities, students are reminded that they act as ambassadors for UMD, and the field as a whole. They should be thoughtful and careful about their online presence and refrain from posts that might cast doubt on the integrity of the profession of applied psychology.

H. Use of Artificial Intelligence (AI) in Course and Clinical Work

Unless given permission, students are not allowed to use AI tools for assistance on assignments, clinical notes, or clinical report writing. While AI systems can provide valuable support and insights during the learning process, there are ethical and legal concerns for using them with client/patient information and data. Some of these concerns center around informed consent to use, safety and transparency, algorithmic fairness and biases, and data privacy. Further, to be a competent clinician in graduate school and your careers, you will need to thoroughly understand the concepts and processes taught. Please see the Clinic Manual for the Psychology Clinic's Policy on the use of AI and the Department's Graduat Program Policy on AI.

IX. STUDENT RESOURCES

A. Telephones

In general, student offices are not equipped with telephones. Various campus and local telephones are available in the building, including in your mentor's lab space and in the

Psychology Clinic. Students are not permitted to use the Psychology Clinic's Administrative Assistants' telephones. There is a campus telephone in the Psychology Clinic for use of those enrolled in Clinical Laboratory.

Occasionally, it is necessary for students to provide a telephone number for incoming messages, and often that is the staff assisting the Clinical Program's phone. The staff assisting the Clinical Program can make note of an incoming call and post the message to the student's email address. For those enrolled in Clinical Laboratory, the Psychology Clinic (301-405-4808) will take incoming client calls and post the message to the email address. Students are only allowed to make long distance calls when a client issue is involved. No other long distance calls are permitted. Students are permitted to make phone calls from their personal cell phones if they block the number (e.g., dial *67 then area code and then phone number on iPhone) and the call is made during the working hours of the clinic when supervisors are available for assistance.

B. Information Technology (IT) Support and Equipment

College of Behavioral and Social Sciences' (BSOS) Office of Academic and Computing Services (OACS) provides IT support and resources to our department staff, faculty and students, including assistance with remote desktop, cloud resources, access to software and technical/equipment support. Various types of software and equipment are available through the department's Electronics Technician and Equipment Manager, Mr. Tony Chan, achan1@umd.edu. By completing a request form, students may reserve video equipment, microphones, laptops, and projectors. Laptops are also sometimes available for personal use. The demand for such equipment requires advance reservation. Mr. Chan and his staff serve as consultants to faculty and students who are experiencing difficulty in setting up reserved equipment. Other requests for computer services must first be submitted through OACS work orders.

C. Training Materials

The Psychology Clinic offers an extensive library consisting of treatment manuals, assessment materials, and digital training resources. These resources can be loaned to students for brief periods. Please follow-up the sign-out procedures in the Clinic's library. We are committed to maintaining up-to-date resources to support students' training**. If there are materials that you would like the Clinic to have, please contact the Clinic Director.**

X. Important Information for Students Interested in Pursuing Externships/Internships at Veterans Affairs (VA) Medical Centers

The Trainee Qualifications and Credentials Verification Letter (TQCVL) Verification Process for the Clinical Psychology Doctoral Program in the Department of Psychology at the University of Maryland College Park. The *Trainee Qualifications and Credentials Verification Letter* (TQCVL) is a letter that DCTs are required to sign and submit to the VA on behalf of each trainee that will be working at the VA. The letter contains personal and medical information (e.g., vaccination status) to which the DCT is customarily not privy.

The following is a set of guidelines for handling this VA requirement to protect the privacy and respect the self-determination of clinical psychology students as they decide if they wish to pursue VA training opportunities. This process is also in place to ensure that the DCT feels

comfortable signing a document that attests to information not appropriate for a DCT to review or evaluate (e.g., vaccination records). For this documented policy, the term *DCT* refers to the current Director of Clinical Training in the Clinical Psychology Ph.D. Program at the University of Maryland College Park or an acting DCT who has been appointed the role of acting Program Director in the absence or unavailability of the current DCT.

The student has three options: 1) the student can choose to have the DCT complete the form and verify only information that is typically collected by the program and note which information cannot be verified. This approach may satisfy the VA, but the VA may reject it and not allow the student to begin the VA training experience; 2) agree to the procedures outlined below and provide the DCT with the requested information; and 3) refrain from applying to VA externships/internships. Students who require the completion of the TQCVL by the DCT must complete the **TQCVL Attestation for the Clinical Psychology Doctoral Program in the Department of Psychology at the University of Maryland College Park Form (Appendix O)** prior to the DCT completing the TQCVL.

1. The TQCVL VA requirement will be made transparent to all program students, including the option not to pursue VA training if students wish not to disclose information required by the TQCVL letter; this information, including this written policy, will be included in detail in the
    a. clinical psychology program's student handbook
    b. practicum training orientation and materials
    c. clinical internship training orientation and materials.
2. Students pursuing VA training and for whom the VA has selected option 2 (see above) and requested a DCT-endorsed TQCVL must, per the VA, complete the following steps:
    a. supply evidence or certification of satisfactory physical condition based on a physical examination in the past 12-months
    b. obtain a tuberculosis screening (with a formal physician note and signature attesting to this screening)
    c. satisfy one of the following: i) obtain a hepatitis B vaccine, ii) show formal documentation of having already received such a vaccine (with a formal physician note and signature attesting to this vaccination), or iii) a signed declination waiver.
    d. satisfy one of the following: by November 30th of the preceding year i) obtain an influenza vaccine, ii) show formal documentation of having already received such a vaccine (with a formal physician note and signature attesting to this vaccination), or iii) a signed declination waiver and a written acknowledgement that declining this waiver requires wearing a face mask at VA facilities during the entirety of the influenza season.
    e. satisfy one of the following: i) obtain the Measles, Mumps, & Rubella, Varicella, Tetanus, Diphtheria, Pertussis, and Meningococcal vaccines, ii) show formal documentation of having already received each of these vaccines (with a formal physician note and signature attesting to this vaccination), or iii) a signed declination waiver.
    f. sign a program-specific statement that

i. permits the DCT to screen your name against the Health and Human Services' list of Excluded Individuals
ii. acknowledges that should your name show up on the Health and Human Services' list of Excluded Individuals, the DCT will be unable to endorse your TQCVL
iii. sign a program-specific statement that, if assigned to male[1] at birth, a US citizen or immigrant, and between 18 and 25 years old (inclusive of 18 and 25), you have registered with Selective Service or will provided a Status Information Letter.

g. For non-US citizen trainees,
   i. provide the DCT with documented proof of current immigrant or non-immigrant status. This may include visa status documents, permanent resident card, Deferred Action for Childhood Arrivals (DACA) trainee Employment Authorization Document (Form I-766), and other forms as requested by the VA during this process
   ii. sign a statement that permits the DCT to provide this documented proof of current immigrant or non-immigrant status along with the TQCVL to the VA.

The foregoing are mandatory requirements set by the VA. The DCT has no ability to waive or modify them. Upon the student's request, the DCT can refrain from answering the questions pertaining to the information above; however, the VA may ultimately decide to terminate the contract with the student if the information is not provided. Of course, the decision to pursue training at the VA is at the sole option of the student, and a student who does not wish to comply with these requirements may also seek training at a non-VA facility.

3. To protect the privacy and security of the information required to be collected for the TQCVL, the following protocols will be followed:
   a. Any information collected by the DCT for the purposes of completing your TQCVL will be reviewed only by the DCT for purposes of completing the TQCVL or verifying information on the TQCVL. No other faculty will have access to this information.

The information for completing the TQCVL will be reviewed and destroyed upon submitting the TQCVL. Other than the DCT, no other faculty, staff, or students will have access to the TQCVL information.

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[1]Federal law requires that most males living in the US between the ages of 18 and 25 (inclusive of 18 and 25) register with the Selective Service System. This includes individuals who are US citizens, non-US citizens and dual nationals, regardless of their immigration status. *Male* for this purpose is defined as those individuals born male on their birth certificate regardless of current gender. Only male, non-US citizens on a student or visitor visa are exempt from registration. Males required to register, but who fail to do so by their 26th birthday, are **barred from any position in any Executive Agency**.

For students who have been matched to an internship at the VA, the University of Maryland has set up a contract with the VA until 2036. The contract requires UMD graduate interns to complete a FEPA Authorization to release education records **(Appendix Q**). This waiver must be completed prior to going on internship and submitted to the DCT.

XI. Appendices

Appendix A
Last Updated July 20, 2026

UMD Clinical PhD Program Curriculum Worksheet

This form should be completed at the beginning of each academic year by students to guide course selections and curriculum planning for the year. First year students should review the form with their mentors to become acquainted with program requirements, but they do not have to complete the form. Students should review the form with their mentors, and their mentors must sign the form. The form should then be added to the student's academic record. The form also must be completed by the student and reviewed by the Mentor prior to Advancement to Candidacy to verify all core courses have been completed. The DCT must also review and sign the form prior to applying to internship. Save the form as STUDENT LAST NAME FIRST INITIAL_CURRICULUM WORKSHEET_SEMESTERYEAR. Submit the form to the Graduate Studies Office (email: PSYCPHD@umd.edu) and cc your mentor and the DCT.

Note: Denote TR for Transfer Credit. Pending department review and approval, students can transfer up to six credits from a previous graduate program.

Name _____ **Date:** _____

Competency Requirements	Requirements	List Foundational Knowledge (Undergrad class from 4 yr school w/ grade ≥ B OR Psych GRE subscore > 70%ile) *must be verified and approved by DCT	List Graduate Level Course(s), Grade(s), and Semester(s)/Year(s) for Each Course	Date DSK Completed (once all components are complete)
Discipline Specific Knowledge				
Category 1: History and Systems	History and Systems of Psychology is covered across several classes, and H&S readings are noted with a superscript H (^{H}): PSYC 622 Clinical Research Methods, PSYC 623 Child Development & Psychopathology, PSYC 632 Child Interventions, PSYC 624 Adult Psychopathology, PSYC 630 Adult Interventions, PSYC 643 Ethics, PSYC 625 Assessment, and PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences **The H&S requirement is evaluated as part of the TIE Project. Date completed is the date of successful**			

		completion of the TIE Project. Prior to the TIE, H&S was evaluated as part of the Comprehensive Exam.				
Category 2: Basic Content Areas		**"Foundational" met**	**"Foundational" not met**			
2a.	Affective Aspects of Behavior	PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) PSYC 612 Affective Science Perspectives on Temperament & Personality (prior to 2020)	PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) PSYC 612 Affective Science Perspectives on Temperament & Personality (prior to 2020)			
2b.	Biological Aspects of Behavior	PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) Or PSYC 606 Human Biopsychology	PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) Or PSYC 606 Human Biopsychology			
2c.	Cognitive Aspects of Behavior	PSYC 607 Human Learning and Cognitive Psychology Or PSYC 798E Foundations of Cognition Or PSYC 789K Social and Cognitive Aspects of Behavior Or EDHD 721 Cognitive Development & Learning Or EDHD 775 Physiological Development and Neuroscience	PSYC 607 Human Learning and Cognitive Psychology Or PSYC 798E Foundations of Cognition Or PSYC 789K Social and Cognitive Aspects of Behavior Or EDHD 721 Cognitive Development & Learning			

		Or EDHD 760 Advanced Educational Psychology Or PSYC 757 Developmental Cognitive Neuroscience				
2d.	Developmental Aspects of Behavior Some courses can fulfill the graduate level knowledge only if the student completes a Developmental Course Overlay, which is an exam that is administered and graded by the clinical faculty while a student is enrolled in specific approved courses denoted by [DCO]. This allows the faculty to separately evaluate the student's performance in the Developmental DSK and show that the student has demonstrated knowledge in this area with a grade of B or better, through a graded evaluation independent of the grading in the graduate course that covers a separate DSK area.	PSYC 623 Child Development & Psychopathology Or PSYC 611 Advanced Developmental Psychology Or EDHD 690 Foundations of Human Development Or [DCO]PSYC 757 Developmental Cognitive Neuroscience Or [DCO] PSYC 819D Attachment Across the Lifespan: Theory, Research, and Clinical Implications Or [DCO]EDHD 720 Social Development and Socialization Processes Or [DCO]EDHD 721 Cognitive Development & Learning Or [DCO]EDHD 750 Culture Context and Development	PSYC 623 Child Development & Psychopathology Or PSYC 611 Advanced Developmental Psychology Or EDHD 690 Foundations of Human Development			
2e.	Social Aspects of Behavior	PSYC 604 Fundamentals of Social Psychology	PSYC 604 Fundamentals of Social Psychology			

		Or PSYC 798Z Fundamentals of Social Psychology Or PSYC 789K Social and Cognitive Aspects of Behavior Or EDHD 720 Social Development and Socialization Processes Or PSYC 798 Graduate Seminar in Social Psychology, Attraction, and Relationships Or PSYC 819D Attachment Across the Lifespan: Theory, Research, and Clinical Implications Or EDHD 711 Peer-Culture and Group Processes Or [DCO]EDHD 750 Culture Context and Development Or PSYC798P: Stereotyping and Prejudice	Or PSYC 798Z Fundamentals of Social Psychology Or PSYC 789K Social and Cognitive Aspects of Behavior Or EDHD 720 Social Development and Socialization Processes			
Category 3. Advanced Integrative Knowledge		PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) OR PSYC 612 Affective Science Perspectives on Temperament & Personality (offered prior to 2020), PSYC 623 Child Development & Psychopathology PSYC 624 Adult Psychopathology Mentored Research (Master's Thesis, TIE Project, Dissertation) **Evaluated as part of TIE Project**				

		Date completed is the date of successful completion of the TIE Project.			
Category 4. Methods of Inquiry/Research					
4a.	Research Methods	PSYC 622 Research Methods Or PSYC 798C Research Methods in Developmental Psychology Or PSYC 798D Secondary Data Analysis for Psychologists			
4b.	Statistical Analysis	PSYC 601 Quantitative Methods I & PSYC 602 Quantitative Methods II			
4c.	Psychometrics	PSYC 625 Psychological Assessment: Psychometric Principles, Testing & Behaviors PSYC 629A: Clinical Laboratory Foundations of Clinical Assessment and Intervention (prior to 2025) PSYC 629B Clinical Laboratory: Assessment Practicum (two semesters)			
Profession-Wide Competencies					
(Not listed by APA) Psychopathology		PSYC 623 Child Development & Psychopathology, PSYC624 Adult Psychopathology			
1. Research		PSYC 799, 898, 899			
2. Ethical and Legal Standards		PSYC 643 Ethics, Diversity and Professional Issues in Clinical Psychology PSYC 629 sections: Clinical Laboratories			
3. Individual and Cultural Diversity		PSYC 643 Ethics, Diversity and Professional Issues in Clinical Psychology PSYC 629G: Institute Against Oppression/ Multicultural Therapy Diversity is also covered across several required courses and is denoted by a ^{D} in each syllabus: PSYC 622 Clinical Research Methods, PSYC 623 Child Development & Psychopathology, PSYC 632 Child Interventions, PSYC 624 Adult Psychopathology, PSYC 630 Adult Interventions, PSYC 643 Ethics, PSYC 625 Assessment, and PSYC 614 Emotion/Bio			(Date completed is the date when all courses listed are complete)
4. Professional values/attitudes/behavior		PSYC 643 Ethics, Diversity and Professional Issues in Clinical Psychology; PSYC 629 sections: Clinical Laboratories; Involvement in research projects			The PSYC 629 series is completed at the end of

				Summer after your third year.
5. Communication/Interpersonal Skills	PSYC 643 Ethics, Diversity and Professional Issues in Clinical Psychology; PSYC629 sections: Clinical Laboratories; Involvement in research projects			
6. Assessment	PSYC 625 Psychological Assessment: Psychometric Principles, Testing & Behaviors PSYC 629A Foundational of Clinical Assessment and Intervention (prior to 2025) PSYC 629B Clinical Laboratories: Assessment Practicum (two semesters)			
7. Intervention	PSYC 632 Child Interventions; PSYC 630 Adult Interventions PSYC 629 C-F Clinical Laboratories			
8. Supervision	PSYC 629F: Clinical Laboratories Foundations of Clinical Supervision and Consultation PSYC 629 sections Mentored Research			
9. Consultation and Intra/Interdisciplinary skills	PSYC 629F: Clinical Laboratories Foundations of Clinical Supervision and Consultation PSYC 629 sections Mentored Research			

Research Requirements	Requirements/Deadlines	Anticipated Completion	Date Completed
Master's Proposal			
Master's Defense	Aim to defend by the Summer of your second year		
Master's Research Presentation (CRIS)			
Clinical Case Conference Presentation			
TIE Project Proposal			
TIE Project Defense	Aim to defend by the summer of your third year		

Dissertation Proposal	**DUE** Oct 1 of Internship Application Year		
Dissertation Defense	Aim to defend before you leave for internship (saves $$$$)!!		

Note: Students must submit their successfully defended Master's Thesis, TIE Project, and Dissertation to the Graduate Office so they can be stored in your student file. Email the document to PSYCPHD@umd.edu

Clinical Requirements	
Number of Direct Intervention + Assessment Hours to Date (500 is plenty!)	
Number of Supervision Hours to Date	
Numbers of Assessment Batteries (as defined by APPIC) WITH ADULTS	
Numbers of Assessment Batteries (as defined by APPIC) WITH YOUTH	
Prac(s) in Year 3	
Prac(s) in Year 4	
Prac(s) in Year 5	
Prac(s) in Year 6	

Please include all UMD practicum, including PCIT, SUCCEEDS, and lab-based clinical work, as well as external practicum experiences.

Additional details of clinical training and goals:

_____ _____

Student (signature/date) *Mentor/Advisor (signature/date)

_____

Director of Clinical Training (signature/date)

*DCT must review and approve form by the first of October prior to applying to internship

_____

***Note: Prior to Advancement to Candidacy, the Mentor/Advisor must review this form and verify the student has completed all Clinical Core and Departmental Core course requirements and successfully completed the Master's Thesis and TIE Project.**

Appendix A
Last Updated July 27, 2023

SAMPLE UMD Clinical PhD Program Curriculum Worksheet

This form should be completed at the beginning of each academic year by students to guide course selections and curriculum planning for the year. First year students should review the form with their mentors to become acquainted with program requirements, but they do not have to complete the form. Students should review the form with their mentors, and their mentors must sign the form. The form should then be added to the student's academic record. The form also must be completed by the student and reviewed by the Mentor prior to Advancement to Candidacy to verify all core courses have been completed. The DCT must also review and sign the form prior to applying to internship. Save the form as STUDENT LAST NAME FIRST INITIAL_CURRICULUM WORKSHEET_SEMESTERYEAR. Submit the form to the Graduate Studies Office and cc your mentor and the DCT.

Note: Denote TR for Transfer Credit. Pending department review and approval, students can transfer up to six credits from a previous graduate program.

Name ___XXXXXXXX_____ Semester: ___Spring 2023_____

Competency Requirements	Requirements	List Foundational Knowledge (Undergrad class from 4 yr school w/ grade ≥ B OR Psych GRE subscore > 70%ile) *must be verified and approved by DCT	List Graduate Level Course(s), Grade(s), and Semester(s)/Year(s) for Each Course	Date DSK Completed (once all components are complete)
Discipline Specific Knowledge				
Category 1: History and Systems	History and Systems of Psychology is covered across several required classes, and H&S readings are noted with an superscript H (^{H}): PSYC 622 Clinical Research Methods, PSYC 623 Child Psychopathology, PSYC 632 Child Interventions, PSYC 624 Adult Psychopathology, PSYC 630 Adult Interventions, PSYC 643 Ethics, PSYC 625 Assessment, and PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences **The H&S requirement is evaluated as part of the TIE Project. Date completed is the date of successful**		PSYC 622 X S19 PSYC 623 X S20 PSYC 632 X F21 PSYC 624 X F20 PSYC 630 X S21 PSYC 643 X F20 PSYC 625 X S20 TIE 10/15/2020 (Your grade replaces the X's). Semesters will differ and reflect when you took the class F21, S22, etc.	10/15/2020

		completion of the TIE Project. Prior to the TIE, H&S was evaluated as part of the Comprehensive Exam.				
Category 2: Basic Content Areas		**"Foundational" met**	**"Foundational" not met**			
2a.	Affective Aspects of Behavior	PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) PSYC 612 Affective Science Perspectives on Temperament & Personality (prior to 2020)	PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) PSYC 612 Affective Science Perspectives on Temperament & Personality (prior to 2020)		PSYC 612 X	Fall 2018
2b.	Biological Aspects of Behavior	PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) Or PSYC 606 Human Biopsychology	PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) Or PSYC 606 Human Biopsychology		PSYC 606 X	Spring 2019
2c.	Cognitive Aspects of Behavior	PSYC 607 Human Learning and Cognitive Psychology Or PSYC 789K Social and Cognitive Aspects of Behavior Or EDHD 721 Cognitive Development & Learning Or EDHD 775 Physiological Development and Neuroscience Or EDHD 760 Advanced Educational Psychology	PSYC 607 Human Learning and Cognitive Psychology Or PSYC 789K Social and Cognitive Aspects of Behavior Or EDHD 721 Cognitive Development & Learning		PSYC 607 X	Spring 2019

		Or PSYC 757 Developmental Cognitive Neuroscience				
2d.	Developmental Aspects of Behavior Some courses can fulfill the graduate level knowledge only if the student completes a Developmental Course Overlay, which is an exam that is administered and graded by the clinical faculty while a student is enrolled in specific approved courses denoted by [DCO]. This allows the faculty to separately evaluate the student's performance in the Developmental DSK and show that the student has demonstrated knowledge in this area with a grade of B or better, through a graded evaluation independent of the grading in the graduate course that covers a separate DSK area.	PSYC 611 Advanced Developmental Psychology Or EDHD 690 Foundations of Human Development Or [DCO]PSYC 757 Developmental Cognitive Neuroscience Or [DCO] PSYC 819D Attachment Across the Lifespan: Theory, Research, and Clinical Implications Or [DCO]EDHD 720 Social Development and Socialization Processes Or [DCO]EDHD 721 Cognitive Development & Learning	PSYC 611 Advanced Developmental Psychology Or EDHD 690 Foundations of Human Development	Undergrad class from Northeastern University (spring 2012, PSYC 3404 – Developmental Psychology, grade of X) Approved by DCT on date XX/XX/XXXX	PSYC819D X	Fall 2019
2e.	Social Aspects of Behavior	PSYC 604 Fundamentals of Social Psychology Or PSYC 789K Social and Cognitive Aspects of Behavior Or EDHD 720 Social Development and Socialization Processes Or PSYC 798 Graduate Seminar in Social	PSYC 604 Fundamentals of Social Psychology Or PSYC 789K Social and Cognitive Aspects of Behavior Or EDHD 720 Social Development and Socialization Processes	PSYC GRE SCALED SCORE OF XX (XX[TH] PERCENTILE) Approved by DCT on date XX/XX/XXXX	PSYC 819D X	Fall 2019

		Psychology, Attraction, and Relationships Or PSYC 819D Attachment Across the Lifespan: Theory, Research, and Clinical Implications Or EDHD 711 Peer-Culture and Group Processes				
Category 3. Advanced Integrative Knowledge		PSYC 614 Emotion: From Biological Foundations to Contemporary Debates in the Psychological Sciences (2020 onward) OR PSYC 612 Affective Science Perspectives on Temperament & Personality (offered prior to 2020), PLUS PSYC 623 Child Psychopathology PSYC 624 Adult Psychopathology Mentored Research (Master's Thesis, TIE Project, Dissertation) **Evaluated as part of TIE Project** Date completed is the date of successful completion of the TIE Project.			PSYC 612 X F18 PSYC 623 X F18 PSYC 624 X F17 Thesis 10/15/2019 TIE 10/15/2020	10/15/2020
Category 4. Methods of Inquiry/Research						
4a.	Research Methods	PSYC 622 Research Methods			PSYC 622 X	Spring 2018
4b.	Statistical Analysis	PSYC 601 Quantitative Methods I & PSYC 602 Quantitative Methods II			PSYC 601 X F17 PSYC 602 X S18	Spring 2018
4c.	Psychometrics	PSYC 625 Psychological Assessment: Psychometric Principles, Testing & Behaviors PSYC 629A: Clinical Laboratory Foundations of Clinical Assessment and Intervention PSYC 629B Clinical Laboratory: Assessment Practicum			PSYC 625 X S18 PSYC 629A X Su18 PSYC 629B X S Su18	Summer 2018
Profession-Wide Competencies						
(Not listed by APA) Psychopathology		PSYC 623 Child Psychopathology, PSYC624 Adult Psychopathology			PSYC 624 X F17 PSYC 623 X F18	Fall 2018
1. Research		PSYC 799, 898, 899			PSYC 799 X Thesis defended 10/15/2019 PSYC 898 X PSYC 899 X	In progress

2. Ethical and Legal Standards	PSYC 643 Ethics, Diversity and Professional Issues in Clinical Psychology PSYC 629A-F: Clinical Laboratories		PSYC 643 X F17 PSYC 629A X Su18 Rest of 629 sections, grades, semesters here up through 629F Summer of 3rd year. Once you've completed 629F, this should be completed.	Summer 2020
3. Individual and Cultural Diversity	PSYC 643 Ethics, Diversity and Professional Issues in Clinical Psychology Diversity is also covered across several required courses and is denoted by a D in each syllabus: PSYC 622 Clinical Research Methods, PSYC 623 Child Psychopathology, PSYC 632 Child Interventions, PSYC 624 Adult Psychopathology, PSYC 630 Adult Interventions, PSYC 643 Ethics, PSYC 625 Assessment, and PSYC 614 Emotion/Bio (or PSYC 606)		PSYC 643 X F17 PSYC 622 X S18 PSYC 623 X F18 PSYC 632 X S20 PSYC 624 X F17 PSYC 630 X S19 PSYC 625 X S18 PSYC 606 X S19	Spring 2020
4. Professional values/attitudes/behavior	PSYC 643 Ethics, Diversity and Professional Issues in Clinical Psychology; PSYC 629A-F: Clinical Laboratories; Involvement in research projects		Copy list of 629 series, grades, semesters from above here	The PSYC 629 series is completed at the end of Summer after your third year. Summer 2020
5. Communication/Interpersonal Skills	PSYC 643 Ethics, Diversity and Professional Issues in Clinical Psychology; PSYC629A-F: Clinical Laboratories; Involvement in research projects		Copy list of 629 series, grades, semesters from above here along with PSYC 643	Summer 2020
6. Assessment	PSYC 625 Psychological Assessment: Psychometric Principles, Testing & Behaviors PSYC 629A Foundational of Clinical Assessment and Intervention PSYC 629B Clinical Laboratories: Assessment Practicum		PSYC 625 X S18 PSYC 629A Su18 PSYC 629B F18	Fall 2018
7. Intervention	PSYC 632 Child Interventions; PSYC 630 Adult Interventions		PSYC 623 X S20 PSYC 630 X S19	Summer 2020

	PSYC 629 C-F Clinical Laboratories		Copy list of 629 series, grades, semesters from above here	
8. Supervision	PSYC 629F: Clinical Laboratories Foundations of Clinical Supervision and Consultation PSYC 629 A-E Mentored Research		Copy list of 629 series, grades, semesters from above here	Summer 2020
9. Consultation and Intra/Interdisciplinary skills	PSYC 629F: Clinical Laboratories Foundations of Clinical Supervision and Consultation PSYC 629A-E Mentored Research		Copy list of 629 series, grades, semesters from above here	Summer 2020

Research Requirements	**Requirements/Deadlines**	**Anticipated Completion**	**Date Completed**
Master's Proposal			6/15/2019
Master's Defense	Aim to defend by the Summer of your second year		10/15/2019
Master's Research Presentation (CRIS)			11/15/2019
Clinical Case Conference Presentation			11/15/2020
TIE Project Proposal			2/15/2020
TIE Project Defense	Aim to defend by the summer of your third year		10/15/2020
Dissertation Proposal	**DUE** Oct 1 of Internship Application Year	9/15/21	
Dissertation Defense	Aim to defend before you leave for internship (saves $$$$)!!	5/15/22	

Appendix A
Last Updated July 27, 2023

Clinical Requirements		
Number of Direct Intervention + Assessment Hours to Date (550 is plenty!)		**535**
Number of Supervision Hours to Date		**315**
Numbers of Assessment Batteries (as defined by APPIC) WITH ADULTS		**5**
Numbers of Assessment Batteries (as defined by APPIC) WITH YOUTH		**2**
Prac(s) in Year 3	UMD Clinic	
Prac(s) in Year 4	Baltimore VA – SMI Track	
Prac(s) in Year 5	DC Jail Residential Substance Use Treatment Facility	
Prac(s) in Year 6		

Student (signature/date) *****Mentor/Advisor (signature/date)

_____ _____

Director of Clinical Training (signature/date) *DCT must review and approve form by the first of October prior to applying to internship

_____

***Note: Prior to Advancement to Candidacy, the Mentor/Advisor must review this form and verify the student has completed all Clinical Core and Departmental Core course requirements and successfully completed the Master's Thesis and TIE Project.**

Appendix B

Default Question Block

As part of your professional development, it is important to conduct regular assessments of your achievements, goals, and areas for future growth. This form provides students with a systematic procedure for documenting academic and professional development as a doctoral level clinical psychologist. Students should use this form and keep an ongoing summary of progress in the program, focusing on achievements for the past year. On the basis of this report and other information, advisors will write a review, share the review with the faculty during Fall semester, and then provide students with a written summary statement of their progress.

Please enter your name

First and last names are required. All information on individuals or their identities provided for accreditation purposes will be confidential and for the sole purpose of accreditation.

First

Middle

Last

Name of Research Mentor/Advisor

Year in Program

- ○ Year 1
- ○ Year 2
- ○ Year 3
- ○ Year 4
- ○ Year 5
- ○ Year 6 +

Education

Undergraduate Institution Name

Undergraduate Degree Year

Undergraduate GPA (4.0 scale)

Verbal GRE:

(200-800 scale)

Percentile

(130-170 scale)

Percentile

Quantitative GRE:

(200-800 scale)

Percentile

(130-170 scale)

Percentile

Analytical GRE

6-point scale

Percentile

Advanced Psychology GRE

200-990 scale

Percentile

Respecialization Student: *Respecialization is when a student, who already holds a doctoral degree in an area of psychology, enrolls in another substantive area.*

- ○ Yes
- ○ No

Gender *(please select one):*

- ○ Female
- ○ Male
- ○ Transgender
- ○ Other

Race-Ethnicity *(please select all that apply):*

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic-Latino
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ Not Reported

Subject to the Americans with Disabilities Act (ADA):

- ○ Yes
- ○ No

Foreign National:

- ○ Yes
- ○ No

Research Experience

Member of a Professional/Research Society during **2019-2020 academic year ONLY?**

- ○ Yes
- ○ No

Number of Scientific Publications during **2019-2020 academic year ONLY** *(Number of books, book chapters, or articles in peer-reviewed professional/scientific journals of which a student was an author or co-author. Publications "in press," "under review," or "submitted" should not be counted here)*

Total Number of Scientific Publications *(Number of books, book chapters, or articles in peer-reviewed professional/scientific journals of which a student was an author or co-author. Publications "in press," "under review," or "submitted" should not be counted here)*

Number of scientific manuscripts submitted this year

Number of Scientific Presentations during **2019-2020 academic year ONLY (***Number of workshops, oral presentations and/or poster presentations at professional meetings of which a student was an author or co-author)*

Total Number of Scientific Presentations *(Number of workshops, oral presentations and/or poster presentations at professional meetings of which a student was an author or co-author)*

Date of Master's Thesis Proposal Meeting (MM/DD/YYYY)

Date of Master's Thesis Defense (MM/DD/YYYY)

Master's Thesis Title

Date of TIE Proposal (MM/DD/YYYY)

Date of TIE Defense (MM/DD/YYYY)

TIE Project Title

Date of Filing Candidacy Papers (MM/DD/YYYY)

Date of Dissertation Proposal Meeting (MM/DD/YYYY)

Date of Dissertation Defense (MM/DD/YYYY)

Dissertation Title

Awards or grants **received in AY 2019-2020** *(give full citations):*

Awards or grants **submitted in AY 2019-2020** *(give full citations):*

Describe your current research interests and plans for the coming year:

Involved in leadership roles/activities in professional organizations during **2019-2020 academic year ONLY** (*e.g., roles in local, state/provincial, regional or national organizations)*

- Yes
- No

Presented a psychological topic to lay or community audience during 2019-2020 **academic year ONLY**:

- Yes
- No

Did you complete a clinical externship at an external practicum site during the 2019-2020 academic year? If yes, please provide the name of the externship and number of

hours/week.

- ○ Yes
- ○ No

Please describe any other professional activities of which you would like the clinical faculty to be aware *(e.g. public service activities, roles in student groups, positions on professional societies)*

Describe your current professional training interests and plans for the coming year

Self-Evaluation

Please provide an assessment of your current strengths and weaknesses related to becoming a clinical psychologist who functions in the clinical science and scientist-practitioner model.

Please upload documentation for your enrollment in professional liability insurance for this year.

I understand that if I have been charged or convicted of a crime, I have notified my advisor and my training director.

- ○ Yes
- ○ No

Doctoral Internship

Indicate if student sought or applied for a doctoral internship that begins during the next academic year (2019-2020 academic year):

- ☐ Yes, applied for internship
- ☐ Yes, applied for second 1-year part-time internship (already completed a 1-year program)
- ☐ No, student still enrolled in a 2-year part-time internship
- ☐ No, student previously completed the full internship requirement (1-year full-time or equivalent)
- ☐ No, did not apply for an internship

Indicate if student obtained an internship that begins next academic year (*2019-2020 academic year):*

- ○ Yes
- ○ No

Externship internship start date

Enter date

Expected internship end date

Enter date

Indicate if internship is APA/CPA-accredited:

- ○ Yes
- ○ No

APA/CPA-Accredited Internship Program name:

Indicate if internship is affiliated with another membership organization (*please select one):*

- ○ APPIC
- ○ CAPIC
- ○ CDSPP
- ○ Other

Indicate if internship is....

- ☐ One Year
- ☐ Two Years
- ☐ Full-Time
- ☐ Part-Time
- ☐ Funded
- ☐ Not Funded/Fully Funded

Enrollment Information

Date started program*:*

Enter date

Date left program (*if applicable):*

Enter date

Reason left program (*please select the most applicable)*

- Successful completion of program
- Academic reasons
- Awarded terminal master's degree
- Change in psychology area specialization
- Change in career/ Employed elsewhere
- Death of student
- Did not return from absence
- Dismissed - failed program requirements
- Family or relationships matters
- Financial
- Health / Medical
- New interest outside psychology
- No reason provided to program
- Personal reasons
- Student relocated
- Transferred to a different university
- Transferred to follow academic advisor
- Voluntary withdrawal - academic difficulties
- Other reasons

Academic status (*official status should be noted for all students including those on internship or completing dissertation work)*

- Full-Time
- Part-Time
- N/A (ex. leave of absence)

Student Satisfaction and Feedback

Below are the basic knowledge areas that APA accredited doctoral programs in health service psychology are required to cover. Please rate your satisfaction with the

knowledge base you acquired in these areas through your doctoral training thus far. Check "not applicable/NA" if you have not taken coursework in an area yet.

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
History and Systems	O	O	O	O	O	O
Affective Aspects of Behavior (e.g., mood, emotion)	O	O	O	O	O	O
Biological Aspects of Behavior	O	O	O	O	O	O
Cognitive Aspects of Behavior (e.g., learning, decision making)	O	O	O	O	O	O
Developmental Aspects of Behavior	O	O	O	O	O	O
Social Aspects of Behavior	O	O	O	O	O	O

Below are the basic knowledge areas that APA accredited doctoral programs in health service psychology are required to cover. Please rate your satisfaction with the knowledge base you acquired in these areas through your doctoral training thus far. Check "not applicable/NA" if you have not taken coursework in an area yet.

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
Knowledge Integrating the Basic Content Areas (Affective, Biological, Cognitive, Developmental, and Social)	O	O	O	O	O	O
Research Methods (correlational, experimental, sampling, replication, quantitative methods, strengths and limitations, etc.)	O	O	O	O	O	O

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
Psychometrics (psychological measurement, assessment, scale construction)	○	○	○	○	○	○

Below are the major areas of competency APA has identified for health service psychology. Please rate your satisfaction with how well you think our program will prepare you for entry-level positions as a clinical psychologist in these competency areas.

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
Research	○	○	○	○	○	○
Ethical and Legal Standards	○	○	○	○	○	○
Individual and Cultural Diversity	○	○	○	○	○	○
Professional Values, Attitudes, and Behaviors	○	○	○	○	○	○
Communication and Interpersonal Skills	○	○	○	○	○	○
Assessment	○	○	○	○	○	○
Intervention	○	○	○	○	○	○
Supervision	○	○	○	○	○	○
Consultation and Interdisciplinary/Interprofessional Skills (i.e., collaboration with other health service professionals)	○	○	○	○	○	○

Rate your satisfaction with the following aspects of the program using the following scale.
Check "not applicable/NA" if you have not had experiences in that area yet (given your year in the training program).

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
Advising/Mentoring relationship	○	○	○	○	○	○

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
Overall therapist training	○	○	○	○	○	○
Overall research training	○	○	○	○	○	○
Teaching assistant experiences	○	○	○	○	○	○
Teaching experiences	○	○	○	○	○	○
Supervision experiences (where you served as supervisor)	○	○	○	○	○	○
Externships	○	○	○	○	○	○

Rate your satisfaction with the following aspects of the program using the following scale. Check "not applicable/NA" if you have not had experiences in that area yet (given your year in the training program).

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
Master's Thesis experience	○	○	○	○	○	○
TIE Project experience	○	○	○	○	○	○
Dissertation experience	○	○	○	○	○	○
Preparation for internship	○	○	○	○	○	○
Preparation to be a broadly knowledgeable psychologist	○	○	○	○	○	○
Preparation to be a clinical psychologist	○	○	○	○	○	○
Preparation to be a multiculturally competent psychologist	○	○	○	○	○	○

Rate your satisfaction with the following clinical psychology courses that you have taken at UMCP. Check "not applicable/NA" if you have not had taken the course yet.

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
PSYC 622 Clinical Research Methods	○	○	○	○	○	○
PSYC 625 Psychological Assessment	○	○	○	○	○	○
PSYC 643 Ethics and Professional Issues	○	○	○	○	○	○
PYSC 629 Clinical laboratories	○	○	○	○	○	○
PSYC 623 Child Psychopathology	○	○	○	○	○	○
PSYC 624 Adult Psychopathology	○	○	○	○	○	○
PSYC 630 Interventions-Adult	○	○	○	○	○	○
PSYC 632 Interventions-Child & Adolescent	○	○	○	○	○	○
PYSC 612 Affective Science Perspectives on Temperament & Personality	○	○	○	○	○	○

Rate your satisfaction with the following psychology courses that you have taken at UMCP. Check "not applicable/NA" if you have not had taken the course yet.

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
PSYC 611 (Developmental Psychology)	○	○	○	○	○	○
PSYC 606 (Human Biopsychology)	○	○	○	○	○	○
PSYC 607 (Cognition)	○	○	○	○	○	○
PSYC 604 (Social Psychology)	○	○	○	○	○	○
PSYC 601 (1st stats course in PSYC)	○	○	○	○	○	○
PSYC 601 (2nd stats course in PSYC)	○	○	○	○	○	○

	NA	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
PSYC 614 Emotion-Biological Foundations	○	○	○	○	○	○
Other core course (please specify)	○	○	○	○	○	○
Other core course (please specify)	○	○	○	○	○	○
Other core course (please specify)	○	○	○	○	○	○
Other core course (please specify)	○	○	○	○	○	○

Below we ask for your overall impressions of the strengths and areas for growth of the clinical psychology program at UMD. Once you have provided all of your feedback, please remember to click the forward arrow button at the bottom of the page to submit all of your survey responses.

What are the most positive aspects of your graduate experience in the clinical psychology program at UMD thus far?

What are the least positive aspects of your graduate experience in the clinical psychology program at UMD thus far?

How could we improve our program?

Thank you so very much for completing this survey!

Powered by Qualtrics

UNIVERSITY OF MARYLAND
DEPARTMENT OF PSYCHOLOGY

Selection/Change of Advisor

Date: _____

Student Name: _____

UID: _____

This is to certify that _____ has agreed to work with me as my academic advisor.

Student Signature: _____

New Advisor: _____

Former Advisor: _____

SAMPLE COURSE SCHEDULE – 4 YEARS, INTERNSHIP 5th YEAR*
FOR ILLUSTRATION ONLY – CHECK CURRENT GRADUATE SCHOOL, DEPARTMENT, & PROGRAM REQUIREMENTS

YEAR	FALL (10 hours/semester)	SPRING (10 hours/semester)	SUMMER (8 hours)
01	643 Ethics, Diversity & Professional Issues in Clinical Psychology (3) 601 Quantitative Methods I (4) 623/624 Child or Adult Psychopathology (3)**	622 798C 798D Research Methods Course or 625 Assessment (3) 632/630 Child or Adult Intervention (3)+ 602 Quantitative Methods II (4)	629A Clinical Lab or 625 Assessment (3) 799 Master's Thesis (4) ● *Propose Master's summer or fall*
02	623/624 Child or Adult Psychopathology (3)** 614 Emotion/Bio (3) **Department Core(s) (3)** 629 Clinical Lab (1) 799 Master's Thesis (0-1) *Notes:* *Students need to complete a minimum of 6 Master's Thesis credits in total (Psyc 799). They can take the remaining 1 credit anytime during the Fall/Spring/Summer of their second year, depending on their schedule and available credits. *Students may opt to take 1 to 2 Departmental Core classes depending on the offerings that semester.	632/630 Child or Adult Intervention (3)+ 622 798C 798D Research Methods Course or 625 Assessment (3) 629 Clinical Lab (1-3) 799 Master's Thesis (0-1) *Notes:* *Students need to complete a minimum of 6 Master's Thesis credits in total (Psyc 799). They can take the remaining 1 credit anytime during the Fall/Spring/Summer of their second year, depending on their schedule and available credits. *Students may opt to take 1 to 2 Departmental Core classes depending on the offerings that semester.	629 Clinical Lab (3) 799 Master's Thesis (5) *Note:* If students defended their Master's thesis and were conferred the degree in their second year, they will register for PSYC 898 Pre-Candidacy Research (5 credits) instead of PSYC 799 Master's Research.
03	**Department Core (3-6)** 629 Clinical Lab (1-3) 799 Master's Thesis (0-1) ● *Defend Master's Thesis* ● *Achieve Research Competence* ● *Complete TIE Project Proposal* *Notes:* *If students are not taking a departmental core, they should register for 3 Clinical Lab credits. *If students defended their Master's thesis and were conferred the degree in their second year, they can register for PSYC 898 Pre-Candidacy Research instead of PSYC 799 Master's Research.	**Department Core (3-6)** or Elective (3) 629 Clinical Lab (1-3) 898 Pre-Candidacy Research (0-1) ● *All department and clinical courses completed* ● *Complete TIE Project Evaluation* ● *Admission to doctoral candidacy by end of semester* *Note:* If students are not taking two departmental cores or one departmental core and an elective, they should register for 3 Clinical Lab credits.	629 Clinical Lab (3) 638 Externship (1) 898 Pre-Candidacy Research (4) ● *Propose dissertation prior to October 1 to apply for internship* *Note:* If students have advanced to candidacy by the summer of their third year, they should register for PSYC 899 (3 credits) instead of PSYC 898).
04/05	**APA/Core (3)** or Elective (3) 899 Dissertation Credits (6) 629 Clinical Lab (1) 638 Externship (0-1)	**APA/Core (3)** or Elective (3) 899 Dissertation Credits (6) 629 Clinical Lab (1) 638 Externship (0-1)	629 Clinical Lab (3) 638 Externship (2) 899 Dissertation Research (3)

	• *Apply for internship* • *Collect dissertation data*	• *Collect dissertation data*	• *Have all dissertation data collected prior to internship* • *Ideally complete the dissertation prior to internship.* *Note:* Only students who plan to defend their dissertation in the summer need to register for 6 credits of PSYC 899 Dissertation Credits. These students will have 2 remaining credits to use toward PSYC 629 Clinical Lab (1) and PSYC 638 Externship (1), *only if they are involved in those activities during the summer. Students beginning internship do not need to register for summer course credits.*
05/06	639 Internship (1) – APA accredited 899 Dissertation Credits (6) *Note:* Students who defended their dissertation prior to internship do not have to register for PSYC 899 Dissertation Credits. The department will submit a request to the Registrar's Office to have PSYC 899 waived.	639 Internship (1) – APA accredited 899 Dissertation Credits (6) *Note:* Students who defended their dissertation prior to internship do not have to register for PSYC 899 Dissertation Credits. The department will submit a request to the Registrar's Office to have PSYC 899 waived.	• *Defend dissertation prior to end of internship* *Note:* Students who plan to defend their dissertation in the summer must register for PSYC 899 Dissertation Credits (6).

-Department requires 3 (quant/method) courses + 2 departmental core courses [in social, bio, cognitive, developmental psyc.]. These classes also cover APA requirements.
-A simple rule of thumb is that, starting your 2nd year, you should enroll in a Department/APA core course every semester, whenever these courses are offered.
+Adult &Child Psychopathology and Intervention = all 4 courses are required.
Master's = minimum of 6 Credit Hours; students can take the six credits in any increment to sum 6 credits by the end of your second year.
Qualifying exam: Requirement for the qualifying exam involves successfully defending a TIE Project.
Admission to candidacy: Requirements for candidacy: (a) successfully defend master's thesis, (b) obtained research competence, (c) completed TIE Project, (d) completion of clinical and departmental core courses, and (d) approval by clinical area.
Dissertation = minimum of 12 credit hours, cannot sign up for hours until advanced to candidacy, (6 hours/semester automatic upon candidacy for all semesters).
Internship = Students must be enrolled in PSYC 639 (internship). They only need to register for PSYC 899 (dissertation research, 6 credits) if they did not defend their dissertation prior to internship. The Department will submit a request to the Registrar's Office to have Psyc 899 waived if the dissertation has been defended prior to internship. Moreover, if the dissertation is defended prior to internship, the department can request to have the student's mandatory fees waived (at least for those with out of state internships). Any tuition obligation will be covered by student and not the department. Defending one's dissertation prior to internship saves the student considerable money in tuition and fees. If applicable, students should check with their student loans to determine whether students must be registered for a minimum number of credits.

Curriculum Request Form

Student Name:

Date:

I,_____(Student's Name), completed Foundational Knowledge in_____(Developmental, Social, Biological, Cognitive, or Affective basis of psychology) by <u>one</u> of the following criteria:

☐ **A grade of B or greater in an undergraduate seminar course in _____. Please attach undergraduate transcript and syllabus to provide proof of course and grade.**

☐ **A GRE Psychology Subject Test (Specify Area:_____) score of 70% or greater. Please attach the Psychology Subject test results.**

I request that the following course,

.

_____

,

fulfill Graduate Level Knowledge in

_____

(Developmental, Social, Biological, Cognitive, or Affective basis of psychology).

Approved by:

Director of Clinical Training/Date

SUBMIT FORM TO GRADUATE OFFICE

UNIVERSITY OF MARYLAND
DEPARTMENT OF PSYCHOLOGY

RE-DEFENDING A MASTER'S THESIS

Date:	
Student Name:	
UID:	
Specialty Area:	
Advisor Name:	
Master's Thesis Title:	
Name of University where master's degree was earned:	

The above student has successfully redefended their previously earned master's degree thesis and is approved and accepted by the following committee members.

☐ **Accepted** ☐ **Rejected**

Comments (if applicable):

_____

_____

_____

_____ _____ _____
Committee Chairperson (Please Print) Signature Date

_____ _____ _____
Committee (Please Print) Signature Date

_____	_____	_____
Committee (Please Print)	Signature	Date

Return this completed form to the Graduate Studies Office, Room 1121G BIO-PSYC BLDG. Thank you.

Transition to Independence and Expertise (TIE) Project Proposal Form
Last Updated 4-15-20

Date:

Student's Name:

Student's Mentor:

Committee Member 1:

Committee Member 2:

Select psychology content areas that will be integrated into student's TIE Project (select all that apply):

- ☐ **Affective**
- ☐ **Biological**
- ☐ **Cognitive**
- ☐ **Developmental**
- ☐ **Social**

PLEASE CONTINUE ON TO NEXT PAGE TO COMPLETE THE FORM

TIE Project Proposal (< 500 words):

PLEASE CONTINUE ON TO NEXT PAGE TO COMPLETE THE FORM

TIE Project Timeline:

☐ **The Committee approved the TIE Project Proposal**

_____ _____

Mentor's Signature Date

Transition to Independence and Expertise (TIE) Project Evaluation Form
Doctoral Qualifying Examination (TIE Project)
Last Updated 4-15-26

Date:

Student's Name:

Student's Mentor:

Clinical Year in Program:

TIE Project Title:

Evaluation: To pass the TIE Project, the student must receive "Meets Expectations" across all domains rated below.

Part 1: Demonstration of Advanced Integrative Knowledge (AIK) in two or more content areas of psychology:

Content areas (check all that apply, minimum of two must be indicated):

Affective
Biological
Cognitive
Development
Social

The Committee rates the student's TIE project on the synthesis/integration of at least two major, distinct scientific content areas to understand complex human behavior and foster a deeper understanding of psychological science and practice.

1a. Integration Across Disciplines (a rating of 3-5 is passing)

Assesses the ability to integrate at least two DSK areas (e.g., biological basis of behavior with cognitive or affective aspects).

- **1:** Treats psychological concepts as isolated facts; unable to connect theories.
- **2:** Connects concepts only when prompted; limited understanding of interaction between areas.
- **3: [Meets Expectations]** Independently synthesizes findings from two or more DSK areas to explain behavior.
- **4:** Skillfully integrates multiple areas to provide a nuanced analysis of complex problems.
- **5:** Demonstrates sophisticated, novel integration across multiple areas independently.

1b. Critical Thinking and Theoretical Integration (a rating of 3-5 is passing)
Assesses the ability to integrate philosophies of science and methodology.

- **1:** Fails to recognize underlying assumptions or methodologies.
- **2:** Identifies assumptions only with assistance.
- **3: [Meets Expectations]** Critically evaluates methodologies and theories in the literature.
- **4:** Synthesizes different theoretical perspectives, acknowledging complexities and nuances.
- **5:** Critiques the field's underlying paradigms, proposing integrative research directions.

Part 2: Demonstration of knowledge of the historical context of the research examined in the TIE Project (a rating of 3 or 4 is passing):

- **1 - Novice/Emerging:** Significant inaccuracies in identifying the school, figure, or historical context. Inability to connect the system to broader psychological developments.
- **2 - Developing/Basic:** Identifies the main figures or school of thought but provides limited context or superficial analysis. Misses significant comparisons or context.
- **3 - Proficient/Competent [Meets Expectations]:** Accurately describes the school/figure and its core tenets. Understands the historical context and can identify key comparisons to other systems.
- **4 - Exceptional/Mastery:** Demonstrates comprehensive understanding of the school/figure. Critically analyzes historical context and its impact on modern psychology. Effectively compares and contrasts opposing systems.

Part 3: TIE Project Overall Evaluation:

Goals of TIE Project include: ● Promote critical thinking ● Facilitate transition to the independence required to design, execute, and defend a dissertation project. ● Promote skills required to function as a clinical scientist (e.g., grant or manuscript writing, data analysis, generating research questions). ● Provide training on how to receive and respond to peer review commentary (e.g., as one would expect to do on a manuscript or grant submission). ● Create a procedure for which the “end product” will be an independent piece of scholarship (e.g., manuscript/training grant submission/conference presentation).

Rating Description (a rating of 4 or 5 is passing)

- *1: Remedial Level: Significant concerns about the student’s skills in this area; remedial action required*
- *2: Entry level: Student needs regular, intensive supervision in this area*
- *3: Progressing Toward Competence: Student needs routine supervision in this domain; working towards basic competency*
- *4: Achieved Minimum Competency (**Meets Expectations**: Advanced-practicum level): Student can perform skills in this domain with minimal supervision*

- *5: Surpassed Minimum Competency (Internship-ready): Student can perform skills in domain completely independently*

UNIVERSITY OF MARYLAND, COLLEGE PARK
Office of the Registrar

Appendix I

APPLICATION FOR ADMISSION TO CANDIDACY
FOR THE DEGREE OF
_____

Directions: Read carefully the specific requirements for the doctoral degree as set forth in the Graduate Catalog. Complete this form and have it endorsed by your advisor and the Director of the Graduate Program in which the degree is offered. This form must be received by The Office of the Registrar prior to the 25th of the month in order for the advancement to be effective the first day of the following month. All admission provisions must be met in order to advance to candidacy.

Date: _____

_____
Print Full Name (Last, First, Middle)

_____
Student University ID Number (UID)

_____
Address

_____
Graduate Program Code (**4 character abbreviation**)

_____
City, State, Zip

Degree Sought: _____

_____
(Area Code) Telephone

_____
Email Address

_____
Date Comprehensive Examination Completed

To the Advisor: By endorsing this application, you are attesting that, in the opinion of the student's professor, he or she has undergone the necessary preliminary examinations or such other substantial tests as the program may elect as prerequisites to candidacy, and has demonstrated the ability to continue graduate study in the chosen field successfully and to pursue the degree sought. Please print name and sign below, where indicated.

_____
Academic Advisor's Name (Print)

_____
Email Address/Extension

_____
Academic Advisor's Signature **Date**

_____
899/899 Course and Section Number

_____
Graduate Program Director's Signature **Date**

_____
Email Address/Extension

_____
Registrar or Designee **Date**

Please submit this form electronically to registrar-graduate@umd.edu
or mail to the Office of the Registrar, 1113 Mitchell Building, College Park, MD 20740

PROGRAM IN CLINICAL PSYCHOLOGY CERTIFICATION OF READINESS for Pre-Doctoral Internship

Please ask your research mentor/advisor to meet with you and review program and department requirements and confirm your readiness to apply for your pre-doctoral internship.

Please have the following completed by your advisor and return to the **Graduate Studies Office and the DCT**.

_____ has completed all program and department requirements necessary for acceptance of a pre-doctoral internship during 20___-___ academic year.

Signature (Mentor):_____ Date:_____

Inquiry: Anticipated stage of dissertation progress by onset of internship (please enter date, either actual or anticipated for each event):

_____ literature review completed

_____ draft proposal completed

_____ proposal accepted (must be approved by October 1 to apply for internship)

_____ data collection underway

_____ data analysis underway

_____ dissertation in draft form

Title of dissertation:

_____

_____

_____

SEXUAL HARASSMENT GUIDELINES

WHAT IS SEXUAL HARASSMENT?

Sexual harassment is defined as: (1) unwanted sexual advances; or (2) unwelcome requests for sexual favors; and (3) other behavior of a sexual nature where:

(A) Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or participation in a University-sponsored educational program or activity; or

(B) Submission to or rejection of such conduct by an individual is used as the basis for academic or employment decisions affecting that individual; or

(C) Such conduct has the purpose or effect of unreasonably interfering with an individual's academic or work performance, or of creating an intimidating, hostile, or offensive educational or working environment.

Sexual harassment is a violation of federal law and may violate the civil and criminal laws of the State of Maryland. The University of Maryland, its agents, supervising employees, employees and students shall be held liable for their acts of sexual harassment and are subject to appropriate University disciplinary action and personal legal liability.

WHO ARE THE PARTICIPANTS?

Sexual harassment can involve: professor and professor, professor and student, teaching assistant and student, supervisor and employee, superior and employee, student and student, and other relationships among colleagues, peers, and co-workers.

The following behavior may constitute sexual harassment: Lewd remarks, whistles, or personal reference to your anatomy; unwanted physical contact such as patting, pinching, or constant brushing against person's body; subtle or overt pressure for sexual favors; persistent and offensive sexual jokes and comments.

Sexual harassment may result in: Denial of a promotion, termination or forced resignation, negative evaluation or poor recommendations, demotion, dropping a class or changing a major, a tense and unproductive working or learning environment.

WHAT CAN THE UNIVERSITY OF MARYLAND COLLEGE PARK (UMCP) COMMUNITY DO ABOUT SEXUAL HARASSMENT?

Effective enforcement of sexual harassment guidelines requires the reporting and continuing cooperation of each member of the campus community, especially the individual being harassed. If you believe you are being, or have been sexually harassed, you should take the following steps immediately:

1. Say "no" to your harasser. Say it firmly, without smiling, and without apologizing.

2. Keep records--write a journal, record the facts on a tape recorder, or tell a friend in confidence. Keep track of dates, places, times, witnesses, and the nature of the harassment. Save any letters, cards, or notes in a secure place, preferably at home.
3. Seek the advice of or report the incident of harassment to any of the individuals listed under the *Grievance Procedures* (contained in the UMD Clinical Program Handbook and the University of Maryland materials on this topic). You may file an informal or formal complaint. You may also seek the assistance of the Counseling Center (301-314-7651).
4. Tell the harasser, in writing, that you object to this behavior. Describe the specific things that offend or upset you. Treat this letter as a confidential piece of communication and keep a copy of it.

If you receive a report of sexual harassment, notify the Chancellor's Legal Office prior to taking any action to investigate or resolve the matter informally. The Legal Office will normally manage and coordinate all matters relating to sexual harassment complaints.

WHERE TO GO FOR HELP?

Informal Complaints
Contact the following persons on campus for guidance, information, or informal resolution: Your supervisor, chair, director, or dean, The Staff of the Chancellor's Legal Office (301-405-4945), The Campus Compliance Officer in the Office of Human Relations Programs (301-405-2838), The Equity Administrator in your College/Unit, The Employees Specialist in the Office of Personnel (301-405-5651), The Director of the Office of Judicial Programs (301-314-8204), or any UMD College Park official or faculty member.

FORMAL COMPLAINTS
Formal grievance procedures for resolving complaints are available based on the classification of the complaint.

Complainant's Classification	**Grievance Document**	**Contact Office**
Faculty	UMCP Faculty Handbook	Dean of the Academic Unit
Associate Staff	Personnel Policies and Rules for Associate Staff Employees	Office of Personnel (301-405-5651)
Student Conduct	Code of Student	Office of Judicial Programs (301-314-8204)
Student Employee (301-314-	Student Employee	Immediate Supervisor Programs 8204)

	Grievance Procedure	or Vice Chancellor for Student Affairs (301-314-8432)
Faculty, Staff and Student	UMCP Human Relations Code	Office of Human Relations Programs (301-405-2838)

Off-Campus Resources
The Federal Equal Employment Opportunity Commission (303) 922-5634.
109 Market Place, Suite 4000, Baltimore, MD 21202.
The Maryland Commission on Human Relations (303) 333-1700
20 East Franklin Street, Baltimore, MD 21202

Sexual harassment by University Faculty, Staff, and Students is prohibited.

Clinical Supervisor's Evaluation of Trainee

Q1 Date:

_____

Q2 Name of Clinical Trainee:

_____

Q3 Year in training (1-5):

Q8 Dates of Practicum (MM/DD/YYYY - MM/DD/YYYY):

_____

Q9 Setting of Practicum:

- ○ UMD Psychology Clinic
- ○ Externship: Hospital
- ○ Externship: Private/Group Practice
- ○ Externship: University-based Clinic (not affiliated with UMD)
- ○ Externship: Community Mental Health Clinic
- ○ Externship: Other (please specify)

_____

Q58 If setting is an Externship, may we share the contents of this evaluation with the Trainee?

- ○ Yes
- ○ No
- ○ N/A

Q10 Name of Rotation (if applicable):

_____

Q11 Supervisor Name:

_____

Q12 Supervisor Degree:

Q13 **Type of Client(s)** *[Indicate all that apply]:*

- ☐ Child
- ☐ Adolescent
- ☐ Adult
- ☐ Couple
- ☐ Family
- ☐ Not Applicable

Q14 **Phase(s) of Therapy** *[Indicate all that apply]:*

- ☐ Initial/Acute (exc. Initial Assessment)
- ☐ Continuation
- ☐ Maintenance
- ☐ Not Applicable

Q15 **Mode of Supervision** *[Indicate all that apply]:*

- ☐ Individual
- ☐ Group
- ☐ Co-therapy
- ☐ Sitting-In
- ☐ Rating/Reviewing of session's audiotapes/videotapes
- ☐ Telesupervision (i.e. distance supervision)
- ☐ Not Applicable
- ☐ Other _____

Q53 Hours per week of supervision:

Q54 Frequency of Supervision:

- ○ Less than weekly
- ○ Once a week
- ○ Twice a week
- ○ More than twice a week
- ○ Other_____

Q50 Supervisor personally observed **at least one full session** of therapy or assessment over the course of the semester. Observation includes co-therapy, live observation, and/or review of recorded session.

- ○ Yes
- ○ No
- ○ N/A

Q51 Supervisor used the following observation method(s) of the student's therapy and/or assessment session(s) over the course of the semester:

- ☐ Co-therapy
- ☐ Live Observation
- ☐ Review of recorded session
- ☐ Other

Q55 What percentage of supervision was telesupervision (i.e. distance supervision)?

Q56 If you used telesupervision (i.e. distance supervision), please indicate for what purpose:

_____

Q16 **Please rate the Clinical Trainee's performance in the clinical competencies listed below, taking into account her/his developmental level in the program** (e.g., 2nd yr, 3rd yr, 4th, or pre-internship). If necessary, supplement the ratings with brief comments making certain to comment on items rated 1 or 2.

1 = Inadequate Performance (Below expectations)
2 = Acceptable Performance (Somewhat below expectations/Meets expectations but not consistently)
3 = Average Performance (Consistently meets expectations)
4 = Very Good Performance (Exceeds expectations most of the time)
5 = Outstanding Performance (Significantly exceeds expectations on a consistent basis)

Q19 **1. General Professional Ethics and Responsibilities** *(e.g., punctuality, availability, confidentiality, responsibility, use of available resources, appropriate referrals; adherence to policies/procedures of practicum site)*

Q20 Comments:

_____

_____

Q21 **2. Assessment & Outcome Monitoring** *(e.g., observational skills, interviewing skills, knowledge and use of appropriate assessment instrument, pinpointing presenting problem(s) in quantifiable and observable terms within an evidence-based model, monitoring client's progress and response to therapy/outcome in quantifiable terms)*

Q22 Comments:

_____

_____

Q23 **3. Case Formulation** *(e.g., presenting a conceptual model for the presenting problem(s) by identifying etiological factors and correlates, pertinent learning history, course, stressors, individual and contextual maintaining factors, contingencies/ consequences, treatment goals and expectations)*

Q24 Comments:

_____

_____

Q25 **4. Treatment Planning** *(e.g., formulating treatment goals, strategies and techniques, session-to-session planning and preparation; planning for risk management)*

Q26 Comments:

_____

Q28 **5. Treatment Implementation** *(e.g., explaining treatment rationale and process, ability to employ treatment strategies and techniques, directing and managing a session, handling problematic issues)*

Q30 Comments:

Q31 **6. Quality of the therapeutic relationship taking into account her/his developmental level in the program (e.g., 2nd yr, 3rd yr, 4th, or pre-internship)**

	1=inadequate performance (1)	**2**=acceptable performance (2)	**3**=average performance (3)	**4**=very good performance (4)	**5**=outstanding performance (5)	Not Applicable (6)
Collaborative Rapport	○	○	○	○	○	○
Empathic Ability *(Warmth, Empathy, Genuineness)*	○	○	○	○	○	○
Effective Listening	○	○	○	○	○	○
Control of the session without being intrusive	○	○	○	○	○	○
Tolerance of the client's negative affect	○	○	○	○	○	○
Utilization of the client's negative affect to promote change	○	○	○	○	○	○
Ability to recognize and make therapeutic use of own negative emotional reactions toward the client	○	○	○	○	○	○
Ability to recognize and repair ruptures in the therapeutic alliance	○	○	○	○	○	○
An understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves	○	○	○	○	○	○

Q34 Comments:

_____

---

1 = Inadequate Performance (Below expectations)
2 = Acceptable Performance (Somewhat below expectations/Meets expectations but not consistently)
3 = Average Performance (Consistently meets expectations)
4 = Very Good Performance (Exceeds expectations most of the time)
5 = Outstanding Performance (Significantly exceeds expectations on a consistent basis

Q33 **7. Knowledge of Relevant Research** *(e.g., regarding assessment and treatment of a given disorder, indications and contraindications for a given treatment intervention)*

Q35 Comments:

_____

_____

Q36 **8. Confidence and comfort with the therapist role**

Q37 Comments:

_____

_____

_____

Q38 **9. Appropriate management of any of interfering personal, societal, diversity-related, and/or political biases.**

Q57 **10. Knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all professional activities including research, training, supervision/consultation, and service.**

Q40 Comments:

_____

_____

Q39 **11. Clinical record-keeping** *(e.g., Intake and Assessment Summaries, Progress Notes, Treatment Reports, Discharge Summaries, outside letters and reports)*

Q41 Comments:

_____

_____

Q42 **12. Responsiveness to Supervision** *(e.g., providing audio/videotapes of sessions, accepting feedback, willingness to report and correct errors; implementing supervisors' suggestions, etc.)*

Q43 Comments:

_____

_____

Q44 **13. If the student provided peer supervision to a fellow trainee, rate the student's quality of supervision skills** *(e.g. preparation for meetings; clear feedback to fellow trainee/supervisee; adequately seeks guidance from clinical supervisor to assist in peer supervision)*

Q45 Comments:

_____

_____

Q46 **14. If applicable, quality of consultations with other healthcare professionals and collaterals to treatment** *(e.g. communicates efficiently in speech and writing; grasp of consultees perspective and treatment goals; utility of work product to consultee)*

Q47 Comments:

_____

_____

Q49 **15. Rating of overall potential as a clinician**

Q50 Comments:

_____

_____

Q51 **Please list the clinical trainee's major assets**

_____

_____

Q52 **Please list below those problem areas that should be attended to by next supervisor** (Include all competency areas rated 1 or 2 and be as specific as possible)

_____

_____

Q53 **General comments and/or Recommendations** (include areas that should be addressed before the pre-doctoral internship)

_____

Q54 **Did you communicate the content of this evaluation to the clinical trainee?**

- ○ Yes
- ○ No

Q52 Use finger, stylus, or computer mouse to sign.

UMD Clinical Program: External Practicum Supervisor Agreement Form

Q2 Name of Site:

_____

Q52 Name of Rotation (if applicable)

_____

Q4 Academic Semester:

Q8 Dates of Practicum (MM/DD/YYYY - MM/DD/YYYY):

_____

Q3 Name of primary Clinical Supervisor:

_____

Q12 Supervisor Degree:

Q9 Setting of Practicum:

- ○ Hospital
- ○ Private/Group Practice
- ○ University-based Clinic (not affiliated with UMD)
- ○ Community Mental Health Clinic
- ○ Other (please specify) _____

Q15 Mode of Supervision *[Indicate all that apply]:*

- ☐ In Person Individual
- ☐ In Person Group
- ☐ Co-therapy
- ☐ Sitting-In (Live Observation)
- ☐ Rating/Reviewing of session's audiotapes/videotapes
- ☐ Telesupervision
- ☐ Other

Q53 How many hours of supervision per week will the Clinical Supervisor provide?

Q51 The Clinical Supervisor will use the following observation method(s) of the student's therapy and/or assessment session(s): *[indicate all that apply]*

- ☐ Co-therapy
- ☐ Live Observation
- ☐ Review of recorded session
- ☐ Other _____

Q18 The Primary Clinical Supervisor understands that Trainees cannot be on-site on Mondays.

- ○ Yes, our externship agrees to schedule Trainees on days other than Mondays
- ○ No, our externship requires Trainees be on-site on Mondays

Q17 The Primary Clinical Supervisor agrees that the trainee will be on-site no more than 2 days per week *and* no more than 20 hours per week.

- ○ Yes, our externship site agrees to limit on-site presence to 2 days per week *and* no more than 20 hours per week
- ○ No, our externship site requires more than 2 days a week and/or more than 20 hours per week

Q50 The primary Clinical Supervisor agrees to observe (via audio or video recording, live observation, or co-therapy) therapy or assessment **at least once** per semester:

- ○ Yes, our externship site agrees to require that the clinical supervisor will observe the trainee's clinical work at least once each semester (Fall, Spring, and Summer sessions)
- ○ No, our external practicum supervisors cannot observe the trainee's clinical work at least once each semester

Q16 The primary Clinical Supervisor agrees that **no more than 50%** of supervision will be telesupervision (i.e. distance supervision)

- ○ Yes, our externship site agrees that 50% or less of supervision will be telesupervision
- ○ No, our externship site uses telesupervison more than 50% of the time

Q20 If the externship site (or rotation) is **not** located in Maryland and the Primary Clinical Supervisor is *routinely off-site*, then the Primary Clinical Supervisor holds an active Maryland license.

- ○ Yes, the externship agrees that an *off-site* Primary Clinical Supervisor is a licensed psychologist in Maryland
- ○ No, the externship's Primary Clinical Supervisor is routinely off-site and is not a licensed psychologist in Maryland
- ○ N/A

Q15 Additional Comments

_____

CLINICAL PSYCHOLOGY PROGRAM
APPROVAL OF CLINICAL READINESS FOR CLINICAL EXTERNSHIP or EXTERNAL PLACEMENT
Completed by Mentor with Student and Reviewed by Clinical Faculty/Director of Clinical Training

Name of Student: _____ Mentor:_____

	Yes	No	Unsure/ NA
The student has attained the Master's Degree and research competence			
The student has the appropriate training and experience to participate in the activity			
The student has resolved all clinical competency ratings marked "Below Expectations" on their clinical lab evaluations			
The student is prepared to prioritize their role as a UMCP graduate student regarding research commitments, coursework, CRIS, case conferences, scholarly meetings, etc.			
The student consistently displays appropriate professional behavior and there are no outstanding clinical or ethical issues of concern.			

_____ _____
Research Mentor Date

_____ _____
Director of Clinical Training Date

TQCVL Attestation for the Clinical Psychology Doctoral Program in the Department of Psychology at the University of Maryland College Park

I, _____ ("I," "me," or "my"), am enrolled in the Clinical Psychology Doctoral Program of the Department of Psychology at the University of Maryland College Park (the "Academic Program"). I have freely sought, and knowingly made the decision, to participate in a practical training program at _____ _____ (the "Training Program"), a facility operated by the Department of Veteran Affairs (the "VA"). In connection therewith, I acknowledge the VA mandates, as a condition of my participation in the Training Program, that I satisfy certain health requirements and confirm certain personal information. I further acknowledge that I have received information regarding these requirements and that I have read and understand them. I am aware that the VA mandates that my program director (hereinafter referred to as "DCT", Director of Clinical Training) endorse and submit a *Trainee Qualifications and Credentials Verification Letter* regarding these matters (the "TQCVL"), and I understand that the information needed for the DCT to do so is not information that the DCT or my Academic Program possesses or would otherwise request of me. Accordingly, in order to enable the DCT to endorse and submit the TQCVL, I knowingly and freely am providing the information below. I represent and warrant that all of the information below is true and accurate, and I acknowledge and agree that it may be relied upon by the DCT in connection with the endorsement and submission of the TQCVL.

Physical Examination

I agree to supply evidence or certification of satisfactory physical condition based on a physical examination in the past 12-months to the DCT for verification and storage to comply with the TQCVL process.

Tuberculosis Screening

I agree to supply a copy of tuberculosis screening results and a formal physician note and signature endorsing these results to the DCT for verification and storage to comply with the TQCVL process.

Hepatitis B Vaccination

I agree to supply evidence of one of the following regarding the Hepatitis B vaccination to the DCT for verification and storage to comply with the TQCVL process (initial one only):

_____ Evidence of obtaining a Hepatitis B vaccine or having already obtained a Hepatitis B vaccine in the past (with a formal physician note and signature attesting to this vaccination); or

_____ A signed formal declination of the Hepatitis B vaccine.

Influenza Vaccination

I agree to supply evidence of one of the following to the DCT for verification and storage to comply with the TQCVL process (initial one only):

_____ I will obtain an influenza vaccine before November 30th of the current year;

_____ I will supply evidence of having already obtained an influenza vaccine for the upcoming influenza season to the DCT for verification and storage to comply with the TQCVL process; or

_____ I will decline an influenza vaccine for the upcoming influenza season, and I will wear a facemask at VA facilities during the entirety of the influenza season.

Measles, Mumps, & Rubella; Varicella; Tetanus, Diphtheria, Pertussis; and Meningococcal Vaccinations

_____ Evidence of obtaining the Measles, Mumps, & Rubella, Varicella, Tetanus, Diphtheria, Pertussis, and Meningococcal vaccines or having already obtained these vaccines in the past (with a formal physician note and signature attesting to this vaccination); or

_____ A signed formal declination of the Hepatitis B vaccine.

HHS List of Excluded Individuals

I permit the DCT to screen my name against the Health and Human Services' list of Excluded Individuals and acknowledge that should my name show up on the Health and Human Services' list of Excluded Individuals, the DCT will be unable to endorse my TQCVL.

Selective Service

Federal law requires that most males living in the US between the ages of 18 and 25 (inclusive of 18 and 25) register with the Selective Service System. This includes individuals who are US citizens, non-US citizens and dual nationals, regardless of their immigration status. *Male* for this purpose is defined as those individuals born male on their birth certificate regardless of current gender. Only male, non-US citizens on a student or visitor visa are exempt from registration. Males required to register, but who fail to do so by their 26th birthday, are barred from any position in any Executive Agency.

I state that I (initial one only):

_____ Am not a male assigned at birth, am not a US citizen or immigrant, or am not between 18 and 25 years old (inclusive of 18 and 25);

_____ Have registered with the Selective Service;

_____ Have not registered with the Selective Service despite being a US citizen or immigrant, assigned as a male at birth, and between the ages of 18 and 25 years old

(inclusive of 18 and 25); however, I can provide the DCT with a Status Information Letter; or

_____ Have not registered with the Selective Service despite being a US citizen or immigrant, assigned as a male at birth, and between the ages of 18 and 25 years old (inclusive of 18 and 25); I cannot show proof of a Status Information Letter.

Citizenship and Immigrant Status

I state that I (initial one only):

_____ Am a US Citizen

_____ Am not a US Citizen but can provide the DCT with documented proof of current immigrant or non-immigrant status that may include visa status documents, permanent resident card, Deferred Action for Childhood Arrivals (DACA) trainee Employment Authorization Document (Form I-766), and other forms as requested by the VA during this process; and I permit the DCT to provide this documented proof of my current immigrant or non-immigrant status along with the TQCVL to the VA.

TQCVL Process for the Academic Program

I acknowledge that the TQCVL and the subject matters thereof are mandatory requirements set by the VA. Neither the Academic Program nor DCT has the ability to waive or modify these requirements. I also acknowledge that the decision to pursue training at the VA is my option, and if I do not wish to comply with these requirements, I may ask the DCT to refrain from answering the questions detailed above, although I acknowledge that the VA may terminate the working relationship. I may also seek training at a non-VA facility. With respect to my Academic Program, whatever decision I make will have no consequential impact. I understand that this information provided herein and to be provided pursuant hereto will be used, safeguarded and destroyed consistent with the Department of Psychology's *TCQVL Verification Process for the Clinical Psychology Doctoral Program*. Finally, I acknowledge and agree that the DCT will not, and cannot, endorse the above information until I have provided all information required herein.

I confirm that I am knowingly and freely agreeing to assume and take on all of the risks and responsibilities in any way associated with my participation in the Training Program, including, without limitation, providing the information necessary for the DCT to endorse and submit the TCQVL. In consideration of and in return for the Academic Program permitting the DCT to do so, I, as and to the full extent allowed by law, voluntarily agree to indemnify, release and hold harmless the State of Maryland, University of Maryland, College Park, its academic units, and/or its governing boards, officers, employees, agents and volunteers (the "Covered Entities") from any and all liabilities, costs, claims, expenses, compensation, demands and actions, that may arise from any injury or harm to me or from damage to my property in connection with my participation in the Training Program, including, without limitation, providing the information necessary for the DCT to endorse and submit the TCQVL. I understand that this release covers all matters caused

entirely or in part by negligence, omission, or default by the Covered Entities including, but not limited to, negligence, mistake or failure to supervise.

I understand and agree that should any of the information that I provide or submit pursuant hereto be untrue, false, forged or inaccurate that my Academic Program will promptly inform the Training Program and that the Academic Program will pursue disciplinary action against me under applicable policies and procedures, which could ultimately result in my dismissal or expulsion from the Academic Program.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT, AMONG OTHER THINGS, THIS IS A RELEASE OF LIABILITY. I HEREBY SIGN THIS AGREEMENT OF MY OWN FREE WILL, ACKNOWLEDGING THAT, PRIOR TO DOING SO, I HAD THE RIGHT TO CONSULT WITH AN ADVISOR, COUNSELOR OR ATTORNEY OF MY CHOOSING.

By my signature below, I represent and warrant that any and all of the information provided or submitted pursuant hereto is or will be true, complete and accurate, and I am freely and knowingly agreeing to the terms and provisions hereof.

_____ _____

Signature Date

Licensure in Clinical Psychology: Professional Licensure Disclosure (Information and Disclosures, Title 4, Department of Education, 34 CFR 668.43)

Although state licensure is available in clinical psychology, the University of Maryland's program does not directly lead to such licensure upon graduation. The professional preparation you receive in our program, however, will assist you in such pursuits. Students should consult with individual home state licensing boards or visit the Association of State and Provincial Psychology Boards (ASPPB) for further information: www.asppb.org https://asppbcentre.org/snapshot/. You are welcome to contact the DCT with questions in this regard and we will do our best to assist you in your career planning.

Currently, the UMD Clinical Psychology Doctoral Program is accredited by both APA (American Psychological Association) and PCSAS (Psychological Clinical Science Accreditation System). APA accreditation is recognized in all 50 states as providing required education for psychology license eligibility. State Boards of Psychology determine training requirements for licensure and typically include post-doctoral training, supervision requirements, as well as examinations beyond the educational requirements, so a doctoral degree from UMD College Park in Clinical Psychology is not sufficient to meet licensure requirements in most states. Students should confirm state licensing requirements directly with the state they are interested in licensure. ASPPB (Association of State and Provincial Psychology Boards) has also provided a resource of information in their PSY/Book that gives detailed information about all the requirements for licensure jurisdiction-by-jurisdiction (see https://www.asppb.net/page/psybook) that they plan to update annually--though generally the most up to date information is available on the websites for individual state boards.

Typically, clinical psychology licensure entails: (1) completion of an approved education program; (2) completion of an APPIC (Association of Psychology and Postdoctoral Internship Centers) accredited full-time one year internship; (3) completion of a post-doctoral fellowship with supervised clinical experience as required by each state (some states do not require a post-doc); (4) passing the national (EPPP—Examination for Professional Practice in Psychology) and state oral and/or written examinations; and (5) completion of any additional state-specific licensure requirements (typically background checks and credential verifications, but some states have some specific training requirements as well).

UMD College Park clinical program graduates have successfully obtained licensure in many states. Please see the table below for information about how UMD College Park's program satisfies the educational requirements of each state. You should directly contact State Licensing Board(s) for the most accurate and up-to-date information on educational and other requirements for licensure. The information in this table focuses specifically on curriculum and training. States may impose other specific requirements not addressed in the summaries below. Notably, the UMD Clinical Psychology Doctoral Program currently meets educational licensing requirements in the state of Maryland.

In the table below, an X in the "Yes" or "No" columns indicates that our program does or does not meet that state's educational requirements. An **asterisk (*) indicates that earning a doctoral degree from a program accredited by the American Psychological Association (APA) is the main/only criterion for the educational requirements for licensure in that state to our knowledge**. The Clinical Psychology PhD Program at the University of Maryland, College Park is 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.

	Program Satisfies Curricular Requirements?			
State	Yes	No	Unable to Determine	State Professional Association or License Authority and Notes
1. Alabama	X*			http://psychology.alabama.gov/
2. Alaska	X*			https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/BoardofPsychologists.aspx
3. Arizona	X*			https://psychboard.az.gov/
4. Arkansas	X*			https://psychologyboard.arkansas.gov/applicants/

5. California		X		https://www.psychology.ca.gov/ Completion of UMD College Park's doctoral program in clinical psychology accredited by APA and PCSAS does not meet California educational requirements to apply for licensure as a psychologist. California accepts accredited programs like UMD College Park's program to meet educational degree requirements; but California also requires additional specific coursework or continuing education training prior to licensure. Specifically, CA licensure requires 10 hours of training in human sexuality, 7 hours of training in child abuse assessment, 15 hours in spousal or partner abuse assessment, detection, and intervention strategies, 10 hours in aging and long-term care, 6 hours of suicide risk assessment and intervention, and a 15-hour course in alcoholism/chemical dependency detection and treatment that must be completed at an academic institution. Students wishing to become licensed in California are advised to work with the UMD College Park program to tailor their electives to work towards meeting these additional training requirements. While UMD College Park's clinical psychology program does not require this content per se, there may be electives at UMD College Park and community training events in the DC region that are available for students to assist them in preparing for licensure in California. Several UMD College Park graduates have successfully obtained licensure in California and our program can pass along recommendations/information they have provided. For example, one graduate completed the substance use training course through the VA system, and another graduate used the site CE4less.com for many requirements and completed the substance use course online through JFK University.
6. Colorado	X*			https://dpo.colorado.gov/Psychology
7. Connecticut	X*			https://portal.ct.gov/DPH/Practitioner-Licensing--Investigations/Psychology/Psychologist-Licensure
8. Delaware	X*			https://dpr.delaware.gov/boards/psychology/newlicense/
9. District of Columbia	X*			https://dchealth.dc.gov/node/160282
10. Florida	X*			https://floridaspsychology.gov/
11. Georgia	X*			https://sos.ga.gov/index.php/licensing/plb/44
12. Hawaii	X*			http://cca.hawaii.gov/pvl/boards/psychology/
13. Idaho	X*			https://ibol.idaho.gov/IBOL/BoardPage.aspx?Bureau=PSY
14. Illinois	X*			https://www.idfpr.com/profs/psych.asp
15. Indiana	X*			https://www.in.gov/pla/psych.htm
16. Iowa	X*			https://idph.iowa.gov/Licensure/Iowa-Board-of-Psychology/Licensure
17. Kansas	X*			https://ksbsrb.ks.gov/
18. Kentucky	X			http://psy.ky.gov/Pages/default.aspx
19. Louisiana	X*			http://www.lsbep.org/
20. Maine	X*			https://www.maine.gov/pfr/professionallicensing/professions/psychologists/
21. Maryland	X*			https://health.maryland.gov/psych/Pages/Home.aspx
22. Massachusetts	X*			https://www.mass.gov/orgs/board-of-registration-of-psychologists
23. Michigan	X			https://www.michigan.gov/lara/0,4601,7-154-89334_72600_72603_27529_27552---,00.html NOTE: Beginning in March 30, 2022, a one-time training in identifying victims of human trafficking must be completed before licensure
24. Minnesota	X*			https://mn.gov/boards/psychology/applicants/
25. Mississippi	X*			https://www.psychologyboard.ms.gov/Pages/default.aspx
26. Missouri	X*			https://pr.mo.gov/psychologists-application-forms.asp
27. Montana	X*			http://boards.bsd.dli.mt.gov/psy
28. Nebraska	X*			http://dhhs.ne.gov/licensure/Pages/Psychology.aspx
29. Nevada	X*			http://psyexam.nv.gov/
30. New Hampshire	X*			https://www.oplc.nh.gov/psychologists/
31. New Jersey		X		https://www.njconsumeraffairs.gov/psy/ Completion of UMD College Park's doctoral program in clinical psychology accredited by APA and PCSAS does not meet New York educational requirements to apply for licensure as a psychologist. In addition to a doctoral degree from an APA accredited program, New Jersey requires the following breakdown of credits and topic areas: ● Six (6) semester credits in Personality Theory and Human Development Theory; ● Six (6) semester credits in Learning Theory and/or Physiological Psychology; ● Six (6) semester credits in Psychological Measurement and Psychological Assessment; ● Six (6) semester credits in Psychopathology; ● Six (6) semester credits in Psychological therapy/counseling or Industrial/Organizational Psychology; and ● Six (6) semester credits in Research and Statistical Design

32. New Mexico	X*			http://www.rld.state.nm.us/boards/Psychologist_Examiners.aspx
33. New York	X*			http://www.op.nysed.gov/prof/psych/
34. North Carolina	X*			http://www.ncpsychologyboard.org/applications/application-for-licensure/
35. North Dakota	X*			http://www.ndsbpe.org/application-for-licensureregistration.html
36. Ohio	X*			https://psychology.ohio.gov/Applicants/Psychologist
37. Oklahoma		X		https://www.ok.gov/psychology/ Completion of UMD College Park's doctoral program in clinical psychology accredited by APA and PCSAS does not meet Oklahoma educational requirements to apply for licensure as a psychologist. Oklahoma's specific required coursework includes: • Three (3) semester credits in Scientific and professional ethics and standards; • Three (3) semester credits in Research design and methodology • Three (3) semester credits in Statistics and psychometrics • Three (3) semester credits in Biological bases of behavior • Three (3) semester credits in Cognitive-affective bases of behavior • Three (3) semester credits in Social bases of behavior • Three (3) semester credits in Individual behavior • Three (3) semester credits in Individual bases of behavior
38. Oregon	X*			https://www.oregon.gov/psychology/pages/index.aspx
39. Pacific Territories			X	
40. Pennsylvania	X*			https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Psychology/Pages/default.aspx#.VgG6GN9VhBc
41. Puerto Rico			X	
42. Rhode Island	X*			https://health.ri.gov/licenses/detail.php?id=241
43. South Carolina	X*			https://llr.sc.gov/psych/
44. South Dakota	X*			https://dss.sd.gov/licensingboards/psych/psych.aspx
45. Tennessee	X*			https://www.tn.gov/health/health-program-areas/health-professional-boards/psychology-board/psych-board/about.html
46. Texas	X			http://www.tsbep.texas.gov/index.php
47. Utah	X*			https://dopl.utah.gov/psych/index.html
48. U.S. Virgin Islands	X*			http://usvipsychologyboard.com/
49. Vermont	X*			https://sos.vermont.gov/psychological-examiners/forms-instructions/
50. Virginia	X*			https://www.dhp.virginia.gov/Psychology/psychology_forms.htm
51. Washington	X*			https://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/Psychologist/BoardInformation
52. West Virginia	X			https://psychbd.wv.gov/Pages/default.aspx
53. Wisconsin	X			https://dsps.wi.gov/pages/Professions/Psychologist/Default.aspx
54. Wyoming	X*			https://psychology.wyo.gov/

UNIVERSITY OF MARYLAND
FERPA AUTHORIZATION TO RELEASE EDUCATION RECORDS

Pursuant to the Family Educational Rights and Privacy Act of 1974, as amended ("FERPA"), I hereby authorize the University of Maryland to disclose information from my education records as described below.

1. Student Information

Student Name	
UID / Student ID	
Email Address	

2. Person(s) or Entity(ies) Authorized to Receive Information

List the individual(s) and/or entity(ies) authorized to receive information from the University:

Name	
Relationship to Student	
Phone / Email	
Additional Recipient	
Relationship / Contact	
Additional Recipient	
Relationship / Contact	

3. Records Authorized for Disclosure

Check all categories that may be disclosed:

☐ Academic records, including enrollment, registration, and course schedule
☐ Grades, GPA, and academic standing
☐ Degree progress and graduation status
☐ Billing and account information
☐ Financial aid information
☐ Disciplinary records
☐ Student conduct information
☐ Housing information
☐ Health or counseling-related records, if maintained as education records and not otherwise protected by law
☐ Other: _____

4. Purpose of Disclosure

Purpose for which the records may be disclosed:

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5. Duration of Authorization

☐ This authorization remains in effect until the end of the student's enrollment at the University of Maryland.

☐ This authorization remains in effect until this date: _____

☐ This authorization remains in effect until revoked by me in writing.

6. Conditions and Acknowledgments

1. I am voluntarily authorizing the University of Maryland to disclose only the education records identified in this form to the recipient(s) listed above.
2. This authorization applies only to the records specified in this form.
3. I may revoke this authorization at any time by submitting a written revocation to the appropriate University office, but any disclosure made before revocation will remain valid.
4. The University may require reasonable verification of the identity of any person seeking information under this authorization.
5. This authorization does not require the University to disclose information in all circumstances and the University may limit disclosure as permitted by law or University policy.

7. Student Signature

I certify that I am the student identified above and that I authorize the release of my education records as set forth in this form.

Student Signature	Date