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I. BACKGROUND

This manual is designed to facilitate the student's progress through the clinical psychology training program at The University of Alabama. It is part policy, part recommendation, and part collected information not otherwise readily available. The manual is intended to supplement other important published material in the Graduate Catalog, the Department of Psychology Graduate Brochure, the Department Policy Handbook, the Graduate Student Handbook, and the Psychology Clinic Manual. Clinical students are also assigned faculty advisors and are encouraged to use the advising system throughout their residency. Students are expected to remain aware of various deadlines and other significant dates publicized by the Department of Psychology and the Graduate School.

The present document supersedes all previously dated versions.

Students are required to sign a statement indicating that they have read the Clinical Training Manual (including the APA Ethics Code) and will abide by the standards within the manual (including the APA Ethics Code). This signed statement will be kept in the student’s file. See Appendix M.

An Overview of the Clinical Program

The clinical psychology doctoral program embraces the scientist-practitioner (Boulder) model of training. Graduates are expected to be able to contribute to the science of psychology, to infuse their clinical functioning with empirical findings and theoretical concepts, and to achieve a high level of expertise in the delivery of psychological services. These goals are addressed through an interrelated program of academic coursework, research experiences, and clinical practica. Students also participate in other less structured opportunities available including colloquia, community projects, professional association activities, paper presentations, agency assignments, interdisciplinary campus events, departmental governance, and peer advising. Thus, the student not only completes a rigorous academic program but also becomes a member of the psychological community, interacting with faculty, staff, other professionals, and fellow students on both a scholarly and more personal level.

Although a specific curriculum has been designed and common experiences are required for all clinical students, a considerable degree of diversity is also encouraged. Students vary widely in their clinical interests and career goals. Research interests are similarly diverse as reflected by the range of dissertation topics and faculty/student research projects undertaken in the past several years. Program unity is achieved through the general and clinical core curricula, the basic practicum sequence, and the research experience. Beyond that, the student is free to select specialty training and electives and to pursue any clinical and research interests that are available in or through the Department.

Accreditation

The clinical psychology program has been accredited by the Commission on Accreditation of the American Psychological Association (APA) since 1959. The aim of accreditation is to promote program excellence and to provide professional and objective evaluation of programs as a service to the public, prospective students, and the profession.

To maintain its accreditation, the Department submits an annual report summarizing the year's activities with respect to accreditation criteria. Every five to seven years, the program undertakes a more detailed self-study followed by a site visit from an accreditation team. The last such visit was conducted in March 2016 with 5 years of accreditation awarded in May 2017. Students contribute information to the self-study process and are requested to be available to site visitors for discussion and feedback. The Department's annual reports, the accreditation report, and related
materials are available for inspection to matriculated students from the Director of Clinical Training (DCT).

II. ACADEMIC AND CLINICAL EXPERIENCE

Curriculum

Reflecting APA standards, the curriculum for the clinical training program provides instruction in the fundamental areas of psychology. These include basic content areas of psychology (i.e., affective, biological, cognitive, developmental, and social aspects of behavior), history and systems of psychology, advanced integrated knowledge of basic content areas, and research and statistical analysis (including psychometrics). Further, students develop profession-wide competencies in areas such as research, ethical and legal standards, individual and cultural diversity, professional values and attitudes, communication and interpersonal skills, assessment, intervention, supervision, and consultation and inter-professional/interdisciplinary skills. These topics are covered by a combination of courses and program experiences. The number of credit hours required for graduation varies by concentration; specific courses are listed on pages 8-10 and on the Curriculum Checklists, Appendix A. The coursework can usually be completed within 4-5 years with a full-time course load. Additionally, the student must undertake a minimum of 6 credit hours of thesis research and a minimum of 24 credit hours of dissertation research, typically in the third, fourth, and fifth years. Credit hours per semester are determined by the amount of time devoted to the research.

The clinical core includes substantial instruction and practicum components in the areas of psychological assessment and diagnosis and psychological intervention procedures. Clinical students also select an area of concentration (clinical health, geropsychology, clinical child, or psychology & law) and/or a series of advanced clinical and general electives. Specialty courses are open to all clinical students provided prerequisites have been met and course instructor approval has been obtained. Students may also apply to the University of Alabama at Birmingham (UAB) MPH (Master of Public Health) program as an adjunct to their doctoral work. Areas of clinical concentration are described later in this manual. Students may also pursue coursework and/or a graduate minor outside the department. A minor in Statistics is available in the department (see details in the Graduate Student Handbook.)

Students enroll for supervised research experiences as early as practical. A master’s thesis is required prior to beginning a dissertation project. Students entering the program with a master’s degree may request departmental approval to waive the thesis requirement.

The curriculum presumes that students have had the requisite undergraduate training including courses in introductory psychology, statistics, general experimental, and abnormal psychology. Delays in taking certain graduate courses may be experienced if prerequisites have not been met.

An outline of the typical curriculum sequence for clinical students is presented on page 5. The sequence varies somewhat with individual students. Most courses are taught only once per year or every two years. Summer coursework is typically reserved for deficiencies, specialty courses, and research activities. A complete list of courses available in the Department can be found in the Graduate Catalog.

A student curriculum checklist of courses and a Student Activity Report Form (SAR) are included in the appendices. The student should use the curriculum checklist (Appendix A) as a reference and record-keeping aid. The student will complete the Student Activity Report (Appendix C) and provide one copy to his/her Advisor and one copy to the DCT prior to the year-end evaluation. An updated copy of the Report will be maintained in the student’s clinical program file. Students will keep electronic records of all of their clinical contact
hours using Time2Track software. Hard-copy print-outs will be included as part of the Student Activity Report on a yearly basis and will be kept in the student’s file.

Research Experience

At Alabama, the Doctor of Philosophy (Ph.D.) degree in psychology is a research-oriented degree. As scientist-practitioners, clinical psychologists contribute to furthering knowledge in the field and maintain an awareness of scientific developments. They are equipped with the knowledge and skills both to conduct research and to intelligently interpret the work of others. The student gains and demonstrates research competence through the master’s thesis and the doctoral dissertation (see Graduate Student Handbook for guidelines). Specific coursework, apprenticeships, assistantships, and independent projects are also used to foster the necessary skills.

Active faculty-student collaboration typically begins in the first year. Students’ advisors (mentors) are selected to best match students' stated research interests. During the first year, students develop research ideas and work on joint projects with faculty and advanced students. Several first-year core courses in both general experimental and clinical psychology require papers and/or a research prospectus. First year students may also engage in a variety of research-related activities.

Beginning in the spring of the first year, clinical students may enroll for one or more hours of thesis credit (a total of six thesis hours is required). Faculty supervision is provided and tangible evidence of progress is required. **Students must have successfully defended their thesis research project by the end of the fall semester of their third year to continue course registration in the doctoral program. Should the student fail to do so, he or she must petition the clinical faculty for permission to take coursework during the spring semester of the third year and subsequent semesters until the thesis is completed.**

- **Third-year deadline: Master’s thesis defense.** Students must pass their master’s thesis defense by the last day of the spring final exam period of their third year in the Clinical Psychology graduate program. If a student fails to do so, s/he will not be allowed to continue on to the Ph.D. The student will be allowed a maximum of one additional year to complete the thesis and the M.A. degree. However, the student will no longer be in good standing and will not be eligible for funding during the additional year. (effective August 2014)

The doctoral dissertation is normally begun during the third year. Detailed guidelines are given to each new student and are contained in the department's Graduate Student Handbook.

Student research efforts are recognized at the University level. Clinical students have competed favorably for Graduate Council Research Fellowships, which support their research. Assistantship support or funding through specific research grants may depend in part on students’ prior research performance. The Graduate School also supports student research through competitive small grants and travel awards. Announcements for application are routinely distributed.

Faculty-student joint publications are common prior to graduation. Based on a recent analysis, 10-12 co-published articles per year are typical for the department. It is also not unusual for 15-20 clinical students to present papers at state and regional meetings each year. (Limited financial assistance is available for those students presenting first-authored papers.) Follow-up studies of our graduates indicate that a sizable number publish at a high rate after graduation.
Clinical Psychology Course Sequence – 4/5 Year Plan with Internship

### Year One

**Fall**
- PY 607 Research Methods (3)
- PY 602 Statistics I (3)
- PY 608 Introduction to Ethics (3)
- PY 609 Psych Assessment I (4)
- PY Pro Seminar (1)
- PY 664 Psychometrics (1)

**Spring**
- PY 658 Psychopathology (3)
- PY 603 Statistics II (3)
- PY 619 Principles of Psychotherapy (3)
- PY 610 Psych Assessment II (3) or (PY 666 or PY 612 (3; Child Students))
- PY Pro Seminar (1)
- PY 599 Thesis (1-3)*

**Summer**
- PY 621 PoP Lab (1)

### Year Two

**Fall**
- PY 631 Basic Practicum (3)
- 3 hour Req Option (3)
- 3 hour Req Option (3)
- PY Pro Seminar (1)
- PY 599 Thesis (1-3)*

**Spring**
- PY 631 Basic Practicum (3)

**Summer**
- PY 631 Basic Practicum (1)

### Year Three

**Fall**
- PY 695 Teaching of Psychology (3)
- 3 hour Req Option (3)
- 3 hour Req Option (3)
- 3 hour Req Option (3)
- PY 699 Dissertation (3 or more)

**Spring**
- 3 hour Req Option (3)
- 3 hour Req Option (3)
- 3 hour Req Option (3)
- PY 699 Dissertation (3 or more)

**Summer**
- **
- PY 699 Dissertation (3 or more)

### Year Four/Five

**Fall**
- 3 hour Req Option (3)
- 3 hour Req Option (3)
- 3 hour Req Option (3)
- 3 hour Req Option/Elec (3)
- PY 699 Dissertation (3 or more)

**Spring**
- 3 hour Req Option (3)
- 3 hour Req Option (3)
- 3 hour Req Option (3)

**Summer**
- **
- PY 699 Dissertation (3 or more)

### Year Five/Six: Internship

**General Requirement Options (all 3 hour courses):**
- Stats III (several options available)
- PY 629 Biological Bases of Behavior
- PY 630 Affective Neurophysiology (PY 629 prerequisite)
- PY 650 Cognition and Learning
- PY 652 Life-Span Affect and Developmental
- PY 672 Advanced Social
- PY 690 Cultural Competency
- PY 695 Teaching of Psychology (requires completion of master’s thesis)

**Required Options continued (variable):**
- PY 669/679/688 Pro Seminar (1 hr/4 semesters required)
- PY 639/637/641/642 Advanced Practica (1-3 hours; required hours varies)
- PY 641 Advanced Clinical Placement (1-3; external placements)

**Concentration Requirement Options (see Appendix A):**
- PY 610 Psychological Assessment II (Adult students)
- PY 612 Psychological Assessment III (Child students)
- PY 666 Child Treatment (Child)
- PY 676 Forensic Assessment (Law)
- PY 678 Forensic Psychology (Law)

**Note:** Subject to Change
Practicum Experience

Students shall have a copy of Ethical Principles of Psychologists and Code of Conduct and the Psychology Clinic Manual for study and discussion in various seminars and classes. **Students are required to abide by the APA Ethical Principles, and they must sign a statement affirming that they have read and will abide by the Standards (see Appendix M).** A copy of this signed statement will be kept in the student’s clinical program file.

During Year 1, students receive an orientation to the clinic to acquaint them with current clinic and program policies on such issues as record keeping, confidentiality, and room assignments. Training for intakes starts during the spring of Year 1 in Principles of Psychotherapy (PoP) and continues through Summer 1, PoP Lab. Intake duty begins fall, Year 2, and students serve as the intake person on call on a rotating basis continuing through Summer 2.

Beginning in the fall (Year 2), clinical students take one full year of Basic Practicum in the Psychology Clinic. Students are assigned cases for assessment and intervention and are supervised by clinical faculty each term. The direct contact hour goal for Basic Practicum is approximately 100 hours for the 3-semester sequence. Four to five active clients per week are needed to achieve this level of contact. If contact hour goals are not achieved, students will take an additional course credit of Basic Practicum during the fall, Year 2. As appropriate for the needs of the client, students are expected to arrange for termination or transfer of their clients by the end of the summer semester or to continue as the primary therapist into the fall term.

Supervision in the psychotherapy practicum involves an individual weekly meeting with one's supervisor(s) and a small group supervision meeting. This latter meeting is helpful for planning for the Spring Case Conference presentation. Instructors vary in their style, emphasizing problem-solving, case formulation, coverage of specific techniques, and discussion of therapeutic issues (e.g., ethics, termination, resistance, specific treatment questions). Most assign didactic materials.

Individual supervision involves at least one hour per week during the fall and spring semesters and includes reviewing case files, direct observation (i.e., listening to audio or video recordings or live observation), and additional methods deemed most appropriate by the supervisor. **As per APA accreditation guidelines, direct observation via audio, video, or live observation is required at least once per student per evaluation period.** For supervisors using audio and video recordings for direct observation, students are expected to regularly record their sessions. Case review and notetaking is expected of the student prior to supervision.

Students will also present at a Clinical Case Conference during the spring semester. Faculty and other practicum students attend these conferences. **Attendance is required** for practicum students, supervisors, and designated clinical faculty. Others are invited to attend. A schedule is distributed at the beginning of the semester. Guidelines for case conferences are contained in the Psychology Clinic Manual.

In addition to Basic Practicum, students take an additional 3 or more semester hours of advanced practicum usually within a concentration (specialty) area or an approved practicum in the Clinic. A variety of off-campus placements are also available to clinical students. See Appendix F for additional practicum information.

Clinical Placements

Advanced students (usually 3rd year and beyond) may be afforded an opportunity to work part-time in a clinical setting for remuneration. These paid clinical placements are not meant to provide all or most of the required clinical training. However, they give students an opportunity to receive financial aid while performing some duties of clinical relevance. Students will also be provided access to training facilities as unpaid workers. In some cases, these paid and unpaid clinical
placements may also serve as meeting advanced practicum requirements. A partial listing of sources is included in Appendix E. **Students taking paid and unpaid placements must register for at least one hour of advanced clinical placement (PY 641), including the summer terms if the placement is 12 months. Students interested in multiple placements/practica MUST discuss this with the DCT and/or Associate DCT. If approved, the DCT and/or Associate DCT will determine the appropriate course registration, and documentation will be placed in the student's program file.**

**Placement negotiations are made only through the DCT.** Placement decisions are made by the DCT, through consultation with the sponsoring agency and the coordinator of the student's specialty area. It is the norm that clinical placements are for a one-year (or 9-month) period. This guideline is in the best training interest of the student, because it maximizes student exposure to a broad range of clinical experiences. Also, limiting placements to one year terms maximizes the number of students provided the opportunity to be placed at particular agencies.

**ANY clinical work engaged in by a graduate student, paid or unpaid, must be approved by the DCT and/or Associate DCT and must be supervised by a licensed psychologist. A description of the activities, including a memorandum from the supervisor detailing the supervision arrangement, shall be provided by the student to the DCT and/or Associate DCT for the student’s file.** This includes any volunteer or paid work done that might be construed as "psychological" in nature. The host agency is expected to provide a professionally sound training setting for the student, which includes adherence to the Standards for Providers of Psychological Services. Students should expect to receive feedback from their supervisors on a regular basis. End of term (fall, spring, summer) feedback is solicited by the Department and becomes a part of the student's clinical program file (see example in Appendix G).

Paid clinical practica do not usually carry a tuition grant as part of the contract. Because of this, the DCT has negotiated a higher salary rate in order to help defray the cost of the tuition the student will have to pay.

**Internships**

A full-year pre-doctoral clinical internship is required of all students. Unless an exceptional case can be presented, students must intern at APA-accredited training sites. Although application during the fourth or fifth year is typical, students are eligible to begin applying to internship sites in their third year of residency assuming all core courses will have been completed by the end of that year. **Students must have passed the preliminary doctoral examination by October 1 of the year they apply for internship. Furthermore, students must have their initial mini-proposal meeting 8 weeks prior to the October 1st deadline.**

Students eligible for internship meet with the DCT, the Associate DCT, and the clinical program assistant to receive information about the application process. Extensive information about internship sites is available from the APPIC website: [http://www.appic.org](http://www.appic.org).

A list of recent internship sites is located on our program website. The Department solicits feedback from internship programs at 6 months and at the end of training. The internship training director typically provides a detailed letter regarding the intern's progress, strengths, and weaknesses. A copy of this evaluation is maintained in the student's clinical file.

**Students MUST have completed the internship before the University will confer the degree. The Graduate School will provide a “Completion of Degree” if needed in order for the student to be eligible for a post-doc or employment before the degree is conferred.**

**The department also requires that the student submit a CD containing appropriately labeled dissertation raw data and final dissertation prior to being cleared by the department.**
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for graduation. The student must present a bound copy of the dissertation to his or her dissertation chair(s) unless the chair(s) inform the student that a bound copy is not required.

Clinical Concentration Areas

All students complete the same clinical and research core:

Clinical Core:
- Psychological Assessment I (4 hours)
- Psychometrics (1 hour)
- Psychopathology (3 hours)
- Principles of Psychotherapy (3 hours) and lab (1 hour)
- Introduction to Ethics (3 hours)
- Cultural Competency (3 hours)
- Supervision, Consultation, and Inter-professional Skills (3 hours)
- Pro-Seminar (specific to concentration; 4 semesters)
- Basic Practicum (minimum 3 semesters including the summer; 7 hours)

Research Core:
- Research Methods (3 hours)
- Advanced Stats I (3 hours)
- Advanced Stats II (3 hours)
- Advanced Stats III (3 hours – several options available)

In addition to general clinical training, four clinical concentration areas are currently offered. These are: clinical health, geropsychology, clinical child, and psychology & law. The general core varies slightly by concentration and is listed in the sections following, as are the advanced courses required of each concentration.

A concurrent PhD/MPH (Master of Public Health) is also available to students in any concentration, provided they have applied for and been accepted into the program. Regardless of area of concentration, all students share the common core curricula and are free to enroll in any elective or specialty course as long as prerequisites are met. Advanced practicum or field placement experiences in hospital, institutional, and community settings are available to all clinical students.

The concentrations are characterized by additional course requirements, research projects, specific faculty involvement, work and practicum placements, informal meetings, and professional interactions, all designed to give the student entry level competence in the specialty area. To a large extent, the areas of concentration build upon and integrate with a student's general clinical training. The following descriptions provide brief summaries of the concentration areas.

Clinical Health Psychology

Students in the clinical health psychology concentration will receive additional training in health psychology and behavioral medicine. They will take a one-semester course geared toward psychological assessment and advanced treatment of medical patients, Advanced Health Psychology practicum at the University Medical Center (or in other locations, as available), and attend all semesters of the one-hour Health Psychology Seminars.

In addition to the general, clinical, and research cores, the curriculum in clinical health psychology includes:
Clinical Geropsychology

Clinical geropsychology has emerged as a new and growing specialization to meet the needs of the increasing population of older adults. The psychology department at The University of Alabama offers a geropsychology concentration to prepare professionals for research and service with older adults. Training opportunities are available at, but not limited to, Mary Starke Harper Geriatric Psychiatry Center, Elder Law Clinic, local primary health care clinics, Hospice of West Alabama, and the Center for Mental Health and Aging (CMHA).

In addition to the general, clinical, and research cores, the curriculum in geropsychology includes:

- Psychological Assessment II (Personality)
- Clinical Psychology of Aging: Assessment
- Clinical Psychology of Aging: Intervention
- Advanced Geropsychology Practicum

Clinical Child Psychology

Students in the clinical child concentration receive additional clinical training and coursework focused on children and their families. Students take specialty courses in assessment, intervention, and practicum. Child practicum involves therapy/consultation placements at multiple sites including University Medical Center’s (UMC) Attention-Deficit/Hyperactivity Disorder Clinic in the Department of Pediatrics and the UA Psychology Clinic. This practicum is supervised by one of the clinical child faculty members. Advanced students have additional opportunities to receive training supervised by adjunct faculty members at Brewer-Porch Children’s Center (e.g., Short Term Treatment and Evaluation Program), the UA Autism Clinic, and the University of Alabama at Birmingham’s Child Neuropsychology Clinic. Specific agencies may vary from year to year.

In addition to the general, clinical, and research core, the curriculum in clinical child psychology includes:

- Psychological Assessment III (Child Assessment - 3 hours)
- Child Treatment (3 hours)
- Advanced Child Practicum (4 semesters/12 hours)

Students enrolled in the clinical child concentration area may choose to take additional coursework in the area of child and adolescent forensic psychology. This emphasis offers students a unique opportunity to bridge two concentration areas within the clinical psychology program: Clinical Child and Psychology & Law.

In addition to the coursework required for the general clinical child concentration, this emphasis area requires:

- Child and Adolescent Forensic Psychology
- Psychology & Law Pro Seminar (2 semesters)
- Practicum in Child and Adolescent Forensic Psychology (one semester of Advanced Child Practicum should be with this specialty population)
**Psychology & Law**

Students in the Psychology & Law area take graduate seminars, conduct research, and receive supervised experience with a range of agencies, clients, and issues related to law and justice. These include courts, police, offenders, juries, and prison systems. Relationships with several agencies facilitate training in this area including: Taylor Hardin Secure Medical Facility, the Tuscaloosa Juvenile Court, the University of Alabama Law School, and individual attorneys and judges. Periodic opportunities also exist to become involved in jail and prison facilities and in actual court cases.

In addition to the general, clinical, and research cores, the curriculum in Psychology & Law includes:

- Psychological Assessment II (Personality)
- Forensic Psychology
- Forensic Assessment OR Practicum in Psychology VII (Forensic)

**Concurrent MPH Program**

The doctoral student in clinical psychology who elects to pursue a concurrent Master's degree in Public Health (from the University of Alabama at Birmingham) may choose from any of several tracks within public health. Requirements for the MPH vary somewhat dependent on the track selected, but all students take courses in Public Health in such areas as:

- Epidemiology
- Environmental Health
- Health Care Organization and Policy
- Health Behavior
- International Health and Global Studies
- Administration and Policy
- Maternal and Child Health
- Public Health Law

Some MPH requirements will be satisfied by coursework taken in the psychology curriculum. Further information regarding the program and the application process is available from Dr. Martha Crowther.

**Other Requirements for the Ph.D.**

Specific course requirements are listed in the previous section and on the Curriculum Checklists (Appendix A). Statements regarding the master's thesis, the preliminary doctoral examination, and dissertation guidelines are contained in the Department of Psychology Graduate Student Handbook, which is available on the Psychology Department website.

The Graduate School requires that only courses taken during an 8-year period at the University will be accepted toward the Ph.D., and for students entering with a master’s degree, the time limit is 6 years (See pg. 12 for transfer credit guidelines). Thus, if a student is permitted to continue in the program beyond 8 years, he/she will be required to re-certify all out-of-date coursework via examination or retaking the course. **In most cases, students who do not finish all requirements for the Ph.D. by the end of the 8th year, including the successful defense of the dissertation and formal acceptance of their document by the Graduate School, will not be permitted to continue in the program (see Graduate School policy in the Graduate Catalog, Section 4.9.3 for time limits).**
Scholastic Requirements

As noted in the Graduate Catalog, Section 4.6, a "B" (3.0) average is required for continuation and graduation. Students admitted unconditionally are placed on “academic warning” if their average goes below a 3.0, and they must raise their overall average to a 3.0 or better during 12 hours of graded coursework immediately following the period in which the warning status was incurred. Students admitted conditionally must achieve a 3.0 average in their first 12 hours of graded coursework (see Graduate Catalog, Section 4.5).

The Department of Psychology also requires that doctoral students receive no more than two "C”s (or lower) in graduate courses. This requirement is called the “3 C Rule.” If a student receives an “F” in a pass-fail course, this failing grade is factored into the “3-C Rule.” Grades of “D” or “F” do not receive graduate credit. “A course that is required in a student’s curriculum in which a grade of ‘D’ or ‘F’ is earned may be repeated for credit, upon the recommendation of the major department or program area and the dean of the Graduate School. Both grades will be considered in the computation of the grade point average.” (Graduate Catalog, 4.6)

The Department of Psychology also requires that clinical students obtain grades of B or higher to demonstrate competency in key training areas. If a student receives a grade of C or lower in a course, they will be required to complete remediation activities to bring the level of performance up to a B based on the instructor’s evaluation of performance on remediation activities. Their grade will still be recorded as a “C”, though, and the 3 C Rule still applies.

At the discretion of the student's advisor and in consultation with the DCT and the Director of Graduate Studies, students with special needs may be assigned a remedial activity (activities) as part of their academic load. Possibilities include the Writing Lab, auditing such courses as undergraduate Experimental Psychology or Statistics, or other such specific plans that address deficit areas.

Students will occasionally run into deadline problems that necessitate negotiating an “Incomplete” in a particular graduate class. The clinical faculty is flexible regarding such student needs, but we believe that such accommodations should be infrequently implemented. If you find that you need to negotiate an “incomplete” in a course (or drop the course altogether), consult the instructor as well as the DCT.

Related Policies

400/500 Level Courses

A few courses in the Department are offered at the combined 400/500 level, enrolling both qualified senior undergraduate students and beginning graduate students. Graduate students are reminded to sign up for the graduate level number (500 level). Appropriate additional work will be required for graduate credit.

Continuous Full-time Enrollment

The Department does not admit part-time students. The typical load is considered to be 12 hours. A 9-hour maximum is sometimes imposed on students with certain graduate fellowships, particularly graduate research fellowships (i.e., thesis and dissertation fellowships). Although it is most wise to remain in full-time residence (i.e., maintain a residence in Tuscaloosa, be on the University campus at least several times per week, have regular, face-to-face contact with dissertation chair) until after successfully defending the dissertation, students must remain in full-time residence until after successful completion of their preliminary exam.
Enrollment for dissertation credit must be continuous once the dissertation project is begun. This means that once a student has passed his/her prelims, he/she must register for a minimum of 3 dissertation hours during subsequent fall and spring semesters, including the internship year, until the dissertation has been successfully defended and submitted to the Graduate School. See the Graduate Catalog, Section 4.9.3, policy on “Final Semester Dissertation Minimum Registration...” to determine dissertation research hour registration requirements once the dissertation has been submitted to the Graduate School. An exception regarding registration in the final semester is granted to those students on internship whose dissertation has been approved by the Graduate School prior to the final semester. Specific guidelines for number of hours in relation to amount of anticipated work are detailed in the Graduate Catalog, Section 4.5.

Transfer of Graduate Credit

Clinical students may receive partial credit for previous graduate work in psychology. The Graduate School has specific requirements and limitations for awarding such credit as noted in the Graduate Catalog, Section 4.9.3. The student with prior graduate work that encompasses part of the typical first year curriculum will be placed in a slightly different course sequence. For clinical students, the DCT will make a recommendation to the Director of Graduate Studies on the amount of credit to be transferred. Final approval is granted by the Dean of the Graduate School.

For the doctoral degree, a maximum of 50% of the required coursework will be accepted for transfer. For students with master's degrees in psychology, 12-24 hours is more typical. The student desiring transfer of graduate credits should contact the Graduate Programs Assistant to initiate the process, then 1) consult with the faculty member(s) with particular course responsibility to evaluate the equivalence of coursework taken elsewhere*; 2) obtain an email or written note that the faculty member judges the course to be equivalent; 3) give the DCT, the Director of Graduate Studies, and the Graduate Programs Assistant a copy of the notes confirming the equivalency of each course for which he/she wishes to receive transfer credit; 4) contact the Graduate Program’s Assistant to see that all pre-approved* courses have been included on the Request for Transfer Credit. The Graduate Programs Assistant will submit the paperwork to the Graduate School and provide the student with a copy of the final approval. The student should check to be sure the coursework has been listed on his or her transcript after receiving a copy of approval. If coursework is approved for transfer credit, a maximum of 2 years will be counted toward the 8-year graduate school deadline (see pg. 11).

*Note: Pre-approval of a course does not guarantee final approval for transfer. The clinical faculty will vote on the acceptability of the course transfer. In addition, both the DCT and the student’s faculty mentor must grant final approval of the transfer before the request for transfer will be made to the Graduate School.

Guidelines for Accommodating Students with Disabilities

For students with a disability who wish accommodations, the process begins with the DCT and is considered with the help of the Office of Disability Services (ODS). While it is possible for the program to informally accommodate students without using ODS, it is preferable to involve them in the process. Since the Ph.D. in clinical psychology involves a systematic and sequential program of training, accommodations are considered from an overall programmatic perspective rather than from an individual course perspective. Accommodations are rarely granted on a retroactive basis. One may contact ODS by calling 348-4285.
III. RESOURCES

Facilities

The Department occupies approximately one-half of Gordon Palmer Hall including classrooms, laboratories, and office space. The Psychology Clinic occupies one wing of the McMillan Building and is the primary practicum site for the clinical program. Research space is distributed throughout the building.

Four campus libraries are of major interest to psychology graduate students. These are the Gorgas (main library), Rodgers (science), Health Sciences Library, and McClure (education). The main library includes most of the major psychology journals, abstracts and indices, and reference works. Reading and reserve rooms are also located there. Occasionally, a specialty journal will be located in one of the other libraries. Computer searches of Psychological Abstracts and other sources are readily accessible.

The Psychology Clinic

The Psychology Clinic serves as a psychological resource agency for the campus and community. Supervised services are provided by students in graduate training. These include intellectual and personality assessments, psychotherapy, and psychological consultation. The Psychology Clinic is considered a professional organization, and student trainees are expected to maintain a high level of ethical and professional conduct.

Students enrolled in Psychological Assessment I, II, and III, and Practicum I will see a majority (if not all) of their clients through the Clinic. In this undertaking, students are guided not only by the course requirements but also by the policies and procedures of the Clinic. A Clinic Manual is available and should be referred to frequently.

IV. PROGRAM PHILOSOPHY AND OBJECTIVES

Clinical Training Aims

The general aims of the program are listed below. We have also formulated specific competencies which more clearly state what is expected of all students.

Within the capabilities of the clinical training program, the student is provided the means by which to meet these objectives (e.g., through coursework, research activities, clinical placements, etc.). Internship training will serve to enhance and broaden the student’s clinical skills. Aims and competencies are listed on the following page.
Training Aims and Competencies

Aim 1: Acquire a general knowledge base in the discipline of psychology, broadly construed.

Competencies Expected for Aim 1:

• Competency 1.1: Students will demonstrate graduate-level understanding of history and systems of psychology.
• Competency 1.2: Students will demonstrate graduate-level understanding of affective aspects of behavior.
• Competency 1.3: Students will demonstrate graduate-level understanding of biological aspects of behavior.
• Competency 1.4: Students will demonstrate graduate-level understanding of cognitive aspects of behavior.
• Competency 1.5: Students will demonstrate graduate-level understanding of developmental aspects of behavior.
• Competency 1.6: Students will demonstrate graduate-level understanding of social aspects of behavior.
• Competency 1.7: Students will demonstrate graduate-level knowledge that entails integration of multiple basic discipline-specific content areas (e.g., integration of two of: affective, biological, cognitive, social, or developmental aspects of behavior).
• Competency 1.8: Students will demonstrate graduate-level understanding of research methods.
• Competency 1.9: Students will demonstrate graduate-level understanding of statistical analysis.
• Competency 1.10: Students will demonstrate graduate-level understanding of psychometrics.

Aim 2: Develop profession-wide competencies as part of preparation for practice in health service psychology.

Competencies Expected for Aim 2:

• Competency 2.1: Students will demonstrate graduate-level understanding of the current body of knowledge in ethical and legal standards.
• Competency 2.2: Students will demonstrate graduate-level understanding of issues of individual and cultural diversity.
• Competency 2.3: Students will demonstrate graduate-level understanding of assessment.
• Competency 2.4: Students will demonstrate graduate-level understanding of intervention.
• Competency 2.5: Students will demonstrate graduate-level understanding of supervision.
• Competency 2.6: Students will demonstrate graduate-level understanding of consultation and inter-professional/interdisciplinary skills.

Aim 3: Develop the knowledge, skills, and competence sufficient to produce new knowledge, to critically evaluate and use existing knowledge to solve problems, and to disseminate research.

Competencies Expected for Aim 3:

• Competency 3.1: Students will demonstrate a graduate-level understanding of how to develop a research question and relate it to the existing literature.
• Competency 3.2: Students will demonstrate a graduate-level understanding of how to utilize methodological sophistication sufficient to address the research question.
• Competency 3.3: Students will demonstrate a graduate-level understanding of how to adequately measure the constructs of interest (e.g., reliability, validity).
• Competency 3.4: Students will demonstrate a graduate-level understanding of how to provide detailed analysis, interpretation, and discussion of results.

• Competency 3.5: Students will demonstrate a graduate-level ability to critically evaluate and disseminate research or other scholarly activity via professional publication and presentation at the local (including host institution), regional, and national level.

Aim 4: To promote professional values, attitudes, and behaviors (including communication and interpersonal skills) that are critical for practice in health service psychology.

Competencies Expected for Aim 4:

• Competency 4.1: Students will demonstrate graduate-level professional values, attitudes, and behaviors.
• Competency 4.2: Students will demonstrate graduate-level communication and interpersonal skills.

Methods of Evaluation of Goal Attainment

Course work is evaluated by the instructor of each course, in accordance with the instructor’s grading policies. The clinical work of students is evaluated by core clinical faculty who lead teams in the Psychology Clinic, by adjunct clinical faculty who are active clinicians in the local community, and by on-site supervisors in community practicum placements. We request a written evaluation of each student at the end of each semester. The evaluation of theses and dissertations are made by thesis and dissertation committees appointed by the Director of Graduate Studies. (More information on appointment of committees is available in the Graduate Student Handbook.) Members of these committees must be appointed members of the University of Alabama graduate faculty. The student’s work on internship is evaluated by the internship directors and staff. We request a written evaluation of each student twice a year. In the overall evaluation of each student, the faculty consider grades in courses, comments of course instructors, evaluations from clinical supervisors, evaluations from thesis and dissertation committee members, reports from students of scholarly activity during the year, reports from internship directors, and timeliness of progress through the program. Yearly evaluative summaries are co-written by the student’s advisor and the DCT and provided to each student, as well as included in the student’s program file.

For more specific details on our evaluation processes including the minimum level of achievement for each student, please see Appendix H.

Course/Teaching Evaluations

The Department uses the Student Opinion of Instruction (SOI) evaluation system, and most instructors provide students with more open-ended and detailed opportunities to critique courses each semester. Specific forms have been devised to elicit feedback for the Psychotherapy Practica. Otherwise, instructors may use a range of standardized or self-designed formats. Students’ opinions are valued and constructive feedback is genuinely appreciated.

Students should also expect to be given a fairly detailed syllabus indicating course requirements, expectations, and grading policies. Inquiry is invited when such matters are unclear. Students in practicum also receive detailed evaluation (both oral and written) of their performance (strengths, weaknesses, etc.) as part of the course contract.
V. STUDENT CONCERNS AND INTERESTS

Advising and Evaluation

Each clinical student is assigned an advisor who is available to discuss program requirements and who supervises the student's initial research activities. The advisor may be any member of the clinical training committee which includes all clinical faculty as well as several non-clinical faculty members. In addition, the students may expect to have frequent contact with the Director of Graduate Studies and the DCT, both of whom have substantial involvement in matters of curriculum, financial assistance, and program requirements.

It is the general expectation that students will remain with their initial research advisor for at least the first year and probably through the completion of their master’s thesis. However, we recognize that there are some circumstances in which the student may want to change advisors during an academic year or before the end of the master’s thesis. When any potential switch is considered during the year, it will be necessary to consider the source of the student’s funding and how such a switch would impact the student as well as the faculty member. For example, if the student is funded on a faculty member’s grant, it will be important to work out a plan that does not entail a sudden abandonment of the student’s job responsibilities. It is not always the case that an alternative source of financial aid can be offered to the student at mid-year. We encourage students to discuss any concerns with their advisor, to be specific, and to ask directly for what they want and need. If a student is considering options for switching to another research advisor, it is acceptable to talk with other potential faculty mentors. However, once a student has made a decision to switch advisors, it is important to inform the faculty advisor about it first. If the student is uncomfortable, or unclear about how to do this, meeting with the DCT, Associate DCT, the Director of Graduate Studies, or the Department Chair for planning purposes can be helpful.

Student progress is evaluated continuously. Multiple criteria are used depending on the level (year) of the student. These include: (1) performance in coursework, (2) clinical functioning, (3) research progress, (4) thesis and thesis defense, (5) preliminary examination (and dissertation proposal), (6) dissertation and oral defense, and (7) ethical and professional functioning.

At the end of each academic year, the faculty evaluate student progress toward achieving the Ph.D. The primary purpose of this evaluation is to provide an opportunity to update the entire faculty about students' accomplishments during the past year. Additionally, a yearly evaluation provides an opportunity to remedy any situations that may lead to future difficulties and recommend a course of action that would allow students to earn a degree and obtain the type of job that they want.

To facilitate the evaluation process, each student is asked to submit an updated VITA, completed Student Activity Report (Appendix C), and Time2Track Logs for the year. The activity report is designed to update each student's primary advisor about his/her activities during the past year and will allow all faculty to learn about the progress of students who are not under their direct supervision. This is also a good opportunity for students to reflect on their progress in the program and to develop personal goals for the upcoming year. The Student Activity Report (SAR) form is comprehensive in that it includes opportunities for students to describe their coursework, research, clinical training, teaching, assistantships, and service activities during the past year. It is not expected that students will have participated in all of these activities during the past year. The list is comprehensive to allow students to describe the particular areas that they focused on during the year. In addition to the SAR, students are expected to provide copies of their clinical evaluations and teaching performance ratings from the past year. Supervisors are expected to supply students with these evaluations at the end of each semester so that they can be attached to the activity report. Students are encouraged to ask their supervisors for a copy of the written evaluation at the end of each semester. Students are required to give the completed SAR
(including copies of teaching and clinical evaluations), their completed Training Logs, and their VITA to their primary advisor on or before **April 30th** of the year.

The faculty meet to discuss student progress during May each year. During this meeting, faculty advisors will use the SAR and their own observations to present a brief overview of each student's progress in the areas of research, clinical training, teaching, service, and coursework. The entire faculty will then share information about each student's strengths and any suggestions for improvement. Following this meeting, faculty advisors will write a letter for each of their students detailing the student’s accomplishments during the past year and any suggestions from the faculty for the future year. Faculty advisors will then obtain the signature of the DCT on the letters and contact each student to schedule a meeting to discuss the letter and to provide an opportunity for the student to discuss any of his or her ideas or concerns. If the advisor does not schedule such a meeting in a timely fashion, the student is encouraged to either remind the faculty member to schedule this meeting or to discuss the problem with the DCT. At the meeting with his or her advisor, the student will be given an opportunity to write any comments at the bottom of the letter and will be asked to sign the letter. A copy of the signed letter will be placed in the student’s file along with the SAR, VITA, and Training Logs. The original, signed letter will be returned to the student by the Graduate Program’s Assistant.

After meeting with his or her advisor, if a student desires additional feedback about his or her performance in the program, he or she is encouraged to schedule a meeting with the DCT. Also, if there are significant concerns about a student's progress, the DCT will meet with the student and the student’s advisor. In the event that remediation and/or dismissal recommendations are made by the faculty, the policies outlined in the clinical training manual and the departmental handbook will be followed (Appendix J).

Although this more formal evaluation only occurs annually, more frequent informal feedback meetings typically occur throughout the year. Faculty members are encouraged to meet with students regularly to provide both positive feedback and suggestions for improvement. Students are encouraged to ask faculty for feedback regarding their performance.

The clinical training faculty meets monthly during the academic year at which time students may be discussed. The student's advisor conveys to the student the fact that he/she was discussed and the content of the discussion. The student may also receive a letter indicating that certain problems have been identified. If problems are perceived, the student may also be counseled as to possible courses of action. In some cases, remediation will be advised. In the rare case where the magnitude of the problem is such that the faculty considers remediation unfeasible, the student will be counseled out of the clinical program. The procedure for these steps is outlined in the departmental policy statement concerning non-academic failure of graduate students (Appendix J).

**Registration**

**Contact with one's advisor, concentration coordinator, and the DCT is part of the registration process (typically early October and early March).** These, as well as end-of-semester periods, are good times to discuss academic progress and plans. Early registration allows faculty and students to plan in advance for the subsequent semester. Students should consult with their advisors and/or concentration coordinators during the pre-registration period, prior to actually registering for coursework. This latter step is done in consultation with the DCT. Designated days are set aside for course registration in the Department. To facilitate the Department's allocation of instructional resources, all on-campus graduate students are required to pre-register. Necessary changes in schedules can always be made at a later date.
Financial Assistance

Clinical students may receive financial assistance through a variety of sources. Although some stipends may be sufficient to support a student fully for a given year, it is more typically the case that loans, personal savings, and other resources are used by students during their graduate training.

Students compete at the University level for fellowships awarded through the Graduate School. They are nominated by the Department based on grade point average, national test scores, and (in the case of Research Fellows) research proposals. Other fellowships may be available through Federal training grants awarded to the Department or research grants awarded to individual faculty.

Teaching and research assistantships are awarded within the Department and require from quarter-time (10 hrs/wk) to half-time (20 hrs/wk) service. Duties of teaching and research assistants are assigned at the beginning of each semester. Also, a number of opportunities are available for students to work part-time in a clinical setting for remuneration (Page 6, "Clinical Placements").

Recommendations for fellowships and assistantships are made by the Director of Graduate Studies in consultation with the DCT. Clinical placement decisions are made by the DCT through consultation with the sponsoring agency and the coordinator of the student's specialty area. Priority for financial assistance is made based on the student's progress through the program and specific training needs.

Whenever possible, assignments are rotated to provide a variety of opportunities for each student. The clinical training program has as an important goal to provide financial assistance for as many students as possible. Maintaining as many degrees of freedom toward assigning assistantships and placements increases the likelihood of achieving this goal. Thus, students who are qualified for two sources of funding may sometimes be asked to take their second choice so that a student who is qualified for only one of the two sources of funding can be given financial assistance. Also, there may be circumstances when a student is reassigned to the same source of funding for an additional year, usually where certain qualifications exist and no other qualified student is available.

Summer financial support for students not on 12-month appointments is often available. Students should plan accordingly to apply for the limited fellowships, assistantships, and clinical clerkships that may be announced. Work study and student loan opportunities should also be explored.

Tuition Grants

Assistantships and fellowships carry partial or full tuition grants as specified in the memorandum of appointment. Note that although departmental GRAs and GTAs carry both out-of-state and in-state tuition grants, not all federally-supported GRAs carry out-of-state tuition, and some carry no tuition grants whatsoever. Do not assume that your assistantship carries a tuition grant unless your memorandum of appointment specifically states this is so.

Student Office Space

Students are assigned offices on a temporary yearly basis. Typically, this is shared space, usually without telephones. Assignments are made by the Graduate Program’s Assistant at the beginning of each academic year. Space is sometimes allocated to students based on their research or training interests (e.g., health, geropsychology, child, psychology & law). Due to University regulations, students may not paint their offices. Offices are University property and thus, considered public. Therefore, students should be mindful of the appropriateness of anything written or displayed in these offices.
Social Communication and Public Professionalism Policy

Increasingly, as information becomes more publicly available, lines between public and private information are blurring. Many students have websites, blogs, email signature lines, and voicemail 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 personal telephone or email account for professional purposes, clients, research participants, and potential employers may view the student as less professional than desired. (See Appendix K for our policy.)

Memberships

Students are encouraged to become members of various psychological associations, including the American Psychological Association and the American Psychological Society. Almost all associations have a student or affiliate type membership category at greatly reduced dues. The benefits may include publications (or discounts), conference discounts, and newsletters.

The APA has a number of divisions (e.g., clinical; social; health; children and youth; psychology and law) that might be of interest to students as well as a graduate student association within APA (APAGS). In addition, many students join the Southeastern Psychological Association (SEPA) and the Alabama Psychological Association (aPA). Historically, many faculty and students attend the annual SEPA meetings in March, usually presenting papers. aPA has an annual meeting in late spring and a mid-winter conference. Student papers are encouraged, and cash awards are given for outstanding papers. Student membership is also available in such groups as the Association for Behavioral and Cognitive Therapies (ABCT), the Society of Pediatric Psychology, and the American Association of Correctional Psychologists. Check with faculty for further details. Membership application forms are available on the organization’s web page.

Contacts with Graduates

The Clinical Program, as well as the Department as a whole, attempts to maintain contact with graduates. First jobs, moves, elections, licensure, promotions, publications, and the like are of interest to faculty and fellow graduates. The Department publishes a periodic newsletter/directory which shares this information. We ask graduates to maintain contact with the Department by informing us of address and job changes. In turn, we attempt to keep graduates abreast of developments in the Department. Copies of the most recent Newsletter are available from the Department Chair’s secretary.

Books and Materials

The clinical program maintains a limited library of materials including directories, catalogs, and guidelines (e.g., APA Accreditation Handbook, Directory of State Licensing Requirements for Psychologists, Internship Directory) which is available from the DCT. The Psychology Clinic also has a limited reference library as well as an extensive collection of professional training resources available on a check-out basis.

Each instructor provides a course syllabus which lists required books and materials. Textbooks and readings are selected both for their immediate relevance and their usefulness as a later reference source.

Additional materials that may not be assigned to specific courses are also required for clinical students. These should be purchased (some are free) upon entry into the clinical program.