

# DOCTORAL STUDENT HANDBOOK

Clinical Psychology  
Doctoral Training Program

University at Albany, State University of New York

Summer, 2008

General Introduction to the Psychology Department & Clinical Training Policy & Procedures

WELCOME TO GRADUATE SCHOOL! The Psychology Department at the University at Albany, SUNY is part of the College of Arts & Science. The Department includes five Ph.D. granting program areas (i.e., biopsychology, clinical psychology, cognitive psychology, industrial/organizational psychology, and social psychology), and hosts a very large undergraduate population of psychology majors. We are housed in the Social Sciences building on the uptown campus, and operate a clinical training clinic (Psychological Services Center) in cooperation with the counseling program on the downtown campus.

We hope your stay at the University at Albany will be fruitful and rewarding. To ease the transition and help you get off on the right foot, we have prepared this handbook. In it you will find information of all sorts, some significant and some more trivial in nature.

As is true of most things, the contents of this handbook will change and evolve over time. To ensure that you are on top of things, you should make an effort to read this handbook carefully. Additionally, we recommend that you refer to the *Graduate Bulletin* for rules, regulations, etc., regarding department, clinical program, degree requirements, and the like. You can find the *Graduate Bulletin* on the web at <http://www.albany.edu/graduatebulletin/>. It is your responsibility to be familiar with the current issue of this publication, especially those sections dealing with Student Responsibility, Academic Standards, and Grievance Procedures. These regulations apply to all graduate students in the department and the clinical program and it is important that you be aware of their implications.

In addition, be sure to read department memos and announcements as they appear. Changes will probably first be communicated via your mailbox in the room next to the department main office, and also may be relayed via email.

Most of you will find graduate school different from your previous educational endeavors. Unlike undergraduate training, where the emphasis is on getting good grades and having a high GPA, graduate school includes a range of scholarly, applied, and professional activities that go well beyond what you do in the classroom.

Indeed, one of the greatest challenges of graduate school is in making the transition from thinking and behaving like a student to thinking and behaving like a clinical psychologist. Being the top of the class in graduate school is far less important (now, and particularly later on) than doing quality work, whether that be in the classroom, in applied or laboratory research settings, clinical settings, or in the role of teacher. Quality and effort will not only help contribute to your professional development and goals, but also better the program and the lives of those with whom you have contact.

You will find that you and your new peers constitute a highly select group with unique skills and talents, but united by a shared interest clinical science and practice within a cognitive-behavioral framework. You will also find that you will have opportunities to form relationships with a highly successful group of clinical and non-clinical faculty and supervisors.

We encourage you to nurture such relationships. Learn from one another. Learn from your betters. Grow. Share. Care. Be willing. Show gratitude and give freely. Work hard and put your commitments and values into action. This is not a place to nurture conflict and

unhealthy forms of competition with your peers and other colleagues. Take time to get to know your peers, your mentor, faculty, and supervisors, as together we all share a commitment to one another's successes now and into the future.

Though we pride ourselves on having a collegial program made up of bright and caring individuals, we don't want you to get too comfortable here. Ultimately, you are here to acquire knowledge and skills so that you can function as a clinical psychologist with three letters after your name (i.e., Ph.D.). Our program is designed so that you can complete your degree requirements leading to the Ph.D. within 5 years (4 years on campus plus 1 year pre-doctoral internship).

Motivation and hard work are the major determinants of whether you attain your Ph.D. The faculty are here to help you do just that and will do everything they can to help you along the way. In the process, it is important that problems be identified early. You play an important role here, and we want to empower you to step up and take charge of your education and training.

Thus, if you are experiencing difficulties, then please do seek out help and guidance immediately. For instance, if you are having problems in class, then talk with the instructor, and perhaps your research/assistantship supervisor, the Director of Clinical Training, the Chair of the Department, the Director of Graduate Studies, or the Graduate Office at the University. Speak to your classmates and more senior students too. The same is true of difficulties you may be having with your research, assistantship, or those that may be of a more personal nature and that may even require a referral. Getting behind or sidetracked is a surefire way to delay or halt attainment of your short and long-term goals, and hence your success.

Though we go to great lengths to help you to avoid delaying or halting your graduate studies, there are circumstances where such actions may be necessary. In such cases, you may be granted a formal leave from your studies, with the expectation of returning at a later date (because there are procedures that must be followed, you should contact the Director of Graduate Studies for advice).

Lastly, after varying periods of time in graduate school some students realize that a career in psychology is not for them. If this happens, then don't feel that you have to continue out of a sense of obligation or to avoid embarrassment, etc. No one will think any less of you for making reasonable decisions about your life, and we certainly don't want you to make yourself miserable by continuing doing something you know you don't want to do. Yet, before making such a major decision, we encourage you to talk it over with your mentor/advisor, Director of Clinical Training, and others.

Again, on behalf of the clinical faculty and graduate students, we want to welcome you to Albany, and look forward to getting to know you over the coming years!

The Clinical Faculty

## University and Department Requirements

Information specific to the University at Albany, Department of Psychology, and Clinical Training Program follows. Initially, the Director of Graduate Studies in Psychology and/or the Director of Clinical Training will serve as your advisor and provide signatures as needed. Later, your research supervisor will be in the best position to give you necessary advice. Cathy Murray, Senior Staff Assistant to the Psychology Department, is an excellent resource too. Remember, if you don't know or are not sure - ASK!

### *University Requirements*

**Overview.** To become a candidate for the Ph.D. (a formal status conferred by the Graduate Academic Council), you have to complete the requisite 66 hours, the tool requirement, pass the Qualifying Examination, and meet the residency requirement of one academic year of course work beyond the master's level or its equivalent (usually the first two years).

**University requirements are minimal.** First, you need 66 hours of graduate credit to attain the Ph.D. This is no problem for clinical students, but can appear to be for students in other areas. If you take the maximum number of hours each semester (and remember that you will probably be here for at least four years), you will have no trouble meeting this requirement. Dissertation load credit (which you typically take near the end when you have finished all courses and are working on the dissertation and need to maintain continuous enrollment) does not count in the 66; nor does a course you use to satisfy the tool requirement (see below). A Master's degree is not required; however, you may take the degree if you wish *and* without needing to register for the 699 course titled Master's Thesis. In fact, *do not register* for 699 (Master's degree credit) unless advised to do so by your mentor or the faculty

**Tool requirement.** The tool is defined as a course or area of study involving both a skill and an execution component which will aid you in the completion of the dissertation and in future research endeavors. The tool must be satisfied following admission and in addition to the regular program of study. Most students fulfill this requirement by taking a course in advanced statistics, and some opt for a course in computer programming. However, a course is not mandatory as a means to fulfill the tool requirement. In fact, structured and supervised projects or experiences are also possible (e.g., gaining skills in administration of structured clinical interviews, specific interventions, or assessment technologies such as psychophysiological assessment or neuropsychological batteries). A student must earn at least a B in a course s/he intends to use to satisfy the tool requirement.

**Credit for prior graduate work.** If you have had prior graduate work, you can transfer up to 30 hours toward the University requirement of 66. To accomplish this, take the relevant transcript to the Director of Graduate Studies in Psychology, and s/he will take the steps necessary to process your request. However, using prior graduate work in lieu of Department requirements is another matter. To be waived out of a required course on the basis of a previous course, you must have the recommendation of the instructor of the course in question. So, you will need to meet with them, and ought to expect that they will want to see a syllabus, textbook, or assignments to decide whether your previous course work is equivalent to a required course within our Department. If that instructor believes that your prior course content is equivalent, s/he will inform the Department Chair, who then makes the final decision. It is important to

remember that students entering with prior graduate work cannot assume that they will receive credit for that work or be waived out of any program requirements (e.g., the 600 A/B research requirement cannot be waved; see below). These decisions are made on a case by case basis, typically after the student arrives on campus. In some instances, students are informed of the manner in which their prior graduate work will be treated as a condition of their admission.

### *Psychology Department Requirements*

**Expected professional behavior of graduate students.** Faculty within the Department are expected to function as good colleagues and good departmental stewards and we expect the same behavior of our graduate students. Think responsibility here, and be mindful of what you do with your hands, feet, and mouth. This is how other people will know you. With that in mind, all graduate students are expected to attend classes and be prepared to contribute to class discussion. In the event of emergencies, or in cases where circumstances arise that would keep the student from fulfilling normal obligations (e.g., accident, illness, conference travel), students should notify instructors, mentors, and supervisors. In the case of research and clinical activities, this action would also normally include the student making arrangements with other staff and colleagues such that the student's obligations/duties/clients are covered during the absence. It is not good form not to show up for class, a meeting, your clients, or for research hours. This kind of behavior will reflect badly on you and should be avoided.

**Required and optional courses.** All students are required to take the statistics sequence consisting of 510 and 511 and the research program sequence, 600 A/B (see below). Depending on program, each student must take four of the following courses: 601 (Biopsychology), 602 (Learning), 603 (Cognitive), 604 (Developmental), 605 (Social), 606 (Personality), 640 (Psychopathology), or 641 (Organizational). The suggested (and in some cases required) sequence of such out of area courses for clinical students is outlined later on.

**Grades and academic performance.** A grade of "C" in 510 (i.e., first part of the statistics sequence) requires that the student repeat the course and postpone enrollment in 511 until 510 is satisfactorily completed. Students must maintain a "B" average in the four courses chosen from among those listed above. Failure to do so means either that one of the courses must be repeated or that additional ones be taken with grades sufficient to balance low grades previously earned, thus attaining the "B" average. An overall GPA of less than a "B" constitutes grounds for dismissal from the University.

**The 600 project requirement.** The 600 A/B is a required course that is designed to insure that you formally participate in research from the minute you enter graduate school. Students entering with a Master's degree must complete the 600 project as well. It is your responsibility to consult with faculty about their willingness to supervise your 600 project and the faculty member must agree to do so. Also note that you can change your 600 mentor (or dissertation mentor) if the need arises. Because you are required to select a research mentor soon after your arrival on campus, it is possible that your initial arrangement will not work out. If this happens, then talk it over with your supervisor and then make arrangements with another faculty member.

Periodically, students do switch research supervisors during the course of the 600 project. However, this practice is not encouraged mainly for the reason that it can significantly delay

your ability to complete the 600 requirement by the end of your second year of graduate school. In fact, *you must have your 600 finished, written up, and submitted before the start of classes in your third year.* Though other programs within the department allow more time for completion of the 600 project, this deadline is firm within the clinical area. Moreover, you cannot sit for Qualifying Exams until you have finished the 600 requirement. Thus, it is important to complete your project in a timely fashion. This requires careful planning.

Credit is only given for 600 during the first year, 3 hours each semester. You will carry an "I" in the course until the project is completed, at which time the grade will be changed to "S" (or satisfactory). Please note that the Director of Graduate Studies in Psychology is the Instructor of Record for 600 A/B. S/he will authorize you to take the course and change the grade when appropriate. The continuation of the "I" grades is handled by the Director of Graduate Studies in Psychology, so you can ignore letters from the Registrar threatening you with dire consequences if you do not resolve your incomplete grades in 600 A/B.

When the project is complete, you must submit a copy of the paper (i.e., manuscript length, APA style), along with the necessary form (available on the Department Web Site or from Cathy Murray) and your advisor's signature, to the Director of Graduate Studies for approval, and then the Chair of the Department for final approval and a signature.

Lastly, be advised that research typically takes longer to complete than you might think or expect. You have to read and chat with your advisor to formulate an idea. You'll need time to do a literature search, develop a methodology, design, and write your IRB. Then, you'll need to allow a few weeks for the IRB to be reviewed and then several more weeks to respond to IRB suggested revisions before you have final IRB approval. Then, you ought to anticipate that subject recruitment may not go smoothly (e.g., participants may not show up for scheduled appointments, or drop out prematurely, to name a few). After that, you'll need to spend time with your data, cleaning it up, working out the relevant analyses, and then time to make sense of the results and write that part up, along with the discussion. During this time, and certainly after you have a first complete draft of your 600 ready, you'll need to allow your busy faculty mentor time (1 -2 weeks is reasonable, at least during the academic year) to read your draft and provide feedback. Though you ought to continue to work on your 600 to polish it while waiting for feedback, you will need to plan for another round of revisions, and perhaps re-analyses, and then time for your advisor to read another draft, and so on. Your advisor can assist you in planning your time accordingly, but do allow time for your research supervisor to provide feedback on the written draft of your 600 project, including time to make edits and several revisions (some of which may be substantial) prior to the deadline.

In the process, anticipate that faculty may not have time or be available to read and comment on your drafts during the summer months, and particularly if you wait until just before the deadline. So, what you need to do here is consider your schedule and that of your advisor. A good starting point is to develop some goals starting now so that you are positioned to submit your 600 with time to spare, and even time to take a well deserved break after it is submitted.

**Master's degree.** You may opt to earn a Master's Degree if you wish, and increasingly this is becoming a popular option among clinical students. To do so you need 30 hours of credit including 510/511, 600 A/B, the four courses from those listed previously, plus six elective hours. Most students who wish to pursue the Master's choose to turn their 600 project into a

thesis. To do this, you must do what's necessary to turn the 600 project into an acceptable thesis and arrange for an oral defense. What is considered acceptable for an M.A. thesis vs. a 600 project paper is at the discretion of your faculty supervisor. The Committee for the oral defense should consist of your 600 supervisor plus one, preferably two other faculty members. Upon successful conclusion of the oral defense your supervisor should send a letter to the Graduate Office, with notification of the outcome. You should file a "Graduate Degree Application" form with the Registrar as early as possible in the semester in which you plan on getting the degree.

**Qualifying exams.** Students in the Clinical program sit for qualifying exams in the summer following their third year. Completion of the 600 project prior to the start of the third year is a prerequisite for taking the exam. Students failing the exam on the first try can sit for it again. A second failure constitutes grounds for dismissal from the University; however, after consultation with relevant faculty, and if so advised, students may petition the Department faculty for another opportunity to take the exam. Each program within the Department establishes the nature of the exam for their program (e.g., number of questions, the number of faculty involved in writing and grading the exam, and the criteria for passing). Within the clinical area, the qualifying exam consists of a series of 8 essay style questions that are answered over the course of two days in August (see below for more details). While the exam must be completed by the end of the fourth year of study, programs can and do establish earlier deadlines.

### *Advisory/Dissertation Committee and Procedures*

**Overview.** Everything you do subsequent to entering graduate school contributes to the attainment of the Ph.D. However, there is some additional information you need to be aware of. The following pertains to establishing a Dissertation Committee and to the nuts and bolts of getting the dissertation through the process of final acceptance.

Every graduate student in psychology must have an advisory/dissertation committee whose membership consists of a chair and two other members. Initially, this committee is responsible for planning course work with the student beyond the first year core; approving the tool subject, its selection, the manner in which it is pursued, and the method of evaluation; and it may participate in the writing and grading of the qualifying examination. This committee may evolve into the student's dissertation committee.

**Procedure to establish an advisory/dissertation committee.** The procedure for establishing the advisory/dissertation committee is as follows:

1. During the second year of graduate study, the student asks a faculty member of the Psychology Department to act as chair of his/her committee. The chair will usually, but not necessarily, be the faculty member who is supervising the student's 600 A/B Research Project.
2. The chair and the student select the other members of the committee. Upon their consent, the total membership of the committee is submitted to the Chair of the Department for approval. The chair of the committee must be a member of the department, and at least one other member of the committee must be from the College (this includes other Psychology Department faculty). Persons holding adjunct positions with the department may serve as committee members.

3. The membership of the committee may be changed with the agreement of all concerned and the approval of the Department Chair.
4. The chair of the committee may continue in that capacity subsequent to leaving the academic unit.

**Responsibilities of the dissertation committee.** The advisory/dissertation committee has the following responsibilities:

1. The total committee must approve the dissertation topic.
2. All members must be available to consult with the student as s/he develops his/her research proposal.
3. Upon receiving a written proposal of the research topic and design, all members must give their written (signatures) approval. Students are urged to circulate copies of their proposal among the entire departmental faculty for suggestions.
4. The chair of the committee will be the individual most actively guiding the student during the data gathering and analysis stages. It is the student's responsibility to keep the other members up-to-date re: his/her progress. The total committee is responsible for consulting with the student upon his/her request. The chair of the committee may call meetings of the total committee periodically.
5. If the research is to be conducted away from the Albany campus, arrangements with the appropriate authorities must be agreed upon prior to data collection. Normally, the chair will be the responsible liaison with the off-campus facility.
6. Two of the three members of the committee must provide approving signature to the final completed copy of the dissertation submitted to the Office of Graduate Studies.

**Oral dissertation defense.** Each student must give an oral defense of the dissertation before the faculty of the department prior to the preparation of the final typed form. The format of the oral examination will be determined by the chair of the dissertation committee. Individuals, in addition to the department faculty, may be invited to attend by the chair of the committee upon the request and/or consent of the candidate. Copies of the dissertation must be made available for those who wish to read it prior to the defense (typically in the main office of the Psychology Department). Questions and discussion pertaining to the dissertation may be raised by anyone attending the defense within the format determined by the dissertation committee chair.

Upon completion of a revision, if necessary, the student must present the final typed copy to his/her committee for their approval signatures. The copy (ies) are to be delivered to the Department Chair for signature. The dissertation and recommendation for award of the Ph.D. degree will be transmitted to the Office of Graduate Studies by the Chair of the Department. It's a good idea to inform the Director of Graduate Studies in Psychology that your dissertation proposal has been formally accepted by your committee. A form is available for that purpose.

## *Financial Support*

**Overview.** The Department of Psychology makes every effort to support all graduate students, from whatever source, for at least the first three years of their enrollment. Many students are supported by research grants, some by fellowships, and others by advanced clinical and nonclinical placements in the community. Typically, these negotiations are carried out by students with the grant holder or sponsoring site and the Department plays no role in them. However, according to University regulations, grant stipends are subject to the same requirements and limitations as University ones.

Other students are supported by funds allocated to the Department by the University, most often in the form of graduate assistantships. Most assistantships are awarded for one academic year at a time, and there is no guarantee that they will be renewed, for their availability is dependent upon annual allocations (note New York State residents must also apply for TAP awards).

Most graduate assistantships require 20 hours of work per week, carry stipends of \$14,000 to \$15,000 for the academic year, and include a tuition waiver (as appropriate). Students holding these assistantships are usually assigned to individual faculty to aid in research and/or teaching or administrative activities. Assistants are also required to serve as exam proctors in undergraduate sections as assigned. As an exam proctor, you are expected to carry out your assignments or arrange for substitutes in the event of schedule conflicts. Failure to do so will result in censure and additional proctoring assignments.

The performance of each graduate assistant is evaluated at the end of each semester and appropriate feedback provided. Such evaluations can influence the award of subsequent assistantships.

**Application and selection process.** During the spring semester, all interested students are given the opportunity to apply for an assistantship for the following year. They are also given the opportunity to indicate preference for assignment. Faculty also weigh in as to their preferences for assistants and every effort is made to match first choices.

It is important to understand a bit about Department policy here. That policy states that each faculty member is allocated one Departmental graduate assistant, mainly for the purpose of assisting with their teaching duties (hence, department funded assistants are called TAs, not RAs). In addition, there are various Departmental functions that require assistants, such as the Department's Undergraduate Advisement Office, to run the Research Subject Pool, to assist in specific undergraduate courses, etc. Thus, not every assistant will receive their first choice, nor will everyone be assigned to an individual faculty member.

Also, the imbalance between numbers of assistants and faculty within areas and between faculty and assistant interests will result in some arbitrariness in assignment. We go to great lengths to avoid such arbitrariness in assignments, but sometimes it cannot be avoided.

Depending on the program, students usually take from 12 to 17 hours of credit during each semester of the first year. After that, the normal load is 9 hours. University regulations

regarding assistantships (department or grant) put these upper limits on semester loads. Once course work is out of the way and more time is being spent on the dissertation (usually during the third and fourth years), you can enroll for dissertation (or load) credit. Once you are admitted to doctoral candidacy, you can enroll for one credit of APSY 899 and still be certified as being a full-time student for loan certification.

## Information Specific to the Clinical Program

### *About The Program*

The Clinical Psychology program is fully accredited by the American Psychological Association, and is steeped in tradition as one of the best cognitive-behavioral training programs in the country. The program is structured such that students are able to complete it with a Ph.D in hand in 5 years (four years of classes on campus, one year for the pre-doctoral internship). It is not a highly competitive program in the sense of a scramble for grades. A small number (6-10) of students are admitted each year. Once a student is admitted, every effort is made to help the student finish the program. This is not a program where students are “weeded out!”

Owing to our history, there is a behavioral or cognitive-behavioral bent to much of the research and clinical training at Albany. Yet, this is certainly not the exclusive approach of all faculty members. The clinical program at Albany adopts a scientist-practitioner model which attempts to instill a scientific approach to research and clinical practice. This model is the core that binds together our shared interests.

We seek to train well rounded doctoral level clinical scientists who have a thorough grounding in research and scholarly activities, can develop and utilize scientific knowledge, are skilled in using their critical thinking and analytic tools in problem formulation and solution generation, and have a thoroughly developed repertoire of professional competencies, including applied skills.

The program emphasizes creative research and applications of psychological principles to a broad range of applied problems. The program's scholars, faculty and students alike, make significant contributions in the areas of treatment development, outcomes research, program evaluation, training, supervision, basic psychopathology research, clinical science and practice, and theory and philosophy of science. The program values these behaviors regardless of the setting in which they occur.

### *Program Social-Training Context: The Junior Colleague/Apprentice Model*

**Overview.** Students and faculty interact closely in all aspects of the program, particularly in research activity, but also socially. All faculty participate in the administration of the program and in teaching and training at all levels. Most also participate in clinical practicum supervision.

As a program and a community, we are a hard working bunch, and we are also a caring bunch. We take pride in our efforts (what we do) to maintain a highly successful and collegial program. And, we also value the time and energy that goes into education and training of our graduate students. We aspire to assist students in making the transition from “student” to junior

colleagues, and eventually colleagues (our colleagues). We do that within what we call a junior colleague-apprentice training model.

For a junior colleague-apprentice training model to work, students and faculty must acknowledge their own responsibility (i.e., ability to respond, or take action) and finitude. This also means that faculty and students seek out ways to learn and grow from shared experiences around common goals.

The clinical faculty are quite successful in many respects, and that success hasn't come over night. It has come from years of hands on experience with research, teaching, training, and service, and often many long hours, sleepless nights, and plain old hard work. What this means is that we think we know a thing or two about how to help you achieve your own success and aspirations, but obviously we acknowledge our finitude and expect that you will step up and bring something to the training experience too.

The faculty do not expect that students will be able to jump right as an function at the level of a junior colleague right out of the gate, but the goal is to help you do just that over time. To help you along the way, students often begin with more focal hands on apprenticeship training with a faculty member and a lab in the early years. Over time, this expands out to the point where we expect that students will be functioning at a level we reserve for junior colleagues. This model reflects values and goals of our training program, and reflects our shared commitment to positive and productive relations between faculty and graduate students. What follows is a sample of the features of this model, and the activities, conditions, or arrangements entailed therein.

**Department participation, program participation, and stewardship.**

1. Faculty are expected to behave in a respectful, collegial manner with one another, students, supervisees, and other staff and professionals. We acknowledge our finitude and limitations and are open to learning from one another. Faculty take responsibility for their actions and the welfare of their students and supervisees and work to make and keep their commitments. Graduate students are expected to do the same.
2. Graduate students are encouraged to participate in decisions affecting the Department, the clinical program, their labs, and areas affecting quality of life. While students are encouraged to communicate any problems or concerns to the faculty via conversations with individual supervisors or instructors, there is a formal mechanism for student input into the program. Graduate students elect class representatives to facilitate such involvement. For instance, each of the four classes on campus each year elect a class representative to meet with the Clinical Director on a regular basis throughout the academic year. This arrangement provides an opportunity for students to be sure that their concerns are heard and for open communication between faculty and students. On occasion, (e.g., to discuss Qual procedures, internship applications, interview weekend) the faculty as a whole may meet with all clinical students or smaller groups.
3. Graduate students are encouraged to participate in Departmental, program, and University social functions (both formal and informal), and community and professional activities. Graduate students routinely participate in planning and

coordinating Interview Weekend activities; regularly attend National and International professional meetings, program and lab social events, and take an active role in helping select graduate applicants and new faculty members. Others have taken leadership roles in clinical and research settings, including within professional organizations (e.g., holding office within the Student Special Interest Group of the Association for Behavioral and Cognitive Therapies, or ABCT). These and other activities reflect a shared interest in building a sense of community and in fostering relationships.

4. Graduate student input is considered whenever possible when faculty members make decisions that affect graduate student training (such as making changes in requirements, assigning office or research space, implementing new policies, making teaching and practicum assignments). Such input can be directed to individual faculty, the Director of Clinical Training, or the Chair of the Department.
5. Graduate students are involved in faculty evaluations at several levels, including evaluating individual and classroom faculty performance.

#### **Research activities.**

1. Students are selected for admission to the graduate program on the basis of both academic excellence and their general fit with the mutual interests of Clinical Faculty within the Clinical Program area. Though students generally maintain close working relationships with individual faculty members, they may pursue research and other scholarly interests in collaboration with any faculty in the Department and some faculty in other departments. Such collaboration is constrained, of course, by resources such as lab space, subject availability, and faculty and student time, expertise, and interests, as well as appropriate institutional approval.
2. Active collaboration between faculty and graduate students is encouraged during all steps of the research process, including data analysis and writing. Although graduate students initially will require much guidance in these areas, faculty members encourage development of students' skills with the goal of full collaboration in all aspects of the research process and transition to a level of functioning as an independent researcher.
3. Faculty members encourage graduate students to publish and present their research, and provide opportunities for participation in faculty research projects that will lead to joint publications and presentations, or the acquisition of additional skills and expertise.

#### **Authorship guidelines.**

Graduate students and faculty members share publication and presentation credits whenever appropriate. Faculty members are encouraged to discuss their authorship practices regularly with graduate student collaborators. Faculty and students in the Department are expected to adhere to Principle 6.23 of the "Ethical Principles of Psychologists and Code of Conduct" (APA, 1992), <http://www.apa.org/ethics/code.html>, when determining authorship of written works and presentations:

1. Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have contributed.
2. Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as Department Chair or laboratory director, does not justify authorship credit. Minor contributions to the research or to the writing of publications are appropriately acknowledged, such as in footnotes or in an introductory statement.
3. A student usually appears as principal author on any multiple-authored article that is substantially based on the student's dissertation or thesis. Further guidelines concerning authorship are provided in the APA Publication Manual (pp. 350-351 of the 5th edition) and in:
 

Fine, M. A., & Kurdek, L. A. (1993). Reflections on determining authorship credit and authorship order on faculty-student collaborations. *American Psychologist*, 48, 1141-1147.

**Faculty/graduate student relations.**

1. Interaction among faculty members and with graduate students is causal outside the classroom. Clinical faculty members and graduate students typically address one another on a first-name basis.
2. Graduate students share joint responsibility with their advisor for their timely progress in the program. Thus, faculty members show a professional interest in graduate students' general well-being, progress, and accomplishments. Students, in turn, are expected to take responsibility for their education and training too. To that end, faculty members provide appropriate reinforcement and constructive criticism of students' research ideas, papers, teaching activities, and so forth. Faculty members also assist graduate students in obtaining resources to support their work and in solving work-related problems at least as much as they would assist any other colleague.
3. Faculty members and graduate students seek one another's input and advice when appropriate, and seek out and receive constructive feedback so as to better themselves, the program, and the department as a whole. Faculty members and graduate students are respectful of one another's time, opinions, professional questions, suggestions, and so forth, and are courteous toward each other at all times. Faculty members strive to be as accessible to graduate students for consultations as they would be for their faculty colleagues. Faculty members strive to minimize interruptions during meetings with students.
4. Within the limits of time and other resources, graduate students are free to select faculty members to serve as advisers and on their 600 A/B, thesis, and dissertation committees. These selections are, of course, also with the faculty members' consent and within the constraints of University and Department guidelines.
5. Faculty members treat graduate students as colleagues in social situations. For

example, faculty members introduce students to colleagues and interact with students at social functions and professional meetings.

### **Caveats about the Junior Colleague-Apprentice Model.**

1. Graduate students receive advice and direction from their adviser and other faculty members concerning courses, research and teaching experiences, progress in the program, and service opportunities. Yet, graduate students must assume a level of responsibility for decisions regarding their education, behavior, progress in the program, and overall training goals. The model works well when all hold to it.
2. Graduate students and faculty members need not be "friends" in order to be colleagues. Faculty members also are not expected to serve as personal counselors for graduate students.
3. Although graduate students are junior colleagues, they also are students, and therefore faculty members are responsible for evaluating and making decisions about graduate student performance.
4. Students will vary in their ability to behave consistent with the core features of the Junior Colleague model. For instance, the ability to collaborate actively and meaningfully with research conceptualization, design, and writing for publication takes time to develop. The same is true regarding the development of clinical skills and clinical effectiveness in practicum settings. As such, students should aspire to greater levels of involvement, and seek out feedback and opportunities to develop such skills from faculty (and even peers) and their supervisors. Clinical students should, however, be capable of demonstrating the social and work-related behaviors necessary to promote a collegial and productive work environment from Day 1 (e.g., being organized, punctual, making and keeping commitments).
5. Your graduate education will hinge on what you make of it. In a way, your training is more like a journey, than a destination. You will never be "there," whether that has to do with your clinical competency, writing, scholarship, because there is always more to learn, always ways to improve. So, a good mantra to think about here is this: "Learn from my betters, and I will be better." Faculty are a good source for guidance here, but there is no substitute for your willingness to step up to the plate, show up, and take action in ways that are vital for you, your lab, your clients, and the program and department. You can be a minimalist or a maximalist in what you do here. The choice is up to you.

### *Overview of Training Structure and Major Hurdles*

**First year.** This is the most demanding year for course work, which will probably require much of your time. It is important to remember that nobody is here to fail you. As long as you adequately complete the requirements of a course, you will make it through. Hints for getting through "first year" are discussed later.

**600 project.** This is a research competency project which must be completed by the end of the summer after the second year, and before the start of classes of the third year. Although

you will register for it only in the first year, the majority of the work may be done in the second year. The 600 project is completed with the guidance of your research supervisor. Don't put this off. Start the process early in collaboration with your advisor. Set a timeline and goals and keep your commitments.

**Qualifying exams (Quals).** These are written examinations covering focal content areas relevant to clinical psychology. Students spend two days taking these exams during the summer after their third year.

**Dissertation.** This is the doctoral dissertation, which is carried out after quals have been passed. It is typically the major focus of a student's efforts during the fourth year. Yet, don't put off starting on your dissertation (e.g., topic, methods, and proposal) until after you finish the qualifying exams. This is a big mistake and will hurt you. In fact, you can be thinking and planning for your dissertation as soon as you wish, you just can't formally propose the project and start it until you've passed quals.

**APA-approved pre-doctoral internship.** Usually occurs during the fifth year. Yet, don't wait until your fourth year to start thinking about it. You ought to become familiar with internship process and what information you'll be asked to provide well before you launch into the fourth year of the program. A good place to start is the Association for Predoctoral and Internship Centers (APPIC) website: <http://www.appic.org/>. It is strongly recommended that you keep a rough log of your clinical activities, in and outside your lab, starting day 1 of the program.

**End-of-year evaluations.** All students are evaluated at the end of each academic year by the entire clinical faculty, in each of the following areas: academic progress, research performance, clinical skills, and overall professional development. Students are provided with written formal feedback in each of the above areas (i.e., outstanding, satisfactory, or deficient and requiring specific remediation, in each of the areas) and must arrange a meeting with their faculty advisor to discuss the end-of-year evaluation. Students are also encouraged to meet individually with their mentor/advisor to discuss their overall progress within the program on a more regular basis. Ideally, such meetings should occur throughout the academic year, and minimally once following the end-of-year evaluation.

## *Navigating Your First Year in the Program*

### **Arriving in Albany**

**Housing.** Relatively speaking, housing costs are reasonable in Albany. An average 1-bedroom apartment goes for at least \$600+ per month. There are several options for housing:

1. *Apartment complexes.* Many students rent apartments in the various two-story apartment complexes in the Albany area.
2. *Off-campus housing.* Many landlords rent out houses and floors of houses to students. The best places to find out about these apartments are through the Albany Times Union (Albany's daily newspaper), The Metroland, (Albany's weekly entertainment paper), and the student housing postings in the Campus Center. Note that the Albany Times Union posts classified ads for housing on their web page: <http://www.timesunion.com>. There is

an off-campus housing office at SUNY and they can provide a listing of apartments as well as names of students looking for a roommate.

3. *Freedom quad*. This is the graduate students' residence on campus. Some students have lived here in the past, however it is typically not the first option for housing among graduate students in the clinical area.

4. *Empire commons*. A second (relatively new) graduate/undergraduate student residence on campus.

Most students end up living off campus. Perhaps the best thing to do is to contact other students and ask their advice about the best areas in which to live. When looking for housing, pick up a map of Albany and have another student describe to you some of the areas. Continuing students can be very helpful to incoming students.

To find the best apartments, it is probably best to visit Albany for a few days early in the summer. A car will make it easier to get around as you visit apartments. In most cases, incoming students may stay with other students when they are looking for apartments. The closer you wait until the end of the summer, the more competition you will have for apartments.

### **When You Get Here**

**Say "hello" to the director of clinical training (DCT).** When you arrive, there are several people you should see. First, you should find the office of Dr. John Forsyth, located in room 314 on the 3<sup>rd</sup> floor of the Social Sciences building. He is the Director of Clinical Training (DCT), and handles all administrative aspects of the clinical program. It is a good idea to stop by his office to say hello. His phone number is 518-442-4862 (email: [forsyth@albany.edu](mailto:forsyth@albany.edu)). John also maintains an open door policy for graduate students. Though his door may be closed, he will respond to the secret knock if he is not tied up with something else.

**Faculty offices.** All clinical faculty have offices in the Social Science Building, which houses the Psychology Department. Most (but not all) faculty offices, the main office for the Psychology Department (SS 369, Ph: (518) 442-4820), are located on the 3<sup>rd</sup> floor of the Social Sciences Building. The Department's Chair is Dr. Kevin Williams (Social Sciences Room 309; Ph: (518) 442-4849; email: [kevinw@albany.edu](mailto:kevinw@albany.edu)).

**Brain and heart of the Psychology Department.** Cathy Murray is the Senior Staff Assistant of the Psychology Department, and is a key resource person for all kinds of information. In fact, when you need to know something, she is an excellent resource (the brain and heart of the department). Her office is located behind the Psychology Department main office (Ph: 518-442-4827; email: [cm949@albany.edu](mailto:cm949@albany.edu)).

### **Clinical faculty offices and phone numbers are as follows:**

Dr. Drew Anderson	SS 312	442-4835
Dr. Kristin Christodulu	SS 251	442-5132

Dr. Sharon Danoff-Burg	SS 313	442-4911
Dr. Mitchell Earleywine	SS 221	442-2486
Dr. John Forsyth	SS 314	442-4862
Dr. Elana Gordis	SS 357	442-2582
Dr. Leslie Halpern	SS 311	442-4840
Dr. Allen Israel	SS 236	442-4837
Dr. Robert McCaffrey	SS 235	442-4841
Dr. Hazel Prelow	SS 363	442-5805
Dr. Elga Wulfert	SS 310	442-4825

**Mail room.** Next to SS 369 is the faculty and graduate student mail room. The Department mailing address is: University at Albany, Department of Psychology, Social Sciences 369, 1400 Washington Avenue, Albany, NY 12222. Check your mailbox regularly. You probably will have mail some mail by the time you arrive on campus, depending on how early you arrive.

**Director of graduate training.** Find Dr. Sharon Danoff-Burg. She is the Director of Graduate Studies for the Department. She is located in SS 313 and can be reached at (518) 442-4911 (email: [sdb@albany.edu](mailto:sdb@albany.edu)). She will advise you regarding registration as necessary. Also, contact your assistantship supervisor and/or your mentor. Start contacting students too! You will probably have lots of questions, and advanced students will be eager to answer them. Also, ask which of the students in your class have already arrived. Try to get together. Adjusting to being in a new place seems to be easier when it is done with others.

### **Registration**

Dr. Forsyth or Dr. Danoff-Burg will tell you which courses you need to take, and by mid-August Cathy Murray has put things in place for you to register. Both John and Sharon hold separate orientation meetings during the first week or so of the Fall semester. The Director of Graduate Studies will send you information regarding registration sometime in August. You will also need to have a student Photo ID (SUNYCard) made. The SUNYCard office is located on the lower level of the Campus Center.

### **Parking Permits**

Parking permits may be purchased at the Office of Parking and Mass Transit Services (<http://web.albany.edu/deptment/parking/>). The fines for unauthorized parking are quite steep. You should not park on campus, except in the visitors pay lot, until you have your parking permit. A parking permit will allow you to park in designated student parking areas, or in spaces clearly identified as "Open Parking."

### **Hints for Making it Through First Year**

Remember that everyone makes it through first year, no matter how difficult it may seem. As long as you keep up with the work, you will make it. The key is learning how to budget your time and how to work smart. For instance, it will be difficult (and in some cases impossible) to read every word of every assigned reading enough times to completely understand everything. The goal of this year is to get a solid basis in the areas of psychology relevant to clinical research and practice. You have the next four years (and the rest of your life) to learn everything you will ever need to know. You will be kept busy enough trying to meet more modest goals. You will become very good at juggling your time.

If you are unsure how to approach a particular course, ask the instructor or other students who have already taken the course. Students usually keep readings and other course materials. Ask them before you spend a fortune on photocopying. Get to know some of the non-clinical students and faculty. This is the only year that you will share several classes with people from other areas. A class of nine or ten clinical students can seem like a very small social network after years with the same group.

Work hard so that you can carve out moments to play hard. Remember to take some time out for fun. Albany is full of malls for those who like to shop, and has some excellent clubs and restaurants. Talk to other students to find out where the hot spots are. Albany is accessible to many places for day trips and weekend getaways. Boston, New York, and Montreal are each two to four hours away. Woodstock, Western Massachusetts, Vermont and Saratoga Springs are all within a one-hour drive.

## Courses

During the first year, clinical students typically enroll in the following courses:

Fall	Spring
510 Stats & Design Psych Exp	511 Stats & Exp. Methods II
600A Research Project	600B Research Project
640 Psychopathology	736 Research Methodology
675A Scientist-Practitioner	670 Assessment
604 Survey of Developmental Psych	675B Assessment Practicum

Students also should become familiar with the Ethical Principles of Psychologists and Code of Conduct. The Principles can be found at <http://www.apa.org/ethics/code.html>. These standards will be discussed and referred to in most clinical courses and it is important that you become familiar with them quickly.

## Get Involved in a Research Lab and Start Thinking about a 600 Project

All students are expected to be active in a research lab and must complete the 600 project. You ought to set aside time to think and discuss 600 project ideas with your research mentor. Don't put this off.

## Assistantships

Specific requirements for assistantships vary tremendously. In general, Departmental assistantships require twenty hours of work per week. Specific requirements for a given assistantship (e.g., hours, vacations, etc.) should be discussed with your supervisor. Some

assistantships are funded by faculty research grants. Wages for these assistantships are paid through the Research Foundation. Other assistantships are paid through the department (see earlier section). For departmental assistantships, students serve as research and/or teaching assistants for a specific faculty member. Departmental assistantships include occasional assignments to supervise (proctor) undergraduate exams. Funding usually begins in September and lasts until May. Assistantships also may be available in the fourth year. Fourth year clinical students are eligible for clinical assistantships in community agencies.

Students are strongly encouraged, and often required, to stay in Albany during the summer months. There are several reasons for this, chief among them being that the summer provides time and opportunities to get important work done (and time for fun too) without the competing demands of taking classes. Additionally, many grant assistantships continue into the summer months, and the same is true of funding in clinical settings that require continued work with clients seeking psychological services. In most cases, an assistantship supervisor also supervises the student's 600 project and dissertation, although this is not always the case. Students are free to approach other professors about switching assistantships where funding permits such a change.

## *The Second Year in the Program*

### **Courses**

The second year schedule is as follows:

Fall	Spring
672 Clin Meth III: Beh Change	671 Clin Meth II: Psychotherapy
673 Child Clinical Psychology	Elective
676A Practicum (PSC)	676B Practicum (PSC)
602 Learning	601 Biopsychology
	892 Teaching Practicum

The second year classes are more specifically focused on clinically relevant topics. You also have more flexibility to choose a course or two that is not required. In addition to the Psychology courses offered, check the schedule for courses in Social Welfare, Counseling Psychology, Educational Psychology, and School Psychology. The course requirements from this point on tend to involve class presentations, papers, and projects (very few exams!). Generally, the format is class discussion of the required reading.

Remember that you will need a research tool to meet the department requirement.

### **The Psychological Services Center**

Second year practica are conducted at the Psychological Services Center (PSC) which is a cooperative venture of the Clinical and the Counseling Psychology Ph.D. programs. The PSC was relocated and renovated into a state-of-the-art clinical service and training facility in 2006-2007. The PSC is located nearby the downtown campus, at the following address:

The Psychological Services Center  
299 Washington Avenue

Albany, NY 12206  
Telephone: (518) 442-4900  
Fax: (518) 442-4844

The Center serves the Capital District as an outpatient clinic for a variety of mental health services. Clinical students are supervised by clinical faculty members via direct observation, review of digitally recorded sessions, and case review during formal or informal meetings.

Students carry a case load of 4 to 6 clients through the academic year. The days and hours are set by the faculty at the beginning of the semester, with 3 or 4 clinical students assigned to each supervisor.

In addition to the scheduled PSC hours (8 hours per week), several mandatory Friday morning meetings are scheduled by the PSC director (Dr. George Litchford, Ph: 518-442-4900; email: litchfrd@csc.albany.edu). There are also occasional mandatory Friday afternoon case conferences. *You are expected to plan your academic, teaching, and research schedule around these Friday meetings to avoid any conflict.*

The Center is staffed by other clinical and counseling students who are involved at PSC and other community agencies as part of clinical assistantships. Due to the large numbers of students at the clinic, the “rules” governing chart procedures and room scheduling are strictly enforced.

There is a detailed PSC Policy and Procedures manual that you will be required to read and know prior to starting your training at the clinic. Learn the procedures well, and don’t forget to call the PSC daily for messages. Additional information about PSC will be provided at the beginning of the second year.

### **Assistantships**

If you are interested in working with a different faculty member, the beginning of the second year (or more accurately the end of the first year) is the time to consider changing assistantship placements. The number of assistantship placements in any area changes from time to time, depending upon grant funding and number of students leaving for internship. First, talk to the students currently assigned to a faculty member. There are differences in number of hours expected, the responsibilities and duties involved, and the amount and type of supervision provided in the different positions. You will want to get all relevant information.

The policy for changing assistantships speaks primarily to grant supported assistantships and the mutual commitment of a given student and grant holder (mentor). Consequently, this topic will be addressed first, followed by a statement more specific to department assistantships.

Students are free to move from one mentor to another, but this move must be undertaken in a manner which facilitates students’ freedom of choice while at the same time protecting the interests of faculty members who may have vested interests in students or in the grant support assistantship positions students may occupy.

These assistantships are negotiated on a one-year basis. Neither students nor mentors should assume that an assistantship agreement will automatically be continued from year to year.

Instead, student and mentor should openly discuss the topic of continuation during the Spring semester of each year, preferably by the end of February. It is important that decisions about changes be made early because they affect the availability of grant-supported assistantships to be used for recruiting students for the following year.

In the event that a student wishes to change mentors and thus financial support, the student must discuss this decision with his/her current mentor and arrange for a smooth transition from the current research activity to a new one. Mentors by the same token should inform a student as early as possible of their intention to terminate the student's support and/or involvement in the research activity, if that be the case. Mentors should not accept students from other mentors until they are certain that arrangements for disengagement have been made. However, mentors are free to provide to interested students information about the availability of assistantship support in their labs. If a student is hesitant to address the issue of change with his/her mentor, the student should discuss his/her concerns with the Director of Clinical Training who will advise the student as to the proper course of action.

Since the award of department assistantships to students – including the assignment of their duties and the arrangement between student and faculty member for research supervision – can be independent of one another, the change in one can often be accomplished without affecting the other. Students on department assistantships who wish to change research mentors should follow the steps outlined above. Those who wish to change assistantship assignments should discuss the issue with their supervisor and with the Director of Graduate Studies. Faculty who wish to terminate their role as research and/or assistantship supervisor with a student should inform the student of the decision in time to allow the students to make other arrangements.

### **600 A/B**

The 600 project must be completed by the end of the summer of the second year (this means before the start of Fall classes for the academic year). The paper can be defended as a Masters Thesis, but this is optional and does not carry a deadline. Just get the paper done! If the project is not completed by the deadline, then you will not be allowed to sit for qualifying exams at the end of the third year. Remember to plan carefully and to consider your schedule and that of your primary research advisor.

At the beginning of the second year, the University will send a notice threatening to change your grade on the 600 A/B from Incomplete to Fail. Don't panic! The department allows 2 years to complete the project and will change the grades when the project is completed. Your "I" in the courses will be extended automatically by the department.

### **Choice for the Third Year Practicum**

The third-year practicum is required in our program, and involves a clinical placement in a mental health setting within the greater capital region. During the spring of your second year, the Director of Clinical Training will ask students to indicate their preferences for a third-year practicum assignment, and every effort will be made to honor them, though this is not always possible because there are a limited number of settings.

The practicum sites include a variety of different agencies with potential for experience with inpatient and outpatient populations. Consult with the current third year students for a more comprehensive overview of the available placement sites. And, as you do that, be mindful that

there experience may not be your experience. The clinical faculty will not send a student to a training site that we thought was inappropriate or sub-par.

The third year practicum requires 8 to 12 hours per week depending upon the agency. These hours are scheduled with the supervisors at the site. In addition to the supervision at the agency, you will meet regularly, in small groups with clinical faculty supervisors to present and discuss professional and clinical issues.

Below is an outline of the third-year (and 4<sup>th</sup> year “advanced”) practicum placement process. It is subject to change, based on current needs and resources, but it ought to give you a sense of what is involved from a faculty insider point of view. This information is provided so that you understand how it works and what is expected.

#### *Overview*

There is a distinction to be made between 3<sup>rd</sup>-year and Advanced practicum.

Third-year practicum is *required* and students register for Psy677a, Psy677b (3 credits/semester) and not Psy 893 (that course is for 4<sup>th</sup> and 5<sup>th</sup> year practicum).

Advanced practicum (for 4<sup>th</sup> and 5<sup>th</sup> year students) is *not required* – and students may register (or not – e.g. PSC advanced assistantships) for an Advanced Practicum Course (APsy 893 / 1-3 credits). Due to tuition considerations students could also volunteer for an advanced practicum and not register for credits; though we do not advise doing this without credit for reasons described below.

4<sup>th</sup> and 5<sup>th</sup> year students who have passed qualifying exams ought to register for 1 dissertation credit (considered a full load). If you chose to do an advanced practicum, then it is you should also register for advanced practicum credits so that you are covered by SUNYA insurance/liability with the site. APSY 893 is set up as a variable credit load course, thus allowing you to for 1 to 3 credit hours when on advanced practicum in your 4<sup>th</sup> and/or 5<sup>th</sup> year. You should also check with Cathy about tuition and costs that you may incur with APSY 893. Such costs may lead you to limit credit hours to 1 for APSY 893.

#### *Step 1 (March-April)*

The DCT works behind the scenes to locate potential practica placements and get a count of available slots. Acceptable practicum placements are those that have at least 1 licensed PhD/PsyD psychologist on staff who is willing to supervise students. There are, at times, exceptions to this rule (e.g., AMC pediatrics); however, those exceptions still require that some other doctoral level licensed psychologist be willing to do supervision. This is all about quality control, and ensuring that our students are supervised by professionals in our field. Also be mindful that a licensed doctoral level supervisor is no guarantee of quality. The clinical faculty do consider who will be supervising you so that you have a worthwhile training experience.

#### *Step 2 (April)*

The DCT circulates a list of available practicum sites and asks students to rank their preferences (1 = top choice). Some sites require interviews for consideration. Thus, to open up options the DCT may encourage you to interview at a site even though you did not rank it highly or at all. Again, this process is designed to help keep all options open. Those interviews may also provide you with useful information.

#### *Step 2a (April)*

At times, new opportunities open up, or information becomes available that leads you to re-rank your preferences. For instance, in the Spring of 2008 we learned of several new child slots at the CDPC. Also, you may have applied for a funded slot at the PSC or Middle Earth and learn that you are being offered that position for your practicum. So long as we all communicate about this in a timely way, we will be good to go.

*Step 3 (late April – May)*

With your rankings in hand, along with preferences communicated to the DCT by practica supervisors with whom you interviewed, the DCT then calls a series of meetings with the clinical faculty to review practica preferences and to make assignments.

This process goes something like this:

1. We review all student preferences, beginning with students who will be in their 3<sup>rd</sup> year in the fall (they get priority for placement decisions);
2. We consider student preferences in the context of each students' training needs. For instance, some sites are weaker relative to others on some dimensions. So, if a student has not had much individual therapy experience and the faculty believes that more is needed, it wouldn't make sense to send that student to a site with little or no opportunity for individualized therapy. The same kind of thing can play out for assessment, group therapy, or clinical work with particular populations or presenting problems. Some sites also allow more freedom and student independence (some of you might want/need that, others not), whereas other sites are more structured (some of you might want/need that, others not). We also consider other academic obligations and funding, and match between those demands and site demands. So, here the issue comes down to matching faculty assessment of training needs in the context of student preferences and site demands/opportunities. These decisions are made with the interests of the students in mind and also while considering their broader education – all in the context of open acknowledgement that we are about training students within a PhD program in clinical psychology. This process often involves quite a bit of discussion and time during meetings – in fact, it is the most intensive part of the process;
3. We then finalize recommendations for advanced practica placements and the DCT communicates those decisions to each of you.

We say all of this to clarify that this process is not just about preferences. It is fundamentally about training. Ultimately, the clinical faculty decide as a group on advanced practica requests, and operate from a perspective of what is best for the student training wise, and then how that fits with where students would like to do an advanced practicum. Again, sometimes there is the need for tweaking, but often faculty assessment matches student preference for a site. When there is a different decision, it is because the faculty believes that the practica site is weak relative to where you are in your training, or will not provide you with skills and experiences to help you develop more fully as a clinical psychologist relative to where you are in your training.

*Step 4 (April-June)*

You then communicate your intention to accept a practicum placement with the site supervisor/director and simultaneously with the DCT. Please be aware that these verbal commitments are binding. So, when you say “yes,” you must mean it and follow through. This is true of any practicum, paid or unpaid.

## Scope of Advanced Practicum in the Context of Your Training and Other Academic Obligations

1. *Hours.* Third-year and advanced practica ought to involve 8-12 hours/week. The one exception here is the PSC, which is a 20 hour/week commitment. The PSC is considered an advanced practica for those students funded via a PSC GA line. The program is firm on the upper limit of 12 hours max/week time commitment to a practica. You should not exceed that 12 hour limit, again with the exception being the PSC because it is part of a 20 hr/week paid assistantship. You may submit a written petition to the clinical faculty to wave the 12 hour upper limit on practica hours/week. Be mindful that you ought to have a compelling rationale for doing so. Students funded via the PSC for their practicum also will need to submit a petition to the clinical faculty to undertake additional advanced practica experiences above and beyond the PSC (a time intensive experience itself). Again, this has to do with the broader mission of our training program and our expectations that students continue to engage in other aspects of their education (e.g., research, course work).
2. *Other academic/research obligations.* The 8-12 hour/week practicum restriction has to do with balancing practical experience with other equally important academic and research activities. Practitioner or PsyD programs, as you know, emphasize the practical component. We, like most scientist-practitioner PhD programs in clinical psychology, stress both the practical and academic/research components. The faculty fully expects advanced students to continue to be actively engaged in research and course work via taking advanced seminars, along with other scholarly activities that will help round out your training as scientist-practitioners. To do that, you need time, and this again is a reason for limiting the practica to a max of 12 hours, or 1.5 days/week. When you exceed that, you risk not being available to engage in other activities, and this may hurt you, your development, and progress in the program.
3. *Practica scheduling during the week.* To enable balance of practica with other academic/research opportunities, you ought to work with your site supervisor to arrange your advanced practicum Tues and Thurs during the work week. It is understood that this may not always be possible; however, you should attempt to set your schedule on these days. Tues and Thurs do not conflict with advanced clinical seminars, colloquia, or ad hoc clinical meetings, and the like.

## Summer

Finish your 600 early in the summer of your second year, or identically even before that. By finish, we mean that you've written up the paper, allowed your mentor to read it, given yourself time to revise the manuscript based on feedback, and have a finished product that you and your mentor are happy with. If you do that, you might even be positioned to send it off to a journal for publication consideration – wouldn't that be great!

One more thing. This is the last summer to relax a little and get things done. A significant portion of the summer of your third year will be spent studying and preparing for qualifying exams, whereas in your fourth year the summer will be occupied with clearing your plate of outstanding projects, including completion of your dissertation prior to going out on internship (the ideal scenario).

## *The Third Year in the Program*

### **Courses**

The third year of the program involves a required year-long community-based practicum; 677A is taken in the fall, and 677B in the spring. These courses consist of 8-12 hours per week in a local mental health agency. You are also *required* to enroll in and attend a three hour on-campus meeting each week as part of a course titled *Professional Issues*. Typically, the first two hours of Professional Issues is devoted to presentations and discussion of ethical, diversity, and professional issues. In the final hour, students break up in groups to meet with faculty supervisors for therapy case discussions and supervision.

Additional clinical seminars are also highly recommended, although it is possible to substitute other courses in order to maintain academic involvement in the program. Students are encouraged to take advantage of the opportunities available in these seminars. Generally, they are taught by members of the clinical faculty in their respective areas of expertise. You are expected to enroll in them.

Also, sometime during your third year or in your fourth year, you must take the following courses: APSY 605 (Survey of Social Psychology), APSY 780 (Diversity Issues), and APSY 610 (History of Psychology). You need these courses for two reasons: First, APA requires them, and second many states, including New York, require them for licensure.

It is also possible to take courses in departments other than psychology. Several students have, for example, taken a course on marital and family therapy taught through the Social Work department.

It is also strongly recommended that students fulfill their graduate requirement for a research tool by the end of the first semester of the third year (if they haven't already done so). Many students have taken the course in multivariate statistics, or another advanced statistics graduate seminar, to fulfill the Tool Requirement. A course on causal modeling using the LISREL software package is also frequently used to satisfy the Tool requirements. This skill is particularly useful for conceptualizing various phenomena in terms of their causal relationships.

### **Practicum**

This year also provides the opportunity to gain intensive clinical experience. Unlike second year at the Psychological Services Center, students are not all placed at the same facility. Opportunities are available at a variety of inpatient, outpatient and residential facilities. In recent years, sites have included: the VA Hospital, Dept. of Psychiatry at Albany Medical Center, Capital District Psychiatric Center (CDPC), St. Mary's Hospital, Berkshire Farms Center for Youth, and the University Counseling Center.

The DCT and clinical faculty make every effort to accommodate students' special interests and preferences for third year practica sites (see above Section on Practica Decisions). Be mindful though that any decision involves at least four intersecting factors: (1) what you want by way of your own preferences for a site and your personal training needs, (2) what your student colleagues want and need, (3) consideration by the faculty of what might be best for you given your skills and interests, and (4) the needs of the program to maintain high quality training

sites in the community by filling those sites with our great students (i.e., if we don't fill a slot, we may lose the slot).

With this in mind, we strongly encourage you to be open to a breadth of clinical training opportunities by your willingness to expose yourself to new and different kinds of client presenting problems and clinical settings. This exposure will make you a better and more well rounded clinician, and position you to adjust to multiple professional settings and roles.

Students are expected to spend approximately 8-12 hours weekly at their 3<sup>rd</sup> and 4<sup>th</sup> year practicum sites and are generally regarded as staff members. Students will typically assume a fair amount of responsibility, expanding their professional role.

Your on-site supervisors will also provide numeric and written evaluations of your performance. These evaluations will be reviewed by the DCT and discussed with the clinical faculty during mid-year and end-of-year evaluations. You ought to seek out regular and periodic feedback by your practicum supervisors and shine in your varied roles.

### **Qualifying Exams**

Qualifying exams, or “quals” as they are affectionately referred to by students, are something you are likely to hear about early in your stay with us. Students take this exam during the summer prior to the start of their 4<sup>th</sup> year of training (not before), and must have completed all required courses up to that point to sit for the exam. Studying for quals may not be the most enjoyable way to spend your summer, but this experience will give you an opportunity to consolidate much of what you have been reading about and learning about over the previous three years in the program.

Additionally, studying for quals need not be the only thing you do during the summer of your third year. In fact, if you've been keeping up with the material, you ought to be positioned to do other things too during the summer of your third year.

The clinical faculty views the qualifying examination as one of several indices of a student's readiness to become a competent clinical psychologist in the scientist-practitioner mode. Other measures of competency include the following: course work (assessing academic abilities); the 600 project, the dissertation, and other research activities which evaluate skills in this area; and assessment of clinical skills via practica training.

The qualifying examination provides a method for evaluating a student's ability to comprehend and integrate important concepts learned through exposure to each of the above areas. It is not an ultimate final exam, simply testing the student's knowledge of facts and content gleaned from three years of class attendance, nor is it simply a means of satisfying another requirement for the degree. Rather, it is meant to insure that the student has obtained a broad-based knowledge of the principle substantive domains of clinical psychology as well as those of other relevant areas of psychology, and that the student is capable of drawing upon this material in a thoughtful and coherent fashion. In view of this emphasis on comprehension and integration of material from a variety of domains, it might be more appropriately labeled a Comprehensive Examination.

Although knowledge of course work is a necessary condition for passing the exam

(including Professional Issues in your 3<sup>rd</sup> year), the purpose of the questions is to force the student to think broadly and integrate and consolidate knowledge from different courses, readings, experiences, and areas of study. Because the research and clinical experiences are an integral part of the educational process, it is expected that the student's fund of knowledge should go beyond the specific readings and discussion that make up the academic experience, and include information gained from research and clinical activities and from his/her own intellectual pursuits. Students are expected to remain current about important developments in the field independent of specific direction or exposure, and this expectation is reflected in the makeup of the exam.

**The following core domains are each represented by a question on the exam:**

1. Behavior Change
2. Professional Issues
3. Research Design
4. Conceptual Issues
5. Psychopathology
6. General Issues
7. Assessment
8. Child Clinical

### **Description of the Exam**

The exam takes place over two consecutive days and is done on a computer. Students are given a three-hour block of time in both the morning and afternoon. During these time blocks, students may use the time as they wish, but ultimately that time ought to yield type written answers to two questions per testing session/block.

It is recommended that you spend one and a half hours on each question. Before writing, read and understand the question and outline an answer. This strategy will help you to avoid the anxiety-induced tendency to spew out everything you have read about a topic; e.g., discussing behavioral observation as an assessment strategy simply because you saw the word "behavioral" in the assessment question, when that isn't the main thrust of the question at all.

You and your classmates will be given the opportunity to choose when during the selected time period you will take the exam and also the order of the questions. Students with sensory/physical handicaps or those for whom English is a second language may request a longer preparation period and/or more time to take the exam. Such requests should be made in person and in writing to the Director of Clinical Training by the end of the spring semester prior to sitting for the exam.

### **Quals Grading**

Each question is graded by three faculty on a five point scale:

- 5- Outstanding
- 4- Passing
- 3- Borderline failing
- 2- Failing
- 1- Deficient

For a student to pass a question, the combined score of the three grades must total at least 10, with the exception that a grade distribution of 4,4,1 (total of 9) is considered passing.

Success on at least six of the eight questions is required to pass the examination. Success on five questions (meaning that you failed 3 questions), is considered a partial pass and requires that the student retake the three questions that were failed. Two of these three questions must then be passed in order for the student to pass the exam.

The initial writing of the exam plus the writing of the partial retake constitutes one administration of the exam. Should the student not pass the partial retake, s/he is considered to have failed the entire exam and must retake the exam in its entirety at the next administration.

The qualifying examination is given once a year. Currently, it is administered sometime in August.

### **Total Retakes**

A student who fails to pass Quals at the regular administration and has to retake the exam in its entirety, can expect to do so at the next regular administration. Students are free to petition to retake the exam at an earlier date; however, petitions to retake too soon after the regular administration and/or from students who performed poorly on it are not likely to be approved.

A second total failure of the full qualifying exam constitutes grounds for dismissal from the program; however, petitions for a third attempt may be entertained by the department and program.

### **Partial Retakes**

A student who receives a partial pass (5/8 questions correct) on the regular administration of the exam is normally expected to make-up the three areas sometime within the next three months. Currently, that type of exam is offered sometime in November. With sufficient reason and notification, the faculty may require the student to take the make-up at another time. Subject to the points outlined above, the student is free to petition for the make-up at another time.

In all cases, it is the responsibility of the student, in any petition concerning qualifying exam retakes, to clearly make the case for being allowed to do so. It is recommended that students planning on petitioning the faculty seek the advice and counsel of their mentor, the Director of Clinical Training, and other faculty as appropriate.

The day(s) and times(s) of retakes is(are) typically negotiated by the Clinical Director and the student(s) involved.

## ***The Fourth Year in the Program***

By the beginning of fourth year your qualifying exams should be over, and it is time to consider the year ahead. On paper this appears to be an easy year for several reasons. First, the major hurdle of qualifying exams has been completed and the course work is minimal. Yet, watch that you aren't lulled into complacency.

It is extremely important that you get a head start on the tasks you must complete during fourth year in order to be able to finish these tasks. If you don't finish these tasks your life

during internship year will be greatly complicated and you may not be ready to accept your first professional position (and get paid) after you finish your internship.

### **Courses**

While not required, you are expected to take advanced clinical seminars during the fourth year (particularly in the second semester) in order to leave yourself plenty of time to complete other tasks outlined below. Of course you are free to take other seminars or to otherwise get acquainted with some areas that you have not managed to delve into thus far.

Remember, this is your last chance for structured and low cost exposure to substantive areas of psychology. After you've finished internship, the only opportunities will be various continuing education efforts, some of which will cost you dearly (on the other hand, you'll be rich by then so maybe it will be a fair trade off), or post-doctoral training.

### **Internship Applications**

The first task with a deadline is this: deciding which internships you wish to apply to. Sometime in September, approximately 1 to 2 weeks after the results of qualifying exams become known, the DCT will schedule a meeting to explain the ins and outs of applying to internship. Students in the past have found this meeting extremely useful, and you should attend if at all possible or get notes from your classmates.

Information regarding various internships is on file in the Clinical Director's office, as is a copy of the most recent APPIC Directory (see also <http://www.appic.org/>). Some students have found it helpful to purchase their own copy of the APPIC Directory. Information regarding its purchase is provided in each year's directory.

Internship applications have been moved up in time during each of the past several years and most now require completed applications by approximately December 1st. Therefore, it is essential to request your applications early and get them filled out, since many will require transcripts and all will require letters of recommendation, all of which take time to prepare in order to meet a December 1st deadline.

The Director of Clinical Training must have all requests for letters of recommendation in his office by November 10th so that there will be time to prepare the 75 to 100 letters that must go out each year and arrive by December 1st. The details of applying will be explained at the September meeting but don't leave this until the last minute. It's a good idea to begin thinking about where you may want to go during your third year and perhaps even have some of the applications on hand.

### **Dissertations**

The overriding goal of the fourth year is to initiate and (it is hoped) complete your dissertation. Unfortunately, and for a variety of reasons, very few students seem to accomplish this goal. The ones that do are forever thankful and grateful that they were able to complete it. Here are some common pitfalls to attempt to avoid.

Most clinical faculty strongly recommend that you have your idea worked out by the end of your third year and perhaps some writing done on your proposal. Very few students actually do this because they find it hard to think past quals, but it will make life much easier for you in

your fourth year.

Other students neglect to direct their full attention to their dissertation during the fall semester, while recovering from quals and pondering the seemingly daunting task that lies ahead of them. Typically, by the time you get going (if you share these proclivities) it may well be December or January before you have submitted a first draft of your proposal to your advisor. Very likely the draft will need reworking, etc., and it will be perhaps March or April before you can finally have a committee meeting to approve your idea. By that time it is almost too late to begin data collection and you are faced with somehow attempting to complete your study during internship, or perhaps the year (or two) after internship.

To avoid these traps, you ought to set some deadlines for yourself. In fact, there is no reason why you cannot start thinking about the dissertation shortly after you finish the 600, or ideally think of a programmatic extension of the 600 for your dissertation (this, by the way, looks wonderful in terms of showing that you have a programmatic line of research when and if you need to give a job talk). Apart from making time for it, you can also start drafting your dissertation proposal even before quals.

Having the first draft in to your advisor by November 1st *may* make it possible for your committee to meet before the holidays, allowing you one whole semester to collect your data. This makes for a busy fall semester but the payoff is enormous. So, to start, set a deadline for when you will have a reasonably complete first draft of your dissertation proposal to your advisor, and then budget time for revisions so that you meet the Nov 1 deadline.

Though you might think that you can start the proposal writing right after you hear the good news that you passed quals, this is not in your best interest. The dissertation is not an overnight paper – it ought to be your best work. Remember that there is no reason to put off thinking about your dissertation. Better yet, considering a way to make your dissertation a programmatic extension of your 600 A/B. This will make the task much easier, and show potential employers that you are able to think programmatically about your research.

### **Advanced Fourth Year Clinical Practica**

An increasing number of students are choosing to do advanced practica in their fourth year. These are arranged by the Director of Clinical Training and may be located in any one of a number of community or clinical agencies within or outside of the University.

Students often take advantage of this opportunity to round out their clinical experience and gain some exposure to clinical populations that they have not encountered. Remember, once again, this is your last chance for structured supervised and “free” training (unless you carry on with postdoctoral training). Nevertheless, whether you wish to take advantage of this will depend on your own career plans and personal preferences.

## *The Fifth Year in the Program*

### **APA-Approved Pre-Doctoral Internship**

The date when you first start your internship will sneak up on you very quickly. The two

most common start dates are July 1st and September 1st. If you have at least finished collecting your dissertation data, then you'll likely experience relief and hopeful anticipation at the prospects of starting internship. If you haven't progressed with your dissertation to the point of finishing the data collection, then you'll be frantically trying to do as much as you can, and wondering how you can get back on weekends, etc. to continue with the process. This will also tend to pull you out of potentially new and vital internship experiences unnecessarily.

So, the moral?: Leave plenty of time for this and other "finishing up" duties so that the last few weeks are not frantic for you and others with whom you may be involved.

Remember that you must continue to be registered at the University at Albany for internship credit. Enroll in APSY 895 each semester. It is easy enough to register for the first semester of internship during the early registration period in the spring of your fourth year. For second semester, you can register by phone. Call the Assistant to the Chair in the department office to obtain the appropriate information for doing so.

Continuous registration during your internship year is a prerequisite to awarding of the Ph.D. You do not, however, have to register during the summer while on internship. If you are also planning to defend your dissertation before or after internship, and have been admitted to doctoral candidacy, you must be registered for at least one credit of APSY 899 (Doctoral Dissertation). In fact, 1 credit hour is all you need. If you defend your dissertation while on internship, one hour of internship registration per semester is sufficient.

The internship must be successfully completed before the Ph.D. can be granted. Ideally, you'd like to position yourself to be ABI (all but internship), and not ABD (all but dissertation). Although the internship agency may certify the completion of the internship from its perspective, the formal acknowledgement of the successful completion of this program requirement must come from the clinical faculty either in the form of a letter from the Director of Clinical Training or the awarding of the grade of "S" for each of the two pre-doctoral internship semesters.

### **Oral Defense of Your Dissertation**

At some point, we hope sooner rather than later, you will be ready to defend your dissertation. Your advisor will fill you in on all of the details but usually by this time the pressure is off. Although students continue to be a bit anxious about defending their dissertation, remember nobody knows more about the topic than you. And, though technically speaking any question in psychology can be asked during an oral defense, the reality is that most questions tend to focus on theoretical and empirical issues relevant to your dissertation.

During the oral defense you truly viewed as a colleague (not junior, not a student) and you are expected to present and defend your ideas as appropriate. Though you should include feedback from your dissertation committee and chair, there is room for you to adopt a style and approach that you are comfortable with. Keep in mind, however, that your Chair will normally outline the nature and structure of the defense meeting (e.g., length of presentation, how questions/comments will be handled and in what order), and you should discuss the structure and format of the oral defense with your advisor well in advance of the defense meeting.

Despite all the emotional hyperbole leading up to the dissertation defense, the defense itself usually turns out to be a fun learning experience where you can really discuss all of the

hard work you have been doing on your dissertation over the past year or more and the implications of your work. Over the past 12 years, only two students have been asked to repeat this oral exam, which would be the recourse if the performance was not judged to be satisfactory.

Also, be sure to remember to bring the dissertation signature sheet to your defense so that your advisor and committee members can sign the transmittal sheet on the spot. This transmittal sheet can then be forwarded directly through channels to the Graduate School. The Graduate Office on campus can provide you with a sheet detailing procedural matters for transmitting the dissertation, including number of copies to order, etc. In any case, congratulations, you have earned your Ph.D., and the right to be called Doctor, the minute your committee informs you that you have passed.

## **Graduation**

Congratulations! You did it.

Depending on when you defend your dissertation, you will be invited to the next graduation ceremony where you will be “hooded” by your advisor. This is a ceremony dating back almost 900 years, and it is really a very pleasant and fitting end to your graduate years. Many students are unable to attend since they have taken positions elsewhere around the country. But if it is at all possible, make every attempt to attend and to invite your family and friends. You will be well rewarded. More specifically, you will proceed to the staging area where the appropriate university officials will hand you your doctoral degree and at that point the doctoral hood (which actually looks like a long cape in University at Albany colors) will be placed on your shoulders by your advisor. Be sure to let your advisor know if you plan to attend graduation so that s/he can plan to be there too.

You will automatically receive notification of your impending graduation when you become eligible. At that time, you must inform the Graduate School whether you will be attending. Provision also will be included in this notification for informing your advisor to attend if at all possible. If your advisor is out of town, some other member of your committee or the faculty will do the hooding.