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INTRODUCTION

The Clinical Training Department’s purpose and function is to facilitate and oversee the professional development of students who are engaged in practica. More specifically, the Clinical Training Department develops and monitors practica sites, matches students to sites, and evaluates development of clinical skills. This manual reviews in detail the policies and procedures regarding clinical training and the evaluation of competency in the Arizona School of Professional Psychology at Argosy University, Phoenix Campus (ASPP), namely the (1) Clinical Practica, (2) COMP1 Initial Assessment (COMP1), (3) COMP2 Therapeutic Intervention (COMP2), and (4) Pre-doctoral Internship.

Each of these training components serves to systematically develop, refine, and integrate the theoretical knowledge, clinical skills, and professional attitudes necessary for the competent and ethical provision of psychological services. Through direct, supervised client contact, ASPP trains ethical, qualified, and competent clinicians able to effectively assess and diagnose client problems, theoretically conceptualize treatment, intervene therapeutically, and evaluate the outcome of their interventions. To this end, the ASPP and clinical training faculty closely monitor students’ clinical development to ensure clinical proficiency.

Frederick S. Wechsler, Ph.D., Psy.D., ABPP, past Director of Clinical Training designed and implemented the policies and procedures contained in the original Clinical Training Manual in consultation with the psychology faculty and the Training Committee of Argosy University. This document has been revised by Eric Johnson, Psy.D., Director of Clinical Training, in consultation with the Training Committee to reflect updated policies and procedures.

All Practicum forms are available on the student portal. Internship forms can be found in the Pre-Doctoral Internship Forms Manual. Competency Evaluation policies, procedures, and grading rubrics are also available in separate COMP1 and COMP2 Manuals.

CLINICAL TRAINING DEPARTMENT 2018-2019

Have questions about clinical training and practicum? Please ask your Clinical Training Department:

Don Townsend, Ph.D. 602-216-3112
drtownsend@argosy.edu

Cornelia Pinnell, Ph.D. 602-216-3119
cpinnell@argosy.edu
WELCOME TO PRACTICUM

Clinical practicum offers valuable opportunities to apply classroom knowledge in real world situations. Most students find the practicum experience to be enlightening and professionally meaningful. Along with the growth and discovery on practicum, students may experience some stressors and challenges. The Clinical Training Department recommends the following for a productive and satisfying practicum experience:

- **Read the Clinical Training Manual.** Use it as a reference. The Clinical Training Department developed this manual to guide students through the entire practicum process. This manual includes a timeline, helpful hints, examples, and forms, and will answer questions about the process. Please take the time to read the manual before calling or emailing the Clinical Training Department. The Clinical Training Department encourages students to be proactive consumers of this information.

- **Plan ahead.** Activities such as obtaining required signatures (e.g., practicum supervisor, practicum seminar instructor, etc.) and submitting required practicum paperwork can take considerable time. Therefore, a suggested timeline is offered to assist students in budgeting their time. Start early.

- **Make a copy of all documents.** Make a file and keep a copy of all school documents. It is recommended that students keep a record of all practicum paperwork.

- **Be a good email consumer.**
  Most communication between students, the Clinical Training Department and community supervisors will be by email to your Argosy email account. Please:
  - Make sure you check your email often.
  - Forward your Argosy email account if you don’t access it very often.
  - Use a professional email address that is identifiable.
  - If you forward your Argosy email, be sure to use a server that is reliable, can accept attachments, and does not consider emails from sites or Argosy to be “junk.”
  - Monitor your email to make sure you are not over your limit (or emails will bounce back to ASPP or practicum sites).

- **Ask proactive questions of Practicum Seminar instructors, advisors, and Clinical Training Faculty.** Although fellow students can provide insight into their experiences at sites, we recommend you utilize official sources for accurate information and advisement.

- Meet deadlines. Failure to meet paperwork submission deadlines may result in remediation and/or disciplinary action.

- Be aware that the training policies and procedures are an ongoing process and are subject to CLINICAL PRACTICA: PSYD & MA PROGRAMS.
<table>
<thead>
<tr>
<th>Item</th>
<th>Deadline</th>
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</thead>
<tbody>
<tr>
<td><strong>Practicum Orientation</strong>: During Practicum Seminars and Pro Groups</td>
<td>September 14, 2018</td>
</tr>
<tr>
<td>Receipt of Clinical Training Manual (Refer to Appendixes)</td>
<td>September 14, 2018</td>
</tr>
<tr>
<td>Supervisor Attestation Form (Refer to Appendixes)</td>
<td>September 28, 2018</td>
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<td>Practicum Written Training Plan (Refer to Appendixes)</td>
<td>September 28, 2018</td>
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<td>Practicum 2019-2020 Application (Refer to Appendixes)</td>
<td>November 30, 2018</td>
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<td>Prerequisites</td>
<td></td>
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<td>Updated Vita</td>
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<td>T2T Hours Summary</td>
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<td>Battery Summary</td>
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<td>Cover Letter</td>
<td></td>
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<tr>
<td>Faculty Signatures</td>
<td></td>
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<tr>
<td>Fall Direct Observations Forms Due (Refer to Appendixes)</td>
<td>December 7, 2018</td>
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<tr>
<td>Fall Battery Verification Form Due (Refer to Appendixes)</td>
<td>December 7, 2018</td>
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<tr>
<td>Practicum Evaluation for Students Due (Refer to Appendixes)</td>
<td>December 7, 2018</td>
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<tr>
<td>Practicum Interview Process Begins (Students notified of sites by DCT)</td>
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<td>ADVANCED PRACTICUM</td>
<td>Jan/Feb 2019</td>
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<td>PRACTICUM III / IV</td>
<td>February 2019</td>
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<tr>
<td>PRACTICUM I / II &amp; MACL</td>
<td>March 2019</td>
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<tr>
<td>Practicum Interviews (Scheduled as soon as possible)</td>
<td>As long as necessary</td>
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<td>COMP 1 Exams (Report and flash drive) Due</td>
<td>April 3, 2019</td>
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<tr>
<td>Reports Graded By</td>
<td>April 17, 2019</td>
</tr>
<tr>
<td>Revisions (if any) Due</td>
<td>May 1, 2019</td>
</tr>
<tr>
<td>Final Grade (if based on revisions) Due</td>
<td>May 15, 2019</td>
</tr>
<tr>
<td>Practicum Training Agreement Due for 2019-2020 Practicums (Refer to Appendixes)</td>
<td>May 3, 2019</td>
</tr>
<tr>
<td>Form</td>
<td></td>
</tr>
<tr>
<td>Start Date &amp; End Date</td>
<td></td>
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<td>Pre-Practicum Requirements</td>
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<td>Spring Battery Verification Form (Refer to Appendixes)</td>
<td>May 3, 2019</td>
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<tr>
<td>COMP 2 Exams (2 Copies of Report and 2 Flash Drives Submitted)</td>
<td>May 15, 2019</td>
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<tr>
<td>Defense Presentation Done by</td>
<td>June 14, 2019</td>
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<tr>
<td>Revisions (if any) Due</td>
<td>June 28, 2019</td>
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<tr>
<td>Event</td>
<td>Deadline</td>
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<tr>
<td>----------------------------------------------------------------------</td>
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<tr>
<td>Final Grade (if based on revisions) Due</td>
<td>July 12, 2019</td>
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<td><strong>End of Practicum Paperwork Due (Refer to Appendixes)</strong></td>
<td>August 3, 2019</td>
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<td>a) Practicum Evaluation of Student</td>
<td></td>
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<tr>
<td>b) Direct Observation Form</td>
<td></td>
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<tr>
<td>c) Student Evaluation of Site</td>
<td></td>
</tr>
<tr>
<td>d) Battery Verification Form</td>
<td></td>
</tr>
<tr>
<td><strong>Continuing Education Activities Verification Form for 2018-2019</strong></td>
<td>August 3, 2019</td>
</tr>
<tr>
<td>(Refer to Appendixes)</td>
<td></td>
</tr>
<tr>
<td><strong>Register for Practicum and Practicum Seminar</strong></td>
<td>Summer 2019</td>
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What is Practicum?

A practicum is the first opportunity provided to Argosy University/Phoenix students for clinical field training. During practicum training students will have the opportunity of working in a mental health delivery system under supervision with a clinical population. Students learn to apply their theoretical knowledge; implement, develop, and assess the efficacy of clinical techniques; and develop attitudes important for the identity of a professional psychologist. The practicum is an essential part of clinical training, and all students are required to participate in the practicum experience. During clinical training, students learn clinical skills through direct client contact at the practicum site. Students are supervised by experienced clinicians who teach relevant skills, supervise clinical work, and serve as role models of professional identity.

Full-time students can begin practicum when eligibility requirements are met (see Prerequisites for Practicum below). Practicum placements are for 10-12 months depending on the site. Students are required to complete a minimum of 500 hours each academic year they are enrolled in a required practicum. Students are also required to attend professional activities (i.e., events can include attending a workshop, conference, poster presentations, etc.). It is also encouraged that students become members of professional organizations, such as American Psychological Association, the Arizona Psychological Association.

The practicum is treated as a course and with the practicum seminar carries 3 credit hours per semester or 6 credit hours for the academic year. All ASPP students enrolled in practica must concurrently enroll in a practicum seminar led by an ASPP faculty member. Students may not change practicum seminars after the start of the practicum year. The content of the seminar varies according to the practica sites represented and reflects the specialties of the seminar leader. A practicum may not be done in a student’s place of employment, at a previous practicum site, or is any student excused from the practicum requirements. Students who come to ASPP with extensive clinical backgrounds may be placed on practicum sites in areas where they do not have previous experience and where they have an interest.

General Information
A practicum is a clinical training experience that takes place in a health care delivery system at an ASPP-approved field placement. Students may not engage in practica outside the catchment area of ASPP (e.g., out of state) without approval from the Clinical Training Committee. Students from other Argosy University campuses must get approval from the ASPP Director of Clinical Training before considering practicum at any ASPP-affiliated training site.

Students are responsible for meeting the following practicum requirements:

<table>
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<th>Program</th>
<th>Type of Practica</th>
<th>Minimum Hours</th>
<th>Direct Hours</th>
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<tr>
<td>MACL</td>
<td>Psychotherapy</td>
<td>500</td>
<td>250</td>
</tr>
<tr>
<td>Psy.D.</td>
<td>I-II</td>
<td>500</td>
<td>250</td>
</tr>
<tr>
<td>Psy.D.</td>
<td>III- IV</td>
<td>500</td>
<td>250</td>
</tr>
<tr>
<td>Advanced (Optional)</td>
<td></td>
<td>500</td>
<td>250</td>
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Disability Statement
Students with a disability are encouraged to make an appointment with the Director of Clinical Training to provide formal documentation of disability as early as possible and to discuss accommodations as they relate to practicum and internship requirements at ASPP. The Clinical Training Department actively works with students to ensure that appropriate accommodations are developed, if necessary.
Professional Liability Insurance
ASPP provides professional liability insurance to all students involved in clinical training. Tuition for practica and internship covers the cost for this insurance. Proof of this malpractice coverage can be sent to the student’s direct clinical supervisor once the practicum/internship match has been confirmed if desired. This coverage is standard for every student. In addition, students are strongly advised to carry independent liability insurance, that can be obtained through APA for $35 / year: https://www.trustinsurance.com/

Prerequisites for Practicum
To enroll for and begin a practicum, MA and Psy.D. students must meet the following criteria:
• complete required courses for their respective programs per the Academic Catalog
• be a student in good standing
• maintain a GPA of at least 3.0/4.0
• Consult the Clinical Training Manual to determine any additional requirements

Questions about practica requirements can be directed to faculty advisors, practicum seminar instructors, or the Training Department.

International students must meet with the International Student Officer to fill out INS paperwork needed to pursue a practicum in the United States.

Master level practica cannot transfer to or satisfy prerequisites for the doctoral program’s practica. If a student transfers from an MA program to the Psy.D. program, she or he must complete all practica requirements for the doctoral program regardless of any MA practicum requirements already completed.

MA Therapy Practicum
Masters students must complete a minimum of 500 supervised hours (250 hours of direct client contact and 250 hours of indirect client contact). These practica emphasize the acquisition, integration, expansion, and refinement of therapeutic intervention skills. Sites vary according to populations and populations served as well as theoretical orientations(s) represented in their training staff.

These practicum sites must provide opportunities for students to:
• Perform ongoing individual psychotherapy/counseling with actual patients (with the ability for audio and/or video recording for on-site supervision and seminar presentations) utilizing evidence-based practices and outcome assessment
• Provide therapeutic services with couples, families, and/or groups
• Participate in interdisciplinary treatment planning and/or case management
• Receive individual and group supervision and didactic training from qualified professionals in the delivery of the above activities

Each Masters level psychology student must also have two hours of supervision per week with an appropriately licensed Masters level behavioral health professional or a licensed psychologist. One of these two hours must be face-to-face individual supervision. The other hour can be in a group supervision format. To receive credit for MA Practicum, students must complete the minimum hours and complete 6 hours of Continuing Education Activities by the end of the practicum year.

Students who begin the Master’s degree program and intend to apply for admittance to the doctoral program must complete the Master’s program practicum requirements. Should the student be admitted to the doctoral
program, the student must then complete two doctoral practica required to earn the doctoral degree. Students must be accepted to the Psy.D. program and have submitted their complete practicum application on time according to the clinical training calendar.

**Psy.D. Practicum**

Doctoral students must complete a minimum of 500 supervised hours (250 hours of direct client contact and 250 hours of indirect client contact) for each of either two or three (Advanced) years at sites that provide opportunities for training in diagnostic interviewing, psychological evaluation and assessment, and therapeutic intervention. The primary emphasis for these training years combines the expansion, integration, and refinement of diagnostic clinical interviewing and the utilization of recognized psychological testing instruments, as well as the acquisition, integration, expansion, and refinement of therapeutic intervention skills.

For each practicum training experience, each doctoral student in the PsyD program must receive a minimum of two hours of face-to-face supervision weekly. One of these two hours may be in a group supervision format but one hour must be in individual supervision. During Practicum III/IV and Advanced practicum, 75% of supervised hours come from a licensed doctoral level psychologist. The remaining 25% may be with a licensed Masters level behavioral health professional. During Practicum I/II students participate in a practicum where supervision is provided by either a licensed Masters level behavioral health professional or a doctoral level psychologist. All clinical hours obtained apply toward requirements for pre-doctoral clinical internship. Pre-doctoral supervised training also applies towards state licensure however every state varies regarding the number and nature of supervised clinical hours. You are encouraged to familiarize yourself with the psychologist licensure requirements in the state you intend to pursue licensure upon completion of your degree. These requirements will help determine whether further supervised, post-doctoral training is necessary.

Practicum sites emphasizing assessment and therapy skills must provide opportunities for students to:

- Perform direct initial interviews of actual patients (with the ability for audio and/or video recording)
- Conduct collateral interviews with pertinent informants when necessary
- Provide psychological testing with a variety of recognized instruments (preferably a mixture of objective, projective, intellectual, and neuropsychological measures)
- Receive individual and group supervision and didactic training from qualified professionals in the delivery of the above activities
- Perform ongoing individual psychotherapy/counseling with actual patients (with the ability for audio and/or video recording) utilizing evidence-based practices
- Provide therapeutic services with couples, families, and/or groups
- Participate in interdisciplinary treatment planning and/or case management

At the completion of practicum, students should be able to use information from a variety of sources to: (1) provide diagnosis and recommendations supported by specific and relevant data, (2) formulate a case summary that is theoretically consistent and well organized, (3) write a psychological report in a style that can be understood by non-psychologists, (4) utilize their conceptualization of the case to develop, implement, direct, and manage a comprehensive treatment plan, and (5) evaluate the outcome of their interventions. To receive credit for Psy.D. Practicum, students must complete the minimum hours and complete 6 hours of Continuing Education Activities by the end of the practicum year.
Psy.D. Advanced Practicum
ASPP encourages its doctoral students to consider pursuing an additional training year prior to internship. Advanced practicum sites provide a variety of advanced training opportunities in therapy, testing, or a combination of both. Because this year is an elective, there are no comprehensive exam requirements, though students must concurrently enroll in an advanced practicum seminar (Advanced Practicum, PP8300) at ASPP and complete a minimum of 500 hours to receive credit. Under special circumstances, a student may petition the Clinical Training Committee to allow fewer practicum hour for an Advanced Practicum, particularly if the training site has not been a 12-month position. Furthermore, sites must provide consistent and sufficient supervision opportunities according to the general practica requirements. A student must complete two semesters of Advanced Practicum and Seminar (a total of six credits) and Advanced Practicum Seminar Extended to fulfill the requirement for one general elective (three credits in the doctoral program, as specified in the Academic Catalog). To receive credit for Advanced Psy.D. Practicum, students must complete the minimum hours and complete 6 hours of Continuing Education Activities by the end of the practicum year.

Test Battery Requirements
Students complete a minimum of five (5) standardized test batteries with integrative reports (i.e., neuropsychological screening, IQ test, objective personality testing, projective personality testing, DSM-IV-TR multiaxial diagnoses, & recommendations) throughout the course of the two years of practicum. If a student is unable to complete the 5 required batteries by the end of practicum III/IV, he or she must petition the Training Department to receive approval to complete the remaining batteries during advanced practicum. The inability to complete at least 5 assessment batteries by the end of practicum III/IV may compromise the student’s eligibility and competitiveness for internship applications. NOTE: Students who began Practicum I prior to the 2012-2013 academic year must complete a minimum of eight (8) test batteries.

To receive credit, a test battery must include at least one (1) clinician administered test (i.e., WAIS, WISC, SIRS-2, D-KEF, Rorschach, TAT, etc.), at least one (1) self-report measure (MMPI, MCMI, BDI, BAI, etc.), a Mental Status Exam (MSE), and an integrative report written by the student. NOTE: A practicum site that has a set, inflexible battery, which includes 3+ tests, will satisfy the test battery requirement.

Students must verify the completion of the required number of batteries and integrative reports by submitting the original Psychodiagnostic Battery Verification Form at the end of the Fall and Spring semester, and at the conclusion of their practica. Students should NOT submit the integrative reports to the school. The Psychodiagnostic Battery Verification Form serves as documentation that a battery and integrative report was completed. Some sites have been developed specifically for placement of students in specific courses of study within the program concentrations (e.g., neuropsychology concentration).

Practicum Hours
The Clinical Training Committee requires students to obtain a minimum 500 supervised hours (250 hours of direct client contact and 250 hours of indirect client contact) for each of two or three practicum years at sites that provide opportunities for training in diagnostic interviewing, psychological evaluation and assessment, and therapeutic intervention. The minimum requirement is set for students to gain requisite clinical/professional skills to demonstrate eligibility for candidacy for entry into the profession. Additionally, the minimum number of hours is a requirement for graduation from the MACL and Psy.D. program. As such, the Clinical Training Department will work with every student to meet the requirement for graduation. However, it is not guaranteed that hours accumulated during practicum experiences will meet requirements for state board licensure.
To help insure that students obtain adequate clinical hours while on practicum, the following structure is in place:

1. The student will report clinical hours to the practicum instructor on a regular basis
2. If the student fails to meet objectives for clinical hours, the practicum seminar instructor will contact the site supervisor to discuss the reasons
3. If the student continues to have inadequate clinical hours based on objective criteria, the student, site supervisor and practicum instructor will develop a plan to address the issue
4. If by December 15 the student continues to demonstrate inadequate clinical hours, the Director of Training will be notified and will contact the site supervisor
5. If clinical hours remain on an insufficient trajectory by February then the Director of Training will consider removal from the current practicum site or implementation of a supplemental training site for additional clinical hours

When a student completes 500 hours prior to the end of the practicum training agreement, they must continue their placement at the established schedule (16-20 hrs./wk.) until the expiration of the training agreement. Practicum placements are ten or twelve months. Students may NOT use the allotted vacations days outlined in the practicum training agreement to end practicum before the expiration of the training agreement.

**Practicum Seminar**

All students are required to register for a seminar concurrently with their practicum. Students register for a year-long (September-June), weekly seminar with a member of the faculty while in practicum. Students may neither register for subsequent practicum seminar with the same instructor, nor are students permitted to change practicum seminars. Students are expected to attend seminar though the end of Summer I semester while actively attending practicum. Students do not attend practicum seminar in the months of July and August, but are expected to attend practicum until the end of the contracted date (as indicated on the Practicum Training Agreement). If site or student concerns arise during the summer months, the Director of Clinical Training is available for consultation.

**Colloquia**

Colloquia will be offered to students through the fall and spring semester. Colloquium topics and activities will include lectures and presentations on manual changes, deadlines, practicum forms, application process for the next practicum year, professionalism, self-care, mock COMP2 defense, etc. Practicum and internship information and updates will also be communicated to students at these meetings. **It is strongly recommended that all practicum students attend.** Lectures and presentations will be given by faculty, community professionals, and students. Students are highly encouraged to volunteer to present at colloquium as it builds professional skills and adds to experiences that can be included on CVs.

**Types of Practica**

Current practicum sites are maintained in a binder in the Clinical Psychology Department and students are encouraged to research any and all practicum sites available. Sites include:

- Community mental health centers/clinics
- County mental health facilities
- Private and Public psychiatric hospitals
- Medical centers
- Schools
- Forensic/Correctional facilities
Residential treatment programs  
Group practices  
Neuropsychology Sites

Some sites serve the general population while others serve specific populations (e.g., children, adolescents, geriatrics, particular ethnic or racial groups, criminal offenders, etc.) or address specific problems (e.g., chemical dependency, eating disorders, medical and psychiatric rehabilitation, etc.).

**ASPP strongly encourages students to complete their training in settings that provide them with opportunities to work with diverse populations.** It is essential that students learn to work with people who are different from them (e.g. race, ethnicity, disability, sexual orientation, etc.) in a supervised setting where they can learn the skills, knowledge and attitudes necessary to practice as a competent and ethically responsible clinician.

The Clinical Training Department works throughout the year to maintain positive relationships with existing sites and affiliate itself with new sites throughout the greater Phoenix metropolitan area and elsewhere within the State of Arizona. Students may incur expenses including but not limited to: Gas, lodging, food, supplies (i.e., protocols, art materials). The Clinical Training Department is sensitive to expenses students may incur during practicum placement and will work with the student to develop strategies to address potential expenses. However, students will not be reimbursed by the academic program or site supervisor for any expenses incurred.

**Practicum Site Visits**  
The ASPP Clinical Training Department and Practicum Seminar Instructors routinely schedule “site visits” with practicum sites throughout the year. A formal face-to-face visit with the Practicum Site Supervisor will occur at least once per academic year, which includes a visit by the DCT and also by a faculty member. Students may be present at these meetings but are not required to do so. Site visits are prioritized based on feedback from student reports, mid-year and end-of-year evaluations of practicum sites and faculty member concerns. Information provided about Argosy students placed at the site is collected and provided to the DCT. If there are any concerns about a student during the site visit, this information will be shared with the student by their practicum seminar instructor or faculty advisor. Information about students will be placed in the student’s electronic clinical training file.

**Site Approval Criteria and Procedures**  
New practicum sites can be suggested by faculty members, the DCT or students themselves. The Director of Clinical Training is then responsible for following up with the administration at a potential site to determine whether they meet Argosy University criteria. The potential site is provided with ASPP’s training guidelines and requirements. The site must submit a written description of the training opportunities available to students, and the resumes/vitas of all site supervisors. The Clinical Training Department reviews the submitted materials to ensure that the training site provides students with an adequate training experience.

Approved sites must provide a minimum of 16 training hours per week (full time) or 8 hours per week (half time) for at least ten consecutive months (many sites require a twelve-month placement). It is expected that students spend approximately one-half of the total time providing direct clinical services, and one-half of their time with indirect services, including seminars, agency meetings, administrative duties, record keeping, report writing, and professional supervision. ASPP requires a minimum of two hours of supervision (one hour must be individual) with a qualified professional (i.e., a licensed psychologist for Psy.D. students and an appropriately licensed doctoral or master’s behavioral health professional for MA students). The Clinical Training Department
grants provisional approval to sites that provide training consistent with ASPP’s standards, mission, and values. Full approval can only be granted to a new site after an ASPP student successfully completes a practicum year. A probationary site will be evaluated by the Clinical Training Department through a site visit as well as evaluation by the student(s) placed at the site. A satisfactory review will result in removal of the ‘probationary’ designation.

Practica sites are evaluated on their overall quality and adherence to the practitioner-scholar model of training. For example, approved sites meet local and state license and accreditation requirements, provide sufficient opportunities for students to acquire, refine, and integrate their skills, work with appropriate and clinically rewarding populations, and train under qualified professionals who mentor in an environment conducive to learning. Furthermore, ASPP continually seeks out opportunities for their students to work with diverse treatment populations and supervisors in terms of race, ethnicity, socioeconomic status, disability, age, sexual orientation, etc.

Students must **not** recruit new practicum sites or create a practicum placement for themselves. Instead, a student can discuss with the Director of Clinical Training any potential practicum leads. The Director of Clinical Training will follow-up on any leads to evaluate the appropriateness of the potential site. If the site is approved, it is not guaranteed the referring students will be placed there. Further, the referring student should not indicate to the potential site s/he will be placed there if approved as a training site.

**PRACTICUM APPLICATION PROCESS**

The practicum selection procedure parallels the national predoctoral internship selection process. Doctoral students will become familiar with the internship match process by participating in the practicum selection process. Further, students need to be aware they are competing against other doctoral students for practicum (within Argosy and other local universities). The Clinical Training Department will work with every student meeting eligibility criteria to secure a practicum site. Students should work with their pro group leader, advisor, practicum seminar instructor, and other faculty members to make sure their CV and interviewing skills help stand out in a positive manner.

Additionally, it is not guaranteed that students will complete required practica consecutively. If circumstances arise that a student is not able to progress in their practicum sequence, the Clinical Training Department will work with the student to meet practicum requirements in the next practicum placement sequence. In such cases, the student is strongly encouraged to consult with their advisor to address changes in their course sequence.

**Preparation**

*Professionalization Group (Pro Group):* The Professionalization Group, which meets on a weekly basis during the first and second semesters, provides first-year students with important direction and assistance as they begin their education and training. Pro Group assists students with an orientation to the field as well as an introduction to key issues in the training and development of a professional psychologist. First year students are required to participate in a minimum of 6 hours of continuing education activity to receive credit for Pro Group. Students must complete the continuing education hours by the end of Spring semester of their first year.

All entering students register for Pro Group, which focuses on topics related to issues important to new professional psychology students, including an introduction to ethical and legal issues necessary for students to begin class and training experiences; and trends and issues in both professional education and professional
practice. In addition, the faculty member leading the Pro Group helps students with academic and field training planning, general consultation on problems or difficulties in the program, and questions emerging during the student’s academic experience.

Work or Volunteer Experience: First year students in Pro Group may bolster their experience with volunteer work in the mental health field. Additional experience will enhance competitiveness in the practicum application process. If you can add clinical experience to your CV, it enhances your experience and makes you a better candidate when applying to practicum sites (and later to internship sites). Employment outside of the clinical program is discouraged however. Please be aware that a student cannot apply for a pre-doctoral internship position or practicum training at a site where they have been previously employed.

Attending Professional Activities: First year students are required to participate in a minimum of 6 hours of continuing education activity to be eligible for Practicum I/II. Events can include attending a workshop, conference, poster presentations, board of psychology meetings, volunteer activities in mental health, etc. Please consult with your pro group leader and/or advisor for additional information. It is also encouraged that students become members of professional organizations, such as American Psychological Association and the Arizona Psychological Association, etc. Second- and third-year students are required to participate in a minimum of 6 hours of continuing education activities to be eligible for Practicum III/IV and Advanced Practicum. Students must provide their Seminar Instructors documentation of continuing education activity.

Create or Update Your CV: Pro Group instructors will help you develop or review your Curriculum Vitae (CV). Similar to a resume, this important tool should be kept up-to-date at all times to reflect the current state of your training and education. Some guidelines are offered below:

- Use bullet points, bolding, and italics so that your CV is easy to read and catches the eye.
- Choose a professional font; separate sections by spacing/lines; use header/footer for subsequent pages; leave wide margins.
- The information you consider to be the most important should be located near the beginning of your CV or on the first line of each paragraph.
- Avoid the use of jargon and abbreviations, unless it is relevant and industry-specific.
- Avoid the use of “I” and “We.”
- Ensure that your CV targets the requirements of the position for which you are applying.
- Your experience and education should be listed in reverse chronological order within each section. Use consistent date format; e.g. 4/99-7/02, or Feb 1996-Dec 2001.
- Print your CV on quality, white, bond paper. Most employers prefer that you don’t staple the pages at the top left-hand corner; it is not necessary to have a bound CV.
- Bring several additional copies of your CV with you to interviews.
- Layout - Is the sequence and arrangement of headings logical and easy to read? Do your key selling points stand out? Is it well typed and reproduced? Does it have adequate spacing, margins, and bolding? Is layout consistent throughout each section?
- Appearance - Is it neat and organized?
- Wording/Mechanics - Are phrases clear and concise? Check spelling, grammar, and punctuation.
- Completeness - Is all relevant information reflected? Have you said all you want to say about your abilities as they relate to the particular job?
• Targeted Abilities - Have you adequately emphasized your skills and your accomplishments as they relate to the job?

**Cover Letter:** The Training Department recommends that you develop a cover letter to bring with you to a site or send to practicum sites. A sample cover letter can be found on the student portal. Be sure to personalize the letter to reflect your own experiences and the site’s needs. Cover letters should be only one page and include three or four paragraphs that address the reader’s needs. Type the letter, using spell check, and have at least one other person check the letter to ensure that there are no errors in content, spelling, or grammar. Include the name and title of the individual to whom you are writing. Ensure that you have included the correct and complete name and address of the organization. Print the cover letter on the same type of quality bond, white paper as your CV. Close your letter with “Sincerely,” “Yours truly,” or “Respectfully.” Sign your letter in black ink. Students are encouraged to use the following format:

**First paragraph:** State your interest in the position available at the organization. State how you became aware of the position. Describe why you think you are a good candidate for the position.

**Second paragraph:** Describe specifically how you can contribute to the organization. Ensure that your letter addresses the specific requirements for the position for which you are applying. Include relevant skills, experience, and educational background. Whenever possible, include terms that are in the job description, or that are industry-specific. Demonstrate interest and enthusiasm for the organization.

**Final paragraph:** Thank the individual for his/her time and consideration. Indicate your interest in an interview, and state how you may be contacted.

**Orientation**
Practicum orientation takes place during the Fall semester in Colloquium. Attendance is mandatory to participate in practicum during the next academic year. For practicum III/IV and Advanced Practicum applicants, information will be provided in your Practicum seminars. You can obtain all necessary practicum forms in the appendixes of the Clinical Training Manual and from the Clinical Psychology Department.

**Practicum Application Procedures**
During the Fall Semester, all students planning to begin a practicum in the Summer or Fall of the following year attend Colloquium or practicum seminar to review the process of obtaining a practicum position. It is expected that these forms will be submitted in a timely manner. Failure to do so may delay or preclude practicum placement.

**Legal History:** All students should be aware that many practicum sites require background checks and drug screening. Failure to pass a background check or a drug screening will result in an immediate referral to the Student Professional Development Committee (SPDC). Students who fail a drug screening for practicum will be required to submit a completed drug screen to the Training Department and SPDC prior to re-applying for practicum. In addition, students are advised that an arrest history may prevent practicum placement, and a felony conviction will likely prevent both internship placement and licensure. Students with an arrest history are required to notify the Training Department prior to application for practicum and internship. Students on practicum or internship must also inform the practicum or internship DOT of any subsequent arrests within 1
week of the arrest. In addition, students with a felony history are advised to seek legal counsel regarding these issues.

**Application Process:** The latest versions of the practicum forms are in the Clinical Training Manual. The forms explain the required courses to be eligible for Master’s Practicum I & II, Psy.D. Practicum I & II, Psy.D. Practicum III & IV, and Psy.D. Advanced Practicum. MACL and Psy.D. Practicum Applications are due on **November 30, 2018.** All practicum application materials should be submitted to the Clinical Training Department in the Clinical Training mailbox.

**Instructions to Complete the Practicum Application Form:** The following information is necessary on the practicum application form.

*Practicum level:* All students will use the same practicum application form to select the level of practicum they are applying for, including MACL, Psy.D. Practicum I/II, Psy.D. Practicum III/IV or Psy.D. Advanced Practicum.

*Prerequisites for practicum level:* The prerequisites necessary for each practicum level.

*Site Preference Rank:* Each student applying for Advanced Practicum and Practicum III/IV will list their 5 most preferred practicum training sites that correspond to their level of training. If a student selects a practicum site inappropriate for their level of training, that site will be removed from their list during the selection process.

*Experiences Needed:* Students will select those experiences still needed to meet program requirements. This is to ensure that practicum sites can provided the needed experiences.

*Faculty Approvals:* Each student will review their practicum application with their faculty supervisor and their practicum seminar instructor and obtain signatures from each.

*Submitting Practicum Application:* Each student will submit the following information to the Clinical Training Department mailbox:

- Practicum Application
- Prerequisites
- Cover letter
- Vita or resume
- Time2Track summary of clinical hours using the APPI view (if prior practicum)
- Faculty advisor and practicum seminar instructor signatures

Any application that is incomplete or submitted to the training box late is likely to compromise your practicum selection and the availability of practicum sites. It is the student’s responsibility to ensure that the materials are turned into the Clinical Training Department.

**WARNING: DO NOT CONTACT** practicum sites or site supervisors prior to being instructed to do so. Premature or inappropriate contact with a practicum supervisor will result in the loss of the specific site you
have contacted and your site preference rankings. You are encouraged however to contact prior students who have trained at the specific site you are interested in to learn more.

**Practicum Selection Procedures**

Once the Training Department has received your practicum application materials, the following procedures will be implemented:

*Examination of Application:* The student application will be examined to ensure that all necessary documents are submitted and that prerequisites are met for the particular level of practicum. Application level (e.g. Practicum I/II, Practicum III/IV) will be compared to the training level necessary for each site. Training needed to meet Psy.D. requirements will be examined. **Only complete applications submitted by the deadline will be used in the initial practicum selection process. Incomplete or late applications will be given a lower priority.**

*Student Ranking of Sites:* The Clinical Training Department will use the information included in the application to select practicum sites for the student to interview. If a student selects sites that they are unqualified, or a site that does not provide the training that they need to complete program requirements, the site will be removed from their list by the clinical training committee. Criteria for selecting which practicum sites a student will interview is determined by student preference. If there are more students selecting a specific site than available placements at that site, the tie break criteria will then go into effect. Students will be notified of the sites where they will arrange an interview starting in mid-January for advanced practicum students and into March for practicum I/II students.

*Tie Break Criteria:* The Clinical Department will add the following information to each practicum application to distinguish students applying for the same practicum training site. This additional information will allow students to be ‘ranked’.

*Prior Practicum Supervisor Evaluations:* A score will be calculated based on prior practicum evaluations. If there is more than one supervisor evaluation, the average of all evaluations will be used.

*Yearly Student Evaluation:* The student’s yearly evaluation by faculty

*Grade Point Average:* The student’s GPA at the time of the application is used.

**Selection of Practicum Site by Practicum Level:**

*Advanced Practicum Students:* Students applying for Advanced Practicum will be paired with their selected practicum sites first. In the event that there are more students applying than available practicum positions at a specific site, the ‘Tie Break Criteria’ will be implemented.

*Psy.D. Practicum III/IV Students:* Students applying for practicum III/IV positions will then be paired with their selected practicum sites. In the event that there are more students applying than available practicum positions at a specific site, the ‘Tie Break Criteria’ will be implemented.

*Practicum I/II Students:* Students applying for practicum I/II positions will be paired with their selected practicum sites, if not filled by either an advanced practicum or practicum III/IV student already. If all student’s preferred sites are filled, practicum I/II students will be selected for any/all available practicum sites that are appropriate for their training level.
MACL Students: MACL students will be matched to appropriate master’s level practicum sites which do NOT generally have an overlap with either Advanced, Practicum III/IV or Practicum I/II placements.

Practicum Site Interviews: The following procedure will be used to notify students of practicum sites where they will schedule an interview.

Advanced Practicum: Advanced practicum students will be notified in January 2019 regarding 2-4 sites to interview based on the criteria previously described. They will be provided contact information for the site supervisor to schedule an interview. Interviews should be scheduled as soon as possible. If the student and a site agree to train together then the student will notify the DCT as soon as possible.

Psy.D. Practicum III/IV: Students applying for Psy.D. Practicum III/IV will be notified in February 2019 regarding 2-4 sites to interview based on the criteria previously described. They will be provided contact information for the site supervisor to schedule an interview. Interviews should be scheduled as soon as possible. If the student and a site agree to train together then the student will notify the DCT as soon as possible.

Psy.D. Practicum I/II: Students applying for Psy.D. Practicum I/II will be notified in February/March 2019 regarding practicum sites (1 or 2) for which they will interview. Students will be provided with necessary contact information and should contact the site supervisor to schedule an interview as soon as possible after notification.

MACL Practicum: Students applying for MACL Practicum will be notified on February/March 2019 regarding practicum sites (1 or 2) for which they will interview. Students will be provided with necessary contact information and should contact the site supervisor to schedule an interview as soon as possible after notification.

NOTE: Nearly every practicum site requires the student to interview and the site supervisor will determine if the student is appropriate for the particular site. This is not true for every site however. Some sites require an interview but do not participate in the competitive interview process. Hence if you list one of these sites as your first preference, you will likely be selected for the site if you are one of the top qualifying students for that site based on selection criteria.

NOTE: If the clinical training department or DCT received feedback from a practicum site supervisor that a student was unprofessional during the interview process, that student will lose their preferred site rankings and any further interviews will be at practicum sites that remain after Advanced Practicum and Practicum III/IV students have interviewed. The student will also be referred to their practicum seminar instructor for assistance with preparing for interviews.

Any questions about clinical practicum placements or the process should be directed to the Director of Clinical Training.
Practicum Site Supervisors: Practicum site supervisors will decide which student(s) is the most appropriate for the site based on background, level of training and interview skills. If the site supervisor and the student mutually agree to work together during a practicum placement, the student will then IMMEDIATELY notify the Director of Clinical Training of accepting an offer for practicum. This is required as there may be other students who wish to interview at a selected practicum site if there are still available positions. The student will then have a practicum training agreement signed with the site supervisor as soon as possible.

Students may be placed at either assessment or therapy sites, depending on the needs of the student and the availability of sites. Some sites will only accept Practicum III-IV or Advanced Practicum students. The Clinical Training Committee will select between 1-4 sites to interview for each student. If the student is selected for a practicum, they are obligated to attend that practicum placement for the duration of the practicum training agreement. NOTE: If a student does not obtain one of their ranked practicum sites or is not selected for a practicum by site supervisors following their interview(s) the practicum seminar instructor will be contacted to assist in assessing if there is a problem for the student that may be preventing their selection for practicum. The student will be given further guidance regarding interviewing. A plan will be put in place regarding how to address weaknesses during interviews and in determining if there is a more appropriate practicum site still available.

Occasionally, a student may be selected for a “hybrid” placement due to their training needs and requirements. A hybrid placement is comprised of 2 separate sites that the student commits 8-10 hours a week at each site. For example, a student with a hybrid site will be at an assessment-only site for 8-10 hours and a therapy-only site for 8-10 hours. The hybrid placement will allow the student to meet the training needs and requirements of the program.

Occasionally, a student applies for practicum, but the Clinical Training Department, based on information from Clinical Faculty or Practicum Supervisor(s), determines they will not be placed on practicum for that application year. If the student does not agree with this decision, they may meet with the Clinical Training Committee to explain why they believe they are ready to begin practicum. If the student disagrees with the decision of the Clinical Training Committee, s/he may appeal the decision.

For students pursuing the Neuropsychology or Diversity Concentration, the Practicum Intent Form should indicate this as a training need. Be aware that the majority of sites designated as Neuropsychology Practica require advanced practicum students. As such, a student may not be able to complete the Neuropsychology Practicum until the Advanced Practicum year. Neuropsychology students are given priority for placement at Neuropsychology training sites. If there are placements left after all Neuropsychology students have been placed, other advanced students who have indicated an interest in Neuropsychology will be offered an opportunity to interview.

Site Interviews
Students are provided contact information for each site supervisor but are responsible for arranging their own interviews. Much like a job interview, these meetings are an opportunity for students and sites to evaluate each other and review training opportunities, expectations, needs, responsibilities, etc. Practicum sites vary considerably regarding the nature of the interview. Site interviews should be scheduled and completed as soon as possible but will be dependent upon the availability of the site supervisor and other factors. Interviews will be completed from January through April 2019 depending upon these factors.
Students should take a three (3) copies of the Practicum Training Agreement Form to the interview in the event that the practicum site supervisor decides to select the student for placement at that time. The three (3) ORIGINAL signed copies of the Practicum Training Agreement should be turned in to the Clinical Training Department drop box. After the DCT has reviewed and signed all Practicum Training Agreements, students will be notified to come and pick up 2 copies—one for their own records and 1 to return to the supervisor at their new site. The third copy will remain in file with the Clinical Training Department.

**INTERVIEWING TIPS**

**Attitude is Everything**
The key element to successful interviewing is not your experience, your grades, the classes you took, or any of your other credentials. While your education and experience may have helped you obtain an interview, the key element to successful interviewing can be summed up in one word: **ATTITUDE**. Your goal is to leave the impression that your desire is to do your very best for the organization and that you are focused on the organization’s needs.

**Dressing for Success**
Before you introduce yourself, before you shake someone’s hand, and before you answer any questions, your appearance is going to give the interviewer an impression of you. It is up to you whether that impression is going to be a positive one or a negative one.

Here are some basic tips on dress etiquette for interviews:

- Business suit or shirt, tie, and slacks (solid dark blue or gray is best)
- Business style shirt/blouse, and slacks or skirt.
- Clean, closed-toed shoes
- Well-groomed hairstyle
- Clean, trimmed fingernails
- Minimal cologne or perfume
- No gum, candy or cigarettes
- Light briefcase or portfolio case
- Avoid visible body piercing (nose rings, eyebrow rings, etc.)

**Non-Verbal Communication**
Because many candidates experience communication difficulties in the course of an interview, it is important to understand that communication is more than just what is said. Often it is the nonverbal communication that we are least aware of that speaks the loudest. Following are the top five non-verbal communication skills, ranked in order of importance:

**Eye Contact** - If you look away while listening, it shows lack of interest and a short attention span. If you fail to maintain eye contact while speaking, at a minimum it shows lack of confidence in what you are saying and at worst may send the subtle message that you not being forthright or truthful. Do not assume that you have good eye contact. Ask. Watch. Then practice. Ask others if you ever do not have proper eye contact. Some people maintain excellent eye contact while listening but lose eye contact when speaking or vice versa.
Facial Expressions - Try to be cognizant of different facial expressions, especially negative expressions. Again, ask for feedback about this from a trusted friend or family member. Don’t forget to smile! You do not need to smile continuously during the interview, but remember to keep coming back to it.

Posture - Posture signals your confidence and power potential. Stand tall, walk tall, and most of all, sit tall. When standing, stand up straight. When you are seated, make sure you sit at the front edge of the chair, leaning slightly forward. This will speak volumes about your interest and motivation.

Gestures - Contrary to popular belief, gestures should be used sparingly during the interview. There is no need to use artificial gestures to try to heighten the importance of the issue at hand. When you do use gestures, make sure that they are natural and meaningful.

Space - Recognize the boundaries of your personal space and that of others. Be prepared, however, not to back up or move away from someone who has a personal space that is smaller than your own. Hang in there, take a deep breath, and relax.

Investigate
• Research/review the culture, economic conditions, organizational structure, history, purpose/mission, and requirements of the position.
• List appropriate questions that you might ask in the interview.
• Assess yourself. Make a list of your strengths, abilities, experiences, and activities that relate to the position.

Prepare
• Solidify travel arrangements, driving directions, and parking for the interview.
• Determine major points that you want to stress in the interview.
• Identify three reasons for selecting this organization.
• List three assets that you have that will interest the interviewer.
• Develop two or three questions that will make a good impression.
• Participate in mock interviews.
• Project a professional image by being appropriately dressed and groomed.
• Gather appropriate paperwork—letters of reference, copies of transcripts, list of at least three references, etc. Many people are bringing career portfolios with them on interviews. Also bring several copies of your resume on resume paper.

The Interview Overview
A good interview is ALWAYS a two-way street. It is an opportunity for you and the organization to exchange information and to assess whether there is a suitable match. Be courteous and respectful to the interviewer. This person is taking the time to interview you and potentially provide you training. Maintain a stance of flexibility, open-mindedness, and a positive attitude toward learning.

Frequently Asked Interview Questions
Being prepared is essential to good interviewing. The following is a list of questions that are frequently asked by interviewers and are helpful to ask while on an interview, so prepare yourself. We also recommend that you pair up with someone to practice interviewing.
1. Why are you interested in this site? What specific skills or abilities do you bring to make you well suited to this externship?
2. Describe your strengths and weaknesses. What are your greatest strengths? What are your greatest weaknesses?
3. What can you bring to this site?
4. Tell me about yourself.
5. What are your expectations for the practicum? In other words, what are your primary learning and training goals? What areas or skills do you feel you need to improve?
6. What are your long-term goals?
7. How did you become interested in psychology?
8. What are some of the most interesting readings about the field you’ve come across?
9. What are your main interests in the field?
10. What population or diagnosis is most difficult for you? How would you manage the difficulty?
11. Describe your theoretical orientation.
12. Tell me about your psychological assessment experience.
13. What issues should you keep in mind when working with people who are of a different ethnic or cultural background than you?
14. What are your needs and expectations from supervision?
15. What words describe you?
16. What personal attributes do you bring to the therapeutic relationship?
17. What do you do to take care of yourself?

Questions to Ask Interviewers

1. If not clearly stated on the site profile or application, is there a preferred theoretical orientation at the site?
2. How are cases and groups assigned?
3. What is the relationship between psychology and other mental health disciplines in the agency?
4. How many practicum students do you accept? Clarify starting and ending dates, and any requirements concerning evenings or weekends.
5. How many hours of individual and group supervision is provided per week? (Know the institutional requirements!)
6. What types of seminars and other didactic experiences are available?
7. Is taping allowed at this site?
8. What are you looking for in a practicum student (level of experience, previous experience)?
9. Are there any days that students are required to be on site for supervision, staffing, or other responsibilities?
10. What is your selection process, and when will you be notifying students of your decisions?

How to Increase the Chances of Getting Your Preferred Practicum Site

You can increase your chances of placing at a site by interviewing well. Practice interviewing skills with another student. And be careful not to sabotage yourself during the interviews. We’ve developed some tips to help you and noted some common mistakes students make.

- Do some research. Research the site before you go so you can talk intelligently about the practicum experience. Refer to the site profile and look on the site’s website (if they have one). But cautious about
relying on fellow students as information sources because one student’s experiences will not be the experiences of another.

- **Arrive early** (10-15 minutes). Be prepared to wait to begin the interview, in case your interviewer is unable to start on time.
- **Show respect.** Be punctual, dress professionally, conduct yourself appropriately, and be polite. Send a thank you letter after the interview.
- **Show interest and enthusiasm.** Be engaged about your training and find the positives in the situation. Say things like, “This particular type of training will nicely mesh with the gaps in my training. And my experience working with troubled teens has helped prepare me to work with the population at your site.” Avoid phrases like, “I need to complete 8 batteries while at this site,” “This site wasn’t one of my choices,” or “I just need a practicum. It doesn’t matter to much where I do my practicum.”
- **Do not dictate terms.** Phrases like, “I can only work evenings and weekends” comes across as “My schedule is very complicated because I work full-time, go to school, and have a family, so you need to come up with a practicum schedule that revolves around my life.” If a site is interested in you, there is often some flexibility regarding schedule.
- **Know your training needs.** Before your interview, refresh your memory about practicum requirements (like hours and supervision requirements).
- **Avoid complaining.** No one wants to hear, “This site is so far away. I’ll have to drive an hour to get here.” Many people commute that far every day to get to their jobs. Remember this is just for a year. If you’re asked about the distance, say, “It is a bit further than I’m used to driving, but I know the experience will be worth every minute of the commute.”
- **Ask questions** (see questions above).
- **Patience is a virtue.** Avoid unprofessional phone calls like, “Did you receive my materials?” or “I haven’t heard from you and you’ve had my application for a week.” All contacts with the site should be calm, polite, brief, and purposeful. Remember that site contacts often have many duties and other priorities; they may not be able to get back to you quickly.

**After Your Interview**

Send a letter thanking those who interviewed you and indicate your continued interest.

**Practicum Training Agreement**

Completion of the Practicum Training Agreement or verbal acceptance of an offer by the student executes a binding contractual agreement between ASPP, the practicum site, and the student in which the student’s delivery of service is exchanged for clinical supervision, access to clinical populations, facilitation of professional role development, and participation in other professional activities (e.g., rounds, staffings, seminars, etc.). Financial transactions may never occur between any of these parties or as part of this contract.

The Practicum Training Agreement should be completed (see Clinical Training Calendar) and remains the student’s responsibility to ensure that three (3) ORIGINAL Practicum Training Agreements are turned in to the Clinical Training Department. Failure to adhere to this requirement results in the student being barred from starting the practicum experience since proof of malpractice insurance cannot be issued until the Practicum Training Agreement is in place. Master’s practica students must adhere to these same policies.

Premature termination of practicum by the student is unethical and a violation of the practicum training agreement. Any student failing to complete their training agreement will be referred to the Clinical Training Committee for remediation. The contract may only be withdrawn under the most unusual and/or extreme of
circumstances. In these rare instances, students must contact the ASPP Clinical Training Department before discussing a potential withdrawal from his/her practicum site.

**Policy on Training Sites with Creedal Statements**

Some sites restrict their trainee applicant pool based upon race, age, gender, disability, ethnic or racial background, religious affiliation, or sexual orientation. Because ASPP strongly endorses a non-discrimination policy, sites are likewise expected to conduct their selection and training in a non-discriminatory manner unless they have compelling legal and/or therapeutic reasons for doing so. Sites that utilize discriminatory creedal statements must notify the school of this and clarify rationales for such policies. Such sites are only approved if adequate rationales exist, and this information will be clearly noted in the practicum placement literature kept on file in the Training Department.

Legitimate rationales for the use of creedal statements typically fall into one of the two following categories:

A site serves a specific clientele who have special needs or share unique problem areas. For example:
- A shelter for battered women may only utilize female counselors
- A program mentoring African-American boys may only use African-American male counselors
- A program serving ethnic immigrant populations may prefer counselors who have similar ethnic and/or immigration experiences

A site may exercise a legal right to restrict their applicant pool. For example:
- Some government agencies and branches of the armed forces may apply selection restrictions supported by law
- Religiously oriented programs may legally restrict hiring based on religious affiliation

Though the APA accredits agencies falling into both categories, ASPP does not support or endorse the latter and does not restrict any student from applying to such sites.

If a student feels she or he experienced any form of discrimination or harassment at their training site, a report should be made immediately to the Clinical Training Director who will then conduct a full investigation of the matter and intervene accordingly. Whenever ASPP discovers incidents of discrimination or harassment in a site’s or supervisor’s policies or practices, the Clinical Training Department makes immediate reports to affiliated professional organizations (e.g., APA, APPIC, Department of Professional Regulation, etc.) and requests notification of remedial action.

**Policy Regarding Private Practice Settings**

ASPP expects that its students conduct themselves in an ethical and legal manner. It is both illegal and unethical for students (or any clinician) to practice outside the scope of their professional training and qualifications. Therefore, ASPP specifically restricts all matriculating students from engaging in their own private practice activities (i.e., for-profit delivery of therapy or counseling services) unless qualified to render such services. For this reason, a student’s self-employed private practice may never be used as a practica or internship setting.

A “qualified” student is one who holds a current registration, certificate, or license by the appropriate state regulatory agency in which the delivery of service takes place. Thus, qualified students may legally and ethically practice independently in her or his area of expertise. For example, a student possessing an independent substance abuse license (LISAC) can provide substance abuse treatment services in a private practice setting, though it would be unethical and illegal for this student to provide psychological testing or mental health
services to the public. “Unqualified” persons, independent of experience and training, do not hold a professional designation entitling them to practice independently.

Under no circumstance can unqualified ASPP students independently render behavioral health services in any setting. Any unqualified student engaged in such activities prior to enrollment at ASPP cannot continue such practices after admission. A student engaged in the independent delivery of any service reasonably construed as psychological or counseling in nature must notify the Clinical Training Department about such activities in writing and provide current evidence (and timely renewals) of the registration, certification, or licensure that allows that specific practice. The Clinical Training Department reviews this petition to determine if the student is qualified to engage in such activities. Failure to comply with the aforementioned policies (including failure to notify the Clinical Training Department or falsely representing qualifications) will be vigorously pursued and may result in dismissal from the program.

For additional information on the ethical delivery of professional psychology services, see:

- Board of Behavioral Sciences Licensing Laws and Regulations, April 2002.

PRACTICUM POLICIES AND PROCEDURES

Professional Conduct
ASPP expects that its students conduct themselves in a legal, ethical, and appropriate manner during all phases of their practicum placements (i.e., initial application through completion of the training year). Therefore, students must possess and apply a working knowledge of the APA’s Ethical Principles of Psychologists and Code of Conduct (2002), the Specialty Guidelines for Delivery of Services by Clinical Psychologists (1981), and other applicable codes of ethics. Furthermore, they should be familiar with the laws and regulations regarding the reporting of suspected child abuse and neglect, and suspected elder/dependent abuse, and other legal guidelines.

The following are examples of illegal, unethical, and/or inappropriate behavior:

- Acting in a manner inconsistent with ethical or legal guidelines
- Failure to follow ASPP’s training guidelines
- Failure to appear for scheduled practicum events or responsibilities without approval or proper notification
- Taking vacation or personal time without approval
- Taping a client without a properly executed consent and release of information
- Removal or private use of practicum site property without permission
- Violating patient confidentiality (e.g., playing a session tape to anyone not included in the consent form, failure to remove personally identifiable information from written or taped materials before seminar presentation, etc.)
- Failure to report a known or suspected incident of child abuse or neglect, or suspected incident of dependent/elder abuse or neglect
- Not performing an adequate suicide or violence risk assessment
- Withdrawing from a practicum for any reason without permission from the Clinical Training Department
- Accepting a practicum and then turning it down for an offer made from another site
Consequences for such behavior range from not being placed on practicum or removal from practicum to remediation to referrals to the Student Professional Development Committee or the Student Conduct Committee. For additional information, see the ASPP Academic Catalog.

Students will be informed of the decision to postpone or remove them from their practicum placement in writing and will have the opportunity to discuss the decision with the Clinical Training Committee. Remediation planning and/or referral to the appropriate committee (e.g. Student Professional Development Committee or Student Conduct Committee) will be made depending on the nature of the concerns. If students do not agree with the Clinical Training Committee’s decision, they have the right to appeal the decision, in writing, to the Clinical Psychology Department Chair.

Social Media Guidelines
The Arizona School of Professional Psychology at Argosy University recognizes that social networking has changed the way people communicate and that students want to be a part of this ever-changing platform. Social networking sites expand one’s reach immensely and there are many valuable uses of these networks. However, because social networking is so accessible and has blurred the lines between personal and private, there are a number of concerns with social networking sites of which you should be aware of. Realize that information you post without using appropriate privacy settings may be available to anyone including faculty, practicum and internship supervisors, current or prospective employers, clients, and many more. While the College encourages this online collaboration, we would like to provide you with a College policy and set of guidelines for appropriate online conduct and to avoid the misuse of this communication medium.

- Online can mean forever. Remember that what you post is accessible long after you remove it. Current posts and comments can be forwarded, copied and saved by others. Years from now, current or prospective employers could find posts that you create now. Practicum and internship supervisors may use this information to ascertain your maturity and professional growth. If it is not something you would say to an employer in person you should think twice about posting it online. Do not let careless words now prevent you from securing your dream job in the future.

- Use privacy settings and require that they ask your permission before anyone or any program can gain access to information about you and your photos. Understand and use the privacy settings on social networking sites. If you do not, your personal information is available to the entire world. Limit personally identifying information such as last name, date of birth, phone numbers, home addresses, and class schedules to make it harder to find you on the internet.

- Respect others. Do not infringe on the privacy of your friends, peers or College faculty. Never post personal information of others that could be embarrassing to them or Argosy University. If posting photos, ask the permission of those involved. If someone objects to photography, avoid using it as a matter of common courtesy.

- Follow the rules. Make sure you understand the policies and terms of use of any social media outlet you use. Read the terms of service before using. Displaying behavior that violates federal and/or state law could have serious consequences that could affect your future.

- Follow University policy. All Argosy University student policies apply to social networking as well. Adhere to the student handbook (especially regarding academic honesty and student code of conduct) and any/all applicable
student policies and standards of conduct. It is expected that you conduct yourself in a way that exemplifies the professional, socially responsible and honorable behavior expected of all graduate students.

Follow the APA ethics code concerning confidential information. Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work. You should also strongly consider avoiding discussions about where you work, the type of work that you do, and the types of clientele that you work with on the internet.

The following are links to APA guidelines on social media:
http://www.apa.org/about/social-media-policy.aspx
http://www.apa.org/monitor/2014/02/ce-corner.aspx
http://psycnet.apa.org/record/2016-37091-008

Students Demonstrating Inadequate Clinical Competency and/or Judgement
ASPP’s training philosophy rests upon the belief that clinicians must demonstrate academic and clinical competency and that one is not sufficient without the other. Academic competency requires an adequate fund of knowledge plus the conceptual skills to integrate and apply this knowledge to case material. Clinical competency pertains to the demonstration of interpersonal skills and integrity, the ability to accurately assess psychological phenomena, to intervene effectively, and to adhere to legal, ethical, and professional duties associated with the mental health professions.

Clinical unsuitability refers to those students who are unable to fulfill the minimal standards of clinical and/or academic competency due to impairment, incompetence, ethical misconduct, academic misconduct, and/or other problematic behaviors. Impairment is defined as interference in professional functioning, typically reflected in an ability to control personal stress, psychological dysfunction, or emotional reactions that may affect professional functioning. Impairment typically involves a decrease in level of skill functioning. Incompetence refers to a lack of achievement of developmentally appropriate competence, which may include either professional, interpersonal skill, or academic deficiency.

All clinicians involved in training must address the issue of students’ clinical suitability. The ASPP training faculty has obligations to students as well as the profession and the public receiving services. As “gatekeepers,” the Clinical Training Department occasionally must exercise these responsibilities by preventing unfit students from being placed on practicum and/or continuing on practicum. Because of the gravity associated with such decisions (i.e., recommendations for retention and significant remediation), an intensive and individualized formal review is required.

ASPP understands that emotional and/or behavioral problems may result in the student being clinically unsuitable to practice until resolved. Avoidance of such matters does not serve in the best interest of the student, the school, the profession, or the public. Problems associated with unsuitability only become an academic or training issue when they impact a student’s ability or potential to become a competent professional. Concerns about a student’s clinical suitability may be raised by the student, ASPP faculty, site supervisors, or student peers. Examples of behaviors suggestive of clinical unsuitability include:

- Provision of services beyond one’s scope of competence
- Conviction of a crime that directly bears upon the ability to continue training
• Insufficient and/or harmful application of psychological theory or practice
• Provision of direct clinical services despite being emotionally or mentally unfit to do so
• Impairments in functioning due to the direct or indirect effects of substance abuse or addictions
• Demonstration of unethical, illegal, or unprofessional conduct with patients, supervisors, peers, or instructors
• Significant deficiencies in clinical, academic, or professional judgment
• The student does not acknowledge, understand, or address a problem when identified
• The problem is not merely a reflection of a skill deficit that can be rectified by academic or didactic training
• The problem is not restricted to one area of professional functioning
• A disproportionate amount of attention by training personnel is required
• Students’ behavior does not change as a function of feedback, remediation efforts, and/or time

Once a question about a student’s clinical unsuitability is raised, the Clinical Training Committee conducts a comprehensive review of the circumstances according to established institutional policies. All involved parties must respect the student’s rights to a thorough and objective review and to self-representation of the facts in question. Details and correspondence about concerns pertaining to a student’s suspected emotional and or behavioral difficulty are kept in a confidential file in the Director of Training’s office until a final determination is made.

The Clinical Training Committee will review preliminary information and take into consideration any of the following:

• Expert opinions from the academic faculty, the student’s academic advisor, and/or site supervisor(s)
• A review of the student’s willingness to accept responsibility for the concerns in question and to engage in meaningful remediation
• Consideration of the extent to which continued enrollment places unreasonable or excessive demands upon other students, faculty, and potential training sites
• An assessment of the student’s ability to function as a trainee in direct contact with clinical populations

On the basis of all information, the Clinical Training Committee makes a final disposition. If the concerns are substantiated in part or in full, a remediation plan may be developed and/or referral of the student to appropriate committee (e.g. Student Professional Development or Student Conduct Committee), depending on the nature of the concerns and disposition rendered.

**Practicum Responsibilities**
Practicum training unites students, site supervisors, and ASPP in a unique professional and working relationship. Each party has certain obligations and responsibilities that can be summarized as follows:

**Students must:**
• Conduct themselves in a legal, ethical, and professional manner in all activities
• Be present on practicum 16-20 hours per week for the term of the training agreement
• Integrate smoothly into their training sites and develop good working relationships with staff and clients
• Display appropriate attitudes including an openness to self-examination and new learning
• Submit paper copies of all practicum logs and complete all evaluation forms in a timely manner as defined in this training manual
• Keep their supervisors adequately informed of all relevant information
• Inform their Practicum Seminar leader and/or Clinical Training Department of any difficulties encountered at their practicum sites
• Fulfill the duties agreed upon and outlined in their Practicum Training Agreement

**Site Supervisors must:**
• Conduct themselves in a legal, ethical, and professional manner in all activities
• Communicate clear expectations at the beginning of the training year
• Provide regularly scheduled supervision time
• Provide adequate clinical opportunities to meet ASPP’s practicum requirements
• Complete and return semester Practicum Supervisor Evaluation of Student Competence evaluations in a timely manner
• Offer clear, ongoing, and constructive feedback to students regarding observed strengths and weaknesses
• Inform the Clinical Training Department of any difficulties encountered with students as early as possible
• Inform the Clinical Training Department and students (as appropriate) of any significant changes that will or may impact student training

**Clinical Training Department must:**
• Conduct themselves in a legal, ethical, and professional manner in all activities
• Provide students with accurate and current practicum resource materials
• Advise and assist students throughout the practicum application process to help secure good matches between students and training sites
• Monitor students’ progress during practicum training and provide consultation and advisement to students, site supervisors, and seminar leaders as needed
• Develop new training sites and monitor the quality of existing ones through maintaining close working relationships with professionals in the community and performing regular site visits
• Maintain current records of students’ progress and distribute the needed training evaluations each Semester

**Practicum Evaluations**
Site Supervisors will formally evaluate each supervisee’s performance in the practicum once each term. See the Clinical Training Manual for the evaluation forms. Site Supervisor evaluations should be discussed in depth with supervisees. If students are not making adequate progress in their training, then supervisors should inform the Director of Clinical Training. Faculty Practicum Seminar Instructors are expected to provide feedback on each student’s standing and progress toward attaining the goals of the seminar. Students receive separate academic grades of credit or no credit for both the academic Practicum Seminar and the practicum placement.

Faculty will visit each practicum placement at least twice per year. The faculty will evaluate the adequacy of the training and the progress of the students at the organization using accreditation materials. Graduate students will evaluate the adequacy of their training experiences at least twice each year. Upon finishing a practicum, students complete their second Student Evaluation of Practicum Site Form in which they evaluate their training experience.

The Clinical Training Department reviews and monitors all existing training agencies annually and periodically through scheduled site visits, routine phone calls, and mailings. The Clinical Training Department reviews Student Evaluation of Practicum Site forms submitted by practicum students at mid-year and at the end of the year, which is a rating of their training experience. The results of these reviews assist the Clinical Training Department in placing the next round of students seeking practicum and ensure the quality of placements.
Training Directors and Faculty Practicum Seminar Instructors are prepared to intervene for any problems encountered at a training site. Therefore, students experiencing difficulty at their site should consult with the Clinical Training Department and their Faculty Practicum Seminar Instructor. Similarly, site supervisors are encouraged to contact the Clinical Training Department with their concerns about students’ performance. All problems presented to the Clinical Training Department, by either students or site supervisors, receive a comprehensive and objective review of the pertinent information prior to rendering interventions and dispositions.

**Time2Track**

Time2Track is a web-based program designed to help psychology graduate students track clinical training experiences for practica, internship, and licensure, as well as provide invaluable administrative tools for institutions. It offers the convenience of tracking hours that populate into the APPIC internship application, the national internship matching program that all clinical students apply to when pursuing internship.

Students are required to register with Time2Track and record their hours. Visit [www.time2track.com](http://www.time2track.com) to learn more about the program, license fees, terms and conditions. Students should become familiar with the program for ease of use. Students are responsible for the yearly fee. A discount is offered when registering as an ASPP student.

Practicum seminar instructors will request monthly summary of hours printed from the Time2Track program. Please submit to your practicum seminar instructor. This is the way that your practicum seminar instructor can determine whether their students are obtaining adequate clinical hours and are on track to obtain the required number of practicum hours of the year. Students are strongly encouraged to discuss any situation that impacts obtaining adequate clinical hours with their practicum seminar instructor AS SOON AS IT APPEARS TO BE A PROBLEM. Please do not wait until the end of the semester to discuss these problems with your practicum seminar instructor or the director of clinical training. The sooner the problem is recognized, the sooner it can be addressed.

**Time2Track Tutorial**

**Set Up Your Training or Work Experience**

In Time2Track, a “practicum” refers to training or work experiences like practicums, field placements, externships, internships, or other type of work experience.

1. Click “Practicums” under the gear icon
2. Select your Level
3. Select the appropriate Course, Training Site, and Term
4. Indicate your preferred Supervisor – this will be used as your default (you can always change it later)
5. Click “Save”
6. If you are training at multiple sites, go ahead and add separate Practicums for those.

Keep in mind that the Argosy University adds the options you see for Course, Training Site, Supervisor, and Term. If you do not see the option you need, contact the Clinical Training Director and they can add it for you.

**Log Your Experiences**

Now you are ready to start logging your clinical training and work experiences in Time2Track. In Time2Track, clinical and work experiences are called Activities. An
Activity contains details about your experience, including clients and assessments. To add an activity to Time2Track, you just need to fill the details of what you did. Some of the fields will be “remembered” by Time2Track the next time you add an activity to make things even faster. You can always change those fields if needed.

**Add an Activity**

1. Go to the Activities tab, then click “Add an Activity”
2. Enter the details of your activity.
   **You will see additional fields for Practicum and Supervisor. Your supervisor will default to the preferred supervisor you chose when you added your practicum, but you can change it for individual activities if needed.
3. Add your Client. A client can be an individual person or a group of people like a couple, family, or group. You can add members of a couple, family, or group to Time2Track as Individuals, then group them together appropriately. Check out the Clients tab for more advanced client management options.
4. Enter hours in decimal format. For example, 15 minutes is .25, 30 minutes is .5, and 45 minutes is .75.
5. Add any assessments you administered during this activity. You can start typing to search our database of assessments, or continue typing to add your own.
6. Click “Add Activity” or “Add and Enter Another”

**Submit Activities for Online Approval**

Now that you have logged some activities, you can submit them to your supervisor for approval online whenever you are ready. Each Approval Request is similar to a timesheet or hour log. You can submit these as often as you like, but the hours for each month must be submitted by the 10th of the following month.

**Submit Activities for Approval**

1. Click the Approvals tab, then “Submit Hours for Approval”
2. Choose the supervisor you would like to send the approval to, and narrow down the date range if needed.
3. Select the activities you would like to include, and then click “Submit Selected Activities for Approval”
4. Your Supervisor will receive an email alerting them of your pending approval request. They can then log into their Time2Track account, review your request, and choose to approve or reject it.
5. You can resubmit rejected activities by changing the appropriate ones, then following steps 1-4 above to submit a new approval request. If you need to change an activity after it has been submitted or approved, that activity will be removed from the previous approval request and its status will be changed to “Unsubmitted”. You will need to resubmit it as part of a separate approval request.

**Track Your Progress with Reports**

Time2Track offers several different reports to help you track your progress during your training and on the path to licensure. The Activity Summary report gives you a quick snapshot of where you are, including helpful charts and graphs. The Demographic Summary report gives you a summary of the different client populations you have worked with. You can also print any of Time2Track’s reports for your records or to get physical signatures from your supervisor and/or training director.
Picking Appropriate Activities

The APPIC Application for Psychology Internships (AAPI) states that it is your responsibility to choose which activity type best describes your experience. Since APPIC does not provide definitions for their activity types, here are some guidelines. This decision is ultimately up to you and your training director or supervisor.

Categories

- Assessment: Administering psychological tests or assessments.
- Direct: Activities involving direct face-to-face contact with a client.
- Indirect: Activities involving indirect, or non-face-to-face, contact with a client.
- Intervention: Activities involving direct face-to-face contact with a client.
- Relational: Activities involving interpersonal relationships (e.g. couples or families).
- Supervision: Individual or group supervision meetings with a professional or peer.
- Support: Activities involving indirect, or non-face-to-face, contact with a client.

Activity Types

- Assessment Report Writing: Writing reports on administered assessments.
- Career Counseling: Providing direction or guidance on career opportunities.
- Case Management: A collaborative process of assessment, care planning, facilitation, and advocacy for options and services to meet an individual’s mental health needs.
- Case Conferences: Bring together key parties to set goals and strategies.
- Chart Review: Reviewing patient or client charts.
- Client Consultation: Interview to assess the client, their needs, treatment goals.
- Clinical Writing / Progress Notes: Writing treatment progress notes, or other clinical writing.
- Co-Therapy: Psychotherapy conducted with more than one therapist present.
- College Prep / Guidance: Assisting students with college preparation activities.
- Coordinate Community Resources: Assisting a client in locating and/or securing community resources.
- Couples Therapy: Helping couples resolve conflicts and improve relationships.
- Crisis Intervention: Emergency psychological care assisting individuals in a crisis-situation.
- Family Therapy: Involves a whole family, or several family members, all meeting with a therapist together.
- Grand Rounds: Presenting the medical problems and treatment of a particular patient to an audience.
- Group Counseling: Involves one or more therapists working with several people at the same time.
- Individual Therapy: Working one-on-one with a client.
- Intake Interview: The first appointment with a therapist, in which the therapist asks questions to understand the client’s situation and presenting problem.
- Structured Interview: An interview with a client in which all questions are presented in the same order to ensure that answers can be reliably compared between individuals or groups.
- Medical/Health Related: Medical or health related psychological interventions.
- Milieu Therapy: Form of therapy where patients are part of a therapeutic community.
• Neuropsychological Assessment: An assessment of how a client’s brain structurally functions.
• Observation: Observing other trained individuals perform therapeutic activities.
• Organizational Consultation / Performance Improvement: Consult with an organization in order to improve performance and well-being of its employees.
• Outcome Assessment of Programs or Projects: Assessing the outcome of any programs or projects.
• Phone Session: Psychotherapy conducted over the phone.
• Professional Consultation: Consulting with another professional regarding a case.
• Program Development / Outreach Programming: Create and offer programs or outreach activities designed for the education and prevention of psychological concerns.
• Providing Feedback to Clients / Patients: Giving feedback on psychological and neurological assessments to clients.
• Psychodiagnostic Test Administration: Using oral, written, or projective methods as a diagnostic procedure.
• Psychoeducational Group / Workshop: Group that focuses on educating clients about their disorders and ways of coping.
• Psychological Assessment Scoring / Interpretation: Scoring and/or interpreting psychological assessments.
• School (Direct Intervention): A direct intervention in a school setting.
• School (Other): Other activities in a school setting.
• School Consultation: Interview to assess the client, their needs, and goals for treatment in a school setting.
• Seminars / Didactic Training: Any training involving seminars or lectures.
• Sport Psychology / Performance Enhancement: Therapy that helps athletes or other performers with performance enhancement.
• Substance Abuse Intervention: Process involved in confronting an addict about the impact of his or her negative habit.
• Supervision of Other Students: Supervising other students.
• Systems Intervention / Organizational Consultation / Performance Improvement
• Systems Intervention: Eliminate system limitations by prioritizing needs, specify outcomes, and design an intervention program.
• Treatment Planning with Client: Planning a course of treatment with a client.
• Video-Audio-Digital Recording Review: Reviewing video or audio recordings.

Late Paperwork Policy
Timely submission of paperwork to Clinical Training is a requirement and professional responsibility during your practicum year. If paperwork (i.e., Monthly Practicum Logs, Supervisor Evaluation of Student, Student Evaluation of Practicum Site, Training Plan, Practicum Training Agreement forms, etc.) is submitted late, students will be issued a notice of late submission in writing and be expected to turn in the requested document no later than 7 days from the date of the late warning. If a student receives more than 2 written warnings in an academic year, s/he will be referred to the Student Professional Development Committee for remediation of unprofessional behaviors. If the student fails to submit the required paperwork within 7 days of the warning,
this will result in an immediate referral to Student Professional Development Committee. Warnings will only be waived due to critical circumstances for which the student must provide written documentation. Please note that written warning will be included in the student records and may result in negative consequences such as compromising eligibility for practicum/internship.

Submission of Training Documents for Practicum Credit
In order to receive Credit for Practicum, all ORIGINAL signed forms (Copies of the electronic Monthly Practicum Logs noting that the student is making satisfactory progress towards the minimum number of hours; A completed Supervisor Evaluation of Competence and A Site Evaluation completed by the student) must be received by the Clinical Training Department within two weeks of the semester deadline. If not, a grade of INCOMPLETE will be assigned. If documentation is not received by the end of the following semester, the incomplete will be changed to a NO CREDIT grade (which is a failing grade), and the student will not obtain credit for that semester for practicum (practicum hours accrued will not count towards training requirements). These initiatives follow ASPP policies and procedures as outlined in the Academic Catalog.

Students on Academic Probation
If a first-year student is placed on academic probation because of poor Fall Semester grades (i.e., GPA < 3.0 out of 4.0), after they have applied to, been placed in, or been accepted to a practicum, they must notify the Clinical Training Committee. If, however, the student then raises her/his GPA to an acceptable level the next semester, she/he may be allowed to begin practicum upon the discretion of the Clinical Training Committee and permission of the Director of Clinical Training.

If a student who already accepted a practicum for the next academic year is placed on probation after Spring Semester grades are issued, s/he may not begin the upcoming practicum unless her/his GPA rises to an acceptable level after Summer Semester I. Permission to begin or continue with practicum remains at the discretion of the Director of Clinical Training. The Clinical Training Department has the authority to prohibit any student from applying for or beginning a practicum due to academic problems or clinical unsuitability.

Procedures for Reporting Problematic Training Sites
It is the student’s responsibility to first attempt to rectify any deficiencies directly with the site in consultation with his/her seminar leader, and then to contact the Faculty Practicum Seminar Instructor and then the ASPP Clinical Training Department if his/her practicum requirements are not being met.

Although some concerns can be resolved informally, documentation for the Clinical Training Department is required. For example, a student may arrange a special meeting with a supervisor to discuss the importance of meeting her/his training requirements as outlined by the school if deficiencies are occurring (e.g., low on supervision hours, direct services hours, etc.). So long as such informal interventions ameliorate the problems identified, no further action other than documentation is necessary. These instances warrant written communication or contact between the student and the Clinical Training Department.

When significant problems arise (i.e., those that cannot be remedied through informal means), more intensive interventions become necessary. Examples of these situations might include: The site does not provide opportunities for the student to meet her/his training requirements as outlined in the Practicum Training Agreement, or a site supervisor acts in an unprofessional or unethical manner that directly affects the student. When these situations occur, the following procedures should be followed in order to provide due process and a fair assessment of the problem or concern raised about an ASPP-affiliated training site:
1. The student should schedule a meeting with his/her Practicum Seminar Instructor to discuss the concerns and generate ideas about how to address them with the site directly.

2. If step one does not result in a remedy of the situation, and the student’s Faculty Practicum Seminar Instructor recommends that the student contact the Clinical Training Department, the student should contact the Director of Clinical Training in order to discuss her or his concerns.

3. At this juncture, a student does not need to notify his/her site that the Clinical Training Department has been notified. This initial meeting is for information gathering and advisement. The student is required to continue to fulfill her or his responsibilities to the site as outlined in the Practicum Training Agreement throughout the process of notifying the school of her/his difficulties unless the Director of Clinical Training instructs the student to cease practicum duties due to ethical or legal concerns.

4. If after the above-stated meeting takes place, a student chooses to put her/his concerns about a site’s ability to meet the training requirements (as agreed upon in the Practicum Training Agreement) or about mistreatment by the site’s training representatives into a formal written complaint and submit the complaint, the Clinical Training Department will begin to intervene on the student’s behalf. Documentation of the steps a student has taken in order to informally resolve the difficulty should be outlined, as well as the attempts at resolution suggested by the student’s seminar leader and/or academic advisor.

5. The Clinical Training Committee will appoint a Training Department representative to contact the training site with any questions or concerns about the concerns raised by the student. The Training Department representative will contact the student prior to contacting the site in order to inform him/her of the Committee’s decision to do so.

6. The Training Committee will make a decision about how to proceed based on all of the information presented. The disposition may include: Dissolution of the practicum, development of a remediation plan for the site and/or student depending upon the circumstances and information presented, or development of an action plan to address the concerns and to work toward a successful completion of the training experience with the current site.

**CLINICAL TRAINING COMMITTEE**

The mission of the Arizona School of Professional Psychology at Argosy University – Phoenix’s Clinical Training Committee (CTC) is to create and maintain quality clinical training experiences for its students in order to make them competitive in the internship process, with the ultimate goal of meeting requirements for certification and licensure.

The CTC, with the help of faculty and staff, 1) create and monitor training sites in the community, 2) help train supervisors, 3) monitor the evaluation of students and sites, 4) assist faculty to integrate coursework with clinical training through colloquia, practicum seminar and comprehensive examinations, 5) match students to the best possible training sites in order to meet their training needs, 6) assist doctoral students to obtain the best possible internship sites, 7) assist students in on-going training such as post-doctoral fellowships and other alumni needs, 8) help maintain training and exam manuals and rubrics, 9) help maintain documentation necessary to retain
A primary function of the CTC is to support the development of professional competencies by remediating student issues specific to professional and program requirements. The CTC holds meetings with students referred to improve their performance at practicum placements and competency evaluations, and recommends supportive remediation plans as warranted. If remediation actions are not satisfied by the student, the CTC may impose consequences including not being placed on practicum, removal from practicum, or referral to the Student Professional Development Committee or the Student Conduct Committee. Please refer to the Clinical Training Manual, the Academic Catalog for the Ethical Code of Conduct, and Practicum Policies and Procedures for additional information on remediation procedures.

**Monitoring Professional Competence and Conduct**

All students are expected to conduct themselves with professional decorum consistent with ethical and legal standards. Faculty monitor and evaluate student development in clinical and professional competence through student participation in practicum seminar, conduct at practicum sites, and performance on comprehensive exams. Students are evaluated on the following competency areas:

- **Interpersonal and professional competence including, but not limited to:**
  - Respectful peer, faculty, supervisor interactions; respect for the ideas and integrity of others; maturity in interactions with others; ability to interact respectfully with people of diverse backgrounds; ability to react with appropriate empathy and sensitivity; openness to process of supervision; resolution of problems that interfere with professional development (i.e., interpersonal, emotional, behavioral, psychological).
  - Sample behaviors that could result in referral to the committee include, but are not limited to, inability to control anger, use of insulting or profane words, use of intimidating tactics, inability to tolerate cultural or lifestyle differences, dishonest or unethical behavior, failure to meet deadlines, inability to control stress, psychological dysfunction, or emotional reactions.
- **Skill acquisition and clinical performance including but not limited to:**
  - Demonstration of knowledge of relevant concepts; ability to apply relevant concepts to clinical work, ability to self-reflect, ability to integrate and apply faculty and supervisory feedback, ability to maintain appropriate boundaries.
  - Sample behaviors that could result in referral to the committee include, but are not limited to, deficient or underdeveloped knowledge of relevant concepts, ineffective/harmful application of concepts, overt hostile reactions to supervision, refusal or inability to adjust behaviors from clearly communicated feedback, lack of awareness or inability to manage own limitations/responsibilities.

**Committee Membership**

The CTC is comprised of the Director of Clinical Training, the Associate Director of Clinical Training, and three members from clinical faculty. A faculty member may be added at the discretion of the Director of Clinical Training. The Faculty members are selected by the Director of Training before the start of the new practica year. Students who are referred to the committee may have present their advisor and/or practicum seminar leader. In the event that a member of the committee has made the referral or has other potential conflicts of interest, that member will be excused and another will be recruited by the director as temporary replacement.
Procedures

Students experiencing difficulty meeting acceptable standards of training on a practicum deserve an intervention proportionate to the problem(s) in question. The student, a seminar leader, a site supervisor, the Clinical Training Department, or anyone else connected to or involved in the student’s training may raise such concerns and should submit a formal letter of referral to the Director of Clinical Training. The letter should include specific descriptions of behaviors that raise concerns about clinical competence and/or professional conduct and subsequent attempts at remediation by faculty, students, and/or site supervisor. The primary goals of any intervention should be clarification of the problem and resolution through appropriate remediation.

Although some concerns may be resolved informally, documentation for Clinical Training Department records is necessary. For example, a seminar leader may request a re-submit of a case analysis to better present the contained ideas. So long as such informal interventions ameliorate the problem(s) identified, no further action is necessary other than written notification to the Clinical Training Department.

When significant problems arise (i.e., those that cannot be remedied through informal means), more intensive interventions become necessary. The following procedure will be followed after receipt of formal referral letter:

1. The student will be notified in writing of the requirement to meet with the committee, the date and time, and reasons for referral.

2. The Committee will communicate with the student’s academic advisor and/or seminar leader in order to obtain feedback about the student’s academic and clinical history in the program. (The student’s advisor and seminar instructor are invited to attend the meeting to provide input, but are not required to do so.)

3. During the meeting with the Committee, the student will present relevant concerns and respond to the concerns of the committee. The committee requests a presentation from the student to ensure consideration of all pertinent information. The Committee will deliberate and either render a decision at that time or may take additional time to collect collateral information before the decision is rendered. Remediation planning and/or referral to the appropriate committee (e.g. Student Professional Development Committee or Student Conduct Committee) will be made depending on the nature of the concerns. NOTE: Committee meetings are not taped. Meetings are not legal proceedings nor should students bring legal representation.

4. If remediation planning is decided, the student should complete and submit a remediation plan, in collaboration with their practicum seminar instructor and/or program advisor, to the committee that targets the areas of deficiency and outlines steps that the student needs to take in order to achieve the goals of the remediation. It is recommended that faculty members collaborate with the student who is assigned the remediation in devising the plan. Student to complete a remediation plan prior to assigning a “Credit” grade for the semester.

5. The student submits the remediation plan to the committee for review and final approval. If the committee has any questions or concerns about the remediation plan, this will be discussed with the student with the goal of developing an aCOMP2ptable remediation plan.

6. The remediation plan, once approved, serves as a written learning contract between all involved parties to specify the target deficits and the actions required to remedy the problems, timeframe in which the remediation is to occur and to be re-evaluated, and to outline the consequences if the student is unable to
fulfill the terms of the remediation plan. The student will be on “Remediation Status” at this point, and will not receive credit for the practicum experience until he or she meets the terms of the remediation plan and is removed from this status by the Clinical Training Committee.

7. If it is mutually decided that the student has successfully met the terms of the remediation plan, s/he will be removed from “Remediation Status” and will be eligible to receive a “Credit” grade for practicum when all training forms and documents are submitted for that semester.

8. If the Clinical Training Committee requests a supplemental practicum or internship, the Clinical Training Department will assist the student in finding appropriate placement and oversee her/his progress. If fundamental clinical deficits exist, the student may be required to complete certain pre-practicum or internship requirements before enrolling in another school-approved training experience as outlined in the remediation plan.

9. If the Clinical Training Committee has serious concerns about the competency(ies) of a seminar student, and a remediation plan does not seem sufficient to address the deficiencies, the student should be referred to the Student Professional Development Committee or the Student Conduct Committee (in writing with a clear explanation of the concerns) depending on the nature of the concerns.

10. If a question about a student’s clinical unsuitability is raised, the Clinical Training Committee conducts a comprehensive review of the circumstances according to established institutional policies. All involved parties must respect the student’s rights to a thorough and objective review and to self-representation of the facts in question. Details and correspondence about concerns pertaining to a student’s suspected emotional and or behavioral difficulty are kept in a confidential file in the Director of Clinical Training’s office until a final determination is made.

11. If the Clinical Training Committee recommends disciplinary action (e.g., due to egregious and unprofessional behavior on practicum), it must forward this proposal (accompanied with all supporting documentation and justifying rationales) to the Student Conduct Committee for review.

12. If the remediation takes longer than the semester in which it is developed, the faculty member will assign a grade of “Incomplete In Progress.” An “Incomplete In Progress” grade should be assigned only when the faculty member has expectations that the problems or concerns raised about the student’s competency in a particular domain(s) have the potential to be resolved within a specified time frame. An “Incomplete In Progress” contract must be completed specifying dates that the remediation plan must be turned in. The student must complete the remediation plan no later the end of the following semester in order to change the “Incomplete In Progress” to a “Credit” grade.

13. A No Credit, or “NC”, grade is the equivalent of a failing grade. This option should be utilized after a remediation plan has been attempted and failed. The student will be required to retake practicum and practicum seminar.

14. The student may also receive a “NC” if he/she does not fulfill the requirements of the seminar as outlined by the course syllabus (e.g. attendance, not presenting if scheduled to present, etc.). Any student receiving a “NC” grade will be automatically referred to the Clinical Training Committee to review her/his training requirements and will be required to re-take Practicum and Seminar.
15. If a student is terminated from a practicum site, either by the site or the Clinical Training Department, s/he will meet with the Committee for a formal review of the circumstances. The Committee will then render a decision on receiving credit for practicum, a “NC” for practicum and will be required to re-take Practicum and Seminar.

Due Process or Bias Appeals
Students who believe they have been treated in a biased fashion or denied due process in an action of the Clinical Training Committee regarding a decision on remediation issues, may file an appeal with the Clinical Department Associate Dean. Appeals must be made within 14 days of the action being appealed. The appeal must clearly state, in writing, the reasons for the appeal. Please refer to the Argosy University Academic Catalog, section 7: Academic Policies and Procedures.

CLINICAL COMPETENCY (ACE/COMP1/COMP2): PSYD PROGRAM

General Information
The Assessment Competency Exam (ACE), Initial Assessment (COMP1), and Therapy Evaluation (COMP2) are a series of clinical competency evaluations requiring each student to present a case summary and analysis, including a written work sample. These evaluations take place at designated intervals in the three years prior to becoming eligible for the predoctoral internship. The purpose of the ACE/COMP1/COMP2 is to monitor students’ growth and development toward ASPP’s standard of clinical competency to ensure acquisition of appropriate skills for clinical practice.

The competencies draw upon students’ conceptual abilities, theoretical knowledge, and applied clinical skills. Success requires the integration of theory and practice as learned in coursework, clinical field training, professional supervision, and seminar consultation. While components of the competencies occur within required courses and seminars, they are graded separately. Thus, successful completion of other required course and seminar work does not guarantee passage of competency exam tasks.

Throughout the course of practicum seminar, students are required to complete, submit, and present practice competency exams as a preparation for the actual examination. The exact number of practice examinations is determined by the Faculty Practicum Seminar Instructor.

During the practicum year, students must pass their COMP1/COMP2 on their first attempt or through successful revisions as coordinated by their Faculty Practicum Seminar Instructor. All re-submits must be completed before time required in the respective COMP1/COMP2 manuals. Passage of the COMP1/COMP2 is required to progress in the program and to receive credit.

Competency Exam Components and Procedures
The doctoral competency exams and their requirements are as follows:

Assessment Competency Exam (ACE): Students meet this component by passing the Integrative Assessment (PP7375) final examination with a grade of ‘B-’ or better. The Assessment competency requires each student to integrate cognitive, projective, and objective personality test data with psychosocial, behavioral, historical, and medical/clinical information into a written, useful, and comprehensive psychological evaluation. The student must demonstrate an understanding of professional practice standards and ethics in assessment, an understanding and expertise in diversity issues that impact the evaluation process, an ability to develop strategy for identification of client issues through interpretation of test protocols of individuals, demonstrate skills in the
administration and interpretation of psychological tests, and develop report writing skills that are consistent with APA and professional practice standards.

Initial Assessment Competency (COMP1): The COMP1 requires each student to present a case assessment summary and analysis, with a work sample. The COMP1 is taken during the Spring session of the students’ first practicum year. The purpose of the COMP1 is to demonstrate competence in the evaluation of patient problems and diagnosis with particular emphasis on conducting a diagnostic interview. Students must submit their COMP1 to the Clinical Training Department by the date specified in the Clinical Training Calendar. Due to A.R.S. 32-3211, in lieu of students turning in informed consent forms with client signatures, supervisors acknowledge that the appropriate process has taken place by signing a Supervisor Attestation Form and the student turning this form in to the Clinical Training Department during the first semester of Practicum, before any taping has taken place. All tapes are returned to the student at the completion of the comprehensive exam process, and supervisors can direct each student to: 1) return tapes to the site, 2) destroy tapes, or 3) properly store them.

To submit the COMP1, students must be in good academic standing and enrolled in the first year Practicum (PP8201, PP8202) sequence. Students must achieve a passing grade on their COMP1 in addition to fulfilling seminar requirements and Clinical Training Department requirements (e.g. all forms turned in) in order to be eligible for their second year of practicum.

Therapy Competency Evaluation (COMP2): The COMP2 requires each student to present a case intervention summary and analysis, with a work sample. The COMP2 is taken during the Summer semester of the student’s second year. The purpose of the COMP2 is to demonstrate competence in clinical skills, with particular emphasis on intervention skills. Students must pass the COMP2 in order to be eligible for internship. Students meet this requirement by submitting two copies of a psychotherapy recording conducted with a client, a verbatim transcript, an integrated case analysis report, which includes a diagnostic formulation, conceptual formulation, treatment plan, treatment summary and assessment of treatment outcomes, consideration of evidenced based practice, an analysis of diversity and ethical/legal considerations, and a self-critique to the Clinical Training Department by the date specified in the Clinical Training Calendar. Due to A.R.S. 32-3211, in lieu of students turning in informed consent forms with client signatures, supervisors acknowledge that the appropriate process has taken place by signing a Supervisor Attestation Form and the student turning this form in to the Clinical Training Department during the first semester of Practicum, before any taping has taken place. All tapes are returned to the student at the completion of the comprehensive exam process and supervisors can direct each student to: 1) return tapes to the site, 2) destroy tapes, or 3) properly store them.

To submit the COMP2, students must be in good academic standing and be enrolled in the second year Practicum (PP8203, PP8204) sequence. Students must achieve a passing grade on their COMP2 in addition to fulfilling seminar requirements and Training Department requirements (i.e., all forms turned in) in order to be eligible for internship. Students planning on applying for internship must achieve a passing grade on the COMP2 (including all revisions, if applicable).

Students are required to review the COMP1/COMP2 Manuals for complete details to prepare for and submit the COMP1/COMP2. Additional information will also be provided in the manuals including guidelines for the writing document, grading, procedure checklists, and appeal procedures.
Exam Audio and Video Recordings

Students must provide a clearly audible audio- or video-recording using the encrypted flash drive provided by the program. Students are responsible for maintaining the security of the devices while in their possession. Flash drives are not to be shared with any other person.

- If lost or damaged, the student is responsible for replacing the flash drive.
- Students must ensure that no Personal Identifying Information (PII) is on the recording (e.g., full name, telephone number) and, even if video is being used, that the patient’s face is not recorded unless necessary for the class.
- Each flash drive will have a unique password. Students are not to share passwords or change passwords.
- Flash drives are to be used for comprehensive exams, exam approximations, or case presentations in practicum seminars. **No other practicum or class materials should be stored on the flash drive.**
- All recordings on the encrypted drives must be turned into the Clinical Training Department confidential box with their comprehensive examination and will be erased and re-formatted after completion of the comprehensive examinations by the department.

Noncompliance with flash drive policy will result in a referral to the Student Professional Development Committee for remediation of professional conduct.

Policy for Taking Comprehensive Examinations in a Language other than English
(Approved by Clinical faculty 11-14-06)

ASPP strongly encourages bilingual/bicultural clinical training. Taking a comprehensive exam in another language is one way to demonstrate clinical bilingual/bicultural competence, and ASPP actively supports this endeavor. The bilingual/bicultural abilities of students and site supervisors vary greatly as does the availability of appropriate clients. Therefore, a student must declare a desire to take a comprehensive exam in another language as early as possible (by midterm of fall semester of the practicum year) so that case-by-case arrangements can be made. It is important that a student describe the extent of their bilingual ability and their bicultural experience on the Training Needs and Interest Form as they sign up for practicum, so they may be placed in the most appropriate practicum site available. If they are considering taking an exam in another language, they may declare their intentions at that time.

All clinical work of students must be competently supervised. If students have questions about the supervision of their clinical work in another language, they should contact the Clinical Training Committee (CTC). Appropriately trained and certified secondary supervisors who are bilingual can supervise practicum students with the permission of the student’s primary supervisor. On occasion, ASPP faculty may be available to supervise a practicum client with the permission of the site supervisor.

The most frequent request to date has been for examinations in Spanish; however, ASPP is committed to helping students demonstrate clinical competence in any language, if at all possible. ASPP defines “taking a clinical exam in another language” to mean the clinical work sample (intake for COMP1 or course of treatment for COMP2) will be done in a language other than English. The transcript then will be submitted in a language other than English, and, in addition, the student will translate and submit the transcript into English. The document itself will be in English entirely. This requires more work for the student, but can also demonstrate advanced bilingual ability.
Two components need to be met for the bilingual/bicultural comprehensive examination to take place. The reader(s) of the exam must have: 1) sufficient familiarity with exam procedures and grading and 2) sufficient bicultural/bilingual competence. If the student is in the Psy.D. program, it is expected that one exam be entirely in English unless there are extenuating circumstances on practicum. Although the translation of a clinical session into English requires advanced understanding of English, ASPP is promoting the demonstration of bilingual competence, and therefore recommends that clinical work and evaluation take place in English. It is also useful to have one work sample (a common use for the comprehensive exams) in English. Exceptions may be made by the CTC on a case-by-case basis.

In a situation where the exam is taken in a language other than English, a special team may be put in place to grade the exam. An ASPP core faculty member, with experience in the examination procedures, must either be a reader of the examination or must consult on the examination process and grading. If an ASPP core faculty member cannot be found with sufficient bilingual/bicultural ability in the language the student needs to complete the exam, non-ASPP faculty who are appropriately licensed or certified professionals may serve as readers, interpreters or consultants for the exam.

For the COMP1 exam:
1. If ASPP has a core faculty member who has the bilingual/bicultural competence sufficient to evaluate clinical work, s/he can be reader of the exam. This person can be reader of the COMP1, even if they are not the student’s practicum seminar instructor, with approval of the CTC and the student’s practicum seminar instructor. In the event that there is not a core faculty member serving as reader, a core faculty must volunteer to serve as a consultant for the exam process. If no core faculty can be found to serve as COMP1 reader:
   2. An adjunct faculty or faculty from other ASPP programs (i.e. education or school psychology) may serve as reader.
   3. Clinical training faculty (practicum supervisor) with the appropriate bilingual/bicultural competence may serve as reader. The practicum supervisor does not need to be a licensed psychologist or the student’s primary supervisor: Any appropriately licensed or certified behavioral health professional is acceptable if they have the bilingual/bicultural clinical competence necessary. The CTC will need to discuss certain issues if the person is the student’s practicum supervisor (i.e. how much help a student got on the case) before the exam, preferably early in the academic year.
4. If no core faculty, adjunct faculty or clinical faculty member is available, an appropriately licensed or certified community professional can be identified as an exam reader.
5. If no core faculty, adjunct faculty, or clinical faculty member is available, the CTC may allow the use of interpreters to assist faculty with the clinical tape. Interpreters would need to be deemed as appropriate by the CTC (i.e. certified as interpreters and not related in any way to the student or client), and this would be at the student’s expense.

For COMP2 primary readers:
If ASPP has a core faculty member who has the bilingual/bicultural competence sufficient to evaluate clinical work, s/he can serve as primary reader of the exam. This person can be reader of the COMP2, even if they are not the student’s practicum seminar instructor, with approval of the CTC and the student’s practicum seminar instructor. In the case of the COMP2, this faculty member can serve as reader of the COMP2, even if s/he was the reader of the COMP1, if three evaluators are appointed as readers (to preserve the concept of multiple
evaluators for comprehensive exams). It is recommended that the faculty member serving as primary reader, have experience as a reader of COMP2s before entering this process. If no core faculty can be found to serve as primary reader, the CTC may appoint another appropriate person to serve as an exam reader. In this case, a core faculty must volunteer to serve as a consultant for the exam process.

For COMP2 secondary readers:
Secondary readers do not have to be ASPP core faculty. They can be:

1. Adjunct faculty or faculty from other ASPP programs (i.e. education or school psychology).
2. The supervising clinical adjunct (practicum supervisor) or another clinical adjunct (secondary supervisor) also may be appointed as an exam reader, if they wish to do so. The practicum supervisor does not need to be a licensed psychologist or the student’s primary supervisor: Any appropriately licensed or certified mental health professional is acceptable if s/he has the bilingual/bicultural clinical competence necessary. The CTC will need to discuss certain issues if the person is the student’s practicum supervisor (i.e. how much help a student got on the case) before the exam, preferably early in the academic year.
3. Appropriately licensed and/or certified behavioral health professionals from the community who volunteer are also acceptable as exam readers.
4. If no core, adjunct, clinical faculty or appropriate licensed or certified community professionals can be identified as an exam reader, the CTC may allow the use of interpreters for oral exams and to assist faculty with the clinical tape. Interpreters would need to be deemed as appropriate by the CTC (i.e. certified as interpreters and not related in any way to the student or client), and this would be at the student’s expense.

Students cannot serve as interpreters for exams.

Note to Faculty: For an exam completed in another language, in addition to the regular grading rubric, a letter from the exam reader/committee, discussing the student’s bilingual/bicultural ability, bilingual/bicultural clinical skills, and other issues not addressed in the traditional grading documentation should accompany the traditional grading documents in the student’s file.

Note to Students: If a comprehensive examination is failed, the retake must be in English unless otherwise approved by the CTC.

Pre-Doctoral Internship: Psy.D. Program

General Information
All doctoral students are required to complete a year-long, full-time (or two-year, part-time) pre-doctoral internship as a condition for graduation from the Arizona School of Professional Psychology at Argosy University, Phoenix. Doctoral candidates typically complete 2000 hours of internship training, during which they engage in activities similar to those of clinical psychologists and remain under close supervision of qualified professionals. This intensive and supervised contact with clients is essential for providing greater breadth and depth to students’ overall academic experience. The pre-doctoral internship represents the final training experience for students to integrate theory, refine skills, and solidify professional attitudes before entering the field at the doctoral level. Generally, students begin internship during their fifth year of graduate training. The internship placement must be approved by the Clinical Training Committee at AU, Phoenix. The internship must be completed by the end of the seventh year after entrance into the Psy.D. in Clinical Psychology Program.
Internship Prerequisites

Students complete their internship no earlier than their fourth year and no later than their seventh year of the Psy.D. program.

To declare intent to apply for internship, students must meet the following eligibility criteria:

- Be in good standing (e.g., not on probation)
- Maintain a GPA = 3.0 or higher
- Successfully pass the COMP1.
- Be registered for Practicum IV or have successfully completed the COMP2.
- Have endorsement from academic advisor and have academic plan towards completion of the coursework signed by the academic advisor

If eligible, submit a completed Eligibility to Apply for Internship Form (provided by the Clinical Training Department) and Intent to Apply for Internship Form to the Director of Internship Training by April 14 of the year preceding the start of internship.

Site Procedures

Internship sites must meet acceptable standards of training, based on the following criteria:

APPIC Membership: Unlike the APA, the Association of Psychology Postdoctoral and Internship Centers is not an accrediting agency; rather, it is a membership organization that organizes, facilitates access to, and establishes standards of training for training sites in professional psychology. Sites that belong to APPIC may or may not be APA-approved. APPIC sites participate in a systematic computer matching process offered once a year to connect internship applicants and participating sites in an optimal manner. For more information about APPIC internship requirements, visit the APPIC web page at www.appic.org. To download the APPIC internship application (AAPI), visit http://www.appic.org/match/5_3_match_application.html. To view APPIC’s online directory of internship sites, visit http://www.appic.org/directory/4_1_directory_online.asp.

APA Accreditation: Sites that meet the training standards of the American Psychological Association automatically meet the Clinical Training Committee’s internship requirements. The Clinical Training Committee strongly encourages students to obtain an APA-accredited internship. For more information about APA’s internship requirements, visit their web site at www.apa.org. The current link to their online APA-approved internship directory can be found at www.apa.org/ed/accreditation/.

Previous Employment: Students may not apply to sites at which they have been employed in any capacity. However, students may apply to sites at which they have served as practicum students.

All students must complete an APPIC-member internship or they may complete their internship at a site that does not have APPIC membership only if that site meets or exceeds APPIC’s internship requirements. For example, internship approval may be granted for new sites that clearly document and subsequently deliver quality training that meets or exceeds APPIC guidelines if the site is in the process of becoming an APPIC member.
Internship Remediation

If, at any point during the internship training year, it is determined that an intern requires remediation, the Director of Internship Training will work closely with the Internship Director of Training and the intern to facilitate satisfactory completion of internship requirements. The Clinical Training Department makes the ultimate determination if internship requirements have been sufficiently met at the completion of the training year. If the Clinical Training Department recommends that a student engage in post-internship remedial work, it will generate a written contract specifying the area(s) requiring additional attention, as well as the methods by which such goals will be achieved. This document may be prepared in consultation with the student, the internship site, the Clinical Training Committee, and the Student Conduct Committee. As in all disciplinary actions, students have the right to self-representation as described in the academic catalog.
Receipt of Clinical Training Manual
(2018-2019 Academic Year)

I received a Clinical Training Manual, and I understand that it is my responsibility to read and follow the procedures accordingly.

______________________________  ______________________________ _______________
Practicum Student’s Name   Signature    Date

______________________________  ______________________________ _______________
Practicum Seminar Instructor’s Name  Signature    Date
Verification of Continuing Education Activity
(2018-2019 Academic Year)

Title of Continuing Education Activity: ___________________________________________________________

Presenter: _____________________________________________________________________________________

Description of Activity: ___________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________

________________________________________________________________________________________________

Number of Hours: _____________

________________________________________________________________________________________________

Organization Representative   Signature    Date

________________________________________________________________________________________________

Practicum Student’s Name   Signature    Date

________________________________________________________________________________________________

Practicum Seminar Instructor’s Name  Signature    Date
Continuing Education Activities*

There are numerous learning experiences which will count towards the Continuing Education requirements in the ASPP program. These activities will be advertised in the student newsletter on a monthly basis. In addition, the following are a list of activities/organizations that student are encouraged to participate. Note: The list is not exhaustive. Please talk with your seminar leader and/or advisor for other options.

Argosy Diversity Forum (weekly attendance is encouraged, however will satisfy no more than one hour of required total hours)

Argosy Research Forum (attendance to all scheduled meetings encouraged, however will satisfy no more than one hour of required total hours)

Arizona Board of Psychologist Examiners board meeting

Practicum Colloquia (attendance to all scheduled meetings encouraged, however will satisfy no more than one hour of required total hours)

Psychology conferences and workshops

Continuing education classes/workshops/conferences

Psychological Association meetings

APAGS Meetings

*Continuing education activities in general MUST be IN-PERSON events. If however there are online training courses or modules recommended by your practicum site or seminar instructor, these will be considered for credit. Single or multi-day conferences can also count towards obtaining CE credit but must be approved by the DCT. For a single or multi-day conference, it will count for not more than 3 hours of the 6 CE hours required per year.
Practicum Training Site: ___________________________ Start (MM/DD/YY) ________ End ________

Practicum Level:  □ MACL  □ PsyD I/II  □ PsyD III/IV  □ PsyD ADV

Estimated Training Schedule (*See Supervisor Instructions):

Hours per week/days: ______________________________________  □ Half-time  □ Full-time

Total hours for the experience: ____________________________

Percent of time devoted to:

- Psychotherapy: ________________________________________
- Psychometric assessment: ______________________________
- Documentation/report writing: ____________________________
- Didactic training (e.g. seminars, in-services, directed reading): _________
- Consultation: _________________________________________
- Other: ______________________________________ % ______
- Other: ______________________________________ % ______

Supervision (*See Supervisor Instructions):

Primary Supervisor & Degree: _____________________________ AZ Lic #: ____________
Secondary Supervisor & Degree: ___________________________ AZ Lic#: ____________
Other Supervisors & Degree: ______________________________ AZ Lic#: ____________

Supervision Schedule: __________________________________________

Methods of Supervision:  □ Live Observation  □ Audio/Videotape  □ Documentation Review
- Other: ____________________________  □ Other: ____________________________
Training Goals

1. ______________________________________________________________________________________
   Objective 1: __________________________________________________________________________
   Objective 2: __________________________________________________________________________

2. ______________________________________________________________________________________
   Objective 1: __________________________________________________________________________
   Objective 2: __________________________________________________________________________

3. ______________________________________________________________________________________
   Objective 1: __________________________________________________________________________
   Objective 2: __________________________________________________________________________

4. Ethics & Professional Practice:
   Objective 1: __________________________________________________________________________
   Objective 2: __________________________________________________________________________

5. Diversity & Multicultural Competence
   Objective 1: __________________________________________________________________________
   Objective 2: __________________________________________________________________________

6. Evidence Based Practices/Outcome Measurement
   Objective 1: __________________________________________________________________________
   Objective 2: __________________________________________________________________________

__________________________________________________  ____________
Student Signature / Printed Name      Date:

__________________________________________________  ____________
Practicum Seminar Instructor Signature / Printed Name      Date:

__________________________________________________  ____________
Primary Supervisor Printed / Signature Name      Date:

__________________________________________________  ____________
Director of Clinical Training Printed / Signature      Date:
Student Instructions and Recommendations:
You are responsible for filling out your training goals in conjunction with your site supervisor and your practicum seminar instructor. This training plan needs to be completed in its entirety, leaving NO blank spaces. It must be signed by you, your site supervisor, your practicum seminar instructor and the program representative and returned to the clinical department by the end of the first week in October.

There are several issues and requirements to keep in mind during your field training experiences. They are:
1. The requirements of your program,
2. What may help you become competitive in the Association of Post-doctoral and Internship Centers (APPIC) internship match process, and
3. Licensing requirements.

Your school requirements can be found in your institution’s program documents. Students must successfully complete all program requirements.

Frequently asked questions about the APPIC internship match process can be found at the appic.org website. Faculty advising is mandatory in preparing for the internship process.

For Clinical PsyD students who will be applying for licensure, license requirements vary considerably by state, and change periodically. As of 2009, Arizona allows licensure at graduation if several specific requirements have been met. Your institution will document your field training experiences (e.g. training hours). Your program cannot guarantee that you will obtain an internship or that every state’s requirements will be met (even licensure in Arizona may require additional hours after internship). Careful documentation of your training experiences is highly recommended to prepare for the internship match and for licensure.

In addition, for Clinical PsyD students, many states require a post-doctoral fellowship. You can check with the Board of Examiners in the states you plan to practice to identify their current licensing requirements. The American Psychological Association recommends that students complete a post-doctoral fellowship, and if you plan to practice in a specialty area you may find it highly useful for employment.

The goal of your institution, and your training site, is to help you obtain the best possible training. The goal of field training is for students to become competent clinicians. Some field training experiences may not meet a certain requirement, for a variety of reasons, but may provide a good training experience.

Supervisor Instructions

Purpose: The training plan is to assure the quality, breadth, and depth of the training experience. It provides a rationale for the experience in light of the student’s previous training experiences. The training plan also ensures that the overall practicum experience is organized, sequential, and meets the training needs of the trainee, and competent services are provided to the community.

Time Allotment: 50% of all training activities are in “service-related” activities (e.g. therapy, assessment, interviews, documentation, case presentations, consultations, seminars on applied issues). 25% of all time is devoted to face-to-face patient/client contact (e.g. therapy, assessment).

Supervision: 10% overall time is in individual supervision: At least one hour per week of regularly scheduled, contemporaneous, face-to-face individual supervision per ten hours of experience that addresses the direct psychological services provided by the student is provided. For Clinical PsyD students, 75% of all supervision is provided by a licensed psychologist (the remainder can be provided by other appropriately licensed or credentialed mental health professionals or pre-doctoral interns or post-doctoral fellows supervising under supervision).

Method of Student Evaluation: Students are evaluated twice per practicum year (the first evaluation is due by mid December and the second is due to the Director of Clinical Training by the end of June). Students are responsible with providing you a copy of their evaluation to complete. Please review each evaluation with the student. Students will also evaluate the site and supervision twice per practicum training year.
Due to A.R.S. 32-3211 (Arizona Medical Records Law Change September 2006), Argosy University cannot store anything that could be considered client records. Therefore, in lieu of asking students to turn in informed consent forms with client signatures, as part of their comprehensive exam process, it is necessary for supervisors to ensure that the appropriate informed consent process takes place.

Comprehensive exams are one means of assessing student competence. Argosy University psychology programs follow the practitioner/scholar model which emphasizes the integration of actual clinical practice with foundation knowledge. We gratefully acknowledge that this cannot happen without collaboration with our practicum supervisors.

The policy requires that supervisors ensure that the appropriate informed consent process occurs with all clients seen by students, allowing students to use actual client material for educational purposes. All tapes will be returned to the student at the completion of the comprehensive exam process. Supervisors can direct each student to: 1) return tapes to the site, 2) destroy tapes, or 3) properly store them.

I _____________________________, supervisor at __________________________________________,

Name of Practicum Supervisor                                  Name of Practicum Site

Acknowledge that I have reviewed the informed consent process.

______________________________  ______________________________ _______________
Practicum Student’s Name   Signature    Date

______________________________  ______________________________ _______________
Practicum Supervisor’s Name   Signature    Date

______________________________  ______________________________ _______________
Practicum Seminar Instructor’s Name  Signature    Date
Informed Consent

Your therapist or consultant is a student at the Arizona School of Professional Psychology at Argosy University Phoenix. She or he is being evaluated on her or his clinical skills. It is very helpful for graduate students to discuss actual learning situations with their faculty and supervisors so that they can improve their clinical skills. Students will discuss information you share with his or her faculty and supervisors for educational purposes. Educational purposes may include clinical instruction, therapy supervision, consultation, student skill assessment, model assessment procedures, or program accreditation. You, or your family, benefit from the clinical experience of different faculty and supervisors. We appreciate that you are assisting our student to develop her or his psychological helping skills.

I, ____________________________________________, understand that the information which I, or my child, may share with my therapist or consultant is considered private health information and may be used for educational purposes. Any written or oral reports will use disguised information so that you, or your family members, could not be personally identified. Any clinical information, psychological test results, or other personal information will be kept completely confidential. In Arizona, the only exceptions to client confidentiality are disclosures of child maltreatment, elder abuse, imminent danger to oneself, or imminent danger to others.

The confidentiality of audio recordings, video recordings, test materials/data and written reports of clinical or consultation activities will be maintained according to the Health Insurance Portability and Accountability Act (HIPAA), Family Educational Rights and Privacy Act (FERPA), state, and ethical mandates when transported between the agency/facility and the educational institution. Testing materials or computer software may be used to complete psychological testing conducted by the student. The student therapist or consultant may employ a professional medical transcriptionist, trained in the standards of medical confidentiality and compliant with HIPAA, to transcribe the audio or video recordings. At the completion of educational/training experience, audio recordings and video recordings, test materials, test data and written reports of clinical or consultation activities will be handled by the supervisor in one of the following ways: 1) returned to the site, 2) destroyed, 3) properly stored. Clinical records or other information cannot be shared outside of the educational setting without your explicit written consent. You may withdraw your consent at any time.

I voluntarily consent to having sessions audio recorded or video recorded for the purposes of education, supervision, or training. Psychological tests and reports may also be reviewed for training purposes. It does not include psychological research, which would require separate consent procedures. _____________ (initials)

If you have any questions or concerns about these informed consent procedures, or about the therapeutic or consultative services that you are receiving, please contact your student trainee’s clinical supervisor. Again, you may withdraw your consent at any time.

________________________________________  _______________
Printed Name of Client or Parental Guardian    Date

________________________________________  _______________
Signature of Client or Parental Guardian    Date
CONSENTIMIENTO INFORMADO

Su terapeuta o consultor/a es un/a estudiante de la Arizona School of Professional Psychology, Argosy University, Phoenix. Él o ella será evaluado/a en sus habilidades clínicas. Es muy útil para los estudiantes de posgrado hablar sobre situaciones reales de aprendizaje con sus profesores y supervisores para que puedan mejorar sus habilidades clínicas. Los estudiantes hablarán de la información que usted comparte con sus profesores y supervisores con fines educativos. Los propósitos educativos pueden incluir instrucción clínica, supervisión de terapia, consulta, evaluación de habilidades del estudiante/de la estudiante, procedimientos de evaluación del modelo, o acreditación del programa. Usted o su familia se benefician de la experiencia clínica de diferentes profesores y supervisores. Agradecemos que ayude a nuestro/a estudiante a desarrollar sus habilidades de ayuda psicológica.

Yo, ____________________________________________, entiendo que la información que yo o mi hijo/a compartiremos con mi terapeuta o consultor/a se considera información de salud privada y se puede utilizar con fines educativos. Cualquier informe escrito u oral utilizará información disfrazada para que usted o los miembros de su familia no puedan ser identificados personalmente. Cualquier información clínica, resultados de pruebas psicológicas u otra información personal se mantendrá completamente confidencial. En Arizona, las únicas excepciones a la confidencialidad del/de la cliente son las divulgaciones de maltrato infantil, maltrato a personas mayores, peligro inminente para uno mismo o peligro inminente para otros.

La confidencialidad de grabaciones de audio, grabaciones de video, materiales / datos de prueba e informes escritos de actividades clínicas, o de consulta se mantendrán de acuerdo con la Ley de Portabilidad y Responsabilidad de Seguros Médicos (HIPAA), la Ley de Privacidad y Derechos Educativos de la Familia (FERPA), y mandatos éticos cuando se transporta entre la agencia / instalación y la institución educativa. Se pueden usar materiales de prueba o software para completar las pruebas psicológicas realizadas por el/la estudiante. El/la terapeuta o consultor/a estudiantil puede emplear un/a transcriptora médico/a profesional, entrenado/a en los estándares de confidencialidad médica y que cumpla con HIPAA, para transcribir las grabaciones de audio o video. Al completar la experiencia educativa / de capacitación, el/la supervisor/a manejará las grabaciones de audio y video, los materiales de prueba, los datos de prueba y los informes escritos de las actividades clínicas o de consulta de una de las siguientes maneras: 1) regresados al sitio, 2) destruidos, 3) almacenados correctamente. Los registros clínicos u otra información no se pueden compartir fuera del entorno educativo sin su consentimiento explícito por escrito. Puede retirar su consentimiento en cualquier momento.

Autorizo de forma voluntaria que las sesiones se graben en audio o se graben en video con fines de educación, supervisión o capacitación. Los exámenes e informes psicológicos también pueden ser revisados con fines de capacitación. Esto no incluye la investigación psicológica, que requeriría procedimientos de consentimiento por separado. _____________ (iniciales)

Si tiene alguna pregunta o inquietud acerca de estos procedimientos de consentimiento informado, o sobre los servicios terapéuticos o de consulta que está recibiendo, comuníquese con el/la supervisor/a clínico/a de su estudiante aprendiz/a. De nuevo, puede retirar su consentimiento en cualquier momento.

________________________    _____________________
Nombre en letras de imprenta del/de la cliente o del/de la tutor/a    Fecha

________________________    _____________________
Firma del/de la cliente o del/de la tutor/a    Fecha

________________________    _____________________
Nombre en letras de imprenta del estudiante/de la estudiante terapeuta o consultorio/a    Firma del estudiante/de la estudiante
Practicum Application 2019–2020
Arizona School of Professional Psychology
at Argosy University Phoenix

Student Name (PRINT): ____________________________________________________________
Student Email: ___________________________ Phone: ________________________________

I understand that my file will be considered open upon the receipt of my application form. Applicant file must
be complete by **NOVEMBER 30, 2018** in order to be considered for practicum placement. My file will not be
considered complete or ready for review until all materials are received. __________ (initials)

I have read the Clinical Training Manual and agree to adhere to and abide by the policy and procedures
described therein. __________ (initials)

**Which practicum level are you applying for:**  □ Master’s  □ I/II  □ III/IV  □ ADVANCED

I.  Please list any previous experience related to practicum (mental health jobs, related professions, or
previous graduate programs).

____________________________________________________________________________________
____________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

Please list your **TOP 5 choice for practicum placement**: (Note: Clinical Training Department will take into
consideration your interest during the practicum process, however, your preferences are not guaranteed).

1.  _______________________________________________________________________________
2.  _______________________________________________________________________________
3.  _______________________________________________________________________________
4.  _______________________________________________________________________________
5.  _______________________________________________________________________________

If you have had prior practicum experience at ASPP, please list the site(s):
Site: _______________________________________________________________________________
Site: _______________________________________________________________________________
Site: _______________________________________________________________________________

Total Direct hours: ____________  Total Indirect hours: ____________  Total Batteries: ___________

Will you require recording (audio/video) for COMP1 or COMP2?  Yes _________ No _________

Will you be needing special accommodations at your site?  Yes _________ No _________

Have you purchased liability insurance through APA?  Yes _________ No _________
Are there any other factors you wish the Training Committee to consider?
_________________________________________________________________________________________
_________________________________________________________________________________________

The Arizona School of Professional Psychology has training partnerships with various sites that may have specific requirements for placement (i.e. fingerprint clearance, background check, health insurance, etc.).

Do you have health coverage? Yes ________  No ________

Have you ever been convicted of a felony or a misdemeanor other than a minor traffic offense, currently awaiting trial, under indictment, convicted of, pled no contest or guilty to any felony or misdemeanor other than a minor traffic offense or ever entered into a diversion program instead of prosecution, including any convictions that have been expunged, pardoned, or deleted? Yes _____  No _____

(If yes, please include in your explanation that status of resolution and expected resolution date).

Have you been sued in civil court or prosecuted in criminal court pertaining to your work under a certificate or license in another profession, or your work as a member of a particular profession in which you were not certified or licensed, or have current or past formal complaints filed against you (i.e., board, behavioral health job, etc.)? Yes ________  No ________

*Answering any of the above questions in the affirmative will not automatically disqualify you from consideration of practicum placement. However, failure to disclose requested information may lead to non-placement and/or referral to Student Professional Development Committee/Student Conduct Committee as pursuant to Argosy University Ethical Code of Conduct, the standards of professional conduct as defined in Arizona Revised Statute Section 32-2061, et seq., and the American Psychological Association Ethics Code.

International students must meet with the International Student Officer to fill out INS paperwork needed to pursue a practicum in the United States. If you are an international student, have you completed and submitted necessary paperwork to INS? Yes ________  No ________  N/A ________

Notice for Americans with Disabilities: Title II of the Americans with Disabilities Act (ADA) prohibits the Clinical Training Department from discriminating on the basis of disability. Persons with disabilities may request reasonable accommodations by contacting the Director of Training to make their needs known. Requests should be made as soon as possible to allow time to arrange for accommodations.

I attest that the statements contained herein are true in every respect. I have not omitted any information that might affect this application.

_____________________________  _________________________________  ________________
Student Printed Name    Student Signature    Date

_____________________________           _________________________________       _______________
Faculty Advisor Printed Name  Faculty Advisor Signature    Date

_____________________________          _________________________________ _______________
Practicum Seminar Printed Name  Practicum Seminar Signature   Date
Supervision Verification Form

Student Name: ______________________________ Supervisor Name: __________________________

Practicum Site: ______________________________ Start Date: __________ End Date: __________

Total Hours of Face-to-Face Supervision distributed as follows:

______ Total Hours of Individual Supervision by a licensed psychologist

______ Total Hours of Individual Supervision by another licensed mental health professional

______ Total Hours of Group Supervision by a licensed psychologist

______ Total Hours of Group Supervision by another licensed mental health professional

Was at least 50% of the supervised experience spent in psychological service-related activities? Yes No

NOTE: Add together INDIVIDUAL hours and then divide INDIVIDUAL SUPERVISION by a LICENSED PSYCHOLOGIST, and then INDIVIDUAL SUPERVISION by ANOTHER LICENSED MENTAL HEALTH PROFESSIONAL to get the percentages. Do the same for GROUP Supervision using TOTAL GROUP Supervision hours

______ Please indicate the percent of individual supervision provided by a licensed psychologist

______ Please indicate the percent of individual supervision provided by another licensed mental health professional

______ Please indicate the percent of group supervision provided by a licensed psychologist

______ Please indicate the percent of group supervision provided by another licensed mental health professional

______________________________  ______________________________ _______________
Practicum Student’s Name   Signature    Date

______________________________  ______________________________ _______________
Practicum Supervisor’s Name   Signature    Date

______________________________  ______________________________ _______________
Practicum Seminar Instructor’s Name  Signature    Date
Psychodiagnostic Battery Verification Form

Student Name: ____________________________  Supervisor: ________________________________

Training Site: _____________________________________________________________________________

The following signatures serve to verify the Practicum student's completion of the psychodiagnostic testing requirements at the following practicum site. This form must be turned in to the Clinical Training Department upon completion of the practicum.

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Your training files are confidential. Only authorized faculty, staff and the student themselves have access to them. Please provide an honest appraisal of your practicum experience.

Printed Name of Student: ___________________________ Date: __________________________
Name of Practicum Site: ___________________________ Supervisor: ______________________

Semester: □ FALL □ SPRING Practicum Type: □ MACL □ PsyD I/II □ PsyD III/IV □ ADV

Please rate the Training Environment using the following anchors:

<table>
<thead>
<tr>
<th>Question</th>
<th>RATING (1 – 4)</th>
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<tbody>
<tr>
<td>1. Degree of professional respect you received at your practicum site:</td>
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<tr>
<td>Comments:</td>
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<td>2. Quality and availability of personal work space and equipment:</td>
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<td>Comments:</td>
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<td>3. Quality and availability of clients for diagnostic and intervention services:</td>
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<td>Comments:</td>
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<td>4. Availability of psychological testing materials:</td>
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<td>Comments:</td>
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<td>5. Opportunity to audiotape, or videotape, diagnostic and intervention sessions:</td>
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<td>Comments:</td>
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<td>6. Availability of diverse clients:</td>
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<td>Comments:</td>
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<td>7. Opportunity to apply Evidence Based Practices:</td>
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<td>Comments:</td>
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<td>8. Opportunity to evaluate treatment outcomes:</td>
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**Please rate your Training Supervisor(s) using the following scale:**

<table>
<thead>
<tr>
<th>RATING (1 – 4)</th>
<th>1=Inadequate</th>
<th>2=Adequate</th>
<th>3=Good</th>
<th>4=Superior</th>
<th>N/A</th>
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### Question 1.
Please rate the quality of your supervision in the following areas:

**Interviewing:**
- Client Dynamics
- Case Formulation
- Psychotherapy
- Psychological Testing
- Professional Identity
- Tape Review

### Question 2.
Rate your supervisor’s ability to provide clear and consistent expectations:

**Comments:**

### Question 3.
Rate the approachability of your supervisor:

**Comments:**

### Question 4.
Rate the frequency of supervision:

**Comments:**

### Question 5.
Rate the quality of supervision on diversity issues:

**Comments:**

### Question 6.
Rate your overall supervision experience:

**Comments:**

### Question 7.
Overall rating of practicum site:

**Comments:**

---

What did you like **MOST** about your training experience? __________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

What did you like the **LEAST** about your training experience? ____________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

---

**Student Name Printed / Signature**

**Date**
Arizona School of Professional Psychology  
Supervisor Evaluation of Student Competence  
Revised September 2018

Printed Student Name: ______________________________  Evaluation (circle):  MIDTERM  FINAL

Primary Supervisor: ________________________________  Practicum Site: _______________________________

Date of Direct Observation (Please complete attached form): ____________________

Practicum Type:  _____ MACL  _____ Practicum I/II  _____ Practicum III/IV  _____ ADV Practicum

Please rate the student’s developmental level of competence using the following anchors:

1 = Not adequate: Limited knowledge of domain features & understanding of how to analyze problems; limited knowledge of intervention skills, and the processes and techniques of implementing them. Limited ability to recognize patterns, does not differentiate well between important and unimportant details, does not have cognitive maps of how a client may move from where s/he is to better functioning.

2 = Developing: Able to recognize some important recurring domain features and to select appropriate strategies to address issues. Surface level analyses of problems, and generalization of diagnostic and intervention skills to new situations and clients is limited. Support is needed to guide performance.

3 = Sufficient: The student possesses a deeper, more integrated knowledge of the domain in question and is more fluent in her/his ability to recognize important domain features and to select appropriate strategies to address issues. Can recognize overall patterns, possible diagnoses, treatment processes, and outcomes for given cases. Plans are based on a more integrated knowledge base and identification of domain features are clearer and more influential in guiding action. The student demonstrates the ability to cope with and manage many contingencies of clinical work.

4 = Proficient: The student perceives situations as wholes rather than in terms of chopped up parts or aspects, and s/he perceives meanings in terms of long-term goals. The student learns from experience what typical events to expect in a given situation and how plans need to be modified in response to these events. The students can recognize when the expected normal picture does not materialize and takes up steps to address these situations (including seeking supervision, researching literature). This holistic understanding improves the student’s decision making; it becomes less labored because s/he now has the perspective to determine the relative importance of the many existing attributes and aspects in the present situation.

N/A = Not Applicable: Not enough information to evaluate.
COMMUNICATION AND INTERPERSONAL SKILLS - Develop individual and group interpersonal skills to improve and foster participation and interaction critical for achieving individual, group and diverse community goals. Able to demonstrate verbal and non-verbal congruency and ability to demonstrate engagement

INTERPERSONAL

Ability to take a respectful, helpful professional approach to patients/clients/families ................................................. 1  2  3  4  N/A
Ability to form a working alliance ........................................... 1  2  3  4  N/A
Ability to understand and maintain appropriate professional boundaries .......................................................... 1  2  3  4  N/A
Ability to provide helpful feedback to peers & receive such nondefensively from peers .............................................. 1  2  3  4  N/A
Ability to support others and their work and to gain support for one’s own work and be part of the team participating fully .................................................. 1  2  3  4  N/A

AFFECTIVE

Ability to acknowledge own role in difficult interactions .......................................................... 1  2  3  4  N/A
Ability to deal with conflict, negotiate differences ......................................................................... 1  2  3  4  N/A
Demonstrates understanding of diverse viewpoints and seeks clarification in challenging interactions ........................................ 1  2  3  4  N/A
Initiates discussion regarding disagreements with colleagues ......................................................... 1  2  3  4  N/A
Manages difficult communication effectively ..................................................................................... 1  2  3  4  N/A
Allows, enables and facilitates the patient’s exploration and expression of affectively difficult issues ......................................................... 1  2  3  4  N/A
Tolerates patient’s feelings, attitudes and wishes particularly as they are expressed toward the therapist so as to maintain and/or promote therapeutic dialogue .......................................................... 1  2  3  4  N/A
Affect does not overwhelm clinical judgment ..................................................................................... 1  2  3  4  N/A
Works flexibly with patient’s intense affects which could destabilize the therapeutic relationship ............................................. 1  2  3  4  N/A
Maintains affective equilibrium and focus on therapeutic tasks in face of client distress .................................................... 1  2  3  4  N/A

EXPRESSION

Demonstrates descriptive, understandable command of language .................................................................................. 1  2  3  4  N/A
Demonstrates interpersonal skills verbally and non-verbally ........................................................................ 1  2  3  4  N/A
Demonstrates descriptive, understandable command of written communication ............................................. 1  2  3  4  N/A

WITH SUPERVISORS - ABILITY TO MAKE EFFECTIVE USE OF SUPERVISION:

Ability to work collaboratively and engage effectively with supervisor(s) ......................................................... 1  2  3  4  N/A
Ability to prepare for supervision and presents work for feedback ......................................................... 1  2  3  4  N/A
Ability/willingness to aCOMP2pt and implement supervisory input non-defensively, including direction; ability to follow through on recommendations; ability to negotiate needs for autonomy from and dependency on supervisors ......................................................... 1  2  3  4  N/A
<table>
<thead>
<tr>
<th>Tolerates ambiguity and uncertainty</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initiates discussion with supervisor of own reactions to clients in session</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Ability to self-reflect &amp; self-evaluate regarding clinical skills &amp; use of supervision, including using good judgment as to when supervisory input is necessary</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Seeks supervision in areas with limited experience to improve performance</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Integrates feedback into performance</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
</tbody>
</table>

WITH SUPPORT STAFF:
| Ability to be respectful of support staff roles and persons | 1 | 2 | 3 | 4 | N/A |

WITH THE PRACTICUM SITE ITSELF:
| Ability to understand and observe agency’s and team’s operating procedures | 1 | 2 | 3 | 4 | N/A |
| Follows policies and procedures of institution | 1 | 2 | 3 | 4 | N/A |
| Ability to participate in furthering the work and mission of the practicum site | 1 | 2 | 3 | 4 | N/A |
| Ability to contribute in ways that enrich the site as a practicum for future students | 1 | 2 | 3 | 4 | N/A |

**RESEARCH** - Demonstrates understanding and respect for research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan.

**SCIENTIFIC MINDEDNESS**
| Values and applies scientific methods to professional practice | 1 | 2 | 3 | 4 | N/A |
| Implements appropriate methodology to address research questions | 1 | 2 | 3 | 4 | N/A |

**SCIENTIFIC FOUNDATION OF PSYCHOLOGY**
| Demonstrates understanding of intersections across core areas of psychological science | 1 | 2 | 3 | 4 | N/A |
| Critically evaluates scientific literature regarding clinical issues | 1 | 2 | 3 | 4 | N/A |

**SCIENTIFIC FOUNDATION OF PROFESSIONAL PRACTICE**
| Understanding and knowledge of evidence base practice in psychology (EBPP) | 1 | 2 | 3 | 4 | N/A |
| Describes how outcomes are measured in practice activities | 1 | 2 | 3 | 4 | N/A |
| Uses resources to promote effective practice (e.g., published information, input from colleagues, technological resources) | 1 | 2 | 3 | 4 | N/A |

**SCIENTIFIC APPROACH TO KNOWLEDGE GENERATION**
| Engages in systematic efforts to increase knowledge base of psychology through reviewing and implementing research | 1 | 2 | 3 | 4 | N/A |

**APPLICATION OF SCIENTIFIC METHOD TO PRACTICE**
| Development of skills & habits in seeking theoretical & research knowledge relevant to practice of psychology in the clinical setting | 1 | 2 | 3 | 4 | N/A |
| Development of skills & habits in applying theoretical & research | 1 | 2 | 3 | 4 | N/A |
knowledge relevant to practice of psychology in the clinical setting 1 2 3 4 N/A
Applies EBPP concepts in case conceptualization, treatment planning and interventions in consultation with supervisor 1 2 3 4 N/A
Evaluates effectiveness of professional services 1 2 3 4 N/A
Uses findings from outcome evaluation to alter intervention strategies 1 2 3 4 N/A

ASSESSMENT COMPETENCIES - Able to assess and diagnose problems, capabilities and issues associated with diverse individuals, groups and/or organization. Able to demonstrate conceptualization of problems considering the context and other relevant factors.

KNOWLEDGE OF MEASUREMENT AND PSYCHOMETRICS
Knowledge of psychometric issues and bases of assessment methods

Ability to select assessment measures with knowledge of psychometric issues/test construction and with attention to issues of reliability and validity

Ability to implement multiple methods and means of evaluation in ways that are responsive to and respectful of diverse individuals, couples, families and groups

Demonstrates awareness of the strengths and limitations of both traditional assessment measures and technological advances as reflected in assessment reports

Demonstrates awareness and competent use of culturally sensitive instruments and norms

KNOWLEDGE OF ASSESSMENT METHODS
Independently and accurately selects, administers, scores, and interprets assessment tools with clinical populations

Ability to utilize systematic approaches to gathering data to inform clinical decision-making

Interview and report leads to the formulation of a diagnosis and development of an appropriate treatment plan

APPLICATION OF ASSESSMENT METHODS
Collects accurate and relevant data from structured and semi-structured interviews and mini-mental status exams

Capacity for effective use of supervision to implement and enhance assessment skills

Overall ability to conduct psychological assessment

DIAGNOSIS
Ability to understand the strengths & limitations of current diagnostic approaches

Knowledge and ability to integrate assessment data from different sources for diagnostic purposes

Selects appropriate assessment measures to assist in answering diagnostic questions

Ability to formulate & apply diagnoses

Applies concepts of normal/abnormal behavior to case formulation and diagnosis in the context of stages of human development and diversity issues

Treatment plans incorporate relevant developmental features, cultural variables and clinical symptoms as applied to
clinical problems ........................................................................................................ 1 2 3 4 N/A

CONCEPTUALIZATION AND RECOMMENDATIONS
Accurately assesses presenting issues taking into account
the larger life context including diversity issues ........................................................................................................ 1 2 3 4 N/A

COMMUNICATION OF ASSESSMENT FINDINGS
Provides meaningful, understandable, and useful feedback
that is responsive to client needs .......................................................................................................................... 1 2 3 4 N/A
Writes an effective comprehensive report ........................................................................................................... 1 2 3 4 N/A
Effectively communicates assessment results
verbally to clients ........................................................................................................................................... 1 2 3 4 N/A

INTERVENTION COMPETENCIES - Able to plan, implement and evaluate interventions designed to alleviate suffering and to promote health and well-being of diverse individuals, groups and organizations. Able to demonstrate conceptualization of problems considering the context and other relevant factors

KNOWLEDGE OF INTERVENTIONS
Knowledge regarding psychotherapy theory, research and practice ........................................................................................................ 1 2 3 4 N/A
Knowledge of the concept of evidenced-based practice methods & relationships ........................................................................................................ 1 2 3 4 N/A
Knowledge regarding specific evidenced-based treatment methods & activities ........................................................................................................ 1 2 3 4 N/A
Independently selects interventions appropriate for the presenting issue ........................................................................................................... 1 2 3 4 N/A
Applies evidenced-based treatment to specific populations ........................................................................................................... 1 2 3 4 N/A

INTERVENTION, CASE FORMULATION & TREATMENT PLANNING
Ability to formulate and conceptualize cases ........................................................................................................... 1 2 3 4 N/A
Ability to plan treatments ........................................................................................................................................ 1 2 3 4 N/A
Writes case conceptualization reports and collaborative treatment plans incorporating evidence based practices ........................................................................................................ 1 2 3 4 N/A
Case presentations demonstrate application of EBP ........................................................................................................... 1 2 3 4 N/A

CLINICAL SKILLS
Develops rapport and relationships with a wide variety of clients ........................................................................................................ 1 2 3 4 N/A
Demonstrates helping skills such as empathic listening and framing problems ........................................................................................................ 1 2 3 4 N/A
Demonstrates compassion for others ........................................................................................................................................ 1 2 3 4 N/A
Uses non-verbal communication with clients to convey interest ........................................................................................................... 1 2 3 4 N/A

INTERVENTION IMPLEMENTATION
Links concepts of therapeutic process & change to intervention strategies & tactics ........................................................................................................ 1 2 3 4 N/A
Ability to implement intervention skills covering a wide range of Developmental, preventive and “remedial” interventions, including psychotherapy, psychoeducational interventions, crisis management and psychological/psychiatric emergency situations, depending on the focus and scope of the practicum site ........................................................................................................ 1 2 3 4 N/A
Effective uses of supervision to implement and enhance intervention skills ........................................................................................................ 1 2 3 4 N/A
Overall skill in therapeutic intervention ........................................................................................................................................ 1 2 3 4 N/A
PROGRESS EVALUATION
Critically evaluates and assesses treatment progress and outcomes as well as own performance in treatment role................................................................. 1 2 3 4 N/A

CONSULTATION AND INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS - The ability to provide expert guidance or professional assistance in response to a client’s needs or goals. Able to use interpersonal skills needed to collaborate well with others.

KNOWLEDGE OF THE SHARED AND DISTINCTIVE CONTRIBUTIONS OF OTHER PROFESSIONS
Knowledge of the unique patient care roles of other professionals................................................................. 1 2 3 4 N/A
Understanding the purpose and structure of meetings and how to run them well................................................................. 1 2 3 4 N/A

FUNCTIONING IN MULTIDISCIPLINARY AND INTERDISCIPLINARY CONTEXTS
Implements a systematic approach to data collection in a consultative role................................................................. 1 2 3 4 N/A
Ability to choose appropriate means of assessment to answer referral questions................................................................. 1 2 3 4 N/A
Identifies and implements consultation interventions based on assessment findings................................................................. 1 2 3 4 N/A
Identifies and implements consultation interventions that meet consultee goals................................................................. 1 2 3 4 N/A
Provides verbal feedback of results to consultee and offers appropriate recommendations................................................................. 1 2 3 4 N/A

UNDERSTANDS HOW PARTICIPATION IN INTERDISCIPLINARY COLLABORATION/CONSULTATION ENHANCES OUTCOMES
Understands consultant’s role as an information provider to another professional who will ultimately be the patient care decisions maker................................................................. 1 2 3 4 N/A

RESPECTFUL AND PRODUCTIVE RELATIONSHIPS WITH INDIVIDUALS FROM OTHER PROFESSIONS
Ability to relate effectively to other professionals in accordance with their unique patient care roles................................................................. 1 2 3 4 N/A
Ability to work collegially with fellow professionals................................................................. 1 2 3 4 N/A
Ability to communicate professionally and work collaboratively................................................................. 1 2 3 4 N/A
Capacity for dialoguing with other professionals; avoids use of psychological jargon................................................................. 1 2 3 4 N/A
Maintains satisfactory relationships with allied professionals................................................................. 1 2 3 4 N/A
Ability to support others and their work and to gain support for one’s own work and be part of the team participating fully................................................................. 1 2 3 4 N/A
Initiates discussion regarding disagreements with colleagues................................................................. 1 2 3 4 N/A
Consultative reports are well organized, succinct and provide useful and relevant recommendations to other professionals................................................................. 1 2 3 4 N/A

APPRAISAL OF MANAGEMENT AND LEADERSHIP
Understanding the role of leadership in management suCOMP2ss................................................................. 1 2 3 4 N/A
Understanding the purpose and process of strategic planning................................................................. 1 2 3 4 N/A
Understanding the basics of financial management as it pertains to clinical service delivery................................................................. 1 2 3 4 N/A
Understanding the relationship between roles of supervisor, Recognition of her/his role in creating policy, participation in system change &management................................................................. 1 2 3 4 N/A
Ability to identify leadership, business and management skills................................................................. 1 2 3 4 N/A
<table>
<thead>
<tr>
<th>Ability to self-evaluate her/his skills as a manager and leader</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>N/A</th>
</tr>
</thead>
</table>

**INDIVIDUAL AND CULTURAL DIVERSITY** - Awareness, sensitivity and skills in working professionally with diverse individuals, groups and communities who represent various cultural and personal backgrounds and characteristics defined broadly and consistent with APA policy/guidelines.

**SELF AS SHAPED BY INDIVIDUAL AND CULTURAL DIVERSITY**
Uses knowledge of self in the context of diversity (one’s own beliefs, values, attitudes, stimulus value, & related strengths/limitations) as one operates in the clinical setting with diverse others (i.e., knowledge of self in the diverse world) | 1 | 2 | 3 | 4 | N/A |

**OTHERS AS SHAPED BY INDIVIDUAL AND CULTURAL DIVERSITY AND CONTEXT**
Uses knowledge about the nature and impact of diversity in different clinical situations (e.g., clinical work with specific racial/ethnic populations) to monitor and improve clinical effectiveness | 1 | 2 | 3 | 4 | N/A |

**INTERACTION OF SELF AND OTHERS AS SHAPED BY INDIVIDUAL AND CULTURAL DIVERSITY AND CONTEXT**
Demonstrates knowledge, awareness, and understanding of the way culture and context shape interactions between and among individuals | 1 | 2 | 3 | 4 | N/A |

**APPLICATIONS BASED ON INDIVIDUAL AND CULTURAL CONTEXT**
Articulates and uses alternative and culturally appropriate repertoire of skills and techniques and behaviors | 1 | 2 | 3 | 4 | N/A |
Adapts professional behavior in a manner that is sensitive and appropriate to the needs of diverse others | 1 | 2 | 3 | 4 | N/A |
Uses culturally relevant best practices | 1 | 2 | 3 | 4 | N/A |
Seeks consultation or supervision when uncertain about diversity issues and their impact on interactions with others | 1 | 2 | 3 | 4 | N/A |
Works effectively with diverse others in assessment, treatment and consultation | 1 | 2 | 3 | 4 | N/A |

**ETHICAL AND LEGAL STANDARDS** - Demonstrates application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.

**KNOWLEDGE OF ETHICAL, LEGAL AND PROFESSIONAL STANDARDS AND GUIDELINES**
Knowledge of statutes, rules, regulations and case law relevant to the practice of psychology | 1 | 2 | 3 | 4 | N/A |
Knowledge of typical legal issues, including child and elder abuse reporting, HIPAA, confidentiality and informed consent | 1 | 2 | 3 | 4 | N/A |
Identifies & analyzes ethical & legal issues across a range of professional activities | 1 | 2 | 3 | 4 | N/A |

**AWARENESS AND APPLICATION OF ETHICAL DECISION MAKING**
Uses an ethical decision making model when discussing cases in supervision | 1 | 2 | 3 | 4 | N/A |
Articulates importance of concepts confidentiality, privacy, and informed consent | 1 | 2 | 3 | 4 | N/A |
Articulates potential conflicts in complex ethical and legal issues | 1 | 2 | 3 | 4 | N/A |

**ETHICAL CONDUCT**
Demonstrates adherence to ethical and legal standards in...
professional activities
Recognizes and own moral principles/ethical values related to professional conduct in the clinical setting
Seeks to prevent problems and unprofessional conduct
Actively seeks appropriate information & consultation when faced with ethical issues
Integrates own moral principles and ethical values in discussions with supervisors and peers about ethical issues
Practices appropriate professional assertiveness related to ethical issues (by raising issues when they become apparent to the student)

SUPERVISION COMPETENCIES – Able to guide support and direct the integration of research and clinical expertise in the context of patient factors

EXPECTATIONS AND ROLES
Knowledge of literature on supervision (e.g., models, theories & research)
Demonstrates understanding of supervisor and supervisee role in relation to client
Demonstrates understanding of vicarious liability of the supervisor
Knowledge concerning how clinicians develop to be skilled professionals
Knowledge of how supervision responds appropriately to individual & cultural differences

PROCESSES AND PROCEDURES
Presents goals and related tasks of supervisee’s growth and development
Demonstrates ability to monitor and communicate progress goals
Prepares supervision contract
Articulates range of supervision methods available and the utility of such methods

SKILLS DEVELOPMENT
Knowledge of methods & issues related to evaluating professional work, including delivering formative & summative feedback
Demonstrates formation of supervisory relationship, integrating theory and skills, including knowledge of development, educational practice
Elicits evaluation from supervisee about supervisory relationship andUses feedback to improve quality of supervision
Knowledge of limits of her/his supervisory skills

SUPERVISORY PRACTICES
Demonstrates ability to provide constructive feedback to peers
Directs supervisee to literature that may inform case conceptualization
Encourages supervisee to discuss reactions and helps supervisee develop strategies to use reactions in service of clients

PROFESSIONAL VALUES, ATTITUDES AND BEHAVIORS - Adherence to professional values including self-reflection, integrity, professional identity and comportment, accountability and concern for the welfare of others.

PROFESSIONAL VALUES AND ATTITUDES
DEPORTMENT
Recognizes impact of self on others

70
<table>
<thead>
<tr>
<th>Utilizes appropriate language and demeanor in professional communications</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distinguishes between appropriate and inappropriate language and demeanor in professional contexts</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**ACCOUNTABILITY**

<table>
<thead>
<tr>
<th>Organizes her/his day, including time for notes &amp; records, rest &amp; recovery, etc.</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time management</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Timeliness: Completes professional tasks in allotted / appropriate time (e.g., evaluations, notes, reports); arrives promptly at meetings and appointments</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Organizes &amp; presents case material, prepares professional reports for health care providers, agencies, etc.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Completes required case documentation promptly and accurately</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>ACOMP2</td>
<td>pts</td>
<td>responsibility for meeting deadlines</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**CONCERN FOR THE WELFARE OF OTHERS**

<table>
<thead>
<tr>
<th>Displays respect in interpersonal interactions with others, including those from divergent perspectives of backgrounds</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrates compassion for others who are dissimilar from oneself, who express negative affect (e.g., hostility) and/or who seek care for proscribed behavior, such as violence, predation, or dangerousness</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**PROFESSIONAL IDENTITY**

<table>
<thead>
<tr>
<th>Awareness of her/his beliefs and values as they relate to and impact professional practice and activity</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social intelligence; ability to interact collaboratively &amp; respectfully with colleagues</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**REFLECTIVE PRACTICE**

<table>
<thead>
<tr>
<th>Awareness of personal identity (e.g., relative to individual and cultural differences)</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to describe how others experience him/her</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Demonstrates awareness of the impact behavior has on client, public and profession</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**SELF-ASSESSMENT**

<table>
<thead>
<tr>
<th>Self-awareness, understanding, and reflection</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-assessment of competencies is congruent with assessment by peers and supervisors</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Anticipates, and self identifies disruptions in functioning and intervenes at an early stage with support from supervisors</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Identifies personal distress, particularly as it relates to clinical work</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Recognizes and addresses own problems, minimizing interference with competent professional functioning</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Ability to self-reflect &amp; self-evaluate regarding clinical skills &amp; use of supervision, including using good judgment as to when supervisory input is necessary</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Willingness to acknowledge and correct errors</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
<tr>
<td>Demonstrates ability to discuss failures and lapses in adherence to professional values with supervisors/faculty as appropriate</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>N/A</td>
</tr>
</tbody>
</table>
Systematically and effectively monitors and adjusts professional performance in action as situation requires.  

| 1 | 2 | 3 | 4 | N/A |

Demonstrates knowledge about practicing within one’s competence.  

| 1 | 2 | 3 | 4 | N/A |

Recognizes when new competencies are required for effective practice.  

| 1 | 2 | 3 | 4 | N/A |

Seeks & uses resources that support healthy functioning when experiencing personal distress.  

| 1 | 2 | 3 | 4 | N/A |

Identifies situations that challenge professional values and seeks faculty/supervisor guidance as needed.  

| 1 | 2 | 3 | 4 | N/A |

Responsively utilizes supervision to enhance reflectivity.  

| 1 | 2 | 3 | 4 | N/A |

SELF-CARE

Takes action recommended by supervisor for self-care to ensure effective training.  

| 1 | 2 | 3 | 4 | N/A |

Any other behavioral observations about the student’s competence?  

_________________________________________________________________________________________________

_________________________________________________________________________________________________

_________________________________________________________________________________________________

Describe skill development focus for ongoing training:  

_________________________________________________________________________________________________

_________________________________________________________________________________________________

_________________________________________________________________________________________________

_________________________________________________________________________________________________

_________________________________________________________________________________________________

Practicum Student’s Name  Signature  Date

Observing Supervisor’s Name  Signature  Date

Practicum Seminar Instructor’s Name  Signature  Date
Live Observation Summary Sheet

The purpose of the Live Observation is to fulfill the practicum requirements recently set forth by the American Psychological Association, that students receive live observation of their clinical work once per evaluation period by their licensed supervisor. This document will be submitted to the Clinical Training Department upon completion, so that our program can further support the development of the student.

Student Name: ______________________________ Observing Supervisor: ______________________________

Observation Date: _______________ Fall (check): __________  Spring (check): __________

Type of Observation (circle one):  In-Person  Videotape  Audio  One-Way Mirror

Observing Supervisor Feedback:
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
____________________________________________________________________________________________

Student Response to Feedback:
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
____________________________________________________________________________________________

______________________________  ______________________________ _______________
Practicum Student’s Name   Signature    Date

______________________________  ______________________________ _______________
Observing Supervisor’s Name   Signature    Date

______________________________  ______________________________ _______________
Practicum Seminar Instructor’s Name  Signature    Date

______________________________  ______________________________ _______________
Director of Clinical Training’s Name  Signature    Date
NEW APA CoA DIRECT OBSERVATION REQUIREMENT for PRACTICUM

FAQ and Guide

The new APA (CoA) Standards on Accreditation will require that evaluation of practicum students/interns/residents be based in part on direct observation as part of supervision.

- **What are the reasons for this new requirement?** The new direct observation requirement is intended to increase the quality of training, increase public confidence in the training and practice of psychology, and support students in their professional development. Note that other professions are being required to do the same in their training models.

- **What qualifies as direct observation?** There are many ways to meet this supervisor direct observation requirement including: co-therapy in room with student, co-leading group therapy with student, visual observing student in therapy, intake or evaluation, videotaping of student, and/or one-way mirror observation. Direct observation of students must be done at least once per evaluation period (which is usually twice a year).

- **What about other forms of observation of student work?** APA and the CoA continues to support other types of supervision including audiotape, student verbal report of cases, review of written work, case presentations, mock therapy/evaluation with volunteers, and so forth, however, this particular direct observation requirement is not met by these types of observation.

- **When is this new direct observation to be implemented?** Schools have been asked to begin implementing this requirement now but the final date by which it will be formally required is January 1, 2017. Thus, the goal is to get most agencies involved now so that any challenges can be met in a collaborative and professional way as we move forward.
Arizona School of Professional Psychology
Practicum Training Agreement
2018-2019

Practicum Student’s Name: ______________________________________________________

Practicum Site Name: _________________________________________________________

Practicum Level: _____ MACL ______ I/II ______ III/IV ______ Advanced

Placement Duration: _____ 10 month _____ 12 month _____ Half-Time _____ Full-Time

Start Date (MM/DD/YY): _____________  End Date (MM/DD/YY): _____________

Purpose of Agreement and Parties Involved:
This agreement is intended to define the relationship between Arizona School of Professional Psychology at Argosy University, Phoenix Campus, the practicum placement organization, and the graduate student in training. The organization may have supplemental contractual materials that are required for their specific placement and training needs. A separate agreement should be completed for each student.

Responsibility of the Parties:
Nothing in this agreement is intended to circumvent or otherwise limit the usual responsibilities or liabilities of any of the parties. Arizona School of Professional Psychology (ASPP) shall have primary responsibility for the academic education of its students. For example, each graduate student shall be registered for practicum credits under the direction of an identified faculty member. The site supervisor is encouraged to contact the practicum faculty instructor throughout the academic year. All graduate students are insured by ASPP, but are also advised to carry their own liability insurance. The practicum placement organization, or individual, shall have primary responsibility for case management and clinical supervision. The clinical supervisor has the primary authority and responsibility for all services delivered to clients. Students should inform their clients that they are under supervision, and they should explain how to contact their supervisors if concerns should arise. In an emergency, the supervisor shall provide immediate consultation to the student. Supervisors shall provide and maintain comprehensive professional and general liability insurance as detailed in the Affiliation Agreement.

Training Expectations:
Graduate students participate in either Practicum I/II (typically in the second year of doctoral training), III/IV (typically in the third year of training), or Advanced Practicum. Students must complete a minimum of 500 supervised hours (250 hours of direct client contact and 250 hours of indirect client contact) for each year at a site that provides opportunity training and diagnostic interviewing, psychological evaluation and assessment, and therapeutic intervention. The primary emphasis for these training years combines the expansion, integration, and refinement of diagnostic clinical interviewing and the utilization of recognized psychological
test instruments, as well as the acquisition, integration, expansion, and refinement of therapeutic intervention skills. Doctoral students must complete at least ten (5) psychological evaluation batteries (with attendant reports) over the 2 years of Practicum I/II and III/IV. A battery is defined as a culturally sensitive, clinically relevant assessment utilizing psychological tests appropriate to the circumstances of the client.

Students should have adequate workspace, aCOMP2ss to diverse clients, and opportunities to audiotape and videotape service delivery to clients or organizations. At the completion of practica, students should be able to use information from a variety of sources to: (1) provide diagnosis and recommendations supported by specific and relevant data, (2) formulate a case summary that is theoretically consistent and well organized, (3) write a psychological report in a style that can be understood by non-psychologists, (4) utilize their conceptualization of a case to develop, implement, direct, and manage a comprehensive treatment plan, and (5) evaluate the outcome of their interventions.

Duration of Training:
Graduate students typically begin their practicum placement at their start date (usually fall) and continue until the end of the agreement (June-August), dependent on whether the placement is contracted for 10 or 12 months. Students provide services and receive training for a minimum of 500 total hours (a minimum of 250 hours of direct service), which requires working for 16 hours per week for at least ten months. Students are to be on site a minimum of 16 hours per week and a maximum of 20 hours per week. Students are required to complete all practicum work on site. Students are required to complete their ten- or twelve-month commitment, even if they have already finished their minimum number of training hours. Students may take three weeks of vacation (6 days total, assuming practicum occurs over 2 days/week) and still meet the minimum requirements. Vacation must be negotiated with the primary site supervisor. Organizations with varying schedules, such as sports organizations, may require other beginning and ending dates. Organizations may choose to provide twelve-month practicum placements.

Evidence of Progress:
Progress is assessed by a series of clinical competency evaluations requiring each student to present a case summary and analysis, including a written work sample. The purpose of the competencies is to monitor students’ growth and development toward ASPP’s standard of clinical competency to ensure acquisition of appropriate skills for clinical practice. These evaluations take place at designated intervals in the three years prior to becoming eligible for the predoctoral internship. To fulfill the competency requirements, students will need aCOMP2ss to clients for the full assessment process.

Each graduate student on first year practicum (Practicum I/II) prepares a case summary, a written report with confidentiality protected, to presented to the university faculty toward the end of the practicum year. The written report should demonstrate the acquisition of requisite clinical skills and include the following components: an interview (taped), history, assessment, assessment results explained, diversity components, recommendations, ethical decisions review, and confidentiality assurances. The case summary for first year practicum students is referred to as the Clinical Evaluation Competency (COMP1). Second year practicum students (Practicum III/IV) also prepare an in-depth case summary, along with further information on a case intervention/therapy. The second-year in-depth case is referred to as Clinical Competency Evaluation (COMP2).

Student Documentation:
Students are required to complete Monthly Practicum Logs, which are signed by the site supervisor and submitted by the 10th day of each month by the student to the Clinical Training Department. The monthly
Practicum Log describes the allocation of training hours into direct and indirect training service. It is recommended that the student and supervisor retain copies of the monthly practicum logs.

**Practicum Evaluation:**
ASPP faculty will visit each practicum placement at least twice per year. The faculty will evaluate the adequacy of the training and the progress of the students at the organization using accreditation materials. Graduate students will evaluate the adequacy of their training experiences at least twice each year. Site Supervisors will formally evaluate each supervisee’s performance in the practicum once each term. Site Supervisor evaluations should be discussed in depth with supervisees. If students are not making adequate progress in their training, then supervisors should inform the DCT. Students receive separate academic grades of credit or no credit for both the academic Practicum Seminar and the practicum placement.

**Training Stipends:**
Organizations are not expected to provide stipends to graduate students during their practicum placements. It is a privilege for students to receive training from skilled behavioral health professionals. If organizations wish to provide stipends or reimbursements, then stipend payments must be differentiated from professional wages or salaries. Practicum students may not be full-time or part-time employees of their training organizations. Organizations may hire students only after the completion of their practicum training. Doctoral students are expected to receive a stipend during their predoctoral internship and postdoctoral residency.

**Supervisor Licensure:**
Clinical practicum students require two hours of supervision per week. However, the supervision requirements differ for masters and doctoral-level students. Master’s-level students may be supervised by any licensed behavioral health professional (e.g., Licensed Professional Counselors (LPC), Licensed Independent Social Workers, Psychiatric Nurse Practitioners and School Psychologists). Doctoral level students are required to receive 1.5 hours of supervision with a licensed psychologist per week. One hour of supervision must be individual with a licensed psychologist. The other hour may be in group supervision. No more than .5 hours of supervision can be provided by a licensed allied behavioral health professional per week. All supervisors should provide a current curriculum vita or resume to Argosy University. The organization should promptly inform the Director of Clinical Training regarding any changes in supervisory credentials or personnel.

**Supervisory and Organizational Conflicts:**
If there is a conflict between the supervisor and the supervisee, the ASPP practicum faculty instructor should be contacted. If it is a serious issue, the Director of Clinical Training should also be notified. Every effort will be made to resolve the problem through constructive dialogue. When the disagreement concerns the provision of services to clients of the organization, then the supervisor shall prevail in all professional decisions. Removing a student from a practicum placement is generally the last option. If a student leaves or changes a practicum placement without the approval of the Director of Clinical Training, then remediation or dismissal may be necessitated. The Clinical Training Manual outlines the step by step process for student grievances.

**Remediation and Dismissal:**
ASPP Clinical Training Department, in consultation with the practicum placement organization, may determine that a student has not satisfactorily completed the practicum training experience. Unethical or unprofessional behaviors, impaired performance, and inadequate documentation are examples of grounds for remediation or dismissal from practicum. The Clinical Training Manual describes the procedures for remediation, dismissal, and appeals.
Termination of the Agreement:
Argosy students are expected to arrive on time for practicum site duties, dressed appropriately, and prepared for assignments. Students are expected to review cases with their supervisor and inform her/him of any difficulties or potential problems. Students are expected to follow policies and procedures of the practicum organization and to follow ethical and legal codes.

A student may be terminated from a practicum placement if s/he is not in good academic standing, is under remediation or disciplinary action, or has been dismissed from the school. If a student is terminated from placement, ASPP will make every effort to protect the welfare of the organization’s clients who are affected. If practicum students cannot obtain adequate supervision, hours at the site, obtain appropriate cases for practicum trainee, or complete comprehensive exam requirements, changes to the practicum days, hours, or site may be made.

Exchange of Information:

I _______________________________ hereby agree that personally identifiable information about me, including but not limited to my academic and professional qualifications, performance and character, in whatever form maintained, may be provided by my academic program to any practicum training site to which I have applied and/or will match. I further agree that, following any practicum match, similar information may be provided by the practicum site to my graduate program. I understand that such exchange of information shall be limited to my graduate program and my practicum site and such information may not be provided to other parties without consent. This authorization, which may be revoked at any time, supersedes any prior authorization involving the same subject matter.

Acknowledgements:
• I agree to act in accordance with the Ethical Principles of Psychologists and Standards for Providers of Psychological Services of the American Psychological Association.
• I have been advised to purchase professional liability insurance.
• I have received a copy of and read the Clinical Training Manual.
• Any changes to this agreement must be approved by all parties involved.

__________________________        _________________________     _______________
Practicum Student’s Name                      Signature                                    Date

__________________________        _________________________     _______________
Primary Supervisor Name                       Signature                                      Date

__________________________ __________________________     ________________
Director of Clinical Training  Signature                                       Date
Requests for Reasonable Accommodation in Field Placements
(Internship, Practicum, Externship)

INTRODUCTION

Argosy Education Group, Inc. d/b/a Arizona School of Professional Psychology, Argosy University Phoenix (“School”) supports students with disabilities and encourages their full participation in all academic programs, including field placements of all kinds. “Field Placement” for the purpose of this document include any practicum, field experience, clinical practice, internship, training, clinic or work experiences (or similar) conducted for academic credit. In accordance with Title III of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act, the Disability Services Coordinator/Officer is the designated school administrator who works with students with disabilities to provide reasonable accommodation so they may enjoy the same benefits, experiences, and opportunities as persons without disabilities.

As in all academic programs at the School, programs that provide Field Placements must assess students on the basis of their abilities rather than on their status as individuals with disabilities. Students with disabilities who are assigned to Field Placements must be able to perform the “essential functions” or meet the essential eligibility requirements of the experiences with or without reasonable accommodation. Pre-placement inquiries as to whether a person has a disability are not permitted; however, a Field Placement program must determine the essential functions or essential eligibility requirements of its training program so that students can request reasonable accommodation if needed.

SITE SELECTION

The selection of a Field Placement site is a key factor in providing an optimal environment for academic and professional development. It is important to choose a filed site with an environment that maximizes the strengths of each student with a disability and can provide reasonable accommodation. Students, in collaboration with appropriate staff (e.g., Director of Training, Program Chair, etc.), and the Disability Services Coordinator/Officer, are responsible for identifying the most critical factor(s) in determining an optimal placement. In addition, a reasonable accommodation may include identifying a specific site which meets a student’s accommodation needs, such as accommodations related to mobility, transportation, time of day, etc.

APPLICATION/INTERVIEW PROCESS (if applicable)

If an application or interview process is required prior to acceptance into a field placement, students with disabilities may request accommodations during such process. Should a student need a reasonable accommodation to participate in the application/interview process (for example a sign language interpreter for any required interviews), the student is responsible for making the accommodation request to the Disability Services Coordinator/Officer as soon as reasonably practicable in order for arrangements to be made.

REQUEST FOR ACCOMMODATION IN FIELD PLACEMENTS

Students with disabilities are not required to declare, nor may an institution inquire about, the presence of a disability unless they are seeking reasonable accommodation, as discussed below. In addition, students are not required to inform the Disability Services Coordinator/Officer, Director of Training, Program Chair, or other staff about their disabilities at any time before, during, or after the site selection process.

However, students with disabilities who will be requesting accommodation in Field Placements must be registered with the School’s Disability Services Coordinator/Officer. The Disability Services Coordinator/Officer is responsible for managing an interactive process between the student and the School, including those who are directly involved in administratively facilitating the Field Placement (e.g., Field Placement coordinator, department faculty, or supervisors).
and the field site (persons at the Field Placement site responsible for implementing reasonable accommodations). The process of providing reasonable accommodation should proceed in an individualized and systematic fashion.

STUDENT RESPONSIBILITIES

1. Students should contact the School’s Disability Services Coordinator/Officer as soon as reasonably practicable when scheduled for a course that includes a field placement to discuss any anticipated accommodations.

2. Students with existing classroom accommodations, who wish to have accommodations within their field placement, must request accommodations as stated above. Students with existing classroom accommodations may also decide not to pursue accommodations within their Field Placement. However, neither the student’s grade nor performance in Field Placements can be reversed based on a late declaration of need for accommodation in Field Placements. Students are accommodated from the point in time that reasonable accommodations have been determined by the School and Field Site.

3. Students should fill out an Accommodation Request Form and submit any necessary documentation supporting the need for accommodation in a Field Placement environment. The documentation should include information regarding the student’s functional limitations within a Field Placement environment.

4. Students will attend an intake meeting with the Disability Services Coordinator/Officer, Training Coordinator/Field Placement coordinator, and/or other faculty/staff persons familiar with the Field Placement site to formulate a reasonable accommodation plan for that specific site.

5. Students will attend any additional meetings needed with appropriate Field Placement supervisors, etc. to determine reasonable field work accommodations and to coordinate the facilitation of reasonable accommodations.

6. If a Field Placement site is unable or unwilling to make a requested reasonable accommodation or the student believes their accommodation plan is inadequate, the student should contact the Disability Services Coordinator/Officer immediately, to facilitate discussion about possible resolutions to the issue, the School cannot force a Field Placement location to provide specific accommodations. The Disability Services Coordinator/Officer in conjunction with the Training Coordinator will provide an informal grievance process if necessary.

THE DISABILITY SERVICES COORDINATOR/OFFICER RESPONSIBILITIES

7. After disclosure of the need for Field Placement accommodations and receiving the Accommodation Request Form and appropriate documentation outlining the student’s functional limitations within a Field Placement environment, meet with the student to discuss possible accommodations.

8. Coordinate an intake meeting with the student, the Disability Services Coordinator/Officer, Director of Training, and/or other faculty/staff persons familiar with the Field Placement site to formulate a reasonable accommodation plan for that specific site.

9. Coordinate any additional meetings with appropriate Field Placement supervisors, etc. to coordinate the facilitation of reasonable accommodations.

10. Provide consultation services to the student, Training Coordinator/Field Placement coordinator, site supervisors, and any other faculty/staff during the filed placement when adjustments to the accommodation plan may be required or questions arise concerning what is reasonable accommodation.

11. Provide training to all Field Placement faculty and staff on School’s obligations related to accommodating students with disabilities at Field Placement sites.

SCHOOL FIELD PLACEMENT STAFF AND FACULTY RESPONSIBILITIES

The following statement will appear in syllabi of any course with Field Placements:

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1. School provides accommodations to qualified students with disabilities in Field Placements. The School’s Disability Services Coordinator/Officer assists qualified students with disabilities in acquiring reasonable and appropriate accommodations and in supporting equal access in Field Placements.

2. Students who seek reasonable accommodations should notify the school’s Disability Services Coordinator/Officer of their specific limitations and, if known, their specific requested accommodations for Field Placement. Students will be asked to supply medical documentation of the need for accommodation. Field Placement accommodations are not retroactive. Therefore, students are encouraged to request accommodations as early as feasible to allow for time to gather necessary documentation and engage in interactive discussions with the Field Placement site. If you have a concern or complaint in this regard, please contact the Disability Services Coordinator/Officer immediately. Complaints will be handled in accordance with the School’s Internal Grievance Procedure for Complaints of Discrimination and Harassment located at studentresolution@edmc.edu.

3. Ensure all students that receive accommodations in the classroom are informed they are eligible for reasonable accommodations in their Field Placements and that those accommodations may be very different than approved classroom accommodations and are at the sole discretion of the Field Placement site.

4. Consider the specific needs of the student and the essential functions or essential eligibility requirements of the placement to determine what reasonable accommodation can be made and assist in developing an accommodation plan in consultation with the student and Field Placement site.

5. Provide the details of reasonable accommodation only to those who need to know, including those at the Field Placement site, in order to facilitate the accommodation request, while also respecting the confidentiality rights of the student with a disability. Even if a student has disclosed information about his/her disability or medical condition, that information cannot be shared with others. It is appropriate to discuss only the accommodations that are necessary to help the student succeed in the Field Placement. Classroom accommodations cannot not be shared with a Field Placement site unless a FERPA release is obtained from the student.

6. Monitor student progress and contact the Disability Services Coordinator/Officer as necessary for advice in adjusting existing accommodations or providing new accommodation strategies.

7. Discuss accommodation with the cooperating field site supervisors. If a supervisor is unwilling or unable to respond to the School’s legally mandated requirements, the School has the responsibility to work with the student to locate an alternative Field Placement site that can provide the requested accommodations.