LIST OF APPENDICES

A. CHECK LIST

B. FACULTY AND COMMUNITY PROFESSIONALS

C. REGISTRATION, LOCKSTEP, COURSES, SPECIALTY FOCUS TOOL, GRADING STANDARDS

D. ETHICAL PRINCIPLES AND ISSUES

E. FIELD PLACEMENT POLICIES AND PRACTICES

F. STUDENT RESOURCES
   1. CLUBS
   2. COMMUNITY RESOURCES

G. INTERNSHIP INFORMATION

H. DOCTORAL PAPER AND INTERNAL REVIEW BOARD (IRB)

I. MULTICULTURAL TRAINING

J. STUDENT EVALUATION FORMS
INDEX

Academic calendar, 19
Academic warning, 14, 64
Access to student records, 8
Adding & withdrawing after deadlines, 19
Admission status, 20
Advanced field placement experience, 10
Advancement to final candidacy, 14
Advancement to preliminary candidacy, 7
Advisor, 5
Annual evaluation, 6, 116
Appeals/Grievances procedures, see due process
Appendix A: Check List, 26
Appendix B: Faculty and Community Professionals, 27
Appendix C: Registration, Lockstep, Courses, Specialty,
Focus tool, Grading Standards, 34
Appendix D: Ethical Principles and Issues, 65
Appendix E: Field Placement Policies and Practices, 94
Appendix F: Student Resources, 100
Appendix G: Internship Information, 104
Appendix H: Doctoral Paper and Institutional Review Board,
109
Appendix I: Multicultural Training, 114
Appendix J: Student Evaluation Forms, 116
Auditing classes see Continuing education
Certification of requirements for working with culturally-
diverse populations, 7, 114
Change of advisor, 6
Check out forms, 13
Clinical competency exam, 9
Clinical evaluations, 6
Clubs, 12, 100
Committees, 12
Community resources, 23, 103
Continuing education, 22
Continuous enrollment, 11
Core academic program, 3
Course attendance requirements, 60
Course plan 7, 8, 36
Course descriptions, (Electives), 49
Course descriptions, (Required), 40
Course schedule, 35
Course waivers, 21
Credits, 8
Critical Incident Notification Sys., 19
Cultural diversity requirements, 114
Departmental appeal, 18
Department of Regulatory Agencies (DORA), 23
Developmental plan, 15
Diversity foundation, 3
Doctoral paper, 13, 109, 110
Doctoral paper draft deadlines, 111
Doctoral paper etiquette, 111
Doctoral Paper Search Instructions, 111
Due Process: Informal resolution stage, 16
Due Process: Formal grievance procedures, 18
DU Health and Neuropsych Club, 100
DU policies and procedures, 19
Enrollment issues for adv. students, 10
Ethical Foundation, 2
Ethical guidelines (APA), 71
Ethical guidelines (GSPP), form, 7, 66
Evaluations, course & instructor, 35
Faculty and community professionals, 27
Faculty meeting, executive committee (EC) reviews, 16
Field placement, 5
Field placement Academic Accommodations, 98
Field placement competency-based training, 96
Field placement hour requirements, 95
Field placement mission, 94
Field placement supervisor evaluation of student, 97
Field placement policies and practices, 94
Field placement problems of concern, 99
Field placement selection process, 94
Field placement supervision, 95
Field placement tracking experience & hours, 97
Field placement unlisted options, 99
Financial aid, 19
First year advising, 7
Forms, 8, 26
Four assessment requirement, 4
Fourth year at GSPP???, 10
Goals and competencies, 2
Grade below B- see substandard grades
Grades, 6
Grading errors, 64
Grading standards, 63
GaSPP, 101
Graduate Student Association of Prof. Psychology
(GSAPP), 100
Graduate Studies, 20
Graduation, 14, 104
GSPP forms website see forms
Health Insurance (DU), 20
Health Insurance Portability and Accountability Act of
1996 (HIPAA), 70
Honor code, 93
Incompletes, 63
Independent research, 54
Independent study, 50/4
Institutional Review Board (IRB), 112
International Students, 20
International Psychology Club, 101
Internship, 13, 104
Internship, affiliated consortium, 13
Internship, completion/graduation, 105
Internship, criteria for a clinical , 106
Internship-last year, 11
Internship performance, 15
Internship policies and procedures, 104
Internship readiness, 12
PsyD Handbook 2013

Handbook Introduction

Dear Students,

Greetings! Welcome to the PsyD program. We are grateful that you have chosen to come to DU, and we are looking forward to an interesting and meaningful training experience with you.

Here you will find an overview of our policies and procedures, as well as resources for other materials that will be helpful in your time here in the PsyD Program. Please keep a copy of this handbook for your records, as your requirements and educational program will be governed by the policies that are in place as you start the program. Also, feel free to discuss any of these policies and procedures with any faculty or staff member, as well.

Here are some WebPages that will be important academic tools for you.

GSPP Forms are located in Webcentral on the GSPP tab.

Graduate Studies Policies & Forms: http://www.du.edu/learn/graduates/studentresources.html
Once linked to the site, select “Policies and Forms”, and the site includes information regarding: Continuous Enrollment, Medical Leave of Absence and Withdrawal Policies, Academic Grievances, Extension Time Request policy, and Graduate policies handbook by entering years. Incomplete submissions will be returned, so make sure to follow all the directions for petitions.

Academic Calendars for 2013-14 and beyond: http://www.du.edu/registrar/calendar/acadcal.html


Please refer to departmental emails and GSPP Newsletters for academic updates.

Please submit your paperwork as a PDF to gspp.forms@du.edu.

You are beginning a very full and challenging time, and we hope that you experience an environment of support and collaboration.

Warm Regards,

GSPP Faculty and Staff
PROGRAM OVERVIEW AND PHILOSOPHY

MISSION

The PsyD program of the University of Denver is housed in the Graduate School of Professional Psychology (GSPP). GSPP’s mission is to provide an innovative educational environment that promotes the application of psychological theory, knowledge, skills, and attitudes/values to professional practice. The mission of the PsyD program is to train competent doctoral level practitioner/scholars who have foundational interpersonal and scientific skills, have a functional mastery of psychological assessment and intervention, and can apply this knowledge and skill in a wide range of settings, with a variety of populations.

GOALS AND COMPETENCIES

As we have sought excellence in clinical training around this mission, we have found that the BEA Benchmark document has provided a framework for articulating our training mode (see the Annual Training Goals form to see the way that we have utilized the Benchmarks, Webcentral GSPP Tab). In particular, we seek to train students who have a broad foundation in the basic relational and scientific tenets of psychology, and who can utilize these foundational concepts in the functional practice of professional psychology. Our first goal is to train psychologists who contribute to the common good by having significant expertise in interpersonal awareness and skill. This commitment to knowledge of self and other is seen in the Relationship, Self-reflective Practice, and Individual and Cultural Difference competencies. Our second goal is to train psychologists who are solidly grounded in the scientific, ethical, and professional foundations and standards in psychology. This knowledge and skill can be seen in the Scientific-Mindedness, Ethical/Legal Issues, and Professionalism Competencies. Third, we seek to train practitioner/scholars who are competent in assessment and intervention, regardless of where they apply these skills. This goal incorporates both the functional Assessment and Intervention competencies.

In order to address our training goals, GSPP focuses on four key training experiences in the PsyD program that are consistent with a practitioner-scholar model. These training areas include: Academic coursework, in house clinical work, community-based clinical work, and professional mentorship. Infused in all four areas is an emphasis on ethics and diversity.

ETHICAL FOUNDATION

In all areas of training, students are expected to seek and uphold the highest ethical standards. We believe that an exploration of ethical behavior is at the heart of psychology training, and encourage an engagement with ethics in all aspects of the program. Students are expected to read the APA ethical guidelines during orientation (Appendix D), and to utilize them throughout their time in the program. Online updates can be found at: http://www.apa.org/ethics/code/index.aspx. Students are also expected to read, discuss, and sign the Guidelines for Ethical Behavior in the University of Denver’s Graduate School of Professional Psychology and the Professional Psychology Clinic (Appendix D).
**DIVERSITY FOUNDATION**

Training in individual and cultural differences also takes place throughout the curriculum and across all areas of the program. Students are required to take the four-course multicultural sequence, and to complete at least 40 hours of direct service with a diverse population (see Certification of Requirements for Working with Culturally Diverse Populations forms [Webcentral GSPP Tab]). Students need to submit a plan for completing this requirement by the spring of their first year, and the requirement must be met before going on internship. In addition, students can pursue additional multicultural involvement through one of our clubs and committees (see Appendix F), such as our Voices of Discovery Program, the GaSPP performance group, the Diversity Committee. Additional resources are available through the university’s Center for Multicultural Excellence.

**CORE ACADEMIC PROGRAM**

The PsyD Program at GSPP is committed to providing broad based training that provides students the basis for general practice, with an adequate foundation to pursue specialty training. As such, we cover the following broad and general areas of psychological study through our 135 credit program. The curriculum is summarized in the PsyD Course Plan in the [Webcentral GSPP Tab](#), which must be submitted during the student’s first year.

**REQUIRED COURSEWORK:** As is seen on the course plan, we cover the following key areas of general psychology training: Theoretical/Scientific/Cognitive Affective Bases of Behavior, Biological Bases of Behavior, Social Bases of Behavior, Ethical Foundations, Individual and Cultural Diversity, Research Methodology and Data Analysis, Diagnosis and Psychopathology, Supervision and Consultation, Assessment, Effective Therapeutic Interventions, and Professional Development.

**LOCKSTEP PLAN:** Students take required courses with their cohort to be sure that the training they receive fits a developmental sequence. Students who need to take courses out of the required order must petition the faculty for permission. Students should meet with their advisor or the director of the PsyD program to craft an alternate plan before submitting a petition.

Elective Coursework: Students can take electives in the PsyD program, one of our MA programs, or around the university to supplement their required courses. Fifteen hours of the elective credit should go toward the Specialty Focus Tool. Students taking elective courses outside the PsyD program should check with their advisor to be sure that the course will count toward the 135 credit requirement.

**SEMINAR:** The Professional Seminar Course is a major bridge between the academic and clinical portions of the program. First year students are assigned a beginning seminar where they learn basic psychotherapy skills and have the opportunity for additional support in their field placement work. Second and Third Year students choose Advanced Seminars; see course descriptions (Appendix C).
PROFESSIONAL PSYCHOLOGY CLINIC (PPC)

All students become staff members of the Professional Psychology Center (PPC) and are expected to carry two clients at all times in the center each year prior to the internship year. PPC client cases are supervised by faculty members, seminar co-leaders, and individual community professionals, all of whom are licensed. Supervision takes place in both individual and group formats, and students receive a minimum of 30 minutes of supervision for each case seen. Students are evaluated by their clinical supervisors twice each year, generally in mid-January and in early June (see PPC Supervisor of Student form). Students also evaluate their supervisors at this point (see Student Evaluation of PPC Supervisor).

TWO CLIENT REQUIREMENT: In order to gain sufficient variety in clinical experience, students are required to carry two cases throughout their time in the program (two cases form). All students are expected to work with a minimum of two psychotherapy clients (one adult) in the Professional Psychology Clinic (PPC) each year prior to the internship year for a minimum of eight sessions each. Students are expected to have two clients at all times, even if the minimal 8 sessions have been met with a client. Further, students must document that they have seen two of their PPC cases for at least eight sessions per year (see Webcentral GSPP Tab). Keep your advisor updated if you are having difficulty or will not meet this minimum standard. You will be expected to make up any shortage during the following year. Students cannot see clients in the PPC during or after internship.

FOUR ASSESSMENT REQUIREMENT: The GSPP requires a minimum of 2 or 4 assessments be completed to graduate, and the requirement must be finished before leaving for internship (2 for those starting fall 2007 through 2009 and 4 for starting fall 2010 and beyond).

To qualify, the assessment must be done by you alone, integrate information from multiple sources, and include a written report. Note that a NAB screen counts as half an assessment, and up to half of the requirement can be met by doing four NAB screens, which includes a written report integrating the NAB results with the interview.

The assessments can be completed in the PPC (through seminar, assessment small groups, or individual supervision) or field placements. There is a form that must be signed by your supervisor to document each assessment. Of course all assessments must be done under supervision.

Please keep in mind that this requirement is a minimum for graduation. To be competitive for many (not all) internships, Jenny Cornish, The Director of Clinical Training, recommends many more assessments be done before applying for internship.

LIABILITY MALPRACTICE INSURANCE: Students are required to carry liability malpractice insurance as long as they are students in the program (including internship year). Proof of insurance must be in student’s file. Most students join APA, and then sign up for reduced rate insurance through APA.

SUPERVISION BY GSPP FACULTY MEMBER: All students, at some point during training, must receive supervision from a GSPP core faculty member or a seminar co-leader. Therefore, priority will be given by advanced seminar leaders to students who did not previously have supervision with
a core faculty member or seminar co-leader. It is the student's responsibility to ensure that this requirement is met.

**FIELD PLACEMENT:** Each year prior to the internship year, students are also required to be in a Community Field Placement for a minimum of eight hours per week. In these placements, students are involved in supervised professional experiences in mental health centers, schools, college counseling centers, the justice system, hospitals, rehabilitation centers, private practices, residential treatment homes, and businesses in the Denver metropolitan area. There is a wide choice of placements, and available paid placements are often filled by second- and third-year students.

Parallel to the evaluation process in the PPC, students are evaluated by their field placement supervisors twice each year, generally in mid-January and in early June (see Field Placement Supervisor Evaluation of Student form). Students also evaluate their supervisors at this point (see Student Evaluation of Field Placement).

- Every student is expected to work as a Psychology Trainee in an outside agency each year prior to the internship year, unless on Leave of Absence or approved for the Special Life Circumstance Policy.
- In this regard, students are required to pursue one or more field placement training experiences per year.
- The minimum time requirement for field placement training is **8-hours per week** and must meet or exceed a minimum total of **384-hours per year** (i.e., 8 hrs. minimum X 48 weeks per year).
- All outside clinical work should be supervised by a licensed mental health professional.
- Field placement experience may be obtained in places other than the listed standard placement settings. Students interested in pursuing this option must complete and submit a typed training plan description (use Proposal to Undertake an Unlisted Field Placement form) that details their clinical work duties and supervision arrangements at the supervised experience.
- A student wishing to undertake a research-oriented field placement must discuss this with his/her advisor to be sure an appropriate amount of clinical practicum work has been/is included in his/her overall program. Any deviation from this policy, including any plan to accrue hours at an accelerated or attenuated rate, or on a non-standard schedule, requires that a formal petition be filed with the Director of the PsyD (see Policy/Requirement Waivers.) Petitions are reviewed on a case-by-case basis.

**PROFESSIONAL MENTORSHIP**

In addition to coursework and supervision, students have the opportunity to work with faculty in a variety of other capacities. Students participate in academic advising, professional clubs and organizations, and in doctoral paper supervision. We see the development of these professional relationships as essential to learning lifelong networking, consulting, and engagement skills.

**ADVISOR**

During orientation, students are assigned an academic advisor. Students are asked to keep the same advisor for the first year at GSPP, as they get to know the faculty and program better. After that point, students may choose to change advisors at any time.
• Students are required to meet with their advisors twice yearly, at a minimum, and are encouraged to meet more frequently.

• Every fall students must complete the Yearly Training Plan with their Professional Seminar leaders and their field placement supervisor, then meet with the advisor to review the plan. This plan helps set goals and strategies for the year, which are then reviewed in the student’s Annual Evaluation.

• Students meet with their advisors every summer to go over the results of the Annual Evaluation.

One key role of the advisor is to help students learn to integrate feedback from a variety of sources. Training at the GSPP is developmental and sequential, and students receive ongoing feedback from faculty, supervisors and instructors to guide their development. As a faculty, we use both qualitative and quantitative data from a variety of sources to evaluate student progress at various stages in the program. Students are evaluated in their development in all eight of our competencies throughout the program. Consistent with our practitioner/scholar model, we seek to ensure student mastery of the following six foundational competencies: Relationship, Self-reflective Practice, Professionalism, Ethics, Scientific-mindedness, and Individual/cultural differences. This foundation in the broad and general aspects of psychology is then applied in our functional competencies, Assessment and Intervention.

The advisor has an overall responsibility for assisting students in their academic and professional growth, and welcomes student contact for advising appointments. In addition to course advising, advisors can be consulted about field placement decisions, internship decisions, supervisor or class questions/problems, special issues, etc. It is of great value to students to become well acquainted with one’s advisor as well as professional seminar group leader.

See Advisor Change Form on the Current PsyD Student Forms Webpage.

**Grades:** The GSPP coursework covers all the competencies described above, and students are given letter grades in all of their courses. Standards for grading are described in Appendix C.

**Clinical Evaluations:** Students are evaluated on their clinical progress by their PPC supervisors and field placement supervisors. The Supervisor Evaluation Form is completed twice each year by all supervisors, and is reviewed and signed by the student and supervisor, then is added to the student file. These evaluations are reviewed by the student’s academic advisor and by the PsyD faculty during the student’s annual evaluation. (Appendix J)

**Annual Evaluation:** Students are reviewed by the PsyD faculty each year. Data such as grades, PPC evaluations, field placement evaluations, doctoral paper progress 270 evaluations, and performance in other professional activities such as clubs and other professional organizations are all reviewed. The feedback is summarized by the advisor in the Annual Evaluation Form, which is then shared with the student. Students meet with their advisors to review the feedback. (Appendix J)
FIRST YEAR ADVISING

FIRST YEAR ADVISING: First year advising typically centers around helping the student adjust to the multiple demands of the program. In addition, this year is spent developing a longer range plan for completing the Specialty Focus Tool and meeting the Diversity hours requirement.

ADVANCEMENT TO PRELIMINARY CANDIDACY: All new students are on probationary status for a minimum of one year (full-time students) or two years (part-time students). At the end of the probationary period, students are evaluated in terms of their personal character and interpersonal skills, professional standards of conduct, clinical/therapeutic competence, academic performance, and scholarship. The following recommendations can be made: advancement to preliminary candidacy, not advanced to preliminary candidacy with date of follow up review, a developmental plan, formal probation, or termination from the program. The faculty discusses advancement of the first year class during summer quarter.

In addition to the above areas evaluated, to be eligible for Advancement you must meet and/or complete the following criteria:

(GSPP PsyD Forms are available on the Webcentral GSPP Tab.)
All forms are due gspp.forms@du.edu, by the date indicated for the student’s file.

- Course Plan form due by June 1st.
- Specialty Focus Tool form due by June 1st.
- Certification of Requirements for Working with Culturally Diverse Populations form plan submitted by June 1st.
- Liability Malpractice Insurance. Provide proof of insurance by November 1st.
- Signed Ethical Guidelines form due by September 15th. (See Ethics Appendix)
- Evaluations from all supervisors (both field placement and PPC). Field placement and PPC evaluations are due by February and June of each year.
- Students must pass all course work and/or completed remediation meetings with their advisor.
- Incompletes in coursework must be completed.
- All final official transcripts due by November 15th.
- Students are expected to work with a minimum of two PPC cases throughout their time at GSPP, as soon as they are cleared to begin clinic work by their first year seminar leader. Further, students are expected to have annually two psychotherapy clients (one adult) for at least eight sessions. Submit a Proof of Two Clients form to gspp.forms@du.edu as soon as the requirement is completed. One form is due every year the student is in the program.
- Yearly Training Plan due by fall quarter. One form is due every fall the student is in the program.
- Meet with advisor.
Other forms and training plans

**Access to Student Records**: Students may have access to their records. They need to either look at their file with their advisor or look at their file in a staff member’s office.

**Course Plan**: During orientation, students will discuss an overall course plan with their faculty advisors. At this time, the course plan will be tentatively filled out and then given to the Admissions Director to place in student folders. Because requirements and electives change over time, students are expected to meet all GSPP requirements in effect the year they entered the program. See Webcentral GSPP Tab.

**Credits**: Students must complete 135 credits to be eligible to graduate. If a student is required to take an extra year of seminar or repeat a class, they should anticipate going over the 135 credit amount.

**Forms**: Forms are located at Webcentral GSPP Tab. See also, Forms Checklist in Appendix A.

**Requesting Releases and Letters of Recommendation**: Please go to Webcentral GSPP tab and print the “letter of Reference Release” and/or the “Student Record Release”. GSPP faculty and staff will need a completed release to write letters of recommendation and a record release if they need to provide specific information about a student.

**Social Media, Voice Messages, etc.**: Students who use social media (e.g., Facebook and Twitter) and other forms of electronic communication should be mindful of how their communication may be perceived by clients, colleagues, faculty, and others. As such, students should make every effort to avoid material that may be deemed inappropriate for a psychologist in training. Students should avoid posting information/photos or using any language that could jeopardize their professional image. Students should consider limiting the amount of personal information posted on these sites, and should never include clients as part of their social network, or include any information that might lead to the identification of a client, or compromise client confidentiality in any way. Greetings on voicemail services and answering machines used for professional purposes should also be thoughtfully constructed. Students are reminded that, if they identify themselves as a student in the program, GSPP has some interest in how they are portrayed. If students report doing, or are depicted on a website or in an email as doing something unethical or illegal, then that information may be used by the department to determine probation or even retention. As a preventive measure, GSPP advises students (and faculty) to approach social media carefully. In addition, the American Psychological Association’s Social Media/Forum Policy may be consulted for guidance: [http://www.apa.org/about/social-media.aspx](http://www.apa.org/about/social-media.aspx)

(Note: this policy is based in part on the policies developed by the University of Albany, Michael Roberts at the University of Kansas, and Elizabeth Klonoff at San Diego State University)

**Student Record Keeping**: Students are expected to keep copies of all paperwork submitted to the department. For licensure and other credentialing, students will need to have syllabi, transcripts, evaluations, and verification of completion of program requirements such as field placement hours.
SECOND YEAR ADVISING

SECOND YEAR ADVISING: In addition to meeting the ongoing requirements, in the second year, students begin to plan for the Clinical Competency Exam, which is typically taken during spring or summer quarter of the second year. Students are often eligible to earn an MA at the end of the second year, as well. A sizeable minority of students elect to stay for a fourth year of residency in the program, and second year students can also use advising to help with this decision.

CLINICAL COMPETENCY EXAM: The clinical competency exam is designed to assess a student’s readiness to apply for internship. It consists of three sections: ethical/legal/diagnostic vignettes; case conceptualizations; and clinical implementation. Core faculty members verbally administer the exams with assistance from adjuncts and community supervisors. A portion of the exam consists of an oral question and answer session of case vignettes to measure students’ understanding of ethical, diagnostic, and clinical issues. Another portion of the exam is a review of students’ clinical work. Students prepare a written case presentation and session transcript in writing approximately two weeks prior to the exam date for faculty review (please follow Jenny Cornish’s (Director of Clinical Training) deadlines). Then on the exam date, a DVD/videotape is shown to the faculty examiners. Students are then asked to speak about their case conceptualization, along with other issues at the discretion of the examiners. Each student is given valuable feedback about their clinical skills, with specific recommendations for improvement. Most students speak of this as a valuable and positive experience. Please contact the Director of Clinical Training about questions and signing up to take the examination.

Students pass the exam in sections. Students are expected to remediate any failed section. The exam committee and Director of Clinical Training prepare an individual remediation plan for any student failing a section of the exam. Failing a section of the exam twice may result in the student being required to take another year in the program. Failing any section of the exam three times may result in dismissal from the program.

Competency examinations are offered only during spring and summer quarters. Students must sign-up by posted deadlines to be eligible to take competency examinations. After a student signs up to take comps, s/he will be emailed a competency readiness form. The form must be completed by the specified deadline.

MASTERS DEGREE IN CLINICAL PSYCHOLOGY: To be eligible, you must have: Two years of residency; successful advancement to preliminary candidacy; two years of field placement and seminar, completion of 90 quarter hours of course work earned at the University of Denver; and passing the Clinical Competency Exam. You must submit an application to graduate and meet with your advisor for candidacy sign-off the quarter before you wish to graduate. The paperwork is on the Webcentral GSPP Tab. After receiving this degree, you will need to contact the Financial Aid Office regarding your loans.

- Students must submit the application to graduate form no later than March 24th to graduate Summer quarter; September 9th to graduate Winter quarter; January 6th to graduate Spring quarter, and June 16th to graduate Fall quarter. The M.A. achievement will be indicated on transcripts the quarter after graduation. You must pass the competency exam to be eligible to graduate. (Please watch for Judy’s emails regarding deadlines, because they are subject to change by Graduate Studies).
- Students who submit the graduation application, but fail the comprehensive exam and/or don’t complete all degree requirements, must fill out another application the following
quarter for graduation and pay a $20 reapplication fee, and complete remediation by the end of the quarter.

Students who come to GSPP with a psychology based MA, who receive transfer credit for this degree, are not eligible for the interim MA from GSPP.

**ADDITIONAL ADVISEMENT TOPICS:**
- Research/doc paper:
- Outside employment (Be sure to complete Outside Employment Form):
- Fourth Year at GSPP:
- Other:

**THIRD YEAR AND BEYOND ADVISING**

**THIRD YEAR ADVISING AND BEYOND:** Students continue to meet ongoing requirements, but may apply for internship in the third year, if all of the internship readiness requirements have been met. Students also use advising this year to go further with doctoral paper planning. As students have finished full time coursework, advisors can also help students with the paperwork of maintaining full time status.

**Fourth Year at GSPP???:** While the program is designed so that it can be completed in three years of residency at GSPP, students sometimes opt to take an additional year to complete the program. In some instances, students decide to postpone their internship year. Some wish to gain another year of specialized clinical experience and/or get their first draft of the doctoral paper completed prior to applying for internship. In other instances, students do not complete their doctoral paper during their internship year. They are unable to graduate until all degree requirements are complete. Students should consult with their advisors around career planning, including the most appropriate timeline to match the students' goals.

**ENROLLMENT ISSUES FOR ADVANCED STUDENTS:** Students must maintain enrollment until they graduate. The following enrollment options are directed towards students in their third year and beyond. Students will need to enroll proactively in SHIP (the Student Health Insurance Plan).

Options:

**CPSY 5993 Advanced Field Placement Experience** is typically for students in their third or fourth years that are not on internship yet. Students that are taking Seminar but need a couple of extra credits for loans and loan deferment should register for this. Also it is required for fourth year students who are staying an extra year and need to enroll in something to maintain their student status, and be eligible for student health insurance, loans, loan deferment, etc. Students may register for 1-8 credits. These credits will not go towards the 135 requirement and there is a minimal cost associated with them. Please see the Assistant Dean for approval to register.

Steps:
1. Communicate with Assistant Dean
2. Determine how many credits of Advanced Field Placement Experience you need. Then register for that amount of credits.
3. Register each quarter that you need the credits
4. Register on time
**CPSY 5994 Internship-last year** allows students to remain affiliated with the university while they are on internship. This will show that students are enrolled full-time. Students **must** register for this while on internship. These credits will **not** go towards the 135 requirement and there is only a minimal cost associated with them. Please see the Assistant Dean for approval to register.

Steps:
1. Communicate with Assistant Dean
2. Register each quarter (summer is not required, but strongly recommended)
3. Consortium Interns must register all year-including summer
4. Register for 4 credits if you are half time.
5. Register for 8 credits if you are full time.
6. Register on time

**CENR 5600 Continuous Enrollment – PhD** is typically for students who have not completed their doctoral paper, but are done with internship, coursework, and field placement, and who have not graduated yet. Students must continue to be registered at DU while technically still a student.

Steps:
1. Obtain approval form from the Graduate Studies forms page: [http://www.du.edu/learn/graduates/studentresources.html](http://www.du.edu/learn/graduates/studentresources.html)
2. Select “Policies and Forms”
3. Bring/fax 303-871-4220/email (tkruse@du.edu) completed form to the Assistant Dean
4. Register each quarter (summer is not required, but recommended)
5. Register on time

**How to Register for a Class with Variable Credit Hours**

First, register for the course:
1. Log in to webCentral with DU ID and passcode.
2. Click on the “Student” tab.
3. Go to “Add or Drop Classes.”
4. Enter the CRN, click “Submit Changes.”

This will register you for the lowest available number of credit hours.

To change the credit hours:
1. Click “Back to Student tab” in the upper left corner to return to webCentral.
2. Click “Change Class Options.”
3. The screen will display the course information including the available credit hour options.
4. In the credit hour box, type in the desired number of credit hours (example: 4.000).
5. Click “Submit Changes.”
6. The page will refresh with the new credit hours you entered in the box.

You should check your schedule to make sure it reflects the changes. To do this:
1. Click “Return to Previous.”
2. Click “Student Detail Schedule.”
3. The class you updated should display the new number of credit hours.
If you have problems with this or the credit hours do not update correctly, contact the Office of the Registrar at 303-871-4095 and a registration associate can help make the change over the phone.

**INTERNSHIP READINESS**

**INTERNSHIP READINESS FORM:** The Internship Readiness Form is a master list of items that must be completed or include plans for completion prior to applying for internship. The form is on the [Webcentral GSPP Tab](#). This form is due to the Director of Clinical Training by October 1st.

**PROFESSIONAL COMMITTEES, CLUBS, AND ORGANIZATIONS**

Faculty and students in the PsyD program are involved in a range of collaborative programs that benefit the program and contribute to the field. Students are encouraged to work with their advisor or other faculty members to find ways to be engaged in meaningful professional activities.

**COMMITTEES:** PsyD committees meet quarterly during Community Hour. The Community hour schedule is publicized in the weekly newsletter, and is posted in the lounge. Students are welcome to attend any and all committee meetings, which are listed below with the committee chair:

- Diversity Committee, Chaired by Fernand Lubuguin
- Clinical Training Committee, Chaired by Shelly Smith-Acuna
- Research Committee, Chaired by Kim Gorgens
- Assessment Committee, Chaired by Hale Martin

**CLUBS:** Students and faculty also work together in special interest clubs, which also meet quarterly during community hour (see Appendix F). Contact information for key club members if posted in the lounge. Clubs and faculty sponsors are listed below:

- Graduate Student Association of Professional Psychology (GSAPP): Shelly Smith-Acuna, sponsor, ssmith@du.edu
- Voices of Discovery Diversity Exploration Groups: Fernand Lubuguin, sponsor, flubugi@du.edu
- Health/Neuropsychology Club: Kim Gorgens, sponsor, drkim@pcisys.net
- International Psychology Club: Judy Fox, sponsor, juf@du.edu
- Sport Psychology Club: Jamie Shapiro, sponsor, jshapiro@du.edu
- Guerilla actors’ School of Professional Psychology (GaSPP): Michael Karson, sponsor; mkarson@du.edu

Students also have the opportunity to join faculty-student mentorship groups, which typically meet in the evening, once per quarter.

**PSYCHOTHERAPY FOR STUDENTS:** GSPP does not require students to be in psychotherapy, but the faculty strongly encourages students to experience psychotherapy while they are students.
There is a listing on the GSPP forms website of therapists that offer reduced fees to students. The faculty can refer local therapists as well.

**DOCTORAL PAPER**

The doctoral paper requirement requires students to make an original contribution to psychological scholarship. Students may choose to do a qualitative or quantitative research project, or can choose other forms of scholarship, such as developing a case study or treatment protocol. Doctoral papers should be publication quality, and students are encouraged to submit their papers for publication. (Appendix H)

The first draft of doctoral paper is due March 1st for students anticipating graduating in August. The chair may have a different (earlier) deadline, but March 1st is the absolute last day for a first draft. If you miss your deadline, call your family to reschedule the trip.

**INTERNSHIP**

GSPP requires an APA approved clinical internship which is either full time for 12 months, or equivalent. PsyD students participate in the national APPIC Match, and are given significant support in this process from the DCT, Jenny Cornish. The GSPP offers an exclusively affiliated consortium that is APA accredited, and students may apply to sites outside the consortium, either locally or nationally. Students must pass the internship in order to receive the PsyD degree. (Appendix G)

**CHECKOUT FORMS:** Students leaving for internship must check out of the department. Please refer to the Webcentral GSPP Tab for the checkout documentation. It is the responsibility of the student to gracefully check out. Be aware of vacation schedules of those who need to sign off on forms.

**INTERNSHIP:** The GSPP requires that all students attend a yearlong or two half-time years of clinical internship for completion of the PsyD. It is expected that students will complete APA or APPIC approved internships, but non-APA/APPIC internships may be acceptable, if they meet GSPP guidelines. However, the GSPP does not guarantee that all students who apply will receive internship offers. The national trend in recent years has been an increasing number of students competing for a shrinking number of internship sites. Thus, students should be aware that this is a highly competitive process, and that while GSPP students are well regarded nationally; there is the possibility of not receiving an offer. APA/APPIC accredited sites are preferred, and are therefore more competitive than Non-AO-APPIC accredited sites. Acceptance of Non-APA/APPIC approved internships requires approval of the GSPP faculty. Petitions to accept a non-APA/APPIC internship should be submitted to the Training Director, Dr. Jenny Cornish, following the format listed. The faculty does not recommend students creating their own internship program, because of licensing concerns.

**INTERNSHIP—AFFILIATED CONSORTIUM:** In 2001, GSPP developed an exclusively affiliated internship with the DU Counseling and Behavioral Health Center. GSPP now has an APA accredited internship consortium that has included, Kaiser Permanente, Progressive Therapy, Colorado Assessment and Treatment Center, Nicoletti-Flater and Associates, Mental Health Centers of Denver (MHCD), Regis University, Denver Children’s Home, Legacy
Comprehensive Counseling and Consultation and Progressive Therapy as members. The application process is the same for the national process. Programs do not always participate every year. See the Internship Guidelines.

GRADUATION

The PsyD program strongly encourages students to participate in the August graduation when they have finished their degree. Faculty, graduates, and their families participate in a dinner, the ceremony and a reception each year. Students should work with their advisors to be sure that all deadlines will be met for graduation.

ADVANCEMENT TO FINAL CANDIDACY AND GRADUATION: DU Graduate Studies requires that Advancement to Final Candidacy occurs at least two quarters before expected graduation. Go on line to the Webcentral GSPP Tab to find the graduate application form. There is no fee to apply for graduation the first time. A new graduation application and a fee payment are required for any subsequent application. Instructions concerning commencement ceremonies in June and August and the obtaining of caps, gowns and hoods will be mailed by the Graduate Studies Office. The student must assume full responsibility for meeting all requirements and deadlines.

No student will be Advanced to Final Candidacy who has an outstanding incomplete for any course, on probation or whose student file or PPC files are incomplete.

STUDENT STATUS/DUE PROCESS/GRIEVANCE PROCEDURES

Students who are admitted to the PsyD program have been chosen because they are expected to have the skills and abilities to finish the program. Students typically proceed through the program in the following order:

PROVISIONAL PROBATION: In accordance with university policy, students are admitted to the program under a provisional probationary status. This status does not imply any disciplinary action. When students have successfully completed all of their first year requirements, they are removed from provisional probation, and are advanced to preliminary candidacy. (see first year advising).

PRELIMINARY CANDIDACY: Students are notified by the Graduate School when they have been advanced to preliminary candidacy. They remain on this status until graduation, unless they do not meet the PsyD performance standards, as described below.

SUBSTANDARD GRADE/ACADEMIC WARNING: If a student receives 3 grades in any combination from B- to C and I, s/he will automatically be placed on academic warning. If a student receives a C- or F, s/he will be placed immediately on academic warning. The faculty will discuss the student and then the faculty advisor will inform the student in writing of the terms of the warning. Continued substandard academic performance may result in probation or dismissal from the program.

ACADEMIC WARNING: On occasion, students will exhibit substandard progress in one of the competency areas. Either through the annual evaluation progress, or through ongoing feedback from professors and supervisors, sometimes students are identified as having problematic performance. When this occurs, the student will be discussed in faculty meeting, and a remediation plan will be
developed. The two categories of remediation plans at GSPP are the Developmental Plan and the Probation Plan. The plans are designed by the faculty and are individualized for the student to provide the additional structure and support needed for the student to achieve expected performance levels. In addition, the plan clarifies expectations. In both instances, the Remediation Form is completed by the advisor, and the student meets with the advisor to review the conditions of the plan and sign the form. The form is also signed by the DCT, and then added to the student file.

**Developmental Plan:** The plan alerts the student that some level of their performance does not meet standards in one or more of the areas described above. Failure to sufficiently address concerns during the warning period may result in the student being placed on formal probation.

**Probation:** All entering students are on probationary status until advanced to preliminary candidacy. If the faculty discerns that a student is seriously deficient in one or more of the dimensions listed above, the student may be placed on formal probation. Further, if a student does not meet the conditions of the development plan she may be moved to a probationary status. Such a determination represents the faculty’s intention to call deficiencies to the student’s attention and to offer help and guidance in rectifying the problem. Probation also constitutes an administrative warning that should the deficiencies not be corrected to the faculty’s satisfaction, the student may be dismissed from the program. The duration of the probationary period will depend on the severity of the problem and the faculty’s estimate of an appropriate period for remediation. All of these conditions are outlined in the Remediation Plan. As described above, the advisor completes the Remediation Plan, meets with the student to review the plan, and the signed plan is first forwarded to the DCT, and then is added to the student file.

**Termination from Program:** If a student has been placed on probation and does not meet the conditions of the Remediation Plan, the student may be dismissed from the program. The student will be notified of this dismissal in writing. The student will be terminated from the University at that point. The student is eligible to appeal the dismissal, as is described in the Graduate Policies and Procedures Handbook [http://www.du.edu/learn/graduates/studentresources.html](http://www.du.edu/learn/graduates/studentresources.html). In addition, in the opinion of the faculty, any grave clinical, ethical, professional, or academic violation may result in immediate dismissal from the program. In the case of a grave violation, the majority of the PsyD faculty must vote to support the dismissal. The student will be notified in writing, and has the ability to appeal the decision, as described above. Academic warnings, probations, and developmental plans are cumulative. Faculty can terminate students due to not only grave violations, but multiple less severe violations.

**Internship Performance:** Students are expected to meet the standards of their pre-doctoral internship in order to complete their PsyD degree. Internship directors send evaluations to the DCT at least twice yearly, and any substandard internship performance is brought to the faculty. In the event that a student fails all or part of the predoctoral internship, the GSPP faculty will make a determination as to the student’s standing in GSPP. Failing all or part of the predoctoral internship may reflect so serious a deficiency in performance that the faculty could decide to terminate the student from GSPP.
Due Process: Informal Resolution Stage

Faculty Meeting, Executive Committee (EC) Reviews – Petition Process

Policy/Requirement Waivers (A.K.A. Petitioning the Faculty): With the exception of core course waivers, for which there is a special form, the procedure for seeking a waiver of GSPP policies or requirements is to present a petition to the faculty in the form of a letter addressed to the Director of the PsyD program, following consultation with your advisor. The letter should be typed, and should include the request and the reasons for the request. Petitions are usually presented to the entire faculty in their bi-weekly meetings for approval or to the executive committee. The Dean, Director of the PsyD, or student’s advisor will relay the faculty’s decision in writing.

Students may need to modify some element of their academic plans to meet particular training needs or life circumstances. Common examples of changes in academic plans are taking required courses out of sequence, moving to part time status, or taking a leave of absence. To request such a modification, students should petition the faculty for permission from the Executive Committee. The steps to making a petition are as follows:

1. The student should meet with the advisor to plan the petition.
2. The student should send a memo to the Executive Committee through Terri Davis. This email correspondence should be copied to the student's advisor, Judy Farmer, and Tracie Kruse. The letter should include the request, the reasons for the request, the plan of action and any supporting information.
3. The Executive Committee will review and make a decision on the petition.
4. The Executive Committee will send a response to the request to the student, and all of the recipients of the petition.
5. Both the petition and the response will be included in the student's file.
6. Students can appeal the decision of the Executive Committee by writing to Dean Shelly Smith-Acuña.

Special Life Circumstance—Part Time Status Policy: Under very special circumstances, students may petition the faculty for part-time status. The petition must be submitted to their advisor with an explanation of their special circumstances that necessitate their change in status. Examples of such circumstances are family emergencies, maternity/paternity leave, or other circumstances and crises. Whether petitioning for a family leave or circumstantial leave, the student should work closely with his/her advisor to create a time line for completion of the Psy.D. program. Also, the student should be aware of the potential negative impact on internship opportunities if a student becomes part-time. Please submit with the petition, a modified course plan.

Part-time status is similar to part-time study, i.e., the student may take as few as four credits per quarter. The maximum amount of time permitted to complete the Psy.D. is eight years for part-time students entering with a Bachelor’s degree, and seven years for part-time students entering with a Master’s degree. Part-time students are expected to complete three years of field placement and three years of professional seminar. Part-time students may fulfill these requirements concurrently, or they may alternate field placement work with professional seminar
in consecutive years. In addition, part time students must have a minimum of two PPC clients per year throughout the time that they are at GSPP.

**STUDENT ADVOCATE**

**SUMMARY OF THE STUDENT ADVOCATE POSITION:** To contact the Office of the Student Advocate, please leave a confidential voice mail for Dorothy Hansen at (303) 756-3002.

The goal of the Student Advocate is to provide support and information to students with concerns involving other students, faculty, staff, administrators, or other issues affecting their experience at the University of Denver GSPP.

Central to the provision of these services are the concepts of access, confidentiality, and effectiveness. Students should feel comfortable in accessing the Student Advocate and confident that their concerns will be treated with respect and kept confidential (with the exception of situations in which notifying appropriate University personnel, law enforcement agencies, or others is necessary, such as those involving potential danger of harm to the student or others). Please note that in some cases issues will be governed by existing University of Denver policy, such as those situations falling within the academic grievance procedure.

The Student Advocate will serve as ONE of several potential points of entry for the Conflict Resolution process at the GSPP.

Students wishing to pursue formal conflict resolution procedures, including utilizing the Conflict Resolution Committee, may first meet with the Student Advocate. Together, the student and the Student Advocate will explore available options and resources. The student will decide which option or options, if any, he or she chooses to pursue. Other options for students with issues of conflict are listed below. Complete details of the Conflict Resolution Committee’s Conflict Resolution Protocol are available in the Student Handbook.

Under appropriate circumstances, the Student Advocate may assist in mediation between students.

The Student Advocate may serve as a mediator between students. In this role, the Student Advocate will facilitate discussion between students regarding issues of conflict. Mediation may not be appropriate under some circumstances, in which case the Student Advocate will work with the student(s) in exploring available options. The Student Advocate position is conceptualized as being student focused. For issues of conflict involving students and faculty, staff, administrators, or other members of the University of Denver community, the role of the Student Advocate will generally be one of support and advocacy on behalf of the student.

With the exceptions outlined here, information provided to the Student Advocate will be released only with permission of the student.

The Student Advocate will keep records of the types of concerns raised by students; the classification of the student raising the concern (i.e., Forensics, International Disaster Psychology, Sport and Performance, or Psy.D.); the date of the discussion; a brief description of the concern; referrals made and/or information provided; and resolution, if known. A Contact Log containing student contact information (e.g., name, phone number, and email address) will be maintained by the Office of the Student Advocate; however, this data will NOT be linked...
with records containing information about issues of conflict. In the absence of a Release signed by the student, anonymous data **ONLY** may be provided to appropriate University personnel (such as the Dean of the GSPP; Director of the Masters’ in Forensic Psychology Program; Director of the IDP Program; Director of Sport and Performance Psychology Program; Ombuds, Human Resources Office, or Office of Campus Safety), on a case-by-case basis and/or in the aggregate for recordkeeping and accountability purposes. Under extraordinary circumstances, the Student Advocate may be required by law, professional ethics, or University policy to provide information regarding issues raised by a student. In that case, every effort will be made to notify the student of the required disclosure and to address any concerns the student may have regarding the disclosure.

The Student Advocate is one of several possible points of entry to the Conflict Resolution process at the GSPP.

Students with a concern **involving** the Student Advocate, or who, for whatever reason, do not feel comfortable approaching the Student Advocate, are encouraged to pursue one or more alternative options designed to assist in addressing their needs in a safe, confidential, and effective manner. In addition to contacting the Student Advocate, a student with an issue of concern may:

- Speak with his or her advisor
- Speak with a trusted faculty member
- Speak with the Dean of the GSPP (Dr. Shelly Smith-Acuña)
- Speak with the Director of individual GSPP Programs
  - Dr. Terri Davis, Director of the PsyD program
  - Dr. Lavita Nadkarni, Director of Forensic Studies
  - Dr. Judy Fox, Director of the International Disaster Psychology Program
  - Dr. Mark Aoyagi, Director of the Sport and Performance Psychology Program and Certificate
- Speak with the University Ombuds, Jenna Brown
- Speak with the Student Steering Committee Ethics Consultant
- Contact the Colorado Psychological Association
- Contact the American Psychological Association

Details regarding options for GSPP students wishing to access this and other Conflict Resolution protocols are available in the Conflict Resolution section of the Student Handbook.

**UNIVERSITY OMBUDS OFFICE**

Jenna Brown, Ombuds, 303-871-4712, ombuds@du.edu

**Due Process: Formal Grievance Procedures**

**DEPARTMENTAL APPEAL:** As mentioned above, students have the right to appeal any academic decision within the department by writing to the Dean. In addition, students may appeal decisions through the Graduate School, and may also file a grievance with the Graduate School. The complete university policy is available at:

[http://www.du.edu/learn/graduates/studentresources.html](http://www.du.edu/learn/graduates/studentresources.html)
DU POLICIES AND PROCEDURES

At GSPP we have the advantage of a wide variety of university resources and services. Students are encouraged to access the DU Website regularly for information that is available to them. In addition, students are governed by DU policies and procedures as well as by GSPP’s policies and procedures. A full listing of DU Graduate Policies and Procedures can be found at: http://www.du.edu/learn/graduates/studentresources.html

In the instance that the policies differ, students should adhere to the stricter guidelines and meet with an advisor. Below we have included a listing of some of the information that has been found helpful.

CRITICAL INCIDENT NOTIFICATION SYSTEM: Students need to provide DU with a means of contacting them when there is an active incident occurring on or near the DU campus. Please log into Webcentral, and go to the Myweb tab. Select “Banner Self-service”, and then select the “Personal Information” section. You will then select “Notification Preferences.” You will want to include as many numbers as are appropriate. You will click on “submit”, so the changes are saved.

Being registered will allow DU to contact you in case of campus emergencies as well as closures for inclement weather.

ACADEMIC CALENDAR: To view the academic calendar, please go to: http://www.du.edu/registrar/calendar/acadcal.html you will then want to select the correct academic year. Please check this calendar prior to booking travel arrangements. Don’t plan to travel during finals week. You will want to know your field placement schedule before booking travel plans too.

FINANCIAL AID: Students are encouraged to complete a Free Application for Student Financial Aid (FASFA) as soon as possible (deadline for 2014 aid is February 15, 2014). Please go to www.fafsa.ed.gov to fill out the form. Loan disbursements will be split over fall, winter, and spring quarters. Students must apply for loans for summer quarter starting the first week of April. Student Financial Services is located on the second floor of University Hall. The Cashier and Office of the Registrar are located in the basement of University Hall. Check every year to make sure it is correct.

8 credits or more = Students are full-time
4-7 credits = Students are half-time
<3 credits = Students are not automatically eligible for loans, loan deferral, etc.

ADDING AND WITHDRAWING FROM COURSES AFTER THE PUBLISHED DEADLINES: (8/03)
Under exceptional circumstances the faculty may allow a student to withdraw after the published deadline. Students must have a Late Drop form signed by their instructor. Students wishing to add a course after the second week of the quarter must have a Late Add form signed by their instructor. These forms are available from the Center for Academic Resources and the Office of the Registrar. Keep your receipts from these transactions. If the students are very late registering or miss the quarter, they will need to petition the Graduate Studies Academic Exceptions Committee. The information can be found at http://www.du.edu/learn/graduates/studentresources.html under “Academic Exceptions
It is strongly advised that students proof their registration during the first week of each quarter, to make sure everything is correct.

**MEDICAL STOP-OUT OR LEAVE OF ABSENCE:** If a student will take an unexpected leave of absence, it is recommended that s/he speak with his/her advisor and follow the leave of absence form at the GSPP forms web page. The GSPP leave of absence form may be found on our forms webpage. Go to [http://www.du.edu/learn/graduates/studentresources.html](http://www.du.edu/learn/graduates/studentresources.html), to see DU’s policy.

A **medical stop-out** is when a student has such a severe medical issue that a doctor has indicated that a student must stop attending school. The student must follow the procedures outlined on the Graduate Studies page to withdraw and request a refund. The Vice-Provost of Graduate Studies will determine whether the student is eligible for a refund. Please be in touch immediately with the Dean, the Director of the PsyD, Assistant Dean, and/or Advisor if this is the case. The student should also contact Molly Hooker in Graduate Studies. An ad hoc committee will form to help the student as much as possible through the process.

A **leave of absence** is when a student requests to take time off from the program. The department will create a plan for the leave. The student should contact the Dean, the Director of the PsyD, Assistant Dean, and/or Advisor as soon as possible. If the leave is in the middle of the quarter, the student must withdraw from courses as soon as possible. A refund will only happen, if the student withdraws by the refund deadlines. Please follow the leave guidelines on the Webcentral GSPP Tab.

**GRADUATE STUDIES:** Important policies and forms for DU graduate students can be found at [http://www.du.edu/learn/graduates/studentresources.html](http://www.du.edu/learn/graduates/studentresources.html). Please bookmark this page. This site includes access to continuous enrollment, medical stop out, academic grievance procedures, academic exceptions request, Extension time request, and DU Graduate Policies and Procedures ehandbook.

**INTERNATIONAL STUDENTS:** International students are expected to attend all trainings offered by Internationalization. Students are advised to discuss policy issues with an advisor at Internationalization. Their advisors are familiar with legal issues pertaining to international students. GSPP faculty and staff can assist in matters pertaining to GSPP and DU, but will not be familiar with international laws. Students are responsible for meeting all requirements. Students are strongly encouraged to meet with their advisor and the Assistant Dean.

**HEALTH INSURANCE (DU):** Students are required to be enrolled in some form of health insurance while a student. The University of Denver offers the Student Health Insurance Policy (SHIP). If a student is in six or more credits enrollment is automatic. Students are not eligible for SHIP or Health and Counseling Center (HCC) unless they are considered students, so students must be enrolled in at least one credit to be considered a student. Enrollment in SHIP is no longer automatic, once a student is below six credits. In that case, students must actively enroll in the insurance if they want it. Go to the HCC website to enroll or call 303-871-2205.

**ADMISSION STATUS:** Students enrolling under Graduate Studies Provisional Status should upgrade their status promptly with the Graduate Studies Office in the basement of the Mary Reed building room 5. Provisional Status usually occurs when final official transcripts from previous schools are pending. Entering students are then upgraded to probationary status, which lasts until advancement to preliminary candidacy.
**Residency Requirements:** The University of Denver (DU) requires that a student enroll in course work for at least six quarters. Maximum attendance: 8 years for those who entered with a Bachelor’s Degree; 7 years for those with a Master’s.

Students are required to complete three years of full time study at the GSPP. Full time study includes participating in coursework, field placement, and PPC training. Under special circumstances students can petition for part-time status (see Special Life Circumstance policy), but students are still expected to be in residence for a minimum of three years, and to complete the equivalent of three years of full time study.

**Transfer of Credit:** Entering students who wish to transfer in credit should meet with their advisor during the early part of the Fall Quarter. Students entering with an MA in a psychological related field may be eligible for up to 45 credits blanket transfer. Students without an MA will work with their advisors to decide the appropriate transfer of credit, and this level is 15 credits. Practicum credits will not be accepted. The advisor should inform the Student Services Administrator in writing which courses and how many credits have been approved for transfer. The Admissions/Records Coordinator will process the transfer through the Graduate Studies Office. All requests for transfer of credit should have been processed through Graduate Studies before the end of the Fall Quarter. Students with an MA may only transfer a maximum of 45 quarter credits.

Please see the 2013-2014 Graduate Policies and Procedures located at [http://www.du.edu/learn/graduates/studentresources.html](http://www.du.edu/learn/graduates/studentresources.html) for the University policy.

**Course Waivers:** Students who have successfully completed graduate-level course work comparable to required (core) GSPP courses may request a waiver of the GSPP core course. Students must complete the Core Course Waiver Form and the Graduate Studies waiver form, attaching a transcript and copy of the course syllabus, which demonstrate how the class is comparable to the core GSPP course. Documentation may include the course title, course description, instructor, academic institution, and texts used in the course. Waivers are approved by the GSPP instructors. Instructors may also require students to pass an exam or provide other evidence of course mastery before granting a waiver. A core faculty member may sign off on the form, if the instructor is an adjunct faculty, the Director of the PsyD Program must approve the waiver as well. Waivers should be pursued early in a student’s stay at the GSPP. If granted a waiver, all documents (the signed GSPP waiver form, the Graduate Studies waiver form, transcript and course syllabus) should be scanned as PDF’s to gspp.forms@du.edu for the student’s electronic file and the originals kept for the student’s own records. GSPP forms may be found at the GSPP tab on webcentral.

Courses must have been completed within the past five years.

No credit reduction is available for course waivers. (Please see credit reduction process above in Transfer of Credit)

Course waivers are for courses taken prior to admission to GSPP.

History and Systems cannot be waived using an undergraduate course.
**Continuing Education:** Students may take elective courses (within the GSPP program) as continuing education (CE). CE courses do not carry official credit and cost $150.00 per credit. However, these credits do not count towards the total number of credit hours required to graduate, and they will not appear on student transcripts. Students need to register with the Assistant Dean for CE guidelines after gaining approval through the course instructor. **Seminar** and **Dean Burski’s Supervision Course Are Not Courses That Can Be Taken As CE.** Students must meet with the instructor prior to the start of class to agree on coursework expectations. Students should request a certificate of completion for any course taken through CE immediately following the quarter. Please email the request to the Assistant Dean.

**Schedule of Deadlines:**
The Application for Graduation, as well the downloadable forms needed to complete the graduation process can be found at: [http://www.du.edu/currentstudents/graduates/graduationinformation.html](http://www.du.edu/currentstudents/graduates/graduationinformation.html)

**Fall Quarter 2013**
- Deadline to Apply for Winter Graduation: September 9
- Incomplete grades removed: October 24
- Deadline to have doctoral paper approved and submitted online: October 24
  - Signed title page submitted to Judy at gspp.forms@du.edu: October 24
    - [https://ectd.du.edu](https://ectd.du.edu)
- Quarter closes: November 21

**Winter Quarter 2014**
- Deadline to Apply for Spring Graduation: January 6
- Incomplete grades removed: February 14
- Deadline to have doctoral paper approved and submitted online: February 14
  - Signed title page submitted to Samara: February 14
    - [https://ectd.du.edu](https://ectd.du.edu)
- First doctoral paper draft to chair (for summer graduation): March 1
- Quarter closes: March 16

**Spring Quarter 2014**
- Deadline to Apply for Summer Graduation: March 24
- Incomplete grades removed: May 8
- Final date to have doctoral paper approved and submitted online: May 8
  - Signed title page submitted to Samara: May 8
    - [https://ectd.du.edu](https://ectd.du.edu)
- Quarter closes: June 5
- Commencement: June 6

**Summer Quarter 2014**
- Deadline to Apply for Fall Graduation: June 16
- Incomplete grades removed: July 17
- Final date to have doctoral paper approved and submitted online: July 17
  - Signed title page submitted to Samara: July 17
    - [https://ectd.du.edu](https://ectd.du.edu)
- Quarter closes: August 14
- Commencement: August 15

**Note:** If degree requirements are not met during the quarter of initial application for graduation, a $20 processing fee will be assessed.
Community Involvement and Resources

Students may want to explore licensure issues, and membership in outside professional organizations during their time at GSPP. Again, the advisor and other faculty members can be helpful in providing information and making connections.

Licensure Issues--LPC Issues

Licensure: While the overwhelming majority of PsyD graduates become licensed as psychologists, many students are also choosing to become licensed at the MA level along the way. Please see the websites below for licensure information in Colorado, or check with your advisor if you are considering licensure in another state.

The GSPP recommends that PsyD students consider obtaining an LPC (Licensed Professional Counselor) during their tenure in the academic program, since it can be helpful with both internship selection and with finding jobs after graduating (before passing the EPPP and becoming licensed as a psychologist). Students interested in obtaining the LPC are advised to ask post-master’s supervisors (both in the PPC and field placements) to sign the required forms (available on the Colorado Department of Regulatory Affairs website) for verification of supervised hours. Please find the form at:


DORA Information for Students and Alumni
(Department of Regulatory Agencies)

There have been recent changes to the rules for accumulating hours and documenting hours for licensure. As of September 1, 2009, all recent MA graduates (in psychology) must be registered with DORA to have their post degree hours count towards licensure.

Here is recent information provided by DORA

<table>
<thead>
<tr>
<th>DORA Information</th>
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</thead>
<tbody>
<tr>
<td>Post-degree Masters or doctoral graduates earning post-degree work experience and supervision hours towards licensure or certification who practice psychotherapy must be:</td>
</tr>
<tr>
<td>1) a psychologist candidate OR</td>
</tr>
<tr>
<td>2) already licensed or certified in another profession authorized to practice psychotherapy OR</td>
</tr>
<tr>
<td>3) listed in the State Grievance Board database (as an unlicensed psychotherapist) OR</td>
</tr>
<tr>
<td>4) exempt from the provisions as outlined in Colorado Revised Statute (CRS) 12-43-215</td>
</tr>
</tbody>
</table>

Licensing boards may deny post-degree work experience and supervision hours if the post-degree graduate is not licensed, certified, exempt, or listed in the State Grievance Board database while earning their hours.

Websites:
http://www.dora.state.co.us/mental-health/index.htm (MH section homepage)
http://www.dora.state.co.us/mental-health/lpc/licensing.htm

http://www.dora.state.co.us/mental-health/Statute.pdf (CRS)

http://www.dora.state.co.us/mental-health/nlc/dbexemptions.htm (exemptions)

Other than the above groups:
All GSPP students who are at the pre-Masters level do NOT need to register in the State Grievance Board database even if their duties at their field placements are considered to be providing psychotherapy services, as these duties are considered requirements to graduate from the respective programs.

How this impacts GSPP:

Any active GSPP student with a completed MA in psychology, who wants an LPC (Licensed Professional Counselor) license—should register with DORA as an unlicensed psychotherapist. See #3 in the box, go to the DORA website to register.

Any Master's program alumni who wish to pursue post-degree MA hours towards an LPC license—should register with DORA as an unlicensed psychotherapist. See #3 in the box, go to the DORA website to register.

To all PsyD alumni wishing to apply for the LPC—should apply as a psychologist candidate. See #1 in the box.

**LPC Transcript Issue**

*Evaluation of educational equivalency*

**Effective January 5, 2007,** educational equivalency reviews for Licensed Professional Counselor applications will not be performed by the Mental Health Board staff at the Division of Registrations.

If you are applying for LPC licensure by exam and your Master's Degree is NOT from a CACREP program, you must submit your educational documentation to the Center for Credentialing and Education (CCE) for a determination of equivalency with Colorado's requirements. An application for a Colorado Educational Equivalency Review can be downloaded from CCE's website at [http://cce-global.org/review-management](http://cce-global.org/review-management).

Center for Credentialing (CCE) Information: This applies to all GSPP students/alumni who are submitting their materials to the credentialing agency as we are not a CACREP program:

“The initial application instructs applicants that if their degree program included a practicum or internship which does not appear on their transcript, they must submit a letter from the Department Chair or the professor serving as practicum/internship supervisor or liaison in addition to the Practicum/Internship Verification form.”
STATE AND NATIONAL ORGANIZATIONS: Both the CPA and the APA offer student memberships and welcome student involvement.

Colorado Psychological Association at http://www.coloradopsych.org/default.aspx

American Psychological Association at http://www.apa.org/
APPENDIX A

PSYD REQUIREMENT CHECKLIST

To Do Each Year Until Internship

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<td>Proof of Two Clients Form</td>
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<td>Proof of Outside Employment (if applicable)</td>
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<td><strong>Register with DORA and log hours (after MA degree)</strong></td>
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First Year
- Handbook Receipt
- Ethical Guidelines
- Course Plan
- Specialty Focus Form
- Diverse Population Requirements from Advancement to Preliminary Candidacy
- Core Course Waiver Forms(s) (if applicable)
- Transfer of Credit form (if applicable)
- HIPAA Training Certificate

Second Year
- Research/Doc Paper Form
- Competency Exam Readiness Form
- Competency Exam
- Interim MA Graduation Application
- Interim MA Advancement to Preliminary Candidacy

Third Year
- Proof of Four Assessments
- Doctoral Paper Committee
- Diverse Populations Requirements-completion signatures
- Internship readiness form

Internship
- APA Malpractice Insurance (recommended)
- Internship Checkout
- PPC Checkout
- Internship Offer with start/end dates
- Internship Evaluations
- PsyD Graduation Application
- Final Advancement to Candidacy

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This is a list compiled to help students know what forms and milestone events need to be completed. The list is subject to change and should be used as a guideline. If you have suggestions for the list, please let Tracie Kruse know.

**We also recommend fulfilling all requirements to pursue an LPC as soon as a student is eligible to do so (for students coming in with M.A.s, this could be upon admission; for other students, as soon as the interim M.A.s are earned).**

Submit all forms as PDFs to: gspp.forms@du.edu
Appendix B
FACULTY AND COMMUNITY PROFESSIONALS

Mark Aoyagi, Associate Professor and Director of Sport and Performance Psychology: Ph.D., University of Missouri-Columbia, 2006
Areas of Interest: Sport and performance psychology; multicultural and diversity issues; team effectiveness; training and ethics in sport psychology; individual growth, development, and fulfillment through sport; sport as a mechanism for social change
Professional activities include: American Psychological Association, Association for Applied Sport Psychology, International Society of Sport Psychology, American College of Sports Medicine
Publication areas: Models of sport psychology practice, Team effectiveness, leadership, satisfaction, motivation, burnout, best practices in sport psychology, ethics

Tom Barrett, Clinical Professor for the International Disaster Psychology Program: Ph.D., West Virginia University, 1973
Selected for Fulbright award, Mental Health America of Colorado Board of Directors, previously Senior Mental Health Consultant for the World Health Organization; previously Mental Health Director, State of Colorado.
Areas of Interest: Evaluating and improving the effectiveness of mental health services; evaluating and improving mental health services in low and middle income countries around the world.
Professional activities include: Previously consultant for the World Health Organization, Geneva, Switzerland; Leader Advisory Board, People to People Ambassador Program; Adjunct Faculty, University of Colorado Health Sciences Center; Past president of the National Association of State Mental Health Program Directors (NASMHPD); American Psychological Association
Publication areas: Performance Measures for Evaluating and Improving Mental Health Services, People with Mental Illnesses in Jails and Prisons, Developing Evaluation Instruments for Mental Health Systems in Low and Middle Income Countries.

Peter Buirski, Professor: Ph.D., Adelphi University, 1969 +
Diplomate in Psychoanalysis, American Board of Professional Psychology
Diplomate in Clinical Psychology, American Board of Professional Psychology
Areas of interest: Psychoanalytic theories of personality with particular emphasis on self psychology and intersubjectivity systems theory; psychotherapy and psychoanalysis; couples therapy; group behavior; International Disaster Psychology; and, primate personality and behavior.
Professional activities include: Faculty, Denver Psychoanalytic Institute; Clinical Professor of Psychiatry, University of Colorado Health Sciences Center. He is in part-time private practice.
Publication areas: Psychoanalytic theory and treatment; primate behavior and personality. Co-author of Making Sense Together: the intersubjective approach to psychotherapy and author of Practicing Intersubjectively; and co-editor of New Developments in Self Psychology Practice.
Jennifer A. Erickson Cornish, Professor, Ph.D. Director of Clinical Training and Internship Consortium, PhD, California School of Professional Psychology, Los Angeles, 1982+

Credentials and Awards: Diplomate in Counseling Psychology, American Board of Professional Psychology; APA Fellow; National Academies of Practice; Helen Rohelke Lifetime Achievement Award (ACCTA; CPA Presidential Award; Licensed Psychologist Colorado and California

Areas of Interest/Publication Areas: Supervision and training, ethics and professional issues, multiculturalism, and group modalities.

Professional Activities: APA Ethics Committee, Association of Psychology Postdoctoral and Internship Centers Board, APA Council of Representatives (Colorado representative), Council of Chairs of Training Councils (Secretary), APA Education and Training Caucus (chair), Association of Counseling Center Training Agencies (President), Colorado Psychological Association (President and Secretary), Psychology Internship Training Directors of Colorado (Chair), APA Division 17 (Secretary)

Editorial Boards: Psychotherapy Bulletin Editor, Professional Psychology: Research and Practice (Consulting Editor), Training and Education in Professional Psychology (Consulting Editor)

Terri M. Davis, Associate Professor and Director of the Psy.D. Program: Ph.D., The Ohio State University, Columbus, 1995+

Areas of Interest: Leadership skills development; academic program assessment; social justice

Professional Activities: American Psychological Association (APA) Fundraising and Keynotes Coordinator for the National Multicultural Conference and Summit 2015; APA Society of Counseling Psychologists member

Areas of Specialization: Suicide assessment and crisis intervention; multicultural supervision and training; therapist self-care

Judith E. Fox, Associate Professor: Ph.D., University of Kansas, 1981+

Areas of Interest: impact of trauma on development, diagnosis and treatment of children and their families, child/adolescent psychotherapy and parent consultation, HIV/AIDS, homeless youth and the treatment of trauma. She has worked to understand the psychosocial service needs of organizations working with individuals and communities affected by disaster in Bosnia, Croatia, Serbia, Ethiopia and Belize as well as HIV-AIDS in India and developed international fieldwork experiences for graduate students focusing on this work.

Areas of Specialization: international disaster psychology, child/adolescent/family evaluation and treatment, HIV/AIDS, attachment and trauma, international service-learning

Publication Areas: Stress, coping and trauma in childhood; health psychology & HIV/AIDS; attachment theory and therapeutic interventions internationally; international service learning and professional development; mental health stigma; child and adult psychotherapy.

Kim Gorgens, Clinical Associate Professor, Director of Continuing Education. Ph.D, Southern Illinois University, 1998 +

Areas of Interest: Rehabilitation psychology and clinical neuropsychology, adjustment to illness, injury and disability (both for medical patients and their families/support systems) and traumatic brain injury. Forensic interests include the intersection between neuroscience and the psychology of criminal behavior.

Professional activities include: Chair, State of Colorado Traumatic Brain Injury Trust Fund; Chair-Elect, Colorado Neuropsychological Society; Chair, Continuing Education Division 22 (Rehabilitation Psychology).

Publications areas: Disability competencies and rehabilitation psychology.
W. Neil Gowensmith, Clinical Assistant Professor, Forensic Psychology: Ph.D., Colorado State University, 1999
Areas of Interest: research interests focus on the reliability and validity of forensic examinations, factors impacting post-acquittal conditional release, and attitudes about forensic populations.
Professional activities include: Member of American Psychological Association, Division 41 (Forensic Division); Member of American Psychology-Law Society Dissertation Review Committee; Member of National Association of State Mental Health Program Directors, Forensic Division

Lynett Henderson Metzger, Clinical Assistant Professor, Psy.D. University of Denver, 2003 and J.D. University of Denver College of Law, 1997
Areas of Interest: Forensic Psychology, social justice, domestic violence, attachment, systems theory, student training issues and self care; developmental differences; integration between law and psychology.
Professional activities include: American Psychological Association; American and Colorado Bar Associations.
Publications areas: Intimate violence and gender; legal publication areas: race and congressional redistricting; and multicultural counseling competencies.

Leah James, Clinical Assistant Professor & Field Placement Director, International Disaster Psychology: MSW, Ph.D., University of Michigan, 2012
Areas of Interest: Culturally-adapted assessment and intervention development, implementation, and evaluation for trauma and disaster survivors; traditional healing practices; trauma among military veterans; recovery, empowerment, and social action models of mental healthcare.
Conference Presentation/Publication areas: International trauma and disaster psychology (post-earthquake mental health intervention in Haiti; women’s mental health in Ghana); meaning-making and intervention development for veterans with PTSD; behavioral effects of uncertainty; possible selves; motivation.

Michael Karson, Professor: PhD, University of Michigan, 1978 +, JD, Western New England College School of Law, 2000
Areas of Interest: Forensic, clinical, and industrial assessment; theory integration; child abuse; performance theory.
Professional activities include: Diplomate in Clinical Psychology, American Board of Professional Psychology; American Psychological Association; admitted in Massachusetts (inactive).
Publications areas: Personality Assessment: 16PF, early memories, MMPI-2, Rorschach; child abuse; report writing; psychotherapy.

Fernand Lubuguin, Clinical Associate Professor, Director of the Professional Psychology Clinic, and Director of Diversity & Multicultural Training: PhD, University of Colorado at Boulder, 1993+
Areas of Interest: Descriptive Psychology; diversity and multicultural psychology, including -cultural competence, acculturation, and racial/ethnic identity development; couples treatment; working in managed care organizations.
Professional activities include: Clinical Faculty, Dept. of Psychiatry, University of Colorado School of Medicine; Co-editor, Advances in Descriptive Psychology volume 9; American
Psychological Association (Div. 45, Society for the Psychological Study of Ethnic Minority Issues & Div. 29, Psychotherapy); Asian American Psychological Association; Society for Descriptive Psychology (Past President and current Board of Directors member); Asian Human Services Association (Past President); Colorado State Board of Psychologist Examiners (Former Oral Examiner); part-time private practice.

Publication areas: Acculturation, racial microaggressions, and training cultural competence.

E. Hale Martin, Clinical Associate Professor: Ph.D., University of Texas at Austin, 1993 +

Areas of Interest: Psychological assessment including personality, cognitive and neuropsychological assessment, especially in the context of Therapeutic Assessment; Ethics in the practice of psychology; Masculinity-Femininity; Self psychology/Intersubjective theory; Accelerated Experiential Dynamic Psychotherapy, Cognitive-Behavioral therapy; Family systems.

Professional activities include: Society for Personality Assessment, National Association of Neuropsychologists, Colorado Psychological Association


John McNeill, Associate Professor: PsyD, University of Denver, 1983 +

Area of Specialization: Behavior analytic theory and practice, including the use of mindfulness and acceptance, dialectics, behavioral activation, and exposure-based approaches to intervention; philosophy of science, with special interest in Jamesian process-thinking, and Daoist / Buddhist subfields of Chinese Philosophy; and sport-performance psychology

Professional Activities: Association for Contextual Behavioral Science, Chuang Tai Zen Support Group of Denver; Daoist Studies, Organization for Chinese Americans, part-time private practice, and consultation to sport programs and athletes

Publication Areas: Behavior therapy, behavioral medicine, behavioral assessment

Laura Meyer, Clinical Assistant Professor: University of Denver, PhD 2008

Areas of interest: Research methodology and statistics, health behaviors.


Courtney Mitchell, Assistant Professor, International Disaster Psychology Program: PhD, LPC, University of New Mexico, 1997; University of Denver, 2012

Areas of interest: Gender Based Violence, Crisis Intervention, International Disaster Psychology; Trauma, Memory and Emotion in Social Context; Research in said domains using methodology ranging from qualitative coding in trauma narratives to psychophysiology. She worked internationally for almost 9 years and continues to maintain international ties. She provides pro bono psychological assessments for asylum applicants in the U.S. through Health Right International and supervises local therapists in the same. She also provides training for UN staff, other humanitarian workers and immigration officials in various locations including Egypt, Turkey, Tanzania, Nepal, and The Gambia.
Professional activities include: Member of: Health Right International Human Rights Clinic, International Mental Health and Psychosocial Network, International Rehabilitation Council for Torture Victims, International Society for Traumatic Stress Studies. Previously Head of Sub-office Great Lakes Refugee Operation, United Nations World Food Programme (UNWFP), Ngara, Tanzania; Program Manager Bhutanese Refugee Operation, UNWFP, Nepal; Adjunct Faculty, Forced Migration and Refugee Studies and Psychology Department, American University in Cairo; Head of Psychosocial Unit, Africa and Middle East Refugee Assistance, Cairo.

Publication/Conference presentation areas: Trauma, Memory, Traumatic Growth, Domestic Violence, Asylum and Refugee Studies.

Lavita Nadkarni, Professor: Ph.D., Adelphi University, 1995+
Areas of interest: Forensic psychological theory and practice; forensic issues involving children, adolescents, and families; domestic violence in child custody situations, competency issues; psychoanalytic psychotherapy; cross-cultural treatment issues; identity formation within a cultural context; entitlement; asylum evaluations and refugee mental health.

Professional activities include: APA, American-Psychology Law Society, CPA, MDIC, NCSPP
Publication areas: Entitlement, child custody guidelines, truancy, domestic violence, education and training, and multicultural issues.

Artur Poczwardowski, Professor: Ph.D., University of Utah, 1997
Areas of interest: Sport/performance psychology practice; curriculum development and teaching in sport/performance psychology; interpersonal relationships in sport/performance; psychological skills training; knowledge generation and application.

Publication areas: Models in sport psychology service delivery for performance enhancement and psychological well-being; professional philosophy in sport psychology consulting; coach-athlete relationships; coping strategies in elite performers in sports and arts; scientific methodology in sport and exercise psychology.

Steve Portenga, Clinical Assistant Professor, PhD, University of Missouri-Columbia, 2004
Publications and Areas of Interest: the psychology of elite performance, neuroscience and performance, the intersection of leadership (coaches and peer) and team development, the psychology of injury, the ethical practice and training of performance psychologists, and the theoretical foundations of human performance.

Jamie Shapiro, Assistant Professor of Sport and Performance Psychology: Ph.D., West Virginia University, 2009
Areas of interest: sport and performance psychology; psychology of sport injury; exercise psychology; athletic counseling

Professional activities include: Association for Applied Sport Psychology, American Psychological Association, Professional member of USA Gymnastics, a Certified Consultant of the Association for Applied Sport Psychology (CC AASP) and a National Certified Counselor (NCC)

Publication areas: psychology of sport injury, ethics in sport psychology

Shelly Smith-Acuña, Dean: Ph.D., Loyola University of Chicago, 1989 +
Areas of interest: Family systems theory; integration of community, family, and individual interventions; psychotherapy process and outcome research; couples therapy; issues of culture and gender in family therapy.
**Professional activities include:** APA; Division of Family Psychology; and CPA. In her private practice, she specializes in couples, families, and individuals with relationship issues.

**Publication areas:** Process of psychotherapy with children; gifted children; training and supervision issues; couples therapy.

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**Ragnar Storaasli**, Clinical Associate Professor: Ph.D., University of Denver, 1991 +

**Areas of interest:** Acceptance and Commitment Therapy, behavior analysis, philosophy of science, teaching, and supervision, coaching and consultation.

**Professional activities include:** Association for Contextual Behavioral Science, private practice.

**Publication areas:** behavior assessment and therapy, behavior medicine, relationships, professional issues.

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**Nicole Taylor**, Clinical Assistant Professor: Ph.D., University of Maryland, 2008

**Areas of specialization:** Health and medical psychology, counseling psychology, psychological consultation, supervision and training, feminist/multicultural therapy, psychology of gender and sexuality, psychosocial oncology, autoimmune diseases, and psychosocial obstetrics and gynecology. Dr. Nicole Taylor is interested in the psychosocial impact of physical health issues including cancer, autoimmune diseases, and obstetrics.

**Publication areas:** health psychology, biopsychosocial model, clinical training, qualitative research methods.

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+ Licensed Psychologist

During 2012-2014, other professional persons in the community have offered courses and supervision groups in the Graduate School of Professional Psychology or have served as psychiatric consultants. These include:

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<tr>
<td>Shoshana Adler</td>
<td>Sarah Burgamy, PsyD</td>
<td>Trent Engel, PsyD</td>
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<td>Barbara Armendariz, LCSW</td>
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<td>J. Faragher</td>
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<td>Amy K. Connelly, PsyD, ABPP-CN</td>
<td>Jim Gallagher, PsyD</td>
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<td>Laurie Bennett, PhD</td>
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<td>Arthur Garfein, MD</td>
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<td>Martin Bernstein, EdD</td>
<td>Karen Corsi, ScD, MPH</td>
<td>Sara Garrido, PsyD</td>
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<td>Ambra Born, PsyD</td>
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<td>Sarah Gillingham, PsyD</td>
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<td>Eric Braden, PhD</td>
<td>Thomas Davidson, PsyD</td>
<td>Stephen Ginsberg, PsyD</td>
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<td>Beverly Brauer, PsyD, RN</td>
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<td>Jeffrey Haber, EdD</td>
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Suzanne Hamm, PhD
Elaine Hanson, PsyD, JD
Parastou Hassouri
Mary Heekin, MSW
Mark Held, PhD
Kathleen Henken, PsyD
Pamela Hiner, PsyD
Lee Hockman, PsyD
John Holmberg, PsyD
Sonja Holt
Elizabeth Hooks, PsyD
Laurie Ivey, PsyD
Erin Jacklin, PsyD
Douglas Jowdy, PhD
Crystal Joy, PsyD
Steve Kalat, PhD
Sheila Kamlet, PsyD
Karen Katz, MSW
Jim Kemp, PsyD
Kwai Kendall-Grove, Ph.D.
Alan Kent, PhD
Charles Kentnor, PsyD
Rebecca Kinney, PsyD
Peggy Kolschefsk, PsyD
Howard Lambert, PsyD
Sarah Lamm-White, PsyD
Carrie Landin, PsyD
Janice Larkin, PsyD, MSW
Steve Lazarus, PsyD
Bennett Leslie, PsyD
Lynn Leventhal, MSW
Michael Levin, MD
Lorraine Lipson, MA
Esther Lowenstein, PsyD
Nancy Lucero, PhD
Michael Maley, PhD
Rich Mangen, PsyD
Dan Manzanares, PsyD
Rebekah Markheim, PsyD
Pamela Marsh, PsyD, MSW
Laura McArthur
Marguerite McCormack, MA
Tonya McFarland
Denise McGuire, PhD
Bradley McMillan, PhD
Miles Meason, PsyD
Steve Meitus, MD
Will Menaker, PhD
Shayeestah Merchant, PsyD
Jessica Micono, PsyD
Gil Milburn-Westfall, PsyD
Amy Milkavich, PsyD
David Milner, PhD
Mary Monroe, PsyD
Michael Monroe, PsyD
Eric Moody PhD
Jacqueline Moreno, PhD
Chris Morley, PsyD
Heather Morris, PsyD
Michele Forstot Nadel, PsyD
Gina Navarette, PhD
Elizabeth Nelson, PhD
John Nicoletti, PhD
Susan Ollar, PhD
Amber Pearson, MA
Nicole Perry, PsyD
Antonia Pieracci, Ph.D.
Timothy Pollak, PhD
Melissa Polo-Henston, PsyD
Jacob Pomerantz, PhD
Claire Poole, PsyD
Kristen Powell, PhD
Lydia Prado, PhD
Cheryl Prevendar Zuber, PsyD
T.J. Price, PsyD
Tamara Pryor, PhD
Claire Purcell, PhD
Kathleen Purcell, PhD
James Rainwater, PhD
Barbara Redinger, PhD
Riley Rhodes, PsyD
Sandra Rhodes, PsyD
Paul Richards, PhD
Vicki Robbins, MSW
Liz Robinson, PsyD
Shawna Roberts, PsyD
Lynn Rosdal, PsyD
Neil Rosen, PsyD
Rob Rosenthal, PsyD
Karen Rosica, PsyD
Theresa Rosner-Salazar, PsyD
Justin Ross, PsyD
Elizabeth Sather, PsyD
Vivian Schaefer, PsyD
Sabina Schickli, PsyD
Katrin Seifert, PsyD
Liz Shane, PsyD
Erin Shrago, PsyD
Mary Simon, PsyD
Shawn Smith, PsyD
Richard Sobesky, PhD
William Sobesky, PhD
Martha Spano, PsyD
Sally Spencer-Thomas, PsyD
Malia Sperry, PsyD
Richard Spiegle, PsyD
Rachael St. Claire, PsyD
Bill Staudenmaier, PhD, ABPP
Joanne Steinwachs, MSW
Marguerite Stewart, PsyD
Carolyn Stoloff, Ph.D.
Cathy Sunshine, MBA
Erik Sween, PsyD
Marilyn Talmage-Bowers, PsyD
Shelia Teitelbaum, PsyD
Kym Spring Thompson, PsyD
Kirk Thoreson, PsyD
Walter Torres, PhD
Robert Vitaletti, PhD
Gwen Vogel, PsyD
Laurie Walker
Lester Wall, EdD
Cynthia Wander, MA
James Waters, PhD
Dan Wessner, PhD
Sandra Wilbanks, PhD
Carmen Williams, PhD
Randy Williams, MBA
Matty Wilsey, PsyD
Lois Winchell, PsyD
Wendy Winter-Searcy, PhD
Mark Wolny, MSW
Mark Wohrly
Carolyn Zeiger, PhD
Karen Zelie, PsyD
APPENDIX C
REGISTRATION, LOCKSTEP PLAN, COURSES, SPECIALTY FOCUS TOOL, AND GRADING STANDARDS

REGISTRATION: All students must be registered for all GSPP classes they attend. Fees are assessed to students registering late. Also, students are expected to attend classes for which they are registered. Students should notify the instructor if a class must be missed and plan remediation for that class.

Students are expected to take all required classes at GSPP. See Course Waiver for the exception to this policy.

REGISTRATION

Registration for entering students occurs at the GSPP during orientation week, generally right after Labor Day. New students pay for Fall Quarter within approximately a week of that registration.

Subsequent registrations will occur toward the end of the previous quarter for the next quarter (e.g. late Fall for Winter). Students are encouraged to register on-line. Please register on-time (refer to the Academic Calendar) because DU will charge a fee for late registration.

After the first quarter, bills for tuition and other charges will be payable approximately 2-3 weeks before the next quarter begins. Payment may be made in total or in thirds. There is a handling fee for partial payment.

Students receiving financial aid should work with the Financial Aid Office to get loans credited to bills. Loans are automatically distributed over three quarters. Please apply in April for summer loan eligibility. If a loan check is late, get a memo from the Financial Aid Office for the Finance Office so that your registration is not deleted due to non-payment. The Financial Aid Office is in University Hall, room 210.

DOCTORAL STUDENTS INTERESTED IN FORENSIC, INTERNATIONAL DISASTER PSYCHOLOGY, AND SPORT AND PERFORMANCE CLASSES:

REGISTRATION FOR MA COURSES: An outline of the master’s curriculum will be posted in the kitchen. Students needing more information about any course content are encouraged to ask the Directors of Forensic Psychology, IDP or Sport and Performance. Students should go to the Webcentral GSPP tab to complete a form to request approval to register for the course. Approved form should be emailed to either Lindsay Anderson or Judy Farmer.

REQUIRED PSYD COURSES: PsyD students interested in taking a required course through an IDP, Sport and Performance, or Forensic equivalent (CPSY 4XXX) must petition the faculty to request permission for the course to replace a required PsyD course. Introduction to Statistics is the exception.
Lock step – yearly model

**COURSE AND INSTRUCTOR EVALUATION:** Forms for evaluating courses/instructors are available electronically at the end of each quarter for each class. Results will be available through Webcentral and older printed versions are located in the Student Advocate’s office (Purchasing Annex room 126C). Students are welcome to look at the results.

Starting summer 2010, course evals will be done electronically. Directions will be emailed each quarter. Results will be available online.

**COURSE SCHEDULING/COURSE ARCHIVES:** Students can search the course schedule for any DU department, including schedules from previous and future quarters and years, from the Registrar’s archives page at https://myweb.du.edu/mdb/pdcrs.p_duSlctCrsOff. This is a useful tool for planning as well as for looking up course numbers, previous course title, instructors, etc. It is recommended that students bookmark this webpage. Make sure to select the correct quarter.

However, *please be forewarned.* Due to a number of complicating factors—including the interrelationship of our four graduate programs and the high percentage of our professors working in private practice—GSPP approaches course scheduling on a quarter-by-quarter basis rather than a year at a time like most departments on campus. In general, we post course schedules on the bulletin board in the kitchen and online 3-4 months in advance of the upcoming quarter. Thus, any information that appears online for 5 or more months in the future most likely has been “rolled over” by the Registrar from the previous year and should be considered inaccurate.

**LOCKSTEP SCHEDULE:** When scheduling, every effort is made to conform required courses to this schedule. Please be aware that due to unforeseen scheduling events the schedule may be off of this track. Also, elective courses may be required for seminars and specialty focus tools. Electives are not scheduled by the lockstep process.

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<thead>
<tr>
<th>Year</th>
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<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt; year courses</td>
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<tr>
<td>Elective courses</td>
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PsyD Course Plan 2013-14

*Availability of courses is subject to change. For the most up-to-date information on course requirements, please visit WebCentral. It is up to the students to ensure they are meeting the program’s requirements.

Student Name: ____________________________________________

Advisor Signature: ___________________________ Date: ____________

1st Year (PsyD)

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Beginning Seminar Leaders

Buírski & Rosdal
Lubuguin & Holt
Kemp & Hooks
Henderson-Metzger, Davis & Forstot Nadel
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<td>Physiological Psychology</td>
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**Advanced Seminar Leaders**

- CPSY 5390 Forensic Seminar: Nadkarni
- CPSY 5392 Couple & Family Seminar: Smith-Acuna & Fishman
- CPSY 5394 Cognitive Behavioral Seminar: Karson
- CPSY 5388 Assessment Seminar: Martin, Jacklin & Sobesky
- CPSY 5389 Behaviorism Seminar: McNeil
- CPSY 5393 ACT Seminar: Storaasli & Meason
- CPSY 5386 Child & Adolescent Seminar: Fox
- CPSY 5391 Psychodynamic Seminar: Menaker & Kentnor
- CPSY 5404 Integrative Seminar: Cornish & Rosenthal
- CPSY 5406 Health Psych Seminar: Taylor
### Electives (PsyD) – 2 pages

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<td>CPSY 5420 Behavior Analytic Principles 2 credit hours</td>
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<td>CPSY 5423 Behavior Analytic Case Formulation 2 credit hours</td>
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<td>CPSY 5421 Behavior Analytic Principles Lab 1 credit hour</td>
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<td>CPSY 5755 Supervision Practicum I 1 credit hour</td>
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<td>CPSY 5466 Health Psychology 2 credit hours</td>
<td>CPSY 5741 Therapeutic Assessment 2 credit hours</td>
<td>CPSY 5560 Family Therapy 2 credit hours</td>
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<td>CPSY 5550 Couples Therapy 2 credit hours</td>
<td>CPSY 5467 Health Psychology Service Learning Lab 1 credit hour</td>
<td>CPSY 5500 Diagnosis and Treatment of Children 2 credit hours</td>
<td>CPSY 5880 Business Issues in Professional Psych 2 credit hours (odd years)</td>
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<td>CPSY 5505 Diagnosis and Treatment of Adolescents 2 credit hours</td>
<td>CPSY 5590 Adult Psychopathology 2 credit hours</td>
<td>CPSY 5592 Adult Psychopathology II 2 credit hours</td>
<td>CPSY 5250 Existential &amp; Humanistic Theory &amp; Therapy 2 credit hours</td>
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<td>CPSY 5756 Supervision Practicum II 1 credit hour</td>
<td>CPSY 5700 Advanced Personality Assessment 3 credit hours</td>
<td>CPSY 5758 Supervision Practicum IV 1 credit hour</td>
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<td>CPSY 5131 Issues in Measurement Lab 1 credit hour</td>
<td>CPSY 5757 Supervision Practicum III 1 credit hour</td>
<td>CPSY 5480 Integrated Primary Care 2 credit hours (even years)</td>
<td>CPSY 5108 Intro to ACT 2 credit hours</td>
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### Electives Continued

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<td><strong>CPSY 5989</strong> Doctoral Paper Preparation</td>
<td><strong>CPSY 5687</strong> Contemporary Issues in Geropsych</td>
<td><strong>CPSY 5271</strong> Physiological Psych Lab</td>
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Required PsyD Course Descriptions

2013-2014

CPSY 4010 - Intro to Statistics
General statistical principles and techniques and their application to psychological and psycho-legal issues. Students will develop computer analytic skills to assist in answering professionally relevant questions.

CPSY 5000 - Radical Behaviorism/Functional Contextualism Models
CPSY 5000 is designed to provide a historical, philosophical and conceptual background to better understand and appreciate Behaviorist views of "being-in-the world". The course lays the foundation for the sophisticated application of a science of behaviorist theories and methods to the assessment of clinical problems and the art of doing psychotherapy. The course will invite a little discomfort, disturb some preconceptions, and compel students to address some difficult questions and thorny issues. Among the goals of this course are to see students commit to being more than a psychologist technician; to encourage them to develop a guiding philosophical core in their practice as a psychologist; to assist them in clarifying or deepening of whatever philosophical worldview they may hold; and achieve an informed understanding of radical behaviorism/functional contextualism - whether or not they choose to further pursue these models.

CPSY 5010 - Cognitive & Affective Models
This is the first in a three part sequence that includes Psychophysiology and Clinical Neuropsychology and is designed to introduce students to the current research in cognitive neuroscience and consciousness. This first course focuses on sensation/perception, learning, memory, emotion, language and other higher cognitive functions. Lectures will emphasize current technologies and historical inquiry and the unique contributions made by psychosocial and cultural variables.

CPSY 5020 - Psychoanalytic Models
Psychoanalytic theories, including Freud's topographic and structural theories, ego psychology, object relations theory and modern relational theories, including self-psychology and intersubjectivity.

CPSY 5030 - Systems Models
Basic concepts of general systems theory and its applications in psychology, focusing on family systems, groups and organizations.

CPSY 5040 - History and Systems in Psychology
Basic psychological concepts surveyed from a historical point of view, tracing the development of psychological bases of professional practice.

CPSY 5050 - Advanced Statistics
This course is designed to increase your understanding of advanced analytical techniques in statistics, particularly as they pertain to psychology. We will take an applied approach, i.e., the course material will emphasize the feasibility, application, and utilization of these analyses rather than the theories upon which they are based.
CPSY 5070 - Research Methods
Sequential course that cover fundamentals of structuring, analyzing and critiquing research reports and proposals; strategies to guide and facilitate the writing process; attitude and thinking skills necessary for function as a local clinical scientist; research design tools, methods and strategies for answering different types of questions.

CPSY 5073 – Qualitative Research Methods
Qualitative research involves obtaining in-depth information about the behaviors and beliefs of people in naturally occurring social settings. This course introduces students to the philosophical underpinnings, history, and key elements of five qualitative approaches: narrative research, phenomenology, grounded theory, ethnography, and case study. We compare theoretical frameworks and methodologies, experience the use of data, and discuss writing strategies. In addition, we read articles that are exemplars of each approach.

CPSY 5075 - Program Evaluation Technique
This course explores theory and techniques for developing management information and assessment systems for human service programs.

CPSY 5080 - Diagnosis and Classification
This course focuses on psychopathology in terms of DSM-IV system of diagnosis and classification; process of deriving a complete 5-axis diagnosis.

CPSY 5130 - Issues in Measurement
Validity, reliability and standardization issues in psychological testing; statistical properties of commonly used tests.

CPSY 5170 - Life Cycle: Infancy to Mid Childhood
Understanding normal development of children (0-12 years), integrating theory, research and a phenomenological perspective.

CPSY 5180 - Life Cycle: Adolescent - Adult
Understanding normal adolescent development (13-18 years), integrating theory, research and a phenomenological perspective. Major theories, life events, crisis and the adult life phases. There will be an emphasis on the diversity of adult experiences.

CPSY 5200 - Life Cycle: Late Adulthood
Theories of aging; social, psychological and biological changes; assessment and intervention methods, emphasizing issues impacting older adults. (65 years and above).

CPSY 5230 - Group Interventions & Dynamics
Provides psychologists-in-training with multiple learning experiences focusing on groups and organizations as intensely psychological environments. Highlights how psychologists function professionally and personally and have the potential for positive impact.

CPSY 5231 - Social Psychology
This course explores how social psychologists approach psychology, concentrating on key concepts, research findings, and critical thinking strategies that students can integrate into their own clinical work.

**CPSY 5270 - Physiological Psychology**
Terminology and principles of and research in physiological psychology. Where possible, application made to content and practice of clinical psychology.

**CPSY 5290 - Clinical Neuropsychology**
Historical, conceptual and clinical foundations for, as well as current developments related to, the field of clinical neuropsychology. Includes exposure to: developmental neuropsychology and neuroanatomy; higher cognitive functions; neuropsychologically informed interviews and standard neuropsychological test batteries; neuropsychological profiles associated with a variety of acquired disorders (both neuropsychological and psychological in nature); ethnic, cultural, age and gender considerations; and current status of a variety of professional/ethical issues.
Prerequisites: CPSY 5270

**CPSY 5310 - Ethical Issues in Psychology**
In-depth consideration of ethical standards applicable to the science and practice of psychology; pertinent laws and legal standards governing the practice of psychology; areas in which legal and ethical standards suggests contradictory actions on the part of the clinical psychologist.

**CPSY 5320 - Professional Issues in Psychology**
Issues, concerns and controversies impacting the current practice of professional psychology at the state and national levels; preparation for future alternative systems of service delivery. Emphasis is on professional life after the PsyD. Required for first year students.

**CPSY 5340 - Social Psychology of Racism and Oppression**
Theoretical and experimental nature of racism and oppression, primarily in the United States, definition of such terms as stereotypes, prejudice, racism, white supremacy and privilege; exploration of various theories regarding these terms and how they manifest themselves historically and contemporarily.

**CPSY 5360 - Racial/ Ethnic Identity Development**
This course will explicate the concept of ethnic identification, and the process by which this central aspect of a person's overall identity develops. Accordingly, this course will address two central questions: who are they? and how did they get that way? These questions will be examined utilizing a Descriptive Psychology perspective.

**CPSY 5370 - Gay, Lesbian, Bisexual & Transgender Issues**
Various aspects of gay, lesbian life explored cross-culturally; nature of homosexuality, including the controversy of heredity vs. choice. Issues of oppression and discrimination will also be explored. The role of psychology and the politics of homosexuality will be studied. Students will also be asked to explore their personal awareness regarding homosexuality in their everyday
lives and in a therapeutic context.

**CPSY 5380 - Culturally Competent Psychotherapy**

As the final class in the year-long multicultural course sequence, this class will integrate the theoretical content of the preceding classes and focus on their psychotherapeutic implications. This course will address psychotherapy with the following groups - African Americans, Asian Americans, Latinos, Native Americans, and the GLBT community.

**CPSY 5385 – Pro Sem: Beginning Psychotherapy**

The beginning seminar is designed to introduce students to the practice of psychotherapy. Students will explore basic theories and techniques of counseling, with an emphasis on the therapy relationship. Students will examine the development of the therapeutic alliance, the process of setting goals in treatment, and the establishment of a therapy contract. In addition, students will explore ethical and legal issues in the therapy process. Finally, students will also look at issues of professionalism and self care. A combination of readings, case presentations, videos, and role plays will be used to cover the material. Students are expected to carry two cases through the PPC in conjunction with the seminar.

**CPSY 5386 – Pro Sem: Child & Adolescent Psychotherapy**

In this seminar we will take an Integrative Approach to the treatment of children, adolescents and families. While various integrative approaches will be considered, Cyclical Psychodynamics (Wachtel) will be one example that is thoroughly covered. This approach conceptualizes functioning through the integration of individual developmental dynamics and systemic factors. Interventions occur through a combination of individual child/adolescent, parent and parent-child/adolescent sessions. The developmental details of working with children at various ages will be a focus, from play techniques with young children to the developmental dynamics of working with adolescents. Understanding interpersonal and intrapersonal dynamics as influenced by attachment variables, and the ways in which this informs the treatment of children, adolescents and their parents will be discussed as it relates to seminar cases.

In the early weeks of each quarter, we will determine a variety of topics in child and adolescent evaluation and treatment that are of interest to cover. Brief, informal presentations on these topics will be made by students throughout the year and guest speakers of interest may be arranged.

There are no prerequisites for taking this seminar, although it may be useful to you if you have taken the Diagnosis and Treatment of Children/Adolescent courses, or will be in the process of doing so next year.

**CPSY 5388 – Pro Sem: Psychological Assessment**

This seminar will focus on clinical material related to aspects of psychological assessment. It demands more of a time commitment than most other seminars because assessment requires longer sessions with clients to administer tests, time to score and interpret tests, and report writing. There will be opportunities to complete personality, ADHD, and learning disability assessments, for both children and adults. You are required to complete a minimum of 3 cases during the course of the year (one per quarter). We will not be providing neuropsychological
testing services, although we will discuss some neuropsychological issues as they arise. Students will have the chance to present their cases and consult with the seminar. We hope you will find it enriching and fun.

**Requirements** for enrollment in the seminar include: prior completion of Cognitive Assessment and Self-Report Assessment, as well as completion of or at least concurrent enrollment in the Introduction to Rorschach class. The seminar co-leaders provide supervision and enrich the experience. Supervision of assigned small subgroups typically takes place either before (11:30 to 1) or after (3 to 4:30) seminar or on Fridays (1 to 2:30).

**CPSY 5389 – Pro Sem: Behavior Therapy**
This advanced professional seminar draws upon pragmatic philosophy and contextualistic worldview as it informs and guides contemporary behavior analytic theory and practice. Seminar students will gain experience using functional analysis as a method for describing and integrating clinical observations and they will learn to implement a variety of evidence based, acceptance inspired interventions designed to facilitate psychological flexibility and values-congruent living in clients from diverse backgrounds. Therapeutic work will be conducted in an atmosphere of care, respect, compassion, and commitment, and will challenge the client (and therapist) to be more open, aware, vulnerable, and present in their lives.

Seminar time will be devoted to case presentations primarily. Some emphasis may be given to experiential exercises as time permits.

Prerequisites. Seminar enrollment requires that students must have completed, or be concurrently enrolled in, the yearlong behavior analysis sequence courses, including Behavior Analysis Principles 1 (fall), Behavior Analysis Principles 2 (winter), Behavioral Case Formulation (spring), and Behavior Therapy Interventions (summer).

**CPSY 5390 – Pro Sem: Forensic Issues**
This seminar will introduce students to the various areas and ways in which psychology interacts with the legal and criminal justice systems. Students will develop their capacity to perform evaluations relating to psychological questions, dilemmas, and disputes that are most frequently requested of forensic psychologists. Focus of the seminar will be on assisting students in clarifying their role as an evaluator and consultant to attorneys, judges, and criminal justice personnel; exploring the ethical responsibilities therein; learning to compose reports for a legal rather than a clinical audience; and preparing to testify as an expert witness. Students will formulate and deliver case presentations and submit reports.

Students in past seminars have conducted child custody evaluations, mental status at time of offense evaluations, SSDI evaluations, asylum evaluations, and juvenile placement evaluations; these evaluations included objective and projective personality assessments and cognitive assessments. In addition, we have been getting more court mandated therapy clients. Thus, students will get assessment experience as well as individual therapy experience with adults and children. Assessment experience required. If you have not completed all assessment courses, please speak to Lavita.
CPSY 5391 – Pro Sem: Psychodynamic Therapy

This seminar will focus on psychodynamic psychotherapy with adults. We will emphasize the practical application of psychodynamic concepts to work with clients. The seminar will afford the opportunity to deepen our understanding of the unconscious dynamics that influence our clients' experience of the world. We will learn to explore and understand clients' underlying self-experience and the nature of their relating with others.

We will come to appreciate the therapeutic relationship as an experiential data point that facilitates the exploration of transferences and enactments. We will come to understand the therapeutic relationship as vehicle in which we can travel with the client through previously uncharted territory, affording them a developmentally relevant experiential shift. We will also learn to explore and make use of your countertransference reactions to inform case conceptualization and guide interventions.

In this seminar, it will also include a segment on dream work. Participants will learn how we can make sense of dreams (our own and our clients') in the context of our understanding of the dreamer. We will also discuss how dreams can be used in psychotherapy to enhance the exploration of the client’s underlying experience.

We will learn through videos, group process, supervision and readings. We will draw from various areas of contemporary psychodynamic thought including relational theory, self-psychology, attachment theory, object relations, and the relevant literature on trauma.

Prior or current personal psychotherapy is highly desirable and strongly recommended. Students should be prepared to discuss their clinical work openly and help foster an environment of mutual trust, compassion and respect which facilitates self-reflection and the meaningful exploration of clinical material.

As you may not have had a chance to meet either of us, we each welcome any questions you may have. Please feel free to call Mac at 720-226-6080 or Will at 303-877-4407.

CPSY 5392 – Pro Sem: Couple and Family

This seminar is designed for students who want to develop a specialty in working with families and couples. Prerequisites include Systems Theory. Couples Therapy and Family Therapy must be taken before or during the seminar. Theoretical perspectives utilized include general systems theory and an integration of behavioral, experiential, and historical family therapy approaches. The seminar will combine case presentations and discussions of special topics such as custody evaluations and sex therapy. Guest speakers are sometimes utilized. Students will be asked to explore and discuss their professional development through the use of their own family genograms. Video tape, live supervision, and role plays will also be employed. Students will be required to carry 2-3 cases throughout the seminar.

CPSY 5393 – Pro Sem: ACT

Acceptance and Commitment Therapy (ACT) belongs to the movement in clinical psychological science that sees acceptance and openness to experience as an essential addition to change-focused psychotherapeutic treatment strategies. Although consciously based on behavior-analytic thinking, ACT is a hybrid therapy in terms of approach and technique,
bringing together aspects of Zen Buddhism, Gestalt therapy, and humanist-existential thought. The paradox upon which ACT is founded is that only radical acceptance of what cannot be changed empowers us to recognize and change the things that we can. The ACT approach is about embracing necessary suffering in order to make more committed, life-affirming choices and live in accordance with personal values. ACT emphasizes that in a very deep sense all human beings are in the same boat. The technical and theoretical bases of ACT are transmitted through normal didactics, but the heart and art of the approach occurs through group process, small group and individual supervision, and from observation and modeling. In the end, the core of ACT training is to create an experience of what it is like to stand in the place that we ask our clients to stand in.

CPSY 5394 – Pro Sem: Cog-Behav Therapy

Cognitive-behavior therapy (CBT) uses critical thinking and empiricism to guide behavior that arose from fears, habits, outmoded solutions, and superstitions. CBT depends on a solid working alliance, but the therapeutic relationship is not a reworking of past relationships; instead, it is an educational, collaborative, and goal-directed approach to therapy.

After the first quarter, the seminar will focus on radical CBT, meaning we will emphasize the schemas and patterns that operate in the therapy office. We will also explore the skills applicable to all therapies, including frame management, alliance repair, interpretation, and understanding power dynamics, privilege, identity, gender, and metaphor. Couple’s therapy cases are welcome.

CPSY 5404 – Prof Sem: Integrative Therapy

This advanced seminar will examine various integrative models of psychotherapy, and students will have the opportunity to develop their own therapeutic “voice” by integrating the major theories already learned at the GSPP. While the seminar will be theoretical in nature, one goal will be to help students prepare for practice in the real world by exploring the common factors of therapy, and how to work collaboratively in a client-directed fashion. Clients may include adults, adolescents, and children with a wide variety of presenting concerns, in individual, couples, family, or group therapy. Students will be expected to present their work regularly on DVD and (in Dr. Cornish’s supervision), occasionally behind the two-way mirror. Competency areas covered will include: professionalism, reflective practice, scientific knowledge and methods, relationships, individual and cultural diversity, ethical/legal standard and policy, assessment, and intervention.

CPSY 5406 – Pro Sem Health Psych

This advanced seminar will focus on the ways that clients’ physical health concerns impact their psychosocial and emotional well-being. We will focus on the relationship between the mind and the body and take a holistic and contextual approach to understanding work with clients, keeping in mind relational and cultural variables throughout the course. Clients in the PPC that have been in this seminar have had cancer, MS, heart failure, chronic pain, autoimmune diseases, etc.

As relevant to our work with clients, we will discuss pain management, mindfulness, differential diagnoses of depression and anxiety, sleep hygiene, psychosocial oncology, grief and loss, and other empirically supported treatments for issues that clients present. The overarching theoretical framework of the course will be relationship-focused, client-centered, and strengths-based. We will draw on rehabilitation psychology and medical psychology, and will explore diversity issues
in a variety of ways, including examining disability as a multicultural issue. We will use readings from feminist therapy, positive-psychology, meaning-centered psychotherapy and post-traumatic growth to guide our discussions. Particular attention will be paid to helping clients enhance their strengths and find meaning in their lives during times of transition.

Theoretical approach: Since this seminar is a population-based seminar and not a theory-based seminar, a number of different theories will be covered in class. The instructor uses an integrated approach and will bring in aspects of feminist therapy, interpersonal therapy, humanistic/existential therapy, and client-centered therapy, among others. Students will be expected to have a basic familiarity with cognitive-behavioral and psychodynamic theories.

The goal of this seminar is to prepare students for work in the medical field as psychologists in integrated health settings. The instructor believes that it is critical to have strong general clinical skills before one can develop a health psychology-specific skill set so some of the seminar will be spent covering basic counseling skills and understanding how general counseling skills, basic attending and attunement, and empathy are the basis for work in health psychology.

Since many health settings are focused on a short-term model of treatment, students in seminar will have the option of taking on shorter-term cases and we will explore the use of time-limited psychotherapy in a health setting. It will be expected that most students take on new cases in this seminar.

Please note: this seminar focuses on health and medical psychology but does not have a strong emphasis on neuropsychology. If that is your primary interest, you may wish to discuss that with the instructor before registering for the course. Also note that since this seminar is not focused on one theoretical orientation, students taking this before comps will need to be aware that outside work will be necessary to focus on a specific theory for comps. If you have any questions, please contact Nicole at Nicole.e.taylor@du.edu.

CPSY 5562 - Consultation
This course provides an overview of the practice of psychological consultation. Theories and models of consultation in various settings including businesses, organizations, health care, and schools are covered. The process and stages of consultation from entry to termination are analyzed. This class differentiates consultation from other types of psychological interventions. Important legal, ethical and multicultural issues in consultation are addressed throughout the course. Students develop their own model for conducting consultation and refine that model through work with local organizations. Students increase their awareness of their strengths and weaknesses in the practice of consultation. Methods of instruction include lecture, discussion, experiential exercises, and interactions with local organizations and professional consultants.

CPSY 5680 - Cognitive Assessment
Theoretical, professional and clinical issues involving intelligence and its measurement; assessment of cognitive functioning and clinical interpretation of test results, focusing on the WAIS-III (and child equivalents). Prerequisites: CPSY 5130

CPSY 5690 - Introduction to the Rorschach
Exner's Comprehensive System for administering, scoring and developing hypotheses with the
Rorschach Test. Prerequisite: CPSY 5130

CPSY 5705 - Self Report Assessment
Construction and application of objective instruments, emphasizing the MMPI and MCMI. Students are required to submit test reposts. Prerequisites: CPSY: 5130

CPSY 5740 - Integrated Personality Assessment
This course is the culmination of the assessment sequence, and integrates techniques, approaches and concepts covered in issues in Measurement, Cognitive Assessment, Objective Personality Assessment, and Rorschach. Aspects of the other core courses in the curriculum will also be brought to bear on the question of how to obtain and how to interpret information within various theoretical models for the purposes of answering referral questions and planning interventions. Projective testing will be introduced as a source of behavior samples for which the occasioning environment is known to the psychologist. There will be focus on distinguishing interpretable from irrelevant information, and on integrating interpretable information into meaningful patterns. The goal of using assessment to answer referral question and plan treatments will generate a special focus on report writing.

CPSY 5750 - Supervision
This course is designed to familiarize students with theories of supervision; provide practical, guided experience in peer supervision/consultation; help students understand and critically discuss the supervisory process; aid in gaining awareness of how multicultural issues may affect supervision; and familiarize students with ethical and legal issues in supervision.
Elective Course Descriptions
2013-14

CPSY 4430 – Career Counseling
This course is designed to focus on the theory, practice and assessment of career counseling. Students will be exposed to career developmental theory, psychological assessment for career planning, and learn about the information sources for career counseling. Specific focus will be on the techniques and application of career counseling to diverse forensic populations. Several prominent theoretical approaches to career counseling will be introduced in preparation for the National Counselor (LPC) Examination.

CPSY 5108—Introduction to ACT
Acceptance and Commitment Therapy (ACT) belongs to the movement in clinical psychological science that sees acceptance and openness to experience as an essential additional to change-focused psychotherapeutic treatment strategies. Although consciously based on behavior-analytic thinking, ACT is a hybrid therapy in terms of approach and technique, bringing together aspects of Zen Buddhism, Gestalt therapy, and humanist-existential thought. The paradox upon which ACT is founded is that only radical acceptance of what cannot be changed empowers people to recognize and change the things that they can. The ACT approach is about embracing necessary suffering in order to make more committed, life-affirming choices and live in accordance with personal values. ACT emphasizes that in a very deep sense of human beings are in the same boat. The technical and theoretical bases of ACT are through normal didactics, but the heart and art of the approach occurs through experiential exercises, group process, and from observation and modeling. Prerequisite: CPSY 5000.

CPSY 5131 - Issues in Measurement Lab
Optional. Focused assistance with basic math skills; review and clarification of class topics.

CPSY 5250 - Existential and Humanistic Theory and Therapy
Historical roots and basic assumption of existential and humanistic views. Students encouraged to integrate materials with their personal values and assumptions about human nature and their interaction with clients.

CPSY 5271 - Physiological Lab I
Optional. Assistance with material covered in CPSY 4170.

CPSY 5420 - Behavior-Analytic Principles 1
This course covers philosophical foundations, assumptions, and principles underlying major systems and models of behaviorism. Emphasis is given to the philosophy of science called radical behaviorism and its behavior-analytic functional-contextualistic tradition. Course I specifically targets contingency-shaping selection processes based upon Pavlovian and operant conditioning paradigms. Recommended prerequisite: CPSY 5000.

CPSY 5421 - Behavioral Analysis Principles Lab

CPSY 5422 - Behavior-Analytic Principles 2
This course covers philosophical foundations, assumptions, and principles relevant to cultural-linguistic practices. Emphasis is given to the philosophy of science called radical behaviorism and its behavior-analytic functional-contextualistic traditions. Course 2 specifically addresses verbal relational contingency selection processes based upon cultural and its verbal community. Prerequisite: CPSY 5420.

**CPSY 5423 - Behavior-Analytic Case Formulation**

This course covers the philosophical foundations, assumptions, and principles relevant to behavioral assessment and case formulation tactics. Emphasis is given to the philosophy of science called radical behaviorism and its behavior-analytic functional-contextualistic traditions. This course specifically targets an empirical data-driven approach to idiographic assessment for purposes of developing conceptual analyses from the contextual-functional analytic perspective. Prerequisites: CPSY 5420, CPSY 5422.

**CPSY 5424 - Behavior-Analytic Intervention**

This course provides an overview of issues, principles and methods basic to clinical practice and intervention. Emphasis is given to the philosophy of science called radical behaviorism and its behavior-analytic functional-contextualistic traditions. This course specifically targets a range of commonly used methods of intervention (e.g., counter-conditioning and exposure-based treatments, guided action strategies, acceptance-commitment approaches, and Eastern interventions). Issues relevant to the structuring of therapy sessions, the therapeutic relationship, behavioral non-adherence, empirical research, and other topics of therapeutic interest will be reviewed. This course will incorporate the use of experiential exercises, modeled demonstration, and behavior rehearsal methods for training purposes. Prerequisites: CPSY 5420, 5422, 5423.

**CPSY 5466 - Health Psychology**

This course is designed to provide students with a broad overview of the salient empirical and theoretical aspects of health psychology and behavioral medicine. The course will emphasize the role that psychological variables play in the development, exacerbation, treatment and prognosis of both acute and chronic illness. We will also highlight sociopolitical and cultural discourse surrounding end-of-life decision making, healthcare accessibility and the phenomenology of a disabled population.

**CPSY 5467 - Health Psychology Service Learning Seminar**

The Health Psychology Service Learning Seminar provides the opportunity for students to gain clinical experience with the underserved/underrepresented populations covered in the Health Psychology course (CPSY 5466). Students who enroll in the Seminar must agree to complete 20 hours of supervised clinical service with an agency and supervisor of their choice.

**CPSY 5480 - Integrated Primary Care**

This course is designed to provide an introduction to the field of Integrated Primary Care (IPC). Primary health care physicians currently serve as the de-facto mental health care providers for approximately 50-80% of the patients they serve. Psychologists are desperately needed to support primary care, yet traditional clinical training does not adequately prepare them to work in this field. Students in this course can expect to acquire a solid knowledge in IPC that will enable them to function effectively in the primary care culture. A clinical exposure component
are required so students can experience the pace and problem range seen in the primary care office. Class size is limited. Students not enrolled in the PsyD program must petition the instructor for approval to register.

**CPSY 5500 - Diagnosis & Treatment of Children**
The focus of this course will be on the evaluation and treatment of children. Considerations concerning the particulars of the evaluation process will be discussed. An integrative approach to child treatment will be presented with a “child-in-family” approach. Play therapy approaches and techniques will be described and contrasted. Behavioral approaches will be discussed. Work with populations common in child work will be discussed, such as children in high-conflict divorce families, learning disabilities, ADHD, mood disorders and situations of physical/sexual abuse.

**CPSY 5505 - Diagnosis & Treatment of Adolescents**
This course focuses on counseling and psychotherapy with adolescents from a variety of approaches, including developmental, integrative, psychodynamic, person-centered, reality, rational emotive, cognitive behavioral and systemic. Topics will include the ethical and legal issues involved in psychological interventions, culturally responsive counseling, and orchestrating productive family sessions with challenging adolescents.

**CPSY 5550 - Couples Therapy**
Theory, techniques and research relating to couples therapy, including theoretical perspectives: behavioral couples therapy, emotionally-focused couples therapy and object relations couples therapy. The course also addresses specific problem areas, including domestic violence, infidelity, depression, anxiety, substance abuse and personality disorders. Prerequisite: CPSY 5030.

**CPSY 5560 - Family Therapy**
Theory, techniques and research relating to family therapy, including several theoretical perspectives: behavioral, experiential, psychodynamic, multigenerational approaches. Special topics covered include working with community resources, addressing developmental issues of children, working with medical and school systems, utilizing cultural factors in planning programs and interventions and adults in family therapy. Prerequisites: CPSY 5030

**CPSY 5590 - Adult Psychopathology I**
Theoretical understanding and treatment of adults within a developmental, ego analytic framework. The first quarter course focuses on differences between the neuroses, borderline personality disorder, and psychoses. Prerequisite: CPSY 5020

**CPSY 5592 - Adult Psychopathology III**
Theoretical understanding and treatment of adults within a developmental, ego analytic framework. The third quarter focuses on personality disorders and the psychoses. Prerequisites: CPSY 5590 and CPSY 5591 or instructor approval.
CPSY 5685 – Pediatric Neuropsychological Assessment
Pediatric neuropsychology integrates many basic sciences including behavioral Neurology, developmental psychology, neuroanatomy, psychopathology, and psychological assessment. The role of pediatric neuropsychologist is to provide comprehensive assessment, consultation, and intervention in the context of a developing child. The course will review important concepts, theories, and empirical research in the field of pediatric neuropsychology. Students will learn the basic rationale in conducting a pediatric neuropsychological evaluation, including a brief review of many common pediatric assessment measures. In addition, many common pediatric disorders will be reviewed from a neuropsychological perspective including: Dyslexia, Attention Deficit hyperactivity Disorder, Pervasive Development Disorders, Traumatic Brain Injury, Seizure Disorders, and Mental Retardation. Upon completion of the course the student will have a greater appreciation of a neuropsychological conceptual framework and have a better understanding of specific pediatric disorders.

CPSY 5686 - Suicide Prevention, Intervention and Postvention
Suicide is a serious public health issue and challenge for the nation, Colorado, and our local communities. In 2009, suicide claimed the lives of almost 34,000 people in the United States and is the second leading cause of death for college students and men ages 25-34. In Colorado, there are many more suicides than motor vehicle deaths. While most clinicians are focused on the assessment and treatment of people at high risk for suicide, a more comprehensive approach is needed to prevent people from becoming suicidal in the first place. This course covers best practices in suicide prevention, intervention and "postvention" (suicide crisis response) and will explore the particular issues of several vulnerable populations.

CPSY 5687—Geropsych
This course addresses issues in aging. Topics include healthy aging, aging issues in diverse populations, contemporary options for care, challenges in service delivery, the interplay of medical and mental health needs, mental health treatment approaches and issues, and end-of-life issues.

CPSY 5692 - Advanced Rorschach Analysis
This course is an exploration of advanced topics in Rorschach interpretation. Topics will include: conceptual understanding of the Comprehensive System; content and sequence analysis; differential diagnosis; integrating alternative systems of interpretation with the Comprehensive System; development and use of special scales; appropriate use of computerized interpretation; and integration of Rorschach analysis with personality theory. Prerequisites include course work in Rorschach administration, scoring and basic interpretation; and in personality theory. Students will be expected to score, analyze, and present Rorschach protocols.

CPSY 5700 – Advanced Personality Assessment
Projective techniques including Rorschach, storytelling tasks and projective drawings, with a focus both on test content and the patient-examiner relationship in the context of the diagnostic consultant. Prerequisites: CPSY 5130, 5680, 5690.

CPSY 5706 - Self Report Assessment Lab
Optional accompaniment to CPSY 5706, for students anticipating a need for extra help with
CPSY 5741 - Therapeutic Assessment
This course explores the advances made in understanding and enhancing the therapeutic impact that assessment can have on clients. We read broadly in the area: from the genesis of collaborative assessment fueled by Fischer to the empirical foundations and structure of Therapeutic Assessment provided by Finn to novel applications of the approach highlighted by Handler. This important movement in assessment is applicable to personality, cognitive, and neuropsychological assessment as well as any professional endeavor that aims to help clients understand themselves in life-changing ways. The course is designed for those with a solid foundation in assessment who wish to develop greater facility in helping their clients.

CPSY 5755 - Supervision Practicum I
This is a four quarter sequence, 1 quarter credit hour/quarter, in which advanced students will have the opportunity to supervise on beginning student under the overall supervision of a faculty member. Each quarter practicum will include appropriate level readings, group discussions and report writing. Admission to the course with instructor's approval.

CPSY 5756 - Supervision Practicum II
This is a four quarter sequence, 1 quarter credit hour/quarter, in which advanced students will have the opportunity to supervise one beginning student under the overall supervision of a faculty member. Each quarter practicum will include appropriate level readings, group discussions and report writing. Admission to the course with instructor's approval.

CPSY 5757 - Supervision Practicum III
This is a four quarter sequence, 1 quarter credit hour/quarter, in which advanced students will have the opportunity to supervise one beginning student under the overall supervision on a faculty member. Each quarter practicum will include appropriate level readings, group discussions and report writing. Admission to the course with instructor's approval.

CPSY 5758 - Supervision Practicum IV
This is a four quarter sequence, 1 quarter credit hour/quarter, in which advanced students will have the opportunity to supervise one beginning student under the overall supervision of a faculty member. Each quarter practicum will include appropriate level readings, group discussions and report writing. Admission to the course with instructor's approval.

CPSY 5760 – Professional Issues II
This class provides an organized and comprehensive approach to pre-doctoral psychology internship selection, emphasizing an understanding of "fit." Topics covered include choosing sites; writing cover letters, CVs, and AAPI essays; preparing application materials; interviewing techniques; rank ordering sites; and dealing with emotions related to the process. The course syllabus includes important readings from the current literature. Lectures are balanced with guest appearances by DU Writing Center staff and others. Opportunities are given for role play among the students.

CPSY 5765 - Cognitive Behavioral Therapy
This course focuses on clinical applications of cognitive-behavioral theory. Major theorists in the
area are reviewed, including Ellis, Beck, Lazarus, and Meichenbaum. Research utilizing cognitive-behavioral therapy as an evidence-based practice are reviewed. In addition, key cognitive behavioral techniques are demonstrated and practiced.

**CPSY 5840 - Psychopharmacology**

This course focuses on the various medications prescribed by psychiatrists to alter consciousness, modify behavior, and/or alleviate symptoms in the treatment of mental disorders including depression, bipolar disorder, anxiety, eating disorders, and psychoses. Topics such as sleep, pain and addiction will be covered, as well as drug interactions, psychotropic drugs in pregnancy, the treatment of children, geriatrics, and the psychologist-psychiatrist relationship.

**CPSY 5880 - Business Issues in Professional Psychology**

This course introduces students to business principles as they apply to professional psychology. Students think through various business practice decisions, such as starting, managing, marketing, and diversifying a psychology practice and consider the related legal, ethical, and financial issues.

**CPSY 5989 - Doctoral Paper Development**

This course is designed to facilitate the development and writing of the doctoral paper. Students are expected to adhere to the GSPP Doctoral Paper Guidelines and the APA style guidelines. A major feature of the class is student-to-student sharing and critiquing of doctoral project ideas and plans. Students are expected to take advantage of this opportunity to hone their writing skills and develop their doctoral paper proposal. Students have complete the proposal phase of their project further develop their research methodology.

**INDEPENDENT STUDY/INDEPENDENT RESEARCH:** Registration for independent study/independent research (IS/IR) can be no more than 1/4 of total hours taken at the GSPP. IS/IR registrations must be sponsored by appointed GSPP faculty members (rather than single course instructors or outside supervisors). Please see the GSPP policy in the box below regarding IR credit. When planning an independent study with a supervisor from the community, students should present their advisor or other appointed faculty member with an outline of the study to request sponsorship for it. Tracie has paperwork which must be filled out and signed for IS/IR registration, which is available on line at [http://www.du.edu/registrar/regbill/independentstudy.html](http://www.du.edu/registrar/regbill/independentstudy.html). The GSPP independent research registration is used solely for doctoral paper work. While independent studies must be graded at the end of the quarter undertaken, no grade will be assigned for independent research until the paper is completed. Until then an IP (in progress) grade will appear on grade reports for independent research registration. Credit for such work will be added to total hours completed before graduation. GSPP faculty will not sponsor Independent Study for any courses offered in the regular GSPP curriculum.

**SPECIAL GSPP POLICY FOR INDEPENDENT RESEARCH**

Under special circumstances, students may elect to take up to 12 credits of Independent Research credit for work on doctoral paper. Typically, these credits are only granted once the 135 credits have been earned. The student must receive permission of the advisor to take Independent Research Credit. The rule went into effect fall 2006.
**Professional Seminar:** Several yearlong (4 quarter) seminars titled “Professional Seminar: Varied Topics” are offered each year. Seminar topics are selected according to student and faculty interest, though the focus is typically on clinical applications, theoretical orientations and psychotherapy techniques. Because one professional seminar lasts four consecutive quarters, it offers students the opportunity for in-depth clinical study from a specific perspective. While the format varies widely from one seminar to another, seminars usually involve students’ audio/video case presentations of clients seen in the PPC.

- **Students are required to take three years of seminar.**
- Students must enroll for an entire year of seminar at a time, fall through summer, even if it is during a 4th optional year.
- Seminar will be graded traditionally.
- If a student takes a leave of absence during any quarter of the seminar course, the entire year of seminar must be repeated.
- A student may NOT take an additional year of seminar with a continuing education discount.
- If a student leaves seminar early for internship, s/he must enroll for summer quarter and create a plan with the leader to complete all of the requirements. **If there may be a chance you will leave before summer quarter ends during your third year, you must petition the faculty for approval—preferably in February, before the Association of Psychology Postdoctoral and Internship Center (APPIC) “student prioritizing” process.**
- All students must enroll in a seminar their first year in the program. Incoming students will be assigned to a beginning seminar.
- **Seminars are not necessarily offered every year.**
- Students are expected to follow all ethical guidelines when working with clients. See PPC Guidelines and APA Ethical Guidelines.
- Seminar leaders may fail a student for unprofessional and/or unethical conduct in seminar. Failing (C- or F) a seminar will lead to automatic and immediate probation and the faculty reserve the right to terminate a student from the program. Also, if a student continues in the program a failing grade would require the year of seminar to be repeated.
- Most advanced seminar groups have prerequisites. Students are expected to follow the lockstep program. If students are on the part-time plan, they need to consult with seminar leaders to make sure all prerequisites are met.

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<thead>
<tr>
<th>Seminar</th>
<th>Prerequisites and/or Concurrent Enrollment Expectations</th>
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<tbody>
<tr>
<td>Beginning Seminars</td>
<td>None</td>
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<tr>
<td>ACT</td>
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<tr>
<td>COGNITIVE THERAPY</td>
<td>Cognitive Models</td>
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<tr>
<td>BEHAVIOR THERAPY</td>
<td>Year-long Behavioral Analysis sequence</td>
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<tr>
<td>INTEGRATIVE PSYCHOTHERAPY</td>
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<td>FAMILY THERAPY</td>
<td>Couples Therapy, Family Therapy</td>
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<td>PERSONALITY ASSESSMENT</td>
<td>Rorschach may be taken concurrently.</td>
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FORENSIC | Speak with Lavita Nadkarni if Rorschach will be taken concurrently.
---|---
CHILD DEV/ PSYCHOTHERAPY | Prior or concurrent enrollment in Life Cycle Infancy to Mid-Childhood, Diag. & Treatment of Children, and Diag & Treatment of Adolescent
ADVANCED RELATIONAL PSYCHOTHERAPY | Psychoanalytic Models
PSYCHODYNAMIC PSYCHOTHERAPY | 
ADVANCED PSYCHOTHERAPY | Advanced psychopathology sequence prior or concurrent to enrollment
HEALTH PSYCHOLOGY | 

**SPECIALTY FOCUS TOOL**

As part of our program requirements, each GSPP student must select a specialty focus tool (2nd tool). For all students, the first tool is the Research Issues sequence of the core curriculum. It has become clear that having an identifiable focus in the field is an advantage to the new graduate, even though postgraduate work is necessary to truly specialize in most areas.

Students will be responsible for proposing a specialty focus tool by the end of the spring quarter of their first year of work at the GSPP. The student’s advisor works with the student to determine whether or not the proposal is appropriate. Once the proposed Specialty Focus Tool form is approved, the form should be submitted to gspp.forms@du.edu.

Some specialty focus tools are listed below as examples. Students should feel free to design their own specialty tools as long as they are in accordance with the guidelines below. Students may also develop more than one specialty focus tool or blend portions of the tools outlined below to meet individual interests and needs. Moreover, students should be aware that elective courses vary from year to year based on student/faculty interests. These samples include past electives offered in the GSPP as well as other related departments. Students should check current university wide bulletins when planning their Specialty Focus Tool to make sure that the relevant courses are still being offered.
GUIDELINES FOR A SPECIALTY FOCUS AREA

1. The student must select and enroll in a minimum of 15 credit hours of elective course work in their specialty area, including courses taken at the GSPP or other DU department/schools (classes taken at the College of Law, Iliff School of Theology and University College do not count towards the 135 credits). Written approval from your advisor must be attained for appropriate coursework transferred from other academic departments and placed in the student’s file. Discuss classes taken in other departments with your advisor prior to taking the class, and have your advisor write a memo of approval for your file. Make sure the class is at the graduate level.

2. The 15 credit hours cannot include required/core courses but should include (a maximum of 8 credits of) professional seminar registration appropriate to the specialty area.

3. Independent study, which is relevant, may be included.

4. Complementary clinical work, including a year of field placement in an appropriate setting, is recommended.

5. It is also recommended that the student undertake a doctoral paper that will serve as a scholarly contribution to the area of specialization.

6. Students must take a seminar in their specialized area, if one is given. If a seminar is not offered in the specialized field, they will need to coordinate with their advisor to take a field placement to cover the clinical experience.

7. When checking out for internship, student should double check that courses were indeed completed. Student may need to update specialty focus tool form for their file.

EXAMPLE SPECIALTY FOCUS TOOLS

I. Acceptance and Commitment Therapy

<table>
<thead>
<tr>
<th>Department</th>
<th>Course #</th>
<th>Course Title</th>
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<tbody>
<tr>
<td>GSPP</td>
<td>CPSY 5108</td>
<td>Introduction to ACT</td>
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<tr>
<td></td>
<td>CPSY 5420</td>
<td>Behavior-Analytic Principles I</td>
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<td></td>
<td>CPSY 5421</td>
<td>Behavior-Analytic Principles Lab</td>
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<td>CPSY 5422</td>
<td>Behavior-Analytic Principles II</td>
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<td>CPSY 5423</td>
<td>Behavior-Analytic Assessment/Case Formulation</td>
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<td>CPSY 5424</td>
<td>Behavior-Analytic Interventions</td>
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<td>CPSY</td>
<td>Professional Seminars: ACT</td>
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<td>Behavior Therapy</td>
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II. Behavior Therapy

The goal of this specialization is to provide the student a basis for understanding human behavior in terms of empirically-established behavior principles and to prepare the student to apply these principles in the assessment and treatment of psychological problems.

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</table>
CPSY  Professional Seminar: Behavior Therapy
Psychology
PSYC 4041  Approaches to Clinical Psychology I
PSYC 4610  Marital and Family Interaction and Therapy
Education
EDUC 3331  Management of the Special Student in the Regular Classroom
EDUC 4325  Applied Behavior Analysis

Examples of Relevant Clinical Practica
Nicoletti-Flater Associates, Spalding Rehabilitation Hospital

III. Child Assessment and Therapy
Students with this specialty will have a concentration of courses and experiences leading to special competence in the understanding and treatment of problems of children and child rearing.

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<tr>
<td>GSPP</td>
<td>CPSY 5500</td>
<td>Diagnosis and Treatment of Children</td>
</tr>
<tr>
<td></td>
<td>CPSY 5505</td>
<td>Diagnosis and Treatment of Adolescents</td>
</tr>
<tr>
<td></td>
<td>CPSY</td>
<td>Professional Seminar: Child Therapy</td>
</tr>
<tr>
<td>Psychology</td>
<td>PSYC 3090</td>
<td>Infancy and Early Childhood Development</td>
</tr>
<tr>
<td></td>
<td>PSYC 3520</td>
<td>Child Psychopathology</td>
</tr>
<tr>
<td></td>
<td>PSYC 4411</td>
<td>Specialized Assessment Methods with Children I</td>
</tr>
<tr>
<td></td>
<td>PSYC 4412</td>
<td>Specialized Assessment Methods with Children II</td>
</tr>
<tr>
<td>Children II</td>
<td>PSYC 4413</td>
<td>Specialized Assessment Methods with Children III</td>
</tr>
<tr>
<td></td>
<td>PSYC 4068</td>
<td>Seminar in Developmental Psych.: Motivation and Emotion in childhood</td>
</tr>
<tr>
<td></td>
<td>PSYC 4090</td>
<td>Infancy</td>
</tr>
<tr>
<td></td>
<td>PSYC 4511</td>
<td>Seminar in Child Psychopathology</td>
</tr>
<tr>
<td></td>
<td>PSYC 4540</td>
<td>Cognitive Development</td>
</tr>
<tr>
<td>Social Work</td>
<td>SOWK 4612</td>
<td>Law of the Family and Child</td>
</tr>
<tr>
<td></td>
<td>SOWK 4736</td>
<td>Assessment and Interventions with Children</td>
</tr>
<tr>
<td></td>
<td>SOWK 4737</td>
<td>Assessment and Interventions with Adolescents</td>
</tr>
<tr>
<td>Education</td>
<td>EDUC 4300</td>
<td>Assessment of Infants &amp; Preschoolers</td>
</tr>
<tr>
<td></td>
<td>EDUC 4304</td>
<td>Psychological Assessment I</td>
</tr>
<tr>
<td></td>
<td>EDUC 4307</td>
<td>Assessment of Preschoolers</td>
</tr>
<tr>
<td></td>
<td>EDUC 4311</td>
<td>Introduction to Play Therapy</td>
</tr>
<tr>
<td></td>
<td>EDUC 4330</td>
<td>Developmental Psychopathology</td>
</tr>
<tr>
<td></td>
<td>EDUC 4373</td>
<td>Psycho-Social Aspects of Exceptional Children</td>
</tr>
<tr>
<td></td>
<td>EDUC 4408</td>
<td>The Nature &amp; Needs of Gifted Learners</td>
</tr>
<tr>
<td></td>
<td>EDUC 4641</td>
<td>Adolescent Development</td>
</tr>
<tr>
<td></td>
<td>EDUC 4777</td>
<td>Counseling Children</td>
</tr>
</tbody>
</table>

Examples of Relevant Clinical Practica
School districts, Colorado Christian Home, Denver Juvenile Court, Denver Children’s Home, Head Start
IV. **Family Therapy**

Students with the family specialty will have a concentration of courses and experiences leading to special competence in the understanding and treatment of family problems.

<table>
<thead>
<tr>
<th>Department</th>
<th>Course #</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSPP</td>
<td>CPSY 5550</td>
<td>Couples Therapy: Theory and Techniques</td>
</tr>
<tr>
<td></td>
<td>CPSY 5560</td>
<td>Family Therapy: Theory and Techniques</td>
</tr>
<tr>
<td></td>
<td>CPSY</td>
<td>Professional Seminar: Family and Couples Therapy</td>
</tr>
<tr>
<td>Social Work</td>
<td>SOWK 4800</td>
<td>Theoretical Foundations of Family Therapy</td>
</tr>
<tr>
<td></td>
<td>SOWK 4331</td>
<td>Structural Techniques of Family Therapy</td>
</tr>
<tr>
<td></td>
<td>SOWK 4332</td>
<td>Comparative Theories of Family Therapy</td>
</tr>
<tr>
<td></td>
<td>SOWK 4330</td>
<td>Social Work Treatment with Families</td>
</tr>
<tr>
<td></td>
<td>SOWK 4363</td>
<td>Social Work Practice with Multiple Problem</td>
</tr>
<tr>
<td>Families</td>
<td>SOWK 4612</td>
<td>Law of the Family and Child</td>
</tr>
<tr>
<td>Education</td>
<td>EDUC 4776</td>
<td>Family Counseling</td>
</tr>
<tr>
<td></td>
<td>EDUC 4777</td>
<td>Counseling Children</td>
</tr>
<tr>
<td>History</td>
<td>HIST 3681</td>
<td>History of the Family in America</td>
</tr>
<tr>
<td></td>
<td>&amp; 3682</td>
<td>and Laboratory</td>
</tr>
<tr>
<td>Philosophy</td>
<td>PHIL 4135</td>
<td>Philosophies of Human Sexuality</td>
</tr>
<tr>
<td>Psychology</td>
<td>PSYC 4610</td>
<td>Marital and Family Interaction and Therapy</td>
</tr>
<tr>
<td></td>
<td>PSYC 4125</td>
<td>Parenting</td>
</tr>
<tr>
<td></td>
<td>PSYC 3930</td>
<td>Family Violence</td>
</tr>
<tr>
<td>Sociology</td>
<td>SOCI 4170</td>
<td>Family Law</td>
</tr>
<tr>
<td></td>
<td>SOCI 3790</td>
<td>Sociology of Gender Roles</td>
</tr>
<tr>
<td>Speech Communication</td>
<td>SPCO 3280</td>
<td>Family Communication</td>
</tr>
</tbody>
</table>

**Examples of Relevant Clinical Practica**
- Community mental health centers, Denver
- Children’s Home, Colorado Christian Home, Metro
- Children’s Center, Servicios de la Raza

VI. **Gender Issues**

This specialty area focuses on the psychological development of women and/or men, the impact of sex roles, the relationship of gender and psychopathology, and methods of intervention for special problems related to gender such as rape, incest, eating disorders, sexuality.

<table>
<thead>
<tr>
<th>Department</th>
<th>Course #</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSPP</td>
<td>CPSY 5550</td>
<td>Couples Therapy</td>
</tr>
<tr>
<td></td>
<td>CPSY 5991</td>
<td>Independent Study</td>
</tr>
<tr>
<td></td>
<td>(Varies by student interest)</td>
<td>Feminist Psychotherapy, Eating Disorders, Treatment of Sexual Dysfunction, Gender and Psychopathology</td>
</tr>
<tr>
<td>Social Work</td>
<td>SOWK 4370</td>
<td>Social Work Practice with Women</td>
</tr>
</tbody>
</table>
Examples of Relevant Clinical Practica
EVE, AMEND, Denver Women’s Center, Rape Assistance and Awareness Program (RAAP), Gateway Battered Women’s Shelter, Denver SafeHouse, Metropolitan State Counseling Center

V. Neuropsychology ***
The goal of this specialty tool is to provide a foundation of clinical and theoretical information regarding brain/behavior relationships, and to develop an awareness and appreciation of the ways in which neuropsychological knowledge can be applied to clinical practice.

*** (This specialty focus tool plan was created by a student. It is provided as an example of how in-depth students can be with their plans. Students are encouraged to discuss details with their advisor.)

<table>
<thead>
<tr>
<th>Department</th>
<th>Course #</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psy.D Program Electives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Course</td>
<td>Title</td>
<td>Credits</td>
</tr>
<tr>
<td>CPSY 5685</td>
<td>Intro to Pediatric Neuropsyc</td>
<td>2</td>
</tr>
<tr>
<td>CPSY 5849</td>
<td>Psychopharmacology</td>
<td>2</td>
</tr>
<tr>
<td>CPSY 5388</td>
<td>Assessment Seminar</td>
<td></td>
</tr>
<tr>
<td>CPSY 5390</td>
<td>Forensic Assessment Seminar</td>
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</tr>
<tr>
<td>Other Department Courses b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Course</td>
<td>Title</td>
<td>Credits</td>
</tr>
<tr>
<td>PSYC 3035</td>
<td>Seminar: Cognitive Neuroscience</td>
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</tr>
<tr>
<td>PSYC 4254</td>
<td>Intro to Neural Network Models</td>
<td>5</td>
</tr>
<tr>
<td>PSYC 4257</td>
<td>Psychophysio &amp; Neuroscience Lab</td>
<td>5</td>
</tr>
<tr>
<td>PSYC 4525</td>
<td>Prosem in Develop Neuropsych</td>
<td>5</td>
</tr>
<tr>
<td>BIOL 3640</td>
<td>Intro to Neurobiology</td>
<td>4</td>
</tr>
<tr>
<td>BIOL 3641</td>
<td>Systems Neuroscience</td>
<td>4</td>
</tr>
<tr>
<td>BIOL 3642</td>
<td>Neuropharmacology</td>
<td>4</td>
</tr>
<tr>
<td>BIOL 3643</td>
<td>Developmental Neurobiology</td>
<td>4</td>
</tr>
<tr>
<td>BIOL 3646</td>
<td>Seminar: Cognitive Neuroscience</td>
<td>2</td>
</tr>
</tbody>
</table>

a = Some courses in the psychology PhD program are offered on an every-other-year basis; contact faculty to determine time course is offered. Last year the course was offered is listed in parentheses.

b = Courses in other departments usually require faculty permission to enroll in the class.
C = The quarter that a course is offered is variable; contact the department or processor to determine time of year course will be offered

Examples of Relevant Clinical Practica
Colorado Center for Neurological Rehab., Spalding Rehabilitation Hospital, University of Colorado Health Sciences Center Department of Rehab. Medicine, Veterans Administration Medical Center - Clinical Neuropsychology

Field Placements and Clinical Opportunities
DU Developmental Neuropsychology Clinic
National Jewish Health
Fort Logan
VA’s
MHCD
Spalding Rehab Hospital
Denver Health
DU Professional Psychology Center, Neuropsychological Assessment Battery (NAB) screens

Neuropsychology Organizations
Brain Injury Association of Colorado
Colorado Assessment Society
Colorado Neurological Institute
Colorado Neuropsychological Society
American Board of Clinical Neuropsychology
American Psychological Association, Division 40 – Clinical Neuropsychology
National Academy of Neuropsychology
International Neuropsychological Society

Internship and Post Doctorate Links
Following the completion of coursework, a one-year APA accredited internship with a neuropsychology focus (minimum ½ time devoted to neuropsychology training) and a formal 2-year neuropsychology fellowship (e.g., preferably at an academic medical center) is required to determine specialization as a clinical neuropsychologist, as indicated by the American Board of Clinical Neuropsychology (www.theabcn.org). For more detailed information on required training as a clinical neuropsychologist, refer to the Houston Conference Guidelines on Specialty Education and Training in Clinical Neuropsychology.

Association for Internship Training in Clinical neuropsychology
http://www.utmem.edu/AITCN

Association of Psychology Postdoctoral and Internship Centers
http://appic.org/

Association of Postdoctoral Programs in Clinical Neuropsychology
Students have also completed Specialty Tools in the following areas. Please see the faculty member listed below, and/or your advisor, to plan a specialty in one of these areas.

Forensic Issues (meeting with Lavita Nadkarni required)
Ethnic Minority Issues (see Fernand Lubuguin)
Geropsychology
Health Psychology (see Kim Gorgens or Nicole Taylor)
International Disaster Psychology (see Judy Fox)
Organizational Psychology
Psychological Assessment (see Hale Martin)
Sport and Performance Psychology (see Mark Aoyagi)
Substance Abuse Treatment

Reminder: For PsyD students to register for MA classes, they need to get an eligibility form from Judy Farmer (jfamer@du.edu) or from the GSPP forms page, complete it, and return it. Students will be notified whether they are approved to take MA courses. Students may register for MA level courses only AFTER they have received permission.

Revised 8/10
Grading

Grading Standards
(A compilation of DU and GSPP policies adopted from 9/77 through 6/91, revised by GSPP in 10/01)

The University of Denver requires the assignment of grades for all work for which a student is registered for graduate credit. The Graduate School of Professional Psychology (GSPP) has adopted the following grading standards and policies.

GSPP course grades will be A, A-, B+, B, B-, C+, C, C- and F. A standard, acceptable, competent performance will merit a B. An outstandingly good performance rates an A. C will be used to indicate a poorer than expected performance, but one which is still passing. A grade of C- or below renders the credit unacceptable for meeting degree requirements, and the student will be expected to register again for required courses. Students are expected to maintain a B average at all times. It is highly recommended to maintain a higher GPA than a 3.0.

The above descriptions are to anchor the meaning of a grade and they do not imply a quota system. The GSPP has a highly select graduate student body. No one need expect to earn less than adequate grades as a statistical artifact. The system is intended to clarify communication rather than to stimulate competition. The faculty subscribes to the principle that students should be given the fullest possible feedback on their progress, with grades being only one means for feedback.

Plus/Minus Grading

<table>
<thead>
<tr>
<th>Grade</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
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</tr>
<tr>
<td>A-</td>
<td>3.7</td>
</tr>
<tr>
<td>B+</td>
<td>3.3</td>
</tr>
<tr>
<td>B</td>
<td>3.0</td>
</tr>
<tr>
<td>B-</td>
<td>2.7</td>
</tr>
<tr>
<td>C+</td>
<td>2.3</td>
</tr>
<tr>
<td>C</td>
<td>2.0</td>
</tr>
<tr>
<td>C-</td>
<td>1.7</td>
</tr>
<tr>
<td>F</td>
<td>0.0</td>
</tr>
</tbody>
</table>

Graduate transfer students, at the discretion of the appropriate University of Denver academic unit, may bring in courses with a B- grade providing the average of all their graduate transfer course work is a B or better. GSPP will not accept a B- grade.

Please see the Graduate Studies Policy manual regarding the Procedure for Grade Appeals.

Incomplete (The GSPP Policy): An “I” grade is given in academic classes when a student cannot be rated as passing or failing because of a quantitative deficiency caused by circumstances beyond the student’s control (not to permit students additional time to improve the quality of work already submitted). The GSPP requires students to complete work for courses in which an “I” is awarded by the end of the next quarter. If the work is not finished by then, the GSPP will notify the registrar’s office to convert the “I” to an “F.” A student may, with good cause, petition the faculty for a one-quarter time extension for making up the incomplete. While
repeat extensions can be considered, the faculty must be convinced of the legitimacy of each request for postponement each time one is presented. ****GSPP POLICY TAKES PRECEDENCE OVER DU’S INCOMPLETE POLICY. To request an I from their instructor, students must obtain a form from http://www.du.edu/registrar/records/incompletepolicy.html.

There are several points at which incompletes are totally unacceptable. No one will be considered for advancement to preliminary doctoral candidacy with an incomplete outstanding; no one will be approved for internship reference letters with an incomplete outstanding; and no one will be advanced to final doctoral candidacy with an incomplete on his/her record.

If the student has a medical condition which causes the incomplete, the instructor has the right to ask for a doctor’s verification of the condition. Please be prepared to provide support for your medical condition.

In the event that a student petitions the faculty to retake a class in which an I grade was awarded, they need to inform themselves of the necessary GSPP and DU policies and procedures.

Please see the Graduate Policies and Procedures located at http://www.du.edu/learn/graduates/studentresources.html for the University policy.

SUBSTANDARD GRADES/ACADEMIC WARNING: If a student receives a B- or below, the student needs to arrange a meeting with his/her advisor within the next quarter. GSPP and the University of Denver consider that grades of “C-” and below do not meet requirements for either the MA or PsyD degrees, and they will not count towards the 135 credits to graduate. If a grade of C- or below is earned, the student must re-enroll in the class to receive credit for the class. A grade of C- or F may, should the faculty so decide based on a review of the student’s entire record, result in termination from the program. Advanced degrees are not awarded automatically on completion of any required number of courses or hours of credit. The candidate’s status is subject to review at any time. If a student receives 3 grades in any combination from B- to C and I, s/he will automatically be placed on academic warning, and if the student receives one grade of either a C- or F, s/he will immediately be placed on academic warning. The faculty will discuss the student and then the faculty advisor will inform the student in writing of the terms of warning. Continued substandard academic performance may result in probation or dismissal from the program.

If any part or quarter of seminar is failed (C- or F), the entire yearlong sequence must be re-taken.

GRADING ERRORS: In the event of an error in grading, the instructor should be asked to complete a Correction of Error in Grading request no later than the quarter following the one in which the grade was given. Instructors will find the request in Webcentral on the Faculty link.

COURSE ATTENDANCE REQUIREMENTS: The GSPP expects that students attend all classes in which they are enrolled. It is courteous to notify faculty in advance of anticipated absences. Satisfactory attendance is a precondition for successful completion of all courses and faculty may adjust grades where, in their judgment, attendance has been unsatisfactory.
APPENDIX D
ETHICAL PRINCIPLES AND ISSUES

**JOB APPROVAL:** Outside employment in the human services area, other than a job approved as a Field Placement, must be approved by your advisor and the GSPP Dean. Use the Record of Outside Employment form.

**STUDENT TITLES:** It is unethical for students to attach to their names a degree they have not yet earned or phrases or letters that could be confused with such a degree. This includes the use of titles such as “Psy.D. (Cand.),” “Psy.D. Candidate,” “M.A. (expected),” and “A.B.D.” in any form of communication, including applications, reports, letters, resumes, and emails.

GSPP students may use the following titles (and only these titles) as approved by the faculty:

- **Master’s Student** – a generic title used by students in a Master’s level program who have not yet completed the degree.

- **Doctoral Student** – a generic title used by students in a doctoral level program who have not yet completed the degree.

- **Student Therapist** – the title used by doctoral students in PPC related practice.

- **Trainee** – the title used by students (either Master’s or doctoral level) in field placement sites.

- **Doctoral Intern** – the title used by doctoral students during the internship year. Some sites prefer other titles.

- **M.A.** – the title used upon completion of the Master’s degree.

- **Psy.D.** – the title used upon completion of the doctoral degree.

Please note that the use of both titles, “Dr.” and “Psy.D.” is redundant, as is “Ms.” and “M.A.” It is correct to use either “Jane Smith, Psy.D.” or “Dr. Jane Smith,” but not “Dr. Jane Smith, Psy.D.” and not “Ms. Jane Smith, M.A.”

Generally, when you sign your name in a professional context, you include your degree unless your name and degree are printed under your signature. If your degree is printed under your signature, you sign your name and not your degree.
The following documents are GSPP and APA ethical guidelines. Please sign a copy and submit to Samara.

Guidelines for Ethical Behavior in the University of Denver Graduate School of Professional Psychology and the Professional Psychology Clinic

Ethical behavior is the cornerstone of the profession of Psychology. Thus, it is vital that the University of Denver Graduate School of Professional Psychology (GSPP) and its Professional Psychology Center (PPC) aspire to high ethical standards. These guidelines are an attempt to relate ethical obligations to the department and clinic training objectives.

The Professional Psychology Center is a training facility that also provides needed services to the community. This puts the clinic in the delicate position of protecting a client's confidentiality, as is the ethical responsibility, while at the same time providing a training environment. It is important to have discussions about these two roles, which at times are conflicting, so that the clinic can accomplish both tasks as sensitively as possible. It speaks to the heart of the profession of clinical psychology to handle confidential information appropriately and to respect the rights, dignity, and worth of all people. The clinic's efforts to protect client information are underscored by the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) requirements.

One of the requirements for clients at the PPC is their written agreement that the confidential information they disclose during the course of therapy be available for training purposes. This is an effort to obtain informed consent to the ways in which information may be revealed within the clinic. Informed consent means that the client has a clear idea of what information will be disclosed to whom for what reason. A consent form could not cover all the specific situations that may arise and thus is written in broad language. However, this does not release student therapists/assessors and their supervisors from scrutiny of their actions. It is reasonable for a client to expect that their therapist/assessor and those associated with their case will be discreet in handling their information. Thus, it is essential for student therapists/assessors and their supervisors to think through their actions and act in accordance with their ethical obligations. The following guidelines are intended to facilitate that effort:

1. Student therapists/assessors get additional releases signed before sharing information with anyone other than their supervisor, professional seminar, supervision group, or GSPP faculty. Discussions of clients within the clinic and reading client's files are not indiscriminate. For example, if a student is assessing a client who is currently in therapy with another student, the assessor gets a release of information signed by the client before discussing that client with the therapist or reviewing the client's file. Furthermore, students/assessors protect the confidentiality of their clients as they prepare and present information in their Comprehensive Exams. If they use confidential information in research, they meet all IRB requirements, which may include getting additional releases or ensuring the anonymity of the client. It is the student's responsibility to get all necessary releases signed by the clients.

2. Students only access treatment or assessment files for their own clients, unless there is appropriate authorization for them to review other files. Appropriate authorization includes administrative duties in the clinic, but this authorization includes only such material that is necessary for the administrative purpose.
3. Students respect the privacy of their classmates and their classmate’s clients in the work they do in the clinic. Students do not seek information about their classmate's work unless there is clear agreement with the classmate, their supervisor, and the client that information may be shared. Accordingly, students do not watch their classmate's sessions with clients without authorization from the classmate and the case supervisor.

4. If a student has outside knowledge of a client (e.g., as a friend, acquaintance, friend of a friend, family member of a client, friend of a client), that student should recuse himself or herself from receiving any information about this client. This prevents any dual relationship issues that may arise and is respectful of the client's privacy. Students attempt to anticipate changing situations and act to avoid any potential dual relationship.

5. Students limit their conversations about clients to supervision or similarly appropriate private venues, such as seminar and supervision rooms. This means not discussing any cases in the lobby or workrooms. Even if students are not discussing the particular client that walks by, it gives concern to that client that they could just as easily be talking about them.

6. Students recognize that consultation with peers is an important part of professional practice. However, they consult with colleagues only in private, do not disclose information that would identify the client, and disclose information only to the extent necessary to achieve the purposes of the consultation.

7. Confidentiality of client information is to be maintained at all times, especially outside the clinic, whether sitting in a restaurant or discussing our day with our spouse/partner/friend. As tempting as it is to talk about the fascinating and challenging work a student in clinical psychology does, it is unethical and unprofessional to do so.

8. Students make every effort to protect files, reports, videotapes, audiotapes, testing results, and all other written material. When these materials are taken out of (or created outside) the PPC, students make sure that no one else has access to them. This includes spouses, friends, etc.

9. Students exercise caution when using unsecured phone lines. When calling from or to a cell phone, it is good practice not to fully identify the client being discussed. Phone calls made from the clinic should be placed in a private environment, not on a phone in a common area (e.g., in the copy room). Phones have been made available to allow for confidential client-related calls. Furthermore, students understand that email is not a confidential mode of communication and accordingly refrain from relaying confidential information through email.

10. Students make every effort to protect confidential information that is on their computer or school computers, insuring that others do not have access to it. Do not leave confidential printouts where others could have access to them. A shredder is available in the copy room.

11. Faxes that contain confidential information are sent from the clinic with an appropriate cover sheet and received at the clinic in a protected environment to insure confidentiality of the information transmitted. Students do not read faxes that are not directed to them.

12. Students do not take or read any information from the department mailboxes other than information in their box that is clearly intended for them.
Furthermore, it is important to be ethical and professional in other aspects of our training as well. Students are required to take the ethics course during their first year in the GSPP program. This course will provide a good foundation in an area that is vital to functioning as a psychologist. However, regardless when students take this class, they are expected to adhere to high ethical standards from their first day in the program forward, including:

13. Students treat classmates, faculty, staff, and clients with respect, act with integrity in every aspect of their training, and work to create a friendly learning environment for all. They refrain from gossiping in a malicious manner and defaming the character of their peers, staff, faculty and clients.

14. Students follow the clinic guidelines provided for keeping clinic charts complete, up to date, and ethical. They stay informed of these expectations.

15. Students protect testing material in all venues of work (PPC, home, field placements, etc.). They keep testing material locked in the appropriate file cabinets. If a student sees a cabinet of testing materials or other confidential materials inappropriately unlocked, they lock it. They do not leave testing materials laying around the clinic, home, or field placement. They do not allow clients to take psychological tests (e.g., MMPI) home with them, even though it might seem convenient.

16. Students treat others fairly and do not discriminate against others on the basis of race, ethnicity, age, gender, sexual orientation, or religion. Students do not engage in any conversation or action that is demeaning or sexually offensive or harassing. This applies to clients, fellow students, faculty, staff, and other people in their professional lives.

17. Students attempt as much as possible to present an air of professionalism. For example, students keep the noise and behaviors in the clinic to appropriate professional levels.

18. Students dress professionally in the clinic.

19. Students are aware that relationships between students and faculty members necessarily are hierarchical. While the faculty desires to promote a collegial atmosphere with students, there is a power differential that requires attention to dual relationship issues. Students and faculty members work diligently to create an environment that facilitates communication. If an issue arises, a student first attempts to address the concern with the person with whom they have the difficulty. If this fails, the student talks to her/his advisor and uses the faculty as a resource in handling the matter. There is additional information about the formal grievance procedure on page 86.

20. In class work, students act with integrity. They do not plagiarize the work of others. They do not cheat, fabricate, or aid others in academic dishonesty. In the department, students do not use tests from previous classes to prepare for class tests, unless given explicit permission to do so by the professor for that specific class. Students do not collaborate on take home assignments when they are expected to do their own work and to not discuss the assignment with others.
21. Students are aware that their actions outside the GSPP reflect on the profession of psychology, and take responsibility when in public to act legally and with integrity in an effort to maintain and enhance important community trust, respect, and esteem for clinical psychology.

22. Students are aware of their obligations that arise from the University of Denver Honor Code (http://www.du.edu/ccs/honorcode.html), which fosters the pursuit of academic honesty and integrity. The honor code strongly encourages every member of the University academic community to report apparent violations of the Honor Code that they encounter. If a student is involved in or knowledgeable of an unethical situation, they take appropriate steps to address the ethical issues. These may include discussing the issue with the person involved, with the supervisor, with faculty members, or with the Dean for further action if the concerns are corroborated and persist.

23. Students are aware of and adhere to the "Ethical Principles of Psychologists and Code of Conduct 2002" published by the American Psychological Association and incorporated into Colorado state statutes, a copy of which is attached to this document.

**I hereby acknowledge and affirm** that I have read and understood these ethical guidelines. I have also read the "Ethical Principles of Psychologists and Code of Conduct 2002."
Furthermore, my signature below signifies that I agree to abide by these provisions, to work to promote a friendly learning environment for all, and to uphold the standards of my profession.

________________________________________________________________________  __________
Student                      Signature                        Date
________________________________________________________________________

Student Print Name
HIPAA (The health Insurance Portability and Accountability Act of 1996)

http://www.hhs.gov/ocr/privacy/index.html

This site leads you to a link to learn more about the rules of HIPAA.

Also explore the link to the HITECH Enforcement Interim Final Rule.

You will never be asked to bring back protected health information from your field placements to discuss at GSPP.

Students are required to have HIPAA training.

Any employees/students with access to protected health information (PHI) within these departments must also undergo HIPAA training before being given access to PHI.

Please go to the following website for HIPAA training prior to seeing a client: https://www.citiprogram.org/default.asp?language=english

1. Register as a new user. Select “U. of Denver” from the drop-down menu and fill out the other sections as appropriate.

2. In the “Select Curriculum” section, check the following boxes:
   - HIPAA Group: Health and Counseling Center
   - CITI Health Information Privacy and Security (HIPS) for Clinicians

3. You should then be signed up for 2 modules:
   - CITI Health Information Privacy and Security (HIPS) for Clinicians, Basic Course
   - HIPAA Group, Basic Course

4. Complete each module. There are two sections to HIPAA Group, Basic Course; one required section and one section of electives, from which you must pick three. I would suggest that you do the following three electives: (1) Clinicians, (2) Picking and Protecting Passwords, and (3) Protecting Your Identity.

5. After you complete the courses and pass the test, print your completion certificate and give it to your supervisor, or email it. Don’t worry about doing these all in one sitting. The program will save your work, so you can do it over several sittings if you want.

Email completion PDF to tkruse@du.edu.
APA ETHICAL GUIDELINES:
In 2010 the APA developed amendments to the 2002 Code, which are available through the link below.


The 2002 Code continues to be in effect, and is provided in the following pages.

Students are required to understand the APA Ethics code and amendments.

Ethical Principles of Psychologists and Code Of Conduct
2002

History and Effective Date Footnote

CONTENTS

INTRODUCTION AND APPLICABILITY

PREAMBLE

GENERAL PRINCIPLES

Principle A: Beneficence and Nonmaleficence
Principle B: Fidelity and Responsibility
Principle C: Integrity
Principle D: Justice
Principle E: Respect for People's Rights and Dignity

ETHICAL STANDARDS

1. Resolving Ethical Issues
   1.01 Misuse of Psychologists’ Work
   1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority
   1.03 Conflicts Between Ethics and Organizational Demands
   1.04 Informal Resolution of Ethical Violations
   1.05 Reporting Ethical Violations
   1.06 Cooperating With Ethics Committees
   1.07 Improper Complaints
   1.08 Unfair Discrimination Against Complainants and Respondents

2. Competence
   2.01 Boundaries of Competence
   2.02 Providing Services in Emergencies

2.03 Maintaining Competence
2.04 Bases for Scientific and Professional Judgments
2.05 Delegation of Work to Others
2.06 Personal Problems and Conflicts

3. Human Relations
   3.01 Unfair Discrimination
   3.02 Sexual Harassment
   3.03 Other Harassment
   3.04 Avoiding Harm
   3.05 Multiple Relationships
   3.06 Conflict of Interest
   3.07 Third-Party Requests for Services
   3.08 Exploitative Relationships
   3.09 Cooperation With Other Professionals
   3.10 Informed Consent
   3.11 Psychological Services Delivered To or Through Organizations
   3.12 Interruption of Psychological Services

4. Privacy And Confidentiality
   4.01 Maintaining Confidentiality
   4.02 Discussing the Limits of Confidentiality
   4.03 Recording
   4.04 Minimizing Intrusions on Privacy
   4.05 Disclosures
   4.06 Consultations
   4.07 Use of Confidential Information for Didactic or Other Purposes

5. Advertising and Other Public Statements
   5.01 Avoidance of False or Deceptive Statements
   5.02 Statements by Others
   5.03 Descriptions of Workshops and Non-Degree-Granting Educational Programs
   5.04 Media Presentations
   5.05 Testimonials
   5.06 In-Person Solicitation

6. Record Keeping and Fees
   6.01 Documentation of Professional and Scientific Work and Maintenance of Records
   6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work
   6.03 Withholding Records for Nonpayment
   6.04 Fees and Financial Arrangements
   6.05 Barter With Clients/Patients
   6.06 Accuracy in Reports to Payors and Funding Sources
   6.07 Referrals and Fees

7. Education and Training
   7.01 Design of Education and Training Programs
   7.02 Descriptions of Education and Training Programs
   7.03 Accuracy in Teaching
   7.04 Student Disclosure of Personal Information
   7.05 Mandatory Individual or Group Therapy
   7.06 Assessing Student and Supervisee Performance
7.07 Sexual Relationships With Students and Supervisees

8. Research and Publication
8.01 Institutional Approval
8.02 Informed Consent to Research
8.03 Informed Consent for Recording Voices and Images in Research
8.04 Client/Patient, Student, and Subordinate Research Participants
8.05 Dispensing With Informed Consent for Research
8.06 Offering Inducements for Research Participation
8.07 Deception in Research
8.08 Debriefing
8.09 Humane Care and Use of Animals in Research
8.10 Reporting Research Results
8.11 Plagiarism
8.12 Publication Credit
8.13 Duplicate Publication of Data
8.14 Sharing Research Data for Verification
8.15 Reviewers

9. Assessment
9.01 Bases for Assessments
9.02 Use of Assessments
9.03 Informed Consent in Assessments
9.04 Release of Test Data
9.05 Test Construction
9.06 Interpreting Assessment Results
9.07 Assessment by Unqualified Persons
9.08 Obsolete Tests and Outdated Test Results
9.09 Test Scoring and Interpretation Services
9.10 Explaining Assessment Results
9.11 Maintaining Test Security

10. Therapy
10.01 Informed Consent to Therapy
10.02 Therapy Involving Couples or Families
10.03 Group Therapy
10.04 Providing Therapy to Those Served by Others
10.05 Sexual Intimacies With Current Therapy Clients/Patients
10.06 Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients
INTRODUCTION AND APPLICABILITY
The American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles (A–E), and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations, and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by an Ethical Standard does not mean that it is necessarily either ethical or unethical.

This Ethics Code applies only to psychologists' activities that are part of their scientific, educational, or professional roles as psychologists. Areas covered include but are not limited to the clinical, counseling, and school practice of psychology; research; teaching; supervision of trainees; public service; policy development; social intervention; development of assessment instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code.

Membership in the APA commits members and student affiliates to comply with the standards of the APA Ethics Code and to the rules and procedures used to enforce them. Lack of awareness or misunderstanding of an Ethical Standard is not itself a defense to a charge of unethical conduct.

The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the standards of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the standards of the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. In addition, APA may take action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state psychological association, or suspension or loss of licensure. When the sanction to be imposed by APA is less than expulsion, the 2001 Rules and Procedures do not guarantee an opportunity for an in-person hearing, but generally provide that complaints will be resolved only on the basis of a submitted record.

The Ethics Code is intended to provide guidance for psychologists and standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. The Ethics Code is not intended to be a basis of civil liability. Whether a psychologist has violated the Ethics Code standards does not by itself determine whether the psychologist is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur.

The modifiers used in some of the standards of this Ethics Code (e.g., reasonably, appropriate, potentially) are included in the standards when they would (1) allow professional judgment on the part of psychologists, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by psychologists, or (4) guard against a set of rigid rules that might be quickly outdated. As used in this Ethics Code, the term reasonable means the prevailing professional judgment of psychologists engaged in similar activities in similar circumstances, given the knowledge the psychologist had or should have had at the time.

In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. In applying the Ethics Code to
their professional work, psychologists may consider other materials and guidelines that have been adopted or endorsed by scientific and professional psychological organizations and the dictates of their own conscience, as well as consult with others within the field. If this Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority in keeping with basic principles of human rights.

PREAMBLE
Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They strive to help the public in developing informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of principles and standards upon which psychologists build their professional and scientific work.

This Ethics Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.

The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems.

GENERAL PRINCIPLES
This section consists of General Principles. General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose.

PRINCIPLE A: BENEFICENCE AND NONMALEFICENCE
Psychologists strive to benefit those with whom they work and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.

PRINCIPLE B: FIDELITY AND RESPONSIBILITY
Psychologists establish relationships of trust with those with whom they work. They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to
exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. They are concerned about the ethical compliance of their colleagues' scientific and professional conduct. Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage.

**PRINCIPLE C: INTEGRITY**
Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. Psychologists strive to keep their promises and to avoid unwise or unclear commitments. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.

**PRINCIPLE D: JUSTICE**
Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.

**PRINCIPLE E: RESPECT FOR PEOPLE’S RIGHTS AND DIGNITY**
Psychologists respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision making. Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices.

**ETHICAL STANDARDS**

1. **RESOLVING ETHICAL ISSUES**

1.01 Misuse of Psychologists’ Work
If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.

1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority
If psychologists’ ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority.

1.03 Conflicts Between Ethics and Organizational Demands
If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code.
1.04 Informal Resolution of Ethical Violations

When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved. (See also Standards 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 1.03, Conflicts Between Ethics and Organizational Demands.)

1.05 Reporting Ethical Violations

If an apparent ethical violation has substantially harmed or is likely to substantially harm a person or organization and is not appropriate for informal resolution under Standard 1.04, Informal Resolution of Ethical Violations, or is not resolved properly in that fashion, psychologists take further action appropriate to the situation. Such action might include referral to state or national committees on professional ethics, to state licensing boards, or to the appropriate institutional authorities. This standard does not apply when an intervention would violate confidentiality rights or when psychologists have been retained to review the work of another psychologist whose professional conduct is in question. (See also Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority.)

1.06 Cooperating With Ethics Committees

Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they address any confidentiality issues. Failure to cooperate is itself an ethics violation. However, making a request for deferment of adjudication of an ethics complaint pending the outcome of litigation does not alone constitute noncooperation.

1.07 Improper Complaints

Psychologists do not file or encourage the filing of ethics complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation.

1.08 Unfair Discrimination Against Complainants and Respondents

Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or considering other appropriate information.

2. COMPETENCE

2.01 Boundaries of Competence

(a) Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience.

(b) Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of factors associated with age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of their services or research, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Emergencies.

(c) Psychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study.
(d) When psychologists are asked to provide services to individuals for whom appropriate mental health services are not available and for which psychologists have not obtained the competence necessary, psychologists with closely related prior training or experience may provide such services in order to ensure that services are not denied if they make a reasonable effort to obtain the competence required by using relevant research, training, consultation, or study.

(e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm.

(f) When assuming forensic roles, psychologists are or become reasonably familiar with the judicial or administrative rules governing their roles.

2.02 Providing Services in Emergencies

In emergencies, when psychologists provide services to individuals for whom other mental health services are not available and for which psychologists have not obtained the necessary training, psychologists may provide such services in order to ensure that services are not denied. The services are discontinued as soon as the emergency has ended or appropriate services are available.

2.03 Maintaining Competence

Psychologists undertake ongoing efforts to develop and maintain their competence.

2.04 Bases for Scientific and Professional Judgments

Psychologists’ work is based upon established scientific and professional knowledge of the discipline. (See also Standards 2.01e, Boundaries of Competence, and 10.01b, Informed Consent to Therapy.)

2.05 Delegation of Work to Others

Psychologists who delegate work to employees, supervisees, or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to (1) avoid delegating such work to persons who have a multiple relationship with those being served that would likely lead to exploitation or loss of objectivity; (2) authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided; and (3) see that such persons perform these services competently. (See also Standards 2.02, Providing Services in Emergencies; 3.05, Multiple Relationships; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.02, Use of Assessments; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.)

2.06 Personal Problems and Conflicts

(a) Psychologists refrain from initiating an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.

(b) When psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties. (See also Standard 10.10, Terminating Therapy.)

3. **HUMAN RELATIONS**

3.01 Unfair Discrimination
In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

3.02 Sexual Harassment
Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist’s activities or roles as a psychologist, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. (See also Standard 1.08, Unfair Discrimination Against Complainants and Respondents.)

3.03 Other Harassment
Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status.

3.04 Avoiding Harm
Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

3.05 Multiple Relationships
(a) A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist’s objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

(b) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.

(c) When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur. (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.)

3.06 Conflict of Interest
Psychologists refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected to (1) impair their objectivity, competence, or effectiveness in performing their functions as psychologists or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation.
3.07 Third-Party Requests for Services
When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with all individuals or organizations involved. This clarification includes the role of the psychologist (e.g., therapist, consultant, diagnostician, or expert witness), an identification of who is the client, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standards 3.05, Multiple Relationships, and 4.02, Discussing the Limits of Confidentiality.)

3.08 Exploitative Relationships
Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as clients/patients, students, supervisees, research participants, and employees. (See also Standards 3.05, Multiple Relationships; 6.04, Fees and Financial Arrangements; 6.05, Barter With Clients/Patients; 7.07, Sexual Relationships With Students and Supervisees; 10.05, Sexual Intimacies With Current Therapy Clients/Patients; 10.06, Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients; 10.07, Therapy With Former Sexual Partners; and 10.08, Sexual Intimacies With Former Therapy Clients/Patients.)

3.09 Cooperation With Other Professionals
When indicated and professionally appropriate, psychologists cooperate with other professionals in order to serve their clients/patients effectively and appropriately. (See also Standard 4.05, Disclosures.)

3.10 Informed Consent
(a) When psychologists conduct research or provide assessment, therapy, counseling, or consulting services in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons except when conducting such activities without consent is mandated by law or governmental regulation or as otherwise provided in this Ethics Code. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

(b) For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an appropriate explanation, (2) seek the individual's assent, (3) consider such persons' preferences and best interests, and (4) obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law. When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights and welfare.

(c) When psychological services are court ordered or otherwise mandated, psychologists inform the individual of the nature of the anticipated services, including whether the services are court ordered or mandated and any limits of confidentiality, before proceeding.

(d) Psychologists appropriately document written or oral consent, permission, and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

3.11 Psychological Services Delivered To or Through Organizations
(a) Psychologists delivering services to or through organizations provide information beforehand to clients and when appropriate those directly affected by the services about (1) the nature and objectives of the services, (2) the intended recipients, (3) which of the individuals are clients, (4) the relationship the psychologist will have with each person and the organization, (5) the probable uses of services provided and information obtained, (6) who will have access to the information, and (7) limits of confidentiality. As soon as feasible, they provide information about the results and conclusions of such services to appropriate persons.

(b) If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service.
3.12 Interruption of Psychological Services

Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation, or retirement or by the client’s/patient’s relocation or financial limitations. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.)

4. PRIVACY AND CONFIDENTIALITY

4.01 Maintaining Confidentiality

Psychologists have a primary obligation and take reasonable precautions to protect confidential information obtained through or stored in any medium, recognizing that the extent and limits of confidentiality may be regulated by law or established by institutional rules or professional or scientific relationship. (See also Standard 2.05, Delegation of Work to Others.)

4.02 Discussing the Limits of Confidentiality

(a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their psychological activities. (See also Standard 3.10, Informed Consent.)

(b) Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.

(c) Psychologists who offer services, products, or information via electronic transmission inform clients/patients of the risks to privacy and limits of confidentiality.

4.03 Recording

Before recording the voices or images of individuals to whom they provide services, psychologists obtain permission from all such persons or their legal representatives. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.)

4.04 Minimizing Intrusions on Privacy

(a) Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made.

(b) Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.

4.05 Disclosures

(a) Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or another legally authorized person on behalf of the client/patient unless prohibited by law.

(b) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose such as to (1) provide needed professional services; (2) obtain appropriate professional consultations; (3) protect the client/patient, psychologist, or others from harm; or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04e, Fees and Financial Arrangements.)
4.06 Consultations
When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)

4.07 Use of Confidential Information for Didactic or Other Purposes
Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization, (2) the person or organization has consented in writing, or (3) there is legal authorization for doing so.

5. ADVERTISING AND OTHER PUBLIC STATEMENTS

5.01 Avoidance of False or Deceptive Statements
(a) Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant applications, licensing applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials. Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated.

(b) Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings.

(c) Psychologists claim degrees as credentials for their health services only if those degrees (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice.

5.02 Statements by Others
(a) Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements.

(b) Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item. (See also Standard 1.01, Misuse of Psychologists’ Work.)

(c) A paid advertisement relating to psychologists’ activities must be identified or clearly recognizable as such.

5.03 Descriptions of Workshops and Non-Degree-Granting Educational Programs
To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.

5.04 Media Presentations
When psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements (1) are based on their professional knowledge, training, or experience in accord with appropriate psychological literature and practice; (2) are otherwise consistent with
this Ethics Code; and (3) do not indicate that a professional relationship has been established with the recipient. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

5.05 Testimonials
Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence.

5.06 In-Person Solicitation
Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster or community outreach services.

6. RECORD KEEPING AND FEES

6.01 Documentation of Professional and Scientific Work and Maintenance of Records
Psychologists create, and to the extent the records are under their control, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law. (See also Standard 4.01, Maintaining Confidentiality.)

6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work
(a) Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. (See also Standards 4.01, Maintaining Confidentiality, and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)

(b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.

(c) Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists’ withdrawal from positions or practice. (See also Standards 3.12, Interruption of Psychological Services, and 10.09, Interruption of Therapy.)

6.03 Withholding Records for Nonpayment
Psychologists may not withhold records under their control that are requested and needed for a client’s/patient’s emergency treatment solely because payment has not been received.

6.04 Fees and Financial Arrangements
(a) As early as is feasible in a professional or scientific relationship, psychologists and recipients of psychological services reach an agreement specifying compensation and billing arrangements.

(b) Psychologists’ fee practices are consistent with law.

(c) Psychologists do not misrepresent their fees.

(d) If limitations to services can be anticipated because of limitations in financing, this is discussed with the recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Therapy, and 10.10, Terminating Therapy.)
(e) If the recipient of services does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.)

6.05 Barter With Clients/Patients
Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. Psychologists may barter only if (1) it is not clinically contraindicated, and (2) the resulting arrangement is not exploitative. (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.)

6.06 Accuracy in Reports to Payors and Funding Sources
In their reports to payors for services or sources of research funding, psychologists take reasonable steps to ensure the accurate reporting of the nature of the service provided or research conducted, the fees, charges, or payments, and where applicable, the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality; 4.04, Minimizing Intrusions on Privacy; and 4.05, Disclosures.)

6.07 Referrals and Fees
When psychologists pay, receive payment from, or divide fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself. (See also Standard 3.09, Cooperation With Other Professionals.)

7. EDUCATION AND TRAINING

7.01 Design of Education and Training Programs
Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program. (See also Standard 5.03, Descriptions of Workshops and Non-Degree-Granting Educational Programs.)

7.02 Descriptions of Education and Training Programs
Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, stipends and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

7.03 Accuracy in Teaching
(a) Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Statements.)

(b) When engaged in teaching or training, psychologists present psychological information accurately. (See also Standard 2.03, Maintaining Competence.)
7.04 Student Disclosure of Personal Information

Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

7.05 Mandatory Individual or Group Therapy

(a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners unaffiliated with the program. (See also Standard 7.02, Descriptions of Education and Training Programs.)

(b) Faculty who are or are likely to be responsible for evaluating students’ academic performance do not themselves provide that therapy. (See also Standard 3.05, Multiple Relationships.)

7.06 Assessing Student and Supervisee Performance

(a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision.

(b) Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.

7.07 Sexual Relationships With Students and Supervisees

Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom psychologists have or are likely to have evaluative authority. (See also Standard 3.05, Multiple Relationships.)

8. RESEARCH AND PUBLICATION

8.01 Institutional Approval

When institutional approval is required, psychologists provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.

8.02 Informed Consent to Research

(a) When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants’ rights. They provide opportunity for the prospective participants to ask questions and receive answers. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.)
(b) Psychologists conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research (1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought. (See also Standard 8.02a, Informed Consent to Research.)

8.03 Informed Consent for Recording Voices and Images in Research
Psychologists obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing. (See also Standard 8.07, Deception in Research.)

8.04 Client/Patient, Student, and Subordinate Research Participants
(a) When psychologists conduct research with clients/patients, students, or subordinates as participants, psychologists take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation.

(b) When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.

8.05 Dispensing With Informed Consent for Research
Psychologists may dispense with informed consent only (1) where research would not reasonably be assumed to create distress or harm and involves (a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (b) only anonymous questionnaires, naturalistic observations, or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability, or reputation, and confidentiality is protected; or (c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or (2) where otherwise permitted by law or federal or institutional regulations.

8.06 Offering Inducements for Research Participation
(a) Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation.

(b) When offering professional services as an inducement for research participation, psychologists clarify the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.05, Barter With Clients/Patients.)

8.07 Deception in Research
(a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study's significant prospective scientific, educational, or applied value and that effective nondeceptive alternative procedures are not feasible.

(b) Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.

(c) Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the
conclusion of the data collection, and permit participants to withdraw their data. (See also Standard 8.08, Debriefing.)

8.08 Debriefing
(a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware.
(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.
(c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

8.09 Humane Care and Use of Animals in Research
(a) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state, and local laws and regulations, and with professional standards.
(b) Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health, and humane treatment.
(c) Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role. (See also Standard 2.05, Delegation of Work to Others.)
(d) Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects.
(e) Psychologists use a procedure subjecting animals to pain, stress, or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.
(f) Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery.
(g) When it is appropriate that an animal’s life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures.

8.10 Reporting Research Results
(a) Psychologists do not fabricate data. (See also Standard 5.01a, Avoidance of False or Deceptive Statements.)
(b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.

8.11 Plagiarism
Psychologists do not present portions of another’s work or data as their own, even if the other work or data source is cited occasionally.

8.12 Publication Credit
(a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed. (See also Standard 8.12b, Publication Credit.)
(b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to
the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement.

c) Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student’s doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate. (See also Standard 8.12b, Publication Credit.)

8.13 Duplicate Publication of Data
Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.

8.14 Sharing Research Data for Verification
(a) After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information.

(b) Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for the declared purpose. Requesting psychologists obtain prior written agreement for all other uses of the data.

8.15 Reviewers
Psychologists who review material submitted for presentation, publication, grant, or research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it.

9. ASSESSMENT

9.01 Bases for Assessments
(a) Psychologists base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

(b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.)

(c) When psychologists conduct a record review or provide consultation or supervision and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the sources of information on which they based their conclusions and recommendations.

9.02 Use of Assessments
(a) Psychologists administer, adapt, score, interpret, or use assessment techniques, interviews, tests, or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques.
(b) Psychologists use assessment instruments whose validity and reliability have been established for use with members of the population tested. When such validity or reliability has not been established, psychologists describe the strengths and limitations of test results and interpretation.

(c) Psychologists use assessment methods that are appropriate to an individual’s language preference and competence, unless the use of an alternative language is relevant to the assessment issues.

9.03 Informed Consent in Assessments

(a) Psychologists obtain informed consent for assessments, evaluations, or diagnostic services, as described in Standard 3.10, Informed Consent, except when (1) testing is mandated by law or governmental regulations; (2) informed consent is implied because testing is conducted as a routine educational, institutional, or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or (3) one purpose of the testing is to evaluate decisional capacity. Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties, and limits of confidentiality and sufficient opportunity for the client/patient to ask questions and receive answers.

(b) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.

(c) Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, discussion of any limitations on the data obtained. (See also Standards 2.05, Delegation of Work to Others; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.06, Interpreting Assessment Results; and 9.07, Assessment by Unqualified Persons.)

9.04 Release of Test Data

(a) The term *test data* refers to raw and scaled scores, client/patient responses to test questions or stimuli, and psychologists’ notes and recordings concerning client/patient statements and behavior during an examination. Those portions of test materials that include client/patient responses are included in the definition of *test data*. Pursuant to a client/patient release, psychologists provide test data to the client/patient or other persons identified in the release. Psychologists may refrain from releasing test data to protect a client/patient or others from substantial harm or misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law. (See also Standard 9.11, Maintaining Test Security.)

(b) In the absence of a client/patient release, psychologists provide test data only as required by law or court order.

9.05 Test Construction

Psychologists who develop tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use.

9.06 Interpreting Assessment Results

When interpreting assessment results, including automated interpretations, psychologists take into account the purpose of the assessment as well as the various test factors, test-taking abilities, and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural differences, that might affect psychologists’ judgments or reduce the accuracy of their interpretations. They indicate any significant limitations of their interpretations. (See also Standards 2.01b and c, Boundaries of Competence, and 3.01, Unfair Discrimination.)
9.07 Assessment by Unqualified Persons
Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others.)

9.08 Obsolete Tests and Outdated Test Results
(a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.
(b) Psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.

9.09 Test Scoring and Interpretation Services
(a) Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability, and applications of the procedures and any special qualifications applicable to their use.
(b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01b and c, Boundaries of Competence.)
(c) Psychologists retain responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.

9.10 Explaining Assessment Results
Regardless of whether the scoring and interpretation are done by psychologists, by employees or assistants, or by automated or other outside services, psychologists take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, preemployment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance.

9.11. Maintaining Test Security
The term test materials refers to manuals, instruments, protocols, and test questions or stimuli and does not include test data as defined in Standard 9.04, Release of Test Data. Psychologists make reasonable efforts to maintain the integrity and security of test materials and other assessment techniques consistent with law and contractual obligations, and in a manner that permits adherence to this Ethics Code.

10. THERAPY

10.01 Informed Consent to Therapy
(a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about the nature and anticipated course of therapy, fees, involvement of third parties, and limits of confidentiality and provide sufficient opportunity for the client/patient to ask questions and receive answers. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.)

(b) When obtaining informed consent for treatment for which generally recognized techniques and procedures have not been established, psychologists inform their clients/patients of the developing nature of the treatment, the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation. (See also Standards 2.01e, Boundaries of Competence, and 3.10, Informed Consent.)
(c) When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor.

10.02 Therapy Involving Couples or Families
(a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist’s role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)

(b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists take reasonable steps to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.)

10.03 Group Therapy
When psychologists provide services to several persons in a group setting, they describe at the outset the roles and responsibilities of all parties and the limits of confidentiality.

10.04 Providing Therapy to Those Served by Others
In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists carefully consider the treatment issues and the potential client’s/patient's welfare. Psychologists discuss these issues with the client/patient or another legally authorized person on behalf of the client/patient in order to minimize the risk of confusion and conflict, consult with the other service providers when appropriate, and proceed with caution and sensitivity to the therapeutic issues.

10.05 Sexual Intimacies With Current Therapy Clients/Patients
Psychologists do not engage in sexual intimacies with current therapy clients/patients.

10.06 Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients
Psychologists do not engage in sexual intimacies with individuals they know to be close relatives, guardians, or significant others of current clients/patients. Psychologists do not terminate therapy to circumvent this standard.

10.07 Therapy With Former Sexual Partners
Psychologists do not accept as therapy clients/patients persons with whom they have engaged in sexual intimacies.

10.08 Sexual Intimacies With Former Therapy Clients/Patients
(a) Psychologists do not engage in sexual intimacies with former clients/patients for at least two years after cessation or termination of therapy.

(b) Psychologists do not engage in sexual intimacies with former clients/patients even after a two-year interval except in the most unusual circumstances. Psychologists who engage in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former client/patient bear the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated; (2) the nature, duration, and intensity of the therapy; (3) the circumstances of termination; (4) the client’s/patient's personal history; (5) the client’s/patient's current mental status; (6) the likelihood of adverse impact on the client/patient; and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a
posttermination sexual or romantic relationship with the client/patient. (See also Standard 3.05, Multiple Relationships.)

10.09 Interruption of Therapy
When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of responsibility for client/patient care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the client/patient. (See also Standard 3.12, Interruption of Psychological Services.)

10.10 Terminating Therapy
(a) Psychologists terminate therapy when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service.

(b) Psychologists may terminate therapy when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship.

(c) Except where precluded by the actions of clients/patients or third-party payors, prior to termination psychologists provide pretermination counseling and suggest alternative service providers as appropriate.

History and Effective Date Footnote
This version of the APA Ethics Code was adopted by the American Psychological Association's Council of Representatives during its meeting, August 21, 2002, and is effective beginning June 1, 2003. Inquiries concerning the substance or interpretation of the APA Ethics Code should be addressed to the Director, Office of Ethics, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242. The Ethics Code and information regarding the Code can be found on the APA web site, http://www.apa.org/ethics. The standards in this Ethics Code will be used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective date. Complaints regarding conduct occurring prior to the effective date will be adjudicated on the basis of the version of the Ethics Code that was in effect at the time the conduct occurred.

The APA has previously published its Ethics Code as follows:

Request copies of the APA's Ethical Principles of Psychologists and Code of Conduct from the APA Order Department, 750 First Street, NE, Washington, DC 20002-4242, or phone (202) 336-5510.

Ethics Code 2002.doc 10/8/02

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**The Highest Standard of Academic Excellence**

On September 3, 2000, the University of Denver inaugurated the Honor Code during the Pioneer Passage ceremony for the Class of 2004. This new tradition highlights and brings to new prominence the value that DU places on honesty, integrity and academic excellence.

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**THE UNIVERSITY OF DENVER HONOR CODE**

All members of the University community are entrusted with the responsibility of observing certain ethical goals and values as they relate to academic integrity. Essential to the fundamental purpose of the University is the commitment to the principles of truth and honesty. The Honor Code is designed so that responsibility for upholding these principles lies with the individual as well as the entire community.

The Honor Code fosters and advances an environment of ethical conduct in the academic community of the University, the foundation of which includes the pursuit of academic honesty and integrity. Through an atmosphere of mutual respect we enhance the value of our education and bring forth the highest standard of academic excellence. Members of the University community, including students, faculty, staff, administrators and trustees, must not commit any intentional misrepresentation or deception in academic or professional matters.

**RATIONALE.** The Code was developed following discussions among a broad range of constituencies within the University encompassing students, faculty, staff, administrators, and trustees. The Honor Code is a living document that will evolve with time. In order to better foster and advance an environment of ethical conduct in the academic community of the University both substantive requirements and enforcement procedures may be amended by the University to reflect experience gained from its implementation.

**AUTHORITY.** Any modification of the Honor Code, other than to the procedures governing its enforcement, must be approved by the Board of Trustees upon recommendation from the Provost. Modifications and variations in procedures governing enforcement of the Code, including the use of alternative procedures in specific context as mandated by federal or state law, are subject to the approval of the Provost. In addition, upon recommendation from a Dean or the Faculty Senate, the Provost, in his or her sole discretion, may permit individual units or divisions of the University to adopt and implement area-specific descriptions of conduct violative of the Honor Code, provided that such descriptions do not authorize or condone conduct prohibited by, or inconsistent with, the Code.

**ENFORCEMENT.** The University of Denver Honor Code Procedures Governing Students shall govern and be followed in the case of any student at the University who is accused of violating the Honor Code. The University’s Faculty Personnel Guidelines Relating to Appointment, Promotion, and Tenure shall govern and be followed in the case of any faculty member who is accused of violating the Honor Code. The University’s Employee Handbook of Personnel Guidelines & Procedures shall govern and be followed in the case of any non-faculty employee who is accused of violating the Honor Code. The By-Laws, or other Board policies, of Colorado Seminary or the University of Denver shall govern and be followed in the case of any trustee who is accused of violating the Honor Code. Any conflict or dispute concerning which procedure governs in the enforcement of this Honor Code shall be resolved by the Provost, or, in the case of the trustees, by the Board of Trustees.
APPENDIX E
FIELD PLACEMENT POLICIES AND PRACTICES

COMMUNITY PRACTICUM INFORMATION AND POLICIES STATEMENT

Mission Statement

The development of evidence-based psychological practices is core to student development and training at the Graduate School of Professional Psychology (GSPP). Toward this end, the student is expected to become conversant with the psychological science literature and suggested clinical practices, standards, ethics, and guidelines, and to engage in as extensive and varied supervised professional experience as possible with clients of diverse background. Practicum training and experiences include such activities as psychological testing and assessment, consultation and supervision, program development, outreach and advocacy, formulating cases and implementing evidence-based intervention strategies, time spent in support of psychological practice (e.g., charting, literature review, examining research outcomes and conclusions drawn from this research), and participation in qualified supervised experience commensurate with this training. In addition to involvement with the professional seminar team and clients seen in the Professional Psychology Center (PPC), every student is expected to hold an outside community practicum position [externship] each year prior to the internship year, unless on official leave of absence. Accordingly, students are required to pursue one or more community practica experiences per year.

The Training Paradigm—Evidence-Based Clinical Practice

In accord with American Psychological Association (APA) accredited training, the doctoral program at the GSPP is committed to a training model that is sequential, cumulative, and graded in complexity. Additionally, we require that community practicum partners make an effort to promote training in evidence-based practices. The APA defines evidence-based practice in psychology as “the integration of the best available research with clinical expertise in the context of patient characteristics” (APA, 2006, p. 273). Evidence-based practice allows for less rigorous validation of intervention approaches than is required of empirically-supported treatments (e.g., heterogeneous set of interventions validated through randomized, controlled clinical trials), and allows for the personalized tailoring of interventions based on the context of client’s life history, culture, preferences, and values.

To Student and Agency—Participation Agreement: Procedures, Guidelines, and Expectations

In order to qualify as a GSPP community practicum training site, we ask that students and agencies comply with the guidelines outlined below:

Practicum Selection Process
The agency specifies the level of training and/or special skills required of the practicum student. Agencies screen and select the student desired from those applying to do field work at the agency. Selection decisions should be made with special attention to the student’s year in the Doctoral Program and his or her current developmental level of academic and clinical preparation, as a way to ensure the most effective training environment for the students and to ensure that they will be able to competently perform the duties expected by the agency. Upon or before the externship start date, it the agency and student should plan together the types of experiences, duties, and number of hours expected of the student.

In terms of timeline, practicum selection takes place twice yearly: (1) Fall Selection. The fall selection process targets entering students (first year practicum assignments; students with entry level foundational...
and functional competencies, though some students will enter with clinical MA degrees and therefore already possess some clinical expertise upon arrival. Entering students begin practicum work soon after they arrive fall quarter. (2) Spring Selection. The spring selection process targets continuing students (second and third year practicum assignments; students with increasingly more advanced foundational and functional competencies). Spring selection establishes practicum assignments beginning the following fall quarter. Some students may begin practicum assignments prior to the normal fall quarter startup at request of the selecting agency.

[Note that entering students participate in both the fall and spring selection process during their first year in the program; second and third year continuing students participate in the spring selection process only].

**Practicum Titles**
Permissible titles include ‘student extern’ or ‘practicum student.’ Further, students may use the more formal title ‘Doctoral Trainee,’ but under no circumstance may the term ‘psychology’ or ‘psychologist’ be used in conjunction with one’s title or role, inside or outside of agency work (per Colorado State statute 12-43-216).

**Practicum Hour Requirement**
Practicum experiences anticipated to satisfy the annual training requirement shall be a minimum for 384 hours of supervised professional experience. At least 50% of the total hours of supervised practicum experience accrued shall be in service-related activities, defined as: treatment/intervention, assessment, clinical interviews, agency intakes, psychological report-writing, direct observation, case presentations, consultations, and hours in support of service-related activities (e.g., observing / shadowing a professional; attending in-service trainings, workshops, and conference attendance; charting progress notes; program evaluation; literature research). At least 25% of the supervised practicum experience shall be devoted to face-to-face client contact. Time spent in supervision shall count toward the 384 hour yearly minimum requirement. (EXAMPLE: A student completing 16 hours [2 days] of experience in each week would need to spend at least 8 hours in service-related activities per week as noted above and 4 hours of those 8 hours must involve face-to-face client contact).

Due to academic demands, we ask that community practica be limited to no more than 15 hours per week for first year students and to no more than 20 hours per week for advanced students. Any deviation from this policy, including any plan to accrue hours at an accelerated or attenuated rate, or on a non-standard schedule, requires that a formal petition be filed with Shelly Smith-Acuña, Dean and Terri Davis, Director of the PsyD. Petitions are reviewed on a case-by-case basis.

**Supervision Hour Requirement**
Direct, face-to-face supervision shall account for no less than 25% of the time spent in service-related activities. (EXAMPLE: The student in the above example would be required to receive at least 2 hours of total in-person supervision each week based on 8 hours of service-related activities). Of the total supervision time, at least 50% must be individual supervision; the remaining 50% may be either individual or group supervision. (EXAMPLE: The student in the above example would be required to receive at least 1 hour of individual, face-to-face supervision each week; the remaining required hour of supervision could be either one-on-one with the supervisor or in a group supervision format with other students).

**STUDENTS ARE ADVISED THAT COMMUNITY PRACTIUM EXPERIENCE IN AT LEAST ONE OF THE YEARS MUST BE SUPERVISED BY A LICENSED PSYCHOLOGIST.**
Supervisor Qualifications
Although GSPP faculty assume primary accountability for the overall education and practicum experiences of their students, on-site practicum supervisors play an essential role in the training of students.

We require that students be supervised at all times and for all duties performed while working in practica positions. The clinical supervisor must be a qualified licensed mental health professional, preferably a licensed psychologist, or alternatively, a licensed allied mental health professional at the master’s level of education (e.g., LCSW), or a predoctoral or postdoctoral psychology intern who is supervised by a licensed psychologist. In line with our training paradigm, practicum students should be supervised by persons who are able to extend the student’s academic education and clinical expertise in accord with the training model specified above. Finally, all supervisors shall be appropriately licensed in the jurisdiction of practice and be a member of the staff at the site where the supervised experience takes place.

(Colorado specific information: Non-DORA licensed EdS or doctoral level psychology staff may supervise our pre-master's level students. However, those master’s level students who wish to accumulate post-master’s hours toward LPC licensure, must be supervised by an LPC, LCSW, Psychologist, or Certified Psychiatrist, and the student must be in the DORA database as an unlicensed psychotherapist for these hours to count towards the LPC license).

Competency-Based Training Plan
All students are required to formalize a PsyD Program Annual Training Plan for each primary community practica experience undertaken. It is the student’s responsibility to initiate the discussion about field placement training goals as soon as the practica assignment begins; training plans must be completed for your primary field placement position on or before October 31 of each academic year.

The training plan is designed to provide a framework to assist students, academic advisors, and agency supervisors in co-creating an integrated training experience that will help students most effectively personalize professional goals and fulfill programmatic requirements while at the GSPP.

The eight Benchmark Competencies below represent the foundational and functional scaffolding around which the Psy.D. Program is structured. As such, they are integrated into almost every aspect of training at the GSPP—including coursework, Seminar and PPC work, field placement, peer review and evaluations, and advising.

Core competencies include:
- **Professionalism**: Professional values and ethics as evidence in behavior and comportment that reflects integrity and responsibility.
- **Reflective Practice/Self-Assessment/Self-Care**: Practice conducted with personal and professional self-awareness and reflection, with awareness of competencies and with appropriate self-care.
- **Scientific Knowledge and Methods**: Understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan; and respect for scientifically derived knowledge.
- **Relationships**: Relate effectively and meaningfully with individuals, groups, and/or communities.
• **Individual and Cultural Diversity**: Awareness, sensitivity and skills in working professionally with diverse individuals, groups, and communities who represent various cultural and personal background and characteristics, defined broadly and consistent with APA policy.

• **Ethical Legal Standards and Policy**: Application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.

• **Assessment**: Assessment and diagnosis of problems, capabilities and issues associated with individuals, groups, and/or organizations.

• **Intervention**: Interventions designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations.

**Competency-Based Evaluation Process**

The GSPP requires bi-annual evaluation of each listed and/or unlisted community practicum experience undertaken by the student. The evaluation process requires in-person discussion with the community practica supervisor focusing on (1) the *supervisor's rating* of the student's eight core competency areas noted above, and (2) the *student's rating* of the practicum experience. The benchmark ratings of core competencies reflect the developmental milestones which are intended to help students make the most of their time in this training program, and they will be used as tools to guide the student in reaching his/her full potential as a clinician. A student’s core competencies are rated relative to other students at a comparable year of training using a 1 to 9 point scale. As conceptual anchors, scores 2, 5, and 8 reflect the ‘expected’ scores for first-year, second-year, and third-year or beyond-year students, respectively. Both evaluations should be submitted electronically by January 31 and June 15, respectively.

The system for evaluating GSPP students / supervisors can be accessed by following these steps:

1. Go to www.du.edu/gspp/stars. You may want to bookmark this page in your browser window for future use.
2. Click on the STARS1 icon.
3. Your username and password are below. Please feel free to change the password by clicking the ‘Change Password’ button after logging in.
4. Click on the 'My Assessments as Reviewer' button.
5. Click on the green arrow on the right of each review, under the heading 'View/Edit'.
6. Click 'continue' (top right corner) to progress through the questions.

**Tracking of Practica Experiences and Hours**

Students are required to track the types of clinical experiences and hours accumulated through community practica work. Students are encouraged to use ‘MyPsychTrack’ for this purpose, since it provides a comprehensive system for tracking clinical hours across years in the program with seamless integration to the APPIC Application for Psychology Internships (AAPI) process (Customer support 617-612-2866).

MyPsychTrack is currently free (we are uncertain how long it will remain so). A coupon code is needed, which is: Coupon code: cb577def-2151-4a4f-887f-8e7fbd05d4ea

To watch a brief video of how to create your MyPsychTrack account, please click:
http://www.youtube.com/watch?v=O38lHe6peLc&feature=youtu.be

**Additional Information**

**Field Placement Selection Form**

Students are required to submit a *Field Placement Selection Form* for each community practica experience.
undertaken during their time in the Program. Field placement section forms are submitted electronically and retained in the student’s academic file.

Students can assess a copy of the field placement section form by following these steps:

- Go to the www.du.edu homepage, and click on ‘webcentral.’ Log in using your student 87(ID number) and password.
- Find the ‘GSPP’ tab and click on it.
- Click on ‘PsyD Student Forms’ under the Student Resources heading on the left side of the page.
- Click on ‘Field Placement Selection Form,’ and print a hardcopy of the entire form.
- Procedure for electronic submission of the field placement selection form:
  - For listed practicum positions, complete page 1 of the field placement selection form immediately upon securing your assignment, and then ‘scan’ an electronic copy to Judy Farmer and cc. John McNeill on that email (gspp.forms@du.edu; jfarmer@du.edu // jwmcneill00@gmail.com).
  - For unlisted practicum positions, complete pages 1 and 2 of the field placement selection form immediately upon securing your assignment, and then return to John McNeill’s mailbox for Committee review. Once approved, the signed field placement selection form will be returned to you. Then, ‘scan’ an electronic copy to Judy Farmer and cc. John McNeill on that email (gspp.forms@du.edu; jfarmer@du.edu // jwmcneill00@gmail.com).

APA Student Liability Malpractice Insurance. Students are required to carry personal liability malpractice insurance at all times to cover their Professional Psychology Center and community field placement work. We require Occurrence Type coverage at the $1,000,000 each incident / $3,000,000 annual aggregate level. The annual cost of this insurance premium is approximately $35.00 per year. Student liability malpractice insurance may be purchased from the American Psychological Association (APA) Insurance Trust at very reasonable rates (APA will require that you become a student member in order to receive their insurance coverage; membership cost is around $45.00 per year). A ‘Declaration Statement’ showing proof of liability malpractice insurance coverage will be sent to the student. These forms are retained in the student’s academic file. Any student with undocumented liability malpractice insurance coverage will immediately lose all clinical privileges, and will be brought to faculty attention for possible disciplinary action.

Workers’ Compensation Coverage and Attendant Risk Management

We are awaiting further clarification of the language concerning worker’s compensation coverage for injuries sustained while performing School sanctioned community practicum work. When this statement becomes available, I’ll forward it on to the doctoral student group. Further clarification of the University of Denver’s policies related to workers’ compensation coverage may be obtained from Andrew Stephenson phone number: (303) 871-2345) or call Tracie Kruse 303-871-3875. See Field Placement Packet p. 13 for more detailed information concerning workers’ compensation procedures.

Finally, students are reminded that clinical or research activities performed in community practica settings may carry with them certain attendant risks. The student and agency must assess whether or not the student’s level of training and amount of supervision provided by the agency are suitable to the types of duties, tasks, and requirements expected of the student.

Academic Accommodations

Agencies are reminded that, while community practicum assignments represent an important clinical training opportunity for students, our doctoral students cannot allow practicum activities to overshadow or supersede their academic preparation and course work requirements here at the GSPP. Before committing to a field placement assignment, the agency and student should carefully consider
practicum work expectations, and any adverse impact that such work will have on the academic training component. The Program and the student share responsibility for making the agency aware of the GSPP’s stance on this matter. The student will ensure that all academic coursework requirements set forth by the faculty are appropriately completed within the time allotted. Further, the student is responsible for arranging her/his field placement schedule in accordance with this policy, and for discussing this issue with the agency prior to formalizing a work commitment agreement with the agency. Please note that the University’s final exam schedule varies year-to-year and quarter-by-quarter. The University is very strict that all final exams be completed during the specified exam period; our students have NO flexibility in this process. Students’ academic work must come first! Therefore, we ask that, whenever necessary, agencies please excuse students from field placement work on required final exam dates. Advanced planning may help to reduce conflicts around this policy. We appreciate your understanding and cooperation in this matter.

Problems of Concern
If any special problems develop during community practicum work, we expect that you will contact the School early in the development of the problem so we may resolve the issue with the least possible stress. Even minor problems should be reported as early as possible to the community practicum director, John McNeill (303) 871-3876; or coordinator, Lynett Henderson-Metzger (303) 871-4684. The agency may "deselect" a student at any time, presumably after careful consideration and as a last alternative. All problems of concern raised by student or agency will be forwarded to the student’s academic advisory for review and follow-through.

To the Student—Unlisted Community Practica Options

Students interested in pursuing other field placement options must complete and submit a Proposal to Undertake an Unlisted Field Placement. (1) Students who are currently conducting psychotherapy and/or assessment in a supervised private practice or agency setting may propose that as their field placement for a one-year period provided their work is in accordance with the GSPP Policy on Students Seeing Private Clients and the Colorado Psychological Association Guidelines Concerning the Practice of Supervision. The working student must arrange for new experiences with supervision in his/her work setting before the year begins (see pages 9-10 for more details). (2) Students licensed or certified by the State of Colorado who are seeing clients in their own private practice may not use this practice to meet GSPP field placement requirements (See Policy on Students Seeing Private Clients). (3) Research focused work will not qualify for GSPP practica experience unless the student is directly involved in clinical aspects of the study. (4) Students working in a clinical setting in which they do not conduct psychotherapy and/or assessment cannot use that work as GSPP field placement experience (e.g., Social Work focused assignments do not qualify).

Record of Outside Mental Health Related Employment. Students are reminded that all outside mental health related employment performed independent of degree requirements set forth by the Graduate School of Professional Psychology must be reported using the Proposal for Outside Employment form. ‘Independent’ means non-curriculum work required by masters or doctoral programs at the Graduate School of Professional Psychology. Please see field placement packet for pages policies/procedures related to outside employment and registration.
APPENDIX F

STUDENT RESOURCES

CLUBS

**GRADUATE STUDENT ASSOCIATE OF PROFESSIONAL PSYCHOLOGY (GSAPP):** The mission for GSAPP is: The Graduate Student Association of Professional Psychology (GSAPP) is an established student governing body that promotes the respect, support, and empowerment of the Graduate School of Professional Psychology students by facilitating an ongoing and dynamic exchange among students, faculty, and the University of Denver community.

Goals for GSAPP: The Graduate Student Association of Professional Psychology is responsible for the following activities and events for the Graduate School of Professional Psychology: The Graduate Student Association of Professional Psychology is responsible for a $100 reimbursement for each student at the Graduate School of Professional Psychology for seminars, workshops and conferences. The Graduate Student Association of Professional Psychology hosts an annual student panel for Comprehensive Exams for PsyD students, as well as speakers and panelists in specialty areas in psychology. The Graduate Student Association of Professional Psychology is responsible for mentorship groups for the various programs at the Graduate School of Professional Psychology to develop and enhance relationships within programs for faculty and staff. The Graduate Student Association of Professional Psychology sponsors the annual potluck during orientation, as well as additional social activities each quarter throughout the academic year. The Graduate Student Association of Professional Psychology is an active organization in the Graduate Student Association Council and has been present in interviews for faculty and staff at the Graduate School of Professional.

Elections: And officers in GSAPP are nominated and selected by the students of the Graduate School of Professional Psychology.

**DU HEALTH AND NEUROPSYCH CLUB:** DUHNC is committed to promoting the training and educational interests of graduate students aspiring to be neuropsychologists, clinical health psychologists, as well as students with interests in either/both of these areas. Encompassing the medical psychology field, we are also interested in related topics such as psychological assessment, health psychology, geropsychology, and therapeutic intervention (such as psychotherapy, cognitive therapy, case management, occupational therapy, physical therapy, etc.) One of our primary goals as a club is to foster and develop inter-department relations through the activities we sponsor. We are currently cultivating a working relationship with the Graduate School of Professional Psychology, the School of Education, the School of Social Work, and the Department of Psychology. It is part of our mission to hold events on topics that are of interest to this wider audience. Finally, we are committed to building relations with professional organizations and agencies within the greater Denver community and hope to co-sponsor workshops and conferences.

Mission

DUHNC is a student-run organization that represents and promotes the educational and training interests of DU graduate students specializing in clinical neuropsychology, clinical health psychology, as well as those students with interest in these areas. The primary purpose is the proliferation of information in Neuropsychology and Health Psychology to a diverse group of students at DU and the building of professional relationships with Psychologists in the community.
INTERNATIONAL PSYCHOLOGY CLUB:

Purpose
- Provide education and training on the general topic of international psychology
- Provide services to the Denver community aimed at the international population (e.g., refugee, recent immigrants).
- Provide professional development for those interested in the area of international psychology.

Breakdown
1 – Training and Education
   * Speakers
   * Trainings

2 – Clinical Services (PPC, Philanthropy/community work)
   * requires approval and coordination with Fernand
     * PPC services (provide Fernand with list of resettlement agencies, recruit supervisors, develop a language list for the PPC)
     * Issues: Interpretation, advertising to the community, coordinating with existing service providers, supervision.

3 – Professional Development
   * Internships, 4th year abroad
   * Future international employment
   * Contacts list *requires coordination w/ Judy Fox
   * GSPP specifics: Diversity requirements, international field placement (summer)
   * Language issues

SPORT CLUB

Purposes:
- To get more members of GSPP involved and informed about the Sport and Performance Psychology Program at DU
- Arrange joint speakers with other clubs (Forensic, International Disaster, Health Psych, and PsyD)
- Discussion lunches (special topics and career development)
- Field trips (such as trips to the US Olympic Training Center)

Goals: Initially, to get the club organized, operating, and begin to establish a better connections with the other programs/faculty within GSPP. In the future, this club would be a great source for strengthening the applicant pool for the program (e.g., by reaching out and bringing awareness of the SPP program to undergraduate programs). It would also be a forum for speakers or discussion panels both inside and outside the GSPP community.

Organization: Ideally 4-5 core board members (both first and second years) all making decisions collectively and facilitating meetings/events together.

Commitment level: Approximately one meeting each month and one speaker or discussion each term.

Fundraising: some ideas proposed included t-shirt sales or fees at lunches where the money would to towards paying the speaker for his/her time and or travel expenses (if possible, we would hope to get lunches provided by local restaurants).

GaSPP (Guerrilla actors' School of Professional Psychology) is a sketch comedy group that brings people together to discuss and laugh about sensitive topics of difference. It is a faculty-staff-student collaboration, performing roughly twice a year, and followed by dialogue. Salman Rushdie wrote, "The poet's work is to
name the unnameable, to point at frauds, to take sides, start arguments, shape the world and stop it from going to sleep." The theater's work is the same, but also to entertain.

**Voices of Discovery** is a program designed to allow students, faculty, and staff to explore multicultural issues in small groups over time. Groups meet two times per quarter, and members are asked to participate for a year to facilitate continuity and to deepen the experience.
COMMUNITY RESOURCES

Information provided by students for students in the 1st Year Guidance Program brochure.

Exploring the Mile-high City:
Denver has tons to offer…much more than we can even begin to describe here. So we’ve included some links that you might find useful when you need to put your books down and get outside! If none of these suit your fancy, then just get out and explore. You can’t go wrong! Or our best suggestion: ask around. In our experience, most people around these parts are more than willing to help out.

Maps:
www.mapsco.com
www.resortmaps.com

Stuff around Denver:
www.visitdenver.com (Official Visitors guide)
http://www.du.edu/experience/denver/index.html
www.denver.org
www.denver.com
http://www.lonelyplanet.com/usa/rocky-mountains/denver
http://www.insiders.com/denver/

Hiking & Biking Trails:
http://www.localhikes.com/msa/msa_2082.asp
http://www.2pedal.com/usa/co/
http://www.parks.state.co.us/Parks/

Events, Music & More:
http://www.westword.com/music
http://denver.metromix.com/music
http://www.hellodenver.com/music

Ski Pass Information:
http://www.skicolorado.com
http://www.coloradolapass.com
http://www.christysports.com
http://www.rei.com
APPENDIX G

INTERNERNSHIP INFORMATION

CLINICAL INTERNSHIP POLICIES, PROCEDURES AND GUIDELINES

POLICIES: Every student in the GSPP is required to complete an internship or its equivalent before receipt of the PsyD degree. Typically, the internship will be undertaken during the fourth year and will require completion of prior practicum level experience. **ANY INTERNSHIP THAT IS NOT APA OR APPIC APPROVED MUST BE REVIEWED AND APPROVED BY THE GSPP FACULTY.**

Prior to internship applications, students must have completed the following:

- All incomplete grades remediated from their records.
- Doctoral paper topic proposed and in student file.
- Doctoral paper committee signatures in student file.
- Internship readiness form signed by the student advisor.

The advisor is responsible for a thorough check of the student's file at this point. Students should discuss their training needs and possible sites that may meet those needs with their advisors, other appointed faculty and/or community resource persons. It is recommended that the student specify in writing his/her internship training needs and have a vita prepared for this discussion. If a student reapplies the following year, the internship readiness form must be completed and signed again that following year.

It is the policy of the GSPP that students not start an internship until all course work is completed. To do otherwise, a student must petition the faculty for approval, supplying in full detail plans to complete required course work. **If a student anticipates leaving prior to completion of required coursework, s/he must petition the faculty before the prioritizing process. The faculty reserves the right to decide whether a student may leave early. If the student does not petition before the prioritizing process, the faculty may not allow the student to leave before mid-August.** It is strongly recommended that students complete their doctoral papers before going on internship.

Standard timeline for leaving GSPP (students need to petition if they are leaving prior to the end of the quarter):

- Students may leave 2 weeks before the internship start date, if the student is moving out of state or more than 100 miles.
- Students may leave 1 week before the internship start date, if the student is staying within 99 miles of DU.
- Please find checkout information on the Webcentral GSPP tab in the forms area.

FUNCTION AND COMPOSITION OF THE INTERNSHIP COMMITTEE

It shall be the function of the GSPP Internship Committee Chair to review the acceptability of internship experience for each student. The Internship Committee is chaired by the Director of Clinical Training, and is comprised of the core Psy.D. faculty.

PROCEDURES FOR INTERNSHIP APPROVAL/POLICY ON EQUIVALENCE

1. Approval from the Internship Committee for proposed internships should be sought as soon as possible, **no later than** the first week of the Spring Quarter the year the internship is to start.

2. If the proposed internship is APA or APPIC approved, the student need only turn in a copy of the acceptance letter from the agency.
3. **For all other proposed internships**, more detailed information is required. **Two** copies of a written internship proposal must be submitted (one to the Director of Clinical Training and one to the advisor) documenting **point by point** how the training program meets or deviates from each of the criteria spelled out in the Clinical Internship Guidelines which follow. All available descriptive material from the agency should be included. (Where no such material is available, the student, in conjunction with the agency coordinator, will have to prepare an appropriate description of the proposed internship.) It is the responsibility of the student to specify in writing how the internship meets his/her training needs. Students are advised to consider the ramifications of non-APA/APPIC-approved internships. These include the need to document equivalence for such agencies as the National Register of Health Service Providers in Psychology and some possible limitations for future careers (e.g. the Veterans Administration requires that both the doctoral program and the internship be APA/APPIC approved).

If there is any doubt as to how a given internship conforms to the guidelines or if there are deviations from the guidelines, approval should be sought before the student makes a commitment to the internship. **A student who accepts an internship without prior approval runs the risk of not being accorded internship credit by the GSPP.**

4. Equivalence may be granted for already completed training for a student who has been enrolled as a doctoral candidate in a clinical psychology graduate program and, while a candidate, satisfactorily completed an APA/APPIC approved internship within the five years prior to enrollment in the Graduate School of Professional Psychology. The student requesting equivalence must 1) document status in the previous graduate program, 2) provide a description of the internship and 3) document satisfactory completion of the internship. Proposals for prior internship credit should be brought to the Internship Committee soon after enrollment in the GSPP. The internship committee will review each application for equivalence and notify the student of the acceptability of the proposal.

5. Practicum experience or employment cannot be substituted for the internship.

6. The Internship Committee decides only on fit with guidelines and the overall quality of internship programs. This committee is not responsible for whether a given internship meets a specific student's training needs. This is the responsibility of the student in conjunction with his/her advisor.

7. If in doubt speak with Director of Clinical Training or your advisor.

**INTERNSHIP COMPLETION/GRADUATION**

For a student to walk in the August graduation ceremony, the clinical internship and all requirements must be completed by August. Students will receive a diploma at the ceremony, if they have completed all requirements. If the internship will end between graduation and August 31st and the internship site has verified completion in writing by September 10th, students will receive the diploma in September. This policy is subject to APA guidelines, and may be subject to change. If your internship ends after graduation through August 31st, please be in contact with Samara. If the internship is finished on or after September 1st, the diploma will have a November date.

Please supply GSPP with any evaluations provided by your internship site. Ideally, the site will send us a copy; however, they don’t consistently send them to us. GSPP must have evaluations of students prior to graduation.
**CRITERIA FOR A CLINICAL INTERNSHIP**

The guidelines below are divided into two groups: those that constitute minimum criteria and those that are strongly recommended in addition to the minimum.

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<th>Duration</th>
<th>Minimally Acceptable</th>
<th>Highly Recommended</th>
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<tbody>
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<td></td>
<td>1. The internship should be full-time for one calendar year or half-time for two calendar years (at either one or two different agencies).</td>
<td>1. It is highly desirable that the internship be full-time for one calendar year or two years at part time at one agency.</td>
</tr>
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</table>

| Coordination      | 2. An internship must have a clearly designated psychologist staff member who is responsible for the integrity and quality of the training program. | 2. It is desirable that the clearly designated internship coordinator or director have extensive experience in professional training. It is further desirable that this person's qualifications include ABPP diplomate status, Fellow status in appropriate APA Divisions or other qualifying credentials. |

| Role Model        | 3. The internship should include exposure to a variety of psychologist role models, i.e. a minimum of three full-time psychologists licensed or certified. | 3. It is especially desirable that psychologist role models include women and minority persons as well as men. It is further desirable that various clearly defined theoretical viewpoints or an intensive, in-depth exposure to a dominant viewpoint. |

| Other Disciplines | 4. The internship must include opportunities for professional interaction with members of other professional disciplines. | 4. It is desirable that there be exposure to a wide range of other professions and collaboration with members of such professions. |

| Number of Trainees| 5. An acceptable internship should have a minimum of two trainees at the internship or postdoctoral level of training. | 5. At least 3 or more trainees is desirable. |

| Descriptive Material | 6. The internship agency must develop written descriptive material in which philosophy, goals and content of the training program are explicitly formulated and which is made available to prospective trainees. | 6. It is desirable that the descriptive material spell out the amount and kind of required and elective experiences that constitute the internship program. |

<p>| Range of Activities | 7. The internship should provide supervised experience in a range of activities in the areas of assessment applied research, program administra- | 7. Additional desirable areas of supervised experience include... |</p>
<table>
<thead>
<tr>
<th>Minimally Acceptable</th>
<th>Highly Recommended</th>
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<tbody>
<tr>
<td>and constructive intervention. The program should take into account the varied</td>
<td>tion and the learning of supervisory skills.</td>
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<tr>
<td>patterns of prior graduate training and experience as well as future goals of</td>
<td></td>
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<td>specific trainees.</td>
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<tr>
<td><strong>Supervision</strong></td>
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<tr>
<td>8. Required is a minimum of two hours of regularly scheduled face-to-face,</td>
<td>8. Additional individual and supplementary group supervision well beyond the</td>
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<td>individual supervision per week with the specific intent of dealing with direct</td>
<td>minimum level as well as various seminars is highly desirable.</td>
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<td>clinical services rendered by the intern. There must also be at least two additional</td>
<td></td>
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<td>hours per week in learning activities such as:</td>
<td></td>
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<tr>
<td>a) group supervision.</td>
<td></td>
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<tr>
<td>b) additional individual supervision.</td>
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<tr>
<td><strong>Supervisors</strong></td>
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<tr>
<td>9. All supervisors shall be competent and experienced in the areas which they</td>
<td>9. Supervisors should be licensed and currently functioning in those areas</td>
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<tr>
<td>supervise. Over the course of the internship the majority of the supervision</td>
<td>which they supervise. During the year it is also desirable that some secondary</td>
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<td>should be provided by licensed psychologists.</td>
<td>supervision be given by members of other professionals who are experienced,</td>
</tr>
<tr>
<td></td>
<td>competent and currently performing in the specific area being supervised.</td>
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<tr>
<td><strong>Intern</strong></td>
<td></td>
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<td>10. At least three major evaluation sessions should be held to inform the intern</td>
<td>10. More frequent evaluative sessions, spaced over the course of the year,</td>
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<td>of her or his progress, the first to occur no later than the midpoint of the</td>
<td>are recommended, the first to occur within the first quarter of the program.</td>
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<td>program. Feedback should be designed to facilitate the trainee's change and</td>
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<td>personal/professional growth.</td>
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<tr>
<td><strong>Program</strong></td>
<td></td>
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<tr>
<td>11. The internship agency is expected to show evidence of mechanisms, and their</td>
<td>11. It is highly desirable that there be evidence of responsiveness to feedback</td>
</tr>
<tr>
<td>utilization, for ongoing evaluation of the effectiveness of the internship program</td>
<td>in effecting changes in the internship program over time.</td>
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<tr>
<td>by both agency staff and interns.</td>
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<tr>
<td><strong>Facilities</strong></td>
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<td>12. Facilities such as office space, clerical support, recording equipment, library</td>
<td>12. Facilities and equipment should be at least equivalent to those provided to</td>
</tr>
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<td>resources, etc. should be adequate.</td>
<td>other disciplines in the agency.</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>Minimally Acceptable</td>
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<td>-------------------------</td>
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<tr>
<td>13. Administrative support for the internship program should be apparent in terms of adequacy of resources and the willingness to budget specifically for training operations.</td>
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<td>13. There should be evidence of willingness to reward the training activities of the staff with raises and promotion.</td>
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<tr>
<th>Feedback</th>
<th>Minimally Acceptable</th>
<th>Highly Recommended</th>
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<tbody>
<tr>
<td>14. Written feedback to the graduate program regarding the trainee’s progress is required.</td>
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<tr>
<td>14. It is desirable that feedback to the graduate program include comments on the adequacy of the graduate program in preparing the trainee for the internship. Written feedback regarding the trainee’s progress is recommended twice a year.</td>
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<table>
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<tr>
<th>Feedback</th>
<th>Minimally Acceptable</th>
<th>Highly Recommended</th>
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<tbody>
<tr>
<td>15. Feedback to the graduate program by the intern regarding the scope of the training experience, the quality of the supervision and the degree to which the training needs were met by the internship experience are highly recommended. Please be specific.</td>
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<tr>
<th>Stipend</th>
<th>Minimally Acceptable</th>
<th>Highly Recommended</th>
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<tr>
<td>16. Indicate if the internship is paid or unpaid. If a stipend is given, indicate the amount paid. Highly recommended to accept only internships with stipend and benefits.</td>
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</table>

**ATTENTION:** In the event that a student fails all or part of the predoctoral internship, the GSPP faculty will make a determination as to the student’s standing in GSPP. Failing all or part of the predoctoral internship may reflect so serious a deficiency in performance that the faculty could decide to terminate the student from GSPP. (Adopted 8/77; revised 7/02)
APPENDIX H
DOCTORAL PAPER AND INSTITUTIONAL REVIEW BOARD (IRB)

DOCTORAL PAPER

Each student is required to complete a publication-quality doctoral paper prior to graduation from the program. This requirement is designed to serve several purposes. The structure of the doctoral paper is meant to provide both a standard of excellence for a scholarly contribution on the part of the student, as well as a significant degree of flexibility by which the student may make such a contribution. The doctoral paper is meant to serve as a vehicle by which the student can make an original and scholarly contribution, in an area of his/her choosing, to the field of professional psychology. In doing so, it serves as an opportunity to provide in-depth learning in an area of the field that is of particular interest to the student. The paper also serves as a demonstration of the student’s mastery in professional practice areas related to the review, integration, articulation and advancement of knowledge in the field of professional psychology.

The doctoral paper can take a variety of forms. In the past, most students have pursued a scholarly, theoretical paper that: reviews, integrates and synthesizes different lines of research or bodies of thought within an area of clinical concern; draws conclusions about the issues; and makes an original contribution to the field. (Thus, a simple review of the literature on a topic is not considered adequate to meet the requirements of the doctoral paper.) More recently, more students have chosen to pursue the option of an empirical paper. Students choosing to carry out an empirical study for their doctoral paper need to comply with the ethical guidelines for human research, including receiving approval by the DU Institutional Review Board (IRB). See 3.16 for more information.

Doctoral papers should follow APA style guidelines, as specified in the current APA Publication Manual. While the length of doctoral papers will vary, depending on the nature of the topic and the type of journal anticipated for submission, the expectation is that the paper be in the range of 30 to 50 pages, double-spaced, including tables, figures and references.

PUBLICIATION CREDIT:
Issues of authorship or co-authorship on publications resulting from doctoral papers must be resolved prior to initiating the project, but can be revisited as circumstances change. For more information, please reference the 2010 APA Ethical Principles. See excerpt:

8.12 Publication Credit
(a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed. (See also Standard 8.12b, Publication Credit.)
(b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institution position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement.
(c) Excerpt under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student’s doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate. (See also Standard 8.12b, Publication Credit.)
DOCTORAL PAPER GUIDELINES:

1. Committee/Content
   a. Student interviews possible Chairs and selects a doctoral paper Chair
      i. There is a list of available Chairs in the mail room (Bulletin Board)
   b. Student emails the Research Committee Chair (Dr. Kim Gorgens at kgorgens@du.edu) with the Chair name and a second faculty committee member is assigned via group email
   c. With the help of the doctoral paper Chair, the student selects a third doctoral paper reader from the community
      i. This third committee member must hold a doctorate in psychology, or a related field

2. INITIAL Paperwork
   a. With topic agreement from the committee of three, the student completes and solicits signatures on the Doctoral Paper Committee Form (available on WebCentral, GSPP tab, PsyD Student Forms)
      i. Please select the category/content specifiers carefully when completing this form—consult with your Chair if you have questions
   b. The student scans and emails a PDF of the completed Doctoral Paper Committee Form to Judy Farmer at jfarmer@du.edu

3. Proposal Meeting/Capstone Conference

4. FINAL Paperwork
   a. ***In Advance of Graduate Studies Graduation Deadlines*** (http://www.du.edu/currentstudents/graduates/graduationinformation.html)
      At the conclusion of the CAPSTONE CONFERENCE, the student solicits signatures on their Doctoral Paper Title Page (a template is available on webCentral at https://webcentral.du.edu/cp/home/displaylogin, GSPP tab, PsyD Student Forms)
   b. The student scans and emails a PDF of the signed Doctoral Paper Title Page to Judy Farmer at jfarmer@du.edu

5. Submission of Completed Paper to Digital DU
   a. ***In Advance of Graduate Studies Graduation Deadlines*** (listed on calendar by year at http://www.du.edu/currentstudents/graduates/graduationinformation.html)
      After successfully completing your CAPSTONE CONFERENCE and any revisions, you must officially submit your doctoral paper to the University of Denver Libraries so that it can be uploaded to Digital DU (an open access platform at www.digitaldu.coalliance.org or www.library.du.edu →digital collections → Digital DU)
      i. Student and Chairs should read and sign the SUBMISSION AGREEMENT* available on webCentral at https://webcentral.du.edu/cp/home/displaylogin, GSPP tab, PsyD Student Forms)
         1. *In some instances student doctoral papers may not be appropriate for submission to the public portal and may require special handling or SUPPRESSION
            a. In rare cases, where the doctoral paper includes proprietary or confidential information, your doctoral committee will request that you SUPPRESS your submission and you will indicate that on the SUBMISSION AGREEMENT. In the case of SUPRESSION, you will submit your work electronically to the Library and it will be retained and listed but will not be accessible to anyone without explicit permission from you.
ii. Student sends the signed SUBMISSION AGREEMENT, **Doctoral Paper Title Page** and doctoral paper as a PDF to the library at digital-gspp@du.edu

6. Graduation Eligibility

***In Advance of Graduate Studies Graduation Deadlines***

(http://www.du.edu/currentstudents/graduates/graduationinformation.html)

Judy Farmer will notify Graduate Studies that the student has successfully completed their doctoral paper AFTER receiving BOTH the PDF of the signed **Doctoral Paper Title Page** and notice that your doctoral paper has been uploaded.

**Doctoral Paper/Capstone Thesis Search Instructions**

1. Using your 87 ID number, sign in to www.ectd.du.edu
   a. If you are unable to login, send an email with your 87 number and this request to Judy Farmer at jfarmer@du.edu and she will manually enroll you

2. Search indexed papers* using category or content search terms
   a. If you have any problems with the system, please email Judy Farmer at jfarmer@du.edu with as much information about the problem as possible
   b. If applicable, include a screen shot of error messages

*Papers are being scanned and added to this electronic system by Penrose Library. Only papers submitted electronically are searchable using search terms (2012+).

**Doctoral Paper Draft Deadlines:** It is advised that if a student wants to graduate in August, the first draft should be submitted the January before (the absolute last draft deadline is March 1st). If a student wants to graduate in June, the first draft is due the prior November. Please note that your final paper MUST be submitted electronically by the July deadline (see deadlines above or on registrar page) in order to qualify for August graduation. Please work closely with your chair to establish realistic deadlines.

**Doctoral Paper Etiquette:** Plan ahead, know when your paper is due, allow a faculty member at least four weeks to review each draft, do not page a committee member over weekends and holidays, do not assume that your first draft is your last draft, hire an editor if you need one, and do not invite the entire family to graduation when you just turned in your first draft to a faculty member three days before the deadline. For final paper sign off, it is advised that students know their committee’s vacation schedules.
PROCEDURES FOR RESEARCH PROPOSAL REVIEW (IRB)

REVIEW PROCEDURE
All studies and experiments involving human subjects conducted by Professional Psychology faculty, staff or students, under the auspices of the GSPP should go through the Office of Sponsored Programs, and must gain prior approval from the DU’s Institutional Review Board (IRB). The committee is comprised of faculty members at DU. Anyone who conducts studies or experiments involving human subjects without such approval will be personally responsible for legal or other difficulties that may consequently arise. Refer to the research compliance website. (http://www.du.edu/orsp/research_compliance.html) This page contains links to the IRB site as well as the educational protocols for performing research at the University. (Persons planning to solicit grant funding for research proposals must contact the Office of Sponsored Programs early for general procedures, budgetary expectations and policies regarding protection of human subjects. The Office of Sponsored Research Programs (OSRP) is the grant contracting office for the University. Grant-funded proposals involving human subjects receive routine review through Office of Sponsored Programs procedures.)

You are encouraged to consult with Laura Meyer (x13203) for research proposal packets and supporting procedural guidelines. Ragnar Storaasli (x13866) is the alternative representative and should be consulted if Laura is unavailable. Emily Caldes of OSRP is very helpful, and students are encouraged to contact her at IRBAdmin@du.edu or 303-871-4052. Emily will come down to GSPP once a month to answer questions.

Students are referred to current “Ethical Principles of Psychologists and Code of Conduct” (American Psychologist, December, 2002) for relevant principles and standards applicable to carrying out research, including but not limited to: planning research (6.06); responsibility (6.07); compliance with law and standards (6.08); institutional approval (6.09); research responsibilities (6.10); informed consent to research (6.11); dispensing with informed consent (6.12); informed consent in research filming or recording (6.13); offering inducements for research participants (6.14); deception in research (6.15); sharing and utilizing data (6.16); minimizing invasiveness (6.17); providing participants with information about the study (6.18); honoring commitments (6.19); care and use of animals in research (6.20); reporting of results (6.21); plagiarism (6.22); publication credit (6.23); duplicate publication of data (6.24); sharing data (6.25); professional reviewers (6.26).

According to the guidelines set forth by the University’s Institution Review Board, the following elements are required in informed consent:

1. A fair explanation of the purpose of the study; the procedures to be followed, including an identification of those which are experimental; and an identification of the individuals performing the procedures and their highest degree obtained;
2. A description of the possible immediate and long-term discomforts, hazards, and risks;
3. A description of the benefits to be obtained for the subject and/or humanity;
4. A disclosure of appropriate alternative procedures or drugs that would be advantageous for the subject;
5. An offer to answer any inquiries concerning the procedures at any time;
6. An instruction that the subject is free to withdraw his/her consent and to discontinue participation in the project or activity at any time without prejudice;
7. A reassurance that the identity of the subject will not be disclosed without the subject’s consent;
8. If the subject is a minor (less than 18 years of age), both parents or guardian(s) must sign the Informed Consent Form;
9. If the subject is between the ages of 12 and 18, provisions should be made for him/her, in addition to parents, to sign where appropriate.

Some of these elements are irrelevant to most psychological research, which does not usually involve drugs or medical procedures.

Common problems in proposals are:
1. Failure to include a right to withdraw statement (see #6 above)
2. Failure to include the name, highest degree, and telephone number of the faculty supervisor and the individuals actually conducting the research
3. Study descriptions that are too brief or are grammatically flawed
4. Failure to obtain consent from children who are 12 years or older (consent from children from 8-12 years is encouraged.)

Common problems in feedback letters are
1. Overly abbreviated descriptions of the study and results
2. An excessive reliance on psychological terms
3. Grammatical errors

Once a student completes the process, they need to make sure that Emily Caldes, IRBAdmin@du.edu knows how to contact you. The project is only approved for one year and must be renewed each year. Emily needs a current mailing address even if you are on internship, so she can mail the paperwork to you.

August 2013
APPENDIX I
MULTICULTURAL TRAINING

STUDENT TRAINING FOR WORK WITH CULTURALLY-DIVERSE POPULATIONS

Goal: To increase students’ a) awareness of culturally-diverse populations in the U.S.A. and b) professional skills to help individuals within a culturally-diverse population.

Populations include:
- Culturally-diverse populations in this document refer specifically to racial/ethnic minorities (specifically Asian, African-American, Hispanic and American Indian groups)
- Persons with a Gay, Lesbian, Transgendered or Bisexual orientation
- Persons with disabilities
- Persons with low socio-economic status

If questions arise about any given individual being of a particular population, the individual’s self-identification determines the assignment.

Form is located on the webCentral GSPP tab and then select PsyD forms.

Method of meeting the goal:

2. Required clinical experience: Minimum of 40 contact hours working as a psychology trainee with a client or clients from a culturally-diverse population. This work must be under the supervision of a clinician who is sensitive to and skilled in working with the culturally-diverse population and who guides the student to literature relevant to a greater understanding of the minority culture. This experience may be acquired at the PPC but is more likely to be feasible in a field placement. The field placement packet will contain information on the proportion of the placement’s client population in each of these culturally-diverse groups.

A student who is a member of one or more of the culturally-diverse populations described above must meet the clinical experience requirement with one of the other populations.

No students will be allowed to waive the clinical experience of the ethnicity and multicultural requirements.

If a student wishes to learn about and work with a culturally-diverse group other than those listed above, s/he may submit a petition for faculty approval. The petition must include: a clear case for the identifiability of the cultural community, a demonstration of the need for training mental health professionals to work with persons in the cultural group, a specific clinical facility where the clinical experience may be acquired, and identification of a supervisor with knowledge of the relevant literature about the culture and clinical expertise in mental health interventions within the culture.

3. Students will plan with their academic advisors during their first quarter at the GSPP regarding how the above requirements will be met. This plan is to be written and in the students’ files by the end of spring
quarter their first year at the GSPP (forms are available on the GSPP Website). The student will not be considered for advancement to preliminary candidacy if this plan is not on file in the student’s folder. Upon completion of the requirement, the supervisor of the student’s experiences with the culturally-diverse group will sign off on the proposal sheet. This verification of completion will be required for advancement to final candidacy.

(Adopted by Student-Faculty group, February 9, 1993: amended, August, 2006, July 2009)
APPENDIX J
STUDENT EVALUATION FORMS

The forms Annual Evaluation of Student, PPC Supervisor Evaluation of Student, and Field Placement Supervisor Evaluation of Student are provided are emailed to supervisors. The true documents are produced electronically and the actual results of the data are provided to the students.

Please Contact Judy Farmer, Student Services Administrator, if you have questions about evaluations at judy.farmer@du.edu.