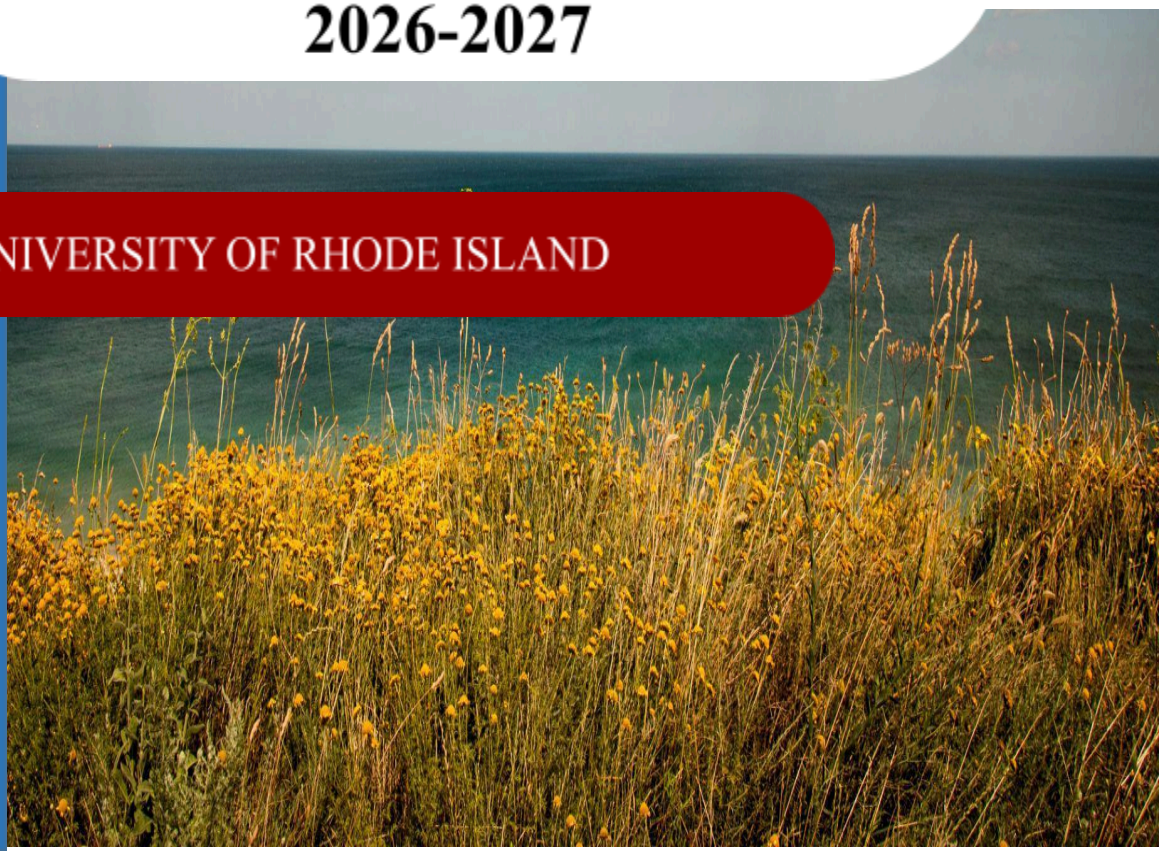
CLINICAL PSYCHOLOGY PROGRAM MANUAL 2026-2027



UNIVERSITY OF RHODE ISLAND

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PROGRAM BACKGROUND AND INSTITUTIONAL SETTING

University of Rhode Island

The University of Rhode Island is a state-supported co-educational institution with an enrollment of approximately 2,400 graduates and 15,000 undergraduate students and a full-time faculty of about 750. It was founded in 1892 as one of the land grant colleges and in 1971 became one of the first four sea grant colleges in the United States. The university is located in the picturesque village of Kingston, in historic "South County" near the state's beautiful coastline and many lovely beaches. Kingston is 25 miles south of the capital city of Providence and within easy access of the main population areas of the region, including Boston (70 miles) and New York City (150 miles). The University of Rhode Island occupies the traditional stomping ground of the Narragansett Nation and the Niantic People. We honor and respect the enduring and continuing relationship between the Indigenous people and this land by teaching and learning more about their history and present-day communities, and by becoming stewards of the land we, too, inhabit.

Department of Psychology

The Psychology Department is located within the new College of Health Sciences. The department has 20 tenure track faculty members and additional special instructors, practicum supervisors, research faculty and other teaching faculty; over 1000 undergraduate majors; and over 100 graduate students. The department offers training leading to the Ph.D. in two areas: clinical psychology and behavioral science. The Clinical Psychology Ph.D. program is the only APA-accredited Ph.D. program in clinical psychology in Rhode Island, and its combined doctoral programs represent one of the largest Ph.D. programs at the university. The department also offers a Master of Science (M.S.) in Mental and Behavioral Health Counseling, expanding graduate training opportunities in applied mental health practice and preparing students for careers as professional counselors. Psychology is an energetic and productive department and is committed to excellence in education, research and service. Both the undergraduate and graduate programs have been described by the highest-ranking administrative officers of the university as excellent and are generally considered to be among the most outstanding programs at the university.

Mission of the Department of Psychology

Our mission is. . .

To *generate* knowledge of basic psychological processes and contextual influences on psychological and physical functioning,

To *apply* knowledge to promote health and welfare in a pluralistic society by enhancing the functioning of individuals and social systems,

To *translate* knowledge into science-based programs policies and professional practices responsive to societal needs, and

To *transmit* knowledge through educational programs, which inform individual development, provide understanding of human behavior, and prepare scientist-practitioners to become future leaders and innovators.

In the accomplishment of this mission we…

Value the fundamental rights, dignity, and worth of all people, while achieving our goal to create a climate of understanding and respect among diverse individuals,

Respect cultural, individual, and role differences, due to age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status,

Commit to fostering and integrating multiculturalism at both a didactic and personal level, and

Promote conflict resolution in a just and responsible fashion that avoids or minimizes harm while respecting the rights of all individuals.

Description of the Clinical Program

The Clinical Program is the largest Ph.D. program within the Psychology Department with 36 doctoral students and 10 core faculty members, a director of the Psychological Consultation Center, and additional part-time faculty and practicum supervisors. The program has been accredited by the American Psychological Association since 1972. The Clinical Psychology Program at the University of Rhode Island has adopted the Scientist-Practitioner model of training. The Program trains students to function as leaders and innovators in the field of clinical psychology with generalist training in intervention and assessment skills, the core areas of psychology, and methodological skills. In addition, students select a focus area from health psychology, multicultural issues, neuropsychology, child/family, and applied methodology and complete didactic courses, practica, and research requirements within the focus area. Faculty in the Program have diverse areas of specialization that support a broad and integrative approach to clinical science, including child and family development, anxiety and mood disorders, trauma and stress-related conditions, health psychology and behavioral medicine, neuropsychological assessment and rehabilitation, attention and executive functioning, substance use and addictive behaviors, interpersonal relationships and violence prevention, multicultural and diversity issues, and advanced research methodology. In addition, specific objectives focus on developing skills in the integration of science, theory, and practice. The clinical program utilizes a training model that includes primarily a cognitive-behavioral approach. The clinical program also provides training in a variety of therapy modalities including adult and child/adolescent psychotherapy.

ACCREDITATION

The clinical psychology program has been accredited by the American Psychological Association (APA) since 1972. As noted in the APA Accreditation Handbook, the aim of accreditation is to promote program excellence and to provide professional and objective evaluation of programs as a service to the public, prospective students, and the profession.

To maintain accreditation, the clinical psychology program submits an annual report summarizing the year's activities with respect to accreditation criteria. Every seven to ten years the program undertakes a more detailed self-study followed by a site visit from an accreditation team. The last site visit was conducted in Fall, 2018. The Clinical Program was granted the full 10 years of accreditation. Our next self-study will be due in 2027, with a site visit occurring in 2028. Students contribute information to annual reports submitted to the American Psychological Association and are asked to participate in ongoing program evaluation. The program's annual reports, the accreditation report, and related materials are available for inspection to matriculated students from the Director of Clinical Training.

Commission on Accreditation
Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
Phone: 202-336-5979

Facilities

Chafee Social Science Center

The Department of Psychology at the University of Rhode Island is primarily housed in the Chafee Social Sciences Center and the Social Sciences Research Center (SSRC). The facilities in the Chafee Social Science Center and the SSRC include faculty and graduate student offices, administrative offices, conference rooms, mailroom, computer support facilities, and student lounges. A Behavior Change Research Center (BCRC) is located within the Chafee building and houses research laboratories. The Psychological Consultation Center (PCC) is housed in the SSRC.

Psychological Consultation Center (PCC)

The Psychological Consultation Center (PCC) directed by Lindsey Anderson, PhD, is the on-campus applied training and research facility of the Psychology Department and is located in the SSRC. The clinic space includes 13 video equipped clinical rooms and an additional four rooms available for clinical research, as well as a dedicated room with workspace for clinicians to complete notes, a video equipped conference room for clinic meetings and case reviews, and a student lounge for graduate students working in the clinics. The PCC has audio and video equipment for supervision and research.

The PCC began in 1969 as the Psychology Clinic, one of the first university-sponsored training clinics in the country, and now functions as a full-service outpatient mental health clinic with a full-time director. The PCC accepts a wide variety of clients from Rhode Island and nearby Connecticut and offers a comprehensive program of services. Services include: cognitive, personality, psychoeducational/neuropsychological evaluations of adults; child, adolescent, and adult psychotherapy; program evaluation and consultation; and workshops for families and individuals and other contracted professional activities. All services are provided by graduate students in the Clinical Psychology PhD and Mental and Behavioral Health Counseling MS programs under the supervision of faculty or licensed consulting psychologists and in keeping with the students' level of training, prior experience, and competence. Evaluation of services provided at the PCC is conducted regularly to ensure that services are effective, appropriate, ethical, and responsive to clients' needs. Excellence in clinical training is the mission of the PCC; all cases are selected to ensure that services are appropriate, effective, ethical and in keeping with the principles of client welfare.

Social Science Research Center (SSRC)

The SSRC is a 19,000-square-foot research and academic facility located directly adjacent to the Chafee Social Science Center. Designed to support interdisciplinary research and collaboration, the building provides a combination of private offices, meeting areas, research facilities, and flexible spaces that can be adapted to accommodate a variety of academic and research activities. The SSRC contains 55 offices, along with a welcoming lobby and reception area that serves as a central point of access for students, faculty, researchers, and visitors. The building also includes three conference rooms, providing dedicated spaces for research meetings, presentations, interviews, collaborative

projects, and academic discussions. A significant feature of the SSRC is its adaptable research space that can be configured to meet the needs of different research projects, making the building particularly useful for studies involving human participants, data collection, behavioral research, and other social-science investigations. Finally, the SSRC houses the Psychological Consultation Center and the Couple and Family Therapy Clinic, providing additional spaces that support clinical services, training, research, and hands-on learning opportunities for students.

Behavior Change Research Center (BCRC)

The first floor of Chafee contains the BCRC. The BCRC houses several faculty research laboratories, student cubicles, a conference room for psychology-related events, and a kitchen.

STUDENT SUPPORT

Financial support for graduate students is available from a variety of sources. Please see the Psychology Funding Manual on Brightspace's Clinical Psychology Program page for additional details on student funding.

Teaching Assistantship (TA). TA positions provide students with the opportunity to gain valuable teaching and instructional experience while receiving financial support toward their graduate education. TA positions are typically assigned to students by the Psychology Department based on departmental teaching needs, available funding, and the student's academic background and qualifications. Some TA positions require a master's degree or other qualifications for the assignment of the assistantship. A TA position provides full tuition remission and a stipend in exchange for approximately 20 hours of work per week. TA positions may support faculty members in undergraduate or graduate courses by assisting with course preparation, grading assignments and exams, facilitating class activities or discussion sections, responding to student questions, and providing other instructional support.

Generally, TA positions are awarded for one year at a time. It is necessary to reapply for a TA position each year. Around April each year, application dates are announced, and a description of the duties and qualifications for each TA position is distributed.

The Clinical Psychology Training Program has established several guidelines for priorities in the assignment of TA positions:

- Priority is given to students before the fifth year of training.
- Priority is given to students who have not already had TA support or who have had less departmental support.
- Applicants must be in good standing in the program and priority is given to students who complete program requirements in a timely manner.

Research Assistantships (grant funded). Research assistantships are assigned by faculty who have been awarded grants or contracts. Research Assistantships can provide up to full tuition remission and stipend for 20 hours of work on the relevant grants. Interested students should keep in touch with the faculty in the Psychology Department, especially those whose area of research is of interest, to see if they have any funding opportunities.

Assistantships at the URI Counseling Center. Each year the URI Counseling Center (the on-campus center providing counseling services to students) awards two or three assistantships. Announcement of the dates for application, interviewing, and assistantship decisions are made by the Counseling Center staff.

Other Graduate Assistantships. In recent years, several assistantships have been available in the PCC itself (Clinic Assistant positions). The contact person for these positions is Dr. Lindsey Anderson, Director of the PCC. In addition, there are several assistantships available through

various offices in the university such as Residential Life, Disability, Access, and Inclusion Office, Academic Enhancement Center, Student Athletics, Student Life, and the URI Counseling Center.

University Fellowships and Tuition scholarships. The Graduate School awards several university fellowships and tuition scholarships in a university-wide competition most years. Applications are typically sought in January. Criteria for successful applicants are announced at the time that applications are made available.

Off-campus placements at local mental health care agencies. In the third and fourth years (and sometimes earlier) many students accept placements at local hospitals or clinics. The program assists students in finding placements. All placements must be approved by the program.

Tuition Assistance. The Director of the Clinical Psychology Program awards tuition stipends of varying amounts, as resources permit, to students who have financial need and who do not have tuition funding. Most recently, tuition assistance has been provided to cover student tuition during the internship year (i.e., 2 credits of PSY 698: Internship).

Conference Attendance Grants. Several sources of funding for conference attendance are available to graduate students who are presenting, including funding from the Department, College, and Graduate Student Association.

Other Support. The Graduate Student Association offers financial assistance to graduate student groups and individuals through its Assistance Program, Thesis Binding, and Baby-sitting Funds. Students who receive support through sources other than their assistantships (but also paid through the University) are able to receive pay for no more than 25 hours per week total.

PROGRAM PHILOSOPHY AND GOALS

Educational Philosophy

The educational philosophy of the Clinical Psychology program is based on the scientist-practitioner model proposed at the Boulder Conference in 1949 (Raimy, 1950) and further explicated in the Conference Policy Statement of the National Conference on Scientist-Practitioner Education and Training for the Professional Practice of Psychology (Belar & Perry, 1992). Consistent with this philosophy, we accept graduate students who are committed to receiving training both in practice and research. An overarching objective in our training is to provide didactic and applied opportunities for students to learn about integration of practice and research. Within this context, students have the opportunity to choose a more research or more practice-oriented program of studies. These are not formal tracks but are individually developed plans of study based on choice of program committee, externship activities, and to some extent, coursework.

Three beliefs underlie the specific application of the Boulder model in our program. First is our belief that it is important to train innovators and leaders rather than experts. We hold this philosophy because the history of clinical psychology is one of changing content areas and domains of expertise. It follows from this belief that we have elected to train psychological generalists rather than adopt specific tracks based on content. It seems evident that those trained in solid principles of reliable and valid measurement of psychological constructs; categorization and prediction; empirically-based intervention methods and other generalist goals will be able to adapt these frameworks to new content areas as changes in the field occur. At the same time, we strongly encourage students to develop a focused interest area. The focus areas within which we currently offer training are health psychology, multicultural studies, child/family, neuropsychology, and applied research methodology. Most importantly, we wish to train students in a broad spectrum of problem solving and scientific methods that will provide the tools for them to actualize their own visions at whatever level they deem appropriate. We expect our graduates to be among the next generation of innovators who will make a significant difference whether as professors, psychologists in health care and mental health settings, or policy makers in government.

Second, we believe in the importance of training students to assess and intervene at multiple levels. It has become increasingly clear that important behavior change initiatives cannot rely on clients seeking one to one treatment in clinic-based settings. Therefore, while we continue to offer training in assessment and interventions at the individual and family levels, we also offer training to enable students to assess and intervene in social, organizational, and community contexts.

The final underlying belief in our educational model relates to the importance of training in diversity and multicultural issues. We believe that one of the profound changes that will impact training needs in the coming decades is the change in the demographics of our population. Racially and ethnically diverse populations represent some of the fastest-growing segments of the U.S. population. It is clear that in order to meet the mental health needs of the population in the coming decades, it will be important to train scientist/practitioners who have specific knowledge of how cultural backgrounds and lived experiences shape health and behavior and how these factors should

be thoughtfully incorporated into research and practice. A belief underlying our educational philosophy is the importance of training students to strive toward multicultural competence and humility, recognizing the importance of ongoing self-reflection, openness to learning from others, and responsiveness to diverse cultural and lived experiences. Consistent with our philosophy that behavior is embedded within multiple, interconnected contexts and may require intervention at multiple levels, we view cultural context as a fundamental consideration in understanding behavior and informing effective intervention.

Program Aims and Profession-Wide Competencies

The aims of the program, following from our educational philosophy, are (1) to prepare graduates who have the requisite knowledge and skills for entry as a scientist-practitioner; (2) to produce graduates who are responsible in the practice of psychology; and (3) to produce graduates who continually strive for multicultural competence and humility and who can apply this knowledge in the professional practice of psychology. The following outline presents the aims, profession-wide competencies, and activities associated with each aim. Students' program requirements can be grouped according to the program aims outlined below into courses and practica focused on developing skills and theoretical knowledge of assessment and interventions; skills and knowledge of ethical conduct; knowledge of how to categorize and predict; skills, knowledge, and products relating to generating and validating clinical and research hypotheses; knowledge and skills in a focus area cutting across areas of science, theory, and practice; and knowledge and skills in multicultural issues in psychology.

Aim 1: To prepare graduates who have the requisite knowledge and skills for entry as a scientist-practitioner

- To produce independent researchers able to contribute to the body of knowledge in clinical psychology
- To produce graduates who possess knowledge of and are skilled in evidence-based assessment
- To produce graduates who possess knowledge and skills to facilitate change through intervention
- To develop knowledge related to research and practice in area of focus - Focus areas may include health psychology, multicultural psychology, neuropsychology, child/family psychology, or research methodology

Aim 2: To produce graduates who are responsible in the practice of psychology

- To develop awareness and skills to think and act in an ethical manner
- To encourage professional development behaviors

Aim 3: To produce graduates who continually strive for multicultural competence

- To increase knowledge and application of issues pertaining to diversity

Profession-wide Competencies	Description	Where Assessed?
1. Research	A. Demonstrates the substantially independent ability to formulate research or other scholarly activities (e.g., critical literature reviews, dissertation, efficacy studies clinical case studies, theoretical papers program evaluations projects,	Annual Student Evaluations Comprehensive exams Publications/presentations PSY 533 (Advanced Quantitative Methods)

	program development projects) that are of sufficient quality and rigor to have the potential to contribute to the scientific, psychological, or professional knowledge base.	PSY 611 (Methods of Psych Research and Experimental Design)
	B. Conducts research or other scholarly activities	Annual Student Evaluations Master's thesis/Dissertation Publications/presentations
	C. Critically evaluate and disseminate research or other scholarly activities via professional publication ad presentation at the local (including the host institution), regional, or national level.	Annual Student Evaluations Publications/presentations
2. Ethical and Legal Standards	A. Is knowledgeable of and acts in accordance with each of the following: ● APA Ethical Principles of Psychologists and Code of Conduct ● Relevant laws, regulations, rules, and policies governing health service psychology at the organization, local, state, regional, and federal levels ● Relevant professional standards and guidelines	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 615 (Intro to Clinical Program) PSY 666 (Ethics) PSY 672 (all practica) PSY 698 (Internship)
	B. Recognizes ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve the dilemmas	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	C. Conducts self in an ethical manner in all professional activities	Annual Student Evaluation Supervisor Evaluation Form PSY 672 (all practica) PSY 698 (Internship)
3. Individual and Cultural Diversity	A. Demonstrates an understanding of how their own personal/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form Multicultural requirement PSY 643 (Multicultural Mental Health) PSY 672 (all practica) PSY 698 (Internship)
	B. Demonstrates knowledge of the current theoretical and empirical knowledge base as it relates to addressing diversity in all	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form

	professional activities including research, training, supervision/consultation, and service	Multicultural requirement PSY 643 (Multicultural Mental Health) PSY 672 (all practica) PSY 698 (Internship)
	C. Demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in the conduct of professional roles (e.g., research, services, and other professional activities)	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	D. Demonstrates the ability to apply a framework for working effectively with areas of individual and cultural diversity not previously encountered over the course of their careers	Annual Student Evaluation Supervisor Evaluation Form PSY 672 (all practica) PSY 698 (Internship)
	E. Demonstrates the ability to work effectively with individuals whose group membership, demographic characteristics, or worldviews create conflict with their own	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	F. Demonstrates the requisite knowledge base, can articulate an approach to working effectively with diverse individuals and groups, and applies this approach effectively in their professional work	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
4. Professional Values and Attitudes	A. Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form Conference attendance Psych. Assoc. memberships PSY 672 (all practica) PSY 698 (Internship)
	B. Engages in self-reflection regarding one's personal and professional functioning	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	C. Engages in activities to maintain and improve performance, well-being, and professional effectiveness	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	D. Actively seeks and demonstrates openness and responsiveness to feedback and supervision	Annual Student Evaluation Supervisor Evaluation Form PSY 672 (all practica)

		PSY 698 (Internship)
	E. Responds professionally in increasingly complex situations with a degree of independence as they progress across levels of training	Annual Student Evaluation Supervisor Evaluation Form PSY 672 (all practica) PSY 698 (Internship)
5. Communication and Interpersonal skills	A. Demonstrates effective interpersonal skills and the ability to manage difficult communication well	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form Comprehensive exams Master's thesis/Dissertation PSY 672 (all practica) PSY 698 (Internship)
	B. Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, supervisees, and those receiving professional services	Annual Student Evaluation Supervisor Evaluation Form PSY 672 (all practica) PSY 698 (Internship)
	C. Produces and comprehends oral, nonverbal, and written communications that are informative and well-integrated	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	D. Demonstrates a thorough grasp of professional language and concepts	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
6. Assessment	A. Selects and applies assessment methods that draw from the best available clinical literature and that reflect the science of measurement and psychometrics	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 670 (Externship) PSY 698 (Internship)
	B. Collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	C. Interprets assessment reports, following current research and professional standards and guidelines, to inform case conceptualization, classification, and recommendations, while guarding against decision-making biases, distinguishing the	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 670 (Externship) PSY 661 (Cognitive Assessment)

	aspects of assessment that are subjective from those that are objective	PSY 698 (Internship)
	D. Communicates orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences	Annual Student Evaluation Supervisor Evaluation Form PSY 672 (all practica) PSY 670 (Externship) PSY 698 (Internship)
7. Intervention	A. Establishes and maintains effective relationships with the recipients of psychological services	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 670 (Externship) PSY 698 (Internship)
	B. Develops evidence-based intervention plans specific to the service delivery goals	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	C. Implements interventions informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	D. Demonstrates the ability to apply the relevant research literature to clinical decision-making	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	E. Modifies and adapts evidence-based approaches effectively when a clear evidence-base is lacking	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	F. Evaluates intervention effectiveness	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)
	G. Adapts intervention goals and methods consistent with ongoing evaluation	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 672 (all practica) PSY 698 (Internship)

8. Supervision	A. Demonstrates knowledge of supervision models and practices	Annual Student Evaluation Supervisor Evaluation Form PSY 670 (Externship) PSY 672 (peer supervision practica) PSY 698 (Internship)
9. Consultation & Inter-professional/ Interdisciplinary skills	A. Demonstrates knowledge of consultation models and practices	Annual Student Evaluation Supervisor Evaluation Form PSY 670 (Externship) PSY 698 (Internship)
	B. Demonstrates knowledge and respect for the roles and perspectives of other professions	Annual Student Evaluation Supervisor Evaluation Form Clinical Case Conference Form PSY 670 (Externship) PSY 698 (Internship)

Focus Areas

Clinical psychology students select a focus area from the areas of health psychology, multicultural psychology, neuropsychology, child/family/developmental psychology, and research methodology. A focus is achieved by taking 3-4 courses in the area, completing a practicum or applied experience in the area, and conducting research (thesis and/or dissertation) in the area. For additional information, please also see: https://web.uri.edu/psychology/academics/

Health Psychology

Courses that meet the focus requirements in health psychology include Health Psychology Interventions (PSY 690); Women's and Men's Health (PSY 690); Women's Mental Health (PSY 690); Psychological Aspects of Healthy Lifestyle (PSY 581/KIN 581), Sexuality, Gender, Culture, and Health (PSY 690), and Health Psychology Practicum (PSY 672). Clinical psychology faculty who have expertise in supervising research in health psychology include Lyn Stein, Jill Scheer, Lisa Weyandt, and Mark Robbins. Numerous other department faculty have expertise in the health area, notably John Robinson and Andrea Paiva.

Multicultural Psychology

Courses that meet the focus requirements in multicultural psychology include Multicultural Mental Health (PSY 643) and Multicultural Practicum (PSY 672). Clinical psychology faculty who have expertise in supervising research in multicultural psychology include Hector Lopez-Vergara, Nicole Weiss, Jill Scheer, April Highlander, and Lyn Stein. Other department faculty with expertise in this area include Mollie Ruben and Ceren Gunsoy.

Neuropsychology

Courses that meet the focus requirements in neuropsychology include Physiological Psychology (PSY 601) and others offered in the Interdisciplinary Neuroscience program. Practica in

neuropsychology are arranged at area hospitals, in many cases in cooperation with the Brown Psychology Internship Consortium and the Brown Neuropsychology Track. Various didactic lectures and rounds are also potentially available to students via the Brown Neuropsychology track. Psychology faculty who have expertise in supervising research in neuropsychology include Hector Lopez-Vergara, Nathan Cook, Lisa Weyandt, and David Schnyer.

Child/Family/Developmental Psychology

Courses that meet the focus requirements in child/family/developmental psychology include Developmental Psychology (PSY 603) and Marital and Family Therapy I and II (HDF 563 and 564). Available practica include child therapy and family therapy. Clinical psychology faculty with expertise in supervising research relating to children and families include Hector Lopez-Vergara, Ellen Flannery-Schroeder, April Highlander, Lisa Weyandt, and Lyn Stein. Other department faculty with expertise in this area include Bethany Kotlar and Ted Walls.

Research Methodology

Courses that meet the focus requirements in applied methodology include Experimental Design (PSY 532), Advanced Quantitative Methods in Psychology (PSY 533), Structural Modeling (PSY 612), Statistical Power Analysis (PSY 690), Small N Designs (PSY 690), and Longitudinal Data Analysis in Psychology (PSY 690). Practicum experience can be obtained through the Health Psychology practicum program evaluation component or through other applications. Clinical psychology faculty with expertise in research methodology include Hector Lopez-Vergara. Other department faculty with expertise in applied methodology include Ted Walls, Andrea Paiva, Manshu Yang, Amy Stamates, and Christopher Urban.

***A current list of all available courses counting towards focus areas can be found in Brightspace (in the Module called "Focus Areas").**

CURRICULUM REQUIREMENTS FOR CLINICAL

The clinical program is designed to provide sufficient structure to meet APA guidelines for the training of clinical psychologists and existing state licensure requirements and to provide the flexibility to accommodate the variability in interests of individual students. The curriculum satisfies all American Psychological Association accreditation requirements and those necessary for licensure as a psychologist at the independent level of practice.

The Psychology Department requires a total of **90 credits** for the Ph.D. degree. Additional credits are needed to complete focus area requirements. Specific departmental and program requirements are as follows:

General Requirements of the Department of Psychology

I. Academic Requirements

The Department of Psychology requires preparation in three basic areas. These requirements must be met by all doctoral students, regardless of their area of concentration (i.e., clinical psychology or behavioral science). These requirements are in addition to the specific Clinical program requirements listed below (although the foundations of psychology requirement overlaps with some clinical program requirements).

1. Foundations of Psychology (12 credits) (This requirement overlaps with the Foundations of Clinical Psychology requirement--see below)

All students must take **four** core courses from the following list:

PSY601 Physiological Psychology
PSY603 Development
PSY604 Cognitive Psychology
PSY606 Social Psychology
PSY607 Advanced Psychopathology
PSY608 Theories and Systems

2. Research and Methodology (9 credits)

All students must take all the core courses from the following list:

PSY532 Experimental Design
PSY533 Advanced Quantitative Methods
PSY611 Methods of Psychological Research and Experimental Design

3. Research Proficiency (18 or 24 credits)

Master's Thesis

Students entering the program without a Master's degree: Students entering without a master's degree must complete a master's thesis. In order to do this, the student must form a program committee and enroll in 6 credits of PSY599 Master's Thesis Research.

Students entering the program with a Master's degree: If the Master's program did not include a thesis, a research competency must be completed. This involves conducting a research study similar in scope to a Master's thesis that is acceptable to the student's program committee. If the Master's program was in psychology and included a thesis, the student has no further research proficiency requirements at the Master's level. If the Master's degree was not in psychology, the student will be required to complete a research competency in psychology.

Doctoral Dissertation

All students are required to complete a doctoral dissertation and take a minimum of 18 dissertation credits. The same program committee that was formed for the Master's thesis may continue for the dissertation.

The Department of Psychology requires that all students include a section in their thesis/dissertation proposals which articulates how the issue of multiculturalism has been considered with respect to the choice of topic, methodological approach, participants, measures, procedures, and the interpretation of the research. This is not intended to limit the student's choice of topic, subjects or methods, but to assure that the student has sufficiently considered and expresses the ways in which their choices are made and the implications of these choices for their subsequent interpretations of the results.

It is a requirement of the Department of Psychology that all student thesis/dissertation proposal meetings and defenses be conducted during the academic year and not during the summer. There is an option for appealing this rule, but in general circumstances must be extraordinary in order to have summer meetings approved. In general, the oral defense meeting of the dissertation is open to the university community and other interested observers. Observers may ask questions, if recognized by the Chair of the examining committee. At the discretion of the Chair, some or all of the observers may be asked to leave the examination room if the presence of the observers is detracting from the ability of the student to answer questions from the examination committee.

II. Advising Requirements

Advisor

In accordance with graduate school procedures, students will be assigned an advisor before taking courses. The adviser will assist the student in the selection of courses to be taken the first semester, and usually by the end of the first semester, in the selection of the major professor.

Major Professor and Program Committee

The duties of the major professor and the program committee are outlined in the Graduate School Manual (https://web.uri.edu/graduate-manual/). The major professor does not need to be a member of the clinical faculty. All students will form a program committee in compliance with procedures indicated in the Graduate School Manual. The committee will include at least one member of the Clinical Psychology faculty. If the student has a nonclinical major professor, the clinical committee

member serves as clinical advisor. The form for the Establishment of Committee can be found on the Graduate School forms page: https://web.uri.edu/graduate-school/forms/

Students are expected to meet with the clinical advisor at least once per semester to discuss clinical program requirements and clinical training issues and to keep the clinical advisor updated on all aspects of their degree progress. See the Clinical Program Brightspace page for a Mentor-Mentee Agreement Form that provides suggested points of discussion between Major Professor and student regarding the specific structure of the working relationship.

Clinical Program Requirements

In addition to the above requirements, all students enrolled in the clinical psychology program must meet the following course and other requirements. Please note: All requirements must be met by successful completion of the designated courses unless a course waiver (see Transfer Credit section) is approved for equivalent courses taken at another institution. The minimum level of achievement for courses is grade of B. Students who obtain a grade lower than B will be required to complete additional didactics and/or practical applications of course content or may be required to retake the course. The elements of the remediation plan will be determined, in this case, in consultation with the course instructor to understand the nature of the student's difficulties with course content. If the student has generally struggled with a variety of course content, the student will be required to retake the course. If the student has struggled only in one assignment, or one area, the student will be required to complete additional learning activities and demonstrations of mastery of material, prior to a grade change. A Checklist for Clinical Program Requirements can be found in the Appendices of this manual.

1. **Foundations of Clinical Psychology** (21 credits):

Core courses taken to satisfy the departmental foundation requirement may be counted toward this requirement. Also, there may be special topics seminars (e.g., PSY690) in addition to those listed below which may count as meeting the Clinical Psychology foundations requirements.

a. Biological Bases of Behavior
All students must take the following course:

- PSY601 Physiological Psychology

b. Cognitive-Affective Bases
All students must take the following course:

- PSY604 Cognitive-Affective Psychology

c. Multicultural Bases
All students must take the following course:

- PSY 643 Multicultural Mental Health

d. Social Bases of Behavior
All students must take the following course:

- PSY606 Social Psychology

e. Professional Ethics & Standards

All students must take the following course **within the first two years** of coursework:

- PSY666 Ethical and Legal Issues in Psychology

f. Human Development

All students must take the following course:

- PSY603 Development

g. History and Systems

All students must take the following course:

- PSY608 Theories and Systems
  Important Note: The History and Systems requirement may be met at the undergraduate level. Thus, if you have taken a previous course in History and Systems, please discuss this with your Major Professor to see if you may be waived from this program requirement.

2. Diagnosis, Assessment & Psychological Measurement (3 credits)

All students must take the following course:

- PSY661 Administration and Interpretation of Cognitive Tests

3. Therapy Intervention (6 credits)

All students must take the following courses:

- PSY607 Advanced Psychopathology
- PSY642 Psychotherapy Skills

4. PCC Practicum (15 credits)

All students must take the following practica (all PSY 672s):

- Child Cognitive Behavioral Therapy (i.e., Child Anxiety Program [CAP]) or Adult Cognitive-Behavioral Therapy (2nd year)
- Multicultural Therapy (3rd year)

The following practicum is optional: PSY 672: Neuropsychological Assessment.

Students who wish to take the Neuropsychological Assessment practicum course must meet the following requirements. Students must:

1. have a neuropsychology training focus (i.e., student intends on pursuing designation as neuropsychologist, intends to complete a postdoctoral fellowship in neuropsychology).
2. have completed PSY661 or have secured a waiver for the course (e.g., completed a similar graduate course at a previous institution and received a waiver from the PSY661 course instructor).

5. Electives (9-12 credits)

Focus Area Electives:
All students must designate an area of focus from the following areas: health psychology, multicultural issues, child/family/developmental psychology, neuropsychology, and applied methodology. Students are strongly encouraged to take electives, directed reading courses, or mesh program requirements with their focus area so that they can complete a three or four course sequence in a designated interest area. This should be determined in conjunction with their program committee. See Brightspace (Module called "Focus Areas") for a listing of current courses.

Clinical/Practicum Electives:
Students who provide psychological services for PCC clients outside the context of a PCC team or who provide psychological services for clients of PCC affiliate agencies should be sure to complete an Externship Agreement Form to indicate program approval of the services. This is often done when therapy continues after the end of the team, or when the student desires additional clinical experience. Students who provide psychological services for PCC clients during the summer must also complete an Externship Agreement Form. Supervision must be arranged through the PSY 670 instructor and/or the Program Director.

6. Externship Field Experience (1credit [non-didactic]; 1 credit [didactic])
Students typically complete off-campus clinical externships in their third and fourth years of training (see Externships section for additional requirements). Students completing clinical externships off campus must enroll in 1 credit of Field Experience in Psychological Services (PSY670) for each semester during the academic year. Course enrollment in PSY670 is neither required in the summer nor required for an exclusively research-based externship. However, if a research externship involves any clinical work, the student must enroll in PSY670.

In addition to providing oversight of clinical work on externships, PSY670 will cover the topics of supervision in one semester and consultation in another semester. Upper year students will be required to take an additional credit of PSY670 [didactic] to cover these topics. All students must have exposure to both of these topics in order to fulfill program requirements. Consultation (1 credit of PSY670) is covered in the fall semester and the course meets for 1.5 hours every other week (hybrid format). Supervision (1 credit of PSY670) is covered in the spring, meeting for 1 hour every other week (hybrid format). In addition, during the spring semester, students are expected to meet with their clinical student supervisees for one hour every other week (e.g., observing live/recorded intakes, reviewing reports). Once a student has completed both of these didactic semesters, they will continue to enroll in 1 credit of (non-didactic) PSY670 to provide program oversight of their externship experience. Students who are completing a non-didactic PSY 670 will connect with Dr. Anderson at regular intervals during the academic year and summer, if applicable.

A contract describing the externship site, experience, duties, and supervision must be signed by the student, the onsite supervisor, and the externship training director for all externships, whether completed during the academic year or the summer (see Externship Agreement Form on the Clinical Psychology Program Brightspace page). Each year, the Director of Clinical Training and PCC Director will notify students of available externships.

7. Collaborative Research (2 credits)
All students must take following course:

PSY615 Collaborative Research in Psychology
One credit is taken in the fall of the first year and one credit is taken in the spring of the first year.

8. Internship (2 credits)
Students are required to complete a yearlong pre-doctoral internship in an approved setting. While on internship, students enroll in PSY698 Internship in Professional Psychology for 1 credit in the fall and spring semesters. Please note the following:

1. If your **internship starts on July 1**, then you must register for 1 credit of PSY698 in the Fall semester and 1 credit of PSY698 in the Spring semester.
2. If your **internship starts on September 1**, then you must register for 1 credit of PSY698 in the Fall semester and 1 credit of PSY698 in the Spring semester. You must also sign up for 1 CGR (Continuing Graduate Registration) credit of PSY698 for the Summer since your internship goes across the entire summer.
3. You will receive an Incomplete in PSY698 at the end of the Spring semester provided that your internship has not concluded at that time. The Program Director will submit a change of grade form on (or close to) your last day of internship.
4. In order to be eligible for graduation at the end of August, all program requirements (including internship) must be completed by early August. Be sure to check the Graduate School calendar to ensure that you meet all necessary deadlines.

9. Non-credit requirements

PCC Colloquium: All clinical students who are involved in *any* PCC practica (whether or not they are seeing clients) are required to attend the weekly PCC staff meetings. All first- and second-year students are required to attend the PCC Colloquium that is designed to address clinical topics that may not be covered in coursework and to help prepare students for internship application.

Case Presentations: The Clinical Psychology Program requires the successful completion of two case conference presentations. In most cases, students will complete the first case presentation during their second year and the second case presentation during their third year. Typically, these presentations take place during the regularly scheduled PCC meetings. Students may choose either a client who is being or was seen in a practicum in the PCC or a client seen in an outside placement (the latter, however, is permitted only for a second case presentation and requires approval and oversight by the site supervisor – see PCC paperwork for necessary documentation that site supervisor has reviewed and approved case presentation content). In addition, students are recommended to invite their clinical supervisor to the case presentation. Successful completion of the first presentation is required for a student to complete an externship during the academic year (students may complete a summer externship without having completed the first case presentation). Successful completion of the second presentation is a prerequisite for internship applications. The presentations are evaluated by a case presentation evaluation committee composed of at least two members of the clinical faculty. The evaluation committee will use the Clinical Case Conference Evaluation Rubric. Guidelines for the presentations and the Clinical Case Conference Evaluation Rubric can be found in the Clinical Psychology Program Brightspace page. In addition, the student will be asked to rate themself using the same form in order to provide a self-evaluation. Evaluator- and student-completed forms will be co-signed and placed in the student's clinical file. Case presentations are expected to be between 25 and 35 minutes in total. Students will present the case for approximately 15-20 minutes, leaving an additional 10 to 15 minutes for audience discussion, clarifications, and feedback. PowerPoint presentations are encouraged but not required.

Ph.D. Qualifying Examination: A Ph.D. qualifying examination is required by the graduate school for all doctoral students entering without a Master's degree. This requirement is met by completing any four courses from PSY 532, 533, 611 and those numbered 600-609 with a grade of B or better. These courses are usually completed prior to the earning of 24-30 credits.

Comprehensive Examination: Following or near completion of course work, students must pass a written and oral comprehensive examination. These exams are offered once each semester (Fall and Spring) at times announced at the beginning of the academic year. The written examination is compiled by the student's program committee in consultation with the student. The exam covers each of the following areas: statistics and research methodology; intervention; assessment; and an area of special interest to the student. The exact format for the comprehensive exam is determined by the student's major professor with input from the student's program committee. In recent years, students' comprehensive exams have been more product-focused (e.g., student first-author manuscripts submitted for publication, F31 or R36 grant applications).

Sample Course Sequence:

The sequencing of courses listed below is strongly recommended by the Clinical Program. Failure to complete courses according to this schedule may result in delays in time to graduate or other impediments to completion of requirements. **Please refer to the Clinical Program Brightspace page for a schedule of when courses are offered.** (Note that this page is periodically updated so always go to Brightspace for the most up-to-date- course scheduling information.)

1st Year

Fall			Spring		
Credit	Class #	Class Name	Credit	Class #	Class Name
3	PSY532	Experimental Design	3	PSY533	Advanced Quantitative Methods
3	PSY607	Advanced Psychopathology	3	PSY661	Cognitive Testing
3	PSY643	Multicultural Mental Health	3	PSY599	Master's Thesis Research
1	PSY615	Collaborative Research in Psychology	3	PSY672	Intake Practicum
3	PSY642	Psychotherapy Skills			
Total credits: 13			Total credits: 12		

2nd Year

Fall			Spring		
Credit	Class #	Class Name	Credit	Class #	Class Name
3	PSY611	Methods of Psychological Research and Experimental Design	3	PSY608	History & Systems in Psychology**
3	PSY672	Practicum (CBT/CAP)	3	PSY672	Practicum (CBT/CAP)
3	PSY666	Ethical and Legal Issues in Psychology	3	PSY599	Master's Thesis Research

3	PSY599	Master's Thesis Research	3		Elective/Focus Area (Developmental Recommended)
Total credits: 12			Total credits: 12		

****The History and Systems requirement may be met at the undergraduate level. Thus, if you have taken a previous course in History and Systems, please discuss this with your Major Professor to see if you may be waived from this program requirement.

3rd Year

Fall			Spring		
Credit	Class #	Class Name	Credit	Class #	Class Name
3		Elective/Focus Area (Social or Cognitive-Affective Recommended)	3		Elective/Focus Area (Physiological Psychology Recommended)
3	PSY672	Practicum (Multicultural)	3	PSY672	Practicum (Multicultural)
3	PSY672	(Optional) Neuropsychological Assessment Practicum	3	PSY672	(Optional) Neuropsychological Assessment Practicum
3+	PSY699	Doctoral Dissertation Research	3+	PSY699	Doctoral Dissertation Research
Total credits: 9-12+			Total credits: 9-12+		

4th Year

Fall			Spring		
Credit	Class #	Class Name	Credit	Class #	Class Name
3	PSY670	Externship	3	PSY670	Externship
1	PSY670	Supervision and Consultation	1	PSY670	Supervision and Consultation
3		Elective/Focus Area (Social or Cognitive-Affective Recommended)	3+	PSY699	Doctoral Dissertation Research
3+	PSY699	Doctoral Dissertation Research			
Total credits: 10+			Total credits: 7+		

5th Year

Fall			Spring		
Credit	Class #	Class Name	Credit	Class #	Class Name
1	PSY698	Internship	1	PSY698	Internship
Total credits: 1			Total credits: 1		

Note: When scheduling conflicts exist, your courses and teaching assistantships should be prioritized over clinical externships.

Completion of Degree Requirements

The following table shows the expected sequence for completing program requirements within five years. An alternate sequence would involve proposing the dissertation in the spring of the third year and taking the Comprehensive Exam in fall of the fourth year. The deadline for defense of the master's thesis is the end of the fall semester of the third year. If the thesis has not been defended by this time, the student is subject to program sanctions. See https://web.uri.edu/psychology/academics/ph-d-program/clinical-psychology/program-statistics/ for the mean number of years to graduation.

	Fall Semester	**Spring Semester**
First Year	MA Program of Studies due	Develop thesis proposal
Second Year	Propose thesis	Defend thesis
Third Year	Plan comprehensive exam Doctoral Program of Studies due	Take comprehensive exam; plan dissertation proposal
Fourth Year	Propose dissertation Apply for internship	Defend dissertation
Fifth Year	Internship	Internship Petition to graduate

For the Masters and Doctoral Program of Studies (see the Grad forms webpage for copies), please schedule a 15-minute one-on-one meeting with Dr. Flannery-Schroeder in the semester indicated above to complete and submit the forms.

Evaluations of Courses

Each course with five or more students at the University of Rhode Island undergoes the IDEA Center Student Evaluation of Teaching Effectiveness, in which students complete a standardized evaluation form. Practica may or may not be included in this system, depending on whether there are at least five practicum team members. IDEA feedback to faculty is anonymous. As such, students are strongly encouraged to use the form to deliver important feedback on teaching effectiveness. For evaluations of practica, students periodically complete ratings of practicum supervisors conducted by the PCC Director. This feedback, provided anonymously, is given to the supervisors. Faculty are furthermore encouraged to obtain additional feedback from students enrolled in graduate courses.

Graduation

It is expected that students will graduate from the program in 5 to 6 years. University policy requires all students to graduate within 7 years. Students who do not complete within this time period must petition the graduate school to continue and may be required to retake courses and other degree requirements. Procedures are specified in the Graduate School Manual (https://web.uri.edu/graduate-manual/).

A student will not be allowed to graduate until all degree requirements are met, including completion of the internship. When the internship director certifies to the clinical psychology program that the internship has been completed, the Director of Clinical Training will notify the graduate school that this degree requirement has been met. In addition, a passing grade will be

assigned to the student for their Psy 698 credit, indicating successful completion of the internship. It is a policy of the graduate school that students must be enrolled in the semester of graduation, including the summer term for an August graduation.

Graduate School Regulations and Policies

All candidates for masters' and doctoral degrees entering, admitted to, or readmitted by The Graduate School are governed by the appropriate edition of the Graduate School Manual. Clinical psychology graduate students must abide by the policies and regulations set forth in the Graduate School Manual as approved by the Graduate Council governing all graduate students at the University of Rhode Island. While there is some overlap between the information in this Clinical Program Manual and the Graduate School Manual, the Graduate School Manual should be consulted for all general University-wide academic regulations and policies. The Graduate School Handbook may be found at: Graduate School Manual.

PRACTICA, EXTERNSHIP, & INTERNSHIP TRAINING

Practica and externships are clinical training experiences that provide intensive supervision and didactic training. Practica refer to on-campus PCC clinic teams supervised by program or program-affiliated faculty. Externships are clinical placements at facilities outside the PCC and typically supervised psychologists who are not program faculty. Students on externship placements must also have an on-campus supervisor with whom they regularly meet (typically an hour per week). It is expected that all practica and externships will include at least one hour of supervision for every three to four hours of direct service (see the APPIC application for a definition of direct service). All clinical work requires a student to be enrolled in an appropriate course (usually PSY 672 for practica and PSY 670 for externships). In addition, students are required to keep records of their clinical hours on approved forms signed by practicum or externship supervisors. An evaluation must be completed by the supervisor and by the student at the end of each practicum semester (fall, spring, and summer). The required evaluation forms (i.e., Supervisor Evaluation Form and Student Self-Evaluation of Clinical Competencies Form) can be found on the Clinical Psychology Program Brightspace page. The Clinical Psychology program is designed to provide students with approximately 600 hours of assessment and intervention practicum training combined.

Liability Insurance

In order for students to begin clinical training in the PCC (and then subsequently in externship sites), all students must purchase liability insurance by the end of the fall semester of the first year of their training program. Liability insurance is affordable and available through the American Psychological Association: https://www.trustinsurance.com/Insurance-Programs/Student-Liability

PCC Practica

Students begin clinical training by attending PCC staff meetings and observing therapy sessions conducted by advanced graduate students. Beginning in the second semester, clinical training is provided via an Intake Practicum, through which first year students prepare and conduct all intake interviews for the PCC, practice risk assessment, and learn semi-structured interviews. Additional clinical and assessment training is provided via PSY 661 (Psych Services I: Cognitive Assessment) which covers an introduction to intellectual/cognitive assessment, an introduction to brief cognitive screening, and an introduction to basic personality assessment. This course content and applied practice will serve as initial training for the assessment batteries to be used during Year 2 practicums. Students are required to take six semesters of on-campus PCC practica unless otherwise approved by the PCC Director and program faculty. The required PCC practica should be constituted as follows:

a. Students are required to complete five (5) semesters of PSY672. Intake practicum is one semester. All other practica are full year. Required practica include: Adult Cognitive Behavioral Therapy or Child Cognitive Behavioral Therapy (Child Anxiety Program) and Multicultural Psychology. Neuropsychological Assessment is optional but encouraged. An

Advanced CBT practicum is available for students who have completed their foundational CBT training and are interested in continuing to carry a caseload in the PCC.

b. All students are strongly encouraged to take at least one semester of a supervision practicum. Students will gain peer supervision experience on a practicum which they have previously completed.

Students are assigned to practica based on the current training sequence, training needs of the student determined by the student, supervisors, and faculty, and availability of practica slots. Any requested deviations from the required number and/or type of clinical practica will be determined with consideration of the student's prior training and experiences and requires that previous clinical services were provided within the guidelines of client welfare and professional ethics.

Although clinicians are graduate students at URI, they are not granted the same holiday/vacation schedule as undergraduates. Outside of scheduled PCC closures (2 weeks over the Winter Holidays, 2 weeks in August, and 1 week in March), clinicians are expected to maintain a regular treatment schedule with their clients.

Other PCC Practicum Experiences

Trainees are permitted to accept clinical cases at the PCC outside of regular PCC PSY 672 teams. This is done by completing an Externship Agreement Form and requires PSY 670 instructor and/or Program Director approval. The PSY 670 instructor and/or Program Director will assign an on-campus supervisor. PCC cases that are seen during the summer (i.e., outside of the fall and/or spring semesters) will require the use of an Externship Agreement Form and attendance at weekly supervision with an assigned supervisor.

Summer Affiliate PCC Training

Eligible students may receive training at PCC affiliate agencies during the summer under the condition that a contract is established and appropriate supervision obtained. The Externship Agreement Form will be used (see Clinical Program Brightspace page). Use of a contract will establish that this practicum is part of the student's program training. The PCC Director (or a psychologist approved by the PCC Director) provides supervision to trainees during the summer and provides an evaluation at the end of the summer.

* It is important to note that a completed Externship Agreement Form (EAF) for summer placements ensures continued coverage of students' professional liability insurance (since the EAF forms tie clinical service directly to their training). In the absence of a completed EAF, students' liability insurance will not cover them.

Off Campus Practica Taken as a Replacement for Required PCC Practica

It is possible, under special circumstances, to substitute an off-campus placement with a non-program faculty supervisor for a PCC practicum. Students must request permission from both the PCC Director and Clinical Program Director to substitute an off-campus practicum for a required PCC practicum.

Eligibility: As a general rule, students will be eligible to submit proposals to do external practica in place of a PCC practicum if they are in their third year of graduate training and have taken coursework relevant to the practicum.

Evaluation of practicum proposals. Off-campus practica must provide equivalent training to that offered through PCC practica in order to be considered eligible to substitute for a PCC practicum. Equivalency is constituted by:

a. Opportunity to provide service to at least three clients per week or the equivalent.
b. At least one hour of supervision per week by a Ph.D. level psychologist approved by the clinical faculty. This individual should merit adjunct faculty status at URI.

Request procedure: Students submit a written proposal to the DCT outlining their qualifications for the practicum that they request permission to substitute for a required PCC practicum, how many credits they wish to take the practicum for, and reasons why they wish to take it.

Clinical Externships

Students may begin externship training upon completion of A) two semesters of the Adult Cognitive Behavioral Therapy or Child Cognitive Behavioral Therapy (Child Anxiety Program) practica, and B) their Master's thesis. If a student has entered the program with a Master's degree, then they must complete the dissertation proposal prior to beginning an externship. Summer externships may be completed by students in any year of the program, but all activities must be completed prior to the start of fall semester. Additionally, any summer externships require on-campus oversight through attendance at scheduled Externship supervision meetings run by the PCC Director as well as completion of a summer Externship Agreement Form (EAF). The intent of this policy is to assist students in meeting program requirements in a timely fashion by helping to ensure a balance between research and clinical training.

<u>Externship Readiness Evaluations</u>
Throughout the year, clinical faculty and the PCC Director review and evaluate students' readiness for externship placements. See the Clinical Program's Brightspace page for the Externship Readiness Evaluation Form. For information on petitioning the externship policy, please see the section "Petitioning a Program Policy."

A contract (or "Externship Agreement" form) must be established before beginning the externship. The contract is signed by the PSY670 instructor in conjunction with the Major Professor and PCC Director (see Externship Agreement Form Procedures section below for more information). The contract must be signed BEFORE any clinical services are provided. The contract establishes the nature of the training experience, including information such as:

1. The duration of the practicum experience (e.g. one semester, one year) and how much time per week will be expected of the trainee.
2. The responsibilities of the trainee include: client characteristics; number of clients per week; types of services to be delivered (e.g. assessment, individual psychotherapy, consultation, etc.).
3. Information about supervision: amount of supervision to be provided; qualifications of supervisors including a vita and licensure information for individuals who will conduct supervision. Please note that supervisors must be appropriately credentialed for the work

that they are supervising. At a minimum, supervisors must have an active license but do not necessarily require a Ph.D. or Psy.D.
4. Training goals.

Contracts may be established for up to one year of training. Trainees are strongly encouraged to establish a training contract at a new placement following the completion of one year at the previous site. If under special circumstances the trainee remains at the same site for a second year, new training goals must be established.

Evaluations by externship supervisors are completed three times per year and are due on the following dates: December 9, May 9, and August 31.

During the academic year, students on externship will enroll in PSY 670 and participate in regularly scheduled meetings with the PSY 670 instructor. During the summer, students do not need to enroll in a course, but will meet regularly with the PCC Director or other approved supervisor for on-campus supervision.

<u>Clinical Externship Agreement Form Procedures</u>
All clinical work must have an Externship Agreement Form (EAF) completed PRIOR to beginning at an externship site. The current procedure for completing an externship requires the following:

1) Weeks to months *before* you anticipate beginning your clinical externship, discuss your plans to pursue an externship with your Major Professor (MP). Once you have secured your MP's approval to move forward, submit an Externship Agreement Form with only the top box completed to your MP. Your MP will then indicate their approval by providing a signature in the top box. To determine whether there is an opening at an externship site, best practice is to ask the Program Director or Externship Director to contact the site to determine whether they will be taking a student.

2) Next, please forward the form to the PCC Director who will verify that you are in good standing in the PCC by adding her signature to the top box of the form. Please remember that preapproval from your Major Professor must be obtained before obtaining preapproval from the PCC Director. The presence of these two signatures indicates program approval to pursue the externship.

3) You may then submit your name to an externship site or go for an interview.

4) ONLY once these two signatures are obtained should you forward the EAF to your externship supervisor for completion of the form and signature.

5) Next, you will need to obtain approval from your on-campus supervisor (670 Instructor). Once the form is signed by all parties, make a copy for your personal files, and place a copy in your electronic clinical folder and email the document link to the Graduate Program Administrative Assistant (Wendy Gallo, wendy_gallo@uri.edu) for data entry in our Program database (i.e., Filemaker).

Please also note the following:

- Any hours conducted in the absence of a signed (approved) EAF will not be counted toward internship. There will be NO exceptions to this rule.

- When filling out the externship agreement form, you may complete it electronically or by hand. If completing it by hand, please ensure that handwriting is legible.
- Please complete all of the information requested on the form. Do not leave blanks.
- You may obtain the EAF from the Clinical Program Brightspace page. These are the only versions that may be used; older versions will not be accepted.
- Externship contracts can be made for a maximum of one year with special permission by the DCT and PCC Director.
- Please remember that within any year, there are three evaluation periods (December, May, and August). At these times, you will need to complete an hours log, self-evaluation, and supervisor evaluation. All forms are available on the Clinical Program's Brightspace page. If, for example, you have a placement that runs from Sept. 1, 2025 to Aug. 31, 2026, you will have one EAF, but three hours sheets, three supervisor evaluations, and three self-evaluations. All of these forms must be placed in your electronic clinical folder in the folder that pertains to the year and semester in which you completed the clinical service.
- The ratio of direct hours to supervision hours cannot exceed 4:1 (except in the case of some assessment externships).

PCC cases that are carried over into summer months as well as clinical hours completed in the context of research studies will require EAFs as well as hours sheets and self and supervisor evaluations. PCC practica conducted during the academic year, however, do not require EAFs.

Clinical Externship Assignments

Each year, the Externship Director will notify students of available externships. In addition, a searchable listing of externships is available on the Clinical Psychology Program Brightspace page. A student who wishes to may propose a new externship placement (one for which the program does not currently have an agreement). A Memorandum of Agreement must be established between the University of Rhode Island and the externship site prior to the student beginning an externship. This form may be obtained from the Graduate Secretary.

In order to obtain approval for a new off campus practicum (PSY670), evidence, both subjective and objective, must be provided to the Externship Director that it is a good training site.

Internship

A one-year full-time predoctoral clinical internship in an APA-accredited setting must be completed. Non-APA accredited internships may be approved in special cases. This requires a written request and detailed rationale, endorsement by the student's program committee, and approval by the Director of Clinical Psychology Training (see section on "Petitioning a Program Policy"). Unaccredited internships must meet the requirements set by the Clinical Program (internship requirements can be obtained from the Clinical Program Brightspace page). All students **must** have completed the oral defense of their comprehensive exams and have a committee approved dissertation proposal by May 1st in order to apply for internship that fall. IRB approval of the dissertation proposal is not required by the May 1st deadline. It is strongly recommended that students complete as much of the dissertation as possible prior to going on internship since previous experience indicates that this leads to more rapid completion of degree requirements. See the Clinical Program's Brightspace page for the Internship Readiness Evaluation Form that details the program's minimum requirements for internship readiness.

Internship Readiness Evaluation

At the end of the spring semester, the clinical faculty will review the clinical folders of students who plan to apply to internship in the fall. If all requirements for internship are met, faculty will indicate approval using this form (i.e., Internship Readiness Evaluation Form, see Clinical Program's Brightspace page). The student will be notified of such in writing, and this form will be placed in the student's clinical file. If all criteria have *not* been met by May 1, the Program Director will *not* verify internship readiness on internship applications.

Applying for an internship is a similar process to applying for graduate school. You must research internships to determine ones that hold the greatest interest for you, prepare applications, and go on interviews. There is an Association of Psychology Postdocs and Internship Centers (APPIC) that regulates the application process. A standard application has been developed by APPIC and is used by most APA approved internship programs. You can view the application at the APPIC web site (www.appic.org). One component of the application is the Practicum Documentation Form. This form is used to document the amount and type of clinical practicum experience you have accumulated.

Documentation of Clinical Hours

In order to be able to complete your internship application, you must keep records of the amount and type of clinical practicum experience you accumulate (referred to as "clinical hours") as you go along. You will be expected to complete practicum hours data sheets for each semester of any type of practicum that you complete (PCC practicum or externship). A supervisor evaluation should accompany the hours form. Each must be signed by you and your supervisors. Towards the end of each practicum semester, students should request a meeting with their supervisors to review their practicum evaluation. In addition, at the beginning of each academic year, students should update a spreadsheet documenting their clinical hours total with the following categories: intervention hours, assessment hours, supervision hours, and support hours (see below for format). These categories should be completed for each semester and practicum the student completes, and a grand total should be calculated. A copy of this spreadsheet should be included in each student's clinical file.

	Intervention	**Assessment**	**Supervision**	**Total**	**Support**
Practicum 1					
Practicum 2...					
Externship 1					
Externship 2...					
	Int Total	Assess Total	Superv Total	I+A+S Total	Supp Total

Tracking Clinical Hours

It is strongly encouraged for all clinical students to use Time2Track (T2T), an online clinical hours tracking program, to keep track of clinical hours. Students should keep detailed information concerning their clinical experiences in their T2T records in accordance with information requested on the APPIC application. T2T hours may be reviewed by the Program Director and/or clinical faculty; yet **the official record of clinical hours is provided by the practicum and externship paperwork within a student's clinical folder**. The Clinical Program currently makes T2T available to students at no cost. T2T authorization codes, updated yearly, can be found on the Clinical Program Brightspace page. Use of T2T is increasingly important in that APPIC has recently partnered with them to allow clinical hours to be imported from T2T into the Association of Psychology Postdocs and Internship Centers (APPIC) internship application.

Please note the following excerpt from the APPIC application:

> Psychological Assessment Experience
> Summarize your practicum assessment experience in providing psychodiagnostic and neuropsychological assessments. You must enter the estimated total number of face-to-face client contact hours administering instruments and providing feedback to clients/patients. Do not include the activities of scoring and report writing, which should instead be included in the Support Activities section.
>
> ***Do not include any practice administrations. Do not include testing experience accrued while employed.*** You can list this in your Curriculum Vitae instead. If you only administered a subtest(s), do not endorse the full test in this section. Rather, specify the specific subtest in the **Other Measures** section. (APPIC application, 2020-20201 emphases mine)

Other Clinical Experiences

Students may, if approved, obtain clinical experiences in addition to practicum training. These may be documented for internship application under the heading Other Clinical Experience. All clinical services that students provide must be approved by the Program Director, whether on campus or off campus. This is both to ensure that students receive appropriate training experiences and to protect both the student's and program's liability.

RESEARCH TRAINING

The Clinical Program places a high priority on student research. At a minimum, doctoral students entering the program without previous graduate degrees or coursework in the area of research are required to complete 9 credits of research methodology courses and 24 credits of supervised research (thesis and dissertation). For doctoral students who have already completed a master's degree, your Major Professor will review your completed thesis to determine whether it meets our program's standards. Students who have not completed an empirical master's thesis are required to complete a research competency (see Research Proficiency section for more details).

A number of additional courses and supervised research experiences are available to build methodological knowledge and skills. Content courses at the graduate level also reflect the essential interplay between theoretical and empirical understanding in the advancement of knowledge and practice. For students with graduate research assistantships, there are many opportunities for "hands on" experience prior to and beyond the required thesis and dissertation. For students who may not have research assistantships, students may wish to conduct supervised research externships (see Research Externship section below). The emphasis placed on research methodology skills, and particularly quantitative methods, is reflected in the Department's Merenda Prize, awarded annually to the doctoral degree recipient whose work best reflects excellence in this area.

The Research Office is an important resource for students. All research projects done by URI faculty, staff, and students (including masters theses, research competencies, and dissertations) must receive prior approval from the University's Institutional Review Board (IRB), and the necessary forms and instructions may be found under on the URI Office of Research Integrity web site (Office of Research Integrity).

Research Externships

Students may wish to gain research experience in field settings beyond the laboratory. As with clinical externships, students are typically in their third or fourth year while completing a research externship. A contract (or "Externship Agreement Form") must be established before beginning the research externship. The contract is signed by the Major Professor and PCC Director (see Externship Agreement Form Procedures section above for more information). The contract must be signed BEFORE any research training is conducted. The Externship Agreement Form will serve as acknowledgement of a student's research activities carried on outside of the program as well as documentation of program approval for doing so. A student need not enroll in PSY670 if the research externship does not involve any clinical work.

GUIDELINES FOR CONFLICT RESOLUTION

A guide to conflict resolution has been developed by Psychology Department faculty and graduate students in collaboration with the Inclusion and Diversity Committee (IDC). This document serves as a departmental and university repository of best practice guidelines and resources to help support students and faculty in conflict resolution. These guidelines can be found on the Clinical Program's Brightspace page.

STUDENT AND PROGRAM ISSUES

Disability, Access, and Inclusion

Students who have a physical and/or mental disability or condition that may limit their life functioning or their ability to satisfactorily complete course, program, and/or degree requirements are encouraged to meet with the course instructor or Program Director to discuss reasonable instructional modifications or accommodations. As part of this process, students are required to contact the Disability, Access, and Inclusion Office at 330 Memorial Union, 401-874-2098, in order to properly document the disability. As an enhancement to academic success, students are encouraged to contact the instructor and Disability, Access, and Inclusion Office within the first two weeks of the semester.

Referral List for Graduate Student Mental Health Services

The Program Director will make available a list of mental health service providers for graduate students enrolled in URI's Clinical Psychology Program who wish to seek therapy for themselves. These mental health providers have agreed both to provide a reduced cost to graduate students and to refrain from serving as a clinical training site for graduate students for the foreseeable future. The referral list is available on the Clinical Program Brightspace page.

Guidelines for Ethical and Professional Behavior

The Clinical Psychology Program expects both faculty and students to conduct academic, clinical, and research activities according to the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct and within the laws and regulations governing the activities of psychologists in the state of Rhode Island. Students are expected to conduct all interpersonal interactions with cultural sensitivity and respect for others' personal beliefs, lifestyles, religions, and cultural frames.

The University adheres to the guidelines of the National Institutes of Health concerning protection of human participants in research studies. As such, all research activities involving the use of human participants must receive approval from the University of Rhode Island's Institutional Review Board on Human Subjects prior to the commencement of the research project. Any student/faculty member conducting research with human subjects must conform to the URI's Research Office policy requiring education and training on the responsible conduct of research involving human participants. Student and faculty researchers are required to submit documentation of this education requirement to the Research Office, Compliance Division. This documentation must be updated every three years. See Research Compliance Training for additional details.

Policy on Resolving Problems of Professional Competence

The clinical program faculty have a responsibility to students, the profession, and the public. While the clinical faculty have a responsibility to instruct and supervise the students enrolled in the program, the faculty also bear the responsibility of maintaining the standards of the profession and protecting the public from incompetent professionals. Unfortunately, there are times when a student is admitted to a clinical training program but fails to meet the specified competencies or is otherwise incapable of becoming a competent professional. Whenever appropriate, remediation plans will be developed for individual students experiencing difficulties in an attempt to rectify the problem(s).

Remediation is a non-punitive educational process for promoting student development and functioning. When academic or clinical competency problems render a student unable or unwilling to (1) acquire, integrate, and/or engage in professional behavior and functioning, (2) make sufficient progress in the completion of program requirements, or (3) meet minimal standards of competency, a remediation process may be initiated. The remediation process involves the following steps:

1. The faculty or adjunct faculty member who first identifies a problem will discuss the matter with the Program Director. The Program Director will then meet with the student to discuss the concern.
2. If the Program Director deems it appropriate, they will then call a meeting of the clinical faculty to discuss the problem. The clinical faculty will consider the development of a remediation plan (when appropriate and feasible). The student will be invited to attend a portion of the meeting if they wish to contribute additional information or to address questions from the clinical faculty.
3. The identified problems and proposed remedial actions, or other actions deemed appropriate, will be presented in writing to the student by the Program Director. The remedial plan will include a specific timeframe for completion. If a psychological assessment is requested as a part of the remedial plan, the student would be responsible for any costs incurred. Copies of the letter regarding the remedial plan will be placed in the student's clinical file.
4. The student will be allowed two weeks to respond to the letter in which identified problems and proposed actions are detailed. If the remediation plan is deemed acceptable by the student, they may simply indicate such with their signature on the written plan. If the plan is not acceptable to the student, they may respond in writing to the clinical faculty who may alter the remediation plan, if appropriate.
5. Upon conclusion of the specified timeframe for the remediation, the clinical faculty will meet to assess the success of the remediation. The student will be invited to attend a portion of the meeting to present information and respond to questions. The clinical faculty will decide if the student has successfully met the goals of the remediation plan and whether or not student should be retained in the program. This determination may require access to any and all records relating to an alleged mental or physical condition. If the student fails to comply with any aspect of the remediation plan, they may be dismissed without regard to academic standing, status of research, program requirements, or other considerations. The student may elect to resign from the Program at any time rather than submitting to a psychological assessment or remediation plan. However, in that case, the student would be informed in writing that re-admittance to the Clinical Psychology Program is not possible. A copy of that letter would be placed in the student's clinical file.

6. A student retains the right to appeal the Program's decision through the Graduate Student Appeals Board (see Graduate School Handbook A. 25 and A.26).

   In the event that the clinical faculty believe termination from the program to be the best course of action for the student, a recommendation for dismissal will be made in consultation with the Psychology Department Chair and the Dean of the Graduate School. In some cases, students may be provided the opportunity to complete the requirements of the Master's degree in lieu of immediate dismissal from the program.

   The following are conditions under which the Clinical Psychology Program may recommend termination of a student to the Graduate School (with or without a remediation plan depending on the severity of the violation):

- Having a cumulative GPA of less than 3.0
- Two or more course grades of C or lower on transcript
- Failure to complete the Master's thesis by the spring of the third year
- Failing the Written or Oral Comprehensive Exam for the second time
- Failure to propose the Dissertation by May 1st of the fourth year
- Failure to successfully defend the Dissertation by the spring of the seventh year
- Failing to meet the minimal standards on supervisor evaluation forms from two separate training sites
- Persistent failure to abide by the policies and procedures set forth in the Psychological Consultation Center Student Manual
- Marginal or Poor progress as indicated on two consecutive Annual Student Evaluations Forms
- Demonstration of serious and/or pervasive difficulty with professional development, skill, and/or conduct (See Policy on Professional Impairment and/or Problems of Professional Competence section of this manual)
- Serious personal or emotional disturbances affecting one's ability to perform as a scientist-practitioner or to function in the program
- Inappropriate social effectiveness (racism, cultural insensitivity)
- Unethical or criminal behavior (e.g., academic dishonesty, violation of APA Ethical Guidelines, violation of URI standards or policies, violation of governmental law, scientific misconduct)
- Disregard for the need for approval from the Clinical Psychology Program for mental health-related work (paid or unpaid)
- Failure to complete the requirements of a remediation plan

Policy on Academic Honesty

Students are expected to act with integrity and honesty in the completion of all academic work. Academic dishonesty includes cheating, plagiarism, fabrication or falsification, denying others access to information and /or material, sabotage of other's work, unauthorized multiple submissions of work, and facilitating another's academic dishonesty. Procedures for incidents of academic dishonesty will be consistent with the URI Student Handbook (see pp. 11-48) and Graduate School Manual (see Section 4.95). Academic action may include, but is not limited to: (1) awarding a final course grade of "F"; (2) awarding a failing grade on the test, paper, or assignment in question; or (3) requiring the student to retake the test or resubmit the paper or assignment. As per the URI Student Handbook, the instructor will send written notice of the allegation of academic dishonesty to the instructor's dean, the student's academic dean, and the dean of students. In addition, the instructor is

required to notify the student's Major Professor and Program Director. Notice to the Program Director must be in writing. The Program Director will file the documentation in a separate file in their office to allow for awareness of repeated incidences of academic dishonesty. While all violations of academic honesty are considered serious, some infractions may be particularly severe. Egregious infractions of academic dishonesty may require notification of the entire clinical faculty to determine if further administrative action is warranted (e.g., termination from program or other academic consequence). Please see the URI Student Handbook for student appeal procedures (see p. 45).

Policy on Use of Social Networking & Social Media

It has become common for people to have a significant presence on or usage of electronic social media (e.g., Facebook, Twitter, Tumblr, personal webpages, YouTube, Instagram, etc). The purpose of this policy is to provide some guidelines about any public representation of you or the URI Clinical Psychology program in social media. While this policy applies to current common and popular forms of social media, nothing here is intended to limit it to only these public presentations.

1. If your social media posts do not include any mention or indication of the fact that you are a clinical psychology doctoral student or that you are part of the URI PhD program in Psychology (Clinical), you can represent yourself as you wish in the public domain. However, increasingly, universities, internship sites, and even clients are seeking out information about people on the web and social media before they make faculty offers, final match decisions, or even decide to see someone clinically. There are now numerous anecdotes of well-qualified Ph.D. graduates not getting post-doc or faculty offers because someone viewed something that was considered to be inappropriate or objectionable on the candidate's Facebook page or in Twitter. Similar stories about internship sites deciding not to match someone also exist. For your own potential future, we would advise that before you put anything up on the web as representing yourself, you seriously consider how that material may be viewed by future employers, internship sites, or clients.

2. Decisions to connect socially with former or current clients online should be made as if the client were in person, i.e., by keeping professional boundaries very clear. Under no circumstances should you "friend" a former or current client on social networking sites, or otherwise accept or solicit personal connections with former or current clients online. Your relationships with former and current clients must remain strictly professional.

3. Under no circumstances should you discuss client cases or share client identifying information in emails, listservs, websites, web groups, or blogs, include any information that could lead to the identification of a client, or compromise client confidentiality in any way. Even if you think you have de-identified client information, consider how such communication could be viewed if seen by the client or someone who knows the client. You are not in control of this information once it is released to the hundreds or thousands of people on a listserv or web group discussion board, for example, or on a website that will "live" electronically online for years.

4. If your social media posts DO identify you as a clinical psychology graduate student or as affiliated with the URI Psychology PhD program, then the URI PhD program does indeed have some responsibility for how you (or it) is portrayed. Your social media posts must meet all legal and ethical guidelines from the Board of Psychology and the American Psychological Association (e.g., you cannot represent yourself as a "psychologist" in the State of Rhode Island); your posts must be professional in their content and must not contain objectionable material. We will not actively search out URI PhD students' social media posts. However, if we

become aware of posts that identify you as a clinical psychology student or as a student in the program and that post(s) is considered by the program faculty to be unethical, illegal, or to contain objectionable material, we will ask you to modify or remove the problem material. Should you choose to not modify or remove the material, the Director of Clinical Training in consultation with the Clinical Faculty and Department Chair will follow the existing procedures for dealing with student misconduct and/or unethical behavior.

Student Role in Program Governance

The following opportunities exist for students to be involved in program governance.

Representation at the Clinical Faculty meetings

The Clinical Faculty meet on the second Monday of each month unless otherwise specified in the Department of Psychology Calendar. A student representative is selected by the clinical students to attend meetings.

Representation at the Psychology Department Faculty meetings

These meetings are held on the first Monday of each month, unless otherwise specified in the Department of Psychology calendar. A student representative is selected by the clinical students to attend meetings.

Representation on the Inclusion and Diversity Committee (IDC)

In 1996, the Department of Psychology formed the first Task Force on Multiculturalism and Diversity. The Task Force made recommendations to the Department of Psychology in the areas of curriculum, conflict resolution, evaluation of departmental multicultural climate, and development of the focus area in multicultural psychology. Each program selected a student to represent the program at Task Force meetings. In 2017, the Task Force was disbanded to allow for the creation of a permanent committee, the Inclusion and Diversity Committee. Graduate students and faculty from each program serve on the committee. Undergraduate students and staff are also represented when possible.

Clinical Psychology Graduate Student Organization

The Clinical Psychology graduate students have an organization led by the PCC assistant or an elected leader. Students meet once a month during the PCC meeting time. Concurrently, faculty supervisors hold their monthly meeting. The student leader/PCC assistant acts as a liaison to the DCT. Students use this meeting actively and typically have a written agenda, adopt goals, and keep minutes. These meeting notes determine the agenda for the next Quality of Clinical Training Committee meeting.

Representation at the Graduate Student Association meetings

This group serves as a liaison between clinical students and other URI graduate students.

Evaluation of Students

Student evaluations are conducted annually by the program. Student progress in the program is assessed in two ways (a) through formal yearly evaluations by the clinical program faculty; and (b) by an annual review by the student's program committee. The clinical faculty evaluation consists of reviewing the student's course grades, practicum evaluations, other clinical evaluations, research evaluation, teaching or other assistantship evaluations, departmental/program service, and student's professional conduct. The faculty discuss this information and the major professor completes a written evaluation which is returned to the student. If the major professor is not a member of the clinical faculty, the clinical advisor writes the evaluation. See the Clinical Psychology Brightspace page for the Faculty Annual Student Evaluation Form. Students are required to provide a self-evaluation using the Annual Student Evaluation Form (see Clinical Psychology Brightspace page. Students have the opportunity to discuss both the faculty and self-evaluation with either the DCT or their major professor/clinical advisor. The student, DCT, and major professor/clinical advisor sign both forms acknowledging receipt of the information. Copies of the evaluations are kept in the student's file. Factors that could be taken into account in determining whether a student remains in good standing include: maintenance of a 3.0 GPA (see Graduate Student Handbook), serious personal or emotional disturbances affecting one's ability to perform as a scientist-practitioner or to function in the program, scientific misconduct, failure to make adequate progress toward degree requirements, and unsatisfactory performance evaluations on externships or practica.

For students whose progress is less than satisfactory, specific program requirements which are to be completed and deadline dates for completion are indicated, as well as consequences for noncompliance. A Remediation Plan (see Clinical Psychology Program Brightspace page) may be instituted including guidance regarding specific steps necessary to address identified problems. Written feedback is provided as to whether the student has successfully met the goals of the remediation plan. In the unlikely situation that remediation has not been successful, a possible consequence is a recommendation to the graduate school that the student be terminated from the program. In addition to the above procedures, the graduate school requires annual status reports of student progress to be submitted by the student's major professor and program committee. Additional information is contained in Section 10 of the Graduate School Manual on scholastic standing.

To facilitate the evaluation process, we require that students provide information as requested by the Director of Clinical training and regularly submit updated copies of their curriculum vitae. An updated clinical practicum hours spreadsheet as described under *Documentation of Clinical Hours* should be submitted at the beginning of each fall semester.

Petitioning a Program Policy

Any program policy may be petitioned by a student. If a student wishes to petition a program policy, they may submit a letter to the Program Director detailing the rationale for the exception to the policy. If a student's Major Professor is in support of the petition, the student should provide indication of such in their letter. The petition will be reviewed by clinical program faculty, and written notice of the decision will be provided to the student. Students wishing to appeal this decision should resubmit a statement to the Program Director providing additional (e.g., new,

corrected, clarified) information. The statement will be reviewed by the clinical faculty, and students will be informed of the outcome in writing.

Policy on Outside Employment

Successful completion of the Clinical Psychology Program requires full-time effort. As such, if a student seeks employment off campus (not compensated by university funds), such employment should not conflict with the duties and responsibilities of their assistantship and satisfactory progress toward degree completion. Students should speak to their major professor before accepting such employment to ensure it does not conflict with progress towards degree requirements. All clinical work provided by students enrolled in the Clinical Psychology Program must be program-approved.

Communication

Listserv
There are several active listservs in the Department of Psychology. These include:

- Psychology Department list (**CHS Psychology Department** - chs-psychology-group@uri.edu)
- Clinical Program list inclusive of both faculty and students (**CHS Psychology Clinical Program** - chs-psychology-clinical-program-group@uri.edu)
- Clinical Program list for just faculty (**CHS Psychology Clinical Program Faculty** - chs-psychology-clinical-program-faculty-group@uri.edu)
- Psychology Department list for students (**CHS Psychology Graduate Students** - chs-psychology-graduate-students-group@uri.edu)

These lists provide the opportunity for announcements and active communication among students and faculty. Students are required to join the CHS Psychology Department, CHS Psychology Clinical Program, and CHS Psychology Graduate Students lists and are expected to check their email regularly. Important announcements will be communicated via these lists.

Mailboxes
All clinical psychology graduate students will be provided with a mailbox in the Psychology Department mailroom on the third floor of the Chafee Social Science Center or other buildings as appropriate. Students may receive mail addressed to them at: 142 Flagg Road, Department of Psychology, University of Rhode Island, Kingston, RI 02881. In addition, students will receive department and program announcements. Students are expected to check their mailboxes regularly.

Students will also have a message envelope in the PCC. Information about client appointments and other PCC information will be put in this mail envelope.

Contact information
Contact information for students is maintained by the Department of Psychology and PCC administrative staff. It is the student's responsibility to ensure that the Department, Graduate, and PCC Administrative Assistants have up-to-date telephone, mail address, and email addresses.

University Closings or Emergencies
The university maintains a comprehensive system to alert all faculty and staff of university closings or campus emergencies that includes sending text, voice and email alerts. All students will be asked their preferences for these alerts when setting up e-campus accounts.

Student Office Space and Keys

Students will be assigned office space on a temporary, yearly basis. For those students who have TA's or fellowships, the office space will be assigned by the Chair of the Psychology Department. For those students who have research assistantships, space will be allocated by the Principal Investigator of the research project. Other student offices will be allocated on an as needed or space available basis. Keys are obtained by providing a $5 deposit per key to the department administrative assistant.

Transfer Credit

Ph.D. students with a Master's degree in the same or a closely related area from the University of Rhode Island may apply up to 30 credits from the master's degree toward the Ph.D. program. In addition, a total of up to 9 credits combining transfer and advanced standing are allowed. In all cases, transfer credit is granted only when the request is recommended by the student's major professor and the Graduate Program Director and approved by the Dean of the Graduate School.

Waiver Process. Please note that transfer credits do not release a student from course requirements. Transfer credits reduce the number of credits required to graduate but do not necessarily remove the requirement to complete certain courses. In order to be released from a required course, a student must petition to be *waived* from the required course. The course waiver process is as follows: examination of the course syllabus and course grade by the student's program committee (headed by the Major Professor) with input from the URI course instructor. The decision about whether to waive the course is made by the student's program committee with consideration provided to course content and course grade. If a student's program committee has yet to be established, the clinical program director and major professor will make the decision of whether to waive the course, with input from the URI course instructor. Courses are waived only when the course grade is a B (minimum level of achievement) or higher and the content of the previously taken course has significant overlap with the course offered within our Program.

Residency Requirement

The Clinical Psychology Program requires completion of 90 credits for the award of the doctoral degree. The Program is conceptualized as a four-year program plus one internship year. The Department does not admit part-time students. The Doctor of Philosophy degree, as specified in the URI Graduate School Manual, requires that candidates must take at least 52 credits (58% of the required 90 credits) of their doctoral work in residence (attendance on campus in a regularly scheduled term). In addition, after satisfying qualifying exam requirements, the student must maintain residence by taking a minimum of 6 credits for at least two consecutive semesters. These requirements thus ensure that students will be involved in a minimum of 3 full time academic years

of graduate study (or the equivalent thereof), that at least 2 of the 3 academic years (or the equivalent thereof) will be at URI, and that at least 1 year of full-time residence at URI be maintained.

APA Membership and Insurance

All Clinical Psychology students are recommended to become student members of APA. In addition, each student must carry his or her own liability insurance prior to engaging in a clinical practicum or other clinical training experience. Such insurance coverage may need to be maintained throughout the Clinical Internship year, but students must assess those needs with their internship site. Student professional liability insurance is available through the APA Insurance Trust or the American Professional Agency. Students are required to submit proof of insurance (copy of first page of approved policy) to the Psychological Consultation Center Assistant and ensure that a copy of such is placed in their clinical folders.

Peer Mentor Program

The Clinical Psychology Program offers a peer mentor program in which incoming students are paired with a current student who serves as a peer mentor. The mentors make themselves available to help new students navigate their first term. Typically, one advanced student serves as the peer mentor coordinator, ensuring that all new students are matched to mentors, that mentor and mentee have contact information, and that there are opportunities for mentors and mentees to get together.

Information Sources

Important sources of information on university policy, procedures, and professional ethics are contained in the following.

1. Department of Psychology website can be found at Psychology Department Website
2. Graduate School Manual. This manual on all graduate school policies can be purchased at Campus Copy & Design in the Memorial Union or read online at Graduate School Manual.
3. Graduate school forms. These are available in the Graduate School in Quinn Hall or online at Grad School Forms.
4. University catalog. This is available from the Graduate Admissions Office in Quinn Hall or online at University Catalog
5. URI Student handbook. This is available in the Office of Student Life, Memorial Union, or online at URI Student Handbooks
6. Ethical Principles of Psychologists and Code of Conduct (APA, 2002) is distributed by the program and are available online at APA Ethics Code

The Clinical Psychology Faculty

Christopher Beevers, Ph.D. (University of Miami)
Prochaska Endowed Professor of Individual and Population Health, Director of Graduate Studies
Research Interests: Dr. Beevers' research centers on understanding why people develop psychological disorders, with an emphasis on depression and other affective disorders, and on using technology to help people feel better. His research asks two big questions: What causes psychological disorders, and what can we do about it? On the causes side, he uses technology, including artificial intelligence, to understand how everyday behaviors contribute to the onset and treatment of psychopathology. On the treatment side, he develops and studies digital interventions for psychopathology, including Internet-based and app-based treatments.
Professional Interests: Psychopathology; depression and affective disorders; risk and protective factors for psychological disorders; technology and artificial intelligence in mental health research; digital mental health interventions; Internet- and app-based treatments; and the use of technology to understand and improve psychological health.

Nathan Cook, Ph.D. (University of Rhode Island)
Assistant Professor
Research Interests: Research is focused on improving neuropsychological assessment, treatment, and rehabilitation for youth and young adults who sustain TBI (e.g., concussion) as well as those with neurodevelopmental conditions, primarily attention-deficit/hyperactivity disorder (ADHD), and associated cognitive vulnerabilities, such as processing speed and executive functioning.
Professional Interests: Health behavior-focused, concussion treatment and rehabilitation programs in youth

Ellen Flannery-Schroeder, Ph.D. (Temple University)
Professor
Research Interests: The nature of anxiety and depressive disorders in children and adults; efficacy of cognitive-behavioral treatment and prevention programs for children at risk for anxiety; parent training and the role of family factors in the onset, maintenance, and treatment of anxiety disorders.
Professional Interests: Cognitive-behavior therapy for anxiety and depressive disorders; individual, family, and group approaches to treating anxious youth; indicated prevention for children at risk for anxiety.

April Highlander, Ph.D. (The University of North Carolina at Chapel Hill)
Assistant Professor

Research Interests: Psychosocial mechanisms underlying symptom presentation and unequal mental health outcomes among children and families experiencing stress and adversity. Specifically, Dr. Highlander examines how socio-ecological factors and individual or dyadic characteristics (e.g., income, affect, emotion regulation, parenting practices) influence child and family well-being. Much of her work focuses on parent-mediated interventions (e.g., behavioral parent training programs) aimed at supporting early childhood psychosocial development. The overarching goal of her research is to enhance mental health care for underserved communities by identifying, implementing, and disseminating effective, culturally responsive interventions.
Professional Interests: Child and family mental health; psychosocial mechanisms underlying mental health disparities; stress and adversity; socio-ecological influences on child and family well-being; emotion regulation and parenting; parent-mediated and behavioral parent training interventions; early childhood psychosocial development; and culturally responsive mental health interventions for underserved communities.

Hector Lopez-Vergara, Ph.D. (University at Buffalo)
Assistant Professor
Research Interests: Dr. Lopez-Vergara's research interests focus on "unpacking" specific dysregulatory risk factors for psychopathology and substance use, with an emphasis on executive functioning, reinforcement sensitivity, and memory processes. Ongoing projects seek to test the psychometric properties of commonly used performance-based measures of cognition and motivation. "Unpacking" phenotypic heterogeneity of adjustment and psychopathology can increase experimental precision and advance our current mental health classification system, and hence is a necessary step in developing personalized medicine approaches that seek to build upon existing levels of treatment outcome efficacy. Interests also include social determinants of health, specifically the need to statistically test for the cultural equivalence of instruments when making inferences across historically underrepresented groups in science.
Professional Interests: Clinical interests include contrasting theoretical models that emphasize specific technical components vs. those that emphasize factors that are common across most bona fide psychotherapies (i.e., "the great psychotherapy debate"). Interests also include using etiological models to inform the development of personalized intervention strategies.

Mark Robbins, Ph.D. (Rutgers University)
Professor, Director of the Mental and Behavioral Health Counseling M.S. Program
Research Interests: Research interests focus on health promotion, disease prevention and decision-making particularly for planned change at both the individual level and on a population basis. Current efforts centered on a program of research utilizing the Transtheoretical model to understand decision-making and behavior change in stress management, organ donation & transplantation, & blood donation.
Professional Interests: Clinical health psychology emphasizing a cognitive-behavioral framework to develop and deliver behavioral medicine and health psychology interventions to adults in individual and group settings. Additional interests are in training development and delivery, motivational interviewing, stress reduction, including relaxation training and meditative techniques.

David Schnyer, Ph.D. (University of Arizona)
Professor, Chair of the Department of Psychology

Research Interests: Cognitive and neural systems that support memory and attention control in young and old healthy individuals as well as persons suffering from mental illness and traumatic brain injury. Additional interests include the cognitive neuroscience of mental processes—examining the neural structures and computational algorithms that contribute to non-declarative memory, associative memory, metamemory and attention/cognitive control with a range of methodological tools including lesion studies and functional brain imaging (fMRI and MEG/EEG).
Professional Interests: Relationships between sleep, emotional regulation, and cognition in normal and elderly populations as well as in individuals who experienced neurotrauma. This includes both laboratory sleep studies as well as the use of field monitoring methods for generating sleep/activity rhythms.

Jillian Sheer, Ph.D. (University of Rhode Island)
Assistant Professor
Research Interests: Research focuses on identifying biopsychosocial determinants, such as sexual and relationship violence, traumatic stress symptoms, and physiological stress reactivity, of alcohol and other drug use among sexual minority women and transgender and gender-diverse people.
Professional Interests: Interest in understanding multilevel factors that influence help-seeking and linkage-to-care efforts and in developing scalable and innovative in-person, telehealth, and digital health interventions tailored to sexual minority women and transgender and gender-diverse people.

Lynda Stein, Ph.D. (Kent State University)
Professor
Research Interests: Primary areas of interest include substance abuse and other risky behaviors in forensic populations, especially juveniles, and treatment and assessment of these behaviors including issues related to ethnic/racial bias. Dr. Stein is Principal Investigator or Co-Investigator on several NIDA-funded grants studying assessment and treatment of incarcerated juveniles. Targeted phenomena in these grants include group processes, reduction of substance use and risky sexual behavior, motivation to change, and more.
Professional Interests: Treatment integrity; assessment and treatment issues, including ethnicity/race as a moderator variable; bias in sample selection; treatment processes; drug and alcohol abuse; group processes; health disparities and public policy; professional training and development; substance abuse and crime; service delivery.

Nicole Weiss, Ph.D. (Jackson State University)
Professor, Director of Clinical Training
Research Interests: Dr. Weiss' program of research focuses on the co-occurrence of posttraumatic stress disorder (PTSD) and substance use disorder (SUD). Her basic research leverages intensive longitudinal data—such as ecological momentary assessment (EMA) and wearable biosensors—to evaluate dynamic and idiographic processes underlying PTSD symptoms and substance use over time. She is also interested in PTSD-SUD among systemically excluded and marginalized groups, including traumatic stressors unique to these populations (e.g., historical trauma, racial microaggressions) as well as cultural characteristics (e.g., acculturation, racial-ethnic identity) that influence their post-trauma

outcomes (e.g., SUD). Her treatment studies develop, implement, and evaluate culturally responsive and trauma-informed approaches for SUD.
Professional Interests: Trauma and substance use; intensive longitudinal methods; culturally responsive and trauma-informed interventions; and mental health disparities among marginalized and systemically excluded populations.

Lisa Weyandt, Ph.D. (University of Rhode Island)
Professor
Director, Interdisciplinary Neuroscience Program
Research Interests: Professor Weyandt's research interests concern the assessment and treatment of Attention Deficit Hyperactivity Disorder (ADHD), effectiveness of prescription stimulants at enhancing cognition, misuse of prescription stimulants, and executive functioning in clinical and non-clinical populations. She has also published numerous peer reviewed articles concerning an array of clinical neuroscience topics such as prescription opioid misuse, methodological limitations of brain imaging techniques, learning disabilities, and Tourette's Disorder.
Professional Interests: Professor Weyandt is a licensed psychologist and is interested in the assessment and treatment of various psychological disorders. She is also interested in facilitating communication among different branches of neuroscience.

The Clinical Emeriti Faculty

David Faust, Ph.D. (Ohio University)
Professor
Diplomate, American Academy of Assessment Psychology
Research Interests: Philosophy/psychology of science, clinical judgment, neuropsychology, and psychology and law. Current research includes such topics as the formation of false beliefs among clinicians and methods for correcting these and other sources of judgment error. Other studies have addressed psychologists and psychiatrists as expert witnesses, the capacity of mental health experts to detect simulated or malingered symptoms, and methods of neuropsychological assessment.
Professional Interests: Consultation and expert testimony in courtroom cases involving psychiatrists, psychologists and neuropsychologists.

Paul Florin, Ph.D. (George Peabody/Vanderbilt University)
Professor
Research Interests: Research interests focus on community change, particularly planned change which is designed as part of community wide prevention or health promotion programming. General questions revolve around how community conditions and individuals interact, how changes in community conditions, institutions and process are brought about and the effects of such changes on individual and collective well-being. Current efforts centered around three federally funded evaluations of community level alcohol and other drug abuse prevention programs.
Professional Interests: Primary professional identity and practice is focused on community level prevention and health promotion. Consultation, training and technical assistance are provided to communities; agencies and governmental units wishing to plan, implement or evaluate community approaches to prevention programming.

Lawrence C. Grebstein, Ph.D. (University of Kentucky)

Professor Emeritus
Research Interests: Development of an empirically derived family assessment scale based on an integrated eclectic model of family systems theory for use in applied family research; family of origin influences on personality and behavior.
Professional Interests: Brief psychotherapy with individuals, families and groups with special emphasis on adolescent problems, juvenile delinquency and substance abuse; psychotherapy supervision; consultation with third party health insurance carriers regarding reimbursement for mental health services, managed care and other policy issues.

Patricia J. Morokoff, Ph.D. (S.U.N.Y., Stony Brook)
Professor Emerita
Research Interests: Gender issues in sexuality; sexual assertiveness; HIV/AIDS prevention: prediction of risky sexual behaviors and interventions to increase safer sex behaviors; psychophysiological and hormonal factors affecting sexual functioning.
Professional Interests: Feminist therapy for couples and individuals with special emphasis on sexual and physical abuse problems; HIV/AIDS prevention through population-based intervention programs.

Additional Departmental Faculty Involved with Clinical Students

The following faculty often serves as major professors or committee members for clinical students, masters and doctoral research projects.

Ceren Gunsoy, Ph.D. (Iowa State University)
Assistant Professor (Behavioral Science)
Research Interests: The role of cultural background and values in social psychological processes. Specifically, the interpersonal and intrapersonal processes in cultural groups that emphasize the importance of moral reputation and collectivistic values.

Bethany Kotlar, Ph.D. (Harvard University)
Assistant Professor (Behavioral Science)
Research Interests: The use of mixed methods to explore the health and wellbeing of children and families, including non-nuclear and intergenerational families. She is particularly interested in the impacts of early-life adversity on child development and how families navigate adversity to maximize resilience.

John Robinson, Ph.D. (University of New Hampshire)
Professor, Psychology & Biomedical/Pharmaceutical Sciences
Research Interests: The use of rodents as models to understand human central nervous system function and dysfunction, with a particular interest in dementias.

Mollie Ruben, Ph.D. (Northeastern University)
Associate Professor, Director of Undergraduate Studies (Behavioral Science)
Research Interests: Social perception and the contribution of nonverbal behaviors to both how we perceive others and how we behave as the ones being perceived.

Amy Stamates, Ph.D. (Old Dominion University**)**
Associate Professor, Co-Director of the Behavioral Science PhD Program (Behavioral Science)

Research Interests: Methodological approaches to identify antecedents to and consequences of risky alcohol and drug use behaviors among emerging adults.

Christopher Urban, Ph.D. (University of North Carolina at Chapel Hill)
Assistant Professor (Behavioral Science)
Research Interests: Building statistical models to understand and predict complex behavioral processes

Ted Walls, Ph.D. (Boston College)
Professor (Behavioral Science)
Research Interests: Intensive longitudinal data; device-based tracking studies; citizen-centered health science; developmental aspects of health behavior

Manshu Yang, Ph.D. (University of Notre Dame)
Associate Professor, Co-Director of the Behavioral Science PhD Program (Behavioral Science)
Research Interests: Missing data, especially in group randomized trials, intensive longitudinal data using time-series or dynamic multilevel modeling, item response theory, growth curve modeling, and regime-switching state-space models with applications to intervention/prevention science, behavioral health, medicine adherence, development and validation of health-related quality of life measures.

PCC Director, Consultants, and Practicum Supervisors

Lindsey Anderson, **Ph.D., MHM**
Director, Psychological Consultation Center (PCC)

Ellen Flannery-Schroeder, Ph.D.
Clinical Supervisor
Director, Child Anxiety Program (CAP)

Jillian Scheer, Ph.D.
Clinical Supervisor
Director, Multicultural Therapy Clinic (MTC)

Krystal Morrison, Ph.D.
Clinical Supervisor
Adult Cognitive Behavioral Therapy.

Christine Trask, Ph.D.
Clinical Supervisor
Assessment

Prachi Kene, Ph.D.
Clinical Supervisor
Advanced Cognitive Behavioral Therapy

WHO'S WHO IN 2026-2027

Chair	David Schnyer
Director of Graduate Studies	Christopher Beevers
Director of Undergraduate Studies	Mollie Ruben
Director of Clinical Training (DCT)	Nicole Weiss
Co-Director of Behavioral Science Program	Manshu Yang & Amy Stamates
Director of Mental and Behavioral Health MS Program	Mark Robbins
Director of the Psychological Consultation Center (PCC)	Lindsey Anderson
Administrative Assistant to the Department	Jill Wainwright
Administrative Assistant to the Graduate Programs	Wendy Gallo
PCC Graduate Student Assistant	Sydney Iacoi
DCT Graduate Student Assistant	Dominique Sheldon
Chair of the Inclusion and Diversity Committee	Mollie Ruben & Jill Scheer

APPENDIX A

Checklist for Clinical Program Requirements

CHECKLIST FOR CLINICAL PROGRAM REQUIREMENTS

Fall 2025

Type of course		Course title	Number Credits
Methodology Courses:	_____	Experimental Design (PSY 532)	3
	_____	Advanced Quantitative Methods (PSY 533)	3
	_____	Research Methods and Experimental Design (PSY 611)	3
Core courses	_____	Physiological Psychology (PSY 601)	3
	_____	Cognitive Psychology (PSY 604)	3
	_____	Social Psychology (PSY 606)	3
	_____	History and Systems of Psychology (PSY 608)	3
	_____	Development (PSY 603)	3
	_____	Multicultural Mental Health (PSY 643)	3
	_____	Advanced Psychopathology (PSY 607)	3
Professional ethics	_____	Ethical and legal issues in psychology (PSY 666)	3
Therapy Course	_____	Psychotherapy Skills (PSY 642)	3
Assessment Course	_____	Cognitive Assessment (PSY 661)	3
Practica	_____	PCC Practicum 1	3
	_____	PCC Practicum 2	3
	_____	PCC Practicum 3	3
	_____	PCC Practicum 4	3
	_____	PCC Practicum 5	3
		ⓢOne of which is CBT	
		ⓢOne of which is multicultural	
Research	_____	Master's research (PSY 599)	6
	_____	Dissertation research (PSY 699)	18
Focus	_____	Elective 1	3
	_____	Elective 2	3
	_____	Elective 3	3
	_____	Elective 4	3
Clinical colloquium	_____	PSY 615	2
Externship	_____	PSY 670	2
Internship	_____	PSY 698	2

Other Program Requirements:

Multicultural Competency (Dept. requirement)
Qualifying Examination
Master's Thesis Proposal
Master's Thesis Defense
Comprehensive Examination
Dissertation Proposal
Dissertation Defense
Internship
Attendance at PCC staff meetings while a PCC staff therapist
Attendance at PCC Colloquium in the first two years of training
Case presentation in 2nd year of training
Case presentation in 3rd year of training

ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING OF CLINICAL PSYCHOLOGY PROGRAM MANUAL

I have read and understand the Clinical Psychology Program Manual at University of Rhode Island. My signature indicates my awareness of the following:

1. It is my responsibility to be familiar with Program, Department, and University regulations regarding student and faculty roles and responsibilities as well as degree and program requirements;

2. The Clinical Psychology Program expects both faculty and students to conduct academic, clinical, and research activities according to the American Psychological Association's (APA) Ethical Principles of Psychologists and Code of Conduct and within the laws and regulations governing the activities of psychologists in the state of Rhode Island;

3. All research activities involving human participants must receive approval from University of Rhode Island's Institutional Review Board on Human Subjects; and

4. Violations of Program, Department, University, APA, or Rhode Island codes, regulations, policies or law may lead to sanctions including termination from the Program.

Student Signature _____ Date _____

NOTE: A PDF copy of this signed form should be placed in your electronic clinical student folder.