



Graduate Student Handbook

**Clinical Psychology Ph.D. Program
with Major Areas of Study in
Geropsychology or Trauma**

Last revised: 6.29.21

Table of Contents

I. Introduction

- A. UCCS Graduate School Mission Statement
- B. Clinical Psychology Program Mission Statement
- C. Department Contacts

II. Training Model

III. Program Goals, Objectives, and Competencies

IV. Requirements

- A. Coursework
- B. Clinical Placements (practica)
- C. Master's Thesis (for those entering the Ph.D. program with a B.A. or B.S.)
- D. Master's Thesis (for those entering the Ph.D. program with a M.A. or M.S. from another institution)
- E. Comprehensive Examination Procedures
- F. Candidacy
- G. Dissertation
- H. Internship
- I. Graduation
- J. Transfer Credits
- K. Outline of Responsibilities
- L. Developmental Milestones for Doctoral Programs

V. Student Mentoring, Evaluation, Termination and Grievances

- A. Mentoring
- B. Yearly Evaluation
- C. Grades and Quality of Graduate Work
- D. Comprehensive Evaluation Policy
- E. Policy on Professional Conduct
- F. Policy Related to Trainees Who Experience Conflicts Working with Diverse Clients/Patients
- G. Policy on Public Professionalism Regarding Websites, Blogs, Email and Voicemail
- H. Policy on Professional Impairment: Students Demonstrating Lack of Clinical Competency and/or Judgment
- I. Student Termination
- J. Grievance and Appeal Procedures

VI. Sexual Harassment, Student Self-Awareness, Student Representation and Organizations, and Other Policies

- A. Sexual Harassment**
- B. Personal File/Portfolio**

- C. Self-Awareness and Personal Psychotherapy
- D. Student Representation
- E. Psychology Graduate Student Organization
- F. Faculty and Supervision Evaluations
- G. Communication
- H. Policy on Private Practice Settings
- I. Policy on Professional Liability Insurance
- J. Policy on Outside Employment
- K. Policy on Background Checks and Criminal History

VII. Financial Support

- A. Financial aid
- B. Fellowships
- C. Teaching Assistantships
- D. Grants and Research Awards
- E. Work Study
- F. Travel
- G. Colorado Residency Requirements

VIII. Other Resources

- A. Kraemer Family Library

IX. Appendices

- A. Financial Aid Office Flier
- B. Grants and Research Awards
- C. Professional Organizations
- D. Checklist for the First Year
- E. Policy and Guidelines on Telesupervision
- F. Policy for Telehealth Provision by Students

I. INTRODUCTION

Welcome to the Clinical Psychology Ph.D. Program at the University of Colorado Colorado Springs (UCCS). This handbook is designed to provide you with information about the program's requirements, policies, and procedures. It supplements the information available at the website for the Graduate School (<http://www.uccs.edu/~gradschl//>) and the UCCS Student Code of Conduct (<https://dos.uccs.edu/student-conduct>). To be fully informed of all important requirements, you should read all three of these documents in their entirety. It is your responsibility to be informed of all relevant requirements and procedures. You are required to sign the written statement (at the end of this document) acknowledging that you have received, read, and agree to the policies and procedures detailed in this handbook. Please return this statement to the Director of Clinical Training as soon as possible and no later than August 31 of the year you begin the program.

A. UCCS Graduate School Mission: As stated on its website – “The mission of the Graduate School is to promote excellence in graduate education and to facilitate and enhance the educational experience and opportunities for graduate students. The Graduate School has the responsibility for oversight and coordination of graduate programs, and for ensuring compatibility among programs and compliance with Graduate School Policies and Procedures.” It is decentralized with main contacts residing within the department of Psychology (see below). Contacts for Graduate School information are Leilani Feliciano (Director of Clinical Training), Sara Qualls (Associate Director of Clinical Training), Andrea Williams (Department Administrator), and David Dubois (Program Assistant).

B. Clinical Psychology Program Mission (with special notes by track)

The UCCS Clinical Psychology Doctoral Program with Major Area of Study in Geropsychology, adhering to the scientist-practitioner model, trains students in mental health diagnosis, assessment, and intervention for diverse adults and older adults, and basic and applied research on the psychological functioning of adults and aging individuals. Upon completion of the program, students will be prepared to work in a range of settings, including mental health clinics and clinical practices, hospitals or other integrated care settings, nursing homes, colleges and universities, state offices, research institutes, and as consultants to a wide variety of housing and social service providers to adults and older adults.

The UCCS Clinical Psychology Doctoral Program with Major Area of Study in Trauma Psychology trains students according to the scientist-practitioner model in mental health diagnosis, assessment, and intervention for adults who have experienced traumas, and in basic and applied research on the psychological functioning of adults with a trauma history. Upon completion of the program, students will be prepared to work in a range of settings, including hospitals and VA settings, mental health clinics and clinical practices, other integrated care sites, colleges and universities, state offices, and research institutes.

C. Department Contacts:

Daniel Segal (Department Chair) [\(dsegal@uccs.edu\)](mailto:dsegal@uccs.edu) (719) 255-4176

Leilani Feliciano (Director of Clinical Training (DCT)) [\(lfelicia@uccs.edu\)](mailto:lfelicia@uccs.edu) (719) 255-4174

Sara Qualls (Associate DCT)	squalls@uccs.edu (719) 255-8038
David DuBois (Department Program Asst.)	ddubois@uccs.edu (719) 255-4500
Laura Chandler (Department Administrative Asst.)	lchandl2@uccs.edu (719) 255-4661
Andrea Williams (Department Administrator)	awilliam@uccs.edu (719) 255-4158
Magdalene Lim (Director of the UCCS Aging Center)	mlim@uccs.edu (719) 255-8012

II. TRAINING MODEL

Knowledge and skills in clinical psychology and basic scientific psychology are the foundations on which the geropsychology and trauma psychology foci are built. Students in this program are preparing to be clinical psychologists first and foremost, with a focus on geropsychology or trauma psychology as their major area of study. Students entering this program are essentially agreeing to focus their work on aging or on trauma psychology rather than sampling the variety of populations and problems that might form the elective offerings in another program.

This program adheres to the *scientist-practitioner model of training* in clinical psychology, commonly referred to as the Boulder model. Under this model, professional psychologists are trained to be both scientists and practitioners with the goal of enhancing the interplay between science and practice. In emerging fields, such as geropsychology and trauma psychology, it is of utmost importance that practitioners add to the existing knowledge base regarding application strategies that are effective, and that scientists be informed of applied issues in shaping their pursuit of knowledge. Throughout content and applied areas of training, the program encourages awareness of and respect for diversity of culture, language, national origin, race, ethnicity, gender, age, disability, religious beliefs, sexual orientation, lifestyle, and other individual differences.

The curriculum will typically take 5 years of residence on campus and a 6th year allocated for an internship. Students complete 120 hours minimum of required and elective courses, a Comprehensive Examination, a thesis and a dissertation of original scholarship, clinical practica, and a 12 month clinical internship (off-site). This number may be higher depending on your individual circumstances. The clinical curriculum is designed to meet Colorado requirements for licensure as well as American Psychological Association accreditation standards. Students who enter the program with a B.A. or B.S. degree will earn an M.A. en route to the doctoral degree through the mechanism of the existing clinical M.A. program.

Since 2007 the program has been accredited by the Commission on Accreditation of the American Psychological Association (APA) (www.apa.org). We strongly encourage our students to join APA as a student member and begin to identify as an emerging professional in psychology.

The Major Area of Study in Geropsychology is supported by the recent approval of geropsychology as an officially recognized specialty by the APA. Professional geropsychology is defined as the specific area in professional psychology that applies the knowledge and methods of psychology to understanding and helping older persons and their families to maintain well-being,

overcome problems and achieve maximum potential during later life. Professional geropsychology appreciates the wide diversity among older adults, the complex ethical issues that can arise in geriatric practice, the intersection of physical and mental health concerns, and the importance of interdisciplinary models of care. Students in our program will have the opportunity to attend professional meetings and interact with experts in aging or related fields who are advancing our understanding of geropsychology.

Similarly, the Major Area of Study in Trauma Psychology is supported by the recent formation of Division 56 for trauma psychology as another officially recognized APA specialty. This growing division focuses on research, practice, policy development and education on trauma. The APA Division 56 website delineates the importance of professional trauma psychology as a sub-specialty field in Clinical Psychology. Trauma is pervasive with huge psychological, social, and financial costs. It is a primary risk factor for many major disorders. Critical scholarship and clinical training in trauma are essential. Students in our program will have the opportunity to attend professional meetings and interact with trauma experts who are actively shaping the field of trauma psychology. In 2020 Dr. Charles Benight, professor in the trauma track, stood up the Lyda Hill Institute for Human Resilience, <https://nihr.uccs.edu/>, which will serve as a major collaborator with the PhD trauma track clinical and research training.

III. PROGRAM GOALS, OBJECTIVES, COMPETENCIES, and TIMELINE

The clinical psychology doctoral program aims to develop competencies in psychology necessary for either professional practice or an academic or research career after graduation. Students will develop competencies in psychology necessary for providing psychological services, conducting research, and educating others.

Goal #1: Produce graduates who have the requisite knowledge and skills for entry into the professional practice of clinical psychology

Objectives for Goal #1:

- 1-A: *Demonstrate knowledge and increasing competence in clinical assessment*
- 1-B: *Demonstrate knowledge and skill in psychological and psychotherapeutic interventions*
- 1-C: *Demonstrate competence in the ethics and professional standards of clinical practice*
- 1-D: *Demonstrate knowledge and skill in clinical supervision and consultation that is commensurate with level of training*

Competencies Expected for Goal 1 Objectives:

- Knowledge of empirically-based clinical assessment techniques
- Competence in application and use of empirically-based assessment techniques with diverse adult populations
- Knowledge of empirically-based psychological interventions and therapeutic techniques, and their theoretical base
- Competence and practical skills in the delivery of empirically based psychological interventions and therapeutic techniques
- Competence at adapting interventions as needed to be sensitive to culturally diverse sources of difficulties and ways of seeking assistance
- Understand and use appropriate ethical behavior in the application of clinical work
- Understand and use appropriate professional standards for behavior in clinical work
- Knowledge of supervisory role and consultation processes

Goal #2: Produce graduates who are capable of conducting, evaluating, and disseminating research

Objectives for Goal #2:

- 2-A: *Develop attitudes and skills essential for life-long learning and scholarly inquiry*
- 2-B: *Develop knowledge and skills to conduct empirical psychological research*
- 2-C: *Develop knowledge and skills to disseminate research effectively to professional and lay audiences*

Competencies Expected for Goal 2 Objectives:

- Demonstrate intellectual curiosity and skills in acquiring information
- Demonstrate ability to review, integrate, and critically evaluate the literature in the field of scientific study
- Demonstrate knowledge and skill in designing research, and collecting and analyzing data
- Demonstrate ability to disseminate research to professional audiences

- Demonstrate ability to disseminate scientific and professional knowledge to the lay public

Goal #3: Produce graduates who demonstrate competence in knowledge and skills in their area of emphasis

Geropsychology

Objectives for Goal #3 (Geropsychology):

- 3-A: *Develop attitudes and beliefs about aging that are appropriate to the practice of geropsychology*
- 3-B: *Demonstrate knowledge and skills in professional practice consistent with competencies associated with graduate training within the Pikes Peak Model of Training in Geropsychology*
- 3-C: *Develop knowledge and skills to conduct empirical research in geropsychology*

Competencies Expected for Goal 3 Objectives (Geropsychology):

- Recognize and explore attitudes and beliefs about aging that influence clinical work with culturally diverse older adults
- Knowledge and awareness of values and skills of other professions and service delivery systems
- Knowledge of theory and research in social/psychological, biological, and health-related aspects of aging (e.g., normative and positive aging, cognitive changes and neuroscience, problems in daily living, and psychopathology in diverse populations of older adults)
- Knowledge of theory and skills in applying assessment instruments to diverse populations of older adults, including aging-specific instruments and application of general adult instruments to older adults
- Knowledge of theory and skill in using empirically supported clinical interventions appropriate for older adults in at least two practice settings
- Knowledge of theory and knowledge of effects of systems and environments on clinical work with diverse populations of older adults, and consultation strategies appropriate to them
- Successful completion of independent research in geropsychology demonstrating clear understanding and application of theory, research methodology, and appropriate statistical analyses.

Trauma Psychology

Objectives for Goal #3 (Trauma Psychology):

- Objective 3-A: *Acquire knowledge and skills in professional practice consistent with competencies associated with graduate training in Trauma Psychology*
- Objective 3-B: *Acquire knowledge and skills to conduct empirical research in Trauma Psychology*

Competencies Expected for Goal# 3 Objectives (Trauma Psychology):

- Demonstrate knowledge of theory and research in social/psychological, biological, and health-related aspects of traumatic stress (e.g., neurobiological developmental understanding of traumatic stress, psychopathological consequences of traumatic stress, strength based approaches to traumatic stress, social and cultural consequences of traumatic stress, review of all major theoretical approaches to traumatic stress).

- Demonstrate knowledge of theory and skills in applying assessment instruments to diverse populations of trauma survivors, including trauma-specific assessments related to common psychopathology and strength adaptation related to trauma (e.g., Posttraumatic Stress Disorder, Major Depression, General Anxiety Disorder, Substance Abuse/Dependence Disorder, Dissociative Identity Disorder, Posttraumatic Growth).
- Demonstrate knowledge of theory and knowledge of effects of systems and environments on clinical work with diverse populations of traumatized adults, and consultation strategies appropriate to them (e.g., working with combat veterans and their families, working with domestic violence survivors).
- Demonstrate knowledge of major theoretical approaches to empirical research in trauma psychology.
- Demonstrate knowledge of theory and skill in using empirically supported clinical interventions for trauma in at least two practice settings
- Demonstrate knowledge of advanced statistical modeling of change (e.g., latent growth curve modeling, structural equation modeling, multi-level modeling).
- Demonstrate knowledge of longitudinal research methodologies (e.g., multi-time point studies and management of missing data, cross lagged panel designs) and/or clinical research methods (e.g., randomized clinical trials conforming to Consort guidelines).
- Successful completion of independent research project in trauma psychology demonstrating clear understanding and application of a contemporary theory of traumatic stress, sophisticated research methodology, and appropriate statistical analyses.

Timeline for Program Completion

Completion of the Clinical Psychology Ph.D. program from the BA or BS starting point will typically take 5 years of residence on campus, with the 6th year allocated for internship. Students should expect this timeframe as the general rule pending unusual exceptions. Students typically earn their MA degree during the 3rd year in the program. Occasionally, students may complete their thesis within 1 or 2 years but will not earn the MA degree until all requirements are met.

Doctoral students (in both tracks) are advised that this is a 12 month program with clinical Practicum obligations during the summers. Clinical and research work are continuous without regard to the semester structures and students typically are funded to participate year round.

All clinical doctoral students must satisfy preliminary requirements (such as completion of MA thesis and coursework), pass the Comprehensive Examination, and complete the dissertation and pre-doctoral internship requirements prior to being granted the doctoral degree. The rate at which Comprehensive Examinations and dissertation requirements are met will vary with the individual student. Optimally, the dissertation also will be completed during the student's time on campus, before leaving for internship. Students must have their committee's approval of their dissertation proposal prior to application for internship. The faculty makes every effort to bring students to successful completion of the doctorate, as long as the students commit their full energies to the academic and professional objectives.

IV. REQUIREMENTS

A. Coursework: All students in the Ph.D. program in Clinical Psychology are required to complete 120 credit hours. Coursework follows based on specific Major Area of Study:

Required Courses for Ph.D. in Clinical Psychology (Geropsychology Track)	
5210 Psychology of Aging I	3
5220 Psychology of Aging II	3
5710 Clinical Skills Laboratory	3
5810 Research Statistics and Methodology I	4
5820 Research Statistics and Methodology II	4
5830 Applied Multivariate Techniques I - OR -	3
5840 Methods and Design for Analyzing Change	
6030 Research Practicum	3
6xxx Core Content Courses	12
6100 Developmental Psychology	
6110 Cognition	
6120 Neuroscience	
6130 Social Psychology	
History of Psychology – non-credit examination OR may take 6510 History of Psychology (1.5)	0
6610 Clinical Geropsychology I	3
6620 Clinical Geropsychology II	3
6720 Ethics and Practice Standards: Professional Development I	3
6730 Diversity of Culture and Family: Professional Development II	3
6740 Clinical Practicum	12
6780 Advanced Psychopathology	3
6790 Psychopharmacology	1
6850 Clinical Interviewing and Personality Assessment	3
6860 Cognitive Assessment	3
6870 Clinical Neuropsychology	3
6880 Clinical Neuropsychology Lab	4.5
6920 Psychotherapy	3
6930 Clinical Supervision and Consultation	1.5
7000 Masters Thesis	6
7030 Doctoral Research Practicum	3
8000 Dissertation**	30
9500 Independent Study***	Optional up to 7
Minimum credits required for Ph.D. in Clinical Psychology	120

* Each core content course is worth 3 credits and students are required to take each of the four courses, for a total of 12 credits. These courses ensure broad coverage in many core content areas of psychology (i.e., developmental psychology, cognitive psychology, biological psychology, and social psychology).

** A maximum of 15 dissertation credit hours may be taken before the Comprehensive Examination is completed.

*** Optional depending on student interests, space/supervision availability and credits needed for program completion.

Suggested Clinical Curriculum (Geropsychology)*		
YEAR 1		
Fall	Spring	Summer
5810 Research Statistics and Methodology I (4)	5820 Research Statistics and Methodology II (4)	6740 Clinical Practicum (1.5)
5710 Clinical Skills Laboratory (3)	6920 Psychotherapy (3)	
6780 Advanced Psychopathology (3)	6850 Clinical Interviewing and Personality Assessment (3)	
	6xxx core content course or 5210 or 5220 (3)	
YEAR 2		
Fall	Spring	Summer
6030 Research Practicum (3)	6870 Clinical Neuropsychology (3)	6740 Clinical Practicum (1.5)
6860 Cognitive Assessment (3)	6730 Diversity of Culture and Family: Professional Development II (3)	6880 Clinical Neuropsychology Lab (1.5)
6740 Clinical Practicum (1.5)	6740 Clinical Practicum (1.5)	
6720 Ethics and Practice Standards: Professional Development I (3)	7000 Master's Thesis (6)	
6xxx Core content course or 5210 or 5220 (3) *		
YEAR 3		
Fall	Spring	Summer
6610 Clinical Geropsychology I (3)	6620 Clinical Geropsychology II (3)	6740 Clinical Practicum (1.5)
6740 Clinical Practicum (1.5)	6740 Clinical Practicum (1.5)	6880 Clinical Neuropsychology Lab (1.5) **
6xxx Core content course or 5210 or 5220 (3)*	6xxx Core content course or 5210 or 5220 (3) *	
5830 OR 5840 (3) (advanced statistics courses)*	8000 Dissertation (3)	
6880 Clinical Neuropsychology Lab (1.5)	6880 Clinical Neuropsychology Lab (1.5) Comprehensive Examination***	
YEAR 4 and YEAR 5		
During these years, the student completes her/his dissertation requirements and the remaining courses		
6xxx Core content course or 5210 or 5220 (3)*	6xxx Core content course or 5210 or 5220 (3)* *7030 Doctoral Research Practicum (3)	6740 Clinical Practicum (1.5) History of Psychology Requirement
*6930 Clinical Supervision & Consultation (1.5)	8000 Dissertation (6)	
6740 Clinical Practicum (1.5)	6740 Clinical Practicum (1.5)	
6790 Psychopharmacology (1)	6880 Clinical Neuropsych Lab (1.5) **	
8000 Dissertation (6)		
6880 Clinical Neuropsych Lab (1.5)**		
YEAR 6		
INTERNSHIP		

* Course sequence is not important. The 4 core content courses, 5210, and 5220 may be taken in a different sequence based on availability without there being a preferred sequence. Students may choose which advanced statistics course they take - 5830 (Multivariate) and 5840 (Analysis of Change).

** Continuation of PSY 6880 after Spring of Year 3 is optional.

*** A maximum of 15 Dissertation credits (PSY 8000) may be taken before the Comprehensive Examination is completed.

Required Courses for PhD in Clinical Psychology (Trauma Track)

Course Name	Total Credits
6160 Trauma Psychology I	3
6170 Trauma Psychology II	3
5710 Clinical Skills Laboratory	3
5810 Research Statistics and Methodology I	4
5820 Research Statistics and Methodology II	4
5830 Applied Multivariate Techniques I	3
5840 Methods and Design for Analyzing Change	3
6030 Research Practicum	3
6xxx Core Content Courses	12
6100 Developmental Psychology	
6110 Cognition	
6120 Neuroscience	
6130 Social Psychology	
History of Psychology – non-credit examination OR may take 6510 History of Psychology (1.5)	0
6630 Clinical Trauma Psychology I	3
6640 Clinical Trauma II: Trauma Evidence-Based Treatments – take 2 courses on specific topics (e.g., Group Therapy, EMDR, Prolonged Exposure, CPT) that are each 1.5 credits	3
6720 Ethics and Practice Standards: Professional Development I	3
6730 Diversity of Culture and Family: Professional Development II	3
6740 Clinical Practicum	12
6780 Advanced Psychopathology	3
6790 Psychopharmacology	1
6850 Clinical Interviewing and Personality Assessment	3
6860 Cognitive Assessment	3
6870 Clinical Neuropsychology	3
6890 Clinical Trauma Assessment	4.5
6920 Psychotherapy	3
6930 Clinical Supervision and Consultation	1.5
7000 Masters Thesis	6
7030 Doctoral Research Practicum	3
8000 Dissertation**	30
9500 Independent Study***	Optional up to 7
Minimum credits required for Ph.D. in Clinical Psychology	120

* Each core content course is worth 3 credits and students are required to take each of the four courses, for a total of 12 credits. These courses ensure broad coverage in many core content areas of psychology (i.e., developmental psychology, cognitive psychology, biological psychology, and social psychology).

**A maximum of 15 dissertation credit hours may be taken before the Comprehensive Examination is completed.

*** Optional depending on student interests, space/supervision availability and credits needed for program completion.

Suggested Clinical Curriculum (Trauma Psychology)		
YEAR 1		
Fall	Spring	Summer
5810 Research Statistics and Methodology I (4)	5820 Research Statistics and Methodology II (4)	6740 Clinical Practicum (1.5)**
5710 Clinical Skills Laboratory (3)	6920 Psychotherapy (3)	
6780 Advanced Psychopathology (3)	6850 Clinical Interviewing and Personality Assessment (3)	
6160 Trauma Psychology I (3)	6170 Trauma Psychology II (3)	
YEAR 2		
Fall	Spring	Summer
6030 Research Practicum (3)	6630 Clinical Trauma Psychology I (3)	6740 Clinical Practicum (1.5)
6860 Cognitive Assessment (3)	6730 Diversity of Culture and Family: Professional Development II (3)	
6740 Clinical Practicum (1.5)	6740 Clinical Practicum (1.5)	
6720 Ethics and Practice Standards: Professional Development I (3)	7000 Master's Thesis (4)	
7000 Master's Thesis (2)		
YEAR 3		
Fall	Spring	Summer
6740 Clinical Practicum (1.5)	6740 Clinical Practicum (1.5)	6740 Clinical Practicum (1.5)
6xxx Core content course(3) *	6870 Clinical Neuropsychology (3)	6890 Clinical Trauma Assessment (1.5)
8000 Dissertation (3)	6xxx Core content course (3) *	
5830 Applied Multivariate Techniques I OR 5840 Methods & Design for Analysis of Change (3)	7030 Doctoral Research Practicum (3)	
9500 Independent Study (1-6)**	8000 Dissertation (6)	
6640 Clinical Trauma Psychology II (3)	**Comprehensive Exam	
YEAR 4 and YEAR 5		
During these years, the student completes her/his dissertation requirements and the remaining courses		
Fall	Spring	Summer

6930 Clinical Supervision & Consultation (1.5)	8000 Dissertation (6)	6740 Clinical Practicum (1.5 end of 4 th year only)
6740 Clinical Practicum (1.5)	6740 Clinical Practicum (1.5)	History of Psychology Requirement
8000 Dissertation (6)	6xxx Core content course (3)*	
6xxx Core content course (3)*	6890 Clinical Trauma Assessment (1.5)**	
6890 Clinical Trauma Assessment (1.5)**	6790 Psychopharmacology (1)	
6640 Clinical Trauma Psychology II (3)		
**Comprehensive Exam		
YEAR 6		
INTERNSHIP		
<p>* Course sequence is not important. The 4 core content courses may be taken in a different sequence based on availability without there being a preferred sequence. Students may choose which advanced statistics course they take - 5830 (Multivariate) and 5840 (Analysis of Change).</p> <p>*** Comprehensive are typically taken in Spring of the 3rd year or Fall or Spring of the 4th year. Please refer to the Comprehensive Exam manual</p>		

B. Clinical placements (Practica): To enroll for and begin a practicum, Ph.D. students must complete all required clinical courses that are listed in the 1st year sequence above, be a student in good standing, and maintain a GPA of at least 3.0. Students at various practicum sites will be required to undergo a background check before starting. Questions about practica requirements can be directed to faculty advisors, DCT, or the Associate DCT.

For each year of practicum, doctoral students should expect to spend approximately 16-20 hours per week at the site (although this workload may vary depending on the specific site, the specific year of training, and the nature of funding associated with that site). At least 5 hours per week must be in direct client contact. A minimum of 320 supervised hours of direct client contact and indirect client contact for each 12-month training period is required. The practicum must provide opportunities for training in clinical and diagnostic interviewing, psychological evaluation and assessment, and therapeutic intervention. The primary emphasis for these training years combines the expansion, integration, and refinement of diagnostic clinical interviewing and the utilization of recognized psychological testing instruments, as well as the acquisition, integration, expansion, and refinement of therapeutic intervention skills. Currently, students are being trained at several locations including:

- UCCS Wellness Center
- UCCS Aging Center (<http://www.uccs.edu/~agingcenter/>)
- Veterans Health and Trauma Clinic
(<http://www.uccs.edu/healthcircle/veterans-health-and-trauma-clinic.html>)
- Fort Carson Behavioral Health

- Colorado Springs VA
- Peak View Behavioral Health (Inpatient)
- Pikes Peak Hospice and Palliative Care
- Rocky Mountain Program for All-inclusive Care for the Elderly (PACE).
- NeuroHope

In prior years, we have had practicum training opportunities at a local nursing home and local hospitals. These settings and new ones may be reintroduced or developed in the future. Each doctoral student in the Clinical Psychology Program must receive at least one hour of weekly face-to-face supervision from a licensed mental health professional at a site approved by the DCT or Associate DCT; more commonly trainees have 2-5 hours of supervision weekly.

Practicum sites emphasizing assessment and psychotherapy skills must provide an acceptable combination of the following opportunities approved by the DCT or Associate DCT for students to:

- Perform direct interviews of clients (with the capacity for direct observation, audio and/or videotaping, to the extent this is allowed by the particular site)
- Conduct collateral interviews with pertinent informants when necessary
- Provide psychological testing with a variety of recognized instruments (preferably a mixture of objective, intellectual, and neuropsychological measures)
- Perform ongoing individual psychotherapy/counseling with clients (with the capacity for direct observation, audio and/or videotaping, to the extent this is allowed by the particular site)
- Provide psychotherapeutic services with couples, families, and/or groups
- Participate in interdisciplinary treatment planning and/or case management
- Receive individual and group supervision and didactic training from qualified professionals in the delivery of the above activities

At the completion of practicum, students should be able to use information from a variety of sources to: (1) provide diagnoses and recommendations supported by specific and relevant data, (2) formulate a case summary that is theoretically consistent and well organized, (3) write a psychological report in a style that can be understood by non-psychologists, (4) utilize multidisciplinary or interdisciplinary team data to inform case conceptualization, implement, direct, and manage a comprehensive treatment plan, and (5) evaluate the outcome of multidisciplinary or interdisciplinary team interventions.

The practicum program focuses on building basic skills in the first year of clinical services training and proceeds to integrate students into social services and health services in subsequent years. Typically, trainees have 2-3 supervisors overseeing their work in the different programs.

Geropsychology: A *typical* practicum sequence for doctoral students is described next. Please note, however, that practicum settings and experiences have changed and evolved over time in our program. As such, some flexibility is needed on your part as specific rotations are assigned to you for each practicum year.

YEAR 1: Students participate in a pre-practicum experience in the spring semester of Year 1 at the UCCS Gallogly Recreation and Wellness Center, Mental Health Services Clinic (MHS). Trainees typically begin the rotation by mid-January (usually around January 15th) and end on May 30th. Thus, students should be aware of this obligation before making travel plans for the winter break and summer break. Please consult with the Clinic Director to get the exact start and end dates for your cohort. The rotation at MHS involves 6 hours per week dedicated to training. Students will conduct individual psychotherapy with one or two clients at the clinic, receive clinical supervision, learn to create the appropriate documentation for services, take the role of a co-leader in groups, attend monthly staff meetings, and do case presentations in staff meetings. Further details about MHS and pre-practicum training at the clinic are available at the MHS website (<http://www.uccs.edu/recwellness/mental-health-services.html>). Under the training tab, click on the *Protocols, Procedures and Training Manual*.

YEAR 2: PhD Students will be assigned to the Aging Center, a mental health services training clinic in the Lane Center for Academic Health Sciences on the UCCS campus. A pre-orientation meeting will be held in mid to late April to learn about basic training and operational procedures at the Aging Center. The practicum training year typically starts the first Monday in June and ends in late May. Some engagement may be needed prior to the start of the rotation as incoming students may participate in therapy transfer sessions with outgoing students and their clients. Students typically participate in 3 training programs at the UCCS Aging Center: a) Psychotherapy program, b) Caregiver Services program, c) Memory Clinic. Clinical training hours are 16-20 per week for PhD students.

YEARS 3 and 4: Students typically participate in external training programs (e.g., Rocky Mountain Program for All-Inclusive Care for the Elderly (PACE)), Peak View Behavioral Health (inpatient), or Senior Outreach Services (SOS) in collaboration with Silver Key Senior Services. In addition, students complete the rotation in Clinical Neuropsychology at the Aging Center, and often do advanced training in psychotherapy, caregiving services, or neuropsychological assessment. Experience is gained in cognitive behavioral therapy (CBT), Psychodynamic, Family Systems, dialectical behavior therapy (DBT), brief strategic/solution focused, and group psychotherapy models.

Deviations from this guideline are managed on a case-by-case basis and must be approved by the DCT, the Associate DCT, the Aging Center Director, and the Department Chair. Students sometimes seek optional additional rotations in neuropsychological assessment at external sites. Students interested in pursuing an optional rotation should first contact the DCT who will coordinate with the Aging Center Director to facilitate the optional rotation placement. Factors taken into consideration when optional rotations are requested include: fulfillment of the standard practicum commitment, rotation availability, academic performance, student workload, and, on occasion, funding sources.

YEAR 5: Students select whether to continue clinical training during this year, based on career goals and funding requirements. It is possible that a student may be offered funding at a clinical site. In year 5, students also have the opportunity to teach an undergraduate course (for 1 or 2 semesters) for pay, depending on student interest and departmental needs.

Trauma Psychology: The anticipated practicum sequence for trauma psychology doctoral students includes:

YEAR 1 – Students are not assigned a clinical practicum.

YEAR 2: Students participate in practicum at the UCCS Gallogly Recreation and Wellness Center, Mental Health Services Clinic (MHS). The rotation at the Wellness Center involves 15 hours per week. Students will conduct individual psychotherapy with clients at the clinic, receive clinical supervision, learn to create the appropriate documentation for services, take the role of a co-leader in groups, attend monthly staff meetings, and do case presentations in staff meetings. Further details about MHS and pre-practicum training at the clinic are available at the MHS website (<http://www.uccs.edu/recwellness/mental-health-services/training.html>).

Under the Training tab, click on the *Protocols, Procedures and Training Manual*.

YEAR 3: Most students will participate in the Emergency Department practicum. Students will be co-located at Children's Hospital, UC Health Hospital, and Centura (Penrose) Hospital and at the VHTC for a practicum involving acute, trauma- focused behavioral health care services for patients sustaining physical injuries. This stepped care model will allow students to practice acute intervention in the hospitals, and telehealth and technology-infused practices and long-term therapy for patients requiring longer term care.

Students may participate in training programs at the Veterans Health and Trauma Clinic (VHTC) once they have acquired their MA degree. This practicum focuses on general psychotherapy and military and veteran trauma issues, CBT for depression, acceptance and commitment therapy (ACT), EMDR, CBT- Prolonged Exposure, and cognitive processing therapy.

YEARS 4 and 5: Students participate in community collaboration settings as available. If they have not yet completed the VHTC placement they will be placed there unless an alternate placement is agreed upon with the Director of the Trauma Track. Potential sites include:

- Colorado Springs Veterans Administration – Integrated behavioral health services; Substance abuse, CBT for depression, acceptance and commitment therapy, EMDR, CBT-Prolonged Exposure, cognitive processing therapy.

- Fort Carson Behavioral Health – integrated behavioral health services for Army soldiers
- Peak Vista Community Health Centers (Women’s Health Clinic, Refuge Clinic, Homeless Clinic) - Integrated Primary Care, CBT for depression, ACT, EMDR, CBT-Prolonged Exposure, Cognitive Processing Therapy
- TESSA (Women’s Domestic Violence Safehouse) CBT for depression, ACT, EMDR, CBT-Prolonged Exposure, Cognitive Processing Therapy
- UCCS Wellness Center - Veteran Trauma Issues, CBT for depression, Acceptance and Commitment Therapy (ACT), EMDR, CBT-Prolonged Exposure, Cognitive Processing Therapy
- Emergency Department practicum – Children’s Hospital, UC Health Hospital, and Centura (Penrose) Hospital

TRACKING HOURS: Students in *both* tracks are required to track their clinical hours from the start of their clinical training. The Association of Psychology Postdoctoral and Internship Centers (APPIC) provides detailed information about tracking hours necessary for internship application. Please refer to the APPIC website at www.appic.org for further information. Additional training is available from the DCT/ADCT on how to use Time2Track to support the detailed level of tracking you need to do throughout the program in order to have information easily available for internship applications. The department provides your subscription to Time2Track while you are in the program.

PRACTICUM PERFORMANCE COMMUNICATION: Doctoral training involves collaboration and partnerships with multiple training sites, including practicum placements, doctoral internship training programs, and others, such as research labs and other academic departments. Communication between doctoral training programs and these training partners is of critical importance to the overall development of competent new psychologists. Therefore, it is the position of our training program that regular communication about students’ performance and progress must occur between the program faculty and other training partners, and that the content from this communication will contribute to regular evaluation of the student’s progress.

C. Master’s Thesis (for those entering the Ph.D. program with BA or BS): An empirical thesis is ideally completed, defended, and submitted to the library in the spring semester of the student’s second year. Students must successfully defend their thesis with 3 faculty (2 of whom must be psychology faculty). This must be completed by January of their third year to be eligible to take the Comprehensive Examination in that spring semester. You are required to follow graduate school rules to have your M.A. degree conferred. In the fall and spring of your second year, the department offers a graduation meeting in which all forms, policies, and procedures for graduation and thesis submission are outlined, so attendance is critical. For questions about earning your master’s degree as part of your doctoral degree contact the department administrator, Andrea Williams.

D. Master's Thesis (for those entering the Ph.D. program with a master's degree from another institution): Students transferring into the Ph.D. program, who have obtained a master's degree from another institution, must complete a master's thesis at UCCS unless they have completed an acceptable master's thesis elsewhere. If an entering doctoral student has previously completed an empirical master's thesis, it must be approved by the DCT and Associate DCT to count as an equivalent to the thesis requirement in the UCCS program. This approval will be done before students enroll in courses.

E. Comprehensive Examination Procedures: As stated by the UCCS Graduate School's Policies and Procedures (<http://www.uccs.edu/graduateschool/current-students/policies-and-procedures.html>), a comprehensive examination will be given in the field of concentration and will test the student's mastery of a broad range of knowledge, not merely the formal coursework that has been completed. The comprehensive examination shall be conducted by an examining board of at least two members appointed by the DCT. Both members must vote affirmatively for the student to pass. A student who fails the examination may not attempt it again until at least two months have elapsed. The student may retake the examination only once. A second failure results in dismissal from the program.

The Comprehensive Examination Portfolio Guidelines and Policy is updated regularly and can be found on the UCCS Psychology Department website - Graduate Downloads: <https://www.uccs.edu/psych/downloads>

F. Candidacy: A student who wishes to become a candidate for the doctoral degree must file an Application for Admission to Candidacy on-line. Admission to candidacy will be granted only to students who have completed a significant fraction of the required course work and have passed the Comprehensive Examination. Students are encouraged to apply for candidacy the semester they complete the Comprehensive Examination successfully. Candidacy is a requirement to apply for internship.

G. Dissertation: Students form a committee of five members of the CU Graduate Faculty, one of whom must have primary appointment outside of the psychology department or discipline. At least three members must be members of the psychology department faculty. The committee must be approved by the Director of Clinical Training. Students will propose their dissertation project before this committee who must agree to the scope of the project. The completed dissertation is defended before the same committee as well as interested members of the campus community. Typically, the dissertation proposal is completed after the student has advanced to candidacy. However, in some situations a student may wish to propose their dissertation prior to completion of their comprehensive exams. In these cases, students must obtain permission from the DCT or Associate DCA and their mentor.

For additional Dissertation Guidelines, attend the graduation orientation meeting and see the Graduate School website: (<http://www.uccs.edu/graduateschool/current-students/policies-and-procedures.html>).

H. Internship: The program requires the completion of a one-year clinical internship. A student may not apply for an internship until completing all requirements up to and including approval of the dissertation proposal. The internship must be APA-accredited (an APPIC-accredited internship may be acceptable under certain circumstances, with approval of the DCT), but there are no other restrictions placed upon the types of internships to which students may apply.

Communication between doctoral training programs and internship programs is of critical importance to the overall development of competent new clinical psychologists. The predoctoral internship is a required part of the doctoral degree, and while the internship faculty assess the student performance during the internship year, the doctoral program is ultimately responsible for evaluation of the student's readiness for graduation and entrance to the profession. Therefore, evaluative communication must occur between the two training partners. The DCT communicates with the internship site Training Director from early in the training year and continuing throughout the year on an as needed basis. Semi-annual reviews (mid-year and end-of-year) will be provided by the internship to the DCT. A letter from the internship director confirming the student's satisfactory completion of the internship must be received by the program before the doctoral degree will be awarded.

The internship typically provides a flexible, individualized, and coordinated set of learning experiences. It allows the student an opportunity to practice and expand previously learned skills, to develop additional clinical skills, to experience personal and professional growth, culminating in the development of a well-rounded, competent clinical psychologist. Generally, the goals of internship are to provide the student with: (1) continued development of diagnostic skill with a variety of assessment procedures as applied to a variety of individual and social problems; (2) greater familiarity and skill with psychotherapeutic techniques and processes, and exposure to a variety of approaches to problem intervention; (3) appreciation of the roles of other disciplines and skill in communicating meaningfully and working constructively with them; (4) increased awareness of the special problems involved in clinical research and emerging clinical issues; and (5) intensified professional identification with Clinical Psychology.

Comprehensive information about internship sites is maintained by APPIC. However, the DCT Assistant maintains a resource file for information on internships which have been visited by students from this program. Students are encouraged to contribute to it once they are finished to keep the materials up-to-date.

As with our other student records, internship evaluations sent from the internship site to the DCT are compiled and maintained in the locked office of our Administrative Assistant, David Dubois. We have used paper files, but are in the process of transitioning to electronic records. These documents are maintained indefinitely after graduation, given that we often have alumni seeking confirmation of their training many years after their graduation.

- I. Graduation:** The faculty have set a policy such that doctoral students will be allowed to walk through the May graduation ceremony and receive their hood if all of the following conditions have been met: 1) the student's dissertation has been successfully defended and submitted to the library with any required revisions approved by the chair, 2) all coursework (including practicum courses) are completed, and 3) the student is in good standing with his or her clinical internship at the midpoint of the training year. Note: Walking through the ceremony does NOT imply formal graduation from the program. The student will officially graduate upon full completion of all program requirements, including full completion of the 1 year clinical internship. It is possible for students to graduate at the end of the summer session, if they meet all the deadlines for this, including completion of internship by the summer deadline.
- J. Transfer Credits:** Requests to transfer graduate courses from other graduate institutions must be made to the DCT via email. Typically this request is made after the student has accepted admission into this PhD program but before the student officially enrolls in classes. The request must include the formal syllabi from the previous course(s) as a primary basis for our evaluation of the equivalency of the classes. In some cases, the student also may be asked to provide additional information about the course, such as relevant catalog descriptions and assignments. Upon receipt of the request and the syllabus or syllabi, the transfer request will be reviewed by the DCT and/or Associate DCT who will either approve or deny the request within 2 weeks. Awarding transfer credit is determined on a case-by-case basis, following this process.

Should approval be given by the DCT and Associate DCT, the accepted list of transfer credits and courses will be documented on the student's curriculum plan with Andrea Williams. Transfer requests will not be considered if they are submitted after October 1st of the student's first semester in the PhD program. A Transfer of Credit form must be completed and approved by the Graduate School before graduation. Some courses may count toward waiving required content but not transfer as credit toward your degree. Any waived courses will also be documented on your curriculum plan.

- K. Outline of Responsibilities:** By the time students are into their second year of the program, they find themselves handling a variety of responsibilities and must

budget their time accordingly. These responsibilities include ***research, clinical work (practicum), classes, and assistantships related to the student's sources of funding.*** It is important that students note that in most cases their assistantships require time in addition to their other responsibilities. Assistantships may occur at a UCCS clinic or research lab where the student is engaged in learning experiences, but the assistantship work may or may not overlap with the learning experiences. For example, a clinical research assistantship located within the UCCS Aging Center or the Veterans Health and Trauma Clinic may be completely separate from both the clinical training rotation. Similarly, a research assistantship may fund the student to work on a project in the same lab in which the student is gaining research experience. The funded assistantship may require work that is unrelated to the student's other responsibilities to the lab or the student's own thesis work. Note that each individual student will have her/his unique allotment of work in clinic, lab, classroom, and perhaps even a teaching/research/clinical assistantship that will differ from other students. Also note that the total workload in these 4 primary areas will vary across semesters and years.

L. Developmental Milestones for Doctoral Programs: Continuing, regular, and accountable monitoring of student progress in the UCCS Clinical Psychology PhD program is essential, both for the integrity of the training program and for the benefit of students as they work to attain competence in the discipline. Below is a list of milestones that we provide to students to ensure they stay on track in their progression throughout the program. This list includes aspirational goals for your research progress, as well as more firm deadlines for completion. Failure to meet a milestone may occur for reasons outside one's control, which will be addressed on an individual basis. However, missing a milestone may subject the student to a variety of possible sanctions, including, but not limited to, the following: restriction or suspension in ability to take courses; restriction or suspension of clinical duties for practicum; reduced preference for ongoing funding; reduction or elimination of student funding; probation; and termination from the program.

Thesis Proposal: The program *prefers* for students to defend their thesis proposal before their committee by either late spring of their first year or early fall of the second year. Students are *required* to successfully pass their thesis proposal no later than December 1st of the student's third year in the program or, as consequence of not meeting the milestone, the student will be placed on probation. Failure to successfully pass the thesis proposal by the beginning (August 1st) of the student's 4th year in the program may be grounds for dismissal from the program.

Thesis Defense: The program *prefers* for students to defend their thesis by the end of their second year in the program (May 1st), and are *expected* to pass their thesis defense no later than December 15th of the student's third year in the program, or possible sanctions may occur depending on the reasons for the delay. At the latest, students are *required* to defend their theses by the end of the Fall semester of their fourth year. If not, they will receive an "unsatisfactory" evaluation and remediation plan implemented. Two consecutive unsatisfactory evaluations may result in dismissal from the program.

Dissertation Proposal: Students are *expected* to defend their dissertation proposal before their committee by spring or summer of the 4th year. Students are *required* to successfully pass their dissertation proposal defense no later than October 1st of the year in which the student applies for internship (typically Fall of year 5).

Dissertation Final Defense: Students are generally expected to pass their dissertation final defense no later than the last day of the student's clinical internship. Successful defense of the project should occur by December 1st following completion of the clinical internship year. If not, the student may receive an unsatisfactory evaluation and repeated unsatisfactory evaluations may result in dismissal.

Comprehensive Examination: Regarding the Comprehensive Examination, each student will ideally complete the Examination by the end of year 4 in the program (by May of year 4). Students *must* successfully complete the Comprehensive Examination by the end of Fall semester of year 5 in the program (December of year 5).

Internship Application: Students typically apply for Internship in the Fall of year 5 in the program. To be eligible to apply for Internship, the student must be in good standing in the program, having been admitted to candidacy after passing the Comprehensive Examination, and the Dissertation Proposal defense. NOTE: Students are required to pass their dissertation proposal hearing *before* applying for internship. Specifically, each student must successfully complete a proposal meeting in front of their approved committee, and be judged by the committee to have passed the proposal, including all required revisions recommended by the committee and approved by the Chair of the student's dissertation project. The proposal meeting and required proposal revisions must be completed by October 1st of the year in which the student is applying for internship. As such, the proposal meeting should be scheduled well before the October 1st deadline, in order for the student to have ample time to make any revisions required by the committee. The student will **not** be able to proceed with the internship application process until the proposal has been successfully defended, including successful completion of revisions. Faculty will not submit letters of recommendation for internship and the DCT will not verify that the student is eligible for internship until this requirement has been met.

Program Completion: Students are expected to complete all Ph.D. requirements (including internship) within 9 years according to the rules of the Graduate School. A minimum of 4 years in residence is required (post-BA/BS) although 5 years in residence is the expected norm. Students are subject to termination from the program if this requirement is not met.

V. STUDENT MENTORING, EVALUATION, TERMINATION, AND GRIEVANCES

A. Mentoring: The clinical program follows a mentorship model. During the admissions process, each student typically identifies potential faculty mentors, based on mutual research interests within the application. Admissions is typically granted directly into a lab by invitation of a mentor. Your mentor will be a highly important person for you here, one who will hopefully give you a great research experience, advise you throughout graduate school, and help you to some extent throughout your career. Thus, accepting an invitation into a mentor relationship is a very important task, and one that should be done with a great deal of thoughtfulness.

One of the best ways to get information about a mentor and a lab is to speak to current students in the lab. Even if you have already selected a mentor, you are strongly encouraged to speak to current lab members to get their perspectives on the lab and how it runs so that you will be prepared to make the relationship a success. It is also

very important to ask your potential mentors to lay out for you the expectations they have of students in the lab so that you can determine if their expectations and work styles match yours. It is important to determine if you “fit” well with your mentor and select someone with whom you feel confident you can develop a positive working relationship.

The faculty mentor maintains responsibility for consultation with his/her advisees on all academic and research matters. Most students maintain the same mentor throughout their studies. However, in some cases, interests change or work styles are not compatible. Students and faculty are encouraged to work together professionally when a change in mentors is desired. Students desiring to change mentors should discuss this with their present mentor in a timely manner and at least before a final decision is made. As they are considering a change in mentors, it is understood that students may wish to consult peers, other faculty, the DCT, the Associate DCT, and/or the Department Chair, but they should not proceed to work with a new mentor before notifying their present mentor and making an official change with the DCT. Because the mentor relationship is essential for completion of the thesis project, students who are unable to secure, or maintain a relationship with a research mentor may not be able to progress in the program. If this is the case, please meet with the DCT or Associate DCT to discuss your options.

Likewise, should a change in tracks be desired (from/to the Major Area of Focus in Geropsychology from/to the Major Area of Focus in Trauma), the student should discuss this with their present mentors, the DCT, the Associate DCT, trusted faculty members, and/or the Department Chair. Should a switch in tracks be desired, the student must follow the following procedure:

Procedure for a student wishing to switch from one Clinical Psychology PhD Major Area of Focus (from/to either Geropsychology or Trauma Psychology) to Another:

- 1) The student must formally reapply to the desired Clinical Psychology PhD Major Area of Focus during the normal application period (annual due date December 1st).
 - a. Students' applications will be “fast-tracked”, which is a process used in the Graduate School for current enrolled students in that they can utilize materials from their original application (copies of GRE scores, copies of previous transcripts, informal transcripts for current graduate studies at UCCS)
 - b. Students will need to upload an updated CV and an updated personal statement
 - c. Students may choose to upload new letters of recommendation
 - 2) The application will then be considered with the pool of current applicants for that Major Area of Focus
 - 3) If accepted, a curricular review by the Clinical Committee will occur to ensure that the student has met all required competencies by track
- If rejected, the student may choose to stay within the current track (provided that they are making adequate progress)

Practical aspects of the program are available from other sources beyond the individual mentor. Additional information for first-year students is offered by the Graduate

School through the website for the Graduate School (<http://www.uccs.edu/~gradsch1/>) or through <https://graduateschool.uccs.edu/current-students/current-student-resources>. A more formal orientation session is conducted for all entering clinical students by the DCT and Associate DCT upon arrival on campus.

It is very helpful for students to meet with Andrea Williams, Program Assistant for the Psychology Department, regarding their schedules before/when they first arrive, and at the beginning of each fall semester. Students meet with Andrea for planning purposes to make sure they are taking the correct courses and to create an academic course plan for their time at UCCS.

B. Yearly Evaluation: At the end of each spring semester (in May), every student in the clinical training program will be reviewed by the clinical faculty to determine whether the student is making appropriate progress in his or her clinical skill development and development as a scientist/scholar. The initial step in this review process involves the solicitation of feedback from faculty with whom the student has worked during the year, including the research mentor, instructors in organized classes, supervisors in practica, and supervisors in relevant graduate assistant roles. This feedback is organized by the DCT or Associate DCT and is reviewed and discussed by the entire clinical faculty. Each student is provided with a written summary of the clinical faculty's evaluation. The feedback indicates to students a clear message concerning whether their performance is viewed as (a) adequate, and if appropriate, recognition of recent accomplishments, or (b) whether any concerns or deficiencies have been noted. In the latter case, appropriate remedial steps with specific timelines are stated and the DCT or Associate DCT confers with the student regarding these corrective steps. If a student is demonstrating poor or impaired performance or has evidenced behavior in violation of program policy, a specific set of procedures is followed as outlined below in the Student Termination section of this handbook.

A midyear evaluation is conducted at the end of each fall semester (in December) in which each student in the program is reviewed briefly with a focus on identifying students having difficulties. The purpose of the midyear review is to ensure proper support structures are in place to resolve any problems before they become significant. Unless there is a notable problem, students do not receive feedback from the midyear evaluation. Although these reviews relate to clinical skill development and development as a scientist/scholar, students are also encouraged to obtain additional feedback on their clinical and research training and speak with their clinical supervisors and research mentor(s) regularly about their overall progress in the respective areas. Students whose progress is satisfactory will maintain eligibility for continued funding. Students whose performance or progress is unsatisfactory may be given probationary status and/or have their funding terminated. If probation is not resolved successfully, the student may be recommended for termination from the graduate program, as per the policies below.

C. Grades and Quality of Graduate Work: Article V, Section B of the Graduate School Policies and Procedures Manual located at: (<https://graduateschool.uccs.edu/current-students/policies-and-procedures>) details the minimum requirements for grades and quality of graduate coursework. In addition, the Psychology Department has set the following standards and policies regarding grades:

In order to graduate, a student must earn grades of "B- or higher" or "P" (Pass) for all courses listed in the required curriculum.

Students receive “IP” (in progress) grades for thesis or dissertation research conducted but not completed during a semester. The letter grade assigned in the final semester of thesis or dissertation research should indicate the student’s overall performance on the project.

Student performance in PSY 6740 Practicum in Clinical Psychology is assigned either “P” (pass) or “F” (fail). An “F” grade in any semester of practicum training is unsatisfactory and will require a review of the student’s performance by the Clinic Program Committee to determine steps for remediation. It is possible the student will not be allowed to proceed to a new practicum site until the student has mastered the deficient competencies of that rotation that will be detailed in a remediation plan.

Student performance in any courses other than thesis, dissertation, and practicum courses will be assigned a letter grade (“A, A-” “B+, B, B-” “C+, C, C-” “D+, D, D-” or “F”).

The grade of “I” (incomplete) is given when the instructor believes that the course work is unavoidably incomplete or that a supplementary examination is justifiable. Online processes are used to remove grades of “I”.

Students cannot graduate with an “I” on their record. A grade of “I” must be removed by the end of the next semester after the I was assigned (exclusive of summer sessions) unless the student has a signed contract with the instructor specifying a different deadline. The contract specifying a different deadline also should specify what is required for removal of the “I.” Failure to remove the “I” by the deadline (either the end of the next semester or other) will result in the student being placed on probation.

Grades of “C+” or Below: A grade of “C+” or lower in any graduate course taken by a graduate student is unsatisfactory. Should a student receive a course grade of C+ or lower, the student would have one opportunity to take the class again and receive a passing grade (B- or higher). Failure to receive a passing grade the second time is grounds for dismissal from the program. In addition, after the first course grade of C+ or lower, the student is placed on probation. If a second course grade of “C+” or lower is received, the student may be dismissed from the program. A student remains on probation until the Clinical Program Committee is satisfied that appropriate remediation has occurred. For requirements of the Graduate School, see Article V, section B 1 and B 7 in the Graduate School Policies and Procedures: <https://graduateschool.uccs.edu/current-students/policies-and-procedures>. Courses with a grade of C+ or lower do not count toward graduation, so such a grade in any course in the student’s plan of study must be remediated. Appropriate remediation procedures are as follows:

For all courses, the Clinical Program Committee and the course instructor define remediation requirements, which usually involve retaking the course, as noted above. The student must submit an acceptable remediation proposal, including time lines for completion, to the Clinical Program Committee for consideration. The accepted proposal becomes a part of the student’s plan of study and is considered in assessing progress through the program.

Further requirements adopted by the Clinical Program relating to the development of interpersonal clinical skills necessary to function as a professional psychologist are detailed below.

D. Comprehensive Evaluation Policy (adapted from CUDCP). Faculty, training staff, supervisors, and administrators of the Clinical Psychology Training Program at UCCS have a professional, ethical, and potentially legal obligation to: (a) establish criteria and methods through which aspects of competence other than, and in addition to, a student-trainee's knowledge or skills may be assessed (including, but not limited to, emotional stability and well-being, interpersonal skills, professional development, and personal fitness for practice); and, (b) ensure, insofar as possible, that the student-trainees who complete our Program are competent to manage future relationships (e.g., client, collegial, professional, public, scholarly, supervisory, teaching) in an effective and appropriate manner. Because of this commitment, and within the parameters of our administrative authority, our faculty, training staff, supervisors, and administrators strive not to advance, recommend, or graduate students or trainees with demonstrable problems (e.g., cognitive, emotional, psychological, interpersonal, technical, and ethical) that may interfere with professional competence to other programs, the profession, employers, or the public at large.

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

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

Adapted from the Comprehensive Evaluation of Student-Trainee Competence in Professional Psychology Programs statement developed by the Student Competence Task Force of the Council of Chairs of Training Councils (CCTC) approved March 25, 2004.

E. Policy on Professional Conduct: Students are expected to conduct themselves in a legal, ethical, and appropriate manner during all phases of their professional training (i.e., initial application through completion of the training). Therefore, students must possess and apply a working knowledge of the *APA's Ethical Principles of Psychologists and Code of*

Conduct (2010) and other applicable codes of ethics. Furthermore, they should be familiar with the laws and regulations regarding the reporting of suspected child abuse and neglect, and suspected elder/dependent abuse, and other legal guidelines. Please also refer to the graduate school student ethical conduct section located at:
[\(https://graduateschool.uccs.edu/current-students/policies-and-procedures\)](https://graduateschool.uccs.edu/current-students/policies-and-procedures)

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

- Acting in a manner inconsistent with ethical or legal guidelines
- Failure to follow this program's training guidelines
- Failure to appear for scheduled practicum events or responsibilities without approval or proper notification
- Taking vacation or personal time without approval
- Recording a client without a properly executed consent and release of information
- Removal or private use of practicum site property without permission
- Violating patient confidentiality (e.g., playing a session tape to anyone not included in the consent form, failure to remove personally identifiable information from written or recorded materials before seminar presentation, etc.)
- Failure to report a known or suspected incident of child abuse or neglect, or suspected incident of dependent/elder abuse or neglect
- Withdrawing from a practicum for any reason without permission from the DCT and Associate DCT
- Accepting a practicum and then turning it down for an offer made from another site
- Plagiarism
- Fabrication of research data or misrepresentation of data or findings
- Failure to respond in a timely manner to emails and other communications from the DCT and Associate DCT

Note that ethical violations in any domain of training (e.g., clinical training, classes, and research training) may result in the student being placed on probation or being dismissed from the program. As decided by the Clinical Program Committee, consequences for unethical behaviors range from disciplinary letters from the DCT and Associate DCT to dismissal from the program. For additional information, see the following Policy on Professional Impairment.

F. Policy Related to Trainees Who Experience Conflicts Working with Diverse

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

For some trainees, integrating personal beliefs or values with professional competence in working with all clients/patients may require additional time and faculty support. Ultimately though, to complete our program successfully, all graduate students must be able to work with any client placed in their care in a beneficial and non-injurious manner.

Professional competencies are determined by the profession for the benefit and protection of the public; consequently, students do not have the option to avoid working with particular client populations or refuse to develop professional competencies because of conflicts with their attitudes, beliefs, or values.

Note: Adapted from the APA's BEA Working Group on Trainee Conflicts Serving a Diverse Clientele, approved January, 2014. This policy was written to be consistent with the APA Ethics Code (APA, 2010) and the Guidelines and Principles for the Accreditation of Professional Psychology Programs of the APA's Commission on Accreditation (APA, 2012).

G. Policy on Public Professionalism Regarding Websites, Blogs, Email, and Voicemail.

Increasingly, as information becomes more widely available through the internet, lines between public and private information are blurring. Many students have websites, blogs, email signature lines, and voicemail/answering machine messages that are entertaining and reflect their personal preferences and personalities. However, students should consider the potential impact of this information on their professional image. For example, if the student uses his/her telephone or email account for professional purposes, clients, research participants, and potential employers may view the student as less professional than desired. Also, according to information collected by the Council of University Directors of Clinical Psychology, clients, graduate and internship programs, and potential employers may all conduct internet searches and use the resulting information in decisions about therapy, or job interviews or offers. Legal authorities also view websites for evidence of illegal activities.

Students should also note that if they identify themselves as a graduate student in the program or reveal information relevant to the graduate program in their email signatures, voicemail files, or website/blog information, then this information becomes part of their program-related behavior and may be used in student evaluations. For example, if a student reports doing something unethical or illegal on a web blog, or uses the website to engage in unethical or unprofessional behavior (e.g., disclosing confidential client or research information), then the program may use this information in student evaluation, including decisions regarding probation or termination.

Thus, students are encouraged to consider the use of personal web pages and blogs, email, and other electronic media carefully. They should attend to what content to reveal about themselves in these forums, and whether there is any personal information that they would not want program faculty, employers, or clients to read or view. Anything on the internet is potentially available to all who seek. Students who use these media should also consider how to protect the security of private information.

H. Policy on Professional Impairment: Students Demonstrating Lack of Clinical Competency and/or Judgment:

Competency and/or Judgment: Professional impairment is “defined broadly as an interference in professional functioning that is reflected in one or more of the following ways: (a) an inability and/or unwillingness to acquire and integrate professional standards into one’s repertoire of professional behavior, (b) an inability to acquire professional skills in order to reach an acceptable level of competency, and (c) an inability to control personal stress, psychological dysfunction, and/or excessive emotional reactions that interfere with professional functioning” (Lamb, Presser, Post, Balm, Jackson, & Jarvis; *Professional Psychology: Research and Practice*, 1987, 18, 597-603).

The clinical faculty has multiple loyalties -- not only to their students, but also to the profession and to the public. On the one hand, the clinical faculty has a responsibility to teach and supervise their students, which is typically done in the context of an amicable,

supportive, and professional relationship. On the other hand, the clinical faculty has a responsibility to protect the public from incompetent professionals and to maintain the standards of the profession. Unfortunately, students may be accepted to a clinical training program even though they are incapable of becoming competent professionals who will maintain the standards of the profession. In these cases, the faculty is obliged to take action.

All clinicians involved in training at UCCS must address the issue of students' clinical suitability. The clinical training faculty at UCCS has obligations to students as well as the profession and the public receiving services. As "gatekeepers," the clinical faculty occasionally must exercise these responsibilities by preventing unfit students from continuing in the program. Because of the gravity associated with such decisions, recommendations for retention, significant remediation, and/or dismissal from the program require an intensive and individualized formal review. Avoidance of such matters does not serve in the best interest of the student, the school, the profession, or the public.

The Clinical faculty has a training philosophy that rests upon the belief that clinicians must demonstrate academic and clinical competency and that one is not sufficient without the other. Academic competency requires an adequate fund of knowledge plus the conceptual skills to integrate and apply this knowledge to case material. Clinical competency pertains to the ability to assess psychological phenomena accurately, to intervene effectively, and to adhere to legal, ethical, and professional duties associated with the mental health professions. Clinical unsuitability refers to those students who are unable to fulfill the minimal standards of clinical and/or academic competency.

The faculty understands that emotional and/or behavioral problems may result in the student being clinically unsuitable to practice until the problems are resolved. Such problems only become an academic or training issue when they impact the student's ability or potential to become a competent professional. Concerns about a student's clinical suitability may be raised by the student, the psychology department faculty, site supervisors, or student peers. Examples of behaviors suggestive of clinical unsuitability include:

- Provision of services beyond one's scope of competence
- Conviction of a crime that directly bears upon the ability to continue training
- Insufficient and/or harmful application of psychological theory or practice
- Provision of direct clinical services despite being emotionally or mentally unfit to do so
- Impairments in functioning due to the direct or indirect effects of substance abuse or addictions
- Demonstration of unethical, illegal, or unprofessional conduct with patients, supervisors, peers, or instructors
- Significant deficiencies in clinical, academic, or professional judgment
- Impaired social skills and/or social judgment

Documents that describe standards of professional practice and locally expected procedures include:

- APA Ethical Principles of Psychologists

- (<http://www.apa.org/ethics/code/index.aspx>)
- Joint Standards for Educational and Psychological Testing
(<http://www.apa.org/science/programs/testing/standards.aspx>)
- Laws and statutes that regulate professional practice within Colorado
(<http://www.dora.state.co.us/mental-health/statute.pdf>)

Once a question about a student's clinical unsuitability is raised, the clinical faculty conducts a comprehensive review of the circumstances. All involved parties must respect the student's rights to a thorough and objective review and to self- representation of the facts in question. Details and correspondence about concerns pertaining to a student's suspected emotional and or behavioral difficulty are kept in a confidential file in the office of the DCT. A report to the Office of Institutional Equity may be submitted as appropriate (i.e., if it falls under the Clery Act). A report of the findings may enter the student's Academic File as deemed appropriate by the Clinical Program Committee.

The DCT may designate an appropriate clinical department review committee (e.g., the entire clinical faculty or specific representatives) to oversee and/or conduct an initial investigation. This will typically include the DCT, the Associate DCT, the clinical faculty who are making judgments of serious professional impairment (e.g., student's faculty clinical supervisor or agency clinical supervisor), and the student's research advisor. After a review of preliminary information, the designated faculty body renders a recommendation for a formal assessment if the initial concerns of unsuitability have merit. The formal evaluation may consist, though is not limited to,any of the following:

- Expert opinions from the academic faculty, training faculty, and/or professional consultants to the faculty
- A review of the student's willingness to accept responsibility for the concerns in question and to engage in meaningful remediation
- Consideration of the extent to which continued enrollment places unreasonable or excessive demands upon other students, faculty, and potential training sites
- An assessment of the student's ability to function as a trainee in direct contact with clinical populations
- A review of opinions submitted on behalf of the student by her or his professional consultant

On the basis of all information, the committee makes a final disposition. If the concerns are substantiated in part or in full, consequent disciplinary actions may include, though are not limited to, any of the following:

- Allowing the student to continue in the curriculum on either a part- or full-time basis according to a remediation plan developed, implemented, and monitored by the DCT or Associate DCT
- Referring the student to appropriate professional assistance while continuing in the program on a part- or full-time basis with a remediation plan
- Placing the student on a required leave of absence while undergoing required remediation or participation in professional assistance
- Recommendation to the Department Chair for probation or termination from the program (as per policy below)

I. Student Termination: If the Clinical Program Committee determines that the student's performance in one or more criterion areas is deficient, it may elect either to dismiss the student from the program or to place the student on probation. If the deficiency is judged to be sufficiently severe, the student may be immediately dismissed from the program. If the performance deficiency is judged to be remediable, a plan will be developed with the student to remediate his/her performance deficiencies. This remediation plan will describe the nature of the student's problems, the expected behavior patterns or goals of the plan, possible methods for accomplishing these goals, and a date for re-evaluating the student. The student will be considered to be on probation during this remedial period. The success of the remediation plan will be evaluated by the Clinical Program Committee by the specified date. On the basis of this evaluation the Committee may: (a) decide that the specific problem is no longer a significant one and continue the student in the program; (b) develop a further remedial plan and date for reevaluation and continue the student on probation; (c) suggest that the student pursue other career objectives; or (d) when the student has failed to meet the remedial goals and there is no expectation she or he will be able to meet them in the immediate future, she or he may be formally dismissed from the program.

The student has the right to appeal any decision made by the Clinical Program Committee. The intent to appeal must be provided in writing to the DCT within 7 days of being notified of a decision by the Clinical Program Committee. An appeal will first go to the DCT. If the DCT is not impartial, the next level of appeal will go to the Department Chair, and then to the Dean of LAS. These policies are reiterated below in the section on Grievances.

J. Grievance and Appeal Procedures: A clinical student who has a grievance or appeal, such as unfair treatment or unethical behavior by one or more faculty members, should first make efforts to resolve the conflict informally. The grievant should first:

- Discuss his or her concerns directly with the parties causing the grievance.
- Consult with the DCT or Associate DCT about the incident for suggestions about howto proceed. If the DCT or Associate DCT is not impartial, the student may address theconcern with their faculty advisor or mentor, any other clinical faculty member, or theDepartment Chair.

After the Department Chair, the next level of appeal is to the Dean of LAS.

The Graduate School at UCCS also has a procedure for student appeals. The Graduate School will generally not hear appeals unless the student has exhausted procedures in the department, school and college. Information on the Graduate School process for appeals can be found here:

http://catalog.uccs.edu/content.php?catoid=10&navoid=456#grad_stud_appe

UCCS also has an ombuds program available to students. An ombudsperson works outside the formal problem-resolution and grievance procedures of the University. The role of an ombudsperson is to listen, receive, and provide information from parties, provide informal facilitation between parties when requested, and such other functions normally seen as within the purview of a University ombudsperson. An ombudsperson does not make, change, or set aside policy or previous administrative decisions, nor does an ombudsperson serve to determine the rights of others to unilaterally resolve conflicts. Information on this programcan be found here: <https://ombuds.uccs.edu/>.

The DCT and Department Chair have a policy of keeping a record of formal complaints or grievances raised by program students, alumni, or others. All correspondence regarding such complaints would be kept separately from the student (or alumnus's) file, in the department chair's locked file cabinet, locked within the chair's office.

VI. SEXUAL HARASSMENT, STUDENT SELF-AWARENESS, STUDENT REPRESENTATION AND ORGANIZATIONS, AND OTHER POLICIES

A. Sexual Harassment Policy: UCCS is committed to fostering a collegial academic community whose mission requires positive learning, working, and living environment that values and protects individual dignity and the integrity of human relationships. As a place of work and study, UCCS must be free of inappropriate and disrespectful conduct and communication of a sexual nature, of sexual harassment and related retaliation and of all forms of sexual intimidation and exploitation. UCCS will not condone sexual harassment or related retaliation of or by any member of the university community. Individuals who violate the University Sexual Harassment Policy will be disciplined or subjected to corrective action, up to and including termination or expulsion.

Sexual harassment is unwelcome sexual attention. It can involve intimidation, threats, coercion or promises. Harassment may occur between any combination of members of the campus community: student, faculty member, staff member and administrator. It generally occurs when one person, the harasser, holds a position of real or perceived authority over the other individual.

The Sexual Harassment Officer receives reports of possible sexual harassment. When it is determined that there may be a violation of the Sexual Harassment Policy, an investigation of the allegation may be conducted. (The Sexual Harassment Officer will brief complainant and respondent on the steps of any investigation and report.) If you think you are being sexually harassed, the Sexual Harassment Officer and Committee members are only a phone call away at 255-4324.

University sexual harassment policy can be found here:
<https://www.cu.edu/policies/aps/hr/5014.html>.

B. Personal File/Portfolio: Every student has a comprehensive record of all formal documents of completion of required tasks and approval to proceed. In addition, students are encouraged to create a portfolio for tracking their own progress in terms of clinical training, teaching effectiveness, and research accomplishments. Students may access their formal documents at any time from the Clinical Training program assistant who will draw them from the OnBase data storage system.

Applications and student official records of milestone accomplishment are housed in a UCCS OnBase account, electronically. OnBase is a secure program for records that fall within the scope of FERPA and thus can be accessed by only a limited set of people (e.g., DCTs, Psychology Department Administrative Assistant). Students will have access to all materials in their OnBase personal file, with the exception of letters of recommendation, upon request to David DuBois.

C. Self-Awareness and Personal Psychotherapy: This program values and promotes self-awareness as a significant component of training in clinical psychology. Students in this program engage in self-awareness exercises within the courses and practicum training.

Many students decide to seek personal therapy in the course of their graduate education. Although this is not a requirement of our program, students are encouraged to seek therapy to further their personal growth. The DCT and Associate DCT maintain a list of persons in the community who have agreed to provide services to our students on a lower fee basis.

- D. Student Representation:** Students have the opportunity to serve on various faculty-based committees. This provides students with the opportunity to serve as liaisons between faculty and students and with experience in working on committees. These opportunities will become available through faculty invitation. Interested students should consult with their faculty mentor, Associate DCT, or the DCT to facilitate their participation.
- E. Faculty and Supervision Evaluations:** Students have the opportunity to provide feedback to each of their course instructors with end of the semester course evaluations (called Faculty Course Questionnaires) that are administered in each class. At the mid-term and end of the academic year, students have the opportunity to provide feedback regarding their practicum supervisors and practicum sites to the Associate DCT and/or DCT.
- F. Communication:** Once you are registered at UCCS, an email account will automatically be created for you. For help in finding out your email account name, setting up a new password, and managing your UCCS email account, consult the Information Technology Help Desk (<https://oit.uccs.edu/get-help>). Students are required to access their account regularly as this is both the department's and the university's official form of communication. Students are also required to keep the Psychology office updated as to current phone and address information.
- G. Policy on Private Practice Settings:** It is both illegal and unethical for students (or any clinician) to practice outside the scope of their professional training and qualifications. Therefore, the program specifically restricts all matriculating students from engaging in their own private practice activities (i.e., for-profit delivery of therapy or counseling services) unless qualified to render such services. For this reason, a student's self-employed private practice may never be used as a practicum or internship setting.

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

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

qualifications) will be vigorously pursued and may result in dismissal from the program.

H. Policy on Professional Liability Insurance: Each student is covered by the University Trust Insurance for their clinical work while matriculated as a Ph.D. Clinical Psychology student conducting clinical work required by the program. You do not need to obtain your own personal malpractice insurance for this work.

I. Policy on Outside Employment: The clinical program is intended and designed to be full-time. Successful completion of the program in a timely manner requires a full-time effort. Regular employment responsibilities outside the scope of the clinical program (i.e., activities that are not clinical placements, teaching assistantships, research assistantships) are likely to interfere with the students' development of knowledge and skills. Therefore, outside employment is strongly discouraged. Students should speak with their mentor, DCT, or Associate DCT prior to accepting such employment.

J. Policy on Background Checks and Criminal History: Be informed that doctoral training in clinical psychology requires a full-time pre-doctoral clinical internship and typically includes community practicum placements in local agencies who partner with us for training opportunities. Many of these institutions require a legal background check to ensure all applicants, employees, and trainees meet current standards. In addition, licensure boards usually require applicants to report on their legal background. As such, certain types of criminal backgrounds will prevent applicants from being able to complete program requirements or to attain licensure as a psychologist in some states. Please disclose relevant background information accordingly and before beginning the PhD program at UCCS.

VII. FINANCIAL SUPPORT

Although funding is not guaranteed, every effort is made to provide each student with financial support through the first four years of the program. This aid is in the form of fellowships, grants, work-study awards, teaching assistantships, research assistantships, clinical assistantships, matching tuition grants, out of state merit awards, and loans. See the Graduate School Financial page for additional information about various funding opportunities (<https://graduateschool.uccs.edu/uccs-finances/finance-resources>).

A. Financial Aid: All students interested in receiving financial aid should submit the Free Application for Federal Student aid (FAFSA) at the time of application to the program and before March 1st. The Financial Aid office will notify students of their award package although the letter from the Financial Aid office does not include funding for any psychology Ph.D. fellowships or assistantships. The Psychology department will also send an award letter committing funding to you. Andrea Williams (Psychology department administrator) has access to your financial aid information. Andrea will work with you and the Financial Aid office to get you the maximum aid award within university guidelines and federal limits to include summer funding. Once you receive an award offer letter from the Financial Aid office and before you accept any need based aid, please contact Andrea Williams at awilliam@uccs.edu or (719) 255-4158. Students may also contact the Financial Aid office at UCCS in Cragmor Hall, (719) 255-3460. Their website is finaid.uccs.edu. The financial aid informational flier compiled by this office is included in Appendix A.

B. Fellowships: Fellowship offers are made in writing. Research, teaching, and/or clinical work required will vary depending on the funding source and mentor. Information about funding opportunities is distributed via email to all clinical students as it becomes available to the DCT/ADCT. You also may contact the DCT Associate DCT, or Andrea Williams regarding fellowships. In addition, the campus-wide Graduate School offers Fellowships that are available for graduate students. The awards are merit-based and the nomination process is initiated by graduate program directors. These awards are officially offered through the Financial Aid office.

The department awards a limited number of merit based, out of state recruitment awards of \$6000 for the first year to students with a cumulative GPA of 3.33 or higher. The recipient will be notified and the award will reflect on the student financial aid package after July 1.

The department awards Graduate School Matching Tuition grants to students as part of the overall department fellowship funding. These awards require a cumulative GPA of 3.0 or higher. The recipient will be notified of the award and it will reflect on the student financial aid package after July 1.

C. Teaching Assistantships: One or two PhD students may be selected to serve as a teaching assistant for work related to the department fellowship funding. Because of the academic rigor of the first years, other teaching assistantships (TAs) are not typically offered to first year Ph.D. students. Later in your graduate career you may have the opportunity to TA classes. If you are planning a career in academics, you will be encouraged and have the opportunity to teach an undergraduate course, typically during year 4 or year 5 in the program (before internship), under the supervision of a faculty member. Students should express their interest in teaching to the DCT and to Andrea Williams. Students then should meet with Andrea to learn about the specific classes that are

available for your teaching experience. You may choose to teach the course only one semester, but it is usually best to teach the course for two consecutive semesters, assuming this also meets departmental needs. Historically, students have greatly enjoyed the teaching experience, and have taught courses including Abnormal Psychology, Social Psychology, and Psychology of Aging. Students are encouraged to seek out a teaching mentor from the faculty.

D. Grants and Research Awards: Students are encouraged to apply for grants and research awards including UCCS Graduate School research awards. A non-exhaustive list of potential funding sources for grants and research awards is available in Appendix B. In addition, there is a binder in the Ph.D. student office which has additional opportunities.

E. Federal Work Study: Need based work study awards are offered by the Financial Aid Office as a part of your financial aid package and allow the department to hire you and be paid with federal funds. These federal funds help you and the department to maximize your total funding. If you do not initially receive a work study award as part of your financial aid package, it is recommended that you complete an “Appeal for Work study” form available on the Financial Aid/Student Employment Website.

F. Travel: There are several options for funds to travel to conferences. These are a) the Psychology Department, b) the Gerontology Center, c) the Psychology Club/Psi Chi, d) facultymentor research funds, e) the Graduate Student Association (GSA), and f) the UCCS Student Government. If you are approved for funding through any campus and departmental funds, you must follow departmental travel purchasing rules. Begin by meeting with David Dubois and completing a Travel Authorization (TA) form. In order to be considered for funding, the TA should be sent by email to Andrea Williams with the forwarded presentation acceptance notification from the organization and a copyof your abstract at least a month before the planned trip.

G. Colorado Residency Requirements: An in-state student is one who has been a legal resident of Colorado for one year or more immediately preceding the beginning of the term for which the in-state classification is sought. If you are over 22 years of age or are emancipated at the beginning of the 12 month waiting period you can establish residency. Residency is established when one has a permanent place of habitation in Colorado and the intention of making Colorado one's true, fixed, and permanent home and place of habitation. You have to prove your habitation and intent by taking the following actions:

- change of driver's license to Colorado
- change of auto registration to Colorado
- Colorado voter registration
- permanent employment in Colorado
- **MOST IMPORTANTLY**, payment of state income taxes, as a resident, by one whose income is sufficient to be taxed.

In order to document that you have a permanent residence in Colorado a lease or purchase agreement or receipt of lease payments is required.

In order to qualify for in-state tuition for a given term, the 12 month waiting period (a full 365 days which does not begin until the legal domicile is established) must have expired by the first day of classes. If one's 12 month waiting period expires at any time after the first day of classes, in-state tuition cannot be granted for that term.

You must complete a petition submitted to the office of Admissions and Records to change from non-resident to resident classification. The petition and complete documentation must be submitted on or before the 6th day of classes in summer or the 12th day of classes in fall or spring in order to be considered for that term. Petitions submitted after this deadline cannot be considered until the next or subsequent term. It is a good idea to begin the petition process in the spring semester of your first year to receive in-state classification for the next fall. For more information see the Admissions and Records website at:

<http://www.uccs.edu/~admrec/tuition.html>.

VIII. Other Resources

A. Resources (from your home)

- a. Access many of the library periodical databases via the UCCS Library
- b. UCCS Resources (from your home)
 - i. Transfer files to and from your on-campus IT account or a professor's account
 - ii. Updating antivirus from off campus; e.g. laptops, dorm computers during the summer, staff/faculty with university computers at home
 - iii. Access to your Microsoft Office software including Outlook (for on-campus email by logging onto www.uccs.edu and selecting Office 365 email from the Tools pulldown menu.
 - iv. Paycheck information is available through the UCCS Portal that is accessed in the Tools pulldown menu at www.uccs.edu.

B. Kraemer Family Library:

The UCCS campus library (library.uccs.edu) maintains an extensive collection of psychology journals (online and in print) and books. Interlibrary loan is available for items not found in the UCCS library. Students may conduct literature searches (e.g., using PsycINFO) through the library periodical databases on any computer by logging into their campus account.

Addenda

University, Graduate School, Department and Program requirements evolve and change, and are incorporated into periodic revisions of this handbook. It is possible that there will be important changes that occur before a complete revision of this handbook. The Department will make every reasonable effort to inform you of such changes, and you must be attentive to relevant mailings and postings. It is also advisable for students to save with their handbooks notices of new policies and requirements.



Appendix A: Financial Aid Office Flyer

**Office of Financial Aid, Student Employment,
and Scholarships**

<https://finaid.uccs.edu/> or
<https://stuemp.uccs.edu/>
 Email: finaidse@uccs.edu or stuemp@uccs.edu
 Phone: (719)-255-3460 or 1-800-990-UCCS

Financial Aid Opportunities for Graduate Students

Types of Aid Available

Grants

- Colorado Graduate Grant (Available only to Colorado residents, excluding military and Olympic residents.) (Need Based)
- UCCS Tuition Grant (Available to students paying in-state tuition, including military and Olympic residents.) (Need Based)

Loans

- Federal Perkins Loan (5% interest rate, repayment begins 9 months after the student is no longer enrolled at least half-time.) (Need-Based)
- Subsidized Federal Stafford Loan (Fixed interest rate of 6.8%, payment begins 6 months after the student is no longer enrolled at least half-time.) (Need Based)
- Unsubsidized Federal Stafford Loan (Details same as subsidized, interest begins accruing immediately, whereas the interest can be capitalized at the end of the loan or paid while enrolled.) (Non-Need Based)

Work Study

- Federal Work Study (Need Based)

Scholarships

All scholarship information and applications are online. Additional scholarship assistance is available in the Financial Aid Office. We research directories for relevant scholarships and make applications available to students as well as offering a link to **FREE** scholarship search services on our web page. Also, please check with the college to which you are admitted for opportunities such as internships, fellowships, and assistantships.

Graduate Diversity Scholarship

Students who meet one or more of the below criteria are encouraged to apply (Need Based):

- Minority
- First generation college student

- Single parent
- Physical/Learning disabilities

The application and additional information are available at <http://www.uccs.edu/~finaid/>. The deadline to apply is March 1st.

Graduate School Fellowships

These fellowships are available through nominations from individual departments. Please contact your Graduate Department Advisor for more information. (Non-Need Based)

Applying for Financial Aid

The FAFSA (Free Application for Federal Student Aid) is needed for all need based aid (i.e., grants, loans, work study) and for non-need based aid (i.e., scholarships & loans).

File the [FAFSA](#) by the end of February every year. If you do not file by priority date, March 1st, you may not be considered for all the aid (including work study) for which you are eligible. You may complete this at www.fafsa.ed.gov.

Student Employment

Job Listings

Job listings are available to students on-line through the [Student Employment Assistance Network \(SEAN\)](#), which can be accessed through the Financial Aid Web Site (<https://seans.uccs.edu/>). Workstudy listings (Need Based) are also accessed through Sean's Place. The FAFSA is used to apply for a work study award.

Please contact our office for any questions regarding Financial Aid or Student Employment.

Appendix B: Grants and Research Awards

Student Grant Opportunities and Student Research Awards

APA Division 20 Research Awards and Travel Awards

The Division of Adult Development and Aging (Division 20) of the American Psychological Association sponsors awards for student research. Research on any topic related to psychological issues in adult development and aging is eligible for these awards. Typically, award funding is available for dissertation projects (Dissertation Award Program) and for student travel to the APA convention (Student/Postdoctoral Travel Awards Program for Completed Research). Refer to the Division 20 website for more information on yearly awards:

<https://www.apadivisions.org/division-20/awards/research>

APA Division 12: Society of Clinical Psychology Graduate Student Awards

The Society of Clinical Psychology (APA Division 12) is pleased to announce three awards for graduate students in clinical psychology:

The Distinguished Student Research Award honors a graduate student in clinical psychology who has made exemplary theoretical or empirical contributions to research in clinical psychology. Clinical research contributions can include quantity, quality, and/or innovations in research. The recipient will be a person who is a doctoral student in clinical psychology (including pre-doctoral interns) and who is a student member (affiliate) of Division 12. Nominations should include a copy of nominee's curriculum vitae and two letters of support detailing the nominee's contributions to research in clinical psychology.

The Distinguished Student Practice Award honors a graduate student in clinical psychology who has made outstanding practice contributions to the profession. Practice contributions can include breadth and/or depth of practice activities, innovations in service delivery, and/or other meritorious contributions. The recipient will be a person who is a doctoral student in clinical psychology (including pre-doctoral interns) and who is a student member (affiliate) of Division 12. Nominations should include a copy of nominee's curriculum vitae and two letters of support detailing the nominee's contributions to the practice of clinical psychology.

The Distinguished Student Service Award honors a graduate student in clinical psychology who has made outstanding service contributions to the profession and community. Service contribution can include development of creative educational programs or other novel activities in the advancement of service, working to increase funding for agencies, volunteer time, working on legislation regarding mental health, general mental health advocacy, and initiating outreach to underserved communities or substantive involvement in efforts to do such outreach. The recipient will be a person who is a doctoral student in clinical psychology (including pre-doctoral interns) and who is a student member (affiliate) of Division 12. Nominations should include a copy of nominee's curriculum vitae and two letters of support detailing the nominee's service contributions to the profession and community.

APA Division 12-2 (Society for Clinical Geropsychology) Research Awards

For more information of the 12/2 Award for Student Research/Student Paper Award, please go to the division/section website: <http://www.geropsychology.org/>.

APA Division 56 Grants and Awards

APA Division 56 (Trauma Psychology) offers a variety of grant and award opportunities that may differ each year including dissertation awards, early career awards, and project grants. For more information, visit the division website (<https://www.apatraumadivision.org/916/division-56-grants-and-awards.html>). Nominations are due by April 30th and require a copy of the student's CV and nomination letter.

Association for Gerontology in Higher Education

AGHE has compiled a list of grants/fellowships and other resources for students interested in aging studies. Please see their website for detailed information: <https://www.aghe.org/faculty-students/students>

Gerontological Society of America – Behavioral and Social Sciences

The Behavioral and Social Sciences Section presents two awards for student posters/papers: one at the pre-dissertation level and one at the dissertation level. Eligibility at the pre-dissertation level is limited to students enrolled in doctoral programs who do not yet have their doctorate degree. The award winner at the dissertation level receives a \$500 cash prize and the award winner at the pre-dissertation level receives a \$500 cash prize. Award winners in both categories also receive a certificate at the annual GSA conference. Student members who wish to compete for this award must submit an abstract by the deadline and have it accepted for presentation on the Society's Annual Scientific Meeting program. Finalists will be requested to submit an article-length manuscript. Finally, student papers must be primarily the work of the student. If the manuscript is co-authored, a letter from the other author is required that should verify that the student applicant had the primary responsibility for the work.

International Society for Traumatic Stress Studies (ISTSS) Student Section Awards

Outstanding Student Advocacy & Service Award

Description: The ISTSS Student Advocacy Award recognizes a student member of ISTSS who has made significant contributions in the field of public advocacy, clinical work, and traumatic stress at a local, national, and/or international level. The award promotes efforts by students who have worked to advance the understanding of trauma or to improve the access to and quality of services that benefit those affected by traumatic events. More information is available at <https://istss.org/membership/student-section-leadership/student-awards>.

Requirements for Consideration: Nominees must be current student members of ISTSS, or have been a student within the past year and been a student member when completing the activity for which they are nominated. Note: Student members are not eligible for this award while occupying a student leadership position.

Nominees must be nominated by an ISTSS member. The nominating member must provide the name, program and contact information for the nominated student member, and confirm that the

nominee is a student member of ISTSS. The nominating member will complete a two-page letter describing the outstanding advocacy or service of the nominee and reasons the member believes the student should be considered for the award.

Determination of the Outstanding Student Advocacy & Service Award: The ISTSS student leadership will evaluate all completed nominations on the basis of their contribution to the field of public advocacy, clinical work, and traumatic stress. The student leadership will select no more than 5 possible recipients and submit these nominations to the Student Grant Committee. This committee will make the final decision as to the recipient of the award. Nominated students and nominating members will be notified of the final decision and the recipient will be notified of his or her selection to receive the award. The recipient will receive a plaque recognizing the achievement and the honor will be presented at the annual ISTSS conference student luncheon

Outstanding Student Achievement Award

Description: The Award for Outstanding Student Achievement is designed to recognize a graduate student member of ISTSS who has made a significant contribution to the field of traumatic stress through scientific discovery.

Requirements for Consideration: Nominees must be current student members of ISTSS, or have been a student within the past year and been a student member when completing the activity for which they are nominated. Note: Student members are not eligible for this award while occupying a student leadership position.

Nominees must be nominated by an ISTSS member. The nominating member must provide the name, program and contact information for the nominated student member, and confirm that the nominee is a student member of ISTSS. The nominating member will complete a two-page letter describing the outstanding scientific discovery of the nominee and reasons the member believes the student should be considered for the award.

Determination of Outstanding Student Achievement Award: The ISTSS student leadership will evaluate all completed nominations on the basis of their scientific contribution to the field of traumatic stress. The student leadership will select no more than five possible recipients and submit these nominations to the Student Grant Committee. This committee will make the final decision as to the recipient of the award. Nominated students and nominating members will be notified of the final decision and the recipient will be notified of his or her selection to receive the award. The recipient will receive an award recognizing the achievement and the honor will be presented at the annual ISTSS conference student luncheon.

The Frank W. Putnam Trauma Research Scholars

The Board of Directors of the International Society of Traumatic Stress Studies has established the Frank W. Putnam Trauma Research Scholars Program. The Scholars are named in honor of Dr. Frank W. Putnam, whose is being recognized for his outstanding contributions to the field of traumatic stress research, service to children and families around the world, and decades of mentorship and service to the society. The Frank W. Putnam Trauma Research Scholars will be selected from student members each year who submit proposals judged to have the potential to make the greatest contribution to the field of traumatic stress. Each student will be awarded \$1000. Previously the student research grant program, the Frank W. Putnam Research Scholars Program was endowed by anonymous donors identified as the friends and colleagues of Dr. Putnam.

<https://www.istss.org/education-research/traumatic-stresspoints/2013-july/the-frank-w-putnam-trauma-research-scholars-progra.aspx>

Note: This is not an exhaustive list of grant and award possibilities. Students are encouraged to find other awards in their areas of interest. Also, please see the binder in the Ph.D. student officefor a list of other possible grants, awards, and fellowships.

Appendix C: Professional Organizations

We strongly encouraged our students to become members of relevant professional associations, such as the American Psychological Association and relevant divisions of APA, the Gerontological Society of America, and the Association for Psychological Science. Membership in professional organizations helps students increase their identification and development as a scientist and professional in clinical psychology. Student membership fees are usually modest and include publications that are essential for your training program.

National Organizations:

American Psychological Association (APA)

<http://apa.org/>

Based in Washington, D.C., the American Psychological Association (APA) is a scientific and professional organization that represents psychology in the United States. With more than 122,000 members, APA is the largest association of psychologists worldwide.

The American Psychological Association aspires to excel as a valuable, effective and influential organization advancing psychology as a science, serving as:

- A uniting force for the discipline
- The major catalyst for the stimulation, growth and dissemination of psychological science and practice
- The primary resource for all psychologists
- The premier innovator in the education, development, and training of psychological scientists, practitioners and educators
- The leading advocate for psychological knowledge and practice informing policy makers and the public to improve public policy and daily living
- A principal leader and global partner promoting psychological knowledge and methods to facilitate the resolution of personal, societal and global challenges in diverse, multicultural and international context
- An effective champion of the application of psychology to promote human rights, health, well being and dignity

Membership Information for Student Affiliates

If you're a graduate or undergraduate student taking courses in psychology, you are eligible to become an APA Student Affiliate. Annual dues for graduate students are \$67. And if you join as a graduate student, you'll automatically become a member of APAGS, the American Psychological Association for Graduate Students – the voice of student concerns in APA.

Benefits for student members:

- Special APA Annual Convention registration rates
- Eligibility for membership in APA Divisions
- *The American Psychologist* – APA's flagship journal
- *APA Monitor on Psychology* – APA's monthly magazine
- *gradPSYCH* – magazine for psychology graduate students
- Journal credit
- APA journals and online databases at substantial discounts off non-member rates
- Discounts off APA books and videos
- High-quality information resources
- Free online access to paid subscriptions' full-text files
- Listservs targeted to a variety of student interests
- Internship and career resources such as the comprehensive book *Internships in Psychology* and APA's Online Career Center, PsycCareers
- Scholarships and awards
- Support for the discipline of psychology
- Representation in Congress, state legislatures, and in major social and educational institutions
- Programs that educate the public and the media on the benefits of psychology

See details on the full range of APA discounts and services at:

<http://www.apa.org/membership/member/index.aspx>

Meetings

APA holds an annual convention every summer attended by members across the country. The convention is an exciting place to meet colleagues and discuss important issues. The convention offers a wealth of workshops, presentations, and exhibits on a variety of topics.

APA Divisions

The American Psychological Association is divided into 54 specialty divisions (for a complete listing, check out <http://www.apa.org/about/division/index.aspx>.

Division 12: Clinical Psychology

<http://www.div12.org/>

Applicants interested in and engaged in the practice, research, teaching, administration and/or the study of Clinical Psychology are welcome to join. Membership benefits include receiving Division 12 publications, *The Clinical Psychologist* and *Clinical Psychology: Science and Practice*. In addition, members can access the Division listserve: an active internet group discussing current issues pertaining to the field clinical psychology. Any given membership year ends as of August 31. Those who join after August 31 will have their membership take effect on January 1 of the

following year.

The American Psychological Association, Society of Clinical Psychology (Division 12) has nine sections covering specific areas of interest, including Section 2 for Clinical Geropsychology. Members of Division 12 may also join one or more of the Sections. Some sections also have categories for non-Division 12 members. For information on specific sections, see: <http://www.div12.org/sections/>.

Students are invited to become affiliated with the Society through the Student Affiliate Program. As a student affiliate, you will learn more about the activities and issues that are of interest to clinical psychologists. Undergraduate, graduate, and doctoral students are all welcome to become student members of the Society of Clinical Psychology.

Division 12 – Section 2: Society for Clinical Geropsychology
<http://www.geropsychology.org/>

This Section was established to further the professional goals and interests of psychologists practicing with older adults, teaching the clinical psychology of aging, or conducting related clinical research. Its purposes are to promote the general objectives of the American Psychological Association and the Division of Clinical Psychology; to support and to encourage the evolution and development of the subspecialty of clinical geropsychology in both its scientific and professional aspects; to increase scientific understanding of mental health of older adults; to promote the development of models for the delivery of psychological services to older adults; to foster collaboration and the sharing of information among clinical geropsychologists; and to increase the quality and availability of training opportunities in clinical geropsychology.

Division 20: Adult Development and Aging
<https://www.apa.org/about/division/div20>

The Division on Adult Development and Aging (Division 20) of the American Psychological Association strives to advance the study of psychological development and change throughout the adult years. We invite membership from psychologists who provide services to older adults, conduct research on adult development and aging, or are interested in learning more about or teaching life span development and aging. The division has a strong mentorship focus; we invite and encourage participation from students and emerging professionals who share our interests

Division 56: Trauma Psychology
<http://www.apatraumadivision.org/>

Division 56, the Division of Trauma Psychology, was established in 2006 by a joint effort of researchers, clinicians, educators, and public policy experts with an interest in the psychological effects of trauma. This division provides a forum for scientific research, professional and public education, and the exchange of collegial support for professional activities related to traumatic stress. By doing so, Division 56 facilitates a state-of-the-art response by psychologists and moves the understanding of trauma psychology forward. Division 56 offers a specifically psychological voice to the interdisciplinary discourse on trauma, blending science, practice, and a commitment to human welfare in our work.

Students are welcome to join a nationwide network of fellow students with professional interests in psychological trauma. Benefits include opportunities for networking with experts in the field and access to the Division 56 Student Listserv, a forum in which students can participate in academic conversations and events regarding cutting-edge work in trauma psychology. Membership is \$10.00 per year without journal subscription and \$22.00 per year with subscription to: Psychological Trauma: Theory, Research, Practice, and Policy.

Association for Psychological Science
<http://www.psychologicalscience.org/>

The Association for Psychological Science (APS; previously the American Psychological Society) is a nonprofit organization dedicated to the advancement of scientific psychology and its representation at the national level. The Society's mission is to promote, protect, and advance the interests of scientifically oriented psychology in research, application, teaching, and the improvement of human welfare. The APS was founded in 1988 by a group of scientifically oriented psychologists interested in advancing scientific psychology and its representation as a science at the national level. APS has over 35,000 members and includes the leading psychological scientists and academics, clinicians, researchers, teachers, and administrators.

Graduate Student Affiliation: Graduate Student Affiliate and Undergraduate Student Affiliate membership is open to anyone enrolled in a psychology degree program (or a related field) at an accredited institution for an annual fee of \$88. Student Affiliates receive the same benefits as regular members, including a subscription to five publications, discounted registration fees for the APS convention, award and grant opportunities, and more.

Gerontological Society of America
<http://www.geron.org/>

The Gerontological Society of America (GSA) is a non-profit professional organization with more than 5500 members in the field of aging. GSA provides researchers, educators, practitioners, and policy makers with opportunities to understand, advance, integrate, and use basic and applied research on aging to improve the quality of life as one ages.

Member Benefits: Graduate students can join GSA for a fee of \$98 a year and receive the following benefits of GSA membership:

- Annual subscriptions to two of the following preeminent scholarly publications (including online access): *The Journal of Gerontology Series A: Biological Sciences and Medical Sciences*, *The Journal of Gerontology Series B: Psychological and Social Sciences*, or *The Gerontologist*. (Get all three for only \$30 more!)
- Reduced registration rates to our Annual Scientific Meeting, the nation's largest multidisciplinary gathering of gerontology researchers from around the world. Save up to \$180!
- An annual subscription to *Gerontology News*, a monthly newsletter reporting on policy issues, society activities, funding opportunities, new resources, and much more.
- A subscription to GSA Announcements, an electronic newsletter with timely updates and deadline reminders available only to members.
- Valuable networking opportunities through our professional sections, interest groups, and committees.
- International peer recognition through awards, fellowship, and elected offices.
- And for students only, membership in GSA and our Emerging Scholar and Professional Organization, which has its own officers and committees, as well as special activities on campuses around the country.
- And many more!

International Neuropsychological Society

<http://www.the-ins.org/>

The International Neuropsychological Society is a multi-disciplinary non-profit organization dedicated to enhancing communication among the scientific disciplines which contribute to the understanding of brain-behavior relationships. The Society currently has more than 4700 members throughout the world. The Society holds two meetings per year. The North American meeting is held in February and the non-North American meeting is held in July. Graduate students can join for a fee of \$45 year.

International Society for Traumatic Stress Studies

<https://www.istss.org/>

The International Society for Traumatic Stress Studies (ISTSS) was founded in 1985 for professionals to share information about the effects of trauma. ISTSS is dedicated to the discovery and dissemination of knowledge about policy, program and service initiatives that seek to reduce traumatic stressors and their immediate and long-term consequences. ISTSS provides a forum for the sharing of research, clinical strategies, public policy concerns and theoretical formulations on trauma around the world. We are the premier society for the exchange of professional knowledge and expertise in the field.

Members of ISTSS include psychiatrists, psychologists, social workers, nurses, counselors, researchers, administrators, advocates, journalists, clergy, and others with an interest in the study and treatment of traumatic stress. ISTSS members come from a variety of clinical and non-clinical settings around the world, including public and private health facilities, private practice, universities, non-university research foundations and from many different cultural backgrounds.

Student Membership: Students may join ISTSS at the reduced rate of \$60 per year, or \$80-95 depending on preferred journal access. Benefits include reduced registration fees for the ISTSS annual conference, access to a student listserv where members can post questions, provide

information and communicate with peers who share common interests, subscription to the Journal of Traumatic Stress, the peer-reviewed bimonthly journal of ISTSS, and subscription to Traumatic StressPoints, a bimonthly newsletters with new developments in the field and the latest news associated with the society

Association for Behavior Analysis International

<http://www.abainternational.org/>

The Association for Behavior Analysis International (ABAI) is a nonprofit membership organization with the mission to contribute to the well-being of society by developing, enhancing, and supporting the growth and vitality of the science of behavior analysis through research, education, and practice.

American Society on Aging

<https://www.asaging.org/>

The American Society on Aging is an association of diverse individuals bound by a common goal: to support the commitment and enhance the knowledge and skills of those who seek to improve the quality of life of older adults and their families. The membership of ASA is multidisciplinary and inclusive of professionals who are concerned with the physical, emotional, social, economic and spiritual aspects of aging. Graduate students can join for a fee of \$100 a year.

Regional Organizations:

Rocky Mountain Psychological Association (RMPA)
<http://www.rockymountainpsych.com/>

Midwestern Psychological Association (MPA)
www.midwesternpsych.org

Southeastern Psychological Association (SEPA)
www.sepaonline.com

Southwestern Psychological Association (SWPA)
www.swpsych.org

Western Psychological Association (WPA)
www.westernpsych.org

Appendix D: Checklist for the First Year

- Y **Get your student I.D.** You can pick up your student I.D. card from the information desk in the University Center. This will also be your library card, so take a minute to stop by the library and register it there as well.
 - Y **Get your parking pass.** Parking on the UCCS campus is not free when classes are in session. Parking passes usually go on sale in July for the Fall semester; or you can get a pass for the full academic year – but be aware that this will not cover you over the summer. You may want to have your schedule handy when you buy this, so that you can decide which type of parking pass you will need. You can read more about this or register for a parking pass here: <https://pts.uccs.edu/parking/welcome>
- Y **Learn about Paw Prints.** You will usually have to pay by the page to print from the computer labs on campus. (This will pop up automatically when you try to print something.) The printing job will be automatically sent to your account queue and can be printed from any printer station around campus. As a new student, you should have some amount in your Paw Prints account. You can check your balance or add to your account here:
<https://oit.uccs.edu/services/printing/pawprints>
- Y **Learn about the Z drive.** Professors may reference you at one time or another to their outboxes. Everyone at UCCS has an account on the Z drive. You can use this to save your files while on campus, and also to access readings, assignments, and other materials that professors post for classes. Campus computers will already be set up to access the Z drive, but you can also set up a connection at home or on your laptop:
<https://kb.uccs.edu/display/KB/Help+Desk+Knowledge+Base>
- Y **Think about joining professional organizations.** This may be necessary in order to attend specific conferences (such as the Gerontological Society of America conference and ISTSS conference, both typically in November), or may just be a good idea. You should consult with your mentor about this, as different professors will have different ideas about which are important for you to join given your interests. Most graduate students in the department are members of APA, which leads to the next point...
 - Y **Think about buying your professional liability insurance.** You may need this if you are assigned a practicum at the Gallogly Recreation and Wellness Center Mental Health Services (MHS) clinic. APA has insurance for students at a reasonable price; you'll probably want to do this at least 1 month ahead of your practicum start date.
- Y **Get ready to apply to MHS clinic in November.** Applications for the MHS clinic are typically due in mid-fall for Gero students who do a pre-practicum in spring semester. Trauma students who apply for year 2 will apply in spring for the following fall. Watch for information from DCT or ADCT. Check their website for the updated process, but

you will probably need a cover letter as well as three letters of recommendations. (You can ask clinical faculty as well as your research mentor to write these for you.) You can read more about the clinic here: <https://recwellness.uccs.edu/mental-health-services/about-us>

Applications for other practicum sites are typically in February/March.

Appendix E: Policy and Guidelines on Telesupervision

The use of telesupervision will be administered in compliance with Implementing Regulation (IR) C-13 D, Telesupervision (formerly C-28; Commission on Accreditation, July 2010; revised November 2015, July 2017). According to IR C-13 D, Telesupervision is defined as the “supervision of psychological services through a synchronous audio and video format where the supervisor is not in the same physical facility as the trainee.” Telesupervision is to be conducted in accordance with the same Guidelines and Principles, and Code of Ethics, set forth by the American Psychological Association for in-person supervision and training.

It is the program’s view that an in-person, face-to-face relationship is the best way to conduct supervision. Noted benefits to in-person supervision include, but are not limited to, opportunities for professional socialization and assessment of trainee competence, which are essential aspects of professional development, ensuring quality, and protecting the public. However, there are situations that may arise in which in person supervision is not possible and telesupervision would be considered. Following the guidelines and limits described below, telesupervision within the UCCS Clinical Psychology Training Program is regarded as consistent with our program’s overall model of training in that it best approximates the face-to-face format of supervision and can ensure continuity in the supervisory experience.

Guidelines:

Telesupervision should only be utilized when in-person supervision is not possible. Telesupervision is not to be used regularly for travel (e.g., student lives outside of Colorado Springs) or financial expedience (e.g., low-cost substitute for in-vivo supervision). Certainly, brief telesupervision for acute/crisis situations is acceptable, as it allows for immediate feedback. However, in general, telesupervision does not facilitate recognition of nonverbal or affective cues, provide for a smooth exchange of feedback, and other important aspects of supervision, unless it is conducted through a synchronous audio and video format. This format is highly recommended and would allow for the face-to-face component of supervision required for students to count towards APPIC supervision hours

(https://help.liaisonedu.com/AAPL_Online_Applicant_Help_Center/Filling_Out_Your_AAPL_Online_Application/Summary_of_Practicum_Experiences/04_Supervision_Received).

Telesupervision is to be used only for the competency-based development of clinical skills consistent with our program’s training model. Telesupervision may not account for more than 50% of the total supervision time for a given semester of practicum. Telesupervision may not be utilized until the interpersonal supervisory relationship has been established. Telesupervision may not be utilized at all until the student trainee has completed his/her

first semester of practicum and with at least two (2) cases of at least six (6) sessions of intervention experience within the program.

If and when telesupervision occurs, both supervisor and supervisee are responsible for identifying a private location to conduct the activity. The student trainee and supervisor must take steps to protect client and supervisee confidentiality and security. These steps include, but are not limited to, using HIPAA-compliant, secure telecommunication platforms and private viewing/conversation areas. The supervisor and student should seek relevant literature and training and/or consultation, in the use of technology-assisted devices and platforms, especially in the matter of client and supervisee confidentiality and security. The program's policy and guidelines on the practice of telehealth provision by students can be a useful guide for ensuring measures are in place to protect the privacy and confidentiality related to clients and trainees from unintended access or disclosure. A link to the UCCS HIPAA policies can be found here for reference <https://www.uccs.edu/compliance/news/health-insurance-portability-and-accountability-act-1996-hipaa>.

Finally, telesupervision will only be viewed as a legitimate form of supervision if it is determined by both the supervisor and the student trainee that both the audio and video quality of the connection is adequate for the proper conduction of supervision, and a protocol has been established for how to proceed in the event of equipment failure (e.g., the trainee immediately phones the supervisor).

If utilizing telesupervision, on-site (i.e., campus-based) supervisors maintain full responsibility for the cases under the care of the student trainee unless arrangements are made with at least one other clinical faculty supervisor or training clinic psychologist to cover for non-scheduled consultations and emergencies. Off-site (e.g., externship) supervisors maintain full responsibility for the cases under the care of the student trainee unless arrangements are made with at least one other licensed psychologist to cover for non-scheduled consultations and emergencies.

Appendix F: Policy for Telehealth Provision by Students

In the case of emergency situations that require social distancing, the provision of telehealth services to support clients may be allowable. However, students are to use telehealth only under certain conditions that are approved by faculty and clinic directors:

I. Established therapeutic contact

- a. Students have met with clients from their assigned rotations in-person *prior* to a telehealth session and are using these sessions to provide therapeutic support or continuity of intervention during a period of public health crisis when face-to-face sessions are not possible.
- b. Safety. Students have established an agreement (written or verbal) relative to the client's willingness to access face-to-face emergency services in instances such as the client experiencing a suicidal or homicidal crisis that is consistent with the duty to protect and civil commitment statutes.
- c. Anticipated use of telephone contacts for therapeutic interventions are brief in most instances (e.g., check-ins). If the contact needs to be longer, supervisors should be notified immediately to discuss client needs and next steps.

II. Supervisor approval

- a. Students in practicum at the Aging Center are required to conduct a review of all cases with their supervisor using the Client Audit Form. A copy of this document should be filed with their supervisor(s) and Aging Center Director.
- b. Students in practicum at external sites are required to follow the on-site protocols at their sites with supervisor check-in. If there is no protocol in place, students should work directly with their supervisors to develop guidelines collaboratively. Use of the Client Audit Form can be considered (up to supervisor discretion), but this form is not required.
- c. Students and supervisors have established a protocol for how to proceed in the event of equipment failure (e.g., the trainee immediately phones the supervisor).
- d. Students schedule phone contact with clients at times when supervisors have committed to be available for immediate real-time supervision in case of a concerning interaction with the client on the phone.

III. Communication

- a. Students should take precautions to ensure a quiet, distraction free environment for the telephone calls. This will assist with protecting patient confidentiality and ensuring proper focus on the client and the content of the telephone conversation.
- b. Students should use identification blocking on their cell phones, or make calls from their practicum site phones.
- c. Documentation
 - 1. Documentation of patient contact is critical. Documentation states the modality of contact, the purpose and rationale for not meeting face-to-face, and for the session (e.g., check-in, reassurance and support, therapy). Students will be allowed to use templates to write their contact notes, keep them within a safe place at home, and then scan into charts when the crisis is over.
 - 2. Students that have no remote access, can upload their notes using File Locker and send to their supervisor.
- d. A link to the UCCS HIPAA policies can be found here for reference
<https://www.uccs.edu/compliance/news/health-insurance-portability-and-accountability-act-1996-hipaa>.

Graduate Student Handbook

**Clinical Psychology Ph.D. Program
with Major Area of Study in Geropsychology
and**

**Clinical Psychology Ph.D. Program
with Major Area of Study in Trauma Psychology**

Department of Psychology

I hereby declare that I have received, read, and agree to the policies and procedures detailed in this Graduate Student Handbook.

Please return the signed form to the Director of Clinical Training Assistant (dctasst@uccs.edu).

Student Name (Print)

Student Signature

Date