

1 **East Tennessee State University**
2 **PhD in Psychology: Clinical Psychology**

3
4 **HANDBOOK**

5
6 **2014-2015**

7
8 **Preface**

9 The Handbook for the Doctoral Program* in Clinical Psychology (hereafter referred to as
10 the "Handbook") provides basic information, guidelines, policies, and procedures pertaining to the
11 Clinical Psychology Doctoral Program at East Tennessee State University (ETSU). It is designed
12 for students in all years of the program. Most questions about procedures and guidelines can be
13 answered by a careful reading of this Handbook. This Handbook and its supplements, when
14 issued, contain the current regulations and requirements for graduate study leading to the Ph.D. in
15 Clinical Psychology as well as the policies and procedures of the Program. There are additional
16 requirements and/or procedures that are found in the ETSU Student Handbook and the ETSU
17 Graduate Student Handbook. **All students are responsible for knowing the information in**
18 **these documents, and enrollment is considered an acceptance of all conditions specified**
19 **in these documents.**

20 Policies and guidelines may change during enrollment in the graduate program, and these
21 changes may apply to you. Although the program makes every effort to provide updated,
22 accurate, and appropriate information about the program requirements, this Handbook is
23 immediately dated by even the most minor changes. Consequently, students should check with
24 their advisor and/or the Director of Clinical Training (DCT) with respect to any problems or
25 ambiguities that might not be addressed, or about recent changes that do not appear in the most
26 recent edition of the Handbook. This Handbook is meant to be used as a guide for both students
27 and faculty.

28
29 *The Psychology Department at ETSU offers a PhD degree program in Psychology with two concentrations:
30 Experimental and Clinical, and the use of the term "program" throughout this document is not meant to imply that
31 there are two separate PhD degree programs. The term "program" throughout this document is in keeping with the
32 standard of practice in utilizing the broader use of the term.
33

1
2 Unanticipated problems or unique situations may occur, however, and are resolved through
3 mutual consultation between the student, the appropriate faculty member or advisor, and the
4 Graduate Training Committee who ultimately make decisions guided by their collective and best
5 professional judgment.

6
7 Department Head: Wallace: Dixon, Jr.

8
9
10 Co-Directors of Clinical Training: Peggy J. Cantrell & Jill D. Stinson
11
12
13

1

2

East Tennessee State University

3

Handbook

4 ETSU is a Tennessee Board of Regents (TBR) institution and is fully in accord with the belief that
5 educational and employment opportunities should be available to all eligible persons without regard
6 to age, gender, color, race, disability, veteran status, national origin, religion, sexual orientation, or
7 political affiliation.

8 The Department of Psychology at East Tennessee State University has established a program
9 of clinical training particularly designed to equip students with tools to address the behavioral and
10 mental health needs of people located in the underserved communities surrounding the university.
11 These communities comprise economically disadvantaged and strongly faith-based individuals
12 located within rural Appalachia. In this way, the entire premise of the program is diversity-
13 centered. Yet these three dimensions of individuality are but a subset of a much larger
14 multidimensional spectrum of diversity with which the Department, through formal and informal
15 experiences, attempts to ensure familiarity and sensitivity among all its staff and students.
16 Included in this broader spectrum are, but are not limited to, race, ethnicity, age, sex, gender,
17 sexual orientation, religious orientation, religion, disability status, socioeconomic status, and
18 national origin. Below we describe the department's efforts to infuse attention and sensitivity to
19 diversity through (1) a long-term, systematic plan for the recruitment and retention of diverse staff
20 and students; (2) education of students; and (3) establishment of a climate of respect.

21 Through 1) non-discriminatory policies on recruitment and retention of students, faculty, and
22 staff, 2) curriculum and field placements that emphasize cultural competence, 3) in non-
23 discriminatory policies and operating conditions, and 4) avoidance of actions that restrict program
24 access on grounds irrelevant to success, we endorse and attempt to emulate the APA Ethical
25 Principles and Code of Conduct (APA, 2002).
26
27

Table of Contents

1		
2		
3	PREFACE	1
4	EAST TENNESSEE STATE UNIVERSITY	7
5	INSTITUTIONAL PURPOSE	7
6	INSTITUTIONAL VALUES	8
7	STUDENT CONDUCT, BILL OF RIGHTS AND RESPONSIBILITIES	8
8	GRADUATE PROGRAM IN CLINICAL PSYCHOLOGY	8
9	INTRODUCTION	8
10	PROGRAM TRAINING MODEL, PHILOSOPHY AND MISSION STATEMENT	9
11	PROGRAM GOALS AND OBJECTIVES	10
12	FULL-TIME FACULTY LISTING AND RESEARCH INTERESTS	11
13	DEPARTMENTAL CONTACT INFORMATION	13
14	ADMISSION REQUIREMENTS	13
15	OFFERS AND ACCEPTANCES	14
16	CHANGING CONCENTRATIONS	15
17	TRANSFER OF CREDIT	15
18	WAIVING COURSE REQUIREMENTS	15
19	EMPIRICAL THESIS ACCEPTANCE	16
20	CURRICULUM	16
21	MASTER'S REQUIREMENTS (47 HOURS):	16
22	DOCTORAL REQUIREMENTS (51-52 HOURS):	17
23	COURSE DESCRIPTIONS	17
24	ADDITIONAL MATRICULATION REQUIREMENTS AND TRAINING EXPERIENCES	22
25	INTEGRATION OF SCIENCE AND APPLIED PRACTICE	23
26	MATRICULATION TABLE AND NARRATIVE	24
27	MISSION SPECIFIC TRAINING IN PRIMARY CARE AND RURAL PSYCHOLOGY	27
28	RESEARCH TRAINING REQUIREMENTS AND RESEARCH SUPPORT	28
29	PRIMARY ACADEMIC ADVISOR	28
30	RESEARCH FACILITIES	28
31	INSTITUTIONAL REVIEW BOARD (IRB)	29
32	FIRST TIME USERS OF CITI TRAINING PROGRAM	29
33	RESOURCES AND REFERENCES	30
34	CLINICAL TRAINING EXPERIENCES	30
35	BEHAVIORAL HEALTH AND WELLNESS CLINIC	30
36	Year 1 - Pre-Practicum – Not registered as 7010	30
37	Year 2 – Pre-Practicum and Practicum & Seminar	31
38	Year 3 - Register for PSYC 7010, Practicum (1 hr) and PSYC 7910, Externship (1hr)	31
39	Year 4 - Register for Practicum 7010 and Externship 7910	31
40	Year 5 – Optional	32
41	VERTICAL TEAMS	32
42	COMMUNITY PLACEMENTS	32
43		
44	MAJOR BENCHMARKS	34
45	EMPIRICAL THESIS	34
46	GENERAL POLICIES ABOUT THESES IN THE PSYCHOLOGY DEPARTMENT	34
47	THE THESIS: PRACTICAL CONSIDERATIONS	36
48		
49	MASTER'S CLINICAL CAPSTONE PROJECT	39
50	PURPOSE	39
51	TIMING OF CLINICAL CAPSTONE PROJECT	40
52	FORMATION OF CLINICAL CAPSTONE PROJECT COMMITTEES	41
53	MASTER'S CLINICAL CAPSTONE PROJECT GUIDELINES	41
54	ORAL DEFENSE OF CLINICAL CAPSTONE PROJECT	42

1	PASSING/FAILING CLINICAL CAPSTONE PROJECT	42
2	DOCTORAL PRELIMINARY PROJECT.....	44
3	DOCTORAL PRELIMINARY EXAMINATION PROJECT GUIDELINES AND REQUIREMENTS.....	ERROR! BOOKMARK NOT DEFINED.
4	ORAL DEFENSE OF PRELIMINARY PROJECT	ERROR! BOOKMARK NOT DEFINED.
5	PASSING/FAILING PRELIMINARY EXAMINATION PROJECT.....	ERROR! BOOKMARK NOT DEFINED.
6	DOCTORAL CANDIDACY CHECKLIST	49
7	DISSERTATION	49
8	ALTERNATIVE MULTI-PAPER DISSERTATION FORMAT.....	49
9	GENERAL POLICIES ABOUT DISSERTATIONS IN THE PSYCHOLOGY DEPARTMENT	51
10	THE DISSERTATION: PRACTICAL CONSIDERATIONS	52
11	ORAL DEFENSE OF DISSERTATIONS	54
12	GENERAL	54
13	STUDENT EVALUATION PROCESS	55
14	PROGRAM EVALUATION	57
15	TIMELINE	58
16	EVALUATION FORMS.....	58
17	PROFESSIONAL DEVELOPMENT AND LIFELONG LEARNING.....	59
18	ADDITIONAL PHD REQUIREMENTS	58
19	PRE-DOCTORAL INTERNSHIP	59
20	INTERNSHIP PREPARATION.....	60
21	STUDENT SUPPORT AND EXPECTED COSTS.....	59
22	FINANCIAL SUPPORT.....	59
23	ADMINISTRATIVE SUPPORT.....	60
24	Center for Physical Activity.....	60
25	Disability Services	60
26	ETSU Bookstore.....	60
27	Goldmail	61
28	Library	61
29	Student Counseling Center	61
30	ETSU Graduate Catalogue	61
31	Student Health Clinic.....	61
32	Writing and Communication	62
33	STUDENT TECHNICAL HELP	62
34	Technical/Computer Help.....	62
35	D2L.....	62
36	Problems viewing course videos	62
37	Microsoft Office Free Viewers	62
38	Password Reset	63
39	Virus Protection	63
40	SCHOOL OF GRADUATE STUDIES	63
41	OFFICE OF FINANCIAL AID	64
42	DEPARTMENT AND CLINICAL PROGRAM ADMINISTRATIVE SUPPORT.....	64
43		
44		
45	STUDENT AND PROFESSIONAL ASSOCIATIONS	66
46	LOCAL ASSOCIATIONS	65
47	Psi Chi.....	66
48	GRADUATE STUDENT ASSOCIATION OF PSYCHOLOGY (GSAP).....	67
49		
50	TENNESSEE PSYCHOLOGICAL ASSOCIATION (TPA).....	67
51	GRADUATE AND PROFESSIONAL STUDENT ASSOCIATION- ETSU	67
52	REGIONAL ASSOCIATIONS	68
53	SOUTHEASTERN PSYCHOLOGICAL ASSOCIATION (SEPA).....	68
54	TENNESSEE PSYCHOLOGICAL ASSOCIATION (TPA).....	68
55	SOCIETY OF SOUTHEASTERN SOCIAL PSYCHOLOGISTS (SSSP)	68

1	NATIONAL ASSOCIATIONS.....	68
2	AMERICAN PSYCHOLOGICAL ASSOCIATION (APA).....	69
3	ASSOCIATION FOR PSYCHOLOGICAL SCIENCE	69
4	FREQUENTLY ASKED QUESTIONS	69
5	CERTIFICATION AS A PSYCHOLOGICAL ASSISTANT	71
6	APA ETHICAL PRINCIPLES OF PSYCHOLOGISTS AND CODE OF CONDUCT.....	71
7	POLICIES AND PROCEDURES	71
8	ACADEMIC HONESTY	71
9	ACADEMIC PERFORMANCE	72
10	ACADEMIC PROBATION	72
11	DISMISSAL	73
12	GRIEVANCE POLICY AND RESOLUTION OF CONFLICTS	73
13	Student Complaint Policy and Procedure.....	73
14	DEPARTMENT OF PSYCHOLOGY PROGRESSIVE REMEDIATION/DISCIPLINARY POLICIES.....	76
15	FACULTY GRIEVANCES.....	81
16	TEACHING EXPERIENCE.....	91
17	OVERVIEW	91
18	TEACHING ASSISTANT POLICY	92
19	ADDITIONAL OPTIONAL TEACHING OPPORTUNITIES	92
20	SUPERVISION AND EVALUATION	92
21	PROFESSIONAL ETHICS.....	92
22	APPENDICES	94
23	APPENDIX A: MATRICULATION PROGRESS.....	94
24	APPENDIX B: SCHOOL OF GRADUATE STUDIES FORMS	97
25	APPENDIX C: CLINICAL CAPSTONE/PRELIM PROJECT FORMS.....	105
26	APPENDIX D: STUDENT EVALUATION AND FACULTY REVIEW FORMS	111
27	APPENDIX E: PRACTICUM COMPETENCY AND RESOLVING DIFFICULTIES ON PRACTICUM SITES	134
28	APPENDIX F: COMMUNITY PLACEMENT DESCRIPTIONS	138
29	APPENDIX G: DEPARTMENT OF PSYCHOLOGY DIVERSITY PLAN	150
30	APPENDIX H: INTERNSHIP PLACEMENTS.....	163
31	APPENDIX I: SELECTED STUDENT RESEARCH TOPICS	165
32	APPENDIX J: IR C-20 DATA ON APPLICATIONS/ADMISSIONS/ENROLLMENT/ATTRITION	166
33	LICENSURE OUTCOMES	167

34
35
36
37
38
39
40
41
42
43

1

2 ***East Tennessee State University***

3 East Tennessee State University (ETSU) is one of the principle campuses governed by the
4 Tennessee Board of Regents. Since it opened in 1911 as a two-year normal school educating
5 teachers, ETSU has grown into a major university attracting students from all 50 of the United
6 States and numerous other countries. A diversified institution, ETSU is comprised of eight
7 colleges and schools. With a 350-acre main campus in Johnson City along with centers in
8 Kingsport and Elizabethton and sites in Bristol and Greeneville, ETSU maintains a semester
9 enrollment of more than 15,000 students and serves 5,000-10,000 persons annually through
10 continuing education and extended service programs.

11 ***Institutional Purpose***

12 ETSU strives to create a community of learning that actively advances the fundamental values
13 of higher education – advancing the free exchange of ideas, curiosity and the desire for learning,
14 critical thinking and self-reflection, ethical behavior, academic freedom, and appreciation of human
15 diversity.

16 ETSU embraces its regional setting and proudly reflects its traditional roots and Appalachian
17 heritage. The university is recognized for its unique focus on health sciences. ETSU's division of
18 Health Sciences, composed of the colleges of Medicine, Nursing, and Public and Allied Health,
19 seeks to support the health and wellness of the people of Southern Appalachia, with special
20 emphasis on meeting the needs of rural populations. As a doctoral-research intensive university,
21 ETSU is committed to teaching based on scholarship and to advancing programs of research and
22 creative activity that improve the quality of life in the region, state, nation, and the world. The
23 university seeks to provide an environment in which faculty, students, and staff are encouraged to
24 produce and disseminate the highest quality scholarly and creative work. To sustain and enhance
25 this environment, ETSU seeks to secure financial support for research and creative programs
26 through partnerships with local and broader communities, and through grants from government and
27 private organizations. ETSU strives to achieve optimal efficiency in its use of resources while always
28 seeking to offer instructional, research, and public service programs of the utmost excellence. The
29 university recognizes that employees are its most valuable resource and students its most important
30 constituents. Putting "people first" is the foremost value guiding the university's operations.

31

1 ***Institutional Values***

2 ETSU pursues its mission through a student-centered community of learning reflecting high
3 standards and promoting a balance of liberal arts and professional preparation, continuous
4 improvement, and based on core values where:

- 5 • **People** come first, are treated with dignity and respect, and are encouraged to achieve their full
6 potential;
- 7 • **Relationships** are built on honesty, integrity, and trust;
- 8 • **Diversity** of people and thought is respected;
- 9 • **Excellence** is achieved through teamwork, leadership, creativity, and a strong work ethic;
- 10 • **Efficiency** is achieved through wise use of human and financial resources; and
- 11 • **Commitment** to intellectual achievement is embraced.

12 ***Student Conduct, Bill of Rights and Responsibilities***

13 University students are citizens of the state, local, and national governments and of the
14 academic community, and are, therefore, expected to conduct themselves as law-abiding members
15 of each community at all times. Admission to an institution of higher education carries with it special
16 privileges and imposes special responsibilities apart from those rights and duties enjoyed by non-
17 students. In recognition of the special relationship that exists between the institution and the
18 academic community which it seeks to serve, the Tennessee Board of Regents has authorized the
19 president of the university to take such action as may be necessary to maintain campus conditions
20 and preserve the integrity of the institution and its educational environment.

21 Pursuant to this authorization, the TBR has developed regulations which are intended to
22 govern student conduct on the campus. In addition, students are subject to all national, state, and
23 local laws and ordinances. If a student's violation of such laws or ordinances also adversely affects
24 the institution's pursuit of its educational objectives, the institution may enforce its own regulations
25 regardless of any proceedings instituted by other authorities. Conversely, violation of any section of
26 the TBR regulations or university rules may subject a student to disciplinary measures taken by the
27 institution whether or not such conduct is simultaneously a violation of state, local or national laws. A
28 complete statement on institutional student disciplinary rules and procedures can be found in the
29 student handbook located in the ETSU telephone directory and on the ETSU website.

30
31 ***Graduate Program in Clinical Psychology***

32
33 **Introduction**

1 This document summarizes the current department procedures and regulations governing
2 graduate work in the Department of Psychology at ETSU. The material contained herein is not
3 intended to duplicate or substitute for other regulations that are contained in the ETSU Graduate
4 Catalog: <http://www.etsu.edu/reg/catalog/graduate.aspx>

5 Rather, the present material supplements and extends more general University-level
6 requirements. All students should be familiar with the present information as well as with the
7 Graduate Catalog. Questions pertaining to any of these items should be directed to the Psychology
8 Department Chair or the Director of Clinical Training in Psychology.

9 **Program Training Model, Philosophy and Mission Statement**

10
11 The clinical psychology program is guided by the scientist-practitioner model and places a
12 strong emphasis on research and interdisciplinary clinical training. Though diverse in respect to
13 methods of inquiry and areas of study, the faculty is of one mind in promoting scientific inquiry as
14 the foundation of clinical psychology. The program's philosophy also emphasizes the respect for
15 and understanding of cultural and individual diversity in policies for recruitment, retention, the
16 development of faculty and students, and in the curriculum and field placements. The program
17 has nondiscriminatory policies and operating procedures, and it avoids any actions that would
18 restrict program access or completion on grounds that are irrelevant to success in graduate
19 training or the profession.

20 The primary mission of the articulated master's/doctoral program in Clinical Psychology at
21 ETSU is to provide training in clinical psychology emphasizing rural behavioral health and practice
22 in the context of integrated primary health care. ETSU has a uniquely cooperative relationship with
23 its surrounding community and region. Because of this relationship the program is unique in what
24 it can offer students in the field of health services psychology.

25 All students receive a curriculum of general clinical training as well as training in the basic
26 science of psychology. Thus, the first two years of the program are highly structured. Due to the
27 emphasis in primary care and rural health practice as well as adherence to the generalist model of
28 training, the advanced coursework is more structured than some programs in clinical psychology,
29 but students are afforded the opportunity for individualization through electives, research
30 emphasis, and externship placements.

31 The program is designed for full-time study only as a 5-year post-baccalaureate articulated
32 MA/PhD program, with the fifth year being an off-campus full-time internship in keeping with
33 APA/APPIC requirements.

1 Our Diversity Plan for recruitment, retention, non-discriminatory policies, and development
2 of faculty and students is delineated in Appendix G. As a general orientation, we engage in
3 actions that indicate respect for and understanding of cultural and individual diversity. We pride
4 ourselves on establishing a program of clinical training designed to equip students with tools to
5 particularly address the needs of communities surrounding the university, which can be described
6 as economically disadvantaged and located within rural Appalachia – two characteristics that fall
7 under a broad definition of diversity that encompasses not only race/ethnicity, gender, sexual
8 orientation, and religion but also culture, location (e.g., rural), and economic status. In this way,
9 the entire premise of the program is diversity-centered. In addition, the program and department
10 provide diversity training opportunities for students, and promote a climate of tolerance of diversity
11 for both students and faculty through education and research, and other campus activities.
12 Through non-discriminatory policies on recruitment and retention of students, faculty, and staff,
13 curriculum and field placements that emphasize cultural competence; in non-discriminatory
14 policies and operating conditions, and avoidance of actions that restrict program access on
15 grounds irrelevant to success, we endorse and attempt to emulate the APA Ethical Principles and
16 Code of Conduct which states that:

17
18 “Psychologists respect the dignity and worth of all people, and the rights of
19 individuals to privacy, confidentiality, and self-determination. Psychologists are aware
20 that special safeguards may be necessary to protect the rights and welfare of persons
21 or communities whose vulnerabilities impair autonomous decision making.
22 Psychologists are aware of and respect cultural, individual, and role differences,
23 including those based on age, gender, gender identity, race, ethnicity, culture,
24 national origin, religion, sexual orientation, disability, language, and socioeconomic
25 status and consider these factors when working with members of such groups.
26 Psychologists try to eliminate the effect on their work of biases based on those
27 factors, and they do not knowingly participate in or condone activities of others based
28 upon such prejudices” (APA, 2002).

30 **Program Goals and Objectives**

31 **Goal #1: Prepare students as independent scientist-practitioners in clinical psychology**

32
33 Objective 1-1: Provide students with a broad and general foundation in psychological science to
34 enable them to understand the history of thought and development, methodological, and
35 theoretical foundations as they inform the current practice of clinical psychology;

36
37 Objective 1-2: Provide students with the bases to be skilled in research design, methods,
38 execution, and literature evaluation and integration to stay abreast in the field and to make
39 contributions;
40

1 Objective 1-3: Provide students with theories and methods in diagnostic assessment, formulating
2 and implementing interventions, and evaluating the efficacy of interventions.

3
4 **Goal #2: Prepare students for entry level clinical practice in rural and primary care settings**

5
6 Objective 2-1: Provide students with cultural competence in working with rural populations and
7 community-based practice

8
9 Objective 2-2: Provide students with skill development for inter-professional collaboration,
10 communication, and consultation

11
12 Objective 2-3: Provide students with knowledge and skill development in models of evidence-
13 based assessment and intervention especially pertinent to primary care settings

14
15 Objective 2-4: Provide students with knowledge and skills in professional supervision and peer
16 consultation

17
18 **Goal #3: Prepare students for ethical and culturally competent clinical practice**

19
20 Objective 3-1: Provide students with an understanding of the current professional ethics and
21 standards of behavior;

22
23 Objective 3-2: Provide students with an understanding of current federal and state laws on the
24 practice of psychology;

25
26 Objective 3-3: Provide students with an understanding of the literature on individual and cultural
27 differences.

28
29 **Full-time Faculty Listing and Research Interests**

30 A. Core Clinical Faculty

31 Peggy Cantrell PhD 1982, University of Southern Mississippi. Professor and Director of
32 Clinical Training. Violence in marital and dating relationships; adult,
33 couple, and women's health
34
35 William Dalton PhD 2006, University of Memphis. Associate Professor. Health
36 promotion and health risk behaviors among youth; Pediatric overweight
37 prevention/intervention; Smoking prevention/cessation; Integrating family
38 systems ideas into treatment of pediatric illnesses
39
40 Chris Dula PhD 2003, Virginia Tech. Associate Professor. Traffic safety,
41 aggression and risk-taking, test and measure development
42
43 Jon Ellis PhD 1989, University of Southern Mississippi. Professor. Clinical child
44 psychology, suicide and reasons for living
45
46 Jameson Hirsch PhD 2003, University of Wyoming. Associate Professor. Optimism,
47 pessimism and hopelessness as predictors of suicidal ideation in college
48 students
49

- 1 Jodi Polaha PhD 1998, Auburn University. Associate Professor. Behavioral
 2 pediatrics, rural mental health, integrated behavioral health and primary
 3 care, behavioral tele-health, and ADHD
 4
- 5 Jill Stinson PhD 2006, University of Arizona. Assistant Professor and Director of
 6 Clinical Training. Evidenced-based treatment for sex offenders, self-
 7 regulation, DBT, ACE study
 8
- 9 Jon Webb PhD 1998, California School of Professional Psychology, LA. Associate
 10 Professor. Forgiveness, spirituality, addiction
 11

12 B. Associated Program Faculty

- 13 Russell Brown PhD 1998, University of Kentucky. Associate Professor. Behavioral
 14 Neuroscience. Animal models of psychopathology, recovery of brain
 15 function after brain injury
 16
- 17 Ginni Blackhart PhD 2006, Florida State University. Associate Professor. Social
 18 Psychology. Physiological/biological, behavioral and affective reactions
 19 to social rejection
 20
- 21 Andrea Clements PhD 1991, University of Alabama, Professor. Developmental
 22 Psychology. Effects of stress on health, particularly during pregnancy;
 23 Effects of religiosity on health, particularly as a stress buffer
 24
- 25 Wallace Dixon, Jr. PhD 1990, Miami University. Professor and Department Chair.
 26 Developmental Psychology. Temperamental difficulty and language
 27 acquisition
 28
- 29 Matt McBee PhD 2006, University of Florida. Assistant Professor. Quantitative
 30 Psychology. Propensity score analysis, hierarchical linear models,
 31 longitudinal data analysis, structural equation modeling, psychometrics,
 32 psychology of giftedness
 33
- 34 Matt Palmatier PhD 2004, University of Nebraska. Assistant Professor. Experimental
 35 Psychology. Behavioral Neuroscience; neuroscience of addictions
 36
- 37 Shannon Ross- PhD 2005, University of Iowa. Assistant Professor.
 38 Sheehy Developmental Psychology. Cognitive development; infant visual
 39 cognition.
 40
- 41 Eric Sellers PhD 2004, University of South Florida. Associate Professor. Cognitive
 42 Neuroscience. Visual attention, event-related potentials, brain-computer
 43 interface
 44
- 45 Stacey Williams PhD 2004, Kent State University. Associate Professor and Director of
 46 Experimental Concentration. Social and Quantitative Psychology.

1 Stigma and social interaction/support, partner violence and psychosocial
2 functioning
3

4 C. Affiliated Faculty and Staff

5 John Paul Abner Ph.D., 1996, University of Florida-Gainesville. Clinical Supervisor at the
6 Behavioral Health and Wellness Clinic
7

8 Kerry Holland Ph.D., 1994, University of Missouri. Director of the Behavioral Health
9 and Wellness Clinic. Women's issues, GLBT issues, and use of
10 meditation in psychotherapy

11 Departmental Contact Information

12 Email: clinpsyc@etsu.edu

13 Website: <http://www.etsu.edu/cas/psychology/index.jsp>

14 Main Psychology Department Phone: 423-439-4424; Fax: 423-439-5695;

15 Carol Gatz, Clinical Program Executive Aide, 423-439-4461; Fax: 423-439-4472

16 Peggy Cantrell, Director of Clinical Training: 423-439-6660

17 Behavioral Health and Wellness Clinic: 423-439-7777

18 Admission Requirements

19 To be accepted into the Clinical program students must apply for, and engage in, full time
20 study. Applicants to the MA/PhD degree program are evaluated once each year, only for
21 admission in the fall semester; applicants are not considered for spring admission. All application
22 information must have been postmarked by **December 1st** for a candidate to be considered for
23 admission in the following fall term. Students are admitted from two applicant pools, dependent
24 upon their level of preparation. All applications are considered with the expectation that the
25 applicant will pursue the PhD. The two applicant pools are:

- 26 1. Students holding a baccalaureate degree from a regionally accredited institution will be
27 considered for the MA/PhD program. Students admitted to the Clinical Psychology PhD
28 program complete the requirements for an MA in Clinical Psychology (42 hour program
29 of study with thesis) en route to PhD completion. Students seeking a terminal master's
30 degree will not be admitted.
- 31 2. Students already holding the MA or MS in psychology from a regionally accredited
32 institution may also apply to the MA/PhD program. The master's degree must be
33 commensurate with the MA program in Clinical Psychology at ETSU and involve the

1 successful completion of an empirically-based thesis project. Students possessing a
2 master's degree without an empirically-based thesis will be required to complete an
3 empirically-based thesis before being admitted to doctoral candidacy. All students,
4 regardless of entry level must complete the curriculum requirements reflective of the
5 broad and general science of psychology, as well as those reflective of the scientific,
6 methodological, and theoretical foundations of the clinical practice of psychology and
7 our specific training mission.

8
9 **The following application materials are required:**

- 10 1. Completed University application forms;
- 11 2. A grade point average of at least 3.00 (based on a 4.00 scale) in undergraduate and/or
12 graduate level work overall and in Psychology courses;
- 13 3. A minimum of 18 semester hours in undergraduate psychology, including courses in
14 statistics, experimental design, personality, social, cognitive, developmental, and
15 abnormal psychology. Students lacking some of these prerequisite courses, but
16 presenting an exceptional undergraduate record, may be granted graduate admission,
17 but they will be expected to remove all undergraduate deficiencies during their first
18 academic year;
- 19 4. GRE scores (Verbal, Quantitative, and Written Analysis) are required for application and
20 are taken into account in the admissions process;
- 21 5. Letters of recommendation from at least three persons familiar with the applicant's
22 academic background, aptitude for graduate study, and future performance as a
23 psychologist;
- 24 6. A personal statement of 500-750 words indicating the applicant's academic experiences,
25 research interests, and career goals. Prior undergraduate research interests and
26 involvement are weighted heavily as is an interest and commitment to working in a rural
27 and/or primary care setting;
- 28 7. A willingness to be interviewed by members of the admission committee.

29 **Offers and Acceptances**

30 First-round offers are made in writing prior to April 1st. A response is not required until April
31 15th (or the first Monday after April 15th, if April 15th falls on a weekend). Between April 1st and the
32 decision date, offers may be made to students over the phone when a position opens. These

1 verbal offers are official, but will be followed by a written confirmation within 48 hours. After being
2 made, offers cannot be withdrawn by the university until after the decision date and then can be
3 withdrawn only if the student fails to respond to the offer by the decision date. After the April 15th
4 decision date, if there are more open slots, offers may be made. If an offer is made after the
5 decision date, the length of time to make a decision on the offer will be clearly stated. The length
6 of time may vary, but students will have at least a week in which they may visit the university
7 before making a decision.
8

9 **Changing Concentrations**

10 Students must designate either the Experimental or the Clinical concentration of the PhD
11 Program in Psychology upon application, and are admitted into a specific concentration. A
12 student desiring to change concentrations must formally reapply to the program and
13 concentration. Changing concentrations within the PhD Psychology program CANNOT be
14 accomplished by filing a Change of Program of Study form with the School of Graduate Studies.
15

16 **Transfer of Credit**

17 Students with graduate credit earned at another institution, upon matriculation at ETSU,
18 may petition to have these credits applied toward their degree requirements at ETSU. While such
19 credits are not automatically transferred and must be approved by the Director of Clinical Training
20 and the School of Graduate Studies, a maximum of 9 semester hours earned elsewhere could be
21 applied. See the *ETSU Graduate Catalog* for more details. Though students holding a master's
22 degree may not be required to complete a second master's degree, they should expect to have to
23 complete substantial components within the master's, in that all required courses have to be
24 accepted as equivalents or taken within the program.
25

26 **Waiving Course Requirements**

27 Students may petition to waive specific courses through petition. The designated course
28 instructor, along with at least one other clinical program faculty member, will review petitions.
29 Upon receipt of the petition, the DCT will send a current ETSU course syllabus to the student for
30 review. The written petition must address how prior coursework is equivalent, and equivalency is
31 defined as demonstrating achievement of each and every learning objective of the ETSU course
32 to be waived. The written petition must be accompanied by the previously completed course

1 syllabus and any work products relevant to supporting the petition narrative. All materials will be
2 submitted by the DCT to the ETSU clinical faculty representatives for review and
3 recommendation. Petitions to waive specific courses must be submitted for review prior to the
4 end of the student's first semester at ETSU.
5

6 **Empirical Thesis Acceptance**

7 All students must complete an empirically-based thesis. Students entering the program who
8 have already completed a master's thesis must have that thesis accepted by a three-member
9 faculty committee. The student is responsible for submitting a copy of the thesis to the DCT for
10 dissemination. The thesis is to be submitted, reviewed, and either accepted or rejected during the
11 student's first semester of study to allow adequate time for a new thesis project to be conducted if
12 required. In any case, the student must complete the written and oral components of the clinical
13 capstone project and preliminary project prior to being admitted into doctoral candidacy. Students
14 entering the program with a master's degree from another institution who have not completed a
15 thesis as part of that master's program will be required to complete an empirical thesis in the
16 current program.
17

18 **Curriculum**

19 **Master's Requirements (47 hours):**

20 PSYC 5000 – Broad and General Foundations in Psychology, 3 hours

21 PSYC 5010 – Advanced History & Systems of Psychology, 3 hours

22 PSYC 5040 -- Rural Health Research and Practice, 3 hours

23 PSYC 5100 -- Legal and Ethical Issues in Psychology, 3 hours

24 PSYC 5210 -- Statistical Methods, 3 hours

25 PSYC 5220 -- Personality and Psychotherapy Models, 3 hours

26 PSYC 5410 -- Correlation & Multiple Regression, 3 hours

27 PSYC 5707 -- Advanced Behavioral Neuroscience, 3 hours

28 PSYC 5817 -- Introduction to Psychological Measurement, 3 hours

29 PSYC 5825 -- Psychopathology, 3 hours

30 PSYC 5830 -- Psychological Assessment I: Adult, 3 hours

31 PSYC 5850 -- Psychological Assessment II: Children, 3 hours

1 PSYC 5870 – Clinical Interviewing Techniques, 3 hours

2 PSCY 5910 -- Clinical Psychological Clerkship, 2 hours

3 PSYC 5960 -- Thesis, 6 hours

4 **Doctoral Requirements (51-52 hours):**

5 PSYC 6600 – Rural Case Oriented Learning & Preceptorship, 3 hours

6 PSYC 6870 – Evidence Based Interventions, 3 hours

7 PSYC 7000 – Doctoral Preliminary Project, 3 hours

8 PSYC 7010 – Clinical Psychology Practicum & Seminar, 1 hour per term for a total of
9 5 hours

10 PSYC 7100 – Primary Care Psychology I, 3 hours

11 PSYC 7110 – Primary Care Psychology II, 3 hours

12 PSYC 7500 – Cultural Anthropological Applications to Rural Practice, 3 hours

13
14
15 One of the following: 3-4 hours:

16 NRSE 5303 Psychopharmacology, 3 hours

17
18 OR

19
20 PHYT 6102 Pathophysiology, 4 hours

21
22 OR

23
24 PSYC 5407 Psychopharmacology, 3 hours

25
26 PSYC 7910 – Externship, 1 hour per term for a total of 4 hours

27 PSYC 7960 – Doctoral Dissertation in Psychology, 12 hours

28 PSYC 7980 – Pre-Doctoral Internship, 3 hours

29 PSYC XXXX – Electives, 6 hours

30 31 32 **Course Descriptions**

33 **PSYC 5000 – Broad and General Foundations in Psychology** (3 credits) *Prerequisites: 18*
34 *hours in undergraduate psychology.* This course is designed to provide foundational knowledge,
35 as required by the APA Commission on Accreditation, for graduate training in professional
36 psychology, with a specific focus on the areas of human development, social aspects of behavior,
37 and cognitive/affective aspects of behavior. (spring)

38
39 **PSYC 5010 -- Advanced History & Systems of Psychology** This course reviews the growth of
40 the Science of Psychology (hereafter referred to as the 'field' or 'discipline'), including principal
41 systems, key theoretical debates and developments, and contemporary views on the history of the

1 field. Prominent relevant figures pre-dating the founding of the discipline as an independent
2 academic enterprise will be covered as will those formally within the discipline. (fall)

3
4 **PSYC 5040 – Rural Health Research and Practice** (3 credits) Practical
5 applications of community-based and participatory research methodology and theory relevant to
6 healthcare services. Interdisciplinary student teams of health related disciplines develop proposals
7 for community health projects and specific plans to assess achievement of objectives. Students
8 learn about interdisciplinary working relationships among health professionals, issues associated
9 with research involving human subjects, data collection methods and instruments, and analyses
10 of health status indicators. An online component on theory and research methodologies is
11 included. (spring)

12
13 **PSYC 5100 - Legal and Ethical Issues in Psychology** (3 credits) This course is a seminar
14 designed to acquaint students with the American Psychological Association's Code of Ethical
15 Conduct, the Tennessee Psychological Association's Code of Ethical Conduct, and the
16 Tennessee State Legal Code pertaining to practice and research in Psychology. A variety of
17 ethical and legal issues will be covered in the areas of teaching, research, clinical practice, and
18 supervision. (fall)

19
20 **PSYC 5210 - Statistical Methods** (3 credits) *Prerequisites: Psychology 2810.* This course
21 includes an overview of inferential statistics including topics such as probability, hypotheses
22 testing, population sampling, and analysis of regression and prediction. Both parametric and
23 nonparametric tests are reviewed. Parametric tests include the Z-test, t-test, Sandler A, Analysis
24 of Variance, Analysis of Covariance, and the Newman-Keuls test. Nonparametric tests include the
25 Chi square test, Sign test, Wilcoxon test, Mann-Whitney test, Kruskal-Wallis test, and the
26 Friedman test. Students learn the purpose of these tests and their strengths and limitations. (fall)

27
28 **PSYC 5220 - Personality and Psychotherapy Models** (3 credits) *Prerequisites: Psychology*
29 *4100.* The purpose of this course is to provide a graduate-level exploration of traditional models of
30 psychotherapy and associated personality theories. Its intent is to consider in some depth specific
31 aspects of normal and abnormal interpersonal adjustment and to provide a basis for the student's
32
33 own thinking about how people develop and come to have problems as well as models of
34 psychotherapeutic change. This course is based in reading, discussion, and presentation of
35 course material from textbook and primary sources. (spring)

36
37 **PSYC 5410 – Correlation & Multiple Regression** (3 credits) This course will
38 provide a detailed overview of correlational and multiple regression procedures as
39 used in contemporary psychological research. (spring)

40
41 **PSYC 5707 - Advanced Behavioral Neuroscience** (3 credits) A laboratory-based course
42 outlining how the brain interacts with the rest of the body to determine our behavior. Lecture,
43 discussion, and laboratory sessions are integrated to introduce students to modern methods of
44 psychophysiological research as it applies to neuroanatomy, neurophysiology,

1 neuroendocrinology, and biofeedback instrumentation. Areas covered will include the
2 physiological bases of learning, memory, sleep, dreaming, emotion, psychopharmacology, and
3 psychopathology. Classroom discussions will be augmented with readings from recent research
4 articles. (spring)

5
6 **PSYC 5817 – Psychological Measurement** (3 credits) A history and overview of the
7 standardized evaluation methods commonly used in the assessment of individuals and groups.
8 Topics covered are validity, reliability, and statistical concepts for the evaluation and interpretation
9 of test data. The student is given an overview of ability tests, interest tests, and personality tests.
10 Experience is provided in the administration, scoring, and interpretation of selected tests.

11
12 **PSYC 5825 – Psychopathology** (3 credits) *Prerequisites: Abnormal psychology and permission*
13 *of instructor.* Course is an advanced course in psychopathology aimed at an
14 in-depth review of the DSM as well as conceptualization of diagnosis and treatment processes in
15 clinical psychology. (fall)

16
17 **PSYC 5830 - Psychological Assessment I: Adults** (3 credits) *Prerequisites: Psychology 4100 or*
18 *PSYC 5220 , a course in statistics, and permission of the instructor.* Administration, scoring and
19 interpretation of the major individual intelligence, cognitive screening, and personality
20 assessments for adults. (fall)

21
22 **PSYC 5850 – Psychological Assessment II: Children** (3 credits) *Prerequisite(s): Psychology*
23 *5220 and permission of the instructor.* The aim of this course is to familiarize students with a
24 variety of intelligence and personality assessment instruments commonly used in clinical mental
25 health settings with children and to provide experience in administration, scoring, and
26 interpretation of these instruments. (spring)

27
28 **PSYC 5870 – Clinical Interviewing Techniques** (3 credits) *Prerequisites: Permission of the*
29 *instructor.* The basic skills of clinical interviewing will be covered in-depth, and the topics of mental
30 status evaluations, diagnostic interviewing, presenting problem assessment, historical information
31 gathering, suicide assessment, issues of confidentiality, documentation, interpersonal and
32 intrapersonal dynamics, and general theoretical orientations will also be covered. Students will be
33 taught fundamental interviewing skills through didactic seminars, extensive role playing, and
34 through videotaped interviews as part of their co-participation in Communication Skills for Health
35 Professionals. (fall)

36
37 **PSYC 5910 - Clinical Psychology Clerkship** (1 credit, repeatable) *Prerequisites: Permission of*
38 *the instructor is required for enrollment in this course.* Four hours per week of supervised field
39 placement in a role of observer or observer participant, for a total of 60 hours of on-site
40 placement.

41
42 **PSYC 5960 – Thesis** (6 credits) *Prerequisite(s): Permission of instructor.* A research project
43 developed and documented under the supervision of a faculty committee. The research project is
44 documented in the form of a thesis.

1
2 **PSYC 6600 – Rural Case Oriented Learning & Preceptorship** (3 credits) The general purpose
3 of this course is to provide students with experiential learning opportunities in primary care
4 psychology. Experiential learning will include practice in engaging in brief, evidence based
5 assessment, conceptualization, and physician consultation; supervision/feedback regarding
6 specific skill acquisition in these areas with actors; and on-site practice/feedback in these areas
7 with physicians.

8
9 **PSYC 6870 - Evidence-based Interventions** (3 credits) *Prerequisite(s): Permission of the*
10 *instructor is required for enrollment in this course.* This course will provide a detailed overview of
11 evidence-based psychological interventions for common adult disorders (with some overlap into
12 adolescent/childhood disorders). Empirically supported treatments and cognitive-behavioral
13 approaches will be particularly emphasized. Major topics covered in this class will include:
14 perspective on valid assessment; intervention approaches with empirical support; differing modes
15 of treatment (i.e., couples therapy, group therapy); and the application of empirically supported
16 treatments in various settings such as those found in medical primary care and mental health
17 center sites.

18
19 **PSYC 7000 - Doctoral Preliminary Project** (3 credits) The Preliminary Examination Project will
20 serve as an evaluation of qualification for doctoral candidacy. The Preliminary Examination
21 Project takes the form of a scholarly written product which will make a substantive and original
22 contribution to our scientific understanding of some area of psychology, broadly construed,
23 including development and submission of a grant proposal, preparation and submission of a peer-
24 reviewed empirical, conceptual or review article for publication, or the development and
25 completion of a pilot research project.

26
27 **PSYC 7010 - Clinical Psychology Practicum and Seminar** (1 credit repeatable to 5)
28 This course provides clinical psychology doctoral students with clinical training under the
29 supervision of a departmental faculty member. Direct clinical services, including assessment,
30 consultation, and intervention are provided by the advanced students under the auspices of the
31 ETSU Behavioral Health and Wellness Clinic. Successful completion of one semester of this
32 course is a pre-requisite to enrolling in PSYC 7910 Clinical Psychology Externship.

33
34 **PSYC 7100 - Primary Care Psychology I** (3 credits) This course is an in-depth exploration of the
35 psychologist in primary care settings with emphasis on the multiple roles of psychologists in those
36 settings, an understanding of prevention and wellness, developing and maintaining collaborative
37 relationships with healthcare providers, understanding of medical terminology, referral processes
38 and time pressure demands, and other pertinent issues.

39
40 **PSYC 7110 - Primary Care Psychology II** (3 credits) *Prerequisite: PSYC 7100*
41 *Primary Care Psychology I.* This course is the sequel to PSYC 7100. It is designed
42 to provide the advanced student with a comprehensive analysis of the public policies, clinical
43 trends, and empirical literature relevant to the provision of behavioral and mental health services
44 within an integrated primary care model with emphasis on rural and frontier areas. The

1 psychologist's role in providing assessment of common primary care problems and in providing
2 interventions in primary care will be thoroughly explored.
3

4 **PSYC 7500 - Cultural Anthropological Applications to Rural Practice** (3 credits) This course
5 examines beliefs about illness, healing, and the body with an emphasis on cultural influences.
6 Lectures and readings will use case materials drawn from North America, Africa, Central and Latin
7 America, the Pacific, and Asia. The course will begin by distinguishing physical "disease" from the
8 cultural understandings of "illness" and will explore the ways that cultural conceptions shape the
9 experience of illness and mental illness. Cross-cultural examples will be utilized to explore
10 culturally defined perceptions and definitions of mental disorders.

11
12 **PSYC 7910 - Clinical Externship** (1 credit repeatable to 4) *Prerequisite: Permission of the*
13 *instructor is required for enrollment in this course.* One day per week in a supervised field
14 experience, for a total of 120 clock hours per term.

15
16 **PSYC 7960 - Doctoral Dissertation in Psychology** (3 credits, repeatable to 12) By arrangement
17 with student's Primary Academic Advisor.

18
19 **PSYC 7980 - Pre-Doctoral Internship** (1 credit, repeatable to 3) Full-time clinical psychology
20 internship following the guidelines of the American Psychological Association and the American
21 Psychology Internship Committee. Must have approval of the Director of Clinical Training to enroll.
22

23 **PMNU 5303 – Psychopharmacology** (3 credits) *Prerequisites: Admission to the master's*
24 *nursing program or permission of instructor.* This course is designed to familiarize health
25 profession students with the basic principles of psychopharmacology and to explore medications
26 used to treat psychiatric disorders. The physiological basis of mental illness will be reviewed and
27 the pharmacologic, pharmacodynamic principles of medications used in mental health care
28 examined.

29
30 **PHYT 6102 - Pathophysiology** (4 credits) This course includes a survey of the clinical signs,
31 symptoms, and etiologies of the major diseases of all systems of the human body. Principles of
32 diseases affecting the different organ systems with clinical relationships in physical therapy are
33 studied. (spring)

34 35 **Electives**

36
37
38
39 **PSYC 7300 - Mental Health Care Consultation/Administration** (3 credits) This course focuses
40 on health policy and health care functioning as it applies to mental health services and integrated
41 primary care with specific focus on the roles of the psychologist as health care administrator and
42 consultant. Sociopolitical features of the health care system, the role of primary care in our current
43 health care system and differences from the mental health system, and similarities and differences
44 in various primary care settings are included.
45

1 **PSYC 7400 - Family Psychology** (3 credits) This course addresses processes that take place in
2 families and other close relationships. Emphasis is placed on evaluating current research on
3 family dynamics within and across generations and on the application of research findings to
4 assessment of family dynamics in clinical settings.

5
6 **PSYC 7410 - Advanced Child Psychopathology** (3 credits) This course is an advanced course
7 in psychiatric disorders of childhood and adolescence. Focus is not only on diagnostic criteria
8 used in identifying these disorders, but on normal and abnormal development models. Methods of
9 assessing childhood behavior problems, including clinical interview of child and parent, parent and
10 child checklists, and structured observation are covered, as well as the most effective treatment
11 strategies.

12
13 **PSYC 7420 - Substance Abuse Psychology** (3 credits) This is an advanced course covering
14 theoretical perspectives, research, and psychological treatment of substance abuse.

15
16 **PSYC 7450 - Group Psychology** (3 credits) *Prerequisites:* PSYC 6870 . The primary purpose of
17 this course is to cover key concepts in assessment of group processes and group intervention
18 strategies and to provide the student with skills in group intervention. The course assumes
19 background in evidence-based psychological interventions.

20
21 **PSYC 7550 - Community Assessment and Intervention** (3 credits) This course covers key
22 concepts in clinical community and health psychology with particular focus on assessment of
23 community mental and behavioral health issues and design and evaluation of interventions which
24 improve health and prevent disorders in general and special populations. Particular attention will
25 be paid to rural communities and how assessments and interventions can be tailored to fit cultural
26 and social contexts.

27
28 **PSYC 7770 - Diversity in the Psychological Sciences** (3 credits) This course takes a
29 psychological approach to diversity, and is designed to delve into psychological theories and
30 research that describe the influence of diversity on individuals.

31 32 **Additional Matriculation Requirements and Training Experiences**

33
34 Students are referred to the *ETSU Graduate Catalog* for academic requirements of the
35 School of Graduate Studies (<http://www.etsu.edu/reg/catalog/graduate.aspx>) which, among other
36 criteria, specifies that students must maintain at least a 3.00 average to remain in good academic
37 standing.

38 Specific departmental requirements also apply. All students in the MA/PhD program are
39 expected to be enrolled as full-time students and to devote themselves full-time to their graduate
40 pursuits during their enrollment in degree-related activities. Students are expected to be active in

1 research collaboratively with members of the department faculty each semester they are enrolled.
2 In addition to coursework and research, students are required to participate in clinic and field
3 experiences commensurate with their level of training and type of graduate assistantship. Please
4 see Appendix A for Benchmarks for Matriculation Progress.

5 **Integration of Science and Applied Practice**

6
7 ETSU's clinical psychology program is guided by the scientist-practitioner model, known as
8 the Boulder Model (APA, 1949) and places a strong emphasis on inter-professional clinical
9 training and evidence-based practice. Though diverse in respect to methods of inquiry and areas
10 of study, the faculty is of one mind in promoting scientific inquiry as the foundation of clinical
11 psychology. The primary mission of the articulated master's/doctoral program in Clinical
12 Psychology at ETSU is to provide training in clinical psychology emphasizing rural behavioral
13 health and practice in the context of integrated primary health care. Following the 'Boulder' model,
14 we believe firmly that professional psychology must be well-rooted in the science of psychology
15 and that the scientific method must inform the practice of psychology. Gaining competence as
16 both scientist and practitioner demands a commitment to full time study, in a sequential and
17 cumulative course of training wherein science and practice are integrated throughout in
18 requirements that are sequential, cumulative, and graded in complexity. The foundational broad
19 and general courses build to substantive master's level coursework, to doctoral-level substantive
20 courses, with elective specialty courses occurring late in the program of study. Applied clinical
21 components build from *Clerkship*, which emphasizes shadowing psychologists in primary care to
22 *Practicum*, which is on-campus clinical training to *Externship*, which is community-based clinical
23 training, to *Internship*, one or two full-time years of advanced clinical training away from the
24 University. Thresholds for minimum achievement of clinical competencies reflect expected
25 developmental growth in both breadth and depth of knowledge and skills demonstrated. Scientific
26 application builds from the master's thesis to the preliminary project to the dissertation with
27 increasing methodological sophistication and independence being required to advance from one
28 level to the next.

29 The matriculation table below provides an overview of didactic and applied matriculation
30 requirements and shows how they are sequential and cumulative and reflective of the scientist-
31 practitioner training model.

Matriculation Table and Narrative

Semester/ Year	Didactic: Science	Didactic: Clinical	Application: Science	Application: Clinical
Fall Year One	PSYC 5210 Statistical Methods	PSYC 5100 Legal and Ethical Issues in Psychology	Identify thesis Chair /Primary Advisor	Participation on Clinic Vertical Team
		PSYC 5870 Clinical Interviewing Techniques	Generate thesis idea	BHWC Duty
12 hrs		PSYC 5825 Psychopathology		
Spring Year One	PSYC 5410 Correlation and Multiple Regression	PSYC 5220 Personality and Psychotherapy Models	Identify thesis Chair /Primary Advisor	PSYC 5910 Clinical Psychology Clerkship 1
	PSYC 5040 Rural Health Research and Practice		Develop thesis idea/ Literature	Participation on Clinic Vertical Team
13hrs	PSYC 5000 Broad and General Foundations in Psychology			BHWC Duty
Fall Year Two	PSYC 5960 Thesis	PSYC 6870 Evidence-Based Interventions	Propose thesis	PSYC 5910 Clinical Psychology Clerkship II
	PSYC 5010 Advanced History and Systems	PSYC 5830 Psychological Assessment I: Adults	Thesis research	BHWC Duty and Clinic Vertical Team
13 hrs				Pass Section I Competencies
Spring Year Two	PSYC 5707 Advanced Behavioral Neuroscience	PSYC 5850 Psychological Assessment II: Children	Defend Thesis	Practicum at BHWC

	PSYC 5960 Thesis	PSYC 7010 Clinical Practicum and Seminar	Identify Prelim/Dissertation Comm.	Clinic Vertical Team
				Pass Clinical Capstone
10 hrs				Pass Practicum Competencies
Fall Year Three	PSYC 7100 Primary Care Psychology	PSYC 7010 Clinical Practicum and Seminar	Preliminary Project	PSYC 7910 Clinical Externship
	Psychopharm or Pathophysiology	PSYC 6600 Rural Case-Oriented	Present/Publish Thesis	Practicum
10-13 hrs	PSYC 7000 Doctoral Preliminary Project		Doctoral Candidacy	Clinic Vertical Team
Spring Year Three	Psychopharm or Pathophysiology	PSYC 7110 Primary Care Psychology II	Develop Dissertation Idea	PSYC 7910 Clinical Externship
		PSYC 7010 Clinical Practicum and Seminar		Practicum and Seminar
	Or Elective Courses			Clinic Vertical Team
Fall Year Four	Elective Courses	PSYC 7500 Cultural Anthropological Application to Rural Practice	Propose Dissertation	PSYC 7910 Clinical Externship
9+ hrs	PSYC 7960 Dissertation	PSYC 7010 Clinical Practicum and Seminar	Publish or Submit Prelims	Practicum
				Clinic Vertical Team
				Pass Pre-Internship Competencies
Spring Year Four	Elective Courses	Elective Courses	Dissertation Research	PSYC 7910 Clinical Externship
	PSYC 7960 Dissertation	Practicum and Seminar		Practicum
				Clinic Vertical Team: Supervisor
Three terms, Year Five	PSYC 7960 Dissertation, if needed		Defend Dissertation	PSYC 7980 Clinical Internship
1 up			Publish Dissertation	

1
2 In the 1st year, while taking foundational coursework and while establishing research
3 affiliations with faculty, students participate in their first of two semesters of *PSYC 5910 Clinical*

1 *Psychology Clerkship*, which places them as observers in a primary care setting one-half day per
2 week. Every semester, students also have a role in the department's Behavioral Health and
3 Wellness Clinic through participation in the office, as observers, and on vertical training teams.
4 First-year students also have regular meetings with the clinic director in which they are taught
5 legal requirements and standards of good practice as part of their pre-practicum requirements.
6 Early in the 1st year, students are expected to identify a Primary Academic Advisor, who serves as
7 their research mentor, and to begin development of a research question that will quickly evolve
8 into a thesis project.

9 In the 2nd year students propose the thesis which should be formally defended in the spring
10 of the 2nd year. **Students must successfully propose their thesis project in order to qualify
11 for enrollment in PSYC 7010 Practicum and Seminar.** They complete their second semester of
12 *PSYC 5910 Clinical Psychology Clerkship*, which is more individualized than the first, but
13 continues to expose them to psychologists and other health care professionals in community
14 settings. One requirement of the *Clerkship* courses is that students participate in a weekly faculty-
15 led cohort seminar for discussion of their experiences and assigned readings. They continue to
16 participate on vertical teams and meet with the clinic director as a cohort in the Behavioral Health
17 and Wellness clinic fulfilling non-credit pre-practicum requirements. The minimum threshold for
18 advancement from Clerkship to Practicum is demonstrating minimum skills as defined in *Section I*
19 of the *Clinical Competencies* (Appendix D), along with passing the didactic elements of the
20 Clerkship course. In Year 2, students complete the master's curriculum, defend their theses, and
21 enroll in *PSYC 7010 Clinical Psychology Practicum and Seminar* for the first of five semesters;
22 this is the first semester of supervised service delivery at the on-campus training clinic where all
23 work is supervised by faculty affiliated with the program. Students must pass this *Clinical*
24 *Psychology Practicum and Seminar* to advance to *PSYC 7910 Clinical Externship*, which is
25 supervised community placement. The minimum threshold to advance from *Practicum* to
26 *Externship* is successful completion of the master's curriculum, including the thesis, *Clinical*
27 *Capstone Project* and demonstrating minimum skills at the Pre-Externship level *Sections II& III* of
28 the *Clinical Competencies*.

29 In the 3rd year, students begin doctoral coursework, complete the *PSYC 7000 Doctoral*
30 *Preliminary Project* and establish a dissertation committee. Successful defense of the *Doctoral*
31 *Preliminary Project* allows a student to move to *Doctoral Candidacy* and to register for *PSYC 7960*
32 *Dissertation*. Throughout the 3rd year, students are placed at externship training sites and continue

1 in the Behavioral Health and Wellness Clinic. Four semesters of community placement are
2 required via the *PSYC 7910 Clinical Externship* mechanism.

3 In the 4th year, students complete all didactic coursework. Proposal of the doctoral
4 dissertation is a requirement to apply for internship, so occurs no later than the first semester of
5 the 4th year. Nearing completion of the *PSYC 7010 Clinical Psychology Practicum and Seminar*
6 five-semester sequence, 4th year students have the opportunity to be peer supervisors for
7 beginning practicum students on the vertical teams. Fourth-year students are also completing
8 their last two required semesters of *Externship* and collecting dissertation data, which is
9 encouraged to be completed prior to beginning the *Internship* year. The minimum thresholds for
10 advancement from *Externship* to *Internship* include demonstrating minimum skill levels at the pre-
11 internship level in *Sections II & III* of the *Clinical Competencies*; completion of all coursework;
12 completion of the data-collection phase of the dissertation.

13 In the 5th year, students complete a full-time, 12-month internship, which is transcribed by
14 completing the course PSYC 7980 for Fall, Spring, and Summer semesters. Students are also
15 expected to attain minimum thresholds for achievement during the internship year. Specifically,
16 students are evaluated by internship supervisors at mid-year and end-year, using the *Clinical*
17 *Competencies* form and must demonstrate minimum skills at the Internship level *Sections I, II, III &*
18 *IV*. During the internship, students are preparing for their dissertation defense (if not done prior to
19 beginning internship) and or publication of the dissertation.
20

21 **Mission Specific Training in Primary Care and Rural Psychology**

22 Our training model emphasizes integrated rural primary care psychology. Thus, students
23 participate in inter-professional, rural-oriented, and/or primary care psychology courses each year
24 of matriculation. For example, the first-year *PSYC 5910 Clinical Psychology Clerkship*
25 incorporates a rotation in family medicine clinics; 1st year *PSYC 5040 Rural Health Research and*
26 *Practice* and *PSYC 5870 Interviewing Techniques in Psychology* are inter-professional in both
27 student and faculty composition. In the 3rd or 4th year, students take a medical anthropology
28 course emphasizing cultural competence in rural practice, *PSYC 7500 Cultural Anthropological*
29 *Applications to Rural Practice*. Also each student must complete *PSYC 7100 and PSYC 7110*
30 *Primary Care Psychology I & II* and *PSYC 6600 Rural Case-oriented Learning and Preceptorship*.
31 Each of these three courses requires that students make presentations to and consult with
32 practicing physicians and medical residents. Students must complete at least one semester of

1 *PSYC 7910 Clinical Externship* in a rural setting and one in a primary care setting, although one
2 placement may fulfill both requirements.
3

4 **Research Training Requirements and Research Support**

5 **Primary Academic Advisor**

6 All students must demonstrate increasing competence in research as they progress
7 through the program. This is accomplished not only through successful completion of relevant
8 coursework, but through the completion of research projects under the guidance of a faculty
9 advisor, including but not limited to Thesis, Preliminary Project, and Dissertation. Upon
10 admission, each student is assigned to an advisor who will supervise their first graduate
11 assistantship. We attempt to match students and faculty along research interests, but do not
12 require such matches for student admission because we believe that research interests develop
13 and evolve throughout graduate training. Thus, a student's initial advisor may not be the person
14 with whom a research relationship is established.

15 During the first year, students identify a Primary Academic Advisor who may or may not be
16 the initial advisor. The *Primary Academic Advisor* is defined by the Department of Psychology as
17 the faculty member who provides direct research supervision and mentorship during the course of
18 student's completion of the master's thesis, preliminary project, and doctoral dissertation. The
19 primary academic advisor also guides the student's program of study and selection of graduate
20 advisory committee. Because of the multiple settings in which graduate students find themselves,
21 it is incumbent upon the student and primary academic advisor to ensure that advisees accurately
22 and promptly complete and file all appropriate forms pertaining to a timely matriculation through
23 identified programs of study.

24 **Research Facilities**

25 A variety of resources are available to all graduate students when conducting research
26 during their training at ETSU. Each faculty member maintains an active research laboratory with
27 space for advisees. One important feature of the Clinical Psychology program is that it was
28 established with very close relationships to many supporting University and Medical School units
29 and facilities and community agencies. There is considerable integration of research capabilities
30 and agendas.

1 Institutional Review Board (IRB)

2 Any study, research, or investigation utilizing data collected from human participants
3 (directly or indirectly) by graduate students in the department must approved by the ETSU IRB
4 and approval documentation must be kept and available. Approval must be completed prior to the
5 commencement of the investigation and approved protocol must be adhered to rigidly, unless
6 modifications are submitted and approved by the IRB. The ETSU IRB also requires all persons
7 involved in research to complete the online CITI Training Program. The tutorial can be found at
8 the following website: www.citiprogram.org and relevant information is provided below.

9 Once approved by the IRB, the research to be conducted is recognized by ETSU and
10 subsequent steps in the research process may be followed. Additional information regarding the
11 correct forms and procedures to be followed may be obtained from the following website:
12 <http://www.etsu.edu/irb/>

13 First Time Users of CITI Training Program

- 14 1. Go to www.citiprogram.org and click on “ Register for the CITI Program”, then submit
- 15 2. Under ALL OTHERS, Choose “East Tennessee State University” and submit
- 16 3. Select your Username and Password, then submit. This is what you are going to use to go
17 in and out of the program
- 18 4. Fill out Registration Page, then submit information
- 19 5. Select your group (**IRB Members, see section B below**)and submit :
 - 20 Group 1- Biomedical not affiliated with VA
 - 21 Group 2- Biomedical affiliated with VA (ETSU/VA members)
 - 22 Group 3- Social and behavioral not affiliated with VA (ETSU Campus members)
 - 23 Group 4- Social and behavioral affiliated with VA
- 24 6. On the Learners Menu, click on “Basic Course (required; Status Incomplete)”
- 25 7. Complete the Required modules (top of page).
- 26 8. To get access to the optional modules (not part of required training unless requested), click
27 on “View the Grade Book” after completing the test on the last module. Scroll down. This
28 will give you all the score of the modules you have completed and give you access to the
29 optional modules.
- 30 9. Print the certificate by clicking on “Print a certificate of completion” after finishing the test on
31 the last module. This will trigger an email to the IRB, letting us know you completed the
32 training.
- 33
- 34
- 35
- 36
- 37
- 38
- 39
- 40
- 41
- 42

1 **And** complete: “The IRB Member Module-What every New IRB Member Needs to Know,” located
2 in the Optional Section. You can access this module after you have completed the required
3 modules for your group under “View Grade Book” (see # 8 above). After completing the required
4 modules and the IRB member module, then you can print a certificate.

5 **Resources and References**

6 The following are important and useful resources for all students involved in research:

7 American Psychological Association. (2009). Publication Manual of the American

8 Psychological Association (6th ed.) Washington, DC: American Psychological

9 Association Press.Cone, J. D. & Foster, S. L. (1993). Dissertations and Theses from Start to

10 Finish. Washington,DC: American Psychological Association.

11 ETSU Thesis/Dissertation Materials: http://www.etsu.edu/gradstud/forms/thesis_materials.asp

13 **Clinical Training Experiences**

15 **Behavioral Health and Wellness Clinic**

16 Students register for 5 semesters of PSYC 7010 Clinical Psychology Practicum and
17 Seminar beginning in the spring term of the second program year, or earlier if students enter with
18 a clinical master’s degree from another program, at the discretion of the faculty. However, each
19 semester of enrollment (8 semesters), students are involved in some manner in the practice of
20 clinical psychology, having a role in the Behavioral Health and Wellness Clinic (BHWC). The
21 experiences are sequential, cumulative, and graded in complexity in order to prepare the student
22 for community placement and then for internship and sound clinical practice, as follows:

24 Year 1 - Pre-Practicum – Not registered as 7010

- 26 • Fall 1 –
 - 27 ○ Provide basic clinic coverage – telephone and desk duties 4 hours per week and
 - 28 ○ Participate in 5 **group** meetings on BHWC and Professional Practice: Orientation to
29 Psychological Practice – Dr. Kerry Holland, Clinic Director
 - 30 ▪ HIPAA, Professional Communications, Record-Keeping
 - 31 ○ Vertical Team Meetings
- 33 • Spring 1 –
 - 34 ○ Provide basic clinic coverage telephone and desk duties 4 hours per week
 - 35 ○ Participate in 5 group meetings on BHWC and Professional Practice: Documentation:
 - 36 ▪ Intake Summaries
 - 37 ▪ CPT Coding and Billing issues– Dr. Kerry Holland
 - 38 ○ Clinic Director Community Placement, Family Medicine- PSYC 5910 Clerkship I

- Weekly observation of 3rd and 4th year students; 4th year student facilitates and processes
- Bi-weekly Vertical Team Meetings

Year 2 – Pre-Practicum and Practicum & Seminar

- Fall 2 - Pre-Practicum – Not registered for 7010;
 - Provide basic clinic coverage- telephone and desk duties;
 - Bi-weekly observation of 3rd and 4th year students; 4th year student facilitates and processes
 - Participate in 5 group meetings on BHWC and Professional Practice: Documentation:
 - Process and Psychotherapy notes
 - HIPAA, Ethical and Legal Refresher – Dr. Holland
 - Achieve Clinical Competencies, Section I in order to take Practicum 7010
 - Bi-weekly Vertical Team Meetings

- Spring/Summer 2 - Register for PSYC 7010, Clinical Psychology Practicum and Seminar
 - Intervention cases – 3 to 4 ongoing cases
 - Bi-weekly individual supervision with 4th year student supervisor
 - Bi-weekly Vertical Team Meetings
 - Bi-Weekly Group Seminar on Professional Issues – Dr. Peggy Cantrell, DCT
 - Diagnostic assessment/Goal Settings/Treatment Planning/Psychotherapy Processes
 - Individual and cultural differences in psychotherapy
 - Ethical Dilemmas
 - **Achieve Clinical Competencies to be approved for Externship placement Year 3**

Year 3 - Register for PSYC 7010, Practicum (1 hr) and PSYC 7910, Externship (1hr)

- Fall 3 - BHWC combined with Community Placement
 - Intervention case assignments – 2 to 3 ongoing cases**
 - Assessment cases on rotation; 3rd priority
 - Observed by first and second year students
 - Weekly individual supervision with faculty
 - Bi-weekly Group Seminar on Professional Issues - Dr. Cantrell
 - Psychotherapy Processes; HIPAA, Ethical and Legal Refresher
 - Individual and Cultural Issues : Primary Care and Rural emphasis
 - Community Placement one to two days per week - PSYC 7910 Externship
 - Bi-weekly Vertical Team Meetings

- Spring/Summer 3 - BHWC combined with Community Placement
 - Intervention case assignments – 2 to 3 ongoing cases**
 - Assessment cases on rotation; 2nd priority
 - Individual supervision with faculty
 - Observed by first and second year students
 - Bi-Weekly Group Seminar on Professional Issues - Dr. Cantrell
 - Community Placement one to two days per week - PSYC 7910 Externship
 - Bi-weekly Vertical Team Meetings

Year 4 - Register for Practicum 7010 and Externship 7910

- Fall 4 - BHWC combined with Community Placement
 - Intervention case assignments – 1 to 2 ongoing cases**
 - Assessment cases on rotation; 1st priority
 - Individual supervision with faculty

- Observed by first and second year students
- Weekly Group Seminar – Supervision/Peer consultation Didactics – Dr. Cantrell
- Community Placement one to two days per week - PSYC 7910 Externship
- Bi-weekly Vertical Team Meetings
- **Achieve Clinical Competencies to be approved for internship application process**

- Spring/Summer 4 - BHWC combined with Community Placement
 - Supervision Training: Applied - Provide Supervised Supervision for 2nd yr. students
 - Individual supervision , as needed based on continuation of cases
 - Observed by first and second year students
 - Weekly Group Seminar - Supervision of Peer supervision/consultation: Applied
 - Specialty clinic cases OR ASSESSMENTS IN SPECIALTY CLINICS, based on individual goals
 - Community Placement one to two days per week - PSYC 7910 Externship
 - Bi-weekly Vertical Team Meetings

Year 5 – Optional

- Provide Supervised Supervision
- Intervention case assignments – specialty clinic cases OR ASSESSMENTS IN SPECIALTY CLINICS
- Participate in group seminars
- Individual supervision if providing direct services

Vertical Teams

The vertical team is a key element that crosses all levels of training experience, allows students at all levels to interact and learn from one another, and ensures that students' off-campus experiences remain connected to the program. It also provides students with a forum to discuss clinical training issues. Each faculty supervisor leads a vertical team of students. Included in the vertical teams are pre-practicum students, as well as students with varying degrees of in-house practicum and externship experience. Students participate in bi-weekly vertical team meetings during which topics relevant to clinical training and practice are discussed. Formal case presentations are also part of the vertical team experience.

** Case load represents a minimum caseload in BHWC. Case load may be increased based on type of community placement, i.e., 20 hours or 10 hours and training needs of student.

Community Placements

Students complete a minimum of 24 months of *Externship*. We currently have clinical affiliation agreements for 16 positions at 13 sites within the region. The list of sites, including types

1 of clients, is provided in Appendix F. Most are paid graduate assistantships with stipends and
2 tuition remission consistent with the department-funded GA's, though students in research-based
3 GA's have the option of seeking and obtaining unpaid placements. Paid placements require 20
4 hours commitment per week while unpaid placements require 10 hours commitment per week.
5 Externship contracts are for 12 months. Each site ensures face-to-face, on-site supervision with a
6 licensed clinical psychologist at least one hour per week, plus on-site consultation/supervision with
7 other practicing mental health or health professionals per the focus of the placement. Sites
8 provide for supervision whether or not placements are paid. Site supervisors have no more than
9 three student supervisees.

10 All externship sites are firmly committed to training, and provide training to students in
11 related disciplines (social work, counseling, medicine) or to medical residents or pre-doctoral
12 psychology interns. Our partnerships with some affiliate sites have been longstanding. For
13 example, principals from several sites participated in a series of community-based workshops we
14 hosted when we initially developed our curriculum and identified the core competencies needed
15 for psychologists practicing in rural behavioral health and primary care settings (e.g., Cherokee
16 Health Systems and Frontier Health).

17 The quality of the externship sites is ensured through at least five mechanisms. First, our
18 clinical affiliation agreements specify student, program, and site responsibilities. Second, the DCT
19 and Assistant DCT maintain personal and open communication with each site supervisor, and visit
20 each site at least once per placement cycle, typically at the beginning of each placement cycle.
21 Third, throughout their community placements, students remain under direct program faculty
22 supervision via the course PSYC 7010 Clinical Psychology *Practicum and Seminar*, as well as
23 through their participation in vertical teams. Fourth, students rate each site supervisor and
24 placement experience with respect to the program's training goals and objectives. Fifth and
25 finally, supervisors rate their placement's emphasis on each program goal and objective, ensuring
26 their awareness of the program's training goals. Students must complete a minimum of four
27 semesters of *Externship* and must achieve clinical competencies as defined and measured on the
28 Clinical Competencies Form, Appendix D to be eligible for *Internship*.

Major Benchmarks

Empirical Thesis

The choosing of a Thesis Chair and Committee by the student is a very important process that should be based upon a careful consideration of the student's interests and the research expertise of the faculty members. After gaining some familiarity with the issues in the field and with the faculty members' areas of expertise, the student will be encouraged to begin development of a thesis topic, no later than 24 semester hours into the student's course of study, so that the thesis becomes the final step in an integrated learning experience. The Thesis Committee will be composed of three members of the graduate faculty, one of whom may be from outside the Department of Psychology. The Committee chairperson must be a full-time member of the faculty of the Psychology Department.

Students entering the program who have already completed a master's thesis must have that thesis accepted by their three member faculty advisory committee. The student is responsible for submitting a copy of the thesis to the DCT for dissemination. The thesis is to be submitted, reviewed, and either accepted or rejected during the student's first semester of study to allow adequate time for a new thesis project to be conducted if required. In any case, the student will complete the written and oral components of the clinical capstone project and preliminary project prior to being admitted into doctoral candidacy.

Students in Master's programs at ETSU are required to maintain continuous registration (each fall and spring semester) for Thesis until work is completed, even after they have defended their proposal, and must be so registered during the semester of graduation. If graduation is in August, the student must be registered for a summer session. Students conducting research or utilizing university resources must be registered even during the summer sessions.

General Policies about Theses in the Psychology Department:

1. Thesis Committee chairpersons will be full-time psychology faculty.
2. The committee will be composed of at least three members of the graduate faculty, and at least two members will be from the Psychology Department.
3. Once a thesis committee has been formed, any change in committee membership should be discussed with all involved parties; the graduate school committee form must be amended if changes are made. It is the student's responsibility to see that the formal changes are made.

- 1 4. File a graduate school committee form with the DCT.
- 2 5. Faculty reserves the right to decline to serve on Thesis Committees. If a student has
3 difficulty finding faculty to serve or must replace a committee member, the DCT will provide
4 assistance.
- 5 6. Thesis defenses are expected to be:
 - 6 a. Announced (time & place) to Psychology faculty and graduate students two weeks
7 ahead of time. Notify the DCT and post a notice on the clinical psychology bulletin
8 board, the graduate lounge, and on the "Psychtalk" listserv. Make a copy of thesis
9 abstract available for review;
 - 10 b. Open to all members of the university community;
 - 11 c. Judged according to a reasonable standard of rigor;
 - 12 d. Evaluated on a pass/fail vote by the Thesis Committee members;
 - 13 e. Restricted to a maximum of two occasions. A second failure results in termination
14 from the program.
- 15 7. After a successful defense, the student should get all forms signed and submitted. It is the
16 student's responsibility to bring to the thesis defense the following forms to avoid delays in
17 securing signatures:
 - 18 a. Report of Comprehensive Examination and Thesis Defense - All committee
19 members must sign the form. Dates for passing the Thesis Defense must be shown.
20 See Appendix B for relevant Graduate School Forms;
 - 21 b. Manuscript approval and electronic submission forms
- 22 8. Specific guidelines on the, layout, electronic submission, and deadlines for presenting the
23 final copies of the thesis to the Graduate School are available in the Graduate School.
24 Basic Requirements for Electronic Submission of Theses and Dissertations (January 2000)
25 are available from the graduate school, and on their web site ([http://etd-
26 submit.etsu.edu/index.html](http://etd-submit.etsu.edu/index.html)). The graduate school conducts workshops on thesis
27 manuscript preparation, forms and deadlines each semester. These are very useful and
28 students are encouraged to attend.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31

The Thesis: Practical Considerations

1. "Thesis" is broadly defined. Faculty members are willing to consider a wide range of options for a thesis. Projects such as meta-analyses, organizational interventions, case studies, and experimental laboratory work, could all be considered appropriate, but must be empirical in nature, not just a theoretical or literature review paper. The thesis should make a contribution to psychological knowledge or practice.
2. Topic selection. Students should begin talking about their research ideas early. As early as the first semester, students should begin to think about potential thesis topics. Approach faculty members with interests similar to yours to learn more about their research. Begin to review related literature. Faculty members are generally happy to talk with you about thesis ideas, even when the ideas are rather vague and undefined. You may wish to do an independent research under a faculty member to help you focus.
3. Use care in selecting a thesis committee. Students can tentatively select a committee, solicit feedback from potential committee members, and gain informal approval of a specific topic even before formal committee assignments are finalized. Participation by faculty throughout the department is encouraged.

Students typically find a thesis chair in one of several ways. One way is to develop a thesis out of research that you have done with a faculty member and have that person serve as chair. Another way is to develop a relatively more independent idea of thesis and find a faculty member who has similar interests (see Faculty Listing in this Handbook) who may agree to be chair. A third way is to have the thesis evolve from a project in a prior class. If this is the case, then the person supervising you on the project often is willing to become chair. Do not get too far along with the thesis idea before contacting other potential committee members. Members want to have input, and if the thesis is already designed, or worse, data are collected, their input is precluded. Check with potential members to see what role they wish to play during the process.

Faculty members are not required to serve on committees when they are asked. If a faculty member chooses not to serve on your committee because of other time commitments, low interest in the topic or other reasons, don't take it personally – find someone else.

1 If you want a faculty member to be on your committee, make your wishes clear. Make
2 sure you get a definite answer before you assume that the person will serve on your
3 committee. One way to get a definite answer is to ask the faculty member to sign the
4 Committee Record Form. Some faculty members do not wish to commit to serve on a
5 committee until a written draft of your idea is presented.

6 To select a committee, it is good to talk to several faculty members about your ideas to
7 see if they can be helpful and have interest in your ideas. Then ask a faculty member that
8 you know and trust to serve as your chair. Seek the chair's advice before you ask other
9 faculty members to serve on your committee to make sure that the committee is
10 compatible. You don't want your thesis to be stuck in the middle of a philosophical debate
11 about how research should be conducted.

- 12 4. There are no fixed roles for committee members. Some faculty prefer that the chair be
13 primarily responsible for reading and revising drafts while others desire more active
14 participation from the full committee. Clarify committee roles up front!
- 15 5. Clear communication of expectations about roles, scope, content, etc., is important.
16 Students, chairs, and committee members need to define expectations thoroughly, starting
17 with early discussions of thesis.
- 18 6. Consensus should be built before major meetings. Before a proposal meeting or a defense,
19 make sure that your chair has seen and made comments on one or several drafts and
20 agrees that it is time for a meeting. Arrange a time, making sure that your committee has
21 ample opportunity to carefully read your paper before the meeting. Allow time to make an
22 appointment with each committee member to discuss the paper before the meeting. Find
23 out if there are any concerns that they have or things that need to be cleared up. Be
24 prepared to address these at the meeting. If there are significant concerns, delay the
25 meeting until they can be resolved. The proposal meeting is the final opportunity to reach
26 consensus, and in some cases more than one meeting may be necessary to do so.
 - 27 a. File a Thesis Committee Record Form with the departmental executive aide;
 - 28 b. File an Admission to Candidacy Form with the departmental executive aide;
 - 29 c. File an Application for Graduation with the departmental executive aide.
- 30 7. Approval of the proposal is an implicit contract. The faculty are agreeing that if the student
31 diligently and professionally completes the work in the proposal and satisfactorily analyze
32 the results and conclusions, that they will consider the project to be an adequate thesis.

1 The student is agreeing to carry out the work as proposed. Both parties agree that there
2 should be no major changes after approval of the proposal.

- 3 8. Students should keep committee members informed of progress. Some chairs and
4 committee members expect to follow the progress of the thesis very closely. Others,
5 particularly non-chair members, do not expect intermediate reports. Clarify expectations,
6 and tailor the frequency of meetings with individuals or the whole committee to student and
7 faculty needs. If you wish to receive feedback from committee members regarding
8 something you have written, don't expect it for two weeks (sometimes, e.g. summers,
9 people may need even more time). You may get it back sooner, but plan for two weeks.
10 This includes "last-minute" revisions when you are fighting deadlines. Plan ahead.

11 Before you turn in something to be read, go over it thoroughly for typos and grammatical
12 errors. That way the committee member can focus on content without being distracted.
13 When you make revisions and would like your committee to read them, provide the
14 previous copy upon which such comments were made. This helps speed up review.

15 Try very hard to accept comments about your work gracefully, since they are meant to
16 help you produce a better thesis. Use the feedback as an opportunity to take a fresh look at
17 you work rather than see it as a personal attack.

18 If more than a week passes since the last time you have talked with committee
19 members about your thesis, begin the discussion by briefly telling what the thesis is about
20 and recapping what was discussed at the last meeting. It is much more "present" on your
21 mind than on theirs.

22 If you begin work on a thesis and then foresee a period of time (say, a month or more)
23 during which you are not going to be working on it, let your committee know (especially
24 your chair and anyone who has been especially helpful). This helps them plan their time
25 and may help sustain their interest.

- 26 9. Watch deadlines. Many students find themselves fighting deadlines, wanting to get their
27 thesis completed just in time for graduation. Make note of the deadlines for submitting the
28 finished thesis to the graduate school. Then plan on a defense allowing plenty of time for
29 post-defense revisions which may take several rounds of feedback. Trying to rush things
30 through is generally not a good idea. At the end of the semester faculty also tend to be
31 busy and may not be able to respond quickly. Allow yourself plenty of time, and recognize
32 that doing it well is more important than doing it quickly. Even with valiant efforts, you may
33 miss a deadline and have to take more time.

- 1 10. Remember—that which can go wrong, will. Assume that your printer will jam and your disks
2 will self-destruct, especially when you are in a time crunch. Make contingency plans and
3 back up your disks.
- 4 11. After gaining the chair's approval of the final draft, students should schedule a defense.
5 Give a copy to the committee members three weeks before the date of the defense.
6 Publicly announce the defense which should occur at least one week before the beginning
7 of the final exam period.
- 8 12. Check with your committee chair about bringing food to your proposal and defense
9 meetings. Some believe that it helps set a positive tone. Others strongly believe you
10 should not bring food, because it can detract from an independent evaluation of your work
11 and compromise the integrity of the process of judging your work on its merit--not your
12 hospitality skills. After you've passed it is clearly a good time to celebrate and show
13 appreciation.
- 14 13. Faculty may not be available during summers. There is no formal expectation that faculty
15 will remain involved in thesis work at times when they are not under contract. Clarify with
16 the chair and committee members their availability during the summer. If faculty are willing
17 to help during the summer, remember that they are doing it as a favor (they do not get
18 paid for this during the summer)
19

20 **Master's Clinical Capstone Project**

21 **Purpose**

22 The Master's Clinical Capstone Project is used to: a) assess the student's clinical and
23 ethical competencies; and, b) assess the student's ability to integrate and synthesize core
24 knowledge in the field. The Master's Clinical Capstone Project may be considered the capstone
25 or finalization of the Master's degree.

26 The Pre-doctoral Preliminary Examination Project is used to: a) determine the student's
27 preparation and readiness for independent, Dissertation research; and, b) assess whether the
28 student has developed analytical, problem-solving, and critical thinking abilities at a level befitting
29 doctoral candidacy. The successful completion of the Preliminary Examination Project may be
30 considered as the initiation of Doctoral Candidacy.
31

1 **Timing of Clinical Capstone Project**

2 In order to sit for the Clinical Capstone Project, the student must have the written approval
3 of her/his Thesis Committee Chair; this is obtained via completion of the *Request to Sit for Clinical*
4 *Capstone Project* form. Approval will be granted only after the student has successfully
5 completed 36 hours of the Master's curriculum and successfully defended his/her Thesis;
6 however, approval of the Clinical Capstone Project, committee, and designation of a clinical
7 supervisor may be sought concurrent with thesis development and prior to the thesis defense.
8 The Clinical Capstone Project Chair may consult with other faculty members in evaluating the
9 candidate's readiness. Ordinarily, a student making adequate progress would not be expected to
10 complete the Clinical Capstone Project until the spring or summer of the second year in the
11 program. Students entering the program with a Master's degree in-hand, and whose Master's
12 thesis has been accepted by the clinical faculty, should submit a request to begin the Clinical
13 Capstone Project to the Chair of his/her Thesis Committee at his or her earliest opportunity. As a
14 "rule of thumb," soon after the Thesis proposal the student and Clinical Capstone Project Chair
15 should decide on a clinical case and committee for the Clinical Capstone Project. When
16 appropriate, the Clinical Capstone Project Chair may act as a consultant, and may defer selection
17 of a clinical case and/or supervision of the case conceptualization to a clinical supervisor. A
18 suggested, and often necessary, deadline for completion of the Clinical Capstone Project, in order
19 to maintain adequate progress toward matriculation, is August 1st prior to the beginning of a
20 student's 3rd year in the program, though earlier is better in order to be eligible for the broadest
21 array of graduate assistantships in the 3rd year.

22 Funded externship stipends are predicated upon the assumption of completion of all
23 Masters' requirements. In addition, external placement sites have their own guidelines for
24 acceptance and credentialing students. If a student has not met the Thesis or Clinical Capstone
25 Project requirements for completion of the Masters' degree, a student may petition the Clinical
26 Faculty to be granted an externship placement for a probationary period of one semester,
27 contingent upon successful completion of at least one semester of practicum and demonstrated
28 progress on the Thesis and Clinical Capstone Project. The opportunity for probationary
29 placement cannot be guaranteed. Stipends for probationary placements will be significantly
30 reduced, if available at all.

Formation of Clinical Capstone Project Committees

The Clinical Capstone Project Committee is composed of three faculty members, all of whom must be full-time, tenured or tenure-track faculty members holding at least temporary ETSU Graduate Faculty status. Of these three, two must be designated clinical psychology faculty; the third committee member may be a clinical or non-clinical faculty member from the Department of Psychology. A fourth Committee member may be added for consultation or as a clinical supervisor, if necessary, and may be from the Department of Psychology, or another school/college in the University, and should also be a full-time, tenured or tenure-track faculty member with an earned doctorate in a health service field, or a health professional or service provider with a terminal degree in their field, and at least temporary membership in the graduate faculty. The Clinical Capstone Project Chair should be indicated. Once the Clinical Capstone Project process has begun, changes to the composition of committees are discouraged except under extraordinary circumstances. There may be instances in which a student, a faculty member or the Clinical Committee, either solely or by mutual agreement, decides that a change to a student's Clinical Capstone Project committee is necessary (e.g., a consultant needs to be added; a faculty member should be recused or removed; or, a student or faculty member decide that they are no longer able to work together professionally). Any such instances will be brought to the attention of the Clinical Committee and must be approved in writing by the student, Clinical Capstone Project Chair and the DCT.

Further, although it may be desirable for the Thesis Chair to also be the Clinical Capstone Project, there could be instances when a student's Thesis Chair does not have the direct knowledge, experience or training needed to adequately supervise the development of a conceptualization for a student's selected case. In such a situation, it may be advisable to add a fourth committee member, a clinical supervisor, to the Clinical Capstone Project Committee. As such, it is possible that the Thesis Chair may be on the Clinical Capstone Project Committee, but may not necessarily be the Clinical Capstone Project Chair.

Master's Clinical Capstone Project Guidelines

The Master's Clinical Capstone Project will be in the form of a written clinical case presentation, followed by an oral defense of the case presentation. Both elements of the case presentation will require: 1) the integration of case/client background and history; 2) symptoms

1 and presenting problems; 3) diagnostics and assessment; 4) theoretical framework, which
2 includes at least two alternate theoretical conceptualizations; 5) treatment considerations,
3 including evidence based approaches; 6) treatment plan, including short, mid-range, and long-
4 term goals; 7) individual and cultural differences; 8) ethical issues and, 9) outcome information
5 and assessment. The clinical student will need to evidence at least basic curriculum-based
6 competencies in these areas. The written component of the Clinical Capstone Project should not
7 exceed 20 pages in length exclusive of title page, abstract, references or appendices.

8 A formal proposal meeting is not required for the Clinical Capstone Project. The
9 appropriate clinical case to be analyzed will be selected by the student in collaboration with her or
10 his Clinical Capstone Project Committee Chair with assistance from a clinical supervisor, as
11 appropriate. In some instances, this may be an existing therapy case, a text or journal-based
12 case, an ongoing practicum or clerkship case, a group-level case, a hypothetical case, a video
13 vignette, etc., depending on the clinical experiences or particular needs of the student.

14 As stated above, for students' making adequate progress, completion of the Clinical
15 Capstone Project will occur ideally at the end of the Spring or Summer of the second year of the
16 program. Failing to complete Clinical Capstone Project prior to Spring of the third year of the
17 program is a marker of inadequate progress in the program.
18

19 **Oral Defense of Clinical Capstone Project**

20 The student, upon completion of the written Clinical Capstone Project case will be required
21 to orally defend their work. The purposes of the Oral Defense are: 1) to extend the evaluation of
22 the student's knowledge and understanding of clinical subject matter covered in the written Clinical
23 Capstone Project (emphasis may be placed on topics in which the student's responses are judged
24 to be weak); 2) to evaluate the student's knowledge and understanding of related clinical subject
25 matter not included in the written Clinical Capstone Project; and, 3) to evaluate the student's ability
26 to respond, in a scholarly and professional manner, to a variety of verbal inquiries.
27

28 **Passing/Failing Clinical Capstone Project**

29 A majority of the Committee members must deem the student's performance to be
30 acceptable, and to have demonstrated at least minimal competence, on each part of the Exam for
31 the student to pass. Failure of an attempt of either Clinical Capstone Project component (Written

1 and/or Oral) is considered final (that is, no opportunity for remediation of the current examination
2 is available). A student who fails any part of the Clinical Capstone Project will be required to
3 retake each failed component. The portions of the exam to be retaken may be done so no later
4 than one calendar year after the original exam. Failure of any component of the Clinical Capstone
5 Project a second time will result in dismissal from the program. At the first round of the Clinical
6 Capstone Project, the Committee will determine whether a student has obtained a FULL PASS,
7 CONDITIONAL PASS, or FAILURE.

8 The Clinical Capstone Project will be considered fully passed if all three Committee
9 members assign the student a passing evaluation of both the written and oral components.

10 A Conditional Pass may be granted, and occurs when at least two Committee members
11 have assigned Full Passes, with the third assigning a Conditional Pass or a Fail. If the student
12 obtains a Conditional Pass in any first-round component, Committee members will communicate,
13 in writing, the nature of the remedial measures required to the student, the Clinical Capstone
14 Project Committee Chair, and the DCT. The remedial measures then must be completed to the
15 satisfaction of the majority of the Committee for a Conditional Pass to be revised to Full Pass
16 status.

17 A component will be considered failed if at least two Committee members have assigned a
18 Fail, regardless of whether a third committee member has assigned a Full Pass, Conditional Pass
19 or Failure. Failure of either the written or oral component of the Clinical Capstone Project may be
20 grounds for dismissal from the Clinical Program. In the event that a student is assigned a FAIL by
21 two faculty members, or in the instance of a serious failure (e.g., failure by all committee
22 members; severely deficient and/or unethical work) on any first round component, the Committee
23 will convene to consider whether the student will be allowed to retake the Examination.

24 In cases where the Committee is in agreement that academic or clinical remediation will
25 improve the Clinical Capstone Project performance and/or products, a single opportunity for
26 remediation may be granted. The Director of Clinical Training will notify the student, in writing, of
27 the decision and the remedial measures required, if any. The second round Clinical Capstone
28 Project (if administered) will be graded as either PASSED or FAILED. A failure on either
29 component during the second round will result in the student's dismissal from the Ph.D. program
30 in Clinical Psychology.

31 Students will be provided with the final outcome of the pass/fail voting of the committee as
32 a whole. That is, individual committee member votes will remain confidential. Documentation

1 including committee signature and scoring forms, and the Clinical Capstone Project written
2 product will be maintained in the student's permanent record.
3

4 **Doctoral Preliminary Examination Project**

5 **Purpose and General Information**

6 The Pre-doctoral Preliminary Examination Project is used to: a) determine the student's
7 preparation and readiness for independent, Dissertation research; and, b) assess whether the
8 student has developed analytical, problem-solving, and critical thinking abilities at a level befitting
9 doctoral candidacy. Successful completion of the Preliminary Examination Project may be
10 considered as the initiation of Doctoral Candidacy.

11 In order to be eligible to begin the Preliminary Examination Project, the student must have
12 the written approval of her/his Preliminary Examination Project Committee Chair. Students
13 become eligible for enrollment in Preliminary Examination Project (PSYC 7000) after successfully
14 completing all requirements for the Master's degree, including successful defense of the Thesis
15 (and, for clinical students, passing the Clinical Capstone Project). For experimental students, the
16 Preliminary Examination Project Proposal will occur in the summer of their second year or fall of
17 the third year in the program and the final Preliminary Examination Project will be due in the fall or
18 spring of the third year. For clinical students, the Preliminary Examination Project Proposal will
19 occur in the Fall of the third year in the program (after passing the Clinical Capstone Project) and
20 the final Preliminary Examination Project will be due in the Spring of the third year. Eligibility for
21 the Preliminary Examination Project for students entering the program with a Master's degree in-
22 hand will be determined by a departmental committee. Students in this situation should consult
23 with their Preliminary Examination Project Committee Chair.
24

25 **General Policies about Preliminary Projects:**

- 26 1. Preliminary Project Committee chairpersons will be full-time psychology faculty with
27 appropriate graduate faculty status.
- 28 2. The committee will be composed of at least four faculty members, all of whom must be full-
29 time, tenured or tenure-track faculty members, with an earned doctorate or a terminal degree in
30 their fields, and holding at least temporary ETSU Graduate Faculty status. Of these four, at least
31 two must be designated experimental/clinical psychology faculty (depending on concentration),
32 and at least one must be designated the alternate concentration within the Department of

1 Psychology. A fifth consulting (non-voting) member may be added if necessary (i.e., an expert
2 from another institution; a community placement mentor), but he or she must still have an earned
3 doctorate or terminal degree in the field and at least hold temporary graduate faculty status at
4 ETSU.

5 3. Once a preliminary project committee has been formed, any changes to the composition of the
6 committee are discouraged. There may be instances when changes are necessary, such as a
7 consultant needs to be added, or a faculty member needs to be removed from committee
8 participation (e.g., in rare circumstances of student-faculty or faculty-faculty professional
9 disagreements). Any such changes in committee membership should be discussed with all
10 involved parties, in addition to area faculty and Director. The student is responsible for seeing that
11 formal changes to the graduate school committee form are made.

12 4. A graduate school committee form should be completed and submitted to the departmental
13 executive aide who will deliver it to the graduate school.

14 5. Faculty members reserve the right to decline to serve on graduate advisory committees. If a
15 student has difficulty finding faculty to serve or must replace a committee member, the DET will
16 provide assistance.

17 6. Preliminary project defenses are expected to be:

18 a. Announced (time & place) to Psychology faculty and graduate students two weeks ahead
19 of time. Students should notify the DET/DCT and have a notice posted on the "Psychtalk"
20 listserv.

21 b. Judged according to a reasonable standard of rigor;

22 7. After a successful defense, the student should get all forms signed and submitted to the
23 departmental executive aide.

24 **Preliminary Project Guidelines and Requirements**

25 The Preliminary Examination Project will serve as an evaluation of qualification for doctoral
26 candidacy. The Preliminary Examination Project takes the form of a scholarly written product,
27 which will make a substantive and original contribution to our scientific understanding of some
28 area of psychology, broadly construed. For experimental students, this contribution will include
29 development and preparation of a review paper or meta-analysis. For clinical students, this
30 contribution will include development and submission of a grant proposal, preparation and
31 submission of a peer-reviewed empirical, conceptual, or review article for publication, or the
32 development and completion of a pilot research project. The completed project should provide a
33

1 critical, evaluative, and integrative review and interpretation of content and methodological issues
2 pertaining to the selected area of psychology, and it should advance the student's area of
3 research interest, thereby demonstrating breadth of knowledge. As a very general guide, the
4 project should address the following issues as relevant: 1) theoretical approaches to the content
5 domain (historical and contemporary); 2) identification of major theoretical issues in the content
6 domain; 3) strengths and limitations of various research methods used in the content domain; 4)
7 measurement issues (both research and clinical applications); 5) relevance to translation or
8 clinical applications; 6) ethical issues (research and clinical); and, 7) future directions in theory,
9 research, and translation. These specific expectations might differ by type of project. However, all
10 projects should address the points listed in the rubric (in progress, to be in appendix).

11 A student's decision about which type of scholarly project to complete for the Preliminary
12 Examination Project will be made in consultation with his or her Preliminary Examination Project
13 Committee Chair. Despite the format or particular project selected and approved, the student
14 should, at all times, approach the Preliminary Examination Project as a professional and scientific
15 endeavor.

17 **Preliminary Project Proposal**

18 After consultation with the Preliminary Examination Project Committee Chair, a student
19 must submit and orally defend his or her proposed Preliminary Examination Project to the
20 committee, including a proposed reading list. Proposal length may vary, but in all cases should
21 contain sufficient background review and logical argumentation to enable committee members to
22 judge the appropriateness of the project. At the Proposal stage of the Preliminary Examination
23 Project, students will receive summary feedback from their committee regarding the proposed
24 direction, content, and expectations of their project.

25 Expectations for the Preliminary Examination Project Proposal will include: 1) selection and
26 justification of content area; 2) selection and justification of an appropriate publication outlet for
27 final product; 3) organizational structure of the proposed project; and, 4) delineated reading and
28 consultation resources. Within 72 hours, the student is required to transcribe, summarize and
29 address the agreed-upon elements of the project, forming an *action plan* for completion of the
30 Preliminary Examination Project on the departmental preliminary project proposal form.
31 Committee members must approve the summary and action plan. Such approval by the
32 committee also indicates that the proposed Preliminary Examination Project is of sufficient scope
33 to satisfy the requirements of the Preliminary Examination. Students may seek and receive oral

1 and written guidance and feedback on their project until the point of formal approval of the
2 Preliminary Examination Project Proposal by the committee. Upon committee approval, students
3 must work on their Preliminary Examination Projects independently and with non-written
4 consultation from their chairs or committee members. Students are encouraged to seek written
5 feedback from other faculty and colleagues outside of the committee or department. Students will
6 have a period of three months (90 days) from time of approval to complete and submit the
7 Preliminary Examination Project to their committee. Oral defense of the Preliminary Examination
8 Project should occur as soon after this date as feasible, but does not have to be completed within
9 the three-month timeframe.

10 Given that the Preliminary Examination Project committee members have heretofore
11 played a consultative role in the project and during this three month period are playing a limited
12 role (restricted to verbal or general but not detailed written feedback), broad responsibility for the
13 quality of the Preliminary Examination Project solely rests upon the student. As such, the student
14 is again reminded to, at all times approach this Project as a scientific endeavor, indeed the
15 capstone for achieving doctoral candidacy.

16 Upon Preliminary Examination Project committee chair recommendation, students will
17 orally defend the project before the full committee. Failure to complete the written Preliminary
18 Examination Project within the designated three-month period will be considered indicative of
19 inadequate progress in the program and possible dismissal from the program. The primary
20 criterion for evaluating the Preliminary Examination Project will be the extent to which it provides a
21 cogent, compelling, original, and substantive contribution to the scientific and/or theoretical
22 understanding of the domain of interest. Specific expectations for the final product are outlined in
23 the rubric. In most cases, the product should not exceed 40 pages of text, excluding title page,
24 abstract, references, and appendices, unless a more extensive document is approved by the
25 committee. The student will work directly with the Preliminary Project chair to make final edits prior
26 to submission of the manuscript to an academic journal.

27 The Preliminary Examination Project committee chair may act in a consultative role to the
28 student, helping the student to select a topic areas and breadth/depth that meet the guidelines
29 while being sufficiently original and independent enough from the intended dissertation research.
30 Ideally, the Preliminary Examination Project will inform the dissertation, perhaps more broadly
31 construed or more narrowly focused, but the student should not expect the Preliminary
32 Examination Project to simply be a literature review for the background section of the dissertation.

1 The expectation is that the student will seek to publish some form of the final, approved
2 Preliminary Examination Project in a peer-reviewed journal (or other approved outlet).

4 **Oral Defense of Preliminary Projects**

5 The student, upon completion of the Preliminary Examination Project, will be required to
6 orally defend the project before the full committee. The purpose of the oral defense of the
7 Preliminary Examination Project is: 1) to extend the evaluation of the student's knowledge and
8 understanding of subject matter covered in the written document or approved in proposal; 2) to
9 evaluate the student's ability to respond, in a scholarly and professional manner, to a variety of
10 verbal inquiries; 3) to evaluate the student's ability to address limitations of prior research with
11 future research ideas; and 4) especially for experimental students, to evaluate the student's
12 application of theory and research through an emphasis on translational work.

13 The rubric provides a list of criteria on which the students will be evaluated in both the
14 written and oral portions of the defense. The criteria on which written products will be evaluated
15 include: organization; technical writing quality; comprehensiveness of content; methodology; and
16 critique and innovation. Also expected is that students will have sought, received, and
17 incorporated feedback from other faculty or colleagues during the preliminary project process. The
18 criteria on which the oral defense will be evaluated include: professionalism; engagement with the
19 audience; tone; use of appropriate visual aids; organization of material and delivery; responses to
20 questions.

22 **Passing/Failing Preliminary Project**

23 Students will have the opportunity to earn one of the following ratings for the written
24 preliminary project: pass with distinction; pass with revisions; conditional pass; or fail. For the oral
25 portion of the defense, students can receive a pass or fail. However, the decision on oral defense
26 is based, in part, on the decision on the written component. For students earning a conditional
27 pass on the written component, a second oral defense will be required after the substantial
28 revisions are complete. For students failing the written component, an oral defense will occur only
29 after a new project is completed.

30 For a component of the Preliminary Examination Project to be considered fully passed, at
31 least three committee members must have assigned a passing vote on both the written and oral
32 components. A full pass may still require minor revisions to the written component, as outlined in
33 the rubric. In the event of a student obtaining a pass with revisions, committee members will

1 communicate, in writing, the nature of the revisions required to the student, the Preliminary
2 Examination Project chair, and the DCT/DET. The remedial revisions then must be completed,
3 within 30 days, to the satisfaction of the majority of the committee for the student to be considered
4 passed. The student is required to provide a revision letter to all committee members, which
5 outlines how each of the suggested changes was addressed. All committee members must
6 approve this revision letter and, if requested by the committee, the revised preliminary project.
7 *Students earning a pass (either with distinction or with revisions) on both written and oral*
8 *components will receive a grade of A for PSYC 7000.* In some instances, a student may pass the
9 written component but fail the oral component. The oral will be considered failed if at least two
10 committee members have assigned a fail. In these cases, a grade of F will be given in PSYC
11 7000. The student will be required to retake PSYC 7000 and complete a second oral defense.

12 If the written component requires substantial revision, a student will be given a conditional
13 pass. The major changes needed might include significant methodological, literature, or analytic
14 modifications, for example. *Students earning a conditional pass will receive a grade of C for PSYC*
15 *7000.* In the event of a student obtaining a Conditional Pass, committee members will
16 communicate, in writing, the nature of the remedial measures required to the student, the
17 Preliminary Examination Project chair, and the DCT/DET. It is possible that the remedial
18 measures may involve meeting with at least one member of the committee to handle the
19 unresolved issues. In the revision process, the student is required to provide a revision letter to all
20 committee members, which outlines how each of the committee suggested changes were
21 addressed within 60 days of defense. All committee members must review and approve the
22 revised preliminary project. Student must re-defend the (revised) project. Both components must
23 be considered passing by the majority of the committee for a conditional pass to be revised to full
24 pass. *Upon successful revision the PSYC 7000 grade will be changed to B. With unsuccessful*
25 *revision this grade will be changed to F. Failing the revision of the preliminary project will put the*
26 *student in jeopardy of losing funding. A student earning a failing grade will be required to retake*
27 *the PSYC 7000 and begin a new preliminary project process (which may involve a new*
28 *committee).*

29 If the written component is not acceptable in its current form and the document cannot be
30 salvaged with major revisions, the student will be given a fail. The written component will be
31 considered failed if at least two committee members have assigned a fail. *Students earning a fail*
32 *will receive a grade of F for PSYC 7000. A student earning a failing grade will be required to*
33 *retake the PSYC 7000.* A new preliminary project must be proposed and completed within 90 days

1 after receiving these results. Only under extraordinary circumstances will an extension be granted,
2 and only with the approval of the full area faculty and Director. *A failure of either component of the*
3 *second Preliminary Examination Project will result in dismissal from the program. Upon successful*
4 *proposal and defense of a second preliminary project, students will be given a B in PSYC 7000.*

5
6 Assigned grades for PSYC 7000 by committee decision and first or second round.
7

Round 1 Decision	Round 1 Grade	Round 2 Decision	Round 2 Grade
Pass both oral and written components (with distinction or with revisions)	A	---	---
Conditional pass	C (change to B if successful revision)	Pass/Fail*	B or F
Fail	F	Pass/Fail	B or F

8 *Round 2 only if substantial revisions are not successfully addressed in Round 1.
9

10 *Note:* Students will be provided with the final outcome of the pass/fail voting of their committee
11 members, but individual committee member votes will remain confidential. Documentation
12 including committee signature and rubric scoring forms, and the Preliminary Examination Project
13 written product will be maintained in the student's permanent record.
14

15 **Doctoral Candidacy Checklist**

- 16 Completed master's thesis has been approved by the Graduate School
- 17 Passed clinical capstone project written portion
- 18 Passed clinical capstone project oral portion
- 19 Completed Practicum
- 20 Completed Preliminary Project
- 21 Approval received from Primary Academic Advisor and signed by DCT

1

2 **Dissertation**

3 **Alternative Multi-Paper Dissertation Format**

4 In addition to the standard format for doctoral dissertations, the Department of Psychology
5 allows for the use of an alternative format that consists of a series (three or more) of conceptually-
6 coherent, publication-ready articles, in journal format, as the main basis for the dissertation. This
7 format is rare, but can be proposed. A student wishing to pursue the alternative format dissertation
8 must meet several criteria, including: 1) being in good-standing academically, having successfully
9 progressed through all coursework, clinical training experiences, capstone and milestone projects
10 according to the established Clinical Program timeline; and, 2) gaining the approval of his/her
11 primary academic advisor, the Clinical Ph.D. Program Faculty, and from all members of the
12 Dissertation Committee at the time that doctoral candidacy form is filed. Importantly, the choice of
13 which dissertation format to adopt should be decided prior to the dissertation proposal meeting.
14 Moreover, should the student, in consultation with his/her advisor, decide that it would be
15 preferable to alter the format of the dissertation following the proposal meeting, the student is
16 required to obtain approval for this change from all members of his/her committee and to
17 document that change with a revision to the doctoral candidacy form.

18 In this alternative format, the packaged series of studies must be bounded by both a (1)
19 substantial General Introduction section, comprising a comprehensive and critical review of the
20 literature that sets the context for the thematic research, and (2) General Discussion section that
21 synthesizes and critically analyzes the key issues which arise from these studies. These General
22 Introduction and Discussion sections serve as “bookends” and are in addition to (not in place of)
23 the specific Introduction and Discussion sections contained within each article. When preparing a
24 dissertation in the alternative format, a student must: 1) include a separate abstract for each paper
25 of the series, in addition to the always-required general dissertation abstract; and, 2) separate
26 reference lists for each paper, in addition to a master list of references for the entire dissertation
27 document. Reference styles for the non-manuscript portions of the document, including the
28 General Introduction, General Methods and General Discussion should adhere to the guidelines of
29 the latest APA Style Manual; however, for the individual series papers, the structural and
30 reference/citation styles should adhere to those of the journals selected for submission, which
31 should be identified prior to, and identified at, the proposal meeting. When necessary and
32 appropriate, supplementary supporting materials are to be presented in Appendices. If the student

1 and advisor select the alternative format, the student must also provide summary overviews of
2 each proposed article within the series at the dissertation proposal meeting. Each summary
3 overview should include: 1) brief background and significance of the literature; 2) statement of the
4 problem; 3) hypotheses; 4) methods, including the specific procedures, measures/techniques, and
5 analyses for each proposed article; and, 5) intended target journal(s) for publication. The student
6 should prepare these summary overviews with the intent to follow them through to completion.
7 After the formal proposal, and as the dissertation process progresses, if changes are required to
8 any of the article-series components, it is the expectation that the student will keep all dissertation
9 committee members informed. If the Committee determines that the proposed changes represent
10 a substantial alteration to the proposed project, a meeting of the Committee members may be
11 necessary to approve the proposed changes.

12 In some cases, a non-empirical paper may be desirable as a part of the series; in this case,
13 it is acceptable, with the approval of the Dissertation Chair and Committee, if one of the three
14 papers constitutes a critical review of the literature, theory development, case study, meta-
15 analysis, or a policy paper. Although components may differ (e.g., there may not be a traditional
16 Method section), the same type of summary overview as provided for an empirical series
17 manuscript must be provided for these types of non-empirical manuscripts, prior to the proposal
18 meeting.

19 Only papers for which the student is the sole or primary contributor may be included. If the
20 alternative-format dissertation is selected, secondary coauthors should be determined early in the
21 process and documented in the Proposal meeting to avoid any conflicts of interest. If the
22 dissertation chair will be a coauthor of any manuscripts from an alternative-format dissertation, a
23 traditional advising role must be maintained to ensure that the manuscripts fulfill the dissertation
24 requirements, with publication being a secondary goal. Neither the advisor nor any other coauthor
25 who is a member of the student's dissertation committee may compose any portion of the first
26 draft of the dissertation or any of its component manuscripts for which the student is the first
27 author. If a paper is co-authored, that should be acknowledged in a footnote to the chapter title(s)
28 in the dissertation, and a release letter from each coauthor not on the dissertation committee must
29 be included in an Appendix. In all cases, the majority of the work, taken as a whole, must be done
30 by the student, and the student's contribution to each article must be clearly identified.
31 Manuscripts within the proposed series must be previously unpublished work.

32 As with the traditional format, an alternative format dissertation must meet all other
33 Program and ETSU criteria. As with the traditional format, a committee of at least four members is

1 formed, and a dissertation proposal and defense are held according to existing policies. The
2 student must follow all of the steps for a traditional doctoral dissertation. Like the traditional
3 doctoral dissertation, the manuscript based dissertation will be judged as: Pass, Conditional Pass,
4 or Fail.
5

6 **General Policies about Dissertations in the Psychology Department**

- 7 1. Dissertation Committee chairpersons will be full-time psychology faculty with appropriate
8 graduate faculty status.
- 9 2. Students in collaboration with their dissertation chairs should devise a dissertation
10 committee. The dissertation committee will be composed of four members, all of whom
11 must be full-time, tenured or tenure-track faculty members, with an earned doctorate or a
12 terminal degree in their field, and holding at least temporary ETSU Graduate Faculty status.
13 Of these four, at least two must be designated clinical psychology faculty, and at least one
14 must be designated experimental psychology faculty within the Department of Psychology.
15 A fifth member can be outside of the Department of Psychology.
- 16 3. Once a dissertation committee has been formed, any change in committee membership
17 should be discussed with all involved parties; the graduate school committee form must be
18 amended if changes are made. It is the student's responsibility to see that the formal
19 changes are made.
- 20 4. File a graduate school committee form with the departmental executive aide who will deliver
21 it to the graduate school.
- 22 5. Faculty reserves the right to decline to serve on graduate advisory committees. If a student
23 has difficulty finding faculty to serve or must replace a committee member, the DCT will
24 provide assistance.
- 25 6. Dissertation defenses are expected to be:
 - 26 a. Announced (time & place) to Psychology faculty and graduate students two weeks
27 ahead of time. Notify the DCT and post a notice on the "Psychtalk" listserv.
 - 28 b. Open to all members of the university community;
 - 29 c. Judged according to a reasonable standard of rigor;
 - 30 d. Evaluated on a pass/fail vote by the Dissertation Committee members;
 - 31 e. Restricted to a maximum of two occasions. A second failure may result in dismissal
32 from the program.

- 1 7. As part of the completion of a successful defense of the dissertation project, each student's
2 oral defense will consist of an examination oriented toward the student's dissertation
3 research area and issues relevant to clinical psychological science.
- 4 8. After a successful defense, the student should get all forms signed and submitted to the
5 departmental executive aide. It is the student's responsibility to bring appropriate forms to
6 dissertation defense the following forms to avoid delays in securing signatures:
- 7 9. Specific guidelines on the typing, layout, and deadlines for presenting the final copies of the
8 dissertation to the Graduate School are available in the Graduate School.

9 **The Dissertation: Practical Considerations**

- 10 1. "Dissertation" is broadly defined. Faculty members are willing to consider a wide range of
11 options for a thesis. Projects such as meta-analyses, analysis of archival data,
12 organizational interventions, case studies, and experimental laboratory work, could all be
13 considered appropriate, but must be empirical in nature, not just a theoretical or literature
14 review paper. The thesis should make an original contribution to psychological science.
15 Preferably the student designs a study and collects original data for the dissertation. And,
16 building on the premise of the preliminary project which demonstrates the student's ability
17 to conduct research independently, the dissertation should originate from the student and
18 be conducted and carried out accordingly.
- 19 2. Approval of the proposal is an implicit contract. The faculty is agreeing that if the student
20 diligently and professionally completes the work in the proposal and satisfactorily analyzes
21 the results and conclusions, that they will consider the project to be an adequate
22 dissertation. The student is agreeing to carry out the work as proposed. Both parties agree
23 that there should be no major changes after approval of the proposal.
- 24 3. Students should keep committee members informed of progress. Some chairs and
25 committee members expect to follow the progress of the dissertation very closely. Others,
26 particularly non-chair members, do not expect intermediate reports. Clarify expectations,
27 and tailor the frequency of meetings with individuals or the whole committee to student and
28 faculty needs.
- 29 4. After gaining the chair's approval of the final draft, students should schedule a defense.
30 Give a copy to the committee members two weeks before the date of the defense. Arrange
31 to have the defense announced publicly by the departmental executive aide, which typically
32 should occur at least one week before the final thesis defense.

- 1 5. Check with your committee chair about bringing food to your proposal and defense
2 meetings. Some believe that it helps set a positive tone. Others strongly believe you should
3 not bring food, because it can detract from an independent evaluation of your work and
4 compromise the integrity of the process of judging your work on its merit--not your
5 hospitality skills. After you've passed it is clearly a good time to celebrate and show
6 appreciation.
- 7 6. Faculty may not be available during summers. There is no formal expectation that faculty
8 will remain involved in thesis work at times when they are not under contract. The contract
9 period for 9-month faculty ordinarily extends from 8/15-5/15. Clarify with the chair and
10 committee members their availability during the summer. If faculty members are willing to
11 help during the summer, remember that they are doing it as a favor (they are not on
12 contract with the university).
- 13 7. Students should review the additional practical information about theses provided earlier in
14 the handbook (beginning on page 16), as similar issues apply to dissertations. Likewise,
15 students should be sure to complete appropriate graduate school forms for dissertations
16 and submit them to the departmental executive aide. Students also file an Application for
17 Graduation with the departmental executive aide.

19 **Oral Defense of Dissertations**

20 The student, upon completion of the Dissertation, will be required to orally defend their
21 project before the full committee. The purpose of the Oral Defense of the Dissertation is: 1) to
22 evaluate the student's knowledge and understanding of subject matter covered in the dissertation
23 document (emphasis may be placed on topics in which the student's responses are judged to be
24 weak); 2) to evaluate the student's ability to respond, in a scholarly and professional manner, to a
25 variety of verbal inquiries; 3) to evaluate the student's ability to address limitations of prior
26 research with future research ideas; and 4) to evaluate the student's application of theory and
27 research; 5) to evaluate the student's level of ability to design and carry out independent research.

29 **Student Evaluation Process**

30 Rationale: Due to the nature of graduate education and clinical psychology training,
31 specifically, students will be evaluated at least annually by the faculty evaluation committee in the

1 areas of curricula, research, clinical skills, and adherence to APA Ethical Standards of Conduct.
2 The annual student evaluation forms are in Appendix B3. The clinical psychology faculty is
3 invested in the current and future success of students and is obliged to monitor student progress
4 and critically evaluate the professional skill level of students on a regular basis.

5 Process and Procedure: Annually, clinical psychology graduate students will be formally
6 evaluated by their primary academic advisor utilizing the student's self-ratings on the Annual
7 Summary Evaluation Form (ASEF) along with course grades, research, and clinical competency
8 ratings. The evaluation is in the form of a discussion surrounding the student portfolio (described
9 below), and other sources of information on student achievement. During this meeting, the
10 student's ASEF may be modified, as deemed appropriate by the primary academic advisor. The
11 ASEF is signed by the primary academic advisor and student and submitted to the clinical
12 psychology program's clinical psychology executive aide, along with the student portfolio.
13 Students are invited to submit an accompanying narrative if there is disagreement with the primary
14 academic advisor's ASEF ratings, or to supply additional information. ASEF's and portfolios
15 should be submitted to the clinical psychology executive aide no later than the end of the second
16 week of December.

17 Faculty evaluation committee: During the beginning of the spring term, the faculty
18 evaluation committee consisting of all primary academic advisors of students in the clinical
19 program will meet with each student in teams. The ASEF and portfolio will serve as the basis for
20 these feedback sessions. The purpose of these sessions is to provide the clinical faculty as a
21 whole with oversight of all students in the program across all aspects of their achievement of
22 program goals and matriculation progress and to provide students with feedback from faculty
23 sources beyond their primary academic advisor.

24 Following the clinical faculty feedback sessions, modifications may be made to the ASEF
25 form, and suggestions may be made for additions to the portfolio. Participating faculty and the
26 student will sign the ASEF, and add commentary, as appropriate. In any case where the faculty
27 views a student's performance or progress to be "less than expected level," there must be an
28 accompanying commentary explaining the rating(s) and containing a plan for remediation and
29 evaluative follow up, along with a timeline for this process.

30 Additional Evaluations: Each research advisor may complete the Research Competencies
31 Form as deemed appropriate but no less frequent than annually at the end of the fall semester
32 and will discuss ratings with the student. Students will once again be allowed to submit an
33 accompanying narrative in the event of a disagreement. These forms are also due to the clinical

1 psychology executive aide no later than the end of the second week of December. Additionally,
2 each clinical supervisor will complete the Clinical Competencies Form for the student every
3 semester and those aggregated ratings will inform the student's course grades in Practicum,
4 Externship, and Internship in addition to contributing to the ASEF.

6 **Student Documentation of Achievement of Program Goals and Matriculation** 7 **Progress**

8 Though student achievements in curricular, research, and clinical areas progress is
9 assessed each term, each student's overall progress in meeting program and individual goals is
10 assessed programmatically on an annual basis. This process begins with each student gathering
11 and submitting information as follows:

12 Each student will submit a completed ASEF along with portfolio containing a cover sheet
13 identifying admission year to the program and primary academic advisor. The portfolio includes a
14 copy of Program of Study for the Master's Degree form and Program of Study for the Doctoral
15 Degree Form including all courses completed, course grades, and any transferred courses;
16 current curriculum vitae; research progress including conference presentations, manuscripts, and
17 grants; degree milestones including Thesis, Preliminary Project, and Dissertation; clinical skills
18 progress including documented training hours and Clinical Capstone Project; any and all
19 documentation pertaining to remediation or disciplinary actions, and professional development
20 and lifelong learning activities including invited talks or presentations, conferences and workshops
21 or talks attended, membership in professional organizations, teaching experience, and other
22 service activities.

23 Portfolios are to be submitted to the primary academic advisor by the end of the last week
24 in November. The student should then schedule a time to meet with the primary academic advisor
25 to review and discuss progress as delineated in the portfolio. At this time the graduate student and
26 primary academic advisor should complete the Signature Form for Portfolio Review and the
27 student should turn in this form along with the portfolio (and ASEF described above) to the clinical
28 psychology executive aide by the end of the second week in December. In addition to benefiting
29 each student directly for internship and employment applications, the documentation of activities
30 and experiences are used in program evaluation to demonstrate the program's commitment to
31 applied training and to fostering lifelong learning.

1 **Program Evaluation**

2 All students involved in clinical training placements will evaluate the placement and clinical
3 supervisor each semester via the Student Evaluation of Placement Form and Student Evaluation
4 of Supervision Form, respectively. These forms should be submitted to the clinical psychology
5 executive aide no later than the end of the last week of classes each semester.

6 To ensure monitoring of mission and integration with program goals, students anonymously
7 complete the Student Perception of Goal Achievement Form annually. Additionally, placements
8 rate match of clinical experiences with program goals and objectives annually (Survey of Program
9 Goals Form).
10

11 **Timeline**

12 *No later than last week of November:*

13 Portfolio due to primary academic advisor

14
15 *No later than the end of the first week in December:*

16 Meeting with primary academic advisor to discuss ASEF, Portfolio, and Research
17 Competencies Evaluation Form
18

19 *No later than the end of the second week in December:*

20 ASEF, Portfolio and Signature Form for Portfolio Review, and Research Competencies;
21 Forms due to executive aide
22

23 *No later than the end of the last week of classes each semester:*

24 Clinical Competencies Form, Student Evaluation of Placement Form, and Student
25 Evaluation of Supervision Form due to executive aide
26

27 *Early spring semester:*

28 Faculty evaluation committee annual feedback sessions
29

30 *Summer:*

31 Student Perception of Goal Achievement Form due to executive aide
32

33 **Evaluation Forms**

- 34 a. Annual Summary Evaluation Form
- 35 b. Research Competencies Form
- 36 c. Clinical Competencies Form
- 37 d. Signature Form for Portfolio Review
- 38 e. Student Evaluation of Placement Form
- 39 f. Student Evaluation of Supervision Form

1 g. Student Perception of Goal Achievement Form

2 h. Survey of Program Goals Form

4 **Professional Development and Lifelong Learning**

5 As indicated above, students throughout the MA/PhD program are expected to actively
6 participate in extracurricular learning experiences such as Grand Rounds for the Medical School
7 departments; the Department of Psychology Speaker Series; the VAMC or Cherokee Health
8 System internship seminars, Frontier Health Systems continuing education workshops; and local,
9 state regional or national professional organizations, among others.

11 **Additional PhD Requirements**

12 All doctoral students are required to participate in at least four semesters of supervised field
13 experience (PSYC 7910 Clinical Externship), and must include primary care and rural mental
14 health settings. In order to enroll for an externship, a student must complete a one semester
15 practicum in the psychology training clinic (The BHWC) and be recommended for externship
16 placement by the Director of Clinical Training. Throughout doctoral level work, a minimum of four
17 semesters, a student will participate in psychology training clinic activities in addition to off-site
18 training placements (e.g., externships). Students enroll in Practicum for 4 additional semesters
19 concurrent with their externship enrollment. The APA Standards of Conduct must be met in all
20 areas.

21 Upon completion of a successful oral defense of the dissertation project, each student will
22 complete a final oral examination oriented toward the student's dissertation research area and
23 issues relevant to clinical practice.

26 **Pre-doctoral Internship**

27 A full-time, one-year internship in an agency approved by the student's primary academic
28 advisor is required as a component of matriculation, and must be successfully completed prior to
29 the awarding of the PhD. This internship is a requirement for APA-approved programs and serves
30 to give students an intensive professional practice experience. A student cannot accept an
31 internship unless the dissertation proposal has been approved. Students register for PSYC 7980

1 Clinical Psychology Internship during the three terms, fall, spring, and summer of their internship
2 year. A permit for registration is required and is obtained through the Director of Clinical Training.
3

4 Dissertation Proposal and Data Collection Deadlines:

5 **Students applying for an internship must conduct their dissertation proposal by**
6 **September 15 of the year prior to internship acceptance in order to receive a statement of**
7 **internship readiness by the DCT.** Further, the dissertation data must be collected before the
8 student can begin the internship unless the internship agency gives written permission that the
9 student may collect data while on internship.
10

11 **Internship Preparation**

12 Internship preparation and application can be a daunting process, and the Program offers
13 an internship preparation workshop to assist each student through the process and to maximize
14 the success of internship placement. The Association of Psychology Postdoctoral and Internship
15 Centers (APPIC) is an educational, non-profit organization with the mission of enhancing
16 internship and postdoctoral training programs in professional psychology. Members are
17 independent agencies conducting or sponsoring internship or postdoctoral training programs, with
18 over 700 programs represented.

19 Internship applicants can download registration materials from the National Matching
20 Services web site. The clinical program has the authority to determine the applicant's eligibility for
21 participation in the match. Participants in the APPIC match must register to participate. Applicants
22 must notify internship sites to which they have applied if there is a change in their standing in the
23 clinical program.

24 To apply for internship applicants must apply directly to the internship programs of interest.
25 After interviewing, applicants submit a Rank Order List of preferred programs. The internship
26 programs also submit a Rank Order List of desirable applicants.

27 Application dates vary by program. In November a Listing of Programs will be available for
28 access by applicants. In December applicants should return their Agreements and fees to National
29 Matching Services Inc., in order to register for the Match. Sometime in February is the final date
30 for submission of applicant and program Rank Order Lists. Later in February applicants will be
31 informed if they have been matched to an internship position.
32

1 **Student Support and Expected Costs**

2 Students are responsible for adherence to University, School of Graduate Studies,
3 Departmental, Programmatic, and community agency policies and procedures pertaining to their
4 training and matriculation. Managing all of these can be daunting, and there are resources to
5 assist. The following are a list of University resources which can be very beneficial:

6 **Financial Support**

7 On average, four to six students are admitted per year, with all students receiving
8 University support through a graduate assistantship for at least the first two years. The support
9 includes a stipend of \$12,000 plus in and out-of-state tuition waivers for the academic year (fall
10 and spring terms). Sources of graduate assistant support in the remaining two years pre-
11 internship vary, and include community training grants and contracts, teaching assistantships, or
12 faculty grants. The stipend amount as well as the contract period after the first two years may
13 vary according to the source of the grant. For example, some community placements have a
14 stipend level of \$10,000 for 12 months, and include travel reimbursement. Others have a stipend
15 of \$12,000 for a 12 month period. To date, 100% of enrolled students have received at least 4
16 years of graduate assistantship support.

17 Though tuition fees are remitted for graduate assistants, students are responsible for other
18 non-tuition fees each semester. Tuition costs and additional fees are included in information
19 posted on the clinical psychology webpage at etsu.edu/psychology/clinical.

21 **Administrative Support**

23 **Center for Physical Activity**

24 The mission of the Campus Recreation Department at East Tennessee State University is to
25 provide high quality recreational facilities, programs, and services for the entire campus
26 community, to promote healthy and active lifestyles, and to create a marketable, meaningful work
27 and leadership experience for all employees and Sport Club Officers. Tel: 423-439-7980. Website:
28 <http://www.etsu.edu/students/campusrec/>

1 2 **Disability Services**

3 The Office of Disability Services provides a variety of services to students with qualifying
4 disabilities. You can find more information on their website
5 at <http://www.etsu.edu/students/disable/default.aspx> or by calling the office at
6 423.439.8346.

7 8 **ETSU Bookstore**

9 The ETSU Bookstore can be reached at cbirdwell@nebook.com, 423-439-4436,
10 or <http://www.etsubookstore.com/>. If you have the ISBN you can purchase your
11 textbook from anywhere. Just make sure that you are purchasing the proper edition.
12 The ETSU Bookstore will have the version your instructor ordered but other sources
13 may not.

14 15 **Goldmail**

16 Your Goldmail account is your official ETSU email address. University policy states
17 that you must use this address as your official point of contact. You are responsible
18 for the messages sent here. Your email address is *username@goldmail.etsu.edu* and
19 you can access your messages by going to <http://goldmail.etsu.edu>. Contact the
20 Student HelpDesk if you need help with your password (it can be different from your
21 ETSU password.)

22 23 **Library**

24 You can access most library materials from your computer. The Sherrod Library
25 even has one librarian dedicated to distance students. Her name is Amy Arnold and
26 she is available at 423.439.4714 or by email at arnolda@etsu.edu. You can search the
27 library databases by starting at <http://sherrod.etsu.edu>. You will need your ETSU
28 username and password.

29 30 **Student Counseling Center**

31 Promote mental health, personal growth and positive relationships within the ETSU student
32 community by providing an array of mental health, career, educational, and consultative services.
33 The Student Counseling Center is located on the third floor of the D.P. Culp Center.

1 Telephone: 423-439-4841

2 General Information: browsd02@etsu.edu

3 Website: <http://www.etsu.edu/students/counseling/default.aspx>

5 **ETSU Graduate Catalog**

6 The ETSU Graduate Catalog contains all the information you will need
7 regarding policies and procedures. It can be found online
8 at: <http://www.etsu.edu/reg/catalog/graduate.aspx>

10 **Student Health Clinic**

11 The mission of East Tennessee State University Student Health Services is to provide
12 acute/ episodic care and health education, promoting student development of a healthy lifestyle
13 toward the accomplishment of educational and career goals

14 Telephone: 423-439-4225

15 Website: <http://www.etsu.edu/nursing/shserv/default.aspx>

18 **Writing and Communication**

19 The Writing and Communication Center provides online assistance for writing papers and
20 research. You can find more information **about their services online**

21 at: <http://www.etsu.edu/academicaffairs/wcc/>. You can call them at 423-439-7848 to
22 schedule appointments or email them at etsuwcc@gmail.com.

24 **Student Technical Help**

25 **Technical/Computer Help**

26 The OIT Student HelpDesk is your best resource for most technical problems. You
27 can call, email or stop in to see them on the first floor of the Culp Center. Phone:
28 423.439.5648 Email: shdesk@goldmail.etsu.edu

31 **D2L**

32 HelpYou can find answers to many of your D2L how-to questions on this
33 website: <http://www.etsu.edu/d2l/students.aspx>. If you are still having trouble finding

1 what you need, contact the Student HelpDesk.

3 **Problems viewing course videos**

4 This website lists some possible solutions for problems you might encounter when
5 viewing streaming videos through your online course site:

6 <http://www.etsu.edu/academicaffairs/elearning/ats/services/StreamingMediaHelp.aspx>

7 You can also contact the HelpDesk with your questions. The more information you
8 can provide about what is occurring on your computer the easier it will be to help
9 with your problem.

11 **Microsoft Office Free Viewers**

12 Some instructors may post Microsoft Word or PowerPoint documents. Even if you do
13 not have Microsoft Office installed on your computer you can still view these documents
14 by installing one of the open source products or by installing the free Office Viewers.

15
16 PowerPoint 2007

17 <http://www.microsoft.com/downloads/details.aspx?familyid=048dc840-14e1-467d-8dca19d2a8fd7485&displaylang=en>

18
19 Word Viewer 2007 –

20 [http://www.microsoft.com/downloads/details.aspx?FamilyID=3657ce88-7cfa-457a-9aec-](http://www.microsoft.com/downloads/details.aspx?FamilyID=3657ce88-7cfa-457a-9aec-f4f827f20cac&displaylang=en)
21 [f4f827f20cac&displaylang=en](http://www.microsoft.com/downloads/details.aspx?FamilyID=3657ce88-7cfa-457a-9aec-f4f827f20cac&displaylang=en)

22
23 Excel Viewer 2007 –

24 [http://www.microsoft.com/downloads/details.aspx?FamilyID=1cd6acf9-ce06-4e1c-8dcf-](http://www.microsoft.com/downloads/details.aspx?FamilyID=1cd6acf9-ce06-4e1c-8dcf-f33f669dbc3a&DisplayLang=en)
25 [f33f669dbc3a&DisplayLang=en](http://www.microsoft.com/downloads/details.aspx?FamilyID=1cd6acf9-ce06-4e1c-8dcf-f33f669dbc3a&DisplayLang=en)

27 **Password Reset**

28 Your ETSU password expires every 90 days. You can select the Password Reset link
29 located beneath the D2L login fields or access the page directly at:

30 <https://etsuis.etsu.edu/accountactivation/AccountActivation.aspx>. The Student

31 HelpDesk can assist you if you are having trouble resetting the password or have been
32 locked out of your account.

34 **Virus Protection**

35 Students may download free Symantec antivirus software at: <http://antivirus.etsu.edu>.

36 You will need your ETSU username and password to download the software.

School of Graduate Studies

The mission of the School of Graduate Studies is to foster post-baccalaureate programs of scholarship that are recognized for their excellence and contributions to society. The School of Graduate Studies will provide an environment that stimulates:

- Advanced understanding of the concepts, issues and practices of a discipline;
- Independent thought and the ability to generate new knowledge;
- The ability to contribute significantly to the academic community, professions, and society;
- Diversity among ideas, programs, and people.

Dean of Graduate Studies: Dr. Cecilia McIntosh

Telephone: 423- 439-4221

Website: www.etsu.edu/gradstud/

Office of Financial Aid

The Office of Financial Aid at East Tennessee State University provides a broad spectrum of programs to assist students in financing their college education. The University is committed to providing students with access to education through a variety of resources that includes scholarships, grants, loans, and work-study programs. To receive financial aid, students must review the Policies and Procedures <http://www.etsu.edu/finaid/policies/default.aspx> , meet student eligibility requirements <http://www.etsu.edu/finaid/Eligibility.aspx> , and complete all necessary steps outlined in our Step by Step Guide at <http://www.etsu.edu/finaid/stepbystep/default.aspx>

Department and Clinical Program Administrative Support

The Director of Clinical Training provides administrative oversight of the clinical program. The Director of Clinical Training, Dr. Peggy Cantrell, invites students to maintain open communication and is readily accessible via email or phone for any concerns or questions. If concerns cannot be resolved or questions answered, students should contact the Chair of the

1 Department, Dr. Wallace Dixon. The student's primary administrative assistance and the liaison
2 with the School of Graduate Studies is the program's Executive Aide, Carol Gatz. She
3 coordinates graduate assistant and community placement contracts, routes and manages all
4 student files, and assists students with course registration.

5 The Primary Academic Advisor is a core faculty member who is the point person to address
6 program or training-related questions and concerns. The Primary Academic Advisor is the faculty
7 chair of student research committees (thesis, preliminary project, and dissertation) and is
8 responsible for advising students on their programs of study and mentoring their professional
9 development.

10 Perhaps one of the most important sources of support for a graduate student is the peer
11 group. The **Graduate Student Association of Psychology (GSAP)** is the departmental graduate
12 association. It is a student run association whose purpose is to give representation to the students
13 in matters that need to be addressed to the department and to provide social support and peer
14 mentoring. In addition, GSAP organizes activities to help promote community within the
15 department. The faculty advisor of GSAP is Dr. Jodi Polaha. Membership in GSAP is automatic to
16 graduate students and is another chance to exercise leadership, but is also an excellent source of
17 valuable social support. An elected GSAP representative has an open agenda item in the clinical
18 faculty meetings to formally bring forward any student issues requiring faculty discussion and or
19 action.
20
21
22

23 **Student and Professional Associations**

24 ***Local Associations***

25 **Psi Chi**

26
27 Psi Chi is the National Honor Society in Psychology. Its purpose is to encourage, stimulate,
28 maintain excellence in scholarship, and advance the science of psychology. If you joined Psi Chi
29 as an undergraduate then you are still a member. To be eligible for membership as a graduate
30 student you must have completed 9 semester hours of graduate courses and have a 3.0 grade
31 point average in all graduate classes. Membership in Psi Chi is encouraged and is a great chance
32 to exercise leadership potential.
33
34

Graduate Student Association of Psychology (GSAP)

GSAP is the departmental graduate association. It is a student run association whose purpose is to give representation to the students in matters that need to be addressed to the department. In addition, GSAP organizes activities to help promote community within the department. The faculty advisor of GSAP is the Director of Clinical Training. Membership in GSAP is automatic to graduate students and is another chance to exercise leadership, but is also an excellent source of valuable social support.

Intermountain Psychological Association (IMPA)

IMPA is a regional psychological association represented by psychologists associated with the Tri-Cities and surrounding areas. IMPA's mission is to provide quality education and training and networking opportunities for area psychologists. Membership is free for students within the Program, and a representative from GSAP is involved with the IMPA executive board.

Tennessee Psychological Association (TPA)

TPA is an association of professionals in Tennessee which offers resources to both students and professionals within the community. Their mission is to advance Psychology as a science, as a profession, and as a means of promoting human welfare. TPA holds annual conventions in Nashville, TN, wherein you might well present research findings from current work. Membership is open to all students and interns studying psychology in Tennessee.

Graduate and Professional Student Association- ETSU

The Graduate and Professional Student Association (GPSA) of East Tennessee State University is a student-managed organization whose membership is open to all currently enrolled post-baccalaureate degree-seeking students. The primary focus is to improve the quality of graduate and professional education and student experience at ETSU. Graduate and Professional students represent approximately 20% of the total student population at ETSU, and the teaching, clinical and research activities of these students present genuine needs that are considerably different from those of the disparate student population.

GPSA Staff Advisor: David Moore

Telephone: 423-439-6149

Email: moored@etsu.edu

Website: www.etsu.edu/gradstud/gpsa

1

2 ***Regional Associations***

3 **Intermountain Psychological Association (IMPA)**

4 IMPA is a regional psychological association represented by psychologists associated with the Tri-
5 Cities and surrounding areas. IMPA's mission is to provide quality education and training and
6 networking opportunities for area psychologists. Membership is free for students within the
7 Program, and a representative from GSAP is involved with the IMPA executive board.

8 **Southeastern Psychological Association (SEPA)**

9 SEPA is a regional psychological association affiliated with the American Psychological
10 Association (APA) and is represented by the southeastern states including: Alabama, Arkansas,
11 Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee,
12 Virginia, District of Columbia, and Puerto Rico.
13

14 **Tennessee Psychological Association (TPA)**

15 TPA is an association of professionals in Tennessee which offers resources to both students and
16 professionals within the community. Its mission is to advance Psychology as a science, as a
17 profession, and as a means of promoting human welfare. TPA holds annual conventions in
18 Nashville, TN, wherein you might well present research findings from current work. Membership is
19 open to all students studying psychology in Tennessee.
20

21 **Society of Southeastern Social Psychologists (SSSP)**

22 Founded in 1978 by a group of social psychologists at the University of Georgia, SSSP boasts a
23 membership of over 400 students, faculty, and professional psychologists throughout the United
24 States. Most members hail from the southeastern states, including Maryland, Delaware, Virginia,
25 West Virginia, Kentucky, Tennessee, North Carolina, South Carolina, Georgia, Alabama,
26 Mississippi, Louisiana, Arkansas, Texas, and Florida. There are no membership dues for SSSP.
27 An annual conference is held each fall.
28

29 ***National Associations***

30

American Psychological Association (APA)

Based in Washington, DC, the APA is a scientific and professional organization that represents psychology in the United States. With 150,000 members, APA is the largest association of psychologists worldwide. Student affiliates get many benefits of full membership, including publications, special services, and substantial discounts on APA products, including electronic products. Annual membership is quite reasonable for graduate students. Membership is required to obtain insurance from the APA Insurance Trust, which is required to perform clinical work in external settings. APA Insurance Trust student premiums are also very reasonable for comprehensive coverage.

Association for Psychological Science

The Association for Psychological Science (previously the American Psychological Society) is a nonprofit organization dedicated to the advancement of scientific psychology and its representation at the international level. The APS mission is to promote, protect, and advance the interests of scientifically oriented psychology in research, application, teaching, and the improvement of human welfare. Annual membership dues for graduate students are reasonable. Students get annual subscriptions to publications, electronic journal access, discounted convention rates, and are eligible for grant and funding opportunities.

Frequently Asked Questions

Is the program APA-accredited?

The Clinical Psychology PhD program at East Tennessee State University received accreditation by the APA effective April 17, 2012.

How long is the PhD program?

The PhD program is designed as a five-year post-baccalaureate program of study, including a full calendar year of clinical internship. Students earn a master's degree en route as part of the doctoral degree requirements. Students seeking terminal master's degrees are not accepted. The clinical internship is a full-time supervised employment situation in a formal internship location. The internship is a separate application process and conducted as a 'match' similar to medical school residencies. Internships are accredited by the APA

1 independently of doctoral programs. Because there are practical and independent research
2 requirements in addition to structured coursework, it is common for PhD students in clinical
3 psychology program to take longer to graduate than the 5 years of program design.
4

5 ***May I enroll in the program on a part-time basis?***

6 No, the program must be matriculated as a full-time student. Similar to medical school, one
7 cannot complete this type of program on a part-time basis. Thus, it is our intent to support
8 every student who enrolls with graduate assistantships and tuition waivers.
9

10 ***I do not have an undergraduate degree in Psychology. May I still apply?***

11 Yes, students in related undergraduate degree programs are often interested in graduate
12 work in psychology, and are welcome to apply. There are 18 undergraduate hours in
13 psychology that are required, however, to ensure at least some foundation work in
14 psychology has been completed. Required courses include introductory psychology,
15 statistics, research methods, abnormal psychology, personality psychology, and history and
16 systems of psychology.
17

18 ***Is the program going to be offered online?***

19 There are components of courses that are supported with online material, but the nature of
20 clinical psychology training requires face-to-face training experiences, in our opinion. There is
21 no course that is offered on line, much less the whole program.
22

23 ***I took the GRE years ago, do I have to take it again?***

24 GRE scores up to five years old may be used in the application. GRE scores older than five
25 years cannot be submitted.
26

27 ***I have a master's degree in a related discipline; will I have to complete the entire program?***

28 If you have an equivalent master's degree in Psychology, you can be admitted post-masters.
29 However, you should expect to have to take most of the master's courses in the current
30 program; every course taken prior to admission will be compared to our program's courses,
31 and each course must be individually approved by the current course instructor and the DCT.
32 Practicum courses will not be waived. If you have a master's degree in a related discipline

1 such as social work, counseling, or others, you may petition upon acceptance to have up to
2 nine hours of graduate work transferred to this program.

3 If you have already completed a master's thesis, you may petition to have the thesis
4 requirement waived.

5
6 ***I want to do clinical work, but I'm not sure that I want to go all the way to the PhD. May I be
7 admitted for just the master's portion and decide later?***

8 No, there is no longer a terminal master's program in clinical psychology at ETSU, so all
9 applicants must apply to the MA/PhD combined program with the expectation of completing
10 the doctorate.

11 12 **Certification as a Psychological Assistant**

13 Information on licensing in the State of Tennessee can be found at:

14 <http://health.state.tn.us/Boards/Psychology/index.htm>
15

16 **APA Ethical Principles of Psychologists and Code of Conduct**

17 Graduate students in the psychology program at ETSU are expected to conform to the
18 ETSU guidelines, as well as the APA Ethical Principles and Standards of conduct. (APA, 2002).

19 The APA Ethics Code can be accessed through this website:

20 <http://www.apa.org/ethics/code/index.aspx>
21

22 **Policies and Procedures**

23 **Academic Honesty**

24 Academic honesty and integrity are important characteristics for any institution. In
25 accordance with ETSU's and the Psychology Department's commitment to integrity, policies
26 regarding academic honesty have been adopted. For a more complete overview of the
27 University's policies, students are encouraged to refer to the current *ETSU Graduate Student
28 Handbook*. Copies are available online at: <http://www.etsu.edu/reg/catalog/graduate.aspx>

1 Included in the policies on academic honesty are statements about plagiarism, fabrication,
2 cheating, and misconduct. Plagiarism is the use of another person's words, ideas or data as one's
3 own. Work submitted for credit that includes another's words, ideas or data is to be appropriately
4 referenced. Any work submitted certifies the originality of all work unless otherwise identified and
5 acknowledged. Plagiarism covers both published and unpublished sources. Fabrication is the use
6 of invented or falsified research or findings. This includes citing material not contained in a source,
7 listing sources in a bibliography that are not used, submitting fictitious data, and presenting work
8 prepared by another as one's own. Cheating is the act or attempted act of deception by which a
9 student misrepresents that they have mastered material or information on an academic exercise.
10 This includes copying another's material, allowing someone to copy your material, unauthorized
11 use of notes and texts, unauthorized collaboration on assignments, and taking a test for another
12 individual. Other misconduct includes: stealing test answers or questions; selling test answers or
13 questions; bribing a person to obtain test answers, questions or information; changing or altering a
14 grade on a test or in a grade book; and being an accessory to the previously stated actions.
15 Academic misconduct is considered a grave offense by all faculty as it should be by all upright
16 students, and its discovery will be treated accordingly; punishment may include dismissal from the
17 program.

19 **Academic Performance**

20 All graduate students must maintain a 3.0 GPA to remain in good standing with the
21 graduate school at ETSU. In addition, the clinical program requires all students to obtain no less
22 than a B in all clinical coursework. If a student wishes to repeat a course all grades are used in
23 computing grade point average. The grade earned on the repeat does not replace the original, but
24 may be considered in Faculty Evaluations of Students.

25 Academic departments are required to retain grade documentation for a period of one year.
26 Specific student concerns regarding academic records must be addressed within one academic
27 year from the date of posting of grades for the term in question.
28

29 **Academic Probation**

30 When the cumulative grade point average falls below 3.0, the graduate student will be
31 placed on academic probation. If the student does not achieve a 3.0 cumulative grade point

1 average at the conclusion of one probationary semester, the Dean of the School of Graduate
2 Studies and appropriate college/departmental/program officials will determine whether the student
3 should be dismissed from graduate study at ETSU or continued on probation. No student will be
4 allowed more than two probationary semesters, whether consecutive or cumulative. At the end of
5 a second probationary semester a student whose cumulative grade point average is still below 3.0
6 will be dismissed from graduate study. A student will be removed from probationary status upon
7 attaining a cumulative 3.0 grade point average. When an "I" grade converts to an "F" after one
8 calendar year, the GPA is adjusted retroactively; consequently, a student may be subject to
9 dismissal without a probationary term.

11 **Dismissal**

12 Students may be dismissed from the School of Graduate Studies for such reasons as
13 academic misconduct; failure to meet conditions of admission; failure to meet a requirement of the
14 program; exceeding the allowed number of probationary semesters; recommendation from the
15 Psychology Department for unethical or grossly unprofessional behavior; etc. Students who have
16 been dismissed from the School of Graduate Studies may address a written request for
17 reinstatement to the Chair of the Department of Psychology within 30 days of receipt of the
18 dismissal notice. The request should include reasons why the reinstatement should be
19 considered. The department will review the request for reinstatement and make recommendations
20 to the dean of the Graduate School. If the request is denied at the departmental level, the student
21 may then direct a written appeal to the dean of the Graduate School, and a final decision will be
22 made in accordance with policies established by the Graduate Council.

24 **Grievance Policy and Resolution of Conflicts**

25 **Student Complaint Policy and Procedure**

27 **ETSU Policy**

28 East Tennessee State University is committed to respecting all members of the university
29 community and providing fair treatment regarding complaints by students. The objective of the
30 Student Complaint Policy and Procedure is to ensure that concerns and complaints of
31 undergraduate or graduate students are addressed fairly and are resolved promptly. Complaints

1 usually involve actions affecting students that are alleged to be unjust, inequitable, or create
2 unnecessary hardship. A student may pursue this complaint procedure if he or she believes a
3 problem is not governed by other complaint or appeal procedures at the university:
4 <http://catalog.etsu.edu/content.php?catoid=5&navoid=136#Complaint Policy and Procedure> and
5 the ETSU catalogs <http://www.etsu.edu/reg/catalog/> for other examples). The Colleges of
6 Medicine and Pharmacy have their own student complaint policies; complaints should be directed
7 to appropriate personnel as identified by those colleges.

8 East Tennessee State University seeks to provide students, staff and faculty members with
9 a safe and secure learning environment, free of crime and/or violations motivated by
10 discrimination, sexual and other bias-related harassment. There are two important complaint
11 policies not governed by the Student Complaint Policy and Procedure: Sexual, Racial, and Other
12 Harassment and Hate Crimes and Bias-Related Incidents. These types of complaints should be
13 filed with the Special Assistant to the President for Equity and Diversity/Affirmative Action Director
14 or, when a charge is by one student against another student, with the Dean of Students according
15 to the procedures described in those policies.

17 **Procedure**

18 When a concern occurs, the student is encouraged to discuss it with the appropriate faculty
19 member or administrator. Often a resolution or an answer can be attained informally. If an
20 informal approach is neither successful nor advisable, the student should use the Student
21 Complaint Policy and Procedure. The procedure for filing student complaints governed by this
22 policy is as follows:

24 **Step 1:**

25 To submit a complaint a student must complete the official Student Complaint Form
26 <http://www.etsu.edu/students/currentstudents/forms.aspx> and send it via email attachment, within
27 ten working days of the date of the initiating event, to the chair or director most directly involved (if
28 the complaint is directed against the chair or director, it should be referred to the dean of the
29 college or next level administrator). The chair or director will attempt to determine the validity of
30 the complaint, and in the case of a valid complaint, seek resolution, including administrative
31 action. He or she will communicate his or her decision on the *Student Complaint Form* and make
32 every effort to do so within ten working days from the conclusion of this process.

1
2 **Step 2:**

3 If a student wishes to appeal the decision made in Step 1, he or she must submit the Student
4 Complaint Appeal Form A <http://www.etsu.edu/students/currentstudents/forms.aspx> and the
5 completed *Student Complaint Form* via email attachments to the appropriate dean or
6 administrator within ten working days from the date of the decision. Undergraduate students
7 submit the materials to the dean of the college where the issue(s) arose and graduate students
8 submit to the Dean of the School of Graduate Studies. In the case of a complaint involving a
9 director, the student submits materials to the next level administrator.

10 The student will be invited to discuss the complaint with that individual, who will attempt to
11 determine the validity of the complaint and, in the case of a valid complaint, seek resolution,
12 including possible administrative action. He or she will communicate his or her decision on
13 *Student Complaint Appeal Form A* and make every effort to inform the student within ten working
14 days of the conclusion of the appeal.

15
16 **Step 3:**

17 If the student believes that he or she has not been afforded due process, the student must submit
18 Student Complaint Appeal Form B <http://www.etsu.edu/students/currentstudents/forms.aspx>
19 together with *Student Complaint Appeal Form A* and the *Student Complaint Form* via email
20 attachments to the vice president of the university division in which the complaint occurred within
21 ten working days from the date of the decision. The vice president will make the final
22 determination about the matter and communicate his or her decision on *Student Complaint Appeal*
23 *Form B* and make every reasonable effort to submit his or her decision to the student within ten
24 working days from the conclusion of this appeal. The determination will include reasons for the
25 decision and direct a remedy, if any, to the student complaint.

26
27 **Documentation**

28 A record of all complaints and their resolution will be documented at each level of the
29 review process by the appropriate administrator.

30 Revised March 2009

1 Department of Psychology Progressive Remediation/Disciplinary

2 Policies

3 (Modeled on the Progressive Disciplinary Policies of ETSU, PPP-70)

4 The purpose of this policy is to address misconduct or poor performance (other than
5 coursework performance) in a manner that ensures:

- 6 • Prompt, consistent, and fair treatment
- 7 • All legal requirements are met
- 8 • That the rights, benefits, and responsibilities of the student are articulated and protected
- 9 • That faculty supervisors/advisors follow standard remediation/discipline procedures

10
11 The Director of Clinical Training (DCT) has the delegated authority to suspend, place on
12 probation or terminate the student from the program. No supervisor/faculty advisor has the
13 authority to suspend, terminate, place on probation without prior consultation and approval from
14 the DCT. During each phase of progressive discipline, the DCT and Department Chair (Chair)
15 must be notified. All supervisors/faculty advisors must maintain appropriate and adequate
16 documentation.

17 Situations that may trigger progressive remediation/disciplinary policies include, but are not
18 limited to the following:

- 19 • Violations of established Program, Department, University, affiliated training sites, and TBR
20 policies and procedures;
- 21 • Failure to achieve and maintain standards of conduct;
- 22 • Unprofessional or unethical behavior;
- 23 • Unsatisfactory job performance;
- 24 • Non-compliance with training and graduate assistant contracts;
- 25 • Gross misconduct including, but not limited to:
 - 26 ○ Violations of the APA Code of Conduct;
 - 27 ○ Absence or habitual tardiness from duty (e.g., graduate assistant assignments);
 - 28 ○ Any act or omission which may seriously disrupt or disturb the normal operation of
29 the training program;
 - 30 ○ Theft or dishonesty, including academic and scientific misconduct;
 - 31 ○ Gross insubordination;
 - 32 ○ Destruction of university property;

- 1 ○ Falsification of records;
- 2 ○ Acts of moral turpitude;
- 3 ○ The illegal use, manufacture, possession, distribution, or dispensing of controlled
- 4 substances or alcohol;
- 5 ○ Disorderly conduct;
- 6 ○ Provoking a fight;
- 7 ○ Incompetence resulting in ineffectiveness or public harm;
- 8 ○ Impairment due to stress, distress, psychological dysfunction, or substance use;
- 9 ○ Or other intolerable behavior.

11 **I. Remediation Process**

12 Formal remediation is not considered a punishment, but rather a tool to problem-solve and
13 improve performance. Remediation can be used to address minor conduct or performance
14 issues. The process should encourage student's understanding and concurrence on the issues
15 and encourage student's participation in developing a solution. The DCT and/or Chair will
16 provide assistance in the identification of appropriate remediation options as necessary (e.g.,
17 counseling, coaching, and training options). The psychology department will keep a written
18 record of all remediation discussions.

19 The remediation process should include:

- 20 • A memorandum to the student sent by the DCT informing the student of the need for
21 remediation, the reason for remediation (e.g., date of incident, rule or standard
22 violated), and the consequences of not following through with remediation;
- 23 • Development of a remediation plan which includes input minimally from the primary
24 academic advisor and the student about the corrective action(s) to be taken;
- 25 • Acknowledgement of receipt of the remediation plan by the student;
- 26 • Documentation of the remediation plan and the student's acknowledgement of the
27 remediation plan (maintained in the student's departmental file);

28
29 Possible remediation options include:

- 30 • Supervisory counseling;
- 31 • Behavioral contracts;
- 32 • Reflective papers;

- Informal discussions;
- Formal verbal warning;
- Referral for professional counseling;
- Continuing education (e.g., workshops)

II. Disciplinary Process

If remediation is not successful in solving the problem, then disciplinary processes may be initiated. Prior to any disciplinary step, the supervisor/faculty member must contact the DET before proceeding.

The disciplinary sequence may involve:

- A written warning;
- Probation for up to six months (which may include restriction of duties);
- Suspension of graduate assistantship;
- Suspension from the program;
- Termination from the program;

A. Written warning should include:

- Details and history;
- Rules or standards violated;
- Improvement required;
- Time table for improvement;
- Consequences of not improving;
- Signature of primary academic advisor;
- Student acknowledgement;

A copy of the written warning will be placed in the student's official departmental file.

B. Probation for up to six months.

Failed remediation may result in additional remediation or the student being placed on probation. If the primary academic advisor believes that failed remediation should result in probation, she or he is expected to provide the DCT with:

- The details and history of the student's failed efforts at remediation;

- The rules or standards violated;
- The improvement required;
- Supporting documentation.

The student will be notified in writing of a decision in favor of probation. A copy of the notification and supporting documents will be placed in the student's official departmental file. The primary academic advisor is expected to meet regularly with the student to gauge student progress during the probationary period.

C. Suspension of graduate assistantship or suspension from the program

For **conduct** violations only; not academic performance.

If the primary academic advisor believes that after failed remediation and failed disciplinary actions such as written warning and probation, the student should be suspended from the graduate assistantship responsibilities or the program, she or he is expected to provide the DCT and Department Chair with:

- The details and history of the student's failed efforts at remediation;
- The rules or standards violated;
- The improvement required;
- Supporting documentation.

The student will be notified verbally and in writing of a decision in favor of suspension from the DCT and signed by the Department Chair. A copy of the notification and supporting documents will be placed in the student's official departmental file. The primary academic advisor is expected to meet regularly with the student to gauge student progress during the probationary period. All students are entitled to a grievance hearing.

D. Termination from the Program

In cases where students have failed to correct problems after previous attempts at remediation and disciplinary processes, and/or the problem is severe, termination from the program may be justified. In the event of a decision for termination, a written request will be submitted to the Graduate Dean by the DCT (signed by the Department Chair) and will include:

- The details and history of the student's failed efforts at remediation;
- The rules or standards violated;
- The improvement required;
- Supporting documentation (including prior discipline, counseling, training);

The request is reviewed by the Graduate Dean who consults as appropriate with legal affairs, disability services, etc. A formal termination letter to the student will be written by the DCT and signed by the Chair and the Graduate Dean. A copy of the letter and documentation will be placed in the student's official departmental and Graduate School files. All students are entitled to a grievance hearing.

III. Primary Academic Advisor Investigations and Documentation

Primary academic advisors must investigate a problem or incident before determining what counseling or discipline is warranted. Primary academic advisors should investigate the facts and circumstances surrounding the problem, determine the rules broken, and the work practice not followed. Advisors in their investigation should review work products, interview witnesses, review timesheets, and attempt to directly observe the problem/violation.

IV. Right to Rebuttal

Students are permitted to submit a written rebuttal to their supervisor during each phase of the disciplinary process. Written rebuttals must be submitted formally to the DCT. All documents will be reviewed and placed in the student's official departmental file. Documentation regarding disciplinary procedures remains a permanent part of the student's official departmental file.

V. To facilitate the process, faculty may:

- Gather examples of poor work product or misconduct;
- Observe firsthand the situation or misconduct, if possible, or quote sources of information;
- Determine what rule was broken or research which practice or policy was not followed;
- Plan a private meeting with the student;

- Have an additional faculty or staff member (committee member) meet with the student as a witness;
- Keep a record of problems, dates, correct behavior expected, time-line for correction;
- Develop a list of training opportunities for the student;
- Offer the student the help of the university's Employee Assistance Program or Student Counseling Center to assist with problems that may be affecting work performance and/or attendance;
- Ask for the student's perception and ideas;
- Explain that further disciplinary consequences may occur if the problem is not corrected;
- Document all meetings; save emails or other written/electronic communications; transcribe voice messages;

Faculty Grievances

Please consult the Faculty Handbook for the entire text relating to these matters of Complaints and Grievances: <http://www.etsu.edu/senate/facultyhandbook/>

1.4 Employee Grievance/Complaint Procedures

1.4.1 Purpose

The purpose of these procedures is to provide a clear, orderly, and expedient method through which all employees of East Tennessee State University may process bona fide grievances or complaints.

1.4.2 Policy Statement

It is the intention of East Tennessee State University to provide an effective process for the resolution of problems arising from the employment relationship or environment. To this end, a formal grievance/complaint procedure has been established for the use and benefit of all employees. It is the responsibility of administrative, academic, and line supervisors to inform and make available to all employees information concerning these procedures. When an employee believes a condition of employment affecting him/her is unjust, inequitable or a hindrance to the effective performance of his/her employment responsibilities, he/she should seek resolution through this mechanism without fear of

1 coercion, discrimination or reprisal. The objective of East Tennessee State University's
2 Grievance/Complaint Procedures is to make every effort to resolve a grievance/complaint
3 at the lowest possible step. Toward this end, faculty are encouraged to communicate
4 openly with their immediate supervisors and to consult with a trained procedural consultant
5 (so designated by the Faculty Concerns and Grievance Committee for the university and
6 trained appropriately for the position) for clarity about definitions of grievances and
7 complaints and procedures for advancing either.

8 9 **1.4.3 Scope**

10 These procedures apply to all employees and cover all employment related issues with the
11 exception of Sexual Harassment, Affirmative Action Matters, and Tenure. The institution
12 has a separate set of guidelines for the processing of Sexual Harassment complaints and
13 matters involving Affirmative Action (i.e., unlawful discrimination on the grounds of race,
14 religion, color, sex, age, handicap, nation origin, or veteran status). Sexual Harassment
15 complaints should be filed with those individuals outlined in the Sexual Harassment Plan
16 while Affirmative Action matter should be filed with the Affirmative Action Director.
17 Furthermore, a separate Committee on Promotion/Tenure appeals exists for the
18 disposition of matters involving tenure or promotion Moreover, an employee may choose
19 to utilize these procedures for review by the grievance committee (established pursuant to
20 the within guidelines) in the following situations:

21
22 **1.4.3.1** Actions relating to the suspension of employees for cause or termination in
23 violation of an employment contract which fall under TBR Policy 1:06:00:05 (cases subject
24 to TUAPA); or,

25
26 **1.4.3.2** Actions related to TBR Policy 5:02:03:00, Section III. 16. b. (2)(suspension of
27 tenured faculty). Furthermore, the University may choose to utilize these procedures for
28 review by the grievance committee (established pursuant to the written guidelines) when
29 resolving a matter initiated pursuant to TBR Policy 5:02:02:00 (faculty promotion).

30 31 **1.4.4 Definitions**

32 There are two (2) types of matters that may be addressed by these procedures:
33

1 (1) grievances subject to committee review; and,

2
3 (2) complaints that must be resolved without committee review.
4

5 **a. Grievance - (committee review available)**

6 An employee may only grieve those matters which result from any action the Institution
7 has taken against the employee which:

8 (1) Violates school or TBR policy, or involves an inconsistent application of those
9 policies; or,

10 (2) Violates any constitutional right including, but not limited to the First, Fourth, or
11 Fourteenth Amendments to the Federal Constitution and specifically, but again not
12 limited to, actions that hamper free speech, freedom of religion, the right to
13 association, personal and professional property rights, provides for improper search
14 and seizure, or denies constitutionally required notice or procedures.
15

16 **b. Complaints (committee review not available)**

17 A complaint is a concern an employee wants to discuss with supervisory personnel in an
18 effort to resolve the matter. Personnel actions such as performance evaluations, rates of
19 pay, position reclassification, or position termination due to reduction in force are not
20 defined as complaints. In effect, in order for a personnel action such as those described in
21 the preceding paragraph to be formally challenged by an employee or faculty member, the
22 action must be the result of an alleged violation of school or TBR policy, an inconsistent
23 application of those policies, a violation of any constitutional right, et. seq. (Note: bases for
24 challenges are listed in Section III ["Scope"] and Section IV ["Definitions"]). This section
25 recognizes that the informal "give-and-take" traditionally associated with the employment
26 process will not be altered and that an employee should feel free to express dissatisfaction
27 with the working environment; however, there is an appropriate framework for expressing
28 personal dissatisfaction, which this policy attempts to outline.
29

30 **121.4.4.2 Employees**

31 All references to the term "employee(s)" contained in these procedures only include

1 administrators, faculty (full-time or temporary contracts), professionals, clerical, and
2 support personnel. Probationary employees are also included in the definition; however,
3 student workers, graduate assistants, adjunct faculty, and temporary workers are not
4 included in the definition of employee as it pertains to the grievance procedure.
5
6

7 **1.4.4.3 Grievance Committee**

8 There are two grievance committees utilized by the University. The two types are the
9

10 (1) Faculty Concerns and Grievances Committee, and
11

12 (2) Non-Faculty Grievance Committee.
13

14 **a. Faculty Concerns and Grievances Committee**

15 The Faculty Concerns and Grievance Committee shall
16

17 (a) designate a panel of three faculty members to serve the university as procedural
18 consultants;
19

20 (b) participate with the University Attorney in training procedural consultants in the
21 definitions, policies, and procedures related to filing both grievances and complaints;
22

23 (c) serve, when asked by the faculty member, as a consultative body for the
24 development of any grievance or complaint, subject to guidelines and restrictions of this
25 process stated in 1.4.10 – Faculty Senate Policy for Faculty Grievances, Sections 1 & 2;
26 and
27

28 (d) shall only consider and forward recommendations to the President on those matters
29 which meet the criteria for grievances—with those problems which are deemed complaints
30 to have their ultimate resolution through the Office of the President of the University.
31

32 **b. Non-Faculty Grievance Committee – omitted from this document; see ETSU,**
33 **Human Resources for entire text)**

1
2 **1.4.5 Responsibility for Implementation and Compliance**

3 The President of the University has ultimate responsibility for the implementation of these
4 procedures and is the final decision maker in the resolution of complaints. The final
5 decision making authority in any action involving a grievance, pursuant to TBR Policy
6 1:02:11:00, resides with the Chancellor of the Tennessee Board of Regents.

7
8 **1.4.6 General Rules of Implementation**

9 The primary responsibility for resolving grievable matters rests with the employee/faculty
10 member and his or her immediate supervisor. Initial steps should always be taken to
11 resolve disputes at this level before proceeding to the following rules of implementation.
12 When a concern or issue has not been resolved informally, and the concern might be
13 foreseen to result in a formal complaint or grievance, the immediate supervisor will refer
14 the faculty member to an appropriate procedural consultant or consultants for consultation
15 and guidance by giving the faculty member a referral card developed and provided by
16 Faculty Senate.

17
18 **1.4.6.1** Employees using these procedures shall be entitled to do so without fear of
19 retaliation, interference, coercion or discrimination.

20
21 **1.4.6.2** A grievance which is the subject of an action filed with an external body shall not
22 be processed through the University's grievance procedures. The term external body
23 includes a court or federal or state administrative body such as the Equal Employment
24 Opportunity, Office of Civil Rights, or Tennessee Human Rights Commission.

25
26 **1.4.6.3** A grievance/complaint must be presented to the employee's immediate supervisor
27 within ten (10) working days after the occurrence of the incident. Any claim not presented
28 within the time frame provided shall be deemed to have been waived. For repetitive or
29 ongoing incidents or circumstances, the grievance/complaint must be filed within ten (10)
30 working days of the last occurrence of such incident or circumstance or of the discovery by
31 the employee of the occurrence. This policy presumes that all employees or faculty
32 members will use good faith and diligence in the discovery of grievable matters.
33

1 **1.4.6.4** The grievant/complainant is entitled to be accompanied by an advisor at each step
2 of the procedure; however, the advisor may not act as an advocate on behalf of the
3 individual.

4
5 **1.4.6.5** Employees shall be given the opportunity to pursue grievances/complaints during
6 their assigned work time.

7
8 **1.4.6.6** The President may grant reasonable extensions of the applicable time limits at
9 each stage of the procedure upon the timely showing of good cause. The request for an
10 extension must be in writing. The approval or denial of the request shall also be in writing.

11
12 **1.4.6.7** Supervisors to whom a grievance is raised and the Grievance Committee may
13 consult the Director of Human Resources for advice on resolving grievances (except for
14 grievances involving an action taken against the grievant by the Director of Human
15 Resources).

16
17 **1.4.6.8** Copies of all written and associated documentation will be filed in the Office of
18 Human Resources.

19
20 **1.4.6.9** There shall be a one-semester time limit placed on all grievable matters. In
21 essence, no grievance may be heard unless the grievable incident(s) occurred within the
22 semester immediately preceding the current semester or within the current semester.

23 24 **1.4.7 Grievance/Complaint Process**

25 26 **1.4.7.1 Steps for Filing a Grievance Only**

27 28 **1.4.7.1.1 Discussion with Immediate Supervisor**

29
30 A grievance must be brought to the attention of the employee's immediate supervisor
31 within twenty (20) working days after the employee becomes aware of the problem. The
32 employee should state the basis for the grievance and the corrective action desired in
33 temperate and reasonable terms. The employee and the supervisor shall discuss the

1 grievance in an attempt to resolve the matter in a mutually satisfactory manner. The
2 supervisor shall conduct any necessary or appropriate investigation and inform the
3 employee of a decision based upon full and fair consideration of all the facts within five (5)
4 working days of the initial discussion. The immediate supervisor will assure that the
5 decision is clearly communicated to, and understood by, the employee. If the employee is
6 satisfied with the decision, no additional action is required. If the employee is not satisfied,
7 the employee may proceed to Step 2 and will be referred to an appropriate procedural
8 consultant or consultants for consultation and guidance by giving the faculty member a
9 referral card developed and provided by the Faculty Senate. If no decision is
10 communicated to the employee within five (5) working days of the initial discussion, the
11 employee may proceed directly to Step 2.

12
13 **1.4.7.1.2 Discussion with Higher-Level Supervisor** If the employee and the immediate
14 supervisor are not able to reach a mutually satisfactory resolution to the grievance, the
15 employee may proceed to discuss the matter with the next-higher-level supervisor within
16 ten (10) working days of the date of the decision of the immediate supervisor. Failure to
17 comply with Step 2 in a timely manner shall be deemed a waiver by the employee for this
18 particular occurrence and the grievance may not be raised again. The next-higher-level
19 supervisor and the employee shall then follow the procedures required in Step 1. If the
20 employee is satisfied with the decision reached by the next-higher level supervisor, no
21 additional action is required. If the employee is not satisfied, the employee may proceed to
22 Step 3; if the employee has not already seen a procedural consultant, she or he will be
23 referred to an appropriate procedural consultant or consultants for consultation and
24 guidance by giving the faculty member a referral card developed and provided by the
25 Faculty Senate. If no decision is communicated to the employee within five (5) working
26 days of the initial discussion between the employee and the next-higher-level supervisor,
27 the employee may proceed directly to Step 3.

28
29 **1.4.7.1.3 Written Grievance Statement**

30 If the employee and the next-higher-level supervisor are not able to reach a mutually
31 satisfactory resolution to the grievance the employee may file a written grievance with
32 his/her vice president on the designated form, available online at:

33 <http://www.etsu.edu/humanres/documents/FacultyGrievanceForm.pdf>

1 This form shall allow the employee to clearly indicate whether she or he is filing a formal
2 grievance or complaint – or the university may choose to make available two different
3 forms, one for a grievance and one for a complaint: It is the faculty member’s responsibility
4 to make her or his own case for the problem being addressed appropriately as either a
5 grievance or a complaint as delineated in this policy. The grievance must be filed within
6 ten (10) working days of the date of the decision of the higher-level supervisor. Failure to
7 comply with Step 3 in a timely manner shall be deemed a waiver by the grievant for this
8 particular occurrence and the grievance may not be raised again A copy of the grievance,
9 along with any supporting documentation, shall be given to the immediate supervisor and
10 the next-higher-level supervisor. The vice president may request either or both supervisors
11 to respond in writing to the grievance statement. If the employee is satisfied with the
12 decision reached by the vice president no additional action is required. If the employee is
13 not satisfied the employee may proceed to Step 4. If no decision is communicated to the
14 employee within fifteen (15) working days after filing the grievance with the vice president,
15 the employee may proceed directly to Step 4.

16
17 **1.4.7.1.4 Written Grievance Statement** to be received by the President and Grievance
18 Committee If the employee and the vice president are unable to reach a mutually
19 satisfactory resolution the employee may file with the President of the institution. Any
20 grievant, who may otherwise be entitled to a hearing before the grievance committee, may
21 waive such a hearing and accept the findings of the President. Any faculty member
22 considering such a waiver shall first be referred to an appropriate procedural consultant or
23 consultants for a consultation on the advisability of signing a waiver of this right by giving
24 the faculty member a referral card developed and provided by the Faculty Senate. Any
25 such waiver shall be in writing and signed by the grievant. The waiver should state the
26 matter involved and should expressly state that the right of the grievant to a formal hearing
27 by the Grievance Committee is knowingly and voluntarily waived. If the grievant waives
28 his/her rights to a hearing, the President shall within twenty (20)days after receipt of the
29 grievant's file, advise the grievant of the decision. The President's decision will be final and
30 shall be directed to the employee. If no decision is communicated to the employee within
31 twenty (20) working days of filing the grievance the employee may file directly with the
32 Chancellor of the Tennessee Board of Regents. If the grievant does not waive the right to
33 a hearing, the President shall, within five (5)days of receipt of the grievant's file, refer the

1 grievance and all relevant documentation to the appropriate grievance committee. Within
2 twenty (20) days after receipt of the grievant's file the committee shall advise the President
3 and the grievant of its decision. The recommendation shall be based on a full and fair
4 consideration of all the facts and circumstances. The report shall also contain a summary
5 of the committee's investigation and findings.
6

7 **1.4.7.1.5 Appeal of Grievance to the Chancellor, Tennessee Board of Regents**

8 In any case where the President makes a decision adverse to the grievant, the President
9 shall advise the grievant of his/her right to appeal the decision to the Chancellor. The
10 employee's appeal to the Chancellor must be filed within fifteen (15) working days of the
11 date of notification of the President's decision.
12

13 **1.4.7.2 Steps for Filing a Complaint Only** The steps involved in the resolution of
14 complaints follow the same procedures as those outlined for the resolution of grievances
15 with the following exceptions: a. Complaints do not include a right to a hearing or
16 adversarial proceeding before the grievance committee; and, b. The President is the final
17 decision maker involving complaints; that is, the complainant does not have the right to
18 appeal to the Chancellor of the Tennessee Board of Regents.
19

20 **1.4.8 Maintenance of Records**

21 Copies of all written grievances/complaints and accompanying responses and
22 documentation will be maintained with the Office of Human Resources for at least three(3)
23 years.
24

25 **1.4.9 Committee Membership and Selection**

26
27 **1.4.9.1** A Faculty Concerns and Grievances Committee shall serve as an advisory body to
28 advise the Senate and, through the Senate, either the Vice President for Academic Affairs
29 or the Vice President for Health Sciences on matters arising from either a concern or a
30 grievance filed by a faculty member or members. The committee shall consist of one
31 faculty senator from each college and school. An alternate may be asked, by the Senate
32 president, to sit in place of a regular committee member in those cases in which the
33 regular committee member is unable to serve or cannot be present for one or more

1 scheduled meetings. A committee member who has a particular interest in the case
2 outcome will excuse him or herself from the committee and be replaced by an alternate for
3 that hearing.

4
5 **1.4.9.2** The committee will be appointed by the Faculty Senate, as a committee of the
6 Senate. The chair shall be elected by the committee members at their first meeting of each
7 academic year.

8 9 **1.4.10 Faculty Senate Policy for Faculty Grievances**

10 All formal complaints and grievances by faculty are now governed by the East Tennessee
11 State University's Employee Grievance/Complaint Policy and Procedure(1.4).
12 Any faculty member wishing to formally challenge an administrative decision should
13 carefully follow the procedures outlined there and it is recommended that she or he consult
14 with an appropriate procedural consultant or consultants with regard to policy, procedures,
15 and rights However, faculty members occasionally want an opportunity to discuss their
16 concerns with their peers and to obtain their peers' advice, without becoming mired in
17 formal grievance procedures.

18
19 East Tennessee State University provides two avenues for such discussions/
20 consultations—either or both of which are available to all faculty members: The first is a
21 consultation with a trained procedural consultant or consultants, and the second is through
22 a formal consultation (specified and limited) with selected members of the Faculty Senate
23 Committee on Faculty Concerns and Grievances. Members of the Committee on Faculty
24 Concerns and Grievances who provide formal consultation on a case will not sit on a
25 formal grievance hearing of that case. Therefore, we recommend that the Senate
26 Committee on Concerns and Grievances will serve two functions in addition to those
27 specified in the Senate By-Laws 1.5.1.3.

28
29 1. The Committee will discuss concerns filed by individual faculty members. A concern is
30 defined as any matter that could be subject to a complaint or grievance as outlined under
31 the University's Complaint and Grievance Policy. In addition, the committee will have the
32 discretion to discuss any other matter sit deems appropriate.

1 Prior to meeting with the committee, the faculty member will submit a brief statement of
2 her/his concern. In discussing such matters, the Committee will not function as an
3 adversarial hearing board. Rather the committee members will listen to the faculty
4 member's/members' complaint and advise her/him as they see fit. They will advise the
5 faculty member about the proper way to proceed. However, the committee's deliberations,
6 since they are merely advisory, cannot become part of any formal grievance the faculty
7 member chooses to file. Deliberations will be confidential, unless all parties agree
8 otherwise. The committee will maintain no records.

9
10 2. If the faculty member chooses to file a formal grievance, the committee, in conjunction
11 with the President of the Faculty Senate, will select a five-member committee who will
12 formally hear the grievance in accordance with university policy.

13 14 **Teaching Experience**

15 **Overview**

16 Teaching experience prepares students in communication and instructional skills
17 appropriate for a variety of professional positions. The program recognizes that teaching requires
18 a synthesis and understanding of the discipline and its methodologies, which is uniquely afforded
19 by this pedagogical experience.

20 Students are given the opportunity to engage in a variety of teaching experiences. As part
21 of their required number of hours in the department, first year PhD and second year PhD
22 students may be assigned to a faculty member who requires a teaching assistant (TA) for an
23 undergraduate course offered through the department. Students may serve as a TA after
24 completion of 18 graduate hours.

25 Responsibilities of TA's include preparing and presenting lectures, assigning and grading
26 homework, and assisting in the proctoring and grading of exams. For example, there are
27 instances when a graduate student, working as the teaching assistant for a professor, may be
28 asked to present lectures to an undergraduate or first-year graduate class. Students are
29 supervised by the faculty member who is the lecturer in the course. Meetings should be arranged
30 between TAs and faculty members at the beginning of each term to discuss mutual expectations.
31 In addition, TAs may also be asked to teach a laboratory section of a course. TAs are expected to

1 make themselves available to students by maintaining weekly office hours. These hours should be
2 arranged at the start of the term and announced during the first week of classes.

4 **Teaching Assistant Policy**

5 Per university policy, a full time TA load is 20 hours per term. Of these 20 hours, it is
6 expected that at least 8 per week will be devoted to in-class activities and office hours. TA's will be
7 assigned office space. TA's will be supplied with a suitable computing infrastructure. Assignment
8 of TA's will, where possible, be with their mentor or a core faculty member in their program track,
9 at least some of the time. TA assignments may be varied for experience and will involve other
10 faculty or courses as the department needs and determines.

12 **Additional Optional Teaching Opportunities**

13 As students progress through the graduate program, opportunities may arise to teach a
14 variety of other courses, or parts of courses to undergraduates. For example, students who have
15 completed the requirements for a Master's degree are able to teach their own courses, and could
16 be hired as adjunct faculty. In this case, the student would have complete responsibility for the
17 course. These responsibilities include selecting texts, presenting lectures, assigning homework,
18 grading exams, and assigning grades.

20 **Supervision and Evaluation**

21 All TAs are supervised by an assigned faculty member. During the first week of the fall
22 semester, a meeting between the TA and faculty member is held to provide an orientation to the
23 material and teaching guidelines. Throughout the term, the faculty member and TA meet as
24 needed. At the end of the term, the TA will meet with the faculty member to review feedback and
25 overall performance.

27 **Professional Ethics**

28 Teaching assistants are expected to adhere to the same ethical standards as ETSU
29 University faculty and staff. TAs should be clear, consistent, and objective in developing
30

1 classroom policies and assigning grades to students. TAs must also maintain strictly professional
2 relationships with students at all times.

3

1 Appendices

2 Appendix A: Matriculation Progress

BENCHMARKS FOR MATRICULATION PROGRESS
Purple means adequate progress
Green means accelerated progress
Red means inadequate progress
<i>FALL (1st year)</i>
Connecting informally with faculty about thesis research ideas
Identify a thesis committee chair person
<i>SPRING (1st year)</i>
Identify a thesis committee chair person
work on thesis research question; develop chapter one outline
<i>Complete Forms: Appointment of Advisory Committee, Program of Study, Application for Candidacy</i>
Connecting informally with faculty about thesis research ideas
<i>SUMMER(1st year)</i>
work on thesis research question; develop chapter one outline; form committee
<i>Complete Forms: Appointment of Advisory Committee, Program of Study, Application for Candidacy</i>
complete chapters one and two of thesis
propose thesis and collect data
Identify a thesis committee chair person
<i>FALL (2nd year)</i>
complete chapters one and two of thesis
propose thesis and collect data
work on thesis research question; develop chapter one outline; form committee
<i>Complete Forms: Appointment of Advisory Committee, Program of Study, Application for Candidacy</i>
<i>SPRING (2nd year)</i>
complete clinic practicum;
complete all Masters degree requirements
complete comprehensive case presentation
defend thesis
<i>Complete Forms: Request to Sit for Comprehensive Case Presentation, Notification of Oral Defense, Intent to Graduate</i>
complete chapters one and two of thesis
propose thesis and collect data

SUMMER (2nd year)
defend thesis
complete comprehensive case presentation
complete clinic practicum
complete all Masters degree requirements
<i>Complete Forms: Request to Sit for Comprehensive Case Presentation, Notification of Oral Defense, Intent to Graduate</i>
propose thesis and collect data
identify prelim project chair
FALL (3rd year)
complete first semester of externship
identify dissertation chair and research question
<i>Complete Forms: Request to Sit for Comprehensive Exam, Notification of Oral Defense, Intent to Graduate</i>
defend thesis
complete comprehensive case presentation
<i>Complete Forms: Request to Begin Comprehensive Case Presentation, Notification of Oral Defense, Intent to Graduate</i>
complete clinic practicum
complete all Masters degree requirements
complete preliminary project
SPRING (3rd year)
actively write and revise literature review for dissertation
identify dissertation committee
complete preliminary project
<i>Complete PhD Forms: Appointment of Advisory Committee, Program of Study, Application for Candidacy</i>
SUMMER (3rd year)
propose dissertation
actively write and revise literature review for dissertation
identify dissertation committee
complete preliminary project
<i>Complete PhD Forms: Appointment of Advisory Committee, Program of Study, Application for Candidacy</i>
FALL (4th year)
propose dissertation by the first Monday in October
internship applications
actively write and revise literature review for dissertation
identify dissertation committee

<i>SPRING (4th year)</i>
internship interviews
complete dissertation data collection
propose dissertation (internship application delayed one year)
SUMMER (4th year)
complete dissertation data collection prior to internship
defend dissertation
Pre-Doctoral Internship
defend dissertation

1

Office Use Only
 Input on SIS: _____
 Initials: _____
 Catalog of Record: _

1 **Appendix B: School of Graduate Studies Forms**

2 **EAST TENNESSEE STATE UNIVERSITY**
 3 **SCHOOL OF GRADUATE STUDIES**
 4 Program of Study for the Master's Degree: 2012 and beyond

5 Name: _____ E # _____
 6 Student's Name (please type or print)
 7 Field of Study: Psychology Concentration: Clinical
 8 (Please Type or Print)

Course ID Number	Course Title	Grade	Credit Hours	Semester Completed or to be Completed	Transfer * Credit	Substitute For Course #	Office Use Only
PSYC5000	Broad & General Foundations in Psychology		3				
PSYC5010	Advanced History & Systems in Psychology		3				
PSYC5040	Rural Research and Practice		3				
PSYC5100	Legal and Ethical Issues in Psych		3				
PSYC5210	Statistical Methods		3				
PSYC5220	Personality and Psychotherapy Models		3				
PSYC5410	Correlation & Multiple Regression		3				
PSYC5707	Advanced Behavioral Neuroscience		3				
PSYC 5817	Introduction to Psychological Measurement		3				
PSYC5825	Psychopathology		3				
PSYC5830	Psychological Assessment I: Adult		3				
PSYC5850	Psychological Assessment II: Child		3				
PSYC5870	Interviewing Techniques in Psychology		3				
PSCY5910	Clinical Psychological Clerkship		2				
PSYC5960	Thesis		6				
Total number of hours required for degree-----			47				

9 * Non-ETSU transfer credit must be approved before it can be shown on the program of study. (Please Type or Print)
 10 Student's Signature: _____ Date: _____
 11 Approved: _____ Date: _____
 12 Advisory Committee Chair
 13 Approved: _____ Date: _____
 14 Graduate Program Coordinator
 15 Approved: _____ Date: _____
 16 Additional signature(s) if required by program
 17
 18

Office Use Only
 Input on SIS: _____
 Initials: _____
 Catalog of Record: _____

EAST TENNESSEE STATE UNIVERSITY
SCHOOL OF GRADUATE STUDIES
 Program of Study for the Doctoral Degree

Name: _____
 Student's Name (please type or print) E # _____

Field of Study: _____ Psychology _____ Concentration: _____ Clinical _____

Course ID Number	Course Title	Grade	Credit Hours	Semester Completed or to be Completed	Transfer * Credit	Substitute Course	Office Use Only
PSYC 6600	Rural Case Oriented Learning & Preceptorship		3				
PSYC6870	Evidence-based Interventions		3				
PSYC7000	Doctoral Preliminary Project		3				
PSYC7010	Clinical Psychology Practicum		5				
PSYC7100	Primary Care Psychology I		3				
PSYC7110	Primary Care Psychology II		3				
PSYC7500	Cultural Anthropological Application to Rural Practice		3				
PSYC7910	Clinical Externship		4				
PSYC7960	Dissertation		12				
PSYC7980	Pre-Doctoral Internship		3				
One of the following: PSYC 5303 PSYC 5407 PHYT 6102	Psychopharmacology Pathophysiology Psychopharmacology		3-4				
PSYCXXX	Guided Elective		3				
PSYCXXX	Guided Elective		3				
Total number of hours required for degree-----			51-52				

* Non-ETSU transfer credit must be approved before it can be shown on the program of study. (Please Type or Print)

Student's Signature: _____ Date: _____

Approved: _____ Date: _____
 Advisory Committee Chair

Approved: _____ Date: _____
 Graduate Program Coordinator

Additional signature(s) if required by program
 These forms are updated periodically on the graduate school website. Please go to
www.etsu.edu/gradstud/forms for an up-to-date version.

**EAST TENNESSEE STATE UNIVERSITY
SCHOOL OF GRADUATE STUDIES**

Reset Form

**THE APPOINTMENT OF AN ADVISORY COMMITTEE
FOR THE DOCTORAL OR MASTER'S DEGREE**

Print Form

Student Name _____ E# _____
(Please type or print)

Admitted to graduate school in the _____ semester of _____
(Fall/Spring/Summer) (Enter year of admission)

Field of Study _____

Concentration _____

Option: Thesis Non Thesis

Degree _____

NOTE: The student is responsible for scheduling a conference with the chair or graduate coordinator of his/her major department to nominate an advisory committee. It is the responsibility of the student to present this appointment form to the department chair or graduate coordinator and to all committee members for signatures and to file this form with the School of Graduate Studies.

The members of the student's advisory committee as indicated below were designated during a conference

with the student on _____ Date _____ Graduate Coordinator _____

Faculty signatures affixed below constitute acceptance of the advisory committee assignment. The chair of the advisory committee or the graduate coordinator is responsible for reviewing the student's program and ensuring that it fulfills program requirements.

				Office Use Only		
Committee Names and Phone Numbers (Please type or print)		Committee Signatures and Dates		ID	Grad Faculty Status	Expiration Date
Chair, Advisory Committee	Phone Number	Signature	Date	E#		
Committee Member	Phone Number	Signature	Date	E#		
Committee Member	Phone Number	Signature	Date	E#		
Committee Member	Phone Number	Signature	Date	E#		
Committee Member	Phone Number	Signature	Date	E#		

Approved _____ Date _____
Dean, School of Graduate Studies

**EAST TENNESSEE STATE UNIVERSITY
SCHOOL OF GRADUATE STUDIES**

Reset Form

Application for Candidacy for the Master's Degree

Print Form

I, _____, hereby apply for
Student Name (Type or print) E#

admission to candidacy for the Master of _____

degree at East Tennessee State University. To the best of my knowledge, I have completed all of the prerequisites for

admission to candidacy. I intend to do my graduate work under the _____ option.

Thesis or Coursework

Graduate Major _____ Catalog of Record _____

Concentration _____

Conditional Admission: Yes No Conditions met: Yes No

(Conditions for admission must be met before student can be admitted to candidacy).

The attached program of study has been planned with the guidance of the chair of my advisory committee or with the graduate coordinator in my program. In addition, I have met all the conditions of my admission.

Second Master's Degree An approved program of study for the other degree is on file.

Signature of Applicant _____

Signature of Committee Member _____

Graduate Coordinator _____

-For Graduate School Office Use Only-

Program checked against catalog requirements _____ Date _____ Grade Point Average _____

Approved by: _____ Date _____
Graduate Analyst

Approved by: _____ Date _____
Dean, School of Graduate Studies



EAST TENNESSEE STATE UNIVERSITY

School of Graduate Studies

Box 70720
Johnson City, TN 37614-1710
(423) 439-4221 phone or (423) 439-5624 fax

Reset Form

MEMORANDUM OF ORAL DEFENSE

TO: School of Graduate Studies

FROM: _____

SUBJECT: Notification of Oral Examination for Thesis or Dissertation and Graduate Faculty Representative

DATE: _____

Student's Name: _____ E#: _____

Email: _____

Degree: _____ Dept. Campus Box: _____

Date of Exam: _____ Time: _____

Building: _____ Room #: _____

Chair, Advisory Committee Phone Number Fax Number

Graduate Coordinator Phone Number Fax Number

Important Information

The department is responsible for sending a copy of the student's abstract to Graduate Faculty Representative (Outside Observer) at least ten days before the defense. In case of cancellation, the department is responsible for notifying the Graduate Faculty Representative and the appropriate Graduate Studies Liaison.

The Graduate Faculty Representative is not considered a part of the examining committee, does not vote, but must complete the NARRATIVE REPORT form and return it to the School of Graduate Studies immediately upon completion of the exam.

- For Graduate Studies Use Only -

The Graduate Faculty Representative is: _____

Department: _____

Phone: _____ Box: _____ Fax: _____

Graduate Program Specialist Phone E-Mail

Scheduled By: _____ Date: _____

1
2
3
4
5
6

1 EAST TENNESSEE STATE UNIVERSITY
2 SCHOOL OF GRADUATE STUDIES
3 RESULTS OF DEFENSE OF THESIS OR DISSERTATION RESEARCH
4

5 Student Name, _____ E # _____
6 (Type or Print)

7 Field of Study _____
8

9 Concentration _____ Degree _____

10 The above candidate has completed the required examination(s) as checked below:

	Date Held	Passed	Conditional Pass	Failed
11 1. Master's Thesis Defense	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12				
13 2. Doctoral Dissertation Defense	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14				
15				

16 Signatures of Examining Committee

17
18 Chair, Advisory Committee _____

19
20 Committee Member _____

21
22 Committee Member _____

23
24 Committee Member _____

25
26 Committee Member _____

27
28 Remarks or Conditions

29
30

**EAST TENNESSEE STATE UNIVERSITY
SCHOOL OF GRADUATE STUDIES
Notice of Intention to Graduate**

Print Form

Reset Form

You should deliver this form to Burgin Dossett Hall, Rm 309, or mail/fax it to the School of Graduate Studies as shown at the bottom of this document. It is your responsibility to ensure this document arrives at the School of Graduate Studies Office by the specified deadline date posted each term. If you do not submit your intent on time, you will not be considered for graduation and must file a new intent for the following graduation term.

ON THE LINE BELOW, CLEARLY TYPE OR PRINT YOUR NAME AS YOU WANT IT TO APPEAR ON YOUR DIPLOMA

Office Use Only	
Input / Initials	_____
Catalog of Record	_____
College	_____
Program	_____
Concentration	_____
Start Date	_____
Grad Program Specialist	_____

Name _____

E# _____

Telephone Number _____

Contact Information

Students are now responsible for maintaining a current email address. You should verify and correct your address and phone number on GoldLink. Please be advised that incorrect information may result in the loss of valuable information/materials, (Diploma, Cap and Gown, etc.) The Graduation Office is not responsible for loss due to a student's failure to update this address.

Invitations

To order invitations for the Commencement Ceremony please contact: BALFOUR 1-877-225-3687.

Check relevant degree or certificate below. (Note: Certificate earners do not participate in the graduation commencement ceremony.)

GRADUATE DEGREE

GRADUATE CERTIFICATE

- Master of Accountancy
- Master of Allied Health
- Master of Arts
- Master of Arts in Liberal Studies
- Master of Arts in Teaching
- Master of Business Administration
- Master of City Management
- Master of Education
- Master of Fine Arts
- Master of Professional Studies
- Master of Public Administration
- Master of Public Health

- Master of Science
- Master of Science in Environmental Health
- Master of Science in Nursing
- Master of Social Work
- Specialist in Education
- Doctor of Audiology
- Doctor of Education
- Doctor of Nursing Practice
- Doctor of Philosophy
- Doctor of Physical Therapy
- Doctor of Public Health

- Archival Studies
- Biostatistics
- Business
- Economic Development
- Emerging Technology
- Entrepreneurial Leadership
- Epidemiology
- Gerontology
- Forensic Document Analysis
- Health Care Management
- Health Care Translation and Interpretation
- Post Master's Nursing
- School Library Professional
- Storytelling Certificate
- Teaching English as a Second Language
- Urban Planning

Semester in which requirements for the degree will be completed: Semester _____ Year _____

Graduate Major _____

Concentration _____

I have read the Notice of Intention to Graduate and understand that if I do not satisfy the degree requirements for the above stated semester, I must submit a new form in the next term and every applicable term thereafter.

Signature _____ Date _____

Print Name _____

DETAILS OF CAP AND GOWN

- | Height | Weight |
|----------------------------------------|----------------------------------------|
| <input type="checkbox"/> 4' 10 - 5' 00 | <input type="checkbox"/> Under 250 |
| <input type="checkbox"/> 5' 01 - 5' 03 | <input type="checkbox"/> 250 - 275 |
| <input type="checkbox"/> 5' 04 - 5' 06 | <input type="checkbox"/> 276 - 281 |
| <input type="checkbox"/> 5' 07 - 5' 09 | <input type="checkbox"/> 282 - above |
| <input type="checkbox"/> 5' 10 - 6' 00 | <input type="checkbox"/> Not Attending |
| <input type="checkbox"/> 6' 01 - 6' 03 | |

East Tennessee State University, School of Graduate Studies



Electronic Theses and Dissertations

School of Graduate Studies at East Tennessee State University

Checklist of Requirements

- [] Defend your manuscript successfully to your graduate advisory committee.
- [] Get agreement from your committee to release your manuscript for review by the School of Graduate Studies.
- [] Fill out a Manuscript Review Form.
- [] Have your committee members sign the authorization section of the Manuscript Review Form.
- [] Fill out an ETSU ETD Release Form and a UMI ETD Release Form.
- [] Give the Manuscript Review Form and the two release forms to the Graduate School.
- [] If your research was reviewed by the IRB, turn in a copy of the compliance letters from the IRB.
- [] Pay your microfilming fee to the Business Office, 2nd floor, Dossett Hall (\$63.51 for theses, \$74.46 for dissertations).
- [] Give a copy of the receipt for the microfilming fee to your Program Specialist in the Graduate School.
- [] Connect to the ETD Manager web site (<http://etd-submit.etsu.edu>) and create your activity account.
- [] Login to your account and complete the online profile.
- [] Convert your manuscript into PDF format using Adobe Acrobat software.
- [] Login to your account and submit your converted manuscript file by the initial review deadline (listed in the *ETSU Graduate Catalog* and the *Schedule of Classes*.)

If you have done all this, you have met the requirements for the initial review deadline. The Graduate School readers will review your manuscript and either recommend its approval or return it to you via email, with comments.

You may correct your original manuscript, convert to PDF, and resubmit as many times as are needed. You must, however, meet the approval deadline or your graduation will be delayed. When it is approved, you will be notified via email.

- [] Resubmit your manuscript as many times as needed, but earn approval before the approval deadline.
- [] If you are a doctoral candidate, fill out and turn in to the Graduate School the *Survey of Earned Doctorates*.
- [] Celebrate.

2
3

1 **Appendix C: Clinical Capstone/Prelim Project Forms**

2 **EAST TENNESSEE STATE UNIVERSITY**
3 **DEPARTMENT OF PSYCHOLOGY**
4 **CLINICAL GRADUATE PROGRAM**
5 **FORM TO REQUEST TO SIT FOR THE CLINICAL CAPSTONE PROJECT**
6 **AND APPOINTMENT OF THE ADVISORY COMMITTEE**
7

8 STUDENT: _____ ID#: _____
9 (Print)

10 Case Type: ___ Vignette Provided ___ Actual Case of Student ___ Actual Case of
11 Supervisor
12

13 Client Age: _____ ___ Male ___ Female ___ Low SES ___ Middle SES ___ High
14 SES
15

16 Client Race/Ethnicity:
17

18 _____
19 Presenting Problems:
20 _____
21 _____
22 _____
23 _____
24 _____
25

26 Axis I: _____

27 Axis II: _____

28 Axis III: _____

29 Axis IV: _____

30 Axis V: _____
31

32 Key Elements of Client History:
33 _____
34 _____
35 _____
36 _____
37 _____
38

39 Key Elements of Family/Social History:
40 _____
41 _____
42 _____
43 _____
44 _____
45 _____
46

1 Signatures affixed below constitute acceptance of the advisory committee assignments and case
2 selection.
3
4

5 _____
6 Chair, Advisory Committee (Print) Signature Phone number Date

7
8 _____
9 Chair, Advisory Committee (Print) Signature Phone number Date

10
11 _____
12 Chair, Advisory Committee (Print) Signature Phone number Date
13

14
15 If desirable, a Clinical Supervisor may be named and consulted by the student in preparation for the Exam.

16 _____
17 Consulting Clinician (Print) Signature Phone number Date

18
19 _____
20 Student (Print) Signature Phone number Date

21
22 Approval Granted: ___ Yes ___ No If No, reason:
23
24 _____
25

26
27 _____
28 Director of Clinical Training (Print) Signature Phone number Date
29
30
31
32
33
34
35
36
37
38

**EAST TENNESSEE STATE UNIVERSITY
DEPARTMENT OF PSYCHOLOGY
CLINICAL GRADUATE PROGRAM
RESULTS OF THE CLINICAL CAPSTONE PROJECT**

STUDENT: _____ ID#: _____
(Print)

WRITTEN PRESENTATION

- 1) the integration of case/client background and history;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 2) symptoms and presenting problems;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 3) diagnostics and assessment;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 4) theoretical framework, which includes at least two alternate theoretical conceptualizations;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 5) treatment considerations, including evidence based approaches;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 6) treatment plan, including short, mid-range, and long-term goals;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 7) individual and cultural differences;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 8) ethical issues and,
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 9) outcome information and assessment.
____ PASS ____ CONDITIONALLY PASS ____ FAIL

ORAL PRESENTATION

- 1) the integration of case/client background and history;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 2) symptoms and presenting problems;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 3) diagnostics and assessment;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 4) theoretical framework, which includes at least two alternate theoretical conceptualizations;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 5) treatment considerations, including evidence based approaches;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 6) treatment plan, including short, mid-range, and long-term goals;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 7) individual and cultural differences;
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 8) ethical issues and,
____ PASS ____ CONDITIONALLY PASS ____ FAIL
- 9) outcome information and assessment.
____ PASS ____ CONDITIONALLY PASS ____ FAIL

Notes:

Chair, Advisory Committee (Print)	Signature	Date
Committee Member (Print)	Signature	Date
Committee Member (Print)	Signature	Date
Director of Clinical Training (Print)	Signature	Date

Results Accepted: Yes No

If No, reason: _____

**EAST TENNESSEE STATE UNIVERSITY
DEPARTMENT OF PSYCHOLOGY
CLINICAL GRADUATE PROGRAM**

**FORM TO DOCUMENT APPOINTMENT OF THE
PRE-DOCTORAL PRELIMINARY PROJECT ADVISORY COMMITTEE**

STUDENT: _____ ID#: _____
(Print)

NOTE: See Student Handbook for Full Requirements.

Signatures affixed below constitute acceptance of the advisory committee assignments.

_____	_____	_____	_____
Chair, Advisory Committee (Print)	Signature	Phone number	Date
_____	_____	_____	_____
Committee Member (Print)	Signature	Phone number	Date
_____	_____	_____	_____
Committee Member (Print)	Signature	Phone number	Date
_____	_____	_____	_____
Committee Member (Print)	Signature	Phone number	Date

If needed, an additional consulting (non-voting) committee member may be named (see above and Handbook).

_____	_____	_____	_____
5 th Committee Member (Print)	Signature	Phone number	Date
_____	_____	_____	_____
Student (Print)	Signature	Phone number	Date

Approval Granted: ___ Yes ___ No If No, reason: _____

_____	_____	_____	_____
Director of Clinical Training (Print)	Signature	Phone number	Date

1
2
3 **EAST TENNESSEE STATE UNIVERSITY**
4 **DEPARTMENT OF PSYCHOLOGY**
5 **CLINICAL GRADUATE PROGRAM**
6

7 **PRE-DOCTORAL PRELIMINARY PROJECT PROPOSAL MEETING OUTCOME**
8

9 STUDENT: _____ ID#: _____
10 (Print)

11 **PROPOSAL MEETING RESULTS**

12 Note: See Student Handbook.
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33

34 _____
35 _____
36 _____
37 Chair, Advisory Committee (Print) Signature Phone number Date

38 _____
39 _____
40 Student Name (Print) Signature Phone number Date

41 _____
42 _____
43 _____
44 Results Accepted: ___ Yes ___ No If No, reason: _____

45 _____
46 _____
47 _____
48 Director of Clinical Training (Print) Signature Phone number Date
49

**EAST TENNESSEE STATE UNIVERSITY
DEPARTMENT OF PSYCHOLOGY
CLINICAL GRADUATE PROGRAM**

RESULTS OF THE PRE-DOCTORAL PRELIMINARY PROJECT DEFENSE

STUDENT: _____ ID#: _____
(Print)

DEFENSE MEETING RESULTS

The Student ___ PASSED ___ CONDITIONALLY PASSED ___ FAILED the Written Component.

The Student ___ PASSED ___ CONDITIONALLY PASSED ___ FAILED the Oral Component.

Notes:

Chair, Advisory Committee (Print) Signature Phone number Date

Committee Member (Print) Signature Phone number Date

Committee Member (Print) Signature Phone number Date

Committee Member (Print) Signature Phone number Date

Results Accepted: ___ Yes ___ No If No, reason: _____

Director of Clinical Training (Print) Signature Phone number Date

**EAST TENNESSEE STATE UNIVERSITY
SCHOOL OF GRADUATE STUDIES
Department of Psychology: Clinical Psychology
THE APPOINTMENT OF AN ADVISORY COMMITTEE
FOR THE DOCTORAL DEGREE**

Student Name: _____ E# _____

Admitted to graduate school in the _____ semester of _____
(Fall/Spring/Summer) (Enter year of admission)

Field of Study: **Psychology** _____

Concentration: **Clinical Psychology** _____

NOTE: The student is responsible for scheduling a conference with her or his Primary Academic Advisor to nominate an advisory committee. It is the responsibility of the student to present this appointment form to the Director of Clinical Training and to all committee members for signatures and to file this form with the Executive Aide for Clinical Psychology who will submit the form for filing with the School of Graduate Studies.

Faculty signatures affixed below constitute acceptance of the advisory committee assignment. The Primary Academic Advisor is responsible for reviewing the student's program and ensuring that it fulfills program requirements.

Committee Names and Phone Numbers		Committee Signatures and Dates		ID
Chair, Advisory Committee	Phone Number	Signature	Date	E#
_____	_____	_____	_____	_____
Committee Member	Phone Number	Signature	Date	E#
_____	_____	_____	_____	_____
Committee Member	Phone Number	Signature	Date	E#
_____	_____	_____	_____	_____
Committee Member	Phone Number	Signature	Date	E#
_____	_____	_____	_____	_____
Committee Member	Phone Number	Signature	Date	E#

Grad Faculty Status	Expiration Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Approved Director of Clinical Training Date

Approved Dean, School of Graduate Studies Date

1 EAST TENNESSEE STATE UNIVERSITY
2 SCHOOL OF GRADUATE STUDIES
3 Department of Psychology: Clinical Psychology
4 Application for Candidacy for the Doctoral Degree
5

6 I, _____, hereby apply for admission to

7 Student Name (Type or Print) E#

8 candidacy for the Doctorate in Psychology with a concentration in Clinical Psychology at East
9 Tennessee State University. To the best of my knowledge, I have completed all of the prerequisites
10 for admission to candidacy, graduate as well as undergraduate, including completion of the master's
11 degree in Psychology based in part on an empirical thesis, the Clinical Capstone Case project, and
12 the Preliminary Examination Project.

13 My transcripts of undergraduate and graduate credits are on file with the Dean of the School of
14 Graduate Studies.

15 In consultation with my Primary Academic Advisor and all members of my dissertation committee, I
16 have decided to utilize the following format for completion of my dissertation:

17 Traditional Format or Alternate Format

18 **Please note that the use of the Alternate Format for dissertations must have prior approval by**
19 **the Primary Academic Advisor, all members of the student's dissertation committee, the**
20 **Clinical Faculty, the Graduate Coordinator, and the Department of Psychology Chair.**

21 The proposed title for my doctoral dissertation is

22 _____

23 _____
24 Signature of Student

_____ Date

25 _____
26 Signature of Primary Academic Advisor

_____ Date

27 _____
28 Signature of Director of Clinical Training

_____ Date

1 **Appendix D: Student Evaluation and Faculty Review Forms**

2 **ETSU: Department of Psychology**

3 **Clinical Psychology Student Annual Summary Evaluation Form**

4 Department of Psychology
5 Clinical Faculty

6
7 **Student name:** _____ **Date:** _____

8
9 **Program initiation year:** _____

10
11 **Primary faculty advisor:** _____

12
13
14
15 Examples of ratings include:

16 Unsatisfactory = frequently missed class, did not participate in class, did not turn in assignments (<C)

17 Needs improvement = occasionally missed class, minimal class participation, late assignments (C or B-)

18 Expected for level of trainee = "B" quality work

19 Exceeds Expectations = B+ or A quality work

20 Exceptional = rarely used; denotes truly superlative performance

21
22 **ACADEMICS AND COURSE WORK**

23

1	2	3	4	5	--
Unsatisfactory	Needs Improvement	Expected Level	Exceeds Expectations	Exceptional	Not Applicable

24
25 **RESEARCH**

26

1	2	3	4	5	--
Unsatisfactory	Needs Improvement	Expected Level	Exceeds Expectations	Exceptional	Not Applicable

27
28 **CLINICAL SKILLS (Assess using the Clinical Competencies Form)**

29
30 **PROFESSIONAL BEHAVIOR: ETHICS**

31

1	2	3	4	5	--
Unsatisfactory	Needs Improvement	Expected Level	Exceeds Expectations	Exceptional	Not Applicable

32

1 **PROFESSIONAL BEHAVIOR: SERVICE & COLLEGIALLY**

2	3	4	5	6	7
1	2	3	4	5	--
Unsatisfactory	Needs Improvement	Expected Level	Exceeds Expectations	Exceptional	Not Applicable

4
5 General Comments by Primary Academic Advisor:

6 _____
7 _____
8 _____
9 _____

10 Student Strengths:

11 _____
12 _____
13 _____
14 _____

15 Student Areas for Improvement:

16 _____
17 _____
18 _____
19 _____

21 _____
22 Primary Advisor's Signature

_____ Date of Signature

23 _____
24 Student's Signature

_____ Date of Signature

25
26 Student, please circle below your level of agreement with the assessment of the supervisor. If after discussion with
27 your supervisor about his/her ratings, you disagree in any way with the final evaluation, please print or type an
28 explanation below, or attach additional pages as necessary. Please be specific about which item(s) you are in
29 disagreement with, and specifically list your reasons for your disagreement.

30
31 I Generally Agree I Disagree with Specific Items I Generally Disagree

32
33
34 **Comments by Clinical Evaluation Committee:**

35
36
37
38 Endorsed by Clinical Evaluation Committee: ___ Yes ___ No Date: _____

39
40 Signatures of Clinical Evaluation Committee Members:

ETSU Clinical Psychology PhD Program
Graduate Student Research Competencies Form

Student Name (print) and Cohort Year:

Primary Academic Advisor Name (print):

Semester (circle specifics): Spring Summer Fall Year (write in): _____

Program Year (circle proper level):	Year 1	Year 2	Year 3	Year 4	Year 5+
------------------------------------------------	--------	--------	--------	--------	---------

INSTRUCTIONS for SUPERVISORS (IMPORTANT, PLEASE READ CAREFULLY):

*Do NOT rate students at Levels Higher Than Appropriate. Ratings should reasonably reflect their actual time in the program to date. The purpose of the evaluation process is to show accurately the development which occurs across time as a result of experience, education, and training.

Mark N/A if an item is not applicable, and fill out all other item as follows:

Scale/Rating Definitions:

Needs Remediation: Requires remedial work in this area; competency attainment is not at level expected for type of research experience being rated. Specific activities may be required to address noted issues.

Beginning Student Level: Possesses basic research skills. Ratings reflect knowledge, understanding, and application of fundamental research methods and analyses. Students are most likely to consistently achieve this level during their first year in the program.

Intermediate Student Level: Possesses intermediate research skills. Ratings at this level reflect knowledge, understanding, and application of research methods, analyses, writing skills, and professional dissemination of results, commensurate with an intermediate student status. Intermediate criteria include, but are not limited to, accomplishments such as: ability to formulate basic hypotheses and articulate methods to test research questions; understanding and use of advanced techniques of statistical analyses with faculty supervision; competently designing and conducting research projects with faculty supervision; engagement in at least one opportunity annually with regard to professional dissemination of research results (e.g., presents at conferences, submits manuscripts to peer-reviewed outlets); assists faculty in developing grants; etc. Students are most likely to consistently achieve this level during their second and third years in the program.

Advanced Student Level: Possesses advanced research skills. Ratings at this level reflect knowledge, understanding, and application of research methods, analyses, writing skills, and professional dissemination of results, commensurate with an advanced student status. Advanced criteria include, but are not limited to, accomplishments such as: acquisition of skills needed to execute sophisticated techniques of statistical analyses without faculty supervision; independence in competently designing and conducting research projects; engagement in multiple opportunities annually with regard to professional dissemination of research results (e.g., presents at conferences, submits manuscripts to peer-reviewed outlets); primary authorship on small grants and/or advanced assistance of faculty on large grants; etc. Students are most likely to consistently achieve this level during their third and fourth years in the program.

Professional Level: Possesses entry level doctoral professional research skills. Ratings at this level reflect knowledge, understanding, and application of research methods, analyses, writing skills, and professional dissemination of results, commensurate with an entry-level professional with a doctoral degree. Students are most likely to consistently achieve this level during dissertation completion and/or Internship years.

Please be as objective and honest as possible so that we may deliver the most accurate feedback to the student, and if needed, create a competency-based remediation plan with specific, clear goals.

Please discuss your ratings with the student researcher, during which time you may adjust the ratings as you see fit and sign the form. There is a place for students to write whether they agree or disagree with your evaluation, and if they disagree, to explain the reasons for that disagreement. Your time and effort is greatly appreciated!

At what level does the student demonstrate substantial understanding and competence in...

1...research design (e.g., between and within designs, correlational and experimental designs). B.2 1-2a; B.3a7

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

2...use of instrumentation (e.g., surveys, imaging techniques, tests, observation). B.2 1-2a;B.3a7

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

3... dissemination of research results (e.g., professional conference presentations, manuscript submissions to peer-reviewed outlets). B.2 1-2a; B.3a7.

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

4...psychometric issues (e.g., understanding and assessing reliability and validity specific to relevant research methods). B.2 1-2a;B.2 1-2b, B.3a7

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

5... use of professional-grade software (e.g., SPSS/PASW, SAS) to accomplish statistical analyses. B.2 1-2b, B.3a8

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

6...use and interpretation of statistical tests and analyses (e.g., descriptive statistics, correlation, t-tests, ANOVA, ANCOVA, MANOVA, regression, SEM, evaluations of mediation/moderation, power/effect size estimations). B.2 1-2a;B.3a8

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

7...integration of statistical interpretations into results and discussion sections of presentations, manuscripts and/or major programmatic milestone projects (i.e., thesis, preliminary examination, dissertation). B.2 1-2b, B.3a8.

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

8...application of ethical principles found within APA's Ethical Principles of Psychologists & Code of Conduct, Federal and State (HIPAA, OHRP, Code of Federal Regulations) Policies, and ETSU's Guidelines on the Responsible Conduct of Research. These include, but are not limited to, issues pertaining to Informed Consent, privacy and confidentiality, participant recruitment and selection, debriefing procedures, safekeeping of data, etc. B.2 3-1, B.3b4.

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

9...issues of cultural and individual diversity as applied to research. B.2 3-3, B.3d1.

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

10...issues pertaining to community-based research, and/or research in rural areas, and/or research in primary care settings. B.2 2-1.

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

General Comments by Supervisor:

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40

Student Strengths:

Student Areas for Improvement:

Supervisor's Signature

Date of Signature

Student's Signature

Date of Signature

Student, please circle below your level of agreement with the assessment of the supervisor. If after discussion with your supervisor about his/her ratings, you disagree in any way with the final evaluation, please print or type an explanation below, or attach additional pages as necessary. Please be specific about which item(s) you are in disagreement with, and specifically list your reasons for your disagreement.

I Generally Agree I Disagree with Specific Items I Generally Disagree

Student Comments:

ETSU Clinical Psychology PhD Program
Graduate Student Clinical Competencies Form

Student Name (print):

Supervisor Name (print):

Clinical Site Name (print):

Semester (circle specifics): Spring Summer Fall Year (write in): _____

Experience Level (circle proper level):	Clerkship II	BHWC Practicum I	Advanced Practica/Externship	Pre-doctoral Internship
Placement Type (circle if applicable):	Rural Placement		Primary Care Placement	

INSTRUCTIONS for SUPERVISORS (IMPORTANT, PLEASE READ CAREFULLY):

Mark N/A if an item is not applicable, and fill out the appropriate sections as follows:

- Clerkship II: CLINICAL SKILLS I;
- BHWC Practicum I: CLINICAL SKILLS I & II;
- Advanced Practica, Externships AND Pre-doctoral Internship : CLINICAL SKILLS I, II & III;
- Rural placements (>25% of clients designated rural) and/or Primary Care placements, please fill out MISSION SPECIFIC SKILLS in addition to other relevant sections for each student training level.

Scale/Rating Definitions:

Needs Remediation: Requires remedial work in this area; competency attainment is not at level expected for type of clinical experience being rated. Specific activities may be required to address noted issues.

Beginning Student Level: Shows basic knowledge and understanding of how to analyze problems and of intervention skills and the processes and techniques of implementing them.

Intermediate Student Level: Recognizes some important recurring domain features and to select appropriate strategies to address the issue at hand. Generalization of diagnostic and intervention skills to new situations and clients is limited, and support is needed to guide performance. Most common rating during practicum and community placements.

Advanced Student Level: Shows integrated knowledge of the domain in question, including appropriate knowledge of scholarly/research literature, as needed. Fluent in the ability to recognize important recurring domain features and to select appropriate strategies to address the issue at hand. Recognition of overall patterns, of a set of possible diagnoses, and/or treatment processes and outcomes for a given case are taking shape. Student is less flexible in these areas than the proficient psychologist, but does have a feeling of mastery and the ability to cope with and manage many contingencies of clinical work.

Professional Level: Shows knowledge, skills, and abilities commensurate with an entry-level professional with a doctoral degree. Students are most likely to consistently achieve this level during Internship.

Please be as objective and honest as possible so that we may deliver the most accurate feedback to the student, and if needed, create a competency-based remediation plan with specific, clear goals.

Please discuss your ratings with the student clinician, during which time you may adjust the ratings as you see fit and sign the form. There is a place for students to write whether they agree or disagree with your evaluation, and if they disagree, to explain the reasons for that disagreement.

Your time and effort is greatly appreciated!

**CLINICAL SKILLS I: ABILITY TO EFFECTIVELY DISCUSS CONCEPTS
 FILL OUT THIS SECTION FOR CLERKSHIP II AND BEYOND
 (This is the ONLY section needed for Clerkship II Students)**

Student demonstrates ability to effectively discuss...

I-1...the cognitive aspects of behavior (e.g., automatic thoughts, schemas, beliefs about self). 1-1c; 1-2a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-2 ...the affective aspects of behavior (e.g., emotional expression, lability, display rules). 1-1d; 1-2a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-3...the biological aspects of behavior (e.g., genetic predispositions, physiology, pharmacology). 1-1e; 1-2a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-4...the social aspects of behavior (e.g., relationship-based roles, stigma/stereotyping, interpersonal/dyad/group dynamics). 1-1b; 1-2a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-5...individual difference in behavior (e.g., trait/personality characteristics, demographic factors). 1-2a; 1-3a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-6...human development (e.g., developmental stages/milestones, stage of life issues/challenges). 1-2a; 1-3b

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-7...dysfunctional behavior or psychopathology (e.g., DSM-IV-TR symptoms/criteria/diagnosis, family history, patient history). 1-2a; 1-3c

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-8...professional standards and ethics (e.g., limits of confidentiality, disclosure of student status, on time to therapy, supervisory, and staff meetings, effectiveness in writing notes/reports/letters, adherence to deadlines, promptness in communications, following procedures for resolution of conflicts, and ability to work well with other professionals). 3-1; 3-2

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-9...issues of cultural and individual diversity (e.g., topics of ethnicity, race, sex, sexuality, SES, disability, geography, politics, religion, etc.). 3-1; 3-2

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

I-10...attitudes essential for lifelong learning, scholarly inquiry, and professional problem-solving. 1-1a; 1-2a; 3-1; 3-2

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

1
2

**CLINICAL SKILLS II: ABILITY TO EFFECTIVELY APPLY CONCEPTS
FILL OUT THIS SECTION FOR PRACTICUM I AND BEYOND
(In Addition to Clinical Skills I Above)**

Student applies concepts in therapeutic situations, and articulates rationale for doing so in supervision, in such a way as to demonstrate an understanding of...

II-1...the cognitive aspects of behavior. 1-1c; 1-2a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-2...the affective aspects of behavior. 1-1d; 1-2a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-3...the biological aspects of behavior. 1-1e; 1-2a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-4...the social aspects of behavior. 1-1b; 1-2a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-5...individual difference in behavior. 1-2a; 1-3a

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-6...human development. 1-2a; 1-3b

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-7...dysfunctional behavior or psychopathology. 1-2a; 1-3c

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-8...professional standards and ethics. 3-1; 3-2

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-9...issues of cultural and individual diversity. 3-3

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-10...attitudes essential for lifelong learning, scholarly inquiry, and professional problem-solving. 1-1a; 1-2a; 3-1; 3-2

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-11...psychological measurement, including psychometric theory, test construction/development/performance issues, and ethical use and interpretation of tests. 1-2a; 1-3a; 1-3b; 1-3c; 1-3d

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-12...theories and methods of assessment and diagnosis, including the process of administration, scoring, and interpretation of psychological measures as pertains to diagnosis and treatment planning issues (may include objective and/or projective tests). 1-2a; 1-3a; 1-3b; 1-3c; 1-3d

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

CLINICAL SKILLS II (CONTINUED)

Applies concepts in therapeutic situations, and articulates rationale for doing so in supervision, in such a way as to demonstrate an understanding of...

II-13...theories and methods of effective intervention, including the major systems of empirically supported and accepted psychotherapy practices, and an understanding of case conceptualization and treatment plan development and implementation. 1-2a; 1-3a; 1-3b; 1-3c; 1-3d

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-14...theories and methods of evaluating efficacy of interventions, including consultation of empirical literature and theoretical underpinnings central to evaluating psychotherapeutic efficacy, and skills needed for empirically evaluating their own psychotherapy practice. 1-2a; 1-3a; 1-3b; 1-3c; 1-3d

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

II-15...the need for supervision and self-evaluative processes, as well as demonstration of proper preparation for meetings (e.g., video cued, case files reviewed) and proper use of critical feedback to further development as a therapist.

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

1

CLINICAL SKILLS III: CONSULTATIVE AND/OR SUPERVISORY ACTIVITIES
FILL OUT THIS SECTION FOR ADVANCED PRACTICA, EXTERNSHIPS, INTERNSHIPS
(In Addition to Clinical Skills I & II Above)

III-1 Theories and Methods of Supervision: Student demonstrates understanding and competence in evidence-based clinical supervision models and consultation of empirical literature pertaining to clinical supervision, as well as application of evidence-based models in their own practice of supervision, and attendance to individual cultural differences and ethical issues in supervision. 1-2a; 1-3e

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

III_2 Theories and Methods of Consultation: Student demonstrates understanding and competence in the utility, rationale, and models of collaborative care wherein consultation plays an important role, and an application of said principles to the efficient and effective practice of consultation with other professionals. 1-2a; 1-3e

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

2

IV: MISSION SPECIFIC SKILLS: RURAL AND/OR PRIMARY CARE PLACEMENTS ONLY

IV-1 Demonstrates an understanding of community-based practice in rural and/or primary care settings. 2-1

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

IV-2 Demonstrates knowledge and skills in inter-professional collaboration and professional consultation in rural and/or primary care settings. 2-2

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

IV-4 Demonstrates knowledge and skills in applying models of evidence-based assessment and intervention in rural and/or primary care settings. 2-3

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

IV-5 Demonstrates applied knowledge of clinical supervision in rural and/or primary care settings. 2-4

Needs Remediation	Beginning Student Level	Intermediate Student Level	Advanced Student Level	Professional Level	N/A
-------------------	-------------------------	----------------------------	------------------------	--------------------	-----

3

General Comments by Supervisor:

4

5

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41

Student Strengths:

Student Areas for Improvement:

Supervisor's Signature

Date of Signature

Student's Signature

Date of Signature

Student, please circle below your level of agreement with the assessment of the supervisor. If after discussion with your supervisor about his/her ratings, you disagree in any way with the final evaluation, please print or type an explanation below, or attach additional pages as necessary. Please be specific about which item(s) you are in disagreement with, and specifically list your reasons for your disagreement.

I Generally Agree I Disagree with Specific Items I Generally Disagree

Student Comments:

Form Developed with Guidance from the Following:

Madson, M.B., Chapman, L.K., Wood-Barlow, N.L. & Williams-Nickelson, C. (2005). American Psychological Association: Washington, D.C. p. 12-13.

1 **ETSU Clinical Psychology PhD Program**
2 **Signature Form for Portfolio Review**
3

4 I, _____ (Print Graduate Student Name), acknowledge that I have to the best of my
5 ability completed all sections of the portfolio as outlined in the ETSU Clinical Psychology Ph.D. Program
6 Handbook and have reviewed this document and received feedback from my Primary Academic Advisor. I
7 understand that this acknowledgement form and my portfolio should be submitted to the Clinical
8 Psychology Executive Aide (by the end of the fall academic semester) and will be reviewed by faculty as
9 part of my annual review in the spring academic semester.
10

11 *Signatures:*
12

13 _____
14 Graduate Student Date Primary Academic Advisor Date
15
16

1 East Tennessee State University
2 Department of Psychology
3 Student Evaluation of Clinical Placement
4

5 Student Name: _____

6 Agency Name: _____

7
8 Type of setting (circle all that applies):

9 Mental Health Center Psychology Outpatient Clinic

10 Hospital Inpatient Hospital Partial Hospital Outpatient Medical Outpatient Clinic

11 University Counseling Center Public School System Court Services

12 Social Services

13 Other: _____

14 Supervisor(s): _____

15 Term of Evaluation (circle one set): Summer Summer/Fall Summer/Fall/Spring
16 Fall Fall/Spring Spring

17 Year: _____

18 Estimate Total Number of Hours Spent On Site: _____

19 **Clinical Treatment/Intervention Experience: What types of treatment or intervention activities were**
20 **you involved in, and in what capacities?**

21 _____

22 _____

23 _____

24 _____

25
26 Estimate Total Number of Hours Involved in Some Aspect of Treatment/Interventions: _____

27 With regard to Treatment/Intervention:

28 Frequency of Supervisory Meetings (formal or informal):

29 1 2 3 4
30 Rare or No Meetings Irregular or Sporadic Meetings Regular Meetings Frequent and
31 Whenever Needed

32
33 Quality of Supervisory Meetings (formal or informal):

34 1 2 3 4
35 Poor Fair Good Excellent

36
37 Quality of Experience:

38 1 2 3 4
39 Poor Fair Good Excellent

40
41 **Assessment Experience: What types of assessment activities were you involved in, and in what**
42 **capacities?**

43 _____

44 _____

45 _____

46 _____

1 Specific Advice for Future Student Clinicians at This Placement:

2 _____
3 _____
4 _____
5 _____
6 _____
7 _____

8
9
10 Student Signature _____ Date: _____

11

ETSU Clinical Psychology PhD Program
Student Evaluation of Supervision Form

Student Name (print): _____ Date: _____
 Supervisor Name (print): _____ Clinical Site: _____
 Semester (circle specifics): Spring Summer Fall Year (write in): _____
 Supervision format (e.g. group/individual): _____

Please rate the following aspects of the supervision you have received this term.
Use the scale below.

1	2	3	4	5	N/A
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Not Applicable

1) I am satisfied that the duration of the supervision sessions was appropriate (i.e. they lasted as long as they should).	1	2	3	4	5	N/A
2) I am satisfied with the frequency of supervision sessions (i.e. supervision sessions occurred when they should have).	1	2	3	4	5	N/A
3) <u>Management</u> : The supervisor helped me with planning, managing, evaluating and problem-solving issues.	1	2	3	4	5	N/A
4) <u>Support</u> : I felt supported through the supervisor's use of 'core' relationship conditions (e.g. feeling accepted, receiving recognition and support).	1	2	3	4	5	N/A
5) <u>Learning</u>						
a) I was able to recognize relevant feelings, becoming more self-aware, (e.g. role play helped me to express emotion).	1	2	3	4	5	N/A
b) I was able to reflect on events and perceive things more clearly (e.g. draw on my own experience to give events more personal meaning).	1	2	3	4	5	N/A
c) My understanding of my work was improved (i.e. analyzing cases to gain more insight and a better grasp).	1	2	3	4	5	N/A
d) Based on applying this information we agreed action/s based on these supervision sessions (e.g. made a plan, agreed steps, set a goal).	1	2	3	4	5	N/A
e) The supervisor helped me to try things out and to try and solve problems/practice skills, (e.g. gave me corrective feedback that improved my competence).	1	2	3	4	5	N/A
6) Of the events which occurred in these supervision sessions, which ones do you feel was the most helpful for you personally? It might be something you said or did, or something the supervisor said or did. (please use other side of page if necessary)						
7) Any other comments? e.g. unhelpful events, unresolved problems (please use other side of page if necessary)						

Acknowledgement: This form is a modified version of Rating of Experiential learning And Components of Teaching and Supervision (REACTS):Supervisee's Feedback Form found in the following reference: Milne, D., Leck, C., James, I., Wilson, M., Procter, R., Ramm, L., Wilkinson, J., & Weetman, J. (in press). High fidelity in clinical supervision research. In I. Fleming & L. Steen (Eds.), *Supervision and clinical psychology: Theory, practice and perspectives, Second Edition*). Permission to edit and use granted by Derek Milne, Ph.D. (via e-mail correspondence, August 16th, 2011).

1
2
3
4

ETSU Department of Psychology
PhD in Psychology: Clinical Psychology
Student Perceptions of Achievement of Program Goals and Objectives

As students in the program, you already know that our primary mission is to provide training in clinical psychology emphasizing rural behavioral health and mental health practice in the context of integrated primary health care. However, you may not be completely clear as to our more specific goals and objectives. Further, we would like to get your views on how well the program is meeting these goals and objectives. **Please complete this survey and return it to my mailbox in either Rogers-Stout or in the clinic. Do not include your name. Depending upon your matriculation year, you may not be at the point in the program where certain goals are applicable, so please indicate N/A to any of these that do not seem to apply. Please return the survey no later than April 25th.**

Thank you, Dr. Cantrell

Circle the number that best fits with how well we have met this objective for you personally through your didactic and applied experiences:
Note - there are two sides.

Goal #1: Prepare students as independent scientist-practitioners in clinical psychology

1-1 Provide students with a broad and general foundation in psychological science to enable them to understand the history of thought and development, methodological, and theoretical foundations as they inform the current practice of clinical psychology;

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

1-2 Provide students with the bases to be skilled in research design, methods, execution, and literature evaluation and integration to stay abreast in the field and to make contributions;

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

1-3 Provide students with theories and methods in diagnostic assessment, formulating and implementing interventions, and evaluating the efficacy of interventions.

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

Goal #2: Prepare students for entry level clinical practice in rural and primary care settings

2-1 Provide students with cultural competence in working with rural populations and community-based practice

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

2-2 Provide students with skill development for inter-professional collaboration, communication, and consultation

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

2-3 Provide students with knowledge and skill development in models of evidence-based assessment and intervention especially pertinent to primary care settings

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

2-4 Provide students with knowledge and skills in professional supervision and peer consultation

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

Goal #3: Prepare students for ethical and culturally competent clinical practice

Objectives for Goal #3:

Provide students with an understanding of:

3-1. the current professional ethics and standards of behavior;

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

3-2. current federal and state laws on the practice of psychology;

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

3-3. the literature on individual and cultural differences.

1 2 3 4 5
Strongly Agree Agree Disagree Strongly Disagree Not Applicable

1
2

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51

East Tennessee State University
Department of Psychology
Survey of Program Goals

Partnerships are essential to the training mission of our Clinical Psychology PhD Program at ETSU, and we greatly appreciate and value the partnership we have with you. We want to make certain that you are aware of our training mission statement, our training philosophy, and our goals and objectives so that these will inform the training opportunities and the supervision you provide to our students. We also need you to inform us as to which of our program goals and objectives are addressed through the training that you provide to our students. We understand that every placement will not address every objective, so do not hesitate to indicate if an objective is not applicable to your placement. Please review the information in this letter, sign and return it to me within two weeks of receipt. Feel free to share with other supervisors who work with our students. I have provided a self-addressed stamped envelope for your convenience.

The primary mission of the articulated master's/doctoral program in Clinical Psychology at ETSU is to provide training in clinical psychology emphasizing rural behavioral health and mental health practice in the context of integrated primary health care.

Goal #1: Prepare students as independent scientist-practitioners in clinical psychology

1-1 Provide students with a broad and general foundation in psychological science to enable them to understand the history of thought and development, methodological, and theoretical foundations as they inform the current practice of clinical psychology;

1	2	3	4	5
Major Emphasis In this placement	Frequently emphasized In this placement	Sometimes emphasized In this placement	Infrequently emphasized In this placement	Not Applicable

1-2 Provide students with the bases to be skilled in research design, methods, execution, and literature evaluation and integration to stay abreast in the field and to make contributions;

1	2	3	4	5
Major Emphasis In this placement	Frequently emphasized In this placement	Sometimes emphasized In this placement	Infrequently emphasized In this placement	Not Applicable

1-3 Provide students with theories and methods in diagnostic assessment, formulating and implementing interventions, and evaluating the efficacy of interventions.

1	2	3	4	5
Major Emphasis In this placement	Frequently emphasized In this placement	Sometimes emphasized In this placement	Infrequently emphasized In this placement	Not Applicable

1 **Goal #2: Prepare students for entry level clinical practice in rural and primary care settings**

2 2-1 Provide students with cultural competence in working with rural populations and community-based
3 practice

4

5	1	2	3	4	5
6	Major	Frequently	Sometimes	Infrequently	Not Applicable
7	Emphasis	emphasized	emphasized	emphasized	
8	In this	In this	In this	In this	
9	placement	placement	placement	placement	

10

11 2-2 Provide students with skill development for inter-professional collaboration, communication, and
12 consultation

13

14	1	2	3	4	5
15	Major	Frequently	Sometimes	Infrequently	Not Applicable
16	Emphasis	emphasized	emphasized	emphasized	
17	In this	In this	In this	In this	
18	placement	placement	placement	placement	

19

20 2-3 Provide students with knowledge and skill development in models of evidence-based assessment and
21 intervention especially pertinent to primary care settings

22

23	1	2	3	4	5
24	Major	Frequently	Sometimes	Infrequently	Not Applicable
25	Emphasis	emphasized	emphasized	emphasized	
26	In this	In this	In this	In this	
27	placement	placement	placement	placement	

28

29 2-4 Provide students with knowledge and skills in professional supervision and peer consultation

30

31	1	2	3	4	5
32	Major	Frequently	Sometimes	Infrequently	Not Applicable
33	Emphasis	emphasized	emphasized	emphasized	
34	In this	In this	In this	In this	
35	placement	placement	placement	placement	

36

37

38

39

40 **Goal #3: Prepare students for ethical and culturally competent clinical practice**

41 **Objectives for Goal #3:**

42 Provide students with an understanding of:

43

44 3-1. the current professional ethics and standards of behavior;

45

46	1	2	3	4	5
47	Major	Frequently	Sometimes	Infrequently	Not Applicable
48	Emphasis	emphasized	emphasized	emphasized	
49	In this	In this	In this	In this	
50	placement	placement	placement	placement	

51

52 3-2. current federal and state laws on the practice of psychology;

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33

1	2	3	4	5
Major Emphasis	Frequently emphasized	Sometimes emphasized	Infrequently emphasized	Not Applicable
In this placement	In this placement	In this placement	In this placement	

3-3. the literature on individual and cultural differences.

1	2	3	4	5
Major Emphasis	Frequently emphasized	Sometimes emphasized	Infrequently emphasized	Not Applicable
In this placement	In this placement	In this placement	In this placement	

Name of Placement: Frontier Cherokee JC Downtown Clinic Pediatric Psych Friends –in-Need SWVMHI
MSHA Cardiac Rehab Women’s Health Other, please specify

Name of Specific Training Location/ Clinic: _____

Person (s) completing this survey: _____

Signature and title: _____

Date: _____

Thank you for your assistance and for your continuing partnership with our program.

Peggy J. Cantrell, PhD
Clinical Psychologist
Professor
Director of Clinical Training

Appendix E: Practicum Competency and Resolving Difficulties on Practicum Sites

1. Relationships – Have your skills been enhanced through training the formation of positive relationships with colleagues, faculty, supervisors, and importantly, in knowing how to form a therapeutic alliance with your clients?
2. Assessment – Have you been sufficiently prepared to conduct psychological assessment, administration and interpretation of testing, development of intervention or treatment recommendations, and evaluation of outcome?
3. Intervention – Have you been trained to successfully conduct a case from clinical interview, diagnosis, case conceptualization, treatment planning, and therapeutic interventions, to treatment outcome measurement?
4. Diversity – Are you able to be sensitive and knowledgeable about individual and cultural differences as they apply in the practicum setting with clients and colleagues? Have you been trained to understand how individual and cultural differences can affect appropriate provision of psychological services to a diverse population? Do you understand how to apply knowledge of individual and cultural differences to all aspects of training?
5. Supervision – Do you have the ability to make effective use of supervision, to work collaboratively with supervisors, to incorporate supervisory suggestions for growth and learning? Further, are there opportunities for advanced doctoral students to supervise master's level students, lead staffing, or supervise other students in promoting the development of your own supervisory skills?
6. Ethics – Do you understand the application of the APA Ethics Code to clinical cases and decision making regarding client welfare and risk management? Can you recognize potential and actual ethical issues in professional environments?
7. Management of Stress – Are you mentored on how to manage the demands of the program coupled with health promoting practices for quality of life? Do you know about burnout and methods of prevention? Do you use those methods?
8. Leadership Skills - Do you have opportunities to begin developing management and leadership skills through experiences such as leading research teams, peer supervision, being a clinic assistant, assisting in editorial or administrative roles, or writing and/or managing grants?

Madson, M.B., Chapman, L.K., Wood-Barlow, N.L. & Williams-Nickelson, C. (2005).
American Psychological Association: Washington, D.C. p. 12-13.

1
2
3
4
5

Process for Students and Supervisors to Deal with Difficulties Relating to Clerkship or Practicum

6 Unique professional issues and difficulties may arise for both students and supervisors
7 when clinical psychology students are engaged in clinical field training. In the event that clinical
8 psychology graduate students experience difficulties (defined broadly and may refer to difficulties
9 with supervision, the number of hours, the activities engaged in, or personal issues) while
10 engaged in field training either on clerkship or practicum, it is important that the student initiate
11 discussions with the appropriate person(s) as soon as possible to resolve/address the situation.

12 We have outlined a flow-chart model reflecting the line of appropriate persons to whom the
13 student experiencing difficulties should follow (see below). Students should first discuss the
14 difficulties with their field supervisor(s). It may be helpful and is appropriate to informally consult
15 with faculty members, research supervisors, trusted colleagues, etc. as preparation for this
16 discussion. In the event that discussions with the field supervisor(s) do not adequately address
17 the difficulties, students should then bring the situation to the attention of the On-site Practicum
18 Coordinator for the agency, and the ETSU course coordinator for clerkships and/or externships.
19 The onsite- coordinator and the ETSU coordinator will attempt to resolve the issue through
20 informal communications and problem-solving. If necessary to the Department of Psychology's
21 Director of Clinical Training (DCT) will be notified at this stage. THE DCT will further attempts,
22 with the student's permission, to resolve the difficulties informally. If the difficulties are of a
23 sufficient magnitude, seriousness or intractability, the DCT will conduct a formal investigation,
24 which may include interviewing the parties involved, or any party who has evidence concerning
25 the validity of the complaint, concern, and/or issue. This process may be continued, if necessary,
26 by contacting the other individuals listed below in the order shown. If the DCT's efforts do not lead
27 to resolution, the student and/or the DCT will refer the issue to the Dean of the School of Graduate
28 Studies as a grievance filed on the part of the student, or as an academic conduct complaint
29 against the student, depending on the nature of the issue. Grievance policies are detailed in the
30 Psychology Department Handbook and the ETSU School of Graduate Studies Handbook.

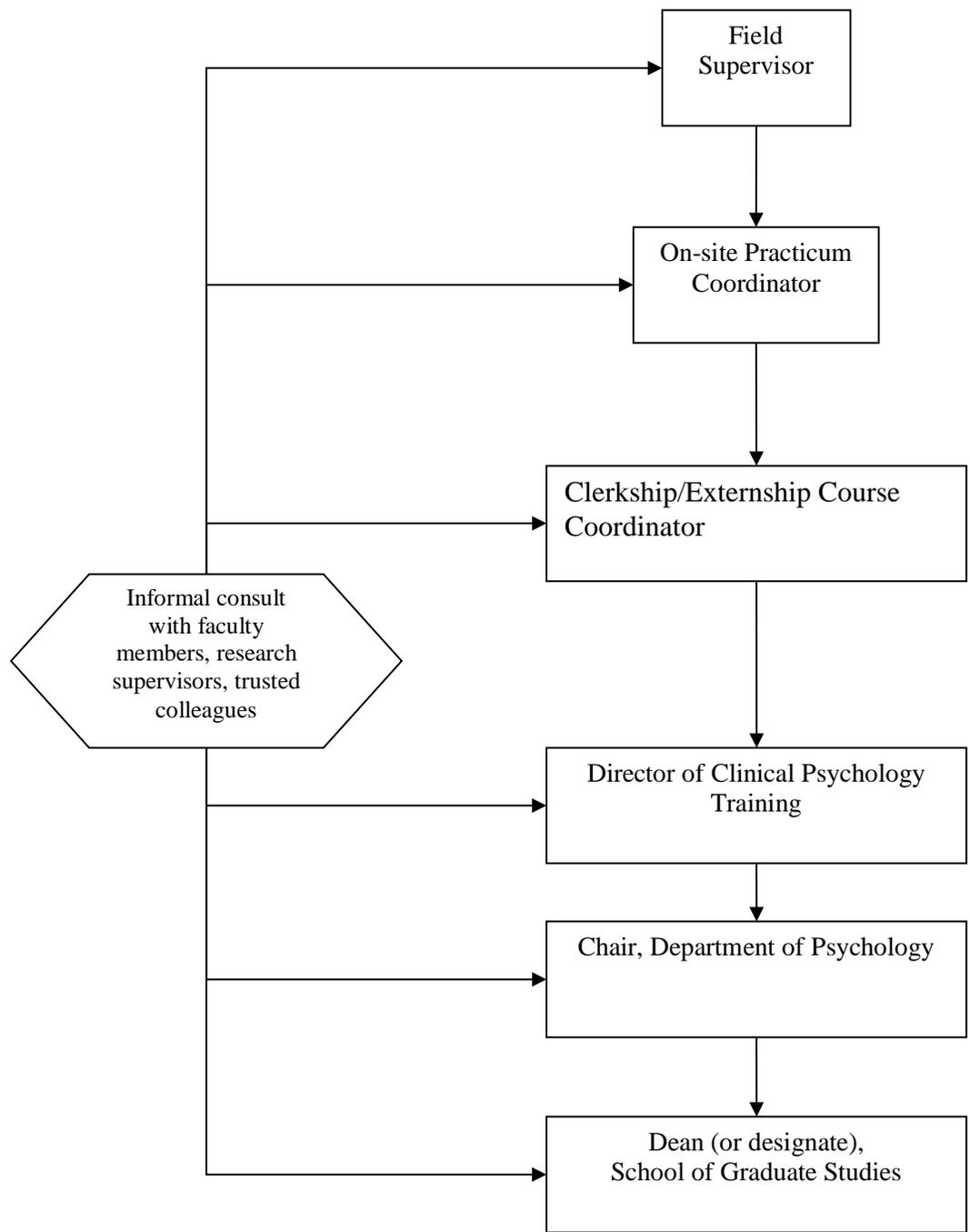
31 Care and planning should occur before discussing problems informally with persons not
32 directly involved in your program or training. A student can unwittingly place a fellow student,
33 colleague, or faculty member in a difficult situation by "informally" discussing a situation which the
34 recipient may construe as something which they must ethically act on. Remember, when you start

1 a conversation with someone about a clinical training matter, who decides what is and is not a
2 consultation becomes a shared responsibility between the speaker and listener.

3 **It is highly recommended that all students review the APA Standards of Ethical Conduct**
4 **prior to beginning their practica and internships. A copy of these guidelines is at**
5 **www.apa.org/ethics/code.html. If students have any questions regarding these guidelines,**
6 **they are encouraged to discuss them with the DCT and/or course coordinator.**

1
2

**Flowchart Model:
Process for Students and Supervisors to Deal with Difficulties Relating to Clerkship or Practicum**



3
4
5

Appendix F: Community Placement Descriptions

1. Behavioral Health and Wellness Clinic (BHWC) – ETSU Department of Psychology

(20 hours per week; academic year)

\$12,000 plus tuition remission

Box 70416

ETSU Campus

Johnson City, TN 37614

Supervisor: Psychology faculty

Site description: The East Tennessee State University Behavioral Health and Wellness Clinic is a community based clinic run by the ETSU Psychology department. Services provided at the Behavioral Health and Wellness Clinic include psychotherapy for individuals, couples, families and groups. The BHWC also provides a wide range of assessment services. Populations served by the BHWC include children, adolescents and adults of all ages. Because the BHWC is a training clinic, we are not able to be involved in any legal cases or work that is “court ordered”. We do not render any opinions for forensic cases, including divorce or child custody.

Student Description of placement:

The services offered in this clinic include group, individual and couples therapy. This is a unique placement as a heavy component of the placement allows the student to learn needed administrative skills. Current assignments include assisting in securing state licensure, assisting in the assignment of treatment teams, and developing procedures for the assurance and maintenance of quality control. The graduate assistant at this site also provides direct clinical services under supervision.

2. ETSU Department of Pediatrics - Quillen College of Medicine

20 hours per week; full year

\$12,000 plus tuition remission

PO Box 70578

Johnson City, TN 37614

Supervisors: Rebecca Powers, MD and Jodi Polaha, PhD

Site Description: The Department of Pediatrics at the James H. Quillen College of Medicine is committed to improving health care for children in Northeast Tennessee and the surrounding Appalachian Region while providing excellent education to our medical students and pediatric residents. The department consists of 22 full time faculty, numerous clinical faculty and 39 staff and support personnel. The Department of Pediatrics has divisions including the General Pediatrics, Gastroenterology, Endocrinology, Infectious Disease, Pulmonary Medicine, Adolescent Medicine,

1
2 Cardiology, Nephrology, Developmental/Behavioral Pediatrics, Hematology/Oncology and
3 Neonatology. The Hematology/Oncology Division is an affiliate of St. Jude Children's
4 Hospital in Memphis, Tennessee, and provides up-to-date cancer care on clinical
5 research studies from St. Jude and the Children's Oncology Group. Our Newborn
6 Division is the nucleus of the Northeast Tennessee Regional Perinatal Center which
7 services high risk pregnancies and premature newborn care for the eight counties in
8 Upper East Tennessee as well as ten counties in Southwest Virginia, North Carolina and
9 Kentucky.

10
11 **Student description of placement:**

12 1/2 time Behavioral Health Consultant (BHC) at ETSU Pediatrics, located in Johnson City
13 and 1/2 time Telehealth, located on the ETSU campus: This student provides pediatric
14 residency training and on-site consultation at ETSU Pediatrics 10 hours per week
15 (typically 3 afternoons from 1-4 or 5 p.m.). During the other 10 hours, the student works
16 in the Telehealth Grant Program providing 4 hours of consultative services in the "open
17 access hours," 3 hours of specialty mental health treatment (i.e., regular outpatient
18 services), and 3 hours of program development/evaluation work. The Telehealth
19 Program is currently providing services to a pediatric primary care population and a rural
20 OB/GYN program (women's health) and the program is continuing to grow and expand.

21
22
23 **3. Cherokee Health Systems - Morristown, TN**

24
25 **20 hours per week; full year**

26 **\$10,000 plus \$500.00 per semester TNCARE, plus travel**

27
28 815 West 5th North Street

29 Morristown, TN 37814

30 Services: Primary Care and Behavioral Health

31 Supervisor: Karina Stewart, PsyD

32
33 **Site(s) Description:** Cherokee Health Systems believes in a type of holistic care called
34 Integrated Care. This biopsychosocial approach to health care addresses the whole
35 person by integrating behavioral services into primary care. By combining the best
36 traditions of primary care (adult, family practice, pediatric) and mental health services the
37 integrated health care team is able to treat the whole person - mind and body so all
38 patient needs are met. Behavioral health consultants work within a primary care setting
39 and are involved in on site and timely assessment, brief intervention and consultation with
40 patients. Services include education, behavioral management and treatment for mental
41 health disorders. After meeting with a physician or nurse, a psychologist may assess and
42 treat patients with behavioral concerns and work with the medical provider regarding
43 referral questions and follow-up. Training and practicum experience is provided to
44 advanced standing doctoral students in Clinical Psychology

1
2 **Student description of placement:**

3 This site is a community mental health clinic that provides psychiatric, therapy, and
4 primary care services to an adult population. At this site students have the opportunity to
5 get experience with groups, intensive outpatient, crisis intervention, working as part of an
6 integrated team, primarily providing individual psychotherapy and initial intakes, and
7 weekly supervision. At CHS, student clinicians are treated like any other professional from
8 day one.

9
10 **4. Cherokee Health Systems – Newport, TN**

11
12 **20 hours per week; full year**

13 **Funded at \$10,000 plus \$500.00 per semester TNCARE, plus travel**

14
15 215 Hedrick Drive

16 Newport, TN 37821

17 Services: Behavioral Health

18 Supervisor: Jean Schaid, PhD
19
20

21 **Student description of placement:**

22 This facility provides outpatient mental health and psychosocial services in a very rural
23 location where other health care resources are limited. In addition to individual
24 psychotherapy, this facility offers several group therapy programs. Previous students
25 have served as co-leaders for alcohol and drug abuse treatment groups.
26
27

28 **5. Cherokee Health Systems –Talbot, TN**

29
30 **20 hours per week; full year**

31 **Funded at \$10,000 plus \$500.00 per semester TNCARE, plus travel**

32
33 6350 W. Andrew Johnson Highway

34 Talbot, TN 37877

35 Supervisor: Tom Bishop, PhD

36 Services: Pediatric Primary Care and Rehabilitation, and Behavioral Health
37

38 **6. Frontier Health Systems – Watauga Behavioral Health Services**

39
40 **20 hours per week; full year**

41 **\$12,000 plus tuition remission**

42
43 109 W. Watauga Avenue

44 Johnson City, TN 37604

45 Supervisor: Diane Whitehead, PhD

Site Description: Outpatient behavioral health, mental health, substance abuse and co-occurring programs for adults, children and adolescents are provided at Watauga Behavioral Health Services. Services include individual and group psychotherapy, marital and family therapy, pharmacotherapy, crisis services, case management, education and consultation services, parenting classes, psychiatric consultation, intensive outpatient A&D, Continuous Treatment Team and Comprehensive Child and Family, and Peer Support Services. Also offered at this site are Child abuse Prevention, a parent education group offered at no charge for parents; Family Links, a short-term respite program for families with children 2 to 15 years old and have severe emotional disturbances in the Tri-Cities area. The program is 8 to 12 weeks for 2 to 4 hours one time per week; Greenwood Challenge, a ropes course carefully planned as an outdoor learning environment where mental and physical problem-solving activities are included. Offers simple to complex elements, develops courage, vision, team spirit, and leadership skills; Mother-Child Connection, an outpatient program for substance-abusing women who are pregnant or mothers of dependent children; Regional Intervention Program, a parent-implemented program that helps parents work with their own children; and Student Assistance Program, clinical services for at-risk students.

Student description of placement:

Watauga Behavioral Health Services has the convenience of being located within Johnson City, and provides students great exposure to a wide range of adult clients in a traditional community mental health center. The site offers psychiatric and psychological services and is a traditional mental health provider. An individual therapist is the primary role at this placement; however, involvement in groups is also possible. This placement also provides the opportunity to interact with administrative staff, social workers, licensed professional counselors marriage and family counselors, nurses, nurse practitioners, and physicians. Watauga offers both a wide demographic in terms of cultural competency and psychological disorders. Typical caseloads at Watauga will include clients with a wide range of psychopathology, including chronic and severe, which helps build comfort, flexibility, and clinical skills. In addition, for those interested, experience with specialized addiction treatment through Intensive Outpatient Services is a unique opportunity at this placement. Watauga serves the wider tri cities community and has a specialized alcohol and drug unit which increases referrals from the community for addictions treatment

7. Frontier Health Systems – Holston Counseling Center, Kingsport, TN

20 hours per week; full year
\$12,000 plus tuition remission

1570 Waverly Road
Kingsport, TN 37664

1 Supervisor: Diane Whitehead, PhD
2

3 **Site Description:** Outpatient behavioral health, mental health, substance abuse and co-
4 occurring programs for adults are provided at Holston Counseling Center. Services
5 include individual and group psychotherapy, marital and family therapy,
6 pharmacotherapy, crisis services, case management, psychiatric consultation, intensive
7 outpatient A&D, peer support services. Other services offered at this site include Mother-
8 Child Connection, Mother-Child Connection, an outpatient program for substance-abusing
9 women who are pregnant or mothers with dependent children; and HOPE for Tennessee,
10 Health, Outreach, Prevention & Empowerment education / prevention services offered to
11 clients and provider agencies. Information is provided on HIV, STD's, Hepatitis,
12 Tuberculosis, Universal Precautions, Abstinence, Teen Pregnancy.
13

14 **Student description of placement:**

15 Located in Kingsport, TN, this site serves an adult population. Approximately half of the
16 clients served are considered low SES and cannot afford any other types of services.
17 Many resources in this community are available, but this site seems to operate as a
18 primary hub for community based mental health care. This site is staffed with a variety of
19 counselors, therapists, case managers, psychological examiners, psychiatrists and nurse
20 practitioners.
21

22 **8. Frontier Health Systems – Holston Children and Youth Services, Kingsport, TN**
23

24 **10 hours per week; full year**

25 **\$6,000 plus tuition remission**
26

27 2001 Stonebrook Place

28 Kingsport, TN 37660

29 Supervisor: Diane Whitehead, PhD and John Paul Abner, PhD
30

31 **Site Description:** Services include evaluation and treatment of all child and adolescent
32 behavioral health, mental health, substance abuse and co-occurring disorders. Services
33 include individual and group psychotherapy, family therapy, parenting classes, psychiatric
34 consultation, pharmacotherapy, crisis services, case management, consultation and
35 education services, C&Y Continuous Treatment Team, Comprehensive Child & Family
36 Therapy. Also offered at this site are Children First, a court-mandated program for
37 divorcing parents; Intensive In-Home Services including Alcohol & Drug Prevention, a
38 school- and community-based program leads students in a small group process of 8 to 15
39 sessions; Regional Intervention Program, a parent-implemented program for children with
40 behavior problems; Student Assistance Program, clinical services for at-risk students
41 provides crisis intervention, violence prevention, assessment, life skills training, and
42 parent education and counseling; and TRACES Therapeutic Foster Care and Adoption
43 Services for children and youth with behavioral and/or emotional problems.
44

45 **Student description of placement:**

1 Located in Kingsport, TN, services are provided to children of all ages up to 18 years.
2 Students are given a great deal of flexibility in terms of extra opportunities such as
3 completing court-ordered drug and alcohol assessments and teaching parenting classes.
4 Depending on the days of the week the student is on site, there are also opportunities to
5 work with adolescents in residential settings.

6
7 **9. Frontier Health Systems – Hawkins County Mental Health Center**
8

9 **20 hours per week; full year**
10 **\$12,000 plus tuition remission**
11

12
13 101 Lena Drive
14 Rogersville, TN 37857
15 Supervisor: Diane Whitehead, PhD
16

17 **Site Description:** Outpatient behavioral health, mental health, substance abuse and co-
18 occurring programs for children, adolescents and adults are provided at Hawkins County
19 Mental Health Center. Services include individual and group psychotherapy, marital and
20 family therapy, pharmacotherapy, crisis services, case management, psychiatric
21 consultation, Comprehensive Child and Family Therapy, C&Y Continuous Treatment
22 Team, and consultation and education services. Other programs offered at this site
23 include Project BASIC, an early intervention classroom program that targets appropriate
24 expressions of feelings, social skills, conflict resolution, and problem-solving skills with
25 fun, challenging activities. Also provided is mental health education, early intervention,
26 teacher consultation and school climate projects.
27

28 **Student description of placement:**

29 Located approximately an hour from any other type of mental health services, this small
30 rural outpatient mental health clinic in Rogersville, TN is the only mental health resource
31 that people in the surrounding community have available. This site provides
32 psychotherapy services through a clinical psychologist, LCSW's and doctoral students.
33 The site also offers integrated psychiatric services through a nurse practitioner. The
34 majority of clients served are impoverished, relying on state funded methods of support
35 for reimbursement of services. Students conduct intakes and provide traditional
36 psychotherapy for individuals of varying demographics and diagnoses. Students work in
37 a mental health setting along with other community mental health providers, which
38 provides ample opportunity for professional development in being an active member of a
39 mental health team. Staff at the site are enthusiastic about working with psychology
40 graduate students and are eager to accommodate students' interests, such as treating
41 particular age groups and diagnoses, or in various modalities including group, couple, and
42 individual therapy.
43

1 **10. Frontier Health Systems: Scott County Behavioral Health**

2
3 **20 hours per week; full year**
4 **\$12,000 plus tuition remission**

5
6 1006 US 23N

7 Weber City, VA

8 Supervisor: Farah Williams, PhD

9
10 **Site Description:** Outpatient behavioral health, mental health, substance abuse and co-
11 occurring treatment programs for children, adolescents and adults are provided at Scott
12 County Mental Health Center. Services include individual and group psychotherapy,
13 marital and family counseling, psychiatric services, case management, medication

14
15 monitoring, crisis services, intensive in-home services, home-based services, education
16 and consultation services, Virginia Alcohol Safety Action Plan and Children in the Middle.
17 Project LINK, an outpatient program for pregnant, substance-abusing women or mothers
18 with dependent children, is also offered at this site. Service in Scott County is provided in
19 partnership with Planning District One Behavioral Health Services.

20
21 **Student Description of Placement:**

22 This placement is a community mental health center that serves both adults and children
23 in a rural community. The population served are persons who don't have insurance,
24 insurance will not pay, or overflow clients This site is located about 35-40 minutes north
25 of Johnson City and about 5-10 minutes from Kingsport. Great experience working with a
26 variety of levels of service providers including: psychologist, master's level counselors,
27 social workers, case managers, support staff, nurses, and psychiatrist. Students provide
28 therapeutic interventions to children ages 5-17. In addition, there is a heavy focus on
29 assessments. Students have been involved with assessments concerning Mental
30 Retardation Waivers, Capacity to Consent for Treatment, Parenting and Custody
31 Evaluations, Competency to Stand Trial, and other full psychological evaluations used
32 for diagnostic clarification and treatment recommendations. Overall, this is a great place
33 to get both therapy and assessment experience.

34
35
36 **11. Friends in Need Health Center**

37
38 **10 hours per week; unpaid**

39
40 1105 West Stone Drive

41 Kingsport, TN 37660

42 Supervisor: Faculty, Department of Psychology

43
44 **Site description:** The mission of Friends in Need Health Center Inc. is to provide
45 regionally supported medical, dental and counseling care for the employed uninsured

1 residents and members of their immediate families, of Sullivan, Hawkins and Scott
2 counties.

3
4 **Student description of placement:**

5 Students operate as a behavioral health provider in a primary care clinic that offers
6 reduced cost services for patients that are employed but have no access to medical
7 insurance. Students collaborate with treating medical providers including volunteer
8 physicians, nurses, nurse practitioners, and internal medicine residents, to develop a
9 professional identity as a behavioral health consultant. Consequently, students become
10 proficient in medical terminology and culture and in treating numerous behavioral health
11 concerns including smoking or alcohol cessation, weight loss, pain management, sleep
12 hygiene, and treatment adherence. Students also have the opportunity to carry a

13
14 caseload of traditional psychotherapy clients who would not otherwise receive mental
15 health treatment.

16
17 **12. Johnson City Community Health Clinic – College of Nursing, ETSU**

18
19 **20 hours per week paid or 10 hours unpaid; full year**
20 **\$12,000 plus tuition remission**

21
22 207 E. Myrtle Avenue
23 Johnson City, TN 37601

24 Supervisor: Susan L. Reed, PhD (on site) and Peggy Cantrell, PhD

25
26 **Site description:** The Johnson City Downtown Clinic (JCDC), which opened in 1990,
27 was originally established to serve the needs of the local homeless population in
28 Johnson City and has expanded over the past nearly 15 years to include the uninsured,
29 underinsured, TennCare enrollees, a growing Hispanic population and medically indigent
30 individuals. Patient contacts in the clinic meet primary care, prenatal care and
31 socialization needs of these various population groups. No one is turned away because
32 of their inability to pay. In addition, many outreach contacts each year are provided to
33 individuals on the street, in shelters and in farm worker camps. Along with the Hancock
34 County School-based Clinics, JCCHC is one of only a few nurse-managed community
35 health centers (CHC) in the nation to be designated as a Federally Qualified Health
36 Center (FQHC) and is a unique CHC in the nation operating in conjunction with a
37 College of Nursing.

38
39 **Student description of placement:**

40 This is a primary care clinic and the providers are primarily nurse practitioners, with
41 many volunteering their time at the clinic. Psychology students provide behavioral health
42 services in both an integrated BHC role and a traditional format of a 45-50 minute
43 session. Virtually all of the patients seen at the clinic are low SES and do not have
44 insurance. A majority of the patient population is Hispanic, and interpreters are

1 available. This represents a unique opportunity to provide services not only to a diverse
2 client population, but also to develop intervention skills while working with a trained
3 interpreter. Types of psychopathology seen are varied, but affective and anxiety
4 disorders are most prevalent. The JCDC is a great work environment that focuses on
5 patient needs, team work, and integrated care.

6
7 **13. Southwest Virginia Mental Health Institute – Marion, VA**

8
9 **Unpaid position for 2011-2012; may be renewable**

10
11 340 Bagley Circle
12 Marion, VA 24354
13 Supervisor: Colin Barron, PhD
14

15 **Site Description:** Southwestern Virginia Mental Health Institute (SWVMHI) is a 156-bed
16 state psychiatric institute operated by the Department of Behavioral Health and
17 Developmental Services (DBHDS). The Institute serves adult and geriatric
18 individuals. As part of Virginia's public mental health system, SWVMHI serves adult, and
19 geriatric persons from a number of cities and counties in southwestern Virginia. The
20 SWVMHI catchment area is primarily rural in nature and has a total population of
21 564,464 people (1999 census figures). The primarily rural nature of the catchment area
22 affects a number and variety of issues that impact the Institute. For example, this region
23 generally has the highest unemployment rate in the state. In addition, outside the larger
24 towns there is no public transportation, and it is difficult for the individuals to come to
25 community clinics for treatment or rehabilitation. Also of note is the relative scarcity of
26 private providers or private psychiatric hospital beds.

27 **Student description of placement:**

28 The placement at SWVMHI is currently an unpaid practicum experience, which will
29 involve providing direct patient care at a psychiatric inpatient facility. The student will be
30 assigned to a clinical supervisor on one unit (the student has a say in which unit they
31 would like to be placed on, i.e. acute, geriatric, extended rehabilitation), and will also
32 have the flexibility to provide care on other units. The student will have the option of
33 participating in group therapy, individual therapy, suicide risk assessment, as well as
34 extended assessment batteries. If interested, the student will also have the opportunity to
35 observe and potentially conduct forensic services including fitness to stand trial,
36 competency hearings, etc. The first student will be placed at SWVMHI from 5.15.2011 –
37 5.15.2012.

38
39 **14. Cognitive Behavioral Therapy Center of Western North Carolina, P.A.**

40
41 **2008-2009(Summer Clerkship, one full day for 10 weeks on site) may be renewable**
42 **with faculty sponsorship**

43
44 417 Biltmore Avenue, Suite 2E

1 Asheville, NC 28801

2 Website: <http://www.behaviortherapist.com/>

3
4 On-site Supervisors: Rick Baker, MA, LPC, Trent Codd, Ed.S., & John Ludgate, Ph.D.
5 ETSU Supervisor: William T. Dalton III, Ph.D.

6 **Site Description:** We provide outpatient cognitive-behavioral therapy and other
7 evidence-based treatments for emotional disorders. Our practice is firmly committed to
8 delivering and disseminating empirically-based treatments. Our commitment is to
9 improve the quality and variety of therapeutic and educational services to our clients and
10 customers. We strive to build a collaborative environment where each person is valued,
11 respected, and actively involved in their personal growth.

12 **Student Description of Placement:** session observations, interactions and scholarly
13 discussions with supervisors, and access to book/video library to increase knowledge of
14 related topics.

15
16 **15. ETSU Department of Family Medicine – clerkship setting**

17 917 West Walnut Street

18 Johnson City, TN 37604-6527

19 Supervisors: Tom Bishop, Ph.D.(Johnson City) and Chris Dula, PhD

20
21 **Site Description:** The Mission is to provide community-focused medical education and
22 evidence-based, patient centered care; to improve health in rural southern Appalachia,
23 especially among the underserved population; to model compassionate and efficient
24 care using effective communication skills; and to advance scholarly investigation. We
25 lead through excellence, collaboration and innovation.

26
27 **Student Description of Placement:** Student involved in three rotations at primary care
28 sites in the tri-cities region. Each rotation involves experiential and didactic elements,
29 with opportunities to shadow psychological and medical professionals treating various
30 physical, emotional, and behavioral problems among predominately low-income patients.

31
32
33 **16. Mountain States Health Alliance- Cardio-pulmonary Rehabilitation**

34 **Cardiac Rehabilitation Services at The Wellness Center - unpaid**

35 200 MedTech Parkway, #200

36 Johnson City, TN 37604

37 Supervisor: Peggy Cantrell, PhD,

38
39 **Site Description:** Cardiac rehab provides patients with an individualized program of
40 exercise and education, prescribed by his/her physician, for a specific condition. The
41 centers have a variety of equipment that may include treadmills, NuStep, Airdyne bikes,
42 arm ergometers, stationary bicycles, rowing machines, ellipticals, recumbent bikes and
43 weights. To assist with patient care, their team includes individuals and physicians with
44 specialized training in cardiopulmonary disease management. This team includes
45

1 registered nurses, licensed practical nurses, registered respiratory therapists, exercise
2 physiologists, dietitians, cardiologists and pulmonologists.
3

4 **Student Description of Placement:** The practicum experience at Cardiac Rehabilitation
5 provides an opportunity to conduct psycho-educational/support groups for men and
6 women who have suffered a cardiac event, most typically a heart attack. The men and
7 women who attend Cardiac Rehabilitation are usually older adults, ranging in age from
8 50-85. The psycho-educational groups cover topics such as health anxiety, depression,
9 anger, self-care, communication effectively with the physician, and promoting social
10 support. There is also an opportunity to provide individual therapy services at this site.
11 These therapy sessions are typically 30 minutes in duration, and the patients are treated
12 on a first-come, first-serve basis. These patients are typically dealing with depression
13 and anxiety, the loss of a spouse, interpersonal stress, financial stress, and health
14 anxiety. Cognitive-behavioral, interpersonal, and supportive therapies are most effective
15 for this setting. Additionally, there are some requirements each student has to meet prior
16 to starting at Mountain States Health Alliance, including completing an online orientation,
17 receiving a negative tuberculosis skin test within 60 days of the start date, having proof
18 of the MMR vaccine or titer, having taken and passed a CPR class, and completing a
19 **checklist** and safety orientation. Rachel will have a list of these requirements, and you
20 will be contacted by the MSHA student coordinator with login information to complete the
21 online requirements.
22

23 **17. ETSU Student Health Clinic**

24 \$12,000 stipend - annual placement
25

26 **Site Description:**

27 ETSU Student Health is a nurse-managed on campus clinic which serves the primary
28 health care needs of ETSU students.
29

30 **Placement Description:**

31 The student trainee provides integrated primary care consultation as well as traditional
32 mental health services in this primary care setting.
33

34 **18. Mountain City Extended Hours Clinic**

35 \$12,000 stipend – annual placement
36

37 **Site Description:**

38 Mountain City Extended Hours Clinic is a rural health clinic that is nurse-managed.
39 Student trainees provide integrated behavioral health and telehealth services to a diverse
40 rural population.
41

1 **19. Camelot Care, Inc.**

2 \$12,000 stipend + mileage reimbursement – annual placement

3
4 2971 Fort Henry Drive

5 Kingsport, TN 37664

6 (423) 392-2975

7 Supervisor: Jill Stinson, PhD

8
9 **Site Description:** Camelot is a statewide agency that provides family counseling and
10 foster care services to designated areas throughout Tennessee. Camelot is a forward
11 thinking agency that is looking to integrate with other healthcare services to provide more
12 holistic care to the people they serve.

13
14 **Student Description:** As externs, ETSU doctoral students work out of the Kingsport,
15 Tennessee office and provide a variety of services that include but are not limited to the
16 following: parenting and risk assessment, psychological testing, outpatient individual
17 therapy for both children and adults, in-home individual therapy for both children and adults
18 throughout the northeast region of Tennessee, group therapy for borderline personality
19 disorder and alcohol and drug abuse, as well as representing children and parents in court.
20 These services give students a variety of experiences and fit with our program's mission of
21 providing education on rural and integrated health care services.

1

2 **Appendix G: Department of Psychology Diversity Plan**

3 4 **Department of Psychology** 5 **Diversity Plan** 6

7 The Department of Psychology at East Tennessee State University has established a
8 program of clinical training designed to equip students with tools to address the behavioral and
9 mental health needs of people located in the underserved communities surrounding the university.
10 These communities comprise economically disadvantaged and strongly faith-based individuals
11 located within rural Appalachia. In this way, the entire premise of the program is diversity-
12 centered. Yet these three dimensions of individuality are but a subset of a much larger
13 multidimensional spectrum of diversity with which the Department, through formal and informal
14 experiences, attempts to ensure familiarity and sensitivity among all its staff and students.
15 Included in this broader spectrum are, but are not limited to, race, ethnicity, age, sex, gender,
16 sexual orientation, religious orientation, religion, disability status, socioeconomic status, and
17 national origin. Below we describe the department's efforts to infuse attention and sensitivity to
18 diversity through 1) a long-term, systematic plan for the recruitment and retention of diverse staff
19 and students; (2) education of students; and (3) establishment of a climate of respect.

20 *Long-Term Systematic Efforts at The Department of Psychology at East Tennessee State*
21 *University has established a program of clinical training designed to equip students with tools to*
22 *address the behavioral and mental health needs of people located in the underserved*
23 *communities surrounding the university. These communities comprise economically*
24 *disadvantaged and strongly faith-based individuals located within rural Appalachia. In this way, the*
25 *entire premise of the program is diversity-centered. Yet these three dimensions of individuality are*
26 *but a subset of a much larger multidimensional spectrum of diversity with which the Department,*
27 *through formal and informal experiences, attempts to ensure familiarity and sensitivity among all*
28 *its staff and students. Included in this broader spectrum are, but are not limited to, race, ethnicity,*
29 *age, sex, gender, sexual orientation, religious orientation, religion, disability status, socioeconomic*
30 *status, and national origin. Below we describe the department's efforts to infuse attention and*
31 *sensitivity to diversity through 1) a long-term, systematic plan for the recruitment and retention of*
32 *diverse staff and students; (2) education of students; and (3) establishment of a climate of respect.*
33
34

1
2 **Recruiting and Retaining Diverse Staff and Students**

3 In this first area our plans include a breadth of strategies for recruiting and retaining both
4 diverse faculty and students. Currently we have 15 full-time faculty – 9 men and 6 women. Open
5 faculty positions are advertised in both a general audience publication (i.e., the *APA Monitor*), and
6 an African-American targeted publication (*Psych Discourse*). Every department advertisement is
7 subjected to review and revision by ETSU's Affirmative Action Officer, Dr. Mary Jordan, who
8 directs the Office of Equity & Diversity (<http://www.etsu.edu/equity>). The Office of Equity and
9 Diversity oversees equity standards and university-wide education and training on diversity. All
10 ads include a statement encouraging minorities and underrepresented groups to apply. In
11 addition, departmental faculty distribute advertisements to colleagues in other psychology
12 graduate departments and to various society listservs such as the Council of Graduate
13 Departments of Psychology (COGDOP) and the Society for Personality and Social Psychology. In
14 order to improve in the area of diversity recruitment, we plan to advertise future open faculty
15 positions in additional listservs that would reach diversity-specific organizations (e.g., APA
16 Divisions 44 (LGBT) and 45 (Ethnic Minority Issues)).

17 We continually strive to recruit diverse graduate students. Since the inception of the clinical
18 doctoral program we have distributed marketing to over 500 colleges and universities nationwide,
19 including 50 Historically Black Colleges and Universities (HBCUs), more than 70 Christian
20 Colleges/Universities, and more than 50 Colleges and Universities that host a McNair. The
21 program also utilizes a recruiter funded by the School of Graduate Studies who attends graduate
22 school and career fairs at institutions which identify as serving historically underserved groups.
23 The program individually corresponds with all contacts identified through this institutional
24 recruitment. The program participates in student recruitment at professional conferences, such as
25 the Collaborative Family Health Association, Rural Mental Health Association, and the Tennessee
26 Psychological Association. In addition, with each cohort of potential students we recruit doctoral
27 students who are sensitive to diversity issues particularly as they relate to a clinical setting. In this
28 regard, as part of our group interviewing process, we ask a series of interview questions designed
29 to gauge sensitivity to individual and cultural differences. To this end, we have received, on
30 average, 42 applications for our program each year between 2007 and 2010. Table 2 indicates the
31 diversity represented in our applicants, and in the demographics of the 28 students enrolled in
32 various stages of the program during these years. Of the 28 current students, 8 (28.6%) are male,
33

1
2 2 (7.1%) report ethnicity that is non-White. The mean age of current students is 26 years, with
3 some variability (range = 23 to 48). Three (10.7%) report some form of disability-related status.

4 In addition to student demographic diversity, with each cohort of potential students we
5 recruit doctoral students who are sensitive to diversity issues particularly as they relate to a clinical
6 setting. Thus, as part of a group interview of applicants, we ask a series of interview questions
7 designed to gauge sensitivity:

8 In the spirit of striving to implement additional strategies for recruitment of diverse faculty
9 and students alike, we believe a restructuring of the departmental website to highlight diversity will
10 facilitate our efforts. According to research recently published in the *Journal of Diversity in Higher*
11 *Education* (Wilson & Meyer, 2009), programs' websites have been referred to as the virtual face,
12 and may be critical especially for minority students considering particular schools, as they can
13 evaluate via the website as to whether that college or university takes their needs and interests
14 into consideration.

15 Our restructured website will highlight the department's statement on
16 diversity/inclusiveness, as well as departmentally-sponsored activities that relate to diversity,
17 including open positions, speakers, and faculty and student activities (presentations, publications,
18 projects). We will highlight, for example, Dr. Chris Dula, who, in collaboration with a Sociology
19 faculty member, has been awarded a diversity grant from the Tennessee Board of Regents two
20 years in a row. We will also highlight Dr. Stacey Williams' recent research study on attitudes
21 about sexual orientation. Finally, we will include a description of our recently implemented
22 Priester-Sloan award, which is a graduate student scholarship for first year graduate students,
23 awarded in large part based on financial need. The addition of this award to the website
24 recognizes the struggles of students based on economic circumstance. Hence, a retooled website
25 will help retain students while contributing to a climate of respect.

26 In addition to our efforts aimed directly at recruiting and retaining diverse faculty and
27 students, we believe that our efforts to promote diversity, both formally, in our training curriculum,
28 and informally, in the environments and climates we establish for them, will indirectly promote the
29 recruitment and retention of diverse faculty and students. Indeed, we believe these two efforts
30 mutually inform one another.
31
32
33

Education of Students

Our systematic plan to infuse diversity into the curriculum is a formal effort. For clinical students, we infuse discussion of diversity into the ethics course (PSYC5100). Further, both clinical and experimental students take an anthropology course on cultural and anthropologic applications related to mental health in rural Appalachia (PSYC7500). Clinical students gain further experience interacting with rural communities and working interprofessionally through the course “Rural Health Research and Practice” (PSYC5040), an inter-professional course which also enrolls nursing, medicine, environmental health, social work and public health students. PSYC5040 uses community-based participatory research methodology and theory relevant to health sciences and rural settings.

Our recently implemented PhD program concentration in experimental psychology has a translational focus and also promotes inter-professional contact via coursework and research. Further, a core component of the experimental concentration is a seminar course on the Psychology of Diversity (PSYC7770) which covers various theoretical topics, such as racial identity development, stigma and identity, social contact to effect change in attitudes, among others – all in the context of psychological science and understanding the experiences of individuals differing on a variety of dimensions, including gender, race/ethnicity, sexual orientation, social status, and immigration status. This course serves as a guided elective for clinical students. Further, we strive to ensure cross fertilization between the clinical and experimental programs. For one thing, students in both concentrations recruit faculty from both concentrations to serve on their graduate advisory committees. Further, the experimental faculty provides support to the clinical program by identifying and ensuring the achievement of learning outcomes appropriate to the broad and general foundations training expected of clinical students.

In their clinical training, students address how diversity issues are relevant to their cases. Indeed, one of the major components of the clinical capstone project is the section on how diversity issues are relevant to the case being described. This application is designed to help prepare students to work with diverse populations, such as they will find in both the Behavioral Health and Wellness clinic and their externship placements. In addition to racial and ethnic diversity, the BHWC caseload includes diverse individuals. Of the 143 visiting the clinic in the last year, 51 (35%) were female and 2 (1%) were transgender. In addition, of the 74 clients who provided ethnic data, 65 were Caucasian, while 3 (4%) were African American, 3 (4%) were Latino, 1 (1%) was Asian, 1 (1%) was Romanian/German, and 1 (1%) was German/Samoan.

1
2 Further, students are exposed to clients with diverse religious values, and therefore religion and
3 spirituality issues are dealt with in therapy. We also have several clients with physical disabilities
4 seeking treatment in the BHWC. Through their experience working in the department's BHWC as
5 well as a host of externship placements, students are exposed to a diverse range of client
6 demographics, clinical settings, and colleagues. Students are also exposed to a diverse range of
7 presenting problems, from long-term schizophrenia to adjustment disorders. Community mental
8 health locations offer students the opportunity to work with individuals of varying levels of SES.
9 For example, at the Downtown Clinic, which is a nurse practitioner-run clinic for low-income
10 individuals, students gain experience handling issues related to low SES and homelessness.
11 Another unique feature of the Downtown Clinic is that Johnson City's Hispanic and migrant
12 population is disproportionately represented, thus exposing students to ethnic diversity and the
13 reality of the language barrier. Moreover, students working within primary care settings collaborate
14 with physicians and residents of varying racial, ethnic, and foreign national backgrounds (e.g.,
15 Pakistani, Indian).

16 Our clinic director, Dr. Kerry Holland, is very active in the community with regard to
17 promoting diversity issues. She has provided diversity training for medical students at Quillen
18 College of Medicine, and started a chapter of Parents, Families, & Friends of Lesbians and Gays
19 (PFLAG) in Upper East Tennessee. Her efforts are notable because our region leans toward
20 extreme political and religious conservatism, which has created a difficult and challenging
21 environment for individuals from sexually diverse backgrounds. In addition to student training, the
22 department fosters faculty diversity education. A number of faculty (e.g., Drs. Brown, Cantrell,
23 Dixon, Ellis) have received Safe Zone Training.

24 Dr. Holland, along with an advanced graduate student, has recently created an intake
25 training video that highlights examples of the complexities that can arise with a clinical intake. The
26 role-play video depicts a client who mentions both a partner and a husband when describing her
27 relationship history. The video is intended to assist students in developing respectful and effective
28 skills to handle complex intake encounters.

30 ***Climate of Respect***

31 Our formal and informal efforts to promote diversity **contribute to a climate in which**
32 **diversity is celebrated.** To further promote a climate of respect, we provide activities in the

1 department and support activities in the larger university and community related to diversity. One
2 effort in this regard is the infusion of diversity into our speaker series. **We reserve one speaker**
3 **series event per year to a topic related to diversity, but in reality, many of our speakers**
4 **have addressed diversity issues.** In Spring semester, 2011 we had Dr. Naomi Hall, who
5 represented cultural diversity in her personal characteristics as well as her research on ethnic
6 minority risk for HIV and promotion of sexual negotiation skills. **We also have organized**
7 **university-wide events that reflect diversity,** such as Jean Kilbourne (who spoke about women
8 and advertising) and Tim Wise (anti-racist writer and activist co-sponsored by the ETSU Race
9 Relations Dialogue Task Force). Ideas we have for moving forward with this effort include hosting
10 a university-wide event on men's experience of sexual abuse – a topic that is rarely discussed and
11 that goes against societal expectations of gender, and collaborating with the university's Office of
12 Multicultural Affairs in their numerous efforts to increase the depth of diversity consciousness on
13 campus. We believe that our faculty and students' current affiliations also could facilitate our
14 efforts to sponsor, co-sponsor, and support larger scale diversity relevant events (for instance: Dr.
15 Chris Dula is a member of the ETSU Race Relations Dialogue Task Force; Drs Peggy Cantrell
16 and Stacey Williams are member of women's studies faculty/steering committee; Dr. Jamie Hirsch
17 founded the campus group Active Minds which focuses on raising awareness about mental health
18 and seeking care; Dr. Stacey Williams is part of leadership of the PFLAG chapter; and numerous
19 undergraduate and graduate students (e.g., David Hutsell) are members of organizations
20 promoting respect for diversity (such as NAMI and LGBTies).

21 **The department encourages faculty and student research that promotes an**
22 **understanding of diverse perspectives.** Our current faculty represents quite a range of areas of
23 psychology, as well as specific research areas within each. Some faculty and student research
24 activities explicitly focus on individual differences, whereas others examine the extent to which
25 individual differences are contributors to mental and behavioral health outcomes. Drs. William
26 Dalton III and Jodi Polaha conduct research directly relevant for rural Appalachia and both mental
27 and physical health. Dr. Wallace Dixon studies individual differences in linguistic, cognitive, and
28 temperament development.

29 Finally, we have recently undertaken **systematic and continuous assessment of**
30 **diversity-related activities in the department.** Through this effort, we are collecting
31 **information on the current activities in which students and faculty participate that relate to**
32 **diversity. In addition to tracking our progress in the area of diversity, we will use the**
33 **information gathered to assist in updating the department website and newsletter.**

1
2 **Moreover, gathering and posting such information will contribute to the recruitment and**
3 **retention of diverse staff and students, as well as to a climate of respect.**

4 The findings from our initial survey of faculty revealed faculty members are studying an
5 array of topics related to diversity including:

- 6 • Older adults, rurality, and race/ethnicity as pertaining to psychopathology,
7 personality, and health functioning
- 8 • Attitudes about sexual orientation and stigma
- 9 • Diversity in higher education at universities and community colleges in Tennessee
- 10 • Traumatic events and discrimination experiences among South Africans
- 11 • Religiosity in relation to stress and health
- 12 • How gender and socioeconomic status moderate trauma experiences and
13 psychosocial functioning
- 14 • Women's infertility experiences in Appalachia
- 15 • Psychological make-up and well-being of various minority groups (e.g., LGBTQ)
- 16 • Cultural norms between social groups/regions
- 17 • Rural Appalachian families and children
- 18 • Rural, African American, and Hispanic populations
- 19 • Stigma in seeking mental health services in rural areas
- 20 • Barriers to physician screening of mental health problems
- 21

22 Relatedly, all faculty who completed the survey (N=12) felt somewhat or often supported by
23 the department in terms of their own diverse characteristics (M=3.33, possible range 1-4). Further,
24 many faculty members (9 out of 12) infuse diversity into their training of graduate students at least
25 sometimes or often.

26 Findings from the faculty survey were further supported by those of a similar diversity
27 survey completed by the current graduate students in the clinical psychology program (N=22). The
28 majority of students indicated feeling supported "somewhat" or "a lot" by peers (85%) and the
29 Clinical program (95%) for their individual differences or personal demographics. Sample
30 comments regarding the program include:

31 "The program and faculty do an excellent job of supporting diversity as well as encouraging
32 self-exploration into one's individuality."

1
2 “The program ensures a safe & accepting environment for students.”
3

4 “I have never felt discriminated against by the program by any differences I may have from
5 faculty or other students.”
6

7 “Professors are generally supportive in most areas, including those related to diversity.”
8

9 “The clinical faculty are open-minded and supportive.”
10

11 “The program seems to be open to a wide breadth of experiences, beliefs, and differences so
12 long as one is capable of being open to differences and diversity in others, specifically our
13 clients.”
14

15 Further, the majority of clinical students reported having taken at least one course or had
16 training experience pertaining to diversity (82%) so far in their training. Those who commented on
17 their experiences with coursework in the department reported widespread inclusion and
18 helpfulness:

19 “We had a seminar course dedicated to understanding how issues of diversity factor into
20 psychological studies and psychological health. The reading and conversations were helpful in
21 increasing mindfulness about diversity-related issues. Many (I would say most) other classes
22 incorporated issues of diversity into the discussions and reading material. Ethics class (w/Dr.
23 Ellis) was very helpful in attuning our minds to the various types of issues that people may
24 present with in clinical work. Assessment courses spent time discussing how diversity among
25 clients may impact assessment scores. Clinically focused courses always incorporated
26 readings and discussions of how clinicians must maintain awareness of diversity-related
27 issues. The anthropology course was unique and helpful in its focus on cultural and
28 socioeconomic diversity.”
29

30 “Although diversity training is weaved throughout courses, the social psychology seminar was
31 particularly helpful in increasing my understanding of privilege and challenges associated with
32 coming from a less privileged background.”

1 “Social Diversity- discussed issues relating to inequality among races, as well as protective
2 and risk factors for different races. Cultural Anthropological Studies- Discussed culture bound
3 syndromes. In addition I learned a lot from a guest speaker we had who was a Mexican
4 adjunct professor at a local college who came and spoke to our class about her work, about
5 curanderismo, but mainly her culture. Not only was it extremely interesting it was also very
6 easy to understand and I still remember a lot she told us about cultural differences.”
7

8 “Legal and Ethical Issues in Psychology provided a nice introduction to cultural competence.
9 As well, Personality and Treatment models included a portion on multicultural practice. From
10 these classes, I feel I know the bare basics about cultural competence, how to become more
11 culturally competent, and possible courses of action for when I encounter a client who belongs
12 to a culture I am unfamiliar with.”
13

14 Of those who completed the survey, although students indicated their race/ethnicity as White,
15 there was variation in other areas of diversity. Specifically, current reports indicated 74% of clinical
16 students are female while 26% are male, 91% are of heterosexual orientation while 9% are of
17 minority sexual orientation (gay, lesbian, or bisexual), and 39% are married while another 48% are
18 either in a committed relationship and/or cohabitating. In addition, while 53% report being
19 Christian, among the others, 26% report being spiritual but not religious and 16% are atheist.
20 Students also reported an age range from 23-49. And, the majority of current students indicated
21 having grown up in the South (68%), 18% originated on the East Coast of the U.S. and the
22 remainder were from the North, Northwest, Midwest, or Southwest.

23 As depicted in the findings of the surveys, as well as the content of this document overall, the
24 Clinical program has made many successful strides in the area of diversity. In particular, we have
25 integrated a diversity focus in the areas of recruitment and retention and in the education of
26 students. And in so doing, we believe we have created a climate of tolerance and acceptance.
27

28 References

29 Rankin, S., & Reason, R. (2008). Transformational Tapestry Model: A comprehensive
30 approach to transforming campus climate. *Journal of Diversity in Higher Education*, 1, 262-274.

31 Wilson, J. L., & Meyer, K. A. (2009). Higher education websites: The “virtual face” of
32 diversity. *Journal of Diversity in Higher Education*, 2, 91-102.
33

1
2
3

Table 1. Student Recruitment from Colleges and Universities Representing Diverse Demographics

School	HBCU	Christian	McNair	HIS
Alabama A&M Normal, AL	x		x	
Alabama State Montgomery, AL	x			
Concordia College Selma, AL	x			
Judson College Marion, AL		x		
Miles College Birmingham, AL	x			
Oakwood College Huntsville, AL	x			
Stillman College Tuscaloosa, AL	x			
Talladega College Talladega, AL	x		x	
Tuskegee University AL	x			
University of Alabama Tuscaloosa, AL			x	
University of Montevallo Montevallo, AL			x	
Azusa Pacific University Azusa, CA		x		
Bethany University Scotts Valley, CA		x		
California Baptist Univ Riverside, CA		x		
California Lutheran Univ Bakersfield, CA		x		
California State University Long Beach, CA			x	x
California State University Bakersfield Bakersfield, CA			x	x
California State University Dominguez Hills Carson, CA			x	x
California State University East Bay Hayward, CA			x	
California State University Fresno Fresno, CA			x	x
California State University Fullerton Fullerton, CA			x	x
California State University Long Beach Long Beach, CA			x	x
California State University Monterey Bay Seaside, CA			x	x
California State University Sacramento Sacramento, CA			x	
California State University San Bernadino San Bernadino, CA			x	x
Charles R Drew Univ of Medicine and Science Los Angeles, CA	x			
Claremont Graduate University Claremont, CA			x	
Concordia University Irvine, CA		x		
Hope International Univ Fullerton, CA		x		
Fresno Pacific Univ Fresno, CA		x		x
Life Pacific College San Dimas, CA		x		
Lincoln Univ Oakland, CA	x			
The Master's College Santa Clarita, CA		x		
San Diego Christian College El Cajon, CA		x		
San Diego State University San Diego, CA			x	x
San Jose State University San Jose, CA			x	
Sonoma State University Rohnert Park, CA			x	
Simpson Univ Redding, CA		x		
UC Berkeley Berkeley, CA			x	
UC Davis Davis, CA			x	

UCLA Los Angeles, CA			x	
UC Merced Merced, CA			x	x
UC San Diego La Jolla, CA			x	
UC Santa Barbara Santa Barbara, CA			x	
University of San Diego San Diego, CA			x	
Vanguard Univ Costa Mesa, CA		x		
Westmont College Santa Barbara, CA		x		
William Jessup Univ Rocklin, CA		x		
Atlanta Christin College East Point, GA		x		
Clark Atlanta Univ Atlanta, GA	x			
Georgia State University Atlanta, GA			x	
Morehouse College Atlanta, GA	x		x	
Paine College Augusta, GA	x			
Shorter College Rome, GA	x			
Spelman College Atlanta, GA	x			
Albany State Univ Albany, GA	x			
Toccoa Falls College Toccoa Falls, GA		x		
Savannah State Univ Savannah, GA	x			
Earlham College Richmond, IN			x	
Indiana State University Terre Haute, IN			x	
Indiana University/Purdue University Indianapolis, IN			x	
Purdue University Calumet Hammond, IN			x	
Saint Joseph's College Rensselaer, IN		x		
Saint Mary-of-the-Woods College Saint-Mary-of-the-Woods, IN		x		
Taylor Univ Upland, IN		x		
University of Indiana Bloomington Bloomington, IN			x	
University of St. Francis Fort Wayne, IN		x		
Dordt College Sioux Center, IA		x		
Mount Mercy College Cedar Rapids, IA		x		
Northwestern College Orange City, IA		x		
St. Ambrose Univ Davenport, IA		x		
University of Iowa Iowa City, IA			x	
University of Northern Iowa Cedar Falls, IA			x	
Vennard College University Park, IA		x		
Bryan College Dayton, TN		x		
Carson Newman College Jefferson City, TN		x		
Christian Brothers Univ Memphis, TN		x		
Crichton College Memphis, TN		x		
Fisk Univ Nashville, TN	x			
King College Bristol, TN		x		
Knoxville College Knoxville, TN	x			
Lee Univ Cleveland, TN	x			
LeMoyne-Owen College Memphis, TN	x			
Middle Tennessee State University Murfreesboro, TN			x	

Southern Adventist Univ Collegedale, TN		x		
TN State Univ Nashville, TN	x			
TN Temple Univ Chattanooga, TN			x	
Union Univ Jackson, TN			x	
Allen Univ Columbia, SC	x			
Benedict College Columbia, SC	x			
Bob Jones Univ Greenville, SC			x	
Charleston Southern Univ Charleston, SC			x	
College of Charleston Charleston, SC				x
Columbia International Univ Columbia, SC		x		
Erskine College Due Wes, SC		x		
Morris College Sumter, SC	x			
North Greenville Univ Tigerville, SC			x	
South Carolina State Univ Orangeburg, SC	x			
Southern Wesleyan Univ Central, SC	x			
University of South Carolina Columbia Columbia, SC				x
Voorhees College Denmark, SC	x			
Winthrop University Rock Hill, SC				x
Bluefield College Bluefield, VA	x			
College of William and Mary Williamsburg, VA		x		
Liberty Univ Lynchburg, VA		x		
Norfolk State Univ Norfolk, VA	x			
Regent Univ Virginia Beach, VA			x	
Saint Paul's College Lawrenceville, VA	x			
Virginia State Univ Petersburg, VA	x			
Bennett College St. Greensboro, NC	x			
Elizabeth City State Univ Elizabeth City, NC	x			x
Fayetteville State University Fayetteville, NC				x
Gardner-Webb Univ Boiling Springs, NC		x		
Johnson C. Smith Univ Charlotte, NC	x			
Lenoir-Rhyne College Hickory, NC			x	
Livingstone College Salisbury, NC	x			
Methodist Univ Fayetteville, NC			x	
Montreat College Montreat, NC			x	
North Carolina Central Univ Durham, NC	x			
North Carolina State University Raleigh, NC				x
Piedmont Baptist College Winston-Salem, NC		x		
St. Andrews Presbyterian College Laurinburg, NC		x		
Shaw Univ Raleigh, NC	x			
Winston-Salem State Univ Winston-Salem, NC	x			
Baptist College of Florida Graceville, FL			x	
Clearwater Christian College Clearwater, FL			x	
Edward Waters College Jacksonville, FL	x			
Florida Christian College Kissimmee, FL			x	
Florida International University Miami, FL				x
				x

Florida Memorial Univ Miami Gardens, FL		x		1
Palm Beach Atlantic Univ West Palm Beach, FL		x		2
Southeastern Univ Lakeland, FL		x		3
University of Central Florida Orlando, FL			x	4
Trinity College Trinity, FL		x		5
Warner Southern College Lake Wales, FL		x		6
Asbury College Wilmore, KY		x		
Campbellsville Univ Campbellsville, KY		x		
Clear Creek Baptist Bible College Pineville, KY		x		
Eastern Kentucky University Richmond, KY			x	
Kentucky Mountain Bible College Vancleve, KY		x		
Kentucky State Univ Frankfort, KY	x			
Kentucky Christian Univ Grayson, KY		x		
Murray State University Murray, KY			x	
Alcorn State Univ Alcorn State, MS	x			
Belhaven College Jackson, MS		x		
Jackson State Univ Jackson, MS	x		x	
Mississippi College Clinton, MS		x		
Rust College Holly Springs, MS	x			
University of Southern Mississippi Hattiesburg, MS			x	
Arkansas Baptist College little Rock, AR	x	x		
Arkansas State University Jonesboro, AR			x	
Central Baptist College Conway, AR		x		
Harding University Searcy, AR			x	
Henderson University Arkadelphia, AR			x	
John Brown Univ Siloam Springs, AR		x		
Philander Smith College Little Rock, AR	x			
Univ of Arkansas Little Rock Little Rock, AR			x	
Univ of Arkansas Pine Bluff, AR	x		x	
Williams Baptist College Walnut Ridge, AR		x		
Baptis Bible College Springfield, MO		x		
Central Methodist Univ Fayette, MO		x		
College of the Ozarks Point Lookout, MO		x		
Evangel University Springfield, MO		x		
Harris-Stowe State Univ St. Louis, MO	x			
Lincoln Univ Jefferson City, MO	x			
University of Central Missouri Warrensburg, MO			x	
Howard Univ Washington, DC	x		x	

1 **Table 2. Applicant Pool Characteristics from 2007-2014.**

	2007	2008	2009	2010	2011	2012	2013	2014
Mean Age (Min-Max)	25 (21-53)	no data	26 (21-50)	25 (21-53)	28 (22-55)	25 (20-47)	25 (20-43)	25 (21-61)
Gender (% Male)	22%	31%	36%	27%	27%	36%	26%	26%
Ethnicity (Non-White)	12.2%	7%	22%	no data	10.4%	20.8%	16.2%	18.5%

2

3

Appendix H: Internship Placements

Student Name	Name and Location of Internship	Funded: (Y/N)	APA, APPIC, or CPA- Accredited (Y/N)
Jennifer Correll	Cherokee Health Systems, Morristown, TN	Y	Y
Brandon Bogle	Stone Mountain Health Services, Pennington Gap, VA and St. Charles, VA	Y	Y
Russell Fox	Appalachian Regional Healthcare, Hazard, KY	Y	Y
Preston Visser	Chicago Area Christian Training Consortium Chicago, IL	Y	Y
Natasha Gouge	Stone Mountain Health Services, Pennington Gap, VA and St. Charles, VA	Y	Y
Jessica Turner	Cherokee Health Systems, Morristown, TN	Y	Y
Mandi Deitz	Boise Veterans Affairs Boise, ID	Y	Y
Jeffrey Ellison	East TN/SW VA Consortium Stone Mountain Health Services (FQHC) Pennington Gap, VA	Y	Y
Joshua Hatfield	Butner Federal Correctional Facility Butner, NC	Y	Y
Michael Miesner	Frontier Health Systems Gray, TN	Y	Y
Sheri Nsamenang	Denver Health Denver, CO	Y	Y
Kristin Walker	Emory Medical School Atlanta, GA	Y	Y
David Bumgarner	James H. Quillen Veterans Affairs Center Mountain Home, TN	Y	Y
Elizabeth Conway- Williams	East TN/SW VA Consortium Stone Mountain Health Services (FQHC) Pennington Gap, VA	Y	Y
Laura Maphis	Geisinger Medical Center Danville, PA	Y	Y

1

2 **Appendix I: Selected Student Research Topics**

3

- 4 • Weight Concerns, Body Image, & Smoking Cessation in Pregnant Women in Rural
- 5 Appalachia
- 6 • Further Assessment of the Reliability and Validity of the Sex Offender Attitude Scale
- 7 • Examining Attention, Impulsiveness, and Cognitive Failures in Driving Behaviors
- 8 • Basic Psychological Need Satisfaction and Hepatitis C Treatment in a Veteran Sample:
- 9 Predicting Immune Function via Treatment Adherence, Well-Being, and Psychological
- 10 Distress
- 11 • Initial Development of the Sex Offender Attitude Scale
- 12 • Multiple Traumas and Psychiatric Disorders in South Africa
- 13 • “Temperament-Language Relationships during the First Formal Year of School” (2011)
- 14 • Positive Psychological and Religious Characteristics as Moderators of Negative Life Events
- 15 and Depressive Symptoms: A Multiethnic Comparison
- 16 • Social Support and Family Criticism: Potential Moderators of the Relationship between
- 17 Functional Impairment, Illness Burden, and Depressive Symptoms and Diagnosis.
- 18 • Impact of Self-Esteem, Adult Attachment, and Family on Conflict Resolution in Intimate
- 19 Relationships
- 20 • Barriers and Facilitators to Rural Women’s Health and Behavioral Health Care Access
- 21
- 22

Appendix J: IR C-20 Data on Applications/Admissions/Enrollment/Attrition

	Applications Cycle Year															
	2007-2008		2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014		2014-2015	
Number of applicants	40		44		43		36		54		72		61		125	
Number of incoming students receiving an assistantship that includes a full waiver of tuition	9		6		6		6		6		4		6		6	
Scores for Admitted Students																
GRE Verbal																
Mean	146		151		160		151		158		155		158		162	
Median	144		150		162		152		157		155		158		159	
Percentile	31	26	51	48	86	90	56	61	78	74	67	67	78	78	89	81
GRE Quantitative																
Mean	149		155		151		147		149		152		155		155	
Median	149		154		152		147		150		152		156		157	
Percentile	49	49	69	67	56	61	40	40	37	40	48	48	60	64	60	68
GRE Writing																
Mean	5.25		4.67		5.17		3.75		4.5		4.3		4.5		4.5	
Median	5.25		4.5		5.5		3.75		4.5		4		4.5		4.5	
Percentile	89	89	77	72	88	96	33.5	33.5	80	80	80	56	80	80	80	80
Undergraduate GPA Mean																
	3.77		3.27		3.49		3.71		3.76		3.45		3.48		3.46	

Time to completion

Outcome	Year in Which Degrees were Conferred															
	2007-2008		2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014		Total	
Total number of students with doctoral degree conferred on transcript	0		0		0		0		1		5		4		10	
Mean number of years to complete the program									4		4.8		5.5		5	
Median number of years to complete the program									4		5		5.5		5	
Time to Degree Ranges	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students in less than 5 years									1	100	1	20	1	25	3	30
Students in 5 years											4	80	1	25	5	50
Students in 6 years													1	25	1	10
Students in 7 years													1	25	1	10
Students in more than 7 years																

Program costs (tuition and fees) and fellowships and other funding available:

On average, six students are admitted per year, with all students receiving University support through a graduate assistantship for at least the first two years. The support includes a stipend of \$12,000 plus in and out-of-state tuition waivers for the academic year (fall and spring terms). Sources of graduate assistant support in the remaining two years pre-internship vary, and include community training grants and contracts, teaching assistantships, or faculty grants. The stipend amount as well as the contract period after the first two years may vary according to the source of the grant. For example, some community placements have a stipend level of \$10,000 for 12 months, and include travel reimbursement. Others have a stipend of \$12,000 for a 12 month period. To date, 100% of enrolled students have received at least 4 years of graduate assistantship support. http://www.etsu.edu/fa/fs/bursar/tuitioninfo/Grad_Fees.aspx

Internship Acceptance Rate

Outcome	Year Applied for Internship											
	2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014	
	N	%	N	%	N	%	N	%	N	%	N	%
Students who sought or applied for internships*	1		0		3		4		7		3	
Students who obtained internships	1	100			3	100	2	50	6	86	3	100
Students who obtained APA/CPA-accredited internships	1	100			2	67	1	50	3	50	2	67
Students who obtained APPIC member internships that were not APA/CPA-accredited (if applicable)					1	33	1	50	3	50	1	33
Students who obtained other membership organization internships (e.g. CAPIC) that were not APA/CPA-accredited (if applicable)												
Students who obtained internships conforming to CDSPP guidelines that were not APA/CPA-accredited (if applicable)												
Students who obtained other internships that were not APA/CPA-accredited (if applicable)												

*This includes students that withdrew from the internship application process

Internship Placement

Outcome	Year Applied for Internship											
	2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014	
	N	%	N	%	N	%	N	%	N	%	N	%
Students who obtained internships	1		0		3		2		6		3	
Students who obtained paid internships	1	100			3	100	2	100	6	100	3	100
Students who obtained half-time internships* (if applicable)	0	0	0		0		0		0		0	

1 *Should only include students that applied for internship and are included in the number that "sought or applied for internship" from "Internship
 2 Placement - Table 1" for each year.

3
 4 **Student Attrition Rates**

Variable	Year of First Enrollment															
	2007-2008		2008-2009		2009-2010		2010-2011		2011-2012		2012-2013		2013-2014		2014-2015	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students for whom this is the year of first enrollment (i.e. new students)	9		6		6		6		6		4		6		6	
Students whose doctoral degrees were conferred on their transcripts	4	45	3	50	2	33	1	17	0		0		0		0	
Students still enrolled in program	2	22	1	17	3	50	2	33	6	100	3	75	6	100	6	6
Students no longer enrolled for any reason other than conferral of doctoral degree	3	33	2	33	1	17	3	50	0	0	1	25	0		0	

5
 6 **Licensure Outcomes**

Outcome	2007-2008 until 2012-2013
Total number of students with doctoral degrees conferred on transcript in time period	1
Number of students with doctoral degrees conferred on transcripts who became licensed doctoral psychologists in time period	1
Licensure percentage	100%