EASTERN MICHIGAN UNIVERSITY

CLINICAL PSYCHOLOGY DOCTORAL PROGRAM

STUDENT HANDBOOK

Updated March, 2023

Contents

EASTERN MICHIGAN UNIVERSITY
DEPARTMENT OF PSYCHOLOGY
PH.D. IN CLINICAL PSYCHOLOGY

Welcome to the doctoral program in clinical psychology at Eastern Michigan University. You are a member of a highly select group of trainees on a journey that will foster the development of the specialized competencies expected of clinical psychologists. This odyssey will involve the acquisition of expert knowledge as well as alterations in you and how you experience the world. You will likely find this trek both exhausting and exhilarating; tortuous and thrilling. Periods of satisfaction and doubt are predictable. You will find the faculty, staff, and more advanced students ready to provide caring and helpful guidance as you take on this challenge.

This handbook is designed to facilitate your progress through the program. It is a mixture of official policies, recommendations, and the accumulated wisdom of the doctoral training community.

The manual supplements (but does not replace) other important published material that appears in the *Graduate Catalog*, *Graduate School Policies and Procedures*, and the *Policies and Procedures Manual of the Community Behavioral Health Clinic*. In this manual relevant portions of these sources are periodically referenced, but you should also be familiar with them to facilitate your progress through the program. The policies and recommendations contained in the handbook are modified regularly and students must abide by the current policies and procedures and not those in effect upon admission.

In contrast to staying current in terms of policy, you must follow the program of study (POS) in effect at admission unless you choose to adopt a more recent program of study by informing the Director of Clinical Training and submitting a new POS to the department and graduate school. We urge you to familiarize yourself with all current degree requirements as well as revisions of those policies. The University, the Psychology Department, and professional organizations will make periodic changes to policies to clarify or improve program procedures. Please review these documents throughout your academic career to ensure compliance. The most recent version of the handbook is available online at: http://www.emich.edu/psychology/phd_clinicalpsych.php.

Physical facility

Eastern Michigan University was founded in 1849. The University is located in Ypsilanti, which is a 45-minute drive to Detroit and Toledo and ten minutes from Ann Arbor. Our campus is located on the traditional, unceded territory of the Anishinabek, the Haudenosauneega Confederacy, the Odawa, the Peoria, and the Potawatomi people. May this land acknowledgment honor the elders and stewards of these heritages.

The University comprises five colleges, the Graduate School, and a diverse population of 14,000 students. The Psychology Department is part of the College of Arts and Sciences and is housed in the Mark Jefferson Science Complex. There are approximately 18 full-time faculty in our department, 12 of whom are core clinical faculty. Faculty biographies and contact information can be found at: http://www.emich.edu/psychology/faculty/index.php.

The clinical program also maintains the Community Behavioral Health Clinic (CBHC) located at 1075 Huron River Dr., Ypsilanti, Michigan. The clinic has six individual therapy rooms, two assessment rooms, a play therapy room, a large group room, and several flexible spaces where students can work and take breaks. Psychological services are provided to the EMU and greater Ypsilanti communities, although there is no format catchment area. This clinic supports an excellent initial training opportunity for beginning therapists supervised by licensed psychologists in the provision of low cost services for people with mental health needs.

Purpose and Aims of the Program

The purpose of the program is to train contemporary, license-eligible clinical psychologists. The scientist-practitioner model is used to produce graduates that are knowledgeable in psychological science and relevant research foundations for the practice of assessment, therapy, research, supervision and health services management. A program objective is the preparation of clinical psychologists who will be effective in supervising and managing others in multidisciplinary health service systems in a diverse society. To meet these aims, the program emphasizes requisite scientist-practitioner skills such as critical thinking, ethics, professionalism, practical clinical skills in assessment and treatment, and scholarly skills in designing, conducting, analyzing, and disseminating research that contributes to the field of psychology. Students may acquire specialty skills critical to healthcare systems, including conducting program evaluation research, developing administrative/clinical management skills, creating and evaluating programs, and supervising master's level and other behavioral technicians.

The following are skills taught in accredited clinical psychology Ph.D. programs. They are incorporated into this program to provide students with the requisite skills and competencies for a career in clinical psychology.

Practical Clinical Skills
1. Learn assessment techniques using multimodal and multimethod approaches
2. Learn evidence-based diagnostic techniques and procedures
3. Write professional evaluations, case conceptualizations, treatment plans, progress notes, and other reports
4. Develop, implement, evaluate, and revise treatment programs
5. Develop and conduct clinical case presentations
6. Utilize an evidence-based, assessment informed, psychotherapeutic approach to intervention
7. Implement evidence-based clinical practices and empirically supported treatments
8. Develop skills in treatment implementation
9. Demonstrate cultural humility and grow in multicultural competencies across all major forms of human diversity
10. Demonstrate knowledge of and adherence to the APA Ethical Guidelines for clinical practice.

General Scholarly Skills
11. Develop a critical approach to the assessment and treatment research literatures
12. Demonstrate understanding and application of the philosophical and theoretical underpinnings of psychology and implications for treatment
13. Demonstrate the ability to write a scholarly article to the standard of the peer review process

14. Demonstrate the ability to present research in a public forum

Research Skills
15. Demonstrate knowledge of research related to clinical assessment and treatment
16. Demonstrate knowledge of treatment outcome research and implications
17. Design, conduct, analyze, and disseminate research that contributes to the field of psychology

Training and Supervision Skills
18. Demonstrate knowledge of models and methods of clinical supervision
19. Develop training programs in assessment and treatment skills for other clinicians
20. Supervise master's level students in assessment and treatment in a tiered supervision model
21. Develop and/or deliver an undergraduate course in psychology

Student Opportunities Essential to Meet Program Aims
22. Practice assessment and treatment skills in a closely supervised environment through an onsite clinic and then with external licensed psychologist supervision in the community
23. Work with and be supervised by faculty who have teaching, research, and clinical assessment, intervention, supervision and consultation expertise
24. Use state of the art methods and technology in research, teaching and clinical intervention
25. Participate in a diverse, collegial atmosphere that welcomes and values diverse perspectives and prepares students to analyze and apply the current literature

The following are additional specialty skills available in the program:

Managerial and Healthcare Systems Skills
26. Learn administrative/clinical management and supervision skills - clinical triage, case management, organizing multidisciplinary teams, and developing reports

Specific Program Aims

Aim 1: Train students in Research Design, Methodology, and Statistics
● Demonstrate breadth of knowledge of contemporary statistical concepts, procedures, and major research designs, along with depth of knowledge of research literature, strategies, and challenges unique to an area of specialization
● Design and conduct sound research and use appropriate statistical techniques to analyze results
● Demonstrate knowledge and implementation of ethical considerations in human subjects research
● Demonstrate the ability to write a publishable article and present research or other scholarly work in a public forum

Aim 2: Train students in the clinical skills of assessment, diagnosis, intervention, and supervision
● Demonstrate broad knowledge and critical analysis of research in clinical assessment, diagnosis, and intervention

- Learn and apply evidence-based diagnostic methods
- Learn and utilize evidence-based practices and empirically supported treatments
- Write professional evaluations, case conceptualizations, treatment plans, progress notes, and other reports, as well as develop and deliver case presentations
- Demonstrate knowledge and correct use of the APA Ethical Guidelines for clinical practice
- Demonstrate knowledge of models and methods of clinical supervision
- Participate in a tiered supervision model as a supervisor in training

Aim 3: Train students in the knowledge and skills necessary to conduct themselves professionally and to be prepared for careers in clinical psychology
- Demonstrate competence in teaching a course at the undergraduate level
- Provide clinical services that benefit the community
- Demonstrate humility and growing competence in cultural and individual diversity as it relates to the practice of psychology
- Demonstrate active participation in research teams, the department, and the community
- Become involved in professional organizations, advocacy groups, and/or social justice efforts that advance values consistent with the profession of psychology

Overview of the Curriculum

The doctoral program is a full-time, full residency program designed to be completed in five to six years. No part time students will be accepted. The curriculum is designed to meet or exceed state and national guidelines for licensing and accreditation.

State licensing. Licensure information for Michigan can be found at: https://www.michigan.gov/lara/0,4601,7-154-89334_72600_72603_27529_27552---,00.html. Note that licensure requirements are regulated by each state and students should review the requirements where they expect to practice.

Accreditation. The program is currently accredited by the Commission on Accreditation (next site visit is expected in 2027) of the American Psychological Association. To become accredited, clinical psychology Ph.D. programs must comply with relevant standards.

Questions related to the program's accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
    750 1st Street NE
    Washington, DC 20002
    Phone: (202) 336-5979 / E-mail: apaaccred@apa.org
    Web: www.apa.org/ed/accreditation

The program provides extensive training in an onsite clinic, staffed and supervised by our faculty and adjunct supervisors. The program benefits from additional off-site clinical practicum training to diversify students' learning experiences. Upon completion of the master's degree, students fulfill requirements for initial master's level licensure in the state, the Michigan Temporary Limited License in Psychology (TLLP) en route to the Ph.D. A unique feature of our doctoral program is the opportunity for students to acquire specialization in applied behavior analysis or to sample from a menu of courses that employ multi theoretical orientations.

Practicum experience: In the first year of the program, doctoral students spend several hours per week at the on-site clinic participating in group supervision, learning about the clinic, and shadowing other therapists.. In the second year of the program, students participate in a full 500-hour (direct and indirect) practicum experience, seeing clients and conducting assessments within our onsite community clinic. It is expected that students will amass 100 hours of direct contact, 100 hours of supervision, and 300 hours of support activities during this first internal practicum. Approximately 100 direct contact hours are expected as a foundation for external practicum placements. Students attend group and individual supervision for at least eight hours per month. In the third year of the program, students may continue to see 1-2 therapy and/or assessment clients at our onsite clinic and continue to participate in group and individual supervision. Fourth year students may request to continue seeing clients at the clinic, but are not expected to do so. Third and fourth year students secure offsite practica at numerous community agencies in our area with the assistance of the practicum coordinator. Students beyond the fourth year may also engage in external practicum training while they complete their milestone projects in preparation for internship.

For extra external practicum experiences (year four and beyond) to be program sanctioned and verifiable for internship applications, the following conditions must be met: DTC pre approval, face-to-face supervision of at least four hours per month by a fully licensed psychologist, clinical hours that do not exceed 20 per week, mentor confirmation of progress on major program milestones, supervisor evaluation of competence after each 250 hour training block (each evaluation based at least in part on direct observation), and enrollment in the advanced external practicum course or continuous enrollment credit if beyond the fourth year in the program.

By virtue of their differing interests and experiences, students will accrue a range of direct and indirect clinical training hours. Most students will experience 400 or more hours of direct client contact prior to applying for internship, with a total of approximately 2-3 times those hours overall, including support hours of all kinds. The program emphasis is quality training as well as hours of practice and supports. Routinely, approximately 80% of these hours will be from therapy sessions with the other 20% from formal assessments (unless a student is specializing their training in psychological assessment where the numbers can be reversed). It is recommended that students complete at least ten integrated assessment reports prior to applying for internship. Most of these experiences will be gained through external placements. Assessment oriented internships may seek a significantly greater number of integrated report experiences, often in speciality areas, prior to applying. Students consult with mentors and licensed psychologists in these subfields to identify useful benchmarks to guide their practicum training decision making.

Curriculum Requirements

The Clinical Doctoral program requires the completion of 90 graduate credit hours. The master's degree is earned en route to the doctoral degree resulting in predoctoral M.S. and doctoral programs of study found in the Graduate Catalog [Graduate Catalog](). Students in the doctoral program complete a master's thesis or a first year project if a previously completed master's thesis is determined to be equivalent by two DTC faculty.

All courses require a B or better grade. All courses in which less than a B is earned will be repeated. Students may not take the same course more than twice.

The supervision seminar prerequisites include completion of the 500-hour (direct and indirect) onsite clinic practicum.

Other Program Requirements

1. Doctoral Prepracticum onsite - up to 5 hours per week for the first year. Students participate in clinic orientation, group supervision, video watching, and shadowing to learn more about clinic operations and beginning clinical skills.

2. Internal Practicum -150 hours direct contact. Starting fall of the second year, doctoral students begin to provide therapy for 1-2 clients and build to 3-5 client contact hours per week. Students may conduct supervised assessments as part of this training. The focus of these experiences is growth in and depth of understanding of professionalism, facilitative interpersonal skills, assessment, case conceptualization, diagnosis, treatment planning, report writing, and continuous assessment. In year three, doctoral students may continue to see 1-2 clients at the onsite clinic and they provide tiered supervision for one case with a new student clinician for one semester.

3. External Practicum - 300-400 direct contact hours (500 total hours annually). Ph.D. students learn through the provision of clinical services under doctoral psychologist supervision 20 hours per week for two full years.

4. Master's thesis. Incoming students who completed a thesis project at another institution can request to have their thesis evaluated for equivalence. If the project is determined to be equivalent and a waiver is granted, a first year research project contracted and completed with the research mentor is required.

5. Qualifying examination paper. Students complete an extensive analytical literature review organized around several major topics in an area of study they choose, or they may write a grant, review paper, or empirical article for submission in accordance with the qualifying exam guidelines.

6. Service to the university through the practice of psychology in areas such as undergraduate teaching, unpaid clinical service at the EMU Counseling and Psychological Services (CAPS) Center, grant supported psychological services in the community, and research assistance in the Department of Psychology labs.

7. Doctoral dissertation. Students complete an original research project designed to make a contribution to the literature. Typically a dissertation proposal follows successfully passing the qualifying paper exam; however, under special circumstances (e.g., extended time needed for data collection) a student may petition the Doctoral Training Committee to complete the dissertation proposal prior to proposing the qualifying paper.

8. Clinical Predoctoral Internship (2,000 hours) – attending an APA accredited internship is emphasized due to benefits of completing the degree at a high quality site and the consequences of participating in an unaccredited internship. At a minimum the internship must be completed within an APPIC member program. Passing the qualifying paper, successfully proposing the dissertation, and receiving approval from the Doctoral Training Committee faculty are requirements to apply for internship.

Petitions

Any student may petition the Doctoral Training Committee for exemption from any of the above requirements, except where the Committee does not hold powers of exemption or change.

It should be noted that neither the DTC nor the Department creates policy with its response to any specific petition, no matter what the response. No response to any petition constitutes a binding precedence. Moreover, neither the Committee nor the Department is obliged to defend its ruling, although an explanation will be typically provided.

Graduate students may petition the Committee for an exception to any of the policies or regulations specified in this handbook. Petitions are intended to allow students the opportunity to deal with unusual or extraordinary events, particularly circumstances beyond their control that would penalize them unfairly. It should be kept in mind, however, that a hallmark of fairness is the uniform application of the same standards and deadlines to all students.

A petition should clearly state the specific nature of the exception or special consideration being requested and provide a complete but concise justification. If the request involves the extension of a deadline, a proposed new deadline date should be indicated. Petitions must be submitted in the sequence listed below:

1. The student must first submit the petition to the student's mentor. The mentor should indicate whether the mentor endorses the student's request, and why.

2. The petition must next be submitted to the director of clinical training. The director of clinical training should also indicate whether the director of clinical training supports or does not support the student's request, and why.

3. The petition should then be forwarded to the doctoral training committee. The doctoral training committee will review the petition and offer its recommendation for approval or disapproval.

A written response to a petition will usually be sent to the student within ten (10) working days from its review by the doctoral training committee. The original petition will be retained in the student's file. Petitions that are lacking required documentation will be returned to the student, and will not be considered until all documentation has been received.

Scope and Sequence

To help students plan to meet program requirements, a suggested course sequence is offered. Students may refer to these recommendations as they register for classes each semester. Note that course offerings vary throughout the year and across years and may necessitate taking courses out of sequence. Students should plan their schedules with their mentors to fulfill all of the course requirements in a timely manner. It is recommended that students take required courses when they are available. Students with transfer credits should consult with their mentors to determine which courses to take when they have already fulfilled certain requirements. In general it is useful to consider courses recommended for the same semester in a subsequent year if they do not have prerequisites that have not been met.

	Year 1	Year 2	Year 3	Year 4	Year 5
Fall	600 Statistics I 743 Psychopathology 751 Interpersonal Tx 883 Doc Seminar	636 Cog/Aff/Social *(if offered)* 640 Developmental 690/1/2 Thesis Credit(s) Assessment/Treatment / and/or Individual Difference course	636 Cog/Aff/Social *(if not taken yet)* 683 Practicum I 885 Supervision sem Assessment or Treatment Elective	788 Advanced Prac 896/7/8 Dissertation credit(s) General elective(s) *(if needed)*	894 Internship 767 Continuous Enrollment *(if continuing practicum or maintaining student status prior to internship)*
Winter	601 Statistics II 605 Research Design 627 Beh/Other EB Tx Adults, or 720 Child/Family EB Tx 762 Cognitive Assessment or 670 Ethics	554 History and Systems *(if no undergrad equivalent)* 633 Cognitive Neuro *(if offered)* 807 Teaching Seminar Assessment/Treatment elective and/or Individual Difference Course	633 Cognitive Neuro *(if not taken yet)* 684 Practicum II 799 Independent Research-Quals General Elective(s)	788 Advanced Prac 896/7/8 Dissertation credit(s) General elective(s) *(if needed)*	894 Internship 767 Continuous Enrollment *(if continuing practicum or maintaining student status prior to internship)*
Summer	670 Ethics and/or 762 Cognitive Assessment and/or 888 Diversity	888 Diversity and/or 703 Clinical Org Mgmt *(if offered)*, or General Elective	703 Clinical Org *(if not taken yet)* 788 Advanced Prac General Elective	788 Advanced Prac 896/7/8 Dissertation credit(s)	894 Internship 767 Continuous Enrollment *(if continuing practicum or maintaining student status prior to internship)*

Registration

Students should complete a registration form with their mentor each semester
-https://www.emich.edu/psychology/documents/psych_grad_student_reg_form_enabled.pdf?v=2020-08-18T18:15:21Z. The form is submitted to the program assistant for processing, review, and signature of the DCT. This process helps to ensure that students make steady progress through the curriculum and facilitates procurement of a course registration number for independent research/study, thesis, or dissertation credits. Low and continuous enrollment is also secured via this process.

Repeating courses can impact financial aid eligibility. However, this does not apply to credits for independent research/study, thesis, dissertation, practicum, and continuous enrollment. Students are encouraged to check with the Financial Aid Office to understand all possible consequences of repeating courses.

Students may only repeat graduate courses once. Failure to pass a course with a grade of B or better in two attempts will result in dismissal from the program. Students must be continuously enrolled in six credits for the fall and winter semesters and one credit in summer when receiving the fellowship until they have finished all courses except dissertation and internship. They can then register for fewer credits and complete the Low Enrollment form to defer student loan payments and maintain full student status (https://www.emich.edu/psychology/documents/doctoral-student-low-enrollment-form.pdf?v=2020-08-18T18:15:21Z). Low Enrollment forms must be submitted with a current program of study to the program assistant for DCT approval, and they are then submitted to the Graduate School to complete the registration. If students are not registered (at least six credits per regular semester or portion of a semester and one in summer), they will pay FICA, a federal payroll tax. If students are beyond the fourth year and no longer receiving a fellowship, and they have no coursework remaining other than that related to program milestones, they may request Continuous Enrollment to maintain their student status prior to the start of internship utilizing the same form. Students also enroll in Continuous Enrollment credits when they are engaged in advanced practicum training beyond the fourth year that they would like to include in their internship applications.

Being enrolled in the program and registering for practicum credits for external clinical training experiences allows students to have liability coverage through the university when they work with clients through those experiences.

If students have not enrolled in classes for two years, they must re-enroll with Graduate Admissions prior to registering for any credits.

Fellowships

To help ensure the success of students in the program, every student has received a doctoral fellowship. The fellowship stipend is $16,500 per year and has been sustained, but is not guaranteed, for four years for new EMU graduate students. Students who have previously completed two years in one of our clinical master's degree programs have received up to three years of doctoral fellowship support. The fellowship includes tuition remission (up to 90 credits). Students receiving three years of funding will have up to 60 credits of tuition remission. Students are responsible for mandatory registration fees (approximately $50) and other miscellaneous university fees each semester. The total number of approved transfer credits will be subtracted from the 90 credits of tuition remission allocated for those with prior graduate education. The doctoral tuition remission cannot be used for undergraduate courses.

Students will be matched with a faculty mentor during the admissions process. Fellowships require 20 hours per week of professional obligations during the fellowship award period. Continued support and renewal requires maintenance of a 3.60 or higher GPA, satisfactory progress toward degree completion, and adequate performance evaluations. The fellowship is a 12-month position. Students are permitted up to four weeks of vacation each year. Students should submit requests for vacations to their mentors at least one month in advance of the vacation to ensure it fits with the mentor's schedule. Students should *not* make travel plans without first consulting with their mentor.

The doctoral fellowship does not include health insurance. Students may purchase health insurance through the university if desired. This is a requirement for international students. The doctoral fellowship also does not include the new student fee (approximately $200.00) and any late registration or late payment fees. Students are responsible for any other non-registration related fees, such as any fees assessed for dropping or switching classes (e.g., program adjustment fee).

The main intent of the fellowship is to provide the time and support essential for the professional development of the Fellow into a competent doctoral level psychologist. Since such training involves classroom instruction, research endeavors, and clinical experiences, duties of the fellowship are designed to provide relevant training and experiences in all these areas. In their first and second years, fellows are expected to teach undergraduate psychology lab sections and to provide research assistance in their mentor's lab. For years three and four, students continue to complete an average of 20 hours per week of fellowship responsibilities in consultation with their mentor, which may include independent classroom teaching, providing service to the university at EMU Counseling and Psychological Services (see details below), grant-supported service and research tasks in the community, research internal to the department, or some combination of these options. Mentors recognize the various responsibilities and will adjust research lab research fellowship hours as appropriate (e.g. 8-10 of the required 20 fellowship hours will be for teaching responsibilities). Students are expected to continue to progress on their milestone projects and participate in research in their labs even after completing fellowship hours.

There are unique opportunities to contribute to grant supported research as part of the fellowship. These types of experiences are particularly valuable to internship and postdoctoral training sites and sometimes offer additional remuneration.
NOTE: Students MUST be registered EVERY SEMESTER for which they have a fellowship. Additionally, students must register for **six credits each semester (Fall/Winter) and 1 credit in Summer)**. If students do not have any remaining course requirements except for dissertation and internship, they can enroll in PSY 767 Continuous Enrollment (1 credit hour). However, these credits do

not count towards the 90 required credits for graduation, so students might consider taking independent research/study/thesis/dissertation credits instead.

Failure to register for a semester will result in the termination of fellowship pay. The Graduate School will not pay for registration late fees, and students will be responsible for this portion of their bill should the fellowship be reinstated.

Dropping Classes and Terminating Fellowship
If students choose to drop classes or withdraw from the program, please note the following Graduate School policies:

☐ Drop/withdraw from courses after the 100% refund time period: Course schedule adjustments must be made before the end of the 100% refund period, early in the semester – check registrar calendar for exact date. The University does not recoup any funds – similar to a student losing money when a late drop or withdrawal occurs, so too does the Graduate School. If students drop any classes after the 100% refund period, they pay for the course. The amount is billed to the student's university account.

Another option instead of course withdrawal at the end of a semester would be to discuss taking an Incomplete grade, if appropriate and criteria are met, with the instructor. This will save the tuition and enable course completion without subsequent course re-enrollment.

☐ Termination of position: If students resign or are terminated from a doctoral fellowship position, their stipend/income will stop as of the date of termination noted on the Personnel Action form or date of their letter of resignation. Students may resign/be terminated yet finish the course work for the semester with prorated tuition/fee expenses (based on the number of weeks remaining in the semester/term) charged to their student account since the position no longer covers the tuition award.

☐ If resignation/termination occurs and the student also withdraws from all courses, then not only is the stipend discontinued but the student must repay a tuition/fee prorated amount with W-grades appearing on the transcript for all enrolled courses.

Mentor Relationship
The fellowship mentor provides training and guides the student in developing their own research plans for the master's thesis, qualifying exam, and dissertation work (see Appendix A – Guidelines for Advisors and Appendix B – Guidelines for Students for mentoring expectations). Students can expect to have weekly meetings with their mentor, particularly during their first two years in the program, and then on a frequent, as-needed basis. Students are expected to attend research lab meetings consistently until their internship year. Students assigned to non-clinical faculty will receive additional advising from clinical faculty and clinical supervisors related to their clinical training. Students are matched with a faculty mentor based on compatible research interests upon admission and ideally the student will stay with their mentor throughout their academic career. However, students may request a change in mentor as they matriculate through the program. We encourage students to stay with a mentor for a minimum of two years to provide continuity in the training program. If students wish to request a change in mentor, they should meet with their current mentor to discuss it, and then the Director of Clinical Training. Once

these discussions have occurred, they may contact other faculty to inquire about new mentorship. The Director of Clinical Training will work with the student and Doctoral Training Committee if needed to find a new mentor for the student. Once a new mentor accepts mentorship of the student, the Change of Mentor form https://www.emich.edu/psychology/documents/change-of-mentor.pdf?v=2020-08-18T18:15:21Z is completed to outline expectations for the transition. Changes in mentors will occur in the fall of the academic year unless special arrangements have been made with the mentors and rarely will mentor assignments be changed in the middle of a major milestone project (i.e. thesis or dissertation). Students may participate in other lab learning and research as long as they are meeting expectations in their mentor lab. These collaborations can be fruitful for students and faculty.

Additional Fellowship Duties
In the last two years of fellowship, doctoral students will teach two undergraduate classes at EMU, provide clinical services at EMU CAPS, or work on a faculty-led grant as part of their fellowship responsibilities. Students may request a combination of these roles (i.e., teaching one term and providing pro bono clinical care for the other) provided the options are available.

All students will take a course (PSY 807) to prepare them for teaching. Students will be assigned to a teaching mentor or instructor who has had successful experiences teaching the course the student has been assigned to teach or other courses. The student will meet with the teaching mentor/instructor to review the course syllabus, teaching materials, teaching strategies, tests, and other relevant information. The fellowship mentor will observe and evaluate the teaching performance of the student at least once. The student will obtain a written evaluation of their teaching performance that will be placed in their student file -https://emichpsych.co1.qualtrics.com/jfe/form/SV_5alRIVoLcctuKW1. Students are discouraged from doing extra teaching while still on fellowship, but may request additional compensated teaching assignments if still completing program requirements after the end of the fellowship and prior to the internship year.

Fellowship Policies
Admission to the EMU Ph.D. program in Clinical Psychology and the award of a full-time, year-long fellowship is considered a full-time endeavor requiring 100% of a Fellow's work time and effort. Outside employment is not advisable while a student is in our program and may lead to withdrawal of the fellowship if it infringes on program performance. Please see the Graduate Policies handbook for more information. Doctoral programs are challenging and time-consuming. Successful completion of the program in a timely fashion will demand the student's full attention. Completion of the research milestones requires protected time and extended periods of focus. In rare instances students may be paid by the site for external practicum training. This is acceptable as long as it is clear that the student is supervised by a doctoral level fully licensed psychologist and that the purpose of the experience is practicum training rather than employment.

Transfer Credits and Waivers of Requirements

Students with master's level credit may transfer up to 12 graduate credit hours, including thesis credit, if coursework is found to be equivalent to the program coursework. All transfer credits must be approved by the Director of Clinical Training after a review of course materials and a recommendation from the faculty member teaching the potentially similar course at EMU. It will be the student's responsibility to demonstrate that the waiver is warranted, including providing course syllabi and completing the

Graduate Request for Transfer of Credit form (see
https://www.emich.edu/psychology/documents/gr-transfer-of-credit-form.pdf?v=2020-08-18T18:15:21Z
to obtain a copy of the form). Credits will only be considered for transfer if taken in the three years prior
to starting the program, due to all courses needing to be taken within a maximum of ten years prior to
graduation. Please be advised that students may be asked to repeat courses completed previously
because the content of the course has been updated or because the depth and/or breadth of the course
does not meet doctoral-level or accreditation standards. If a course is taken at another institution as
credit/no credit, it can only be transferred if the transcript key for the university indicates that credit
equals a B or better grade. The Director of Clinical Training in conjunction with the EMU faculty
member teaching the relevant course will determine if the course and the quality of the student's work
was equivalent to doctoral level and accreditation standards. Graduate courses from EMU are
automatically transferred and do not require any additional paperwork.

Some incoming doctoral students may have completed a master's degree with a thesis requirement.
That thesis is subject to review by two EMU DTC faculty to determine if the product meets the
standards of the doctoral program. If the thesis is rated acceptable, the master's level student will
complete a first year project contracted with their fellowship mentor. Examples of this early research
include: a paper reviewing a body of literature, a pilot study for the dissertation work, a small research
project, a presentation at a national conference, or a journal submission of a current or previous study. A
copy of the contract will be submitted to the DCT and placed in the student's file.

Practicum Experiences

Students will be given ample opportunities to practice clinical assessment and treatment skills in the
onsite EMU Community Behavioral Health Clinic. Fully licensed psychologists will supervise all
practicum experiences. Advanced students supervise second year students on a limited basis as part of
their training. However, fully licensed psychologists will supervise these advanced students on their
supervision. This practice is in keeping with state licensing laws and APA accreditation policies.

Students are responsible for recording their practicum hours accurately and in accordance with the
Association of Psychology Postdoctoral and Internship Centers (APPIC) application standards. Students
should utilize Time2Track to record hours because it is integrated with the APPIC application site.
Students should become familiar with the recording requirements prior to starting the internal practicum.
Students will submit their accumulated clinical hours to the Doctoral Training Committee as part of the
annual evaluation and when applying to internship.

In addition, as part of the fellowship, doctoral students will assist at the EMU Community Behavioral
Health Clinic (see EMU Community Behavioral Health Clinic Policy & Procedures Manual for details
of student responsibilities at the clinic). Both individual and group supervision will be provided on a
regular basis. Student supervisors (if applicable) and supervising faculty will conduct evaluations of
students' clinical work each semester based at least in part on direct observation of the student. The
work in the clinic is not tied to fellowship funding-it is a training responsibility.

Students in the third and fourth years of the program will secure external practicum training experiences
in a healthcare facility outside of the department. Student Interpersonal Competencies are assessed by
the faculty during the second year to determine readiness to accept an external placement. Students
apply for and obtain their own external placements; however, a fall practicum orientation and in person

or virtual fair is offered annually to facilitate placements beginning in May or August of the following year. The practicum coordinator has updated lists of placements in the region that meet training and licensure requirements, and are interested in receiving student applications. Students will need to develop application materials in accordance with guidelines offered in the orientation meeting. Most sites require an updated curriculum vitae (CV) and cover letter. Letters of recommendation or contact information are also typically required. The program requires external practicum experiences for up to 12 months for 2 years in consultation with the mentor while a student is in the program to acquire necessary clinical experience. Students who are interested in some areas of specialization may seek additional practicum training to support competitive internship applications. Mentors should be consulted to determine and adjust the clinical training plan.

Before beginning a placement, students will need to communicate the match to the Practicum Coordinators to set in motion the affiliation agreement process between the university and the site. An affiliation agreement must be in place prior to a student starting a practicum experience or the university will not assume any liability for the training experience. Students then complete a Practicum Contract with their site supervisor(s) and submit it to their practicum course instructor within a week of beginning their training. Practicum site supervisors will complete a competency evaluation survey sent by the practicum instructor (one at 250 hours and one at 500 total hours and each 250 hours thereafter). These evaluations are provided to the supervisors each semester. These evaluations must be based in part on direct observation of the student. Students document their types of clinical experiences and hours of training in Time2track, which requires purchase of an individual account. Many states require this information for licensing.

While completing advanced external practica as part of their program, students must be registered in either 788 (Advanced Practicum) or 767 (Continuous Enrollment). Students enroll in 788 while they are taking other courses or credits. Students may only enroll in 767 once all formal coursework is completed (with only dissertation or internship credits remaining incomplete on the program of study). Students must be enrolled to be covered by the University's liability insurance policy.

Once they have completed their second year of doctoral study, students may obtain a temporary limited license (TLLP) from the State of Michigan if they so desire via: [Michigan Board of Psychology](). The application for licensing has a Certification of Psychology Education form to be completed by the DCT upon request. Some advanced external practicum sites require the TLLP.

Program Policy Statement Regarding Working with Diverse Individuals

In our APA-accredited program we are committed to a training process that ensures that graduate students develop the knowledge, skills, and attitudes to work effectively with members of the public who embody intersecting demographics, attitudes, beliefs, and values. When graduate students' behaviors, attitudes, beliefs, or values create tensions that negatively impact the training process or their ability to effectively treat members of the public, the program faculty and supervisors are committed to a developmental training approach that is designed to support the acquisition of professional competence. The faculty supports graduate students in finding a belief- or value-congruent path that supports them in working in a professionally competent manner with all clients/patients.

For some trainees, integrating personal beliefs or values with professional competence in working with all clients/patients may require additional time and faculty support. Ultimately, to complete our program

successfully all graduate students must be able to work with any client placed in their care in a beneficial and non-injurious manner. Professional competencies are determined by the profession for the benefit and protection of the public without exception. Consequently, students do not have the option to avoid working with particular client populations or refuse to develop professional competencies because of conflicts with their attitudes, beliefs, or values.

Academic Advising

The faculty research mentor also assists with advising about course selection and how to progress through the program. The mentor reviews and signs the student registration form each semester with the program requirements and student's goals in mind. Mentors advise students about clinical and research requirements and how to complete them. Students may choose to do additional research with someone other than their fellowship mentor if the mentor approves and is kept informed of progress. Additional advising may be requested from the DCT.

Annual Evaluation of Students

After completing each year of the program, students meet with their mentor to review their progress in the program. Formal evaluations are conducted at a Doctoral Training Committee meeting where faculty have access to the student's complete file including all recent evaluations (since the last annual meeting), and provide additional survey and oral feedback regarding student performance across the assessed domains. Students are evaluated on interpersonal, professional, clinical, research, and academic skills. To assist with the evaluation process, students complete the Annual Evaluation form (including program checklist and accumulated practicum hours) and submit an updated copy of their CV to the Director of Clinical Training by the deadline. The student receives written feedback that indicates if they have met training expectations for the year, summarizes strengths demonstrated, and offers suggestions for improvement. Students must meet competencies in all discipline-specific knowledge (i.e., history and systems; affective, biological, cognitive, developmental, and social aspects of behavior; advanced integrative knowledge; and research methods, statistical analysis, and psychometrics) and profession-wide competencies (i.e., research, ethical and legal standards, individual and cultural diversity, professional values and attitudes, communication and interpersonal skills, assessment, intervention, supervision, and consultation and interprofessional/interdisciplinary skills) in order to graduate from the program. A remediation plan will be instituted if a student fails to achieve competency in any area.

The progress of students completing their internal practicum will be reviewed following the fall semester of the second year and will include ratings on interpersonal competencies completed by the mentor in consultation with the clinical supervisor(s). Serious concerns regarding clinical competence will result in a remediation plan to support students in meeting the competencies. Competence concerns among the clinical faculty could lead to a reduction in clinical cases to focus on incremental learning, a delay in moving into an external practicum placement, a possible leave of absence to address the concerns, and/or immediate termination. Note that the program has adopted The Comprehensive Evaluation of Student-Trainee Competence in Professional Psychology Programs (see Appendix C) model policy in relation to evaluating performance.

The following two ethical principles from the American Psychological Association Ethical Principles of Psychologists (2002 with 2010 and 2016 amendments APA Ethics Code) guide deliberations. **Principle**

A: Beneficence and Nonmaleficence, requires psychologists to balance the welfare and rights of patients, clients, supervisees, and students. This includes concern for harm that may derive from impaired or incompetent students. **Principle B: Fidelity and Responsibility**, expresses concern for the community and society in which psychologists work. This includes the responsibility to ensure adequate interpersonal and professional skills in all students. Additionally, consistent with the ethical guidelines [2.03, 2.06(b), and 10.10(a)], and in the interest of client safety, students are required to take steps to maintain their own physical and mental health. Impairment refers to diminished functioning whereas incompetence refers to insufficient skills to provide adequate professional care. Impairment and incompetence can stem from interpersonal and intrapersonal problems as well as inadequate theoretical understanding and insufficient clinical proficiency regarding assessment and treatment. If at any time a student comes to believe that he or she is not able to serve effectively, they must immediately suspend their clinical, research, or teaching activities (with the help of their clinical supervisor, research mentor, or the Department Head) and disclose the concern to the Director of Clinical Training. If the Doctoral Training Committee discovers or suspects a student has personal problems (including but not limited to social, situational, physical or psychological) that may be impairing clinical competence or professionalism, the Doctoral Training Committee reserves all rights to initiate a dialogue with the student and make reasonable inquiries to ascertain the student's competence or ability to practice. During such a dialogue, students are expected to be forthright about any condition interfering with the successful execution of their clinical and human research work. The Doctoral Training Committee does not discriminate based on any disability and will provide reasonable accommodations when appropriate.

Interpersonal skills and intrapersonal characteristics are considered essential to functioning as a clinical psychologist; therefore, deficiencies in these areas may result in disciplinary action or remediation if feasible. When a student's behavior or performance raises concerns about the student's ability to perform satisfactorily as a clinical psychologist, that behavior or performance will be considered as grounds for academic discipline and/or removal from clinical, research, or teaching responsibilities. Students must adhere to the laws and regulations relating to the practice of psychology in any jurisdiction in which they are working. Given that students work in clinical settings, they will be held to the same ethical and professional standards of conduct within professional psychology environments.

Faculty and students collectively share a responsibility to take action if it is believed that a person's personal problems may be harmful to clients, participants, or colleagues. The first appropriate response is to bring concerns to the attention of the person who is believed to be impaired. If that does not result in a corrective response and a perceived risk persists, it is appropriate to consult with a faculty member and/or the Director of Clinical Training.

If there is sufficient evidence supporting a student's impairment due to an emotional, behavioral, neuropsychological, or substance use condition, the faculty may (a) recommend that the student take a leave of absence until the student is no longer impaired, (b) recommend that the student discontinue the program, or (c) formally dismiss the student from the program.

Remediation of deficiencies includes, but is not limited to: repeating coursework, repeating the qualifying paper, repeating or extending practicum experiences with special conditions, increasing supervision by the same or different supervisor, being tutored, or taking a leave of absence. Failure to benefit from remediation in a timely fashion may be followed by counseling toward voluntary withdrawal from the program, placement on probation, or formal termination. Any student who, in the

judgment of the clinical faculty lacks the competence necessary for effective service delivery and/or progress through the program will be advised orally and in writing as to the necessary remediation and time frame required if the Doctoral Training Committee expects that remediation would be beneficial. Fortunately, these unpleasant events are rare.

Student evaluations are based on competencies assessed by relevant faculty and supervisors. Faculty mentors and supervisors rate students as Exceeding, Meeting, or Below Expectations in each domain. If a student receives a "Below Expectations" rating on any item, this will be noted in their annual evaluation letter and a remediation plan may be developed by the mentor and Director of Clinical Training to address the problem area(s). In a meeting with the mentor where the Director of Clinical Training can be present if requested by either party, the student is told what specific behaviors need to be addressed and how the student needs to address these issues. The student's progress will be closely monitored and reevaluated based on the time lines identified in the remediation plan. If the student complies with the plan and is able to effectively address the problem area(s), the remediation will be considered complete. If the student either does not adhere to or implement actions outlined in the plan and/or is unable to remediate their problem area/s, they may be placed on probation or terminated from the program. Immediate action may be taken for ethical violations up to and including termination. Remediation plans are created to support students in meeting program requirements.

Reasons for Termination from the Program

The University and the Psychology Department expect conduct of all students that is consistent with the law, all relevant University policies and rules, including the University Student Conduct Code https://www.emich.edu/studenthandbook/policies/index.php, and the American Psychological Association Ethical Principles of Psychologists and Code of Conduct - Ethical principles of psychologists and code of conduct. Single episode violations or patterns of recurring behavior could result in termination as determined by the Doctoral Training Committee and/or by the Associate Provost for Research and Graduate Studies. The conditions under which a student may be terminated from the program include, but are not limited to:

1) Having a cumulative GPA of less than 3.00. (Fellowships require a cumulative GPA of 3.60. Students have one semester to raise their GPA. If the GPA remains below 3.60 after that semester, the fellowship, stipend, and tuition remission will be terminated. The fellowship may be reinstated if the GPA is raised above 3.60 within the period of fellowship availability.

2) Obtaining less than a B grade in any course after taking the course for the second time.

3) Failing the Qualifying Exam Paper twice.

4) Engaging in unethical, unprofessional, threatening, or criminal behavior (plagiarism, cheating, violation of APA ethical guidelines, University policies, or governmental law, including harassment) or consistent inability or unwillingness to carry out academic, fellowship, or practicum responsibilities (refusing to work with assigned clients, missing classes, required departmental activities, or client appointments; failing to complete clinical paperwork or class assignments when due, etc.).

5) Experiencing problems that affect the student's functioning in the program, including performance or

behaviors that demonstrate poor interpersonal skills and an inability to effectively communicate with others or form an appropriate working alliance with clients; lack of insight into negative consequences of own behavior; frequent blame of others or external factors for failures or difficulties; and inability to tolerate different points of view, constructive feedback or supervision.

6) Failing to make timely and satisfactory progress on program requirements (including clinical work, clinical competencies, thesis, qualifying exam, and dissertation research, professional development, internship, etc.), responsibilities, and activities.

7) Demonstrating conduct that is a violation of the University Student Conduct Code (such a violation will also result in a referral to the office for Student Conduct and Community Standards for campus disciplinary action, including possible dismissal from the University as well as possible action by the Doctoral Training Committee). Conduct violations by a student off-campus in university related activities (e.g., external practicum, internship, etc.) will be handled the same as if the violation occurred on-campus.

8) Failing to respond to a remediation plan or failure to make adequate progress while under remediation.

Although it is expected that initial attempts to resolve issues will occur between the faculty mentor and student, a formal remediation plan will specifically outline requirements for successful completion. Inability to resolve and complete the remediation plan satisfactorily will be followed by voluntary withdrawal from the program, placement on probation, or formal termination. Students who are dismissed from or leave the program are not eligible to reapply or return.

Remediation plans are separate from probation. Students who are put on probation at either the departmental or university level will have this indicated on their applications for internship. Successfully completed remediation plans are not listed as probation for these purposes. Students suspended from the program for any reason will have this noted on their internship applications.

Grievance Policies and Procedures

The EMU Board of Regents outlines grievance procedures for grades. The grade grievance procedure - https://www.emich.edu/registrar/documents/grade-grievance-procedure.pdf must be followed.

The following policy and procedures are provided by the EMU Clinical Psychology doctoral program for investigating and resolving cases of alleged violation or grievances by doctoral students that do not involve grades. While the program fosters open communication and conflict resolution, we recognize that in some instances it is not possible and formal procedures need to be followed.

In most instances, a grievance may be resolved to everyone's satisfaction informally by the individuals involved. The informal process involves only the people directly impacted; there is no written grievance filed, and the resolution of the problem is acceptable to all parties. Students and faculty are encouraged to keep the lines of communication open and to protect the rights and needs of each individual. If the grievance is unresolvable at that level, students are encouraged to raise concerns to their mentor, and then the Director of Clinical Training. The mentor or DCT should then bring the concern to the Doctoral Training Committee faculty meeting to determine if any program changes are necessary to respond to

the concern raised or to support a resolution in other ways.

Any student experiencing sexual harassment or sexual assault concerns is encouraged to contact the Sexual Misconduct Prevention and Response Office at: [Sexual Misconduct Prevention & Response Office at EMU](). Students may discuss concerns with faculty members within the department including the Director of Clinical Training; however, faculty are obligated to report any incidents related to sexual harassment or sexual assault to the Title IX office. Students do not need to notify the faculty prior to making a complaint directly with the Sexual Misconduct Office. Only official complaints to the Title IX office can result in disciplinary action for the alleged perpetrator.

Step I. To initiate formal grievance procedures, the student submits a written statement (within 20 working days following the decision/event in question) with a full and concise account of the facts (as perceived by them) to all parties involved, the Department Head, and the Director of Clinical Training. The notice must state: (1) that a grievance is being initiated and (2) the nature of the grievance. The written grievance and any subsequent documents, including meeting notes, will be kept in a locked file in the Department Head's office. The Director of Clinical Training and the Department Head (if the grievance does not involve the Director of Clinical Training or the Department Head) attempt to resolve the issue by meeting with each party.

If the grievance is related to a committee decision (e.g., thesis, qualifying paper, or dissertation committee; the Doctoral Training Committee; or the Clinic Supervisors group), the student will provide their written grievance to the Director of Clinical Training to be distributed to the Doctoral Training Committee in advance of the regularly scheduled meeting. The student will be allowed to address the entire committee and Doctoral Training Committee members may ask questions of the student to gather additional information. The student is then dismissed from the meeting and a formal vote is taken to determine the outcome of the grievance.

Step II. If there is a failure to resolve the issue, the student can submit a written appeal of the previous decision to the Department Head within ten working days of receiving the Step I response. In this document the student identifies an EMU faculty member to represent him or her on the Grievance Committee, at which time the Director of Clinical Training asks the faculty member involved in the grievance to select an EMU faculty member to sit on a Grievance Committee. If the grievance is related to a committee decision, the Director of Clinical Training selects one EMU faculty member to represent the committee. The Director of Clinical Training directs the two committee members (one chosen by the faculty involved; one chosen by the student) to arrange a meeting. At that meeting, the two members select a third faculty member to complete the Grievance Committee (no more than two Grievance Committee members can be from the Psychology Department). The Grievance Committee members must attempt to be free from bias and regard themselves as able to render a just and fair decision. A member not able to do so should recuse themself from the grievance review. The three representatives meet with those involved separately or collectively to resolve the grievance and render a decision in writing within ten working days after all of the information has been collected and the necessary parties interviewed. At a minimum, the committee must interview the student and may choose to interview others as needed (either side may suggest witnesses). Note that the student may be accompanied by an advocate who is a member in good standing of the University community (i.e., an EMU student, faculty or staff member) during the Grievance Committee meetings. Attorneys cannot be present during the Grievance Committee meetings.

A detailed record shall be kept of the hearing, preferably an audio recording. If a written record is kept, that record shall be signed by the Grievance Committee attesting to the fact that the written record is a true record of the hearing proceedings. The written grievance and any subsequent documents, including meeting notes and audio files, will be secured in the Department Head's office.

The grievance committee will determine the grounds for the grievance. Typically, this will include determining if the previous decision involved a lack of due process, was arbitrary and capricious, or contributed to unfair treatment of the student. Note that the grievance committee is not charged with resolving the problem that led to the grievance, but will determine if there are grounds to support it. The grievance committee shall make recommendations if they find there are grounds to support the grievance.

Step III. The student may appeal the Grievance Committee decision in writing to both the Associate Vice Provost for Research and Graduate Studies and the Dean of the College of Arts and Sciences within ten regular working days after receipt of the Step II decision if the student claims that established procedures for Step II were violated.

The notice to appeal must include the (1) grounds for the appeal, (2) original grievance, and (3) Grievance Committee's report from Step II. The Associate Vice Provost for Research and Graduate Studies or the Dean of the College of Arts and Sciences may call witnesses or request other documentation to make a determination if the established procedures for Step II were violated. A decision will be rendered within ten regular working days after all the information has been gathered and any necessary interviews conducted. This decision shall be final; no further appeal is possible.

Note **-** *It is a violation of University policy to take action against a student for filing a grievance.*

Time Limit for Program Completion

The University's time limit for completing the doctoral program in clinical psychology is **seven years**. Students who have not completed their courses, dissertation, internship, and all other requirements for the degree within seven years will be terminated from the program unless they initiate a formal petition process. If a student is actively involved in completing the dissertation or internship in the seventh year or beyond, the student may petition the Graduate School to extend the deadline. Note that the Graduate School requires courses to be repeated after **ten years** (including any transfer courses started more than ten years before degree conferral). An extension will not be granted beyond ten years from the start of the program. Students unable to fulfill all requirements within this timeframe will be dismissed from the program.

Counseling and Psychological Services (CAPS)

All enrolled students are eligible to receive up to 12 therapy sessions at EMU Counseling and Psychological Services (CAPS), located in the Campus Wellness Center 1075 Huron River Drive. CAPS is a separate entity from the psychology department, and faculty will not be made aware that you are seeking services unless you notify them. CAPS will not assign a psychology graduate student seeking services to another graduate student therapist's caseload. Psychology graduate students can request to work with temporary staff or postdoctoral staff who are not involved with the psychology department.

The scheduling program used at CAPS (Titanium) allows staff to establish different security levels for client charts so that only the therapist can access the contents of a client file.

There are several options students may pursue if they have privacy concerns about scheduling a visit at CAPS. The first option is to call CAPS (734-487-1118) and ask to speak to the full-time staff secretary, who is not a graduate student and is not involved in the decision-making process about future practicum or fifth-year clinical positions offered to psychology graduate students. The second option is to email CAPS directly (counseling.services@emich.edu). This email goes directly to the director of CAPS. The contents of the email fall under standard confidentiality protections. You can specify in your call or email that you are a graduate student seeking services and that you have concerns about being assigned to work with other student therapists.

If you have any additional questions or concerns, you can contact a member of the Student Wellness Committee. Additionally, questions can be posed directly to CAPS. As stated by our Student Wellness Committee, "as current or future mental health providers, we have to work together to reduce stigma and support our peers who are seeking psychological services while in graduate school."

Leave of Absence

A student-initiated leave of absence can range from one semester to one year. Only one personal leave is permitted while in the program, and an extension beyond one year will not be allowed. Students with a documented disability/illness or a University imposed leave may receive additional time. Students forfeit their fellowship and tuition remission during a voluntary leave of absence. If students are away from program responsibilities due to a disability or University imposed leave of absence, fellowship and tuition remission replacement is at the discretion of the Associate Vice Provost for Research and Graduate Studies. Students should submit a written request for a leave of absence to the Director of Clinical Training and the Graduate School at least one month before it will take effect, if possible. The Doctoral Training Committee considers and may approve a return to the program following a leave of absence.

Master's Thesis Requirements

All doctoral students are required to complete a master's thesis unless specifically granted a waiver of this requirement. A master's thesis is an original piece of research that provides hands-on research learning experiences. It tends to be a smaller research project done collaboratively with the mentor typically completed in 12-18 months. Listed below are the procedures for successful completion of the thesis. Detailed information is also available on the Graduate School website in the thesis manual - https://www.emich.edu/graduate/about/forms/index.php. Note that both the department and Graduate School requirements must be met to complete the thesis.

Generating thesis ideas/forming a committee
Students should meet regularly with their mentor to discuss research ideas throughout the first year. They should be drafting the thesis proposal and receiving feedback by the spring of the first year.

Once they have settled on a thesis topic and research strategy, students should ask their research mentor for suggestions as to who might serve on the thesis committee based on the expertise members can lend to the project development and its completion. The thesis committee consists of the mentor and two

other faculty members in the department. At least one member of the committee must be a clinical faculty member. Outside faculty, adjunct faculty, and psychologists and scientists in disciplines with expertise appropriate to the project but outside the university may also be on the committee. The thesis Chair must be a program faculty member. Once committee members agree to serve on the project, the Thesis Committee Approval form https://www.emich.edu/graduate/documents/acomm.pdf?v=2020-08-25T12:18:56Z is completed and submitted to the Director of Clinical Training for review and approval prior to the thesis proposal meeting. When necessary, committee members can be replaced; however, this requires the approval of the Doctoral Training Committee.

Writing the proposal
Students must write and orally defend a thesis proposal. This is due before the summer of the student's second year (or first year if the student has three years of funding). The first step is to write and receive feedback on drafts of the proposal, which includes an introduction, a research methods section (participants, procedures, research design, measures, and data analysis plan), references, and appendices (including all measures used in the study). Students will also prepare an Institutional Review Board proposal and supporting materials, with a consent form as an appendix if the study includes human participants. Students typically have several revisions based on ongoing input from the thesis mentor before a draft is considered acceptable. It is the sole judgment of the thesis mentor to determine whether a proposal is adequate, ethical, and feasible and when it is ready to present to the committee. Faculty regularly have up to two weeks to review each draft or they schedule and communicate a near turnaround date in exceptional circumstances. These guidelines do not apply during the summer and over holiday periods when faculty may not be on contract or have other university responsibilities. It is the student's responsibility to anticipate these breaks and negotiate different project timelines with their faculty mentor while clarifying expectations and willingness regarding document reviews. Faculty should not be pressured by students or other faculty to review documents faster than the time frames outlined in the handbook or during holidays or breaks. Given the dissertation proposal deadlines for internship and the impact on faculty review time, students should anticipate that scheduling a thesis proposal meeting between 8/15 and 10/1 will be difficult and may require significant advance planning.

Once the mentor agrees that the proposal is ready to be submitted to the thesis committee, the student distributes the proposal to the two other committee members and any outside members. The thesis proposal cannot be distributed to the committee until the mentor approves it. Committee members have two weeks to review the proposal before stating if it is ready to be formally proposed. Given the possible difficulty with scheduling, a tentative meeting can be scheduled in advance (~4 weeks from when the document was sent to the committee). However, the faculty will still have at least two weeks to review the proposal and communicate with the thesis Chair that the proposal is (in)adequate to proceed with the proposal meeting. Students may utilize the final two weeks to make revisions prior to the defense. If found inadequate, the defense meeting will be postponed until the proposal is adequately revised and re-reviewed by the committee, starting the scheduling process again.

The proposal meeting
Once the committee members approve the proposal document, the student finalizes the proposal meeting. It is the student's responsibility to coordinate faculty schedules to allow for a two-hour meeting. Students can expect that faculty will raise significant issues related to the document prior to the proposal meeting; however, additional issues and ideas will be raised during the meeting. The proposal

meeting consists of an introduction by the student's mentor, a 30-45 minute student presentation of the proposal with slides, 45 minutes for questions, discussion, and suggestions for improvement of the proposal, and a final conferral of the committee without the student present. If all goes well, the committee will approve the proposal. Committee members may request document revisions or an additional oral defense if there are concerns about the student's ability to discuss the project, prior to signing the approval form. Once the project is adequately defended, the Chair and all committee members will sign the Thesis Proposal Approval form -https://www.emich.edu/graduate/documents/thesis_proposal_approval_form.pdf?v=2020-08-25T12:18:56Z. Students should email this completed form to the Director of Clinical Training for signature and placement in their student file and submission to the Graduate School.

Students must successfully propose their thesis project by the end of the winter semester of their second year (or first year if entering after completing two years in one of our clinical master's programs) of the program. Failure to do so will result in discussion during the annual evaluation meeting and may result in a remediation plan.

Human subjects review
All research involving human subjects must have approval from the University Human Subjects Review Committee - Human Subjects Protections-IRB - Research | Eastern Michigan University. This is a committee composed of university faculty. The University's Human Subjects Review Committee (UHSRC) must approve any research that involves human participants. For details on these policies and procedures, visit the Office of Research Development and Administration website (EMU Research - Research | Eastern Michigan University).

STUDENTS MAY NOT BEGIN TO COLLECT DATA UNTIL THEY HAVE OBTAINED APPROPRIATE UHSRC APPROVAL.

Students must request and complete research Compliance Training prior to submitting the IRB proposal per the policies described in the links above.

Institutional Animal Care and Use Committee
Students utilizing vertebrate animals for research must have their study approved by the Animal Care Committee - Animal Care & Use - Ypsilanti.

Academic credit for the thesis
Students register for PSY 690/691/692 (1/2/3 thesis credits). Students register for a minimum of one master's thesis credit. A maximum of six thesis credits is allowed. Students will receive a grade change for the thesis once they have successfully orally defended the final product (the grade will remain IP, in progress, until the successful defense).

The oral defense
The student and the Chair work closely to develop the final thesis document that recounts their research. Students typically have several revision cycles based on ongoing input from the thesis mentor before a draft is deemed acceptable. It is the sole judgment of the mentor to determine whether a thesis is adequate, ethical, feasible and ready to send to the committee. The thesis must adhere to the current APA Style Manual requirements, while the format of the manuscript must conform to the requirements

of the Graduate School. Once the mentor agrees that the thesis is ready to defend, the student distributes the thesis to the other committee members. The committee must have two weeks to initially review and comment on the manuscript to determine and communicate if it is adequate to defend. Given the difficulty with scheduling, a tentative meeting can be scheduled in advance (~4 weeks after distributing the document). If a member does not agree that the project is ready to defend, the defense date will be rescheduled. The review process will begin again after the student addresses the concerns in the document. Students can expect that faculty will raise the most significant issues related to the document before the oral defense meeting; however, other issues and ideas will be raised during the meeting.

The student is responsible for coordinating committee members' availability for the thesis defense, and two hours must be reserved for this meeting. Additionally, the student notifies the department administrator of the date, time, and location of the defense as well as of the thesis title at least two weeks in advance of the meeting. They will notify the University community of the oral defense. The final defense of the thesis will be a meeting open to the public and must be held in a location accessible to the public on campus (e.g. Mark Jefferson, Halle Library, etc.). Only the thesis committee determines the adequacy of the defense. Students should anticipate possible delays in scheduling the thesis defense during the summer and early fall when many faculty do not have contracted university responsibilities and priority is given to internship applicants completing dissertation proposals.

An oral defense is a formal presentation, complete with slides, lasting about 30-45 minutes. It should consist of:
- Brief review of key research literature supporting the rationale for the project
- Purpose of the study and hypotheses
- Overview of research methods
- Results
- Discussion of results including limitations and future directions

After the student has presented, there will be a 30-45 minute question and answer session. This is part of the defense that is open to the public for comment. The student and any public attendees will then be excused, and the thesis committee will decide if the thesis is approved in the executive session.

Students will make the **Thesis Oral Defense Approval form** https://www.emich.edu/psychology/documents/thesis-oral-defense-approval-form.pdf?v=2020-08-18T18:15:21Z and the **Thesis Document Approval form** https://www.emich.edu/graduate/documents/thesis_document_approval_form.pdf?v=2020-08-25T12:18:56Z available at the defense. The committee members must unanimously approve the thesis document and oral defense as indicated by signatures on both forms. Committee members may approve (sign) the oral defense and the document separately, requesting that the student conduct another oral defense and/or provide revisions to the document to address concerns before final committee approval and signatures. Once approved and signed, the forms are submitted to the Director of Clinical Training for review and approval prior to being forwarded to the Graduate School.

The student will forward a copy of the final approved thesis document to the Graduate School office at thesis_submission@emich.edu, along with a completed copy of the Thesis Information Sheet (see Thesis Manual from the Graduate School website https://www.emich.edu/graduate/documents/thesis_information_sheet.pdf?v=2020-08-25T12:18:56Z).

Students provide the program administrator and Director of Clinical Training with an electronic copy of their approved thesis proposal and final document (approved by the Graduate School) for their student file.

Students are expected to successfully defend the master's thesis project before the end of their third year (or second year if they completed two years in one of our clinical master's programs before starting the doctoral program). If this does not occur, discussion at the annual evaluation meeting will determine any necessary actions, including a remediation plan. Students cannot register for dissertation credits until they have successfully completed their thesis.

Qualifying Exam Paper

Students are required to complete a Qualifying paper that demonstrates their knowledge of basic psychological concepts, the ability to write about them in a scholarly manner, and the depth of their knowledge about a specific research topic. To be successful, students are expected to demonstrate critical thinking skills and be able to integrate and evaluate the extant literature pertaining to their topic, including research methodology. Passing all elements of this paper is a requirement of the program. The qualifying paper is designed to accomplish two goals.

Goal 1: Demonstrate student knowledge and independence. The student must demonstrate adequate breadth and depth of knowledge in the substantive area they have chosen, as well as broad knowledge of concepts relevant to clinical psychology more generally. Further, they must demonstrate critical thinking and academic writing at the level expected of a doctoral candidate.

Goal 2: Generate a useful product. Students should choose the option that best matches their professional goals and contributes to advancement in milestones and/or their program of research.

Minimum requirements before writing the qualifying paper:

- Master's thesis completed (Thesis Oral Defense Approval and Thesis Document Approval forms both signed by all committee members) or first year project (for those that successfully waived the thesis requirement)
- 30 graduate credits completed at EMU
- Approval of mentor

The student can choose from four broad options.

Option 1: An empirical article of publication quality prepared for a specific journal

Option 2: A grant proposal meeting the requirements of a federal fellowship application

Option 3: A systematic literature review or theoretical/conceptual paper of publication quality on a specific topic area in psychology

Option 4: A four-part literature review focused on demonstrating the breadth of knowledge related to a specific concept or theory in clinical psychology which must include a critical analysis of research design (traditional qualifying paper)

The student should prepare a **3-6 page outline** that identifies their selected option and details the proposed content of their qualifying paper. It should include a prose paragraph that provides some information about the topic and then an outline for the remaining sections. Further details on the specific prospectus content for each option are found below.

When the student and the student's mentor think they are ready to propose the qualifying paper, the student identifies two department faculty who are willing to serve on the committee. At least one committee member must be a Clinical faculty member. At least one committee member must have expertise in the chosen area. Students submit the prospectus to their committee members. The committee has two weeks to provide feedback. During this time, faculty may offer suggestions, guidance, etc. If there is disagreement among the three faculty about the depth or breadth of coverage, then the three faculty will meet to come to an agreement. Once the requests for revisions have been satisfied, the mentor will consult with the other two committee members and ask them to sign the Qualifying Paper Prospectus Approval form: Qualifying Paper Prospectus Approval Form. The mentor also indicates the deadline for submission of the qualifying paper (six weeks from the date of approval). The deadline for evaluation of the final product will also be indicated.

Option 1: An empirical article of publication quality

This qualifying paper option will be an *independently written* empirical research paper on a topic relevant to clinical psychology. Original data can originate from the student's master's thesis, research laboratory, or another original source that has been approved by the EMU UHSRC or other Institutional Review Board. Data collection should be complete before beginning the qualifying exam process. The default expectation is that the final product will not exceed 50 pages including full Introduction, Method, Results, Discussion, and References sections.

1. Submit prospectus
   a. If using thesis data, students must describe how the qualifying exam manuscript will differ from the master's thesis so that it represents an independent product.
   b. Submit a prospectus that includes the following information:
      i. An opening paragraph that details the source of data to be used, the type of research paper and the journal to be submitted to.
      ii. Outline aims, hypotheses, brief introduction outline, and method used with data analytic strategy
      iii. Evidence of feasibility via preliminary results (e.g. poster or oral presentation results)
      iv. Outlined/summarized author guidelines, including page limits from proposed journal
      v. Timeline
      vi. Evidence of Human Subjects approval
      vii. References (not included in the page count)
      viii. The above will be used for approving the prospectus

2. Identify where you are submitting the manuscript and the type of submission in accordance with the appropriate journal expectations-Brief Reports must be justified and may not fulfill the exam expectations.
3. The student has to demonstrate that they can first author a manuscript.
4. Once approved and written over six weeks, the student submits their manuscript to the committee whose members serve as "reviewers," evaluate the manuscript, and provide feedback prior to actual submission to a peer-reviewed journal. That feedback should be incorporated into the document prior to the actual journal submission. However, the final submission to the journal is not part of the scoring.
5. Scoring of the manuscript: Scoring will focus on Comprehensiveness, Professionalism, and Conceptualization (scored 1 through 5), and the paper will be scored in four sections:
   - Section 1:
     a. Abstract
     b. Introduction
   - Section 2:
     a. Method
        i. Participants
        ii. Method/Procedures
        iii. Data analysis approach
   - Section 3:
     a. Results
        i. Analyses
        ii. Tables
        iii. Figures
   - Section 4:
     a. Discussion
        i. Strengths/limitations
        ii. Future directions
        iii. Implications

Option 2: A grant proposal meeting the requirements of a federal fellowship application

This qualifying paper option will be an *independently written* draft of the key components of a National Research Service Award (NRSA) Predoctoral Fellowship application. In particular, for purposes of the qualifying paper, students will complete the Project Summary/Abstract, Project Narrative, Specific Aims, Research Strategy, Applicant's Background and Goals for Fellowship Training, Biographical Sketch, and Respective Contributions sections. The specific instructions for each section are found below. Prior to embarking on writing the grant proposal qualifying paper, the student will submit a 3-6 page outline of the major points that will make up their grant proposal. They should state to which agency within NIH they are intending to apply.

NOTE: If the student thinks that a different federally funded or similar graduate/dissertation grant is more in line with their professional development goals, the student may submit, along with their prospectus, a letter indicating the details of the grant application, the published evaluation rubric, and the justification why it is a better fit for the student than a NRSA. The committee will then decide whether to approve an alternative grant proposal format to the NRSA format specified below.

<u>Important note:</u> The expectation is that if students select this option, they will go on to submit their grant proposal to the appropriate agency before the dissertation proposal meeting. The student's faculty sponsor for the grant (who may or may not be the student's main mentor) is expected to contribute their components (e.g. biosketch, letter of support) by that point for submission. *It is recommended that students who plan to pursue this option begin the process as soon after the thesis as possible since the federal grant cycle is expected to take approximately 12-18 months from submission to funding. Standard application due dates for NIH NRSAs are April 8, Aug 8, Dec 8. Submissions will need to be submitted through ORDA two weeks prior to NIH deadlines.*

It is assumed that the proposed research will be the student's planned dissertation study; however, note that it is allowable/expected for the student to make changes to improve the planned study following completion of the quals process. In other words, the student is not "locked in" to the exact research approach proposed in their qualifying paper and can make changes in collaboration with the mentor and committee members. The dissertation proposal will likely closely follow the quals document but will be expanded appropriately (given the required brevity of the grant proposal).

All sections of the grant proposal must follow the required <u>font and margin specifications</u>.

Project Summary/Abstract

The project summary is a succinct and accurate description of the proposed work and should be able to stand on its own (separate from the application). This section should be informative to other persons working in the same or related fields and understandable to a scientifically literate reader. Avoid both descriptions of past accomplishments and the use of the first person. Please be concise.

This section is limited to <u>30 lines of text.</u> State the application's broad, long-term objectives and specific aims, making reference to the health-relatedness of the project (i.e., relevance to the mission of the agency). Describe the research design and methods for achieving the stated goals. Be sure that the project summary reflects the key focus of the proposed project so that the application can be appropriately categorized.

Project Narrative

Describe the relevance of this research to public health in, <u>at most, three sentences</u>. For example, NIH applicants can describe how, in the short or long term, the research would contribute to fundamental knowledge about the nature and behavior of living systems and/or the application of that knowledge to enhance health, lengthen life, and reduce illness and disability. If the application is funded, this public health relevance statement will be combined with the project summary (above) to become public information.

Specific Aims

No more than <u>one page</u> single-spaced. State concisely the goals of the proposed research and summarize the expected outcome(s), including the impact that the results of the proposed research will have on the research field(s) involved. List succinctly the specific objectives of the research proposed (e.g., to test a stated hypothesis, create a novel design, solve a specific problem, challenge an existing paradigm or

clinical practice, address a critical barrier to progress in the field, or develop new technology). It is important to relate the proposed research to the applicant's scientific career goals. Explain the relationship between the applicant's research on the fellowship award and the sponsor's ongoing research program. The specific aims should include:

- a specific hypothesis,
- a list of the specific aims and objectives that will be used to examine the hypothesis,
- a description of the methods/approaches/techniques to be used in each aim.

Research Strategy

Maximum of 6 pages single-spaced (not including references). Organize the Research Strategy in the specified order and use the instructions provided below. Start each section with the appropriate section heading –Significance, Approach, etc. Cite published experimental details in the Research Strategy and provide the full reference in a separate bibliography.

Significance

- Explain the importance of the problem or critical barrier to progress that the proposed project addresses.
- Describe the strengths and weaknesses in the rigor of the prior research (both published and unpublished) that serves as the key support for the proposed project.
- Explain how the proposed project will improve scientific knowledge, technical capability, and/or clinical practice in one or more broad fields.
- Describe how the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field will be changed if the proposed aims are achieved.

Approach

- Describe the overall strategy, methodology, and analyses to be used to accomplish the specific aims of the project. Describe plans to address weaknesses in the rigor of the prior research that serves as the key support for the proposed project. Describe the experimental design and methods proposed and how they will achieve robust and unbiased results. Include how the data will be collected, analyzed, and interpreted.
- For trials that randomize groups or deliver interventions to groups, describe how your methods for analysis and sample size are appropriate for your plans for participant assignment and intervention delivery. These methods can include a group- or cluster-randomized trial or an individually randomized group-treatment trial.
- Discuss potential problems, alternative strategies, and benchmarks for success anticipated to achieve the aims.
- If the project is in the early stages of development, describe any strategy to establish feasibility, and address the management of any high-risk aspects of the proposed work.
- Explain how relevant biological variables, such as sex, are factored into research designs and analyses for studies in vertebrate animals and humans.

Applicant's Background and Goals for Fellowship Training

Maximum of 6 pages single spaced.

Organize the Applicant's Background and Goals for Fellowship Training attachment in the specified order and use the instructions provided below. Start each section with the appropriate heading - Doctoral Dissertation and Research Experience, Training Goals and Objectives, and Activities Planned Under this Award.

A. Research Experience

Briefly summarize your past research experience, results, and conclusions, and describe how that experience relates to the proposed fellowship. In some cases, a proposed fellowship may build directly on previous research experiences, results, and conclusions. In other situations, past research experiences may lead a candidate to apply for a fellowship in a new or different area of research. Do not list academic courses in this section. Applicants with no research experience: Describe any other scientific experiences. Advanced graduate students (i.e., those who have or will have completed their comprehensive examinations by the time of award): Include a narrative of your planned doctoral dissertation (may be preliminary).

B. Training Goals and Objectives

- Describe your overall training goals for the duration of the fellowship and how the proposed fellowship will enable the attainment of these goals.
- Identify the skills, theories, conceptual approaches, etc., to be learned or enhanced during the award, including, as applicable, expertise in rigorous research design, experimental methods, quantitative approaches, and data analysis and interpretation.
- Discuss how the proposed research will facilitate your transition to the next career stage.

C. Activities Planned Under this Award

The activities planned under this award should be individually tailored and well-integrated with your research project.

- Describe, by year, the activities (research, coursework, professional development, clinical activities, etc.) you will be involved in during the proposed award. Estimate the percentage of time to be devoted to each activity. The percentage should total 100 for each year.
- Describe the research skills and techniques that you intend to learn during the award period.
- Provide a timeline detailing the proposed research training, professional development, and clinical activities for the duration of the fellowship award. Detailed timelines of research activities involving animals, human subjects, or clinical trials are requested in other sections of the fellowship application and should not be included here. The timeline you provide here should be distinct from the Study Timeline in the PHS Human Subjects and Clinical Trials Information form.

Biographical sketch

Use the sample format on the [Biographical Sketch Format Page](#) to prepare this section.

Respective Contributions

In no more than one page, describe the collaborative process between you and your sponsor/co-sponsor(s) in accomplishing the proposed research.

Additional details: [here](#)

Scoring: Review criteria for grants available [here](#). Committees will score the quals submission using the qualifying exam score sheet below.

Option 3: A systematic literature review or theoretical/conceptual paper of publication quality on a specific topic area in psychology

This qualifying paper option will be an *independently written* literature review of a topic relevant to clinical psychology. Students are encouraged to read about different types of reviews, however, they must select from one of the listed types of reviews (see "accepted types of reviews" below). If the student proposes to blend two types of reviews, they must justify this choice in the opening paragraph of the prospectus. Quantitative meta-analyses are not appropriate for a qualifying exam (i.e., are typically conducted as a *team*), but could be a good dissertation project.

The proposal must include the type of paper (review or conceptual paper), the target journal, and the journal submission requirements with page limit. The default expectation is that the final product will reflect depth of knowledge and not exceed 50 pages all inclusive. The opening paragraph and outline of the proposal should correspond to and clearly reflect the selected type of literature review or theoretical/conceptual paper.

Steps for completing Qualifying Exam Option 3:

1. Select a topic and a type of review. The types of reviews appropriate for a qualifying exam include: systematic review, theoretical/conceptual paper, historical review, clinical review, and critical review. Descriptions of the various types of review papers are provided below, as well as a table depicting their different features and challenges.
2. Select a target journal for the proposal. Note that brief reviews are not acceptable for a qualifying exam. Since the intent is to submit the review for publication after feedback from the committee, it is also recommended that with your advisor, you select possible backup journals. Acceptance to the target journal is not a requirement for passing the qualifying exams.
   a. Look at [PROSPERO](#) for pre-registered reviews to ensure your project is unique. If a nearly identical review on your topic has been written recently, particularly if you are doing a systematic review, then it will be very difficult to justify to both your committee and a prospective journal that your review would make a substantial contribution to the literature above and beyond the existing review.
3. Identify the reporting guidelines that will be used to guide the review. [PRISMA](#) and its extensions are common. Other reporting guidelines may be specific to the type of review or the journal. See the [Equator Network](#) for a compilation of guidelines. Specify the reporting guidelines that you will be using to support the completeness of your review as part of your proposal.

4. Resources
    a. Reviews: https://doi.org/10.1146/annurev-psych-010418-102803; Redalyc.Standards for the preparation and writing of Psychology review articles
    b. Theoretical/Conceptual papers: Klein_Zedeck_Theory_Applied_Psychology.pdf (upenn.edu); Aims and Scope: Review of General Psychology: SAGE Journals (sagepub.com)
    c. Technical review: Technical Review (nature.com)
    d. Historical review: Publishing historical scholarship in American Psychologist (apa.org)
    e. Clinical review: Example of clinical review guidelines (elsevier.com)
    f. Critical review: Critical review guidelines (tandfonline.com)

Systematic Review Paper

A systematic review consists of an overview of existing evidence pertinent to a clearly formulated research question, which uses pre-specified and standardized methods to identify and critically appraise relevant research, and to collect, report, and analyze data from the studies that are included in the review. Typically it focuses on a very specific empirical question, often posed in a cause-and-effect form, such as "To what extent does A contribute to B?"

Theoretical/Conceptual Paper

A theoretical/conceptual review aims to concretely examine the corpus of theory that has accumulated in regard to an issue, concept, theory, phenomena. The theoretical literature review helps establish what theories already exist, the relationships between them, to what degree the existing theories have been investigated, and to develop new hypotheses to be tested. Often this form is used to help establish a lack of appropriate theories or reveal that current theories are inadequate for explaining new or emerging research problems. The unit of analysis can focus on a theoretical concept or a whole theory or framework.

Technical Review Paper

Technical review papers summarize information about techniques, devices, and/or materials and their performance and/or utility; they may provide comparisons of different methods or technological approaches with an overview of their applicability; and they provide up-to-date guidelines for data analysis utilizing these techniques/technologies.

Historical Review Paper

Few things rest in isolation from historical precedent. Historical reviews are focused on examining research throughout a period of time, often starting with the first time an issue, concept, theory, or phenomenon emerged in the literature, then tracing its evolution within the scholarship of a discipline. The purpose is to place research in a historical context to show familiarity with state-of-the-art developments and to identify the likely directions for future research.

Clinical Review Paper

A clinical review provides a state-of-the-art review of a topic relevant to clinical practice. Clinical reviews address more current matters in contrast to other combined retrospective and current approaches. Reviews in this area could be translating foundational evidence into clinical practice. This review culminates in recommendations for practice as well as noting areas for future research.

Critical Review Paper

A critical review aims to propose a new model, framework, or theory. The rationale for the new model should reflect a depth of knowledge having extensively researched literature, including critical analysis of the nature, extent, and quality of the evidence. A critical review goes beyond mere description to include a degree of analysis and conceptual innovation. Critical reviews are more common in areas where existing theory is weak, providing less existing theoretical ground to cover than would occur in a theoretical/conceptual paper.

Clinical Review Paper

A clinical review aims to advance the science and practice of psychology by reviewing the extant literature in a domain relevant to clinical practice and critically examining what is known about the topic, what remains to be understood and why, the strengths and weaknesses of existing approaches, and introduces well-reasoned ideas with conceptual supports in related literature about how to advance the field in relation to this domain.

Comparison of review paper types:

Type	Search	Appraisal	Synthesis	Analysis	Challenges
Systematic review	Aims for an exhaustive search given specific criteria	Quality assessment may determine study inclusion/exclusion	Narrative with a tabular component	Characterize what is known, what remains unknown, and the degree of uncertainty around findings. May include recommendations for future research	Overly restrictive or inclusive search criteria can make the review either too short for a qualifying exam or so large as to require a team of researchers
Theoretical/conceptual paper	Selective	Evaluates articles on the basis of their contribution (or not) to the topic	Narrative characterization of relationships among existing theories or concepts	Makes a conceptual contribution by increasing clarity of the theories or concepts covered. Goes beyond simply describing others' analyses.	You need to convince your committee that your paper makes a substantial enough conceptual contribution to be of interest for a target journal.

Historical review	Selective, chronological	Evaluates articles on the basis of their ability to contextualize the topic	Narrative where the primary focus is the characterization of the evolution of topics and/or placing them in their historical contexts.	Characterize the value of individual contributions to understanding the historical context	Placing ideas and authors into a historical context is a lot of work and involves more than a simple chronology of publications.
Clinical review	The search is selective on two fronts. One search is on a topic that is more traditionally clinical (e.g., diagnosis, treatment) and the other is on a related foundational area of science.	A theoretical claim is made that one or more foundational area of science has direct relevance for a clinical topic. The review is not appropriate if there are insufficient or only emerging data, or if the theoretical link between the foundational area of science and clinical application is weak.	Narrative where the primary focus is on the value brought to an area of clinical practice by a topic from foundational science.	The analysis of the clinical and foundational topics establish a foundation for their interactions in the synthesis component of the review.	This type of clinical review should be a novel and creative (i.e., original) contribution to the literature. It is also important for it to be readable by a broad audience so that the value brought to the clinical topic by the foundational science topic is both understandable and actionable.
Critical review	Selective but extensive	Evaluates articles on the basis of their contribution to the model being built	Narrative characterization of a new model, framework, or theory	Narrative characterization of novel distinctions that are being incorporated into the model, framework, or theory	Much rigor is required to propose a new model, framework or theory that stands up to peer review.

Option 4: Breadth Review Paper

This type of qualifying paper demonstrates knowledge of basic psychological concepts relevant to clinical intervention and research methodology, as well as the ability to integrate that knowledge. This qualifying paper is designed to facilitate thinking about the dissertation project. Students must demonstrate adequate knowledge in the substantive area they have chosen, *as well as broad knowledge of concepts relevant to clinical psychology*. To prepare for this paper, the student will choose a broad area in psychology in consultation with his/her mentor. Then, the student will prepare a **3-6 page outline** that details how the following areas will be addressed: Research Design and three out of the following

four areas: Assessment, Psychotherapy, Psychopathology/Learning, and Healthcare Systems/Management. Students must address the theory and application of these four areas of clinical psychology to their stated area of interest. Include a prose paragraph that provides some information about the importance of the topic and aims of the paper, and then an outline for each of the four chosen areas (this paragraph will not be scored, though it will be counted in your final page count if utilized in the final product). The outline should include a brief explanation of how the topic is relevant, as well as some key citations. For example:

Topic: Development of Child Anxiety
    I. Research design
            A. Threats to validity
                    1. Retrospective vs. prospective studies (Rutter, 1986)
                    2. Reporter bias
                        a. Parents as reporters (Davidson, 1975)
                        b. Children as reporters (Bell-Dolan, 1996)

Please note that this is an example. Students need to consult with their mentor and committee for the level of detail needed for their topic. The prospectus serves as the table of contents for the qualifying paper.

Many portions of this type of paper may be incorporated into the introductory section of the dissertation. However, some areas will be broader than needed for the dissertation proposal. This is to ensure the required breadth of coverage in each area. The following outline should serve as a guide (students do not need to cover every bullet point in these examples) in deciding how to cover the topic. Be aware of the faculty audience in that students do not need to define reliability and validity for example, but instead demonstrate their knowledge of these concepts by applying/comparing/contrasting them within the topic area.

Research Design – a critical analysis of the literature is required including coverage of threats most relevant to the topic
    - Designs used to answer the research question(s)
    - Why these designs
    - Assumptions of these designs
    - How is power evaluated
    - Threats to validity of these designs
    - Biases
    - Problems in the generalizability of findings based on these designs (including for diverse individuals)

Assessment
    - Psychometrics
    - Multimethod, multimodal approaches
    - Clinical judgment vs. statistical prediction
    - Diversity issues in assessment
    - Ethical issues in assessment
    - Diagnosing and labeling
    - Continuous assessment

Psychotherapy

- Evidence-based approaches
- Evidence-based treatments
- Systematic review findings and implications
- Process variables
- Ethical challenges
- Case conceptualization, treatment planning
- Goal setting and evaluation
- Conceptualization of change and termination

Psychopathology/Learning
- Historical context of pathology
- Diagnostic problems
- Cultural considerations
- Comorbid diagnoses (why)
- Etiology
- Symptom features
- Contrasting theories of psychopathology
- Learning history of disorder
- Antecedents/consequences of behavior
- Factors that interfere with new learning
- Alternative behaviors to be learned

Systems/Management
- Implementation of a treatment or preventative program
- Program evaluation
- Problems of professionals in this area
- Disciplines of people who are responsible for this area
- System considerations including external systems
- Management considerations
- Financial considerations
- Supervision issues

The four areas should be covered in 8-12 pages each. The entire paper should be **no longer than 50 pages, including tables, graphs, and figures, but excluding references**. Exceeding the page limit will result in failing the qualifying exam.

Faculty will use one of two similar evaluation forms depending on which of the qualifying exam formats the student utilizes. The Option 4 score sheet is found here: https://www.emich.edu/psychology/documents/qualifying-paper-score-sheet.pdf?v=2020-08-18T18:15:21Z. The score sheet for the first 3 options is found here: https://docs.google.com/document/d/1aXTSi6nXlQ1nGmjsfpid2g-kykGUPoNd/edit?usp=share_link&ouid=105328724876297233252&rtpof=true&sd=true **Please read carefully before writing the paper to understand the evaluation criteria**. The student will receive feedback on their final qualifying examination within one month after submission (faculty members have two weeks to provide ratings and an additional two weeks to schedule a committee meeting). University holidays are not included in the time faculty are permitted to review and provide ratings, however, they are included in the time students have to write their paper. The Qualifying Paper Committee Chair will be responsible to ensure timely feedback is received from the committee members. The Chair will coordinate the documentation and provide feedback to the student.

In order to pass the qualifying paper:
- Students must pass all content sections/facets of paper evaluation.
- Students can fail one content section in Option 4 (e.g., Assessment), or facet in Options 1-3 (e.g., Comprehensiveness) and resubmit the section (Option 4) or full paper with changes (Options 1-3) one month after meeting with the committee. Faculty will have two weeks to review, meet, and come to a final decision. If the student passes the section or facet on the second attempt, they pass the qualifying paper. If the student fails the rewrite, they must propose and complete an entirely new qualifying exam.

If a student fails two or more content sections (Option 4) or facets (Options 1-3), they fail the qualifying exam and must do the entire paper process again, including submitting a new prospectus and/or a new format for their examination on a new topic. There is an eight-week minimum time lag between the feedback of failure on the first paper and resubmitting the new prospectus. A rewrite is not permitted for the second full qualifying exam attempt-there must be a full pass. The Qualifying Exam Results Form: https://drive.google.com/file/d/1jtLXy35UBttVP4ZKRzZdNKbDAisnaIYU/view?usp=share_link should be completed by the Chair and signed by the committee members for each attempt following communication of the results and plan with the student. It should be sent to the DCT for signature and the student's file.

The Qualifying Paper Prospectus Approval form may be found here: https://drive.google.com/file/d/1M1fWw_RJLRUBhqr9s2_lEdtLHcnRzCTc/view?usp=share_link, and is signed when the prospectus is approved. Unanimous approval is required for the prospectus and final document based on the evaluation scoring criteria. This form is submitted to the Director of Clinical Training for placement in the student's file. Students provide the Director of Clinical Training with an electronic copy of their approved prospectus and final qualifying paper document (including all rewrites) for their student file.

NOTE: *Students who plan to apply to internship in the upcoming academic year, must successfully complete their qualifying paper and dissertation proposal by the deadlines outlined below in the internship section.*

The Qualifying Paper is **due to the committee members by 5:00 p.m.** on the date indicated on the Qualifying Paper Approval form. Students may submit the paper early. All papers must be typed, double-spaced, with 12-point font and one-inch margins, or formatted in accordance with the requirements of the journal or grant agency if those options are chosen. Kerning is not permitted. Papers must be in current APA format. Students may ask faculty for help/suggestions while preparing the prospectus. However, faculty will not provide help once the prospectus is approved. In addition, students may not receive assistance from any other source such as other students, The University Writing Center, or professional editors in writing their qualifying examination. **This needs to be an entirely independent effort, as it is an examination**. It is assumed that the bulk of the writing will be done after the prospectus is approved.

Dissertation Requirements

The dissertation is an original contribution to the professional psychology research literature prior to completing the Ph.D. An empirical approach is employed to contribute new knowledge or

understanding to the field.

It is expected that either the thesis or dissertation project involves original data collection with the student's participation, and ideally, design input. If this requirement does not support the student's research program, the student should petition the Doctoral Training Committee to utilize existing data for more than one project. As exemplified in the implementation of complex secondary data analysis to answer new questions with large datasets, this may be an appropriate choice.

Ideally, during the summer of the third year of the program, the student will develop a proposal for their dissertation. During the fourth year, the student will register for six dissertation research credits and utilize the time to conduct the research.

The Graduate School website contains the Dissertation Manual: Graduate Studies Dissertation Manual. This manual provides detailed instructions for completing the dissertation. Note that both the department and Graduate School requirements must be met in the completion of the dissertation.

Committee Composition
There are two principles that inform the program's thinking about the committee. First, the student needs a primary mentor who has the expertise to aid the student in carrying out the dissertation research and writing. Second, the dissertation should pass the scrutiny of and be comprehensible to a broader community of scholars. The following composition of a dissertation committee is true to those principles. The dissertation committee must have at least four voting members (and not more than six) and be composed of:
1. A chairperson, who is a member of the psychology department faculty.
    (Note: A faculty member from another department at EMU or a person outside the EMU community may co-chair the dissertation along with a Psychology Department faculty member if the individual is judged by the dissertation committee to be the most appropriate mentor for the student. This decision must be approved by the Director of Clinical Training, the Department Head, and the Associate Vice Provost for Research and Graduate Studies).

2. Two other departmental faculty members;

NOTE: *The dissertation committee must have at least one clinical faculty (faculty whose training was in a clinical program; they need not be a licensed clinician) and one nonclinical faculty member.*

3. At least one faculty member from outside of the Psychology Department; this person is the Graduate School representative. They should have an "arm's length" relationship to the student and the clinical program and serve to improve the quality of the research experience through their academic expertise. This person can be a member of the EMU community or someone from outside the university. Such an individual must hold a Ph.D., have expertise relevant to the particular dissertation, and be approved by the Dissertation Committee Chair, the Director of Clinical Training, the Department Head, and the Associate Vice Provost for Research and Graduate Studies. For non-EMU external members, the person's CV must accompany the Dissertation Committee Approval form.

The role of the chairperson of the dissertation committee is to provide the primary guidance of the

student's work throughout the project. The role of the other members is to supplement this guidance with feedback and suggestions; the members also participate by scrutinizing the research design, evaluating the quality of the research, and approving the proposal.

Dissertation Proposal

The student will formally choose a faculty member to serve as Chair of the dissertation committee, typically their primary mentor. In consultation with the chair of the committee, the student will choose other members of the committee based on their expertise and ability to meet the committee requirements. Once the dissertation committee is formed, the Dissertation Committee Approval form - https://www.emich.edu/graduate/documents/disscom2020.pdf?v=2020-08-25T12:18:56Z must be submitted and approved by the Director of Clinical Training and the Associate Vice Provost for Research and Graduate Studies prior to the proposal meeting. Replacing committee members requires approval of the Doctoral Training Committee and submission of a new Dissertation Committee Approval form.

The student will produce and revise drafts of the proposal with feedback from the dissertation Chair. Once approved by the Chair, the document will be distributed to all committee members. Faculty have up to two weeks to review each draft or they schedule and communicate a near turnaround date in exceptional circumstances. These guidelines do not apply during the summer and over holiday periods when faculty may not be on contract or have other university responsibilities. It is the student's responsibility to anticipate these breaks and negotiate different project timelines with their faculty mentor while clarifying expectations and willingness regarding document reviews. Faculty should not be pressured by students or other faculty to review documents faster than the time frames outlined in the handbook or during holidays or breaks. Dissertation committee members have at least two weeks to review the document before stating if it is ready to be formally proposed. Given the difficulty with scheduling, a tentative meeting can be scheduled in advance (~4 weeks after distributing the document) as long as faculty still have at least two weeks to preliminarily review the document and the dissertation Chair confirms with the committee that in their estimation the document is ready for the proposal meeting. Students can expect that faculty will raise significant issues, give feedback, or provide suggestions related to the document at approximately the two week review mark (to be revised for the presentation at the four week mark); however, other important issues and ideas can be raised during the meeting. If committee members find significant problems, the defense may be delayed so that the student can resolve the issues. Then the review and scheduling process begins again. After an oral presentation and defense of the proposal that parallels the thesis process described above, if all members of the committee are satisfied with the rationale and methodology, the committee members will sign the Dissertation Proposal Approval form - https://www.emich.edu/graduate/documents/dissprop2020.pdf?v=2020-08-25T12:18:56Z. The completed form is submitted to the Director of Clinical Training for review and approval prior to being forwarded to the Graduate School by the DCT. Finally, an electronic copy of the proposal is sent to the program administrator and Director of Clinical Training for the student's file.

All doctoral research involving human subjects must have approval from the University's Human Subjects Review Committee. This is a committee of faculty across the university community. Students submit proposals and the Human Subjects Review forms to this committee - Human Subjects Protections-IRB - Research | Eastern Michigan University.

STUDENTS MAY NOT BEGIN TO COLLECT DATA UNTIL THEY HAVE OBTAINED UHSRC APPROVAL.

Students must apply for and complete EMU research compliance training prior to conducting human subjects research. Documentation of completed training should be provided to the mentor and Director of Clinical Training for the student file.

Institutional Animal Care and Use Committee
Students utilizing vertebrate animals for research must have their study approved by the Animal Care Committee - Animal Care & Use - Ypsilanti.

Academic credit for the dissertation
Students may register for PSY 896/897/898/899 (1/2/4/8 dissertation credits) after they have successfully completed their master's thesis and are ready to begin the dissertation. Six dissertation credits are required and these are typically taken during the last year of fellowship funding. Students will receive a grade change for these dissertation credits once they have successfully defended the dissertation (the grade will remain IP, in progress, until the successful defense).

Dissertation Defense
The student and the dissertation Chair work closely to develop the final dissertation document that recounts the research rationale, experience, findings, and interpretations. Students typically have several revisions based on ongoing input from the dissertation mentor before a draft is deemed acceptable. It is the sole judgment of the mentor to determine whether a dissertation is adequate, ethical, and feasible. The dissertation must follow APA Style, while the format of the manuscript must conform to the requirements of the Graduate School. Once the mentor agrees that the dissertation is ready to be defended, the student distributes the dissertation to the other committee members. The committee will have **at least two weeks** to review the document prior to providing preliminary feedback. Given difficulty with scheduling, a tentative meeting can be scheduled in advance (~4 weeks after distributing the document). The dissertation chair confirms with members that the committee agrees the document is ready for the defense meeting at approximately the two week mark when students can make revisions to address those concerns (to be presented at the final defense). Students can expect that faculty will raise significant issues related to the document at that time and depending on the extent of the concerns, the defense may be delayed for revisions and a reinitiation of the review and scheduling process; however, other issues and ideas can be raised during the meeting. Students should anticipate delays during summer and early fall when not all faculty are available, and scheduling preference is given to internship applicants completing their dissertation proposals for the internship application deadline.

The student has the responsibility of coordinating committee member's schedules for the two-hour formal defense of the completed dissertation. Additionally, the student notifies the department administrative assistant of the date, time, and location of the defense as well as of the dissertation title at least two weeks in advance of the meeting. The administrative assistant will notify the University community of the oral defense. The final defense of the dissertation will be a meeting open to the public and must be held in a location accessible to the public on campus (e.g. Mark Jefferson, Halle Library, etc.). The oral defense of a dissertation is a deeply rooted tradition as the culmination of research training leading to a doctorate of philosophy in psychology.

After a 30-45 minute overview of the study with slides, there will be a 30-45 minute question and answer session. This part of the defense is open to the public for comment. The student, and any public attendees, will then be excused, and the dissertation committee will decide if the dissertation is approved in executive session. Only committee members will vote on the adequacy of the dissertation. All committee members must unanimously approve the oral defense and document. If the dissertation is not approved, a discussion of needed changes and a timetable for completing them will be held before adjourning the meeting. When approved, the committee will sign the Dissertation Oral Defense Approval form - https://www.emich.edu/graduate/documents/dissordef2020.pdf?v=2020-08-25T12:18:56Z. The student must send the signed oral defense form to the Director of Clinical Training for a signature. Once the committee members have approved the dissertation *document*, the Dissertation Document Approval form - https://www.emich.edu/graduate/documents/dissordef2020.pdf?v=2020-08-25T12:18:56Z is signed. The student must submit the signed document approval form to the Director of Clinical Training for a signature. Once reviewed and approved by the Director of Clinical Training, this form will be forwarded to the Graduate School. The student submits a copy of the dissertation to the Graduate School along with a completed copy of the Dissertation Information Sheet (see Graduate School Dissertation Manual). The DCT will forward the approval documents to the Graduate School.

Students should modify the Dissertation Oral Defense Approval form and the Dissertation Document Approval form with their relevant information prior to the defense and make the documents available to committee members for signatures.

Students provide the program administrator and Director of Clinical Training with an electronic copy of their approved dissertation proposal and final document (accepted by the Graduate School) for their student file.

Applying for Internship

After successfully completing the qualifying paper and dissertation proposal, and with approval of the Doctoral Training Committee faculty, a year of internship in an APA accredited or APPIC member program is required of all students. Students must successfully meet their milestones in a timely manner to receive support from the Doctoral Training Committee to apply for internship. A misstep at any point in completing the milestones can result in a delay of a year or more in applying for an internship. For this reason the Doctoral Training Committee strongly encourages students to aim to complete their milestones by the target dates listed in the table below. Students waiting to complete these milestones by the absolute deadline of October 1 are at high risk of failing to meet all requirements for internship on time. For example, it is common to have to make revisions to the written proposal or final document based on discussions during the defense meetings. The Dissertation Proposal Approval form is not signed until those revisions are made. Completing your dissertation proposal by the target date ensures that you will have data collection well underway in advance of applying to internship.

Milestone	Quick start deadline-5 year completion (suggested dates)	Regular 5 year deadlines (aim earlier)	Extended program deadlines (aim earlier)

Committee approves Qualifying paper prospectus	2nd yr. July 15	3rd yr. Feb. 15	4th yr. Feb. 15
Qualifying paper is submitted to the committee	3rd yr. Sept. 1	April 1	April 1
Dissertation proposal is submitted to the committee	February 15	4th yr. Sept. 1	5th yr. Sept. 1
Successful dissertation proposal is completed (signed Dissertation Proposal Approval form by all members of the committee)	April 1	October 7	October 7

For students who petition and receive approval from the Doctoral Training Committee to complete their dissertation proposal prior to the qualifying exam, the qualifying paper must have the prospectus approved and start the writing process by June 1 of the summer before the student is planning to apply for an internship. The qualifying paper must be passed prior to the dissertation defense and submission of internship applications.

Internship normally takes place in the fifth or sixth year and is an academic requirement of the program. An internship is a 2,000-hour (one-year full-time) placement at a multidisciplinary treatment facility. Students will participate in advanced clinical training experiences in assessment and treatment, working with specific clinical populations. Some sites emphasize clinical research training as well. Students apply to internships all over the country. A list of internship sites can be obtained from the APPIC website (www.appic.org). Also, many professional psychological and research associations (APA, ABCT, ABAI, SRCD, APS, and SBM) sponsor program events at their meetings to bring together internship sites and potential applicants. Students should consider attending one of these meetings in their second or third year of the program. International students should become aware of residency and citizenship restrictions associated with some types of internships and plan accordingly.

The Association of Psychology Postdoctoral and Internship Centers (APPIC) is the organization that facilitates access to accredited and vetted APPIC member internship and postdoctoral training programs in professional psychology (i.e., Clinical, Counseling, and School Psychology). APPIC aids professional psychology internship placement through a match process. In October students apply for internships through APPIC utilizing the Time2track system for organizing and submitting documentation of their clinical experiences, along with other materials. Sites offer some applicants interviews beginning in December. Then, APPIC attempts to "match" students to placement sites across the country in February. A second match process is offered in March for any students registered for the first match and not placed with an internship site. Finally, a Post-Match Vacancy Service is available for students who remain unmatched. The internship application form and the Match Policy are available on the APPIC Website (www.appic.org).

Students must pass their qualifying paper and have their dissertation proposal approved by their committee by October 7th of the year before they plan to go on internship. Many internship programs have application deadlines as early as the same October and most are due by November 1st. The Director of Clinical Training must fill out APPIC's "Verification of Internship Eligibility and Readiness," which certifies the student's amount and types of clinical experience and verifies the readiness to apply to internship as determined by the Doctoral Training Committee faculty during the annual evaluation process. The internship application is fully online.

The process of applying for an internship is very demanding. Students begin their preparations during the summer of the year the student plans to apply. Students should review the APPIC online directory that describes programs and visit program websites for additional information early. It helps to be very organized and to approach the application process much as students approach applying to graduate school. The Director of Clinical Training will have several meetings with prospective internship applicants to aid students in the process. The meetings will help students choose internship sites, revise their CVs, write the required essays and cover letters, and understand the match process. Students and alumni who have completed internships recently are more than willing to talk with students about specific internship programs and the application process. While many interviews are being conducted remotely, students may need to plan for travel expenses to interview at some sites. Additional financial aid may be available the year students apply to internship (see the Director of Clinical Training for more information). Interviews typically take place during December and January.

Here is a typical internship application timeline:
May of first year – review requirements for recording clinical hours and begin tracking hours
Second and third year – review APPIC online directory and utilize network (including other program students) to identify potential internships and the requirements of the sites that are of interest
The year before you apply, complete program milestones by the target dates listed above.
July – August of the year applying – attend internship meetings, finalize CV, complete first draft of essays and cover letter template, select sites, and obtain information about the application, letters of recommendation, and Director of Clinical Training verification.
September of year applying – begin to complete the APPI online, submit official transcripts, request letters of recommendation, and collaborate with the mentor on goals, strengths and mitigating circumstances program letter to be finalized by the DCT.
September – October 7th of application year – finalize any remaining program milestone requirements before the absolute deadline
October - November – submit applications to selected sites
November-December 15th – interview notifications and interview practice with internship cohort
December – January – participate in interviews
Early February – submit ranking list
Late February – Match results notification
Early March – submit materials for Match 2 if necessary
Late March – Match 2 results notification
April – September – review openings in the Post-Match Vacancy Services if necessary

Graduation and Degree Conferral

An application for graduation is required at the beginning of the semester when the student intends to finish either the master's or Ph.D. Degrees are conferred approximately three weeks after the graduation

date and the degree is posted on the transcripts at this point. Participating in the graduation ceremony is not the same as finishing the program and having the degree officially conferred. Students may petition the registrar (Commencement request) to participate in the graduation ceremony in the event prior to the completion of their internship if all other requirements have been met. The degree is then conferred upon completion of the internship.

Master's Conferral and Impact on Financial Aid

Once students complete their master's degree and are no longer taking classes (or receiving final grades for credits taken), eligibility for financial aid can be impacted. Specifically, receiving in progress grades for dissertation credits will not automatically qualify for successful progress towards the degree since these are not final grades. Check with the Financial Aid Office to determine how to best proceed if this occurs. Thesis and dissertation IP's will not be changed until the student successfully defends these projects, but letters can be submitted indicating that students are on track to complete their degrees.

Malpractice Insurance During Internship and Practicum

During the first four years of the program when enrolled, student clinical practice risk is managed by the liability insurance of EMU (see EMU Psychology Clinic Policy and Procedures Manual) based on program and course requirements for practicum training. This includes offsite practicum placement. However, this coverage is standard and does not cover all allegations that could be made against a student. When students engage in additional training that is not required by the program or coursework, both university and clinic malpractice coverage cease. In those situations students must purchase liability insurance. Proof of liability insurance coverage will be required in order to see clients in the CBHC beyond the fourth year when that practice is not a requirement of the program.

Licensing

Sites may require students to obtain a license from the State of Michigan before beginning an advanced external practicum or internship. Michigan has several levels of licensure. Application materials are available from the state. Students are typically eligible for licensure following their internal practicum training experience. The Michigan LARA website is: Michigan Board of Psychology. In order to see clients in the CBHC beyond the fourth year in the program, documentation of temporary limited licensure (TLLP) is required.

After completing all program requirements, including the internship, students are eligible to apply for a Doctoral Limited License Psychologist (DLLP), an educational license to obtain additional clinical training hours toward full licensure. To obtain full licensure, students must complete 2000 additional hours of supervised clinical work and pass the national psychologist's licensing exam (EPPP). Criteria for passing the licensing exam are determined by individual states and for Michigan this includes a score of at least 500. It is the student's responsibility to monitor and adhere to changes to the licensure procedure in Michigan and any state in which the student would like to practice.

The Board of Examiners of Psychologists of each state, through licensing law and regulations, establishes requirements for taking the EPPP. Some state boards require that specific courses appear on the transcript. If such courses do not appear on a transcript by title, the applicant for licensure is required to document that a course or courses with suitable content were completed as part of training. If that is not possible, the Board may deny an applicant the privilege of taking the licensing examination.

Students may want to consider this when choosing elective courses for their personalized program of study.

The documentation is typically in the form of course syllabi. Sometimes a letter from the faculty member who taught the course can be substituted, but Boards may require other documentation. *KEEP SYLLABI FOR ALL COURSES (NOT JUST CLINICAL PROGRAM COURSES) FOREVER. SOME STATES DO NOT HAVE RECIPROCITY FOR LICENSURE. STUDENTS MAY NEED THIS INFORMATION MANY YEARS FROM NOW.* Alternatively, students may choose to "bank" their credentials with ASPPB (see http://www.asppb.net/) so that proper documentation is available in case they want to switch licensure jurisdictions during their career. We recommend that you contact the relevant licensing board to inquire about these issues prior to moving to a new jurisdiction.

Professional Development

Students are encouraged to join the American Psychological Association (APA), the Association for Psychological Science (APS), and other organizations relevant to their research and clinical interests upon entry to graduate training: APA Divisions. Membership in these organizations provides access to graduate student advocacy and opportunities for research and clinical training. The American Psychological Association Graduate Student organization (APAGS) provides useful and important information for students. Students may also consider memberships in specialty organizations (e.g., Association for Behavioral and Cognitive Therapies, Society for Research in Child Development, Society of Behavioral Medicine, and Gerontological Society of America) and specialty areas of APA (e.g., Society for Pediatric Psychology, Division of Adult Development and Aging, etc.).

Students are also encouraged to attend professional conferences associated with these organizations. Students are expected to submit poster and/or paper presentations at relevant conferences including the Graduate Student Research Conference and department sponsored Behavior Analysis Association of Michigan (BAAM) at EMU. Travel money for graduate student presenters may be available through the Graduate School, the College of Arts and Sciences Dean's Office, and the Psychology Department (students should seek funding from all three offices simultaneously). The department also provides professional development opportunities in the form of guest lectures, webinars, brown bag lunch topics, and local clinical training workshops as funds are available.

The APAGS Committee on the Advancement of Racial and Ethnic Diversity (CARED) and the Committee on Sexual Orientation and Gender Diversity (CSOGD) conducted a study related to the impact of diversity on the program and training experiences of APAGS members. They highlighted, "Mentorship opportunities for students from diverse backgrounds are not only important to graduate student success and training satisfaction, but also key to increasing diversity in the academic and professional psychology pipeline," (APAGS Diversity Infographic). While we highly value and pursue diversity and inclusiveness in our faculty, students, and broader community, we are not always as successful as we would like in attracting and retaining people with various diverse identities. The following suggestions for accessing additional mentorship may be useful in this regard:

Society for the Psychological Study of Culture, Ethnicity, and Race (Div. 45)
-Virtual mentor program -
http://division45.org/students/division-45-mentoring-program/#link_tab-1423607429-1-35. Also, the

Links and Shoulders Graduate Student Mentoring Hour is an annual event held at the APA Convention by Div. 45 members.

The American Indian and Alaska Native Society of Indian Psychologists – [Society of Indian Psychologists](#)

The Association of Black Psychologists Jegnaship Program – [Jegnaship Program](#) provides virtual mentorship

APAGS LGBT Graduate Student Mentoring Program – http://www.apa.org/apags/governance/subcommittees/clgbtc-mentoring-program.aspx

Society of Counseling Psychology (Div. 17) –
-Leadership Academy – http://www.div17.org/groups/scp-leadership-academy/
-International Mentoring (for International Students) - http://www.div17.org/sections/international/community/imoc/

Annual Request for Student Information to Facilitate Program Activities and Maintain

Accreditation

It is imperative that students maintain contact with and inform the Director of Clinical Training and Clinic Director of changes to their address and telephone number as it is needed in the university system. We must be able to find students in case of a problem or emergency. Students will also need to inform the Clinic Director how to contact them if they are going on an extended vacation.

Each summer the Program reports student accomplishments to the Commission on Accreditation. The questions routinely asked annually are:
1. Membership of a professional or research society.
2. Number of books, book chapters, or articles in peer-reviewed professional/scientific journals.
3. Number of workshops, oral presentations, and/or poster presentations at professional meetings.
4. Involved in leadership roles/activities for professional organizations
5. Presented a psychological topic to lay or community audience.

Students will be sent this survey (along with other questions relevant for the report and annual student evaluation process) annually while in the program and until they are fully licensed psychologists. Students should begin thinking about involvement in the various scholarly activities and organizations early in the program.

Policy Regarding Web Pages, Social Media, and Blogs

It has become increasingly popular for people to have personal web pages and/or to participate in creating internet and social media content. The purpose of this policy is to provide some guidelines about any public representation of students or the program over the web. Although this policy applies to individual's web pages and/or blogs, nothing here is intended to limit it to only these public presentations.

If a student's web or social media presence does not include any mention or indication of the fact that

they are a clinical psychology doctoral student, what they put on it and how they represent themselves personally is not the business of the program. However, increasingly, universities, internship sites, and even clients are seeking out digital information about people before they make faculty offers, final match decisions, or even decide to see someone clinically. There are now numerous anecdotes of well-qualified Ph.D. graduates not receiving postdoc or faculty offers because someone viewed something that was considered to be inappropriate or objectionable; similar stories about internship sites deciding not to match someone also exist. It is in the student's own best interest to seriously consider how material made public may be viewed by future employers, training sites, or clients.

If the student's social media identifies them as a clinical psychology graduate student, the program has responsibility for how they are portrayed. The student's presence must meet all legal and ethical guidelines from the Board of Psychology and the American Psychological Association (e.g., students cannot represent themselves as a "psychologist" in the State of Michigan); their content must be professional and must not contain objectionable material, particularly information that is publically available. We will not actively search out students' internet or social media content. However, if we become aware of content that identifies them as a clinical psychology student and that content is considered by the Doctoral Training Committee to be unethical, illegal, or in violation of any relevant EMU, APA, or Michigan licensing policy, we will ask the student to modify or remove the problematic material. Should they choose not to modify or remove the material; the Doctoral Training Committee will follow the existing procedures for dealing with student misconduct and/or unethical behavior including possible termination from the program.

General Policies and Procedures not Covered Elsewhere

Student Input
Students should have ready access to program decisions and a way to have input into the policy developments of the program. Toward that end, two elected student representatives will attend monthly meetings of the Doctoral Training Committee. The student representatives will not be present for the discussion of issues pertaining to specific students or other sensitive matters. Students will elect the two representatives annually (one person representing the first two years of the program and the other representing the advanced students).

Inappropriate Professional Relationships
The American Psychological Association's Ethical Principles of Psychologists and Code of Conduct (provided during orientation) guide our policies and practices. Students should familiarize themselves with this code of ethics and use it as a guide in their professional and educational practices. The following are areas that often raise ethical dilemmas for students.

Relationships with Undergraduate Students
When students serve as a teaching assistant or student instructor, they are in a position of authority with the undergraduate students. Doctoral Fellows are governed by the same standards of conduct in the performance of their academic responsibilities as are members of the faculty. For purposes of emphasis, the university considers it inappropriate conduct for a teaching assistant, assistant lecturer, or student instructor to have a dating, intimate, sexual, or financial relationship with one of their students. All Doctoral Fellows shall respect the rights and opinions of students and uphold all academic standards of the university in the classroom, clinic, or laboratory setting. Doctoral Fellows must follow all university

policies on sexual harassment ([Title Nine Policies](#)), successfully complete training on sexual harassment, and provide documentation of successful completion for their student file.

Relationships between Doctoral Students and Faculty

We aim for collegial, mutually respectful relationships among faculty and students in the clinical psychology program. Maintaining this ambiance requires a high level of professionalism, integrity, and courage on the part of everyone. If anyone experiences sexual or other harassment, change can occur when they report their concerns to either the Department Head or the Sexual Misconduct Prevention and Response Office ([Title Nine Policies](#)). We highly encourage anyone with any knowledge of misconduct to report it.

In collaborative research: (a) faculty and students should discuss ownership of data and authorship on presentations/publications early in the process so that each is aware of their role; and (b) faculty and students should publicly acknowledge one another's contributions at conferences, in written work, etc. Guidelines about authorship and authorship order are addressed further in the APA Ethical Standards [APA Ethics Code](#)

A dual relationship between a faculty member and student exists when the individuals fill roles beyond what is typical in faculty-student relationships and/or the relationship is exclusionary from other faculty-student relationships (see Ethical Standard 3.05 Multiple Relationships). Examples of dual relationships include, but are not limited to romantic/sexual involvement, financial partnerships, close personal friendships, family relations, etc. The effects of the dual relationship are not limited to the two individuals involved but potentially affect many persons in the program. Ideally, dual relationships should be avoided. In the event that a dual relationship arises, however, it is important that these relationships become known to others in the program rather than be kept a secret so that ethical decision making is supported. Psychotherapeutic relations between faculty and students must be avoided altogether.

The Ethical Principles of Psychologists explicitly state that, "Psychologists do not engage in sexual relationships with students or supervisees in training over whom the psychologist has evaluative or direct authority, because such relationships are so likely to impair judgment or be exploitative" (Ethical Standard 7.07 Sexual Relationships with Students and Supervisees). Should an intimate or multiple role relationship with a faculty member exist, the guidelines are as follows: a faculty member involved in a dual relationship should not be: (a) instructing or supervising that student, (b) participating in the research or clinical guidance of the student, or (c) participating in the evaluation process of the student. Depending upon the nature of the dual relationship, these guidelines may also be applied even if the dual relationship is terminated. The current ethical guidelines indicate that even if a faculty member does not have evaluative authority over a student, personal or intimate relationships are inappropriate and unethical.

For relationships between Doctoral Fellows or adjunct faculty and undergraduate students or faculty and graduate students, unethical relationships include those that are non-professional, particularly those of an intimate, financial, or sexual nature. Such relationships may create an unequal playing field, unavailable opportunities for other students, or may create an environment where it is difficult for the individual to say no to the person in a position of power. Engaging in such a relationship could result in disciplinary action up to and including dismissal from the program for current doctoral students and employee

disciplinary actions for faculty.

Selective Service Registration

All male doctoral students should confirm that they have registered with the selective service (https://www.sss.gov/verify/) prior to the age of 26. Failure to do so will prevent males from obtaining positions in the government or VA systems including internship, postdoctoral fellowships, and employment.

Student File Retention Policy

The program will maintain student electronic files indefinitely to facilitate verification of education at any point in the student's career. The program will not send any evaluation materials or forms outside of the University without a written request from the student other than evaluations for the completion of letters of recommendation, readiness, or confirmation of education.

Adjunct Teaching after Completing Fellowship

The department can often offer adjunct teaching opportunities to students once they complete fellowship. A full teaching load for doctoral students includes two courses that the student taught before or one course that is new for the student adjunct instructor. Exceeding this limit requires approval by the Doctoral Training Committee. Additionally, no assignments within the university can total more than 29 hours per week.

Adjunct Teaching While on Internship

Students may teach while on internship if their dissertation is successfully defended, they are not teaching the course for the first time, and their mentor is notified.

Credits and Financial Aid

Students are not permitted to take extra credits just to increase their financial aid eligibility when those credits are paid for by the Graduate School. Credits are monitored by the Director of Clinical Training and engaging in this behavior will result in the Doctoral Training Committee considering disciplinary action.

Doctoral Training Committee Meeting Quorum, Voting Rights, and Passing Votes

The Doctoral Training Committee requires at least two thirds of its members to be present when votes occur. All members of the Doctoral Training Committee have voting rights and all votes will be passed based on a simple majority.

APPENDIX A

Guidelines for Mentors

GUIDELINES FOR MENTORS

The academic advisor has the primary responsibility for guiding the student through the graduate program and ushering the student into a career in psychology. As such, the advisor provides opportunities for the student to conduct research, structures the student's progress through the graduate program, provides ongoing feedback about the student's work,, and prepares them for a successful career in psychology. Collaboration, mutual respect, adherence to ethical principles, and sensitivity to diverse viewpoints and cultural backgrounds mark the advisor/advisee relationship.

Expectations for Advising Students
- When the student applicant is interviewed, the potential advisors are explicit about their research interests, future research plans, and preferences about work style.
- Advisors meet regularly with their advisees and take into consideration the developmental phase of the student in establishing expectations for collaboration.
- Advisors are explicit about expectations for required projects and timelines for progress toward timely completion of the thesis.
- Advisors assist students in selecting courses and defining a minor area of specialization.
- Advisors discuss with students their policies on joint authorships.

Ongoing Feedback
- Advisors provide informal feedback frequently, not just at the end of each year.
- Corrective feedback is specific and is accompanied by helpful recommendations for improvement.
- Advisors meet face-to-face with students at the end of each academic year to discuss the year-end evaluation letter.
- Specific progress, both satisfactory and unsatisfactory, in multiple areas is reviewed.
- Mutually agreed-upon goals and expectations for the upcoming semester and year are discussed.
- Barring unexpected circumstances, which should be discussed with the student, Advisors should return drafts or portions thereof in a negotiated timely manner, generally two weeks.
- Emails are answered in a timely manner.

Professional development
- Advisors encourage and provide guidance in submitting manuscripts for publication, conference presentations, grant and award applications, and means for financial support.
- Advisors help the student transition to a career in psychology by fostering contact with colleagues outside of the Department and University, encouraging broad exposure to the work of other faculty, providing feedback on the job talk, discussing the application process, and apprising the student of career options outside of academia.

Other
- When planning a sabbatical, advisors arrange for mentoring during their absence.
- When terminating employment at the University, advisors assist the student in transitioning to a new advisor.

*adapted from University of Illinois, Chicago's Guidelines for Advisors

APPENDIX B

Guidelines for Students

GUIDELINES FOR STUDENTS REGARDING MENTORSHIP

The student's primary academic advisor is an important figure in fostering progress through the graduate program. As such, the advisor provides opportunities for the student to conduct research, structures the student's progress through the graduate program, provides ongoing feedback about the student's quality of work, and prepares the student for a successful career in the field. Mentoring is a collaborative process; there are guidelines for good advising (see Guidelines for Mentors), and guidelines for students regarding the best way to respond to and work with your advisor. The Department is committed to providing you resources and encourages broad exposure to Department and other researchers and clinicians.

At the beginning of graduate school
- Ask your advisor to be explicit about her/his research interests, future research plans, and preferences about work style.
- Discuss mutual expectations with your advisor regarding timelines, milestones and goals.
- Make specific rather than general requests of your advisor (e.g., if you are someone who works better with frequent meetings and concrete deadlines, ask for them!)

Be proactive
- Initiate contact with your advisor; do not wait for him/her to come to you.
- Inform your advisor of when he/she will receive a work product for review and comment and communicate if and why there is a delay and make a new commitment.
- Be mindful of summer breaks and 8-month appointments of professors; plan ahead to complete milestones within the academic school year.
- Rely on the Doctoral Handbook for answers to questions, policies, and procedures, and ask your advisor for clarification when necessary.

Conduct yourself professionally and ethically
- Office and hallway conversations reflect on you and can be heard by others. Communicate professionally and collegially in all modalities.
- Learn and follow ethical codes for research, teaching, and clinical practice.
- Discuss with your advisor how you would like to receive feedback and respond to feedback in a professional manner.

Take your career seriously
- Start thinking of yourself as a future colleague, by attending departmental presentations, joining professional associations, and by attending conferences to network and present your own research.
- This is your career and you bear ultimate responsibility for it.

Be responsible
- Show up for scheduled meetings on time with an agenda of what you want to accomplish. Collaborate flexibly with your colleagues.
- Inform your advisor (ahead of time) if you cannot make a meeting and make a plan to reschedule.
- Respond to emails promptly.
- Be upfront about difficulties that could influence your work with your mentor, other faculty, and supervisors.
- Discuss with your advisor all time commitments, including work responsibilities (fellowship/outside work), academic work, other research, practica, vacations, conferences, as well as life decisions that will influence your progress in the program.
- Return books and loaned materials in a timely fashion.

*adapted from University of Illinois, Chicago's Guidelines for Advisors

APPENDIX C

The Comprehensive Evaluation of Student-Trainee Competence in

Professional Psychology Program: Model Policy

The Comprehensive Evaluation of Student-Trainee Competence in
Professional Psychology Programs[1]

I.   **Overview and Rationale**

Professional psychologists are expected to demonstrate competence within and across a number of different but interrelated dimensions. Programs that educate and train professional psychologists also strive to protect the public and profession. Therefore, faculty, training staff, supervisors, and administrators in such programs have a duty and responsibility to evaluate the competence of students and trainees across multiple aspects of performance, development, and functioning.

[1] This document was developed by the Student Competence Task Force of the Council of Chairs of Training Councils (CCTC) and approved by the CCTC on March 25, 2004. Impetus for this document arose from the need, identified by a number of CCTC members, that programs in professional psychology needed to clarify for themselves and their student-trainees that the comprehensive academic evaluation of student-trainee competence includes the evaluation of intrapersonal, interpersonal, and professional development and functioning. Because this crucial aspect of academic competency had not heretofore been well addressed by the profession of psychology, CCTC approved the establishment of a "Student Competence Task Force" to examine these issues and develop proposed language. This document was developed during 2003 and 2004 by a 17-member task force comprised of representatives from the various CCTC training councils. Individuals with particular knowledge of scholarship related to the evaluation of competency as well as relevant ethical and legal expertise were represented on this task force. The initial draft of this document was developed by the task force and distributed to all of the training councils represented on CCTC. Feedback was subsequently received from multiple perspectives and constituencies (e.g., student, doctoral, internship), and incorporated into this document, which was edited a final time by the task force and distributed to the CCTC for discussion. This document was approved by consensus at the 3/25/04 meeting of the CCTC with the following clarifications: (a) training councils or programs that adopt this "model policy" do so on a voluntary basis (i.e., it is not a "mandated" policy from CCTC); (b) should a training council or program choose to adopt this "model policy" in whole or in part, an opportunity should be provided to student-trainees to consent to this policy prior to entering a training program; (c) student-trainees should know that information relevant to the evaluation of competence as specified in this document may not be privileged information between the student-trainee and the program and/or appropriate representatives of the program. professional, ethical, and licensure guidelines and procedures that are relevant to processes of training, practice, and the assessment of competence within professional psychology (e.g., the Association of State and Provincial Psychology Boards, 2004; *Competencies 2002: Future Directions in Education and Credentialing in Professional Psychology*; *Ethical Principles of Psychologists and Code of Conduct*, 2003; *Guidelines and Principles for Accreditation of Programs in Professional Psychology*, 2003; *Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists*, 2002).

It is important for students and trainees to understand and appreciate that academic competence in professional psychology programs (e.g., doctoral, internship, postdoctoral) is defined and evaluated comprehensively. Specifically, in addition to performance in coursework, seminars, scholarship, comprehensive examinations, and related program requirements, other aspects of professional development and functioning (e.g., cognitive, emotional, psychological, interpersonal, technical, and ethical) will also be evaluated. Such comprehensive evaluation is necessary in order for faculty, training staff, and supervisors to appraise the entire range of academic performance, development, and functioning of their student-trainees. This model policy attempts to disclose and make these expectations explicit for student-trainees prior to program entry and at the outset of education and training.

In response to these issues, the Council of Chairs of Training Councils (CCTC) has developed the following model policy that doctoral, internship, and postdoctoral training programs in psychology may use in their respective program handbooks and other written materials (see http://www.apa.org/ed/graduate/cctc.html). This policy was developed in consultation with CCTC member organizations, and is consistent with a range of oversight.

II.   **Model Policy**

Students and trainees in professional psychology programs (at the doctoral, internship, or postdoctoral level) should know—prior to program entry, and at the outset of training—that faculty, training staff, supervisors, and administrators have a professional, ethical, and potentially legal obligation to: (a) establish criteria and methods through which aspects of competence other than, and in addition to, a student-trainee's knowledge or skills may be assessed (including, but not limited to, emotional stability and well-being, interpersonal skills, professional development, and personal fitness for practice); and, (b) ensure—insofar as possible—that the student-trainees who complete their programs are competent to manage future relationships (e.g., client, collegial, professional, public, scholarly, supervisory, teaching) in an effective and appropriate manner. Because of this commitment, and within the parameters of their administrative authority, professional psychology education and training programs, faculty, training staff, supervisors, and administrators strive not to advance, recommend, or graduate students or trainees with demonstrable problems (e.g., cognitive, emotional, psychological, interpersonal, technical, and ethical) that may interfere with professional competence to other programs, the profession, employers, or the public at large.

As such, within a developmental framework, and with due regard for the inherent power difference between students and faculty, students and trainees should know that their faculty, training staff, and supervisors will evaluate their competence in areas other than, and in addition to, coursework, seminars, scholarship, comprehensive examinations, or related program requirements. These evaluative areas include, but are not limited to, demonstration of sufficient: (a) interpersonal and professional competence (e.g., the ways in which student-trainees relate to clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (b) self-awareness, self-reflection, and self-evaluation (e.g., knowledge of the content and potential impact of one's own beliefs and values on clients, peers, faculty, allied professionals, the public, and individuals from diverse backgrounds or histories); (c) openness to processes of supervision (e.g., the ability and willingness to explore issues that either interfere with the appropriate provision of care or impede professional development or functioning); and (d) resolution of issues or problems that interfere with professional development or functioning in a satisfactory manner (e.g., by responding constructively to feedback from supervisors or

program faculty; by the successful completion of remediation plans; by participating in personal therapy in order to resolve issues or problems).

This policy is applicable to settings and contexts in which evaluation would appropriately occur (e.g., coursework, practica, supervision), rather than settings and contexts that are unrelated to the formal process of education and training (e.g., non-academic, social contexts). However, irrespective of setting or context, when a student-trainee's conduct clearly and demonstrably (a) impacts the performance, development, or functioning of the student-trainee, (b) raises questions of an ethical nature, (c) represents a risk to public safety, or (d) damages the representation of psychology to the profession or public, appropriate representatives of the program may review such conduct within the context of the program's evaluation processes.

Although the purpose of this policy is to inform students and trainees that evaluation will occur in these areas, it should also be emphasized that a program's evaluation processes and content should typically include: (a) information regarding evaluation processes and standards (e.g., procedures should be consistent and content verifiable); (b) information regarding the primary purpose of evaluation (e.g., to facilitate student or trainee development; to enhance self-awareness, self-reflection, and self-assessment; to emphasize strengths as well as areas for improvement; to assist in the development of remediation plans when necessary); (c) more than one source of information regarding the evaluative area(s) in question (e.g., across supervisors and settings); and (d) opportunities for remediation, provided that faculty, training staff, or supervisors conclude that satisfactory remediation is possible for a given student-trainee. Finally, the criteria, methods, and processes through which student-trainees will be evaluated should be clearly specified in a program's handbook, which should also include information regarding due process policies and procedures (e.g., including, but not limited to, review of a program's evaluation processes and decisions).

APPENDIX D

The EMU Psychology Department

Caregiver Trainee Policy

The EMU Psychology Department
CAREGIVER TRAINEE POLICY

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The EMU Psychology Department
CAREGIVER TRAINEE POLICY

Policy

It is the policy of the EMU Psychology Department to provide a positive training environment that recognizes caregivers' responsibilities to their training activities and to their care recipients. This policy uses child and children; however, this refers to all types of care recipients for the student caregiver. Additionally, it acknowledges that, when an infant is able to stay with a caregiver, this benefits the family, the training program, and society. The EMU Psychology Department Caregiver Trainee Policy encourages new caregivers to return to training activities sooner by allowing the new caregivers to bring their infant to the work environment with them until the child begins to crawl. The policy also recognizes that there are circumstances that may lead to a caregiver's desire or need to bring children beyond infancy to the training program environment.

Child Categories

Infancy: this category applies to children up to when the child begins to crawl/locomote (typically 7 to 12 months of age). Although unable to locomote, proximal and intensive supervision is assumed to be needed for children in this category due to their very frequent needs for co-regulation.

Proximal and intensive supervision needed (typically Early Childhood): this category applies to children who require proximal supervision and cannot independently keep themselves busy in a manner that is not disruptive to EMU Psychology Department training activities for at least 90 minutes. Included in this category are typically developing children between the ages of about 1 to 5 years.

Moderate supervision needed (typically Middle Childhood): this category applies to children who require monitoring, but do not require proximal supervision. These children can independently keep themselves busy in a manner that is not disruptive to EMU Psychology Department training activities for at least 90 minutes. Included in this category are typically developing children between the ages of about 6-12 years.

Minimal supervision needed (typically Adolescence): this category applies to children who do not require monitoring or proximal supervision. These children can go to public settings (e.g., mall, library, community event) independently and without adverse incident. Included in this category are typically developing adolescents between the ages of about 13-18 years.

Note: the above definitions define children in terms of their capabilities and how these capabilities interact with EMU Psychology Department training activities. Thus, these categories are behavior dependent and not dependent on typical age conventions.

Eligibility

EMU Psychology Department graduate trainees are eligible to participate in an Individualized Plan under this policy, subject to the specific responsibilities of the caregiver and subject to ensuring the physical safety of the child. Trainees with a dependent child may request temporary accommodations as needed. The EMU Psychology Department will attempt to accommodate such requests based on available training and duty situations at the time of the request but is not required to meet said requests. Trainees should also review their program's leave of absence policy as this option may be the best fit for some trainees despite being eligible for crafting an Individualized Plan with the EMU Psychology Department Head.

A list of EMU resources to assist caregivers is available in Attachment 1. Graduate trainees are encouraged to review this attachment for helpful suggestions.

Alternate Care Providers – The caregiver must identify other on site individuals willing to provide back-up care for children who require more than "minimal supervision". The number of alternate care providers identified should fit the training situation (e.g., class as a student, class as a TA, clinic, etc.).

Forms to Complete

The following forms are required for participation:

1. Individualized Plan, which outlines the specifics of the child's care plan (Attachment 2)
2. Caregiver Agreement, Consent & Waiver forms (Attachment 3)
3. Alternate Care Provider Agreement (Attachment 4)

The caregiver will submit all completed and signed forms to the EMU Psychology Department Head, who will then schedule the Plan Development Meeting.

Plan Development Meeting

Before a child is brought into the training environment during the course of regular training related activities or duties, a meeting must take place between the caregiver and the head of the EMU Psychology Department. Both parties must review, discuss, and approve the proposed Individualized Plan. It is also strongly recommended that the caregiver's faculty mentor/advisor participate in the plan development meeting or, at minimum, be made aware of the final Individualized Plan.

Requirements for Care Providers

A caregiver utilizing an Individualized Plan may not leave the campus (not even for a short time) without taking the child with them unless the child is categorized as *minimal supervision needed* or unless an alternate care provider has consented to such an arrangement in advance.

<u>The caregiver accepts complete responsibility for the safety of the child</u>. If the caregiver's duties require that they leave their primary training location, the caregiver will take the child with them. The Individualized Plan must address any off campus training activities and reflect the judgment of the supervisor for the off campus training activity as well as that of the EMU Psychology Department Head.

The caregiver must provide all supplies and equipment needed to care for the child at the training site and ensure that the area is kept in a clean and sanitary condition. Diapers must be changed on changing pads or in a designated restroom. Used cloth diapers must be stored in a closed container and taken home daily. Used disposable diapers must be wrapped appropriately and discarded appropriately such that no smell from excrement creates a distraction. All supplies utilized by the caregiver must be maintained in a manner that is not disruptive to the activities of others at the training site.

There may be training or training related duties that require a caregiver's full attention such that it may be necessary for caregivers to make other arrangements for child care on site at the training environment. Caregivers are expected to work closely with their supervisors/professors and others they interact with on campus to ensure that all parties involved are aware of what duties can and cannot be reassigned and when caregivers are expected to make alternate child care arrangements.

In order for a Caregiver Trainee Policy to be effective, <u>all parties need to be sensitive to the needs of others</u>. The caregiver must maintain acceptable performance in their obligations and ensure that the child or caregiver-child dyad does not create any unreasonable disturbances. If problems arise that cannot be resolved, the caregiver understands that an alternative off site care arrangement may be required.

If a child is fussy for a prolonged period of time, causing a distraction in the training environment, or preventing the caregiver from accomplishing required duties, the caregiver shall remove the child from the training environment immediately. The caregiver is still responsible for meeting their training and related obligations as this policy does not allow for a reduced training or related activity workload.

The Michigan Breastfeeding Anti-Discrimination ACT of 2014 gives mothers the right to nurse their children in public settings. For mothers desiring more privacy, the EMU Human Resources office maintains a list of private nursing locations on their Lactation Support web page (http://www.emich.edu/hr/benefits-wellness/family/lactation.php). In the Department of Psychology, a sign is available to hang on door handles to allow for such

privacy in designated rooms in the department; this sign can be obtained in the main office.

Child's Location During Training Activities and Duties

Primary Training Environments– Each caregiver shall make her/his primary training environments suitable and safe for the child and the child shall be located primarily at those locations specified in the Individualized Plan when on campus (see additional caveats regarding group work stations). This obligation extends to any setting where the caregiver places the child under the care of anyone else. Only *infants* are permitted at training locations that are closed to the general public (e.g., the clinic). Young children requiring ***proximal and intensive supervision*** are not suited for these particular training environments and alternative day care arrangements need to be made for these children while caregivers are working in such locations.

Quiet Room – In the event that a caregiver-child dyad becomes noticeably fussy, noisy, or otherwise causes a distraction in the training setting or prevents the caregiver or others from accomplishing training related duties, the caregiver must immediately take the child to a designated "Quiet Room" location (outside the classroom or common use area) specified in the Individualized Plan until the dyad can return to the location with reasonable decorum for that setting.

Alternate Care Providers **- The caregiver shall identify Alternate Care Providers who will care for the child if the caregiver needs to attend a meeting, go to the restroom, or another situation in which the caregiver is unable to effectively care for the child for a short time. Each Alternative Care Provider will have previously signed an Alternate Care Provider Agreement form (Attachment 3).**

Other Trainees (Non-Alternate Care Providers) – The child may be in another trainee's duty/training space for brief intervals if requested by the caregiver and approved by the other trainee. Consideration must be taken by the caregiver to ensure that the environment is safe for the child at all times and that other trainees are not disturbed. If a disturbance occurs, the non-alternate care provider follows the same "Quiet Room" procedure described above.

Non-University Affiliated Care Providers – The child may be in public spaces at the university with a non-university affiliated care provider (e.g., responsible family member, hired caregiver) so long as the presence of the child does not disturb other trainees or members of the university community. If a disturbance occurs, the non-university affiliated care provider follows the same "Quiet Room" procedure described above. Care providers not affiliated with EMU Psychology Department's graduate programs are not permitted to be in locations closed to the public except for those designated in the approved Individualized Plan.

The Individualized Plan takes into consideration the specific and multiple locations training activities/duties may occur. The following sections outline considerations that should be reviewed when creating the Individualized Plan. As training activities may change from semester to semester, the plan should be updated to reflect the current training environment each semester (up to three times a year).

It is the caregiver's responsibility to inform these individuals (i.e. alternative care providers, other trainees, and non-university affiliated care providers) of the details of the Individualized Plan, including Quiet Room procedures.

Mark Jefferson Science Complex
- Shared office space, lab space:
  - Use Quiet Room procedures as appropriate
  - Mild disruptions (e.g., low intensity/frequency) of 45 minutes or less are expected in shared social space. It is appropriate for others to request the caregiver and child utilize the Quiet Room if disruptions occur for more than 45 minutes. Consider letting other users of the space know your time line for being in the shared space so they understand how long mild disruptions (e.g., cooing, verbal interactions, diaper changes) may be present.
- Classrooms (and student teaching office hours)
  - Teaching a class: need an Alternative Care Provider (described below)
  - As a student in class:

    - Regular child attendance: *infants* only with permission of the instructor; use Quiet Room procedures as appropriate. Discuss with the instructor whether regular versus occasional *infant* attendance is appropriate for the course. The trainee will make adjustments as needed based on the course instructor's determination of the needs of the training environment.

    - Emergent need: contact instructor if alternate care cannot be arranged to discuss options; use Quiet Room procedures as appropriate if child is permitted to attend class. Consider talking with instructors in advance of the semester regarding how to handle unexpected absences, as absence policies may vary from course to course.
- Single-user rooms:
  - Use Quiet Room procedures as appropriate if the single use room is proximal to another room where the child or caregiver-child dyad creates a disturbance.

Community Behavioral Health Clinic
Be sure to review the current version of the Psychology Clinic manual for any considerations that will need to be honored in the Individualized Plan.

- Operating hours
    - No socializing in open areas [per clinic policy] despite the urge to do this when children are involved. As a caregiver, please redirect parties excited to meet the child to an available location in a non-open area.
    - Use Quiet Room procedures as appropriate. Be sure to consider the availability of Quiet Room space when constructing the Individualized Plan.
    - Administrative time/paperwork: call the clinic in advance and talk with the clinic director (Dr. Saules) or doctoral program administrator (Ariana Herrera-Wilder) to identify whether an appropriate room is available if a child will be present; in general there should be a minimum of 2 rooms available at the time of inquiry so that one room remains available for clinic operations. Additionally, there should not be a high level of client activity when children are present.
    - Co-directors—plan in advance for alternative care, in general, coverage of front desk takes priority (specifically address this with the clinic director).
    - *Infants*:
        - Make alternate care arrangements for seeing clients; discuss with supervisor regarding bringing infants to supervision, alternate care arrangement is ideal.
        - For students with phone duty assignments, handle phone duty arrangements within the Individualized Plan (e.g., make plans for front or back loading phone duty time if there will be missed phone duty).
    - *Non-infants*:
        - Alternate care should not be provided in the clinic during operating hours; consider MJ if alternative care can be arranged there.
        - Non-infants at emergency supervision should be discussed with supervisors and be a rare occurrence.
        - Non-infants should not be in the shared office space in the clinic where videos may be watched or at the front desk.
        - No friends and family are permitted beyond the lobby during operating hours outside of an alternative care arrangement approved in advance within the Individualized Plan.
- After hours
    - *Infants*: use Quiet Room procedures if others are present in the clinic.
    - *Non-infants*: if there is a need to bring a non-infant to the clinic after hours, have this specifically addressed in the approved Individualized Plan.

> - If the play room is used, anything consumed or broken needs to be replaced by caregiver; constant supervision must also be provided while the child is in this room.

Department events
- Business events (e.g., special speakers, meetings, presentations, defenses)
  - Use Quiet Room procedures as appropriate with *infants*.
  - Arrange for alternative care for children needing *proximal and intensive supervision*.
- Social events (holiday party, socials off campus, receptions, celebrations, etc.)
  - Children are welcome to attend departmental social events.
  - Use Quiet Room procedures as appropriate.

Network/Computing
- Follow EMU IT policies regarding computer access. Children must use their own devices and guest access to university WiFi. EMU and the Psychology Department cannot guarantee the availability of internet access. If the supervision needs of a child are dependent upon access to internet, the Individualized Plan should specify what actions will be taken if this resource is not available, reliable, or if there are problems with the relevant device(s).

Illness

A sick child should not be brought to campus. If the child becomes sick during the day, the child must be taken home by the caregiver. The guidelines set forth in Attachment 5 of this policy are hereby adopted by the EMU Psychology Department as a means for determining whether a child is sick.

Complaints

All complaints related to this policy should first be made directly to the caregiver in a respectful way, recognizing that this is a sensitive subject for all parties involved. If the complaint is not resolved (e.g., Quiet Room procedures are not utilized), then the complaint can be brought to the head of the EMU Psychology Department. The Psychology Department Head shall have final discretion to decide what should be done to resolve the complaint. (See Termination of Eligibility below).

Termination of Eligibility

Participating caregivers have the right to terminate their Individualized Plan at any time. The EMU Psychology Department Head has the right to terminate an Individualized Plan at any time if a caregiver's performance declines or if there are disruptions to the training environment that cannot be resolved to the department head's satisfaction. This agreement may also be terminated if the caregiver does not comply with the terms and

conditions of their Individual Plan. Eligibility may also be terminated at the sole discretion of the EMU Psychology Department Head with written notice to the caregiver. The EMU Psychology Department will accommodate reasonable time needed for the caregiver to arrange external childcare.

Other

The EMU Psychology Department Caregiver Trainee Policy procedures are a voluntary option for caregiver trainees, subject to approval as outlined in this document, where it is compatible with training requirements.

The EMU Psychology Department expressly reserves the right to change or revise this policy. Any changes will be conveyed to affected caregivers as soon as possible after any change or revision. All caregivers will be required to abide by the changed or revised policy.

ATTACHMENT 1
RESOURCES AND SUGGESTIONS FOR GRADUATE STUDENT TRAINEE CAREGIVERS

Class:
-Ask faculty to record course content prior to missing it due to having a sick child, etc.

Department/general (all of which would be discussed with your mentor and the DCT):
-Request a leave of absence.
-Take a lower course load.
-Request adjustment to fellowship duties.

Child care:
-The Collaborative - Ypsilanti YMCA Child Development Center, will accept children ages 18 months to 5 years. Priority registration will be given to children of EMU students, and residents of the YHC who live within the YCS district:
https://www.emich.edu/engage/communitylink/thecollaborative.php
-EMU Children's Institute (has discounts for EMU students, AND if you are low income you can apply for financial assistance to cover the costs):
https://www.emich.edu/childrensinstitute/index.php
-Highscope is an evidence-based preschool curriculum sold all over the world, and their "demonstration preschool" is right in Ypsilanti (a few blocks from campus). Because it is a demonstration preschool, small class sizes/low cost (some of our students have been able to pay zero tuition), and high-quality care. The downside is it is only in the mornings:
https://highscope.org/about/demo-preschool
-Link to Child Care Network (has scholarships available for childcare costs):
https://www.childcarenetwork.org/help-paying-for-child-care
-The EMU resource page includes other links to local childcare places (including My Nanny Rocks, Great Start for Kids, etc., some of which are for low-income families):
https://www.emich.edu/wcen/resources-and-support/resourceguide.pdf

Campus/Community general:
-Swoops Pantry (on campus food pantry) provides food for people with food insecurity
-The EMU resources page includes links that would be helpful if you are trying to find on-campus or local assistance for pregnancy (including birth support and doula references), breast feeding, pumping (including equipment), childbirth education, and postpartum support groups:
https://www.emich.edu/wcen/resources-and-support/resourceguide.pdf
-Washtenaw Success By 6 has information on resources for affording childcare, dental care, medical care, housing, etc. (as well as just family friendly local activities):
http://www.washtenawsuccessby6.org/index.php?
-There are several scholarships available to mothers/women/women over the age of 25 on campus that are listed here: https://www.emich.edu/wcen/scholarships/index.php

-the Women's Resource Center on campus has a page dedicated to parent resources (including support groups, informational groups, caregiver links, relevant university policies, and general resources):
 https://www.emich.edu/wcen/students-who-are-parents/index.php
-EMU "Keys to Degrees" program is AMAZING, one of the best in the country for single parents:
Keys to Degrees

The EMU Psychology Department
CAREGIVER TRAINEE POLICY
<u>INDIVIDUALIZED PLAN</u>

GENERAL INFORMATION

Name of Caregiver/Student: _____ Home Phone: _____

_____

_____ Mobile Phone: _____

Name of Child: _____ Child's Date of Birth: _

_____

Individual Plan Start Date: _____

Days and Times Child Will be Present in the Training Environment:

_____

_____

_____

ALTERNATE CARE PROVIDERS

The following individuals have agreed to be Alternate Care Providers, who will provide care for my child on site when I am unavailable.

_____ (Name & Phone Number) [add more as needed]

SPECIFIC INFORMATION

Include other specific plan information or requirements in the space below:

_____

_____

_____

_____

<u>IN CASE OF EMERGENCY, PLEASE CONTACT:</u>

Name: _____
Relationship: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____

Name: _____
Relationship: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____

Child's Pediatrician:

I UNDERSTAND THAT THIS PLAN HAS NOT BEEN APPROVED UNTIL I HAVE
MET WITH THE DEPARTMENT HEAD. I UNDERSTAND THAT, IF ANYTHING
ABOUT MY PLAN CHANGES, I WILL NEED TO MEET ONCE AGAIN WITH THE
DEPARTMENT HEAD TO DISCUSS THE CHANGES AND TO GET MY NEW
PLAN APPROVED.

Submitted by:

_____   _____
Signature of Caregiver/Trainee   Date

Approved by:

_____   _____
Psychology Department Head   Date

PLEASE ATTACH YOUR SIGNED ALTERNATE CARE PROVIDER AGREEMENTS
TO THIS INDIVIDUAL PLAN.

The EMU Psychology Department
CAREGIVER TRAINEE POLICY
CAREGIVER AGREEMENT, CONSENT, AND WAIVER
AGREEMENT

By signing this Agreement, I certify that I have read the Caregiver Trainee Policy document. I understand and agree to comply with the terms and conditions set forth in the policy and Individual Plan. I further understand and agree that, in the event I fail to comply with such terms and conditions or otherwise fail to meet any expectations currently in the policy or that may be added to the policy and conveyed to me in writing, my eligibility may be terminated, requiring me to remove my child from the training environment within a reasonable period of time.

I acknowledge that the EMU Psychology Department reserves the right to cancel or retire the Caregiver Trainee Policy in part or in its entirety at any time, thus requiring me to remove my child from the training environment within a reasonable period of time. In this event, I understand that the EMU Psychology Department will accommodate a reasonable period of time for me to make arrangements for a different childcare setting.

_____   _____
Signature of Caregiver/Trainee   Date

CONSENT AND WAIVER

In consideration of the EMU Psychology Department's permitting me to bring my child to the university with me in compliance with the Caregiver Trainee Policy, I hereby release, on my own behalf and on behalf of my child, _____: (i) the EMU Psychology Department; (ii) any entity affiliated with the EMU Psychology Department or EMU more broadly; and (iii) any Alternate Care Providers, if any, from any and all claims, liabilities, causes of action and demands of any kind or character, including negligence, whether vicarious, derivative or direct, that I, _____, or any of my child's family members, heirs, or assigns now have or may hereafter have or assert against the EMU Psychology Department growing out of, resulting from, or connected with this policy and/or with me bringing my child to the university or his/her presence at the university with me. This waiver does not preclude legal remedies for injury due to malice or egregious negligence.

_____   _____
Signature of Caregiver   Date

The EMU Psychology Department
CAREGIVER TRAINEE POLICY
ALTERNATE CARE PROVIDER AGREEMENT

As a care provider, I understand and agree to the following:

I understand that being a care provider does not relieve me of my responsibilities as a

trainee of the EMU Psychology Department. By signing this Agreement, I certify that I

have read the Caregiver Trainee Policy document. I understand and agree to comply with

the terms and conditions set forth in the policy.

When necessary, I will provide care for _____ (child's name)
when _____ (caregiver) is unavailable.

As a care provider, I know the care I provide does not relieve me from any of my training

or related assigned training duties.

I understand that I must obtain my immediate supervisor's, as well as the Psychology
Department Head's, approval to serve as an Alternate Care Provider.

If the child becomes disruptive to others in the training environment, I will take the child
to a designated Quiet Room area.

I understand that the caregiver may not leave the child in my care if he/she is going to
leave campus unless I have been notified of and have consented to this arrangement in
advance.

I understand that there is another [are other] designated care provider(s), _____
_____ [LIST NAMES], whom I may contact for assistance.

I understand that no other persons besides the caregiver, myself, and any other designated
Alternate Care Providers are responsible for the child once the child has been placed in
my care. If another individual asks to take care of or hold the child, I will first get the
caregiver's approval. Eastern Michigan University assumes no responsibility for the care
or wellbeing of the child.

If I should decide that I no longer wish to be an Alternative Care Provider, I will give the caregiver at least two weeks' notice.

I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND, AND AGREE TO THE TERMS OF THIS ALTERNATE CARE PROVIDER AGREEMENT.

_____   _____
Signature of Alternate Care Provider   Date

_____   _____
Signature of Department Head   Date

GUIDELINES FOR EXCLUSION
OF SICK CHILDREN

From: American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education (2011). *Caring for our children: National health and safety performance standards; Guidelines for early care and education programs* (3rd ed.). Washington, DC: American Public Health Association. Available online at http://nrckids.org.

If the child has any of the following conditions and thus poses a risk of spread of harmful diseases to others, they shall not be brought to the university. If they develop these conditions during the day, the caregiver shall remove the child from the premises as soon as reasonably possible:

1. An acute change in behavior including lethargy/lack of responsiveness, irritability, persistent crying, difficulty breathing, uncontrolled coughing, noticeable (spreading) rash, or other signs or symptoms of illness until medical evaluation indicates non-contagious disease.

2. Fever (temperature above 101 degrees Fahrenheit orally, above 102 degrees Fahrenheit rectally, or 100 degrees or higher taken auxiliary (armpit) and behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, diarrhea).

3. Uncontrolled diarrhea, that is, increased number of stools, increased stool water, and/or decreased form that is not contained by the diaper until diarrhea stops; blood or mucus in the stools not explained by dietary change, medication, or hard stools.

3. Vomiting illness (two or more episodes of vomiting in the previous 24 hours) until vomiting resolves or until a health care provider determines the illness to be non-communicable, and the child is not in danger of dehydration.

4. Abdominal pain that continues for more than two hours or intermittent pain associated with fever or other signs or symptoms of illness.

5. Mouth sores with drooling, unless a health care provider or health official determines the condition is noninfectious.

6. Rash with fever or behavior change, until a health care provider determines that these symptoms do not indicate a communicable disease.

7. Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge), until 24 hours after treatment has been initiated.

8. Untreated scabies, head lice, or other infestation.

9. Untreated tuberculosis, until a health care provider or health official states that the child can attend child care.

10. Known contagious diseases while still in the communicable stage (e.g., chicken pox, streptococcal pharyngitis, rubella, pertussis, mumps, measles, hepatitis A).