CLINICAL PSYCHOLOGY HANDBOOK

Updated August 25th, 2020

**The Graduate Training Ph.D. Program in Clinical Psychology
Department of Psychology
Rutgers - The State University of New Jersey**

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I. Introduction

Welcome to the Department of Psychology at Rutgers, The State University of New Jersey! You are entering graduate training that will lead to the degree of Doctor of Philosophy (Ph.D.) in Psychology. The area of specialization that you have selected is Clinical Psychology, also known as *Health Service Psychology*. Within the Department of Psychology, there are three other areas of specialization: Behavioral and Systems Neuroscience, Cognitive Psychology, and Social Psychology. The Department also has a program in Intradisciplinary Health Psychology. Each student in the clinical program is part of a select group, chosen from more than 300 highly competitive applicants each year. You have been selected because the faculty members believe that you have the right combination of intellectual abilities and personal attributes to make you a leader in academic clinical psychology. During your graduate training, you will have a unique set of opportunities to develop your research and clinical skills and to join the intellectual community of clinical psychologists.

This handbook has two purposes. First, it is designed to provide students with the necessary information to complete our training program. For this reason, it is written directly to you, the student, as the primary reader. The handbook supplements other important published material that appears in the catalogue of the Graduate School - New Brunswick, which is available online (http://catalogs.rutgers.edu/generated/nb-grad_current/). Be sure to refer to the handbook and the online catalogue regularly as you progress through the program.

The second purpose is as a repository of current policies of the Clinical Psychology Ph.D. Program, and therefore it is a resource for Clinical Advisors and others in the Department, and outside, who are interested in our program. The policies and recommendations contained in the student handbook and the catalogue of the Graduate School - New Brunswick are considered to be in effect at the time you enter the program and throughout your stay here. Any subsequent changes in policies will not affect you, but we will be updating the document annually, to reflect program changes voted on by the Clinical Faculty in the preceding year. If you wish to have your education governed by a subsequent policy, you must discuss your reasons for doing so with your advisor and with the Clinical Area Coordinator, and you must agree to accept all the policies and recommendations that are published in that subsequent year.

II. Overview of the Clinical Training Program

A. The Clinical Training Program

The Clinical Ph.D. program at Rutgers University is based on the Clinical Science model of training. It is accredited by the American Psychological Association and if you ever have a question about accreditation you can reach the APA Commission on Accreditation at (202) 336-5979. The program is also accredited by the Psychological Clinical Science Accreditation System (PCSAS), who can be contacted with questions at (301) 455-8046. In addition, the program is one of a few select members of the Academy of Psychological Clinical Science (http://acadpsychclinicalscience.org/), a coalition of doctoral and internship training programs that share a common goal of producing and applying scientific knowledge to the assessment, understanding, and amelioration of human problems. The Clinical Ph.D. program is based on the premise that clinical psychology is a specialty area within the discipline of psychology, and that research, scholarship, and clinical application should be firmly grounded in core knowledge of psychological science. The majority of the faculty members have a cognitive-behavioral, evidence-based approach to assessment and treatment, and the program is geared to students who wish to receive this type of training. There also are more limited opportunities for students whose interests are more eclectic and who may supplement training in cognitive behavior therapy (CBT) with courses and supervised experiences in other approaches (e.g., DBT, acceptance & commitment therapy).

Clinical faculty members who serve as Faculty Advisors and offer instruction or supervision are drawn from the Department of Psychology, the Graduate School of Applied and Professional Psychology (GSAPP), Rutgers University Behavioral Healthcare (UBHC), the Center of Alcohol Studies (CAS), and the Rutgers Robert Wood Johnson Medical School (RWJMS). The breadth of faculty interests and expertise in research permits students to create a program of study tailored to their particular scholarly interests.

Given the wide range of options and resources at Rutgers University, while students should focus on one primary research area related to the work of the student's advisor, they are encouraged to explore a broad spectrum of research fields. In like fashion, the philosophy behind our clinical training is to provide students with wide exposure to different problems and populations to develop broad competencies. A diversity of research, practicum, and internship settings is encouraged, going beyond the university clinic to community mental health centers, general hospitals, specialized medical clinics, and schools.

B.   Training Environment

The clinical training program is committed to creating a training environment that is respectful of all individuals, regardless of individual background or circumstances, and is committed to training students to be knowledgeable and respectful of all aspects of human diversity. It is the policy of the University to make the benefits and services of its educational programs available to students without discrimination on the basis of race, religion, color, national origin, ancestry, age, sex, gender identity, sexual orientation, disability or handicap, marital status, or veteran status. Rutgers University complies with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Older Americans Act of 1975, and the Americans with Disabilities Act of 1990. The Rutgers University policy on nondiscrimination can be found on the Graduate School – New Brunswick website via the following link: http://catalogs.rutgers.edu/generated/nb-grad_current/pg91.html.

All students, faculty, and staff are expected to contribute to an environment characterized by mutual respect. Intolerance and bigotry are antithetical to the values of the University and unacceptable within the Rutgers community. Verbal assault, defamation, harassment, and sexual harassment interfere with the mission of the University, the department and the clinical training program, and are not tolerated. A description of university policies against verbal assault, defamation, harassment, and sexual harassment can be found on the Graduate School – New Brunswick website via the following link: http://catalogs.rutgers.edu/generated/nb-grad_current/pg92.html.

We have attempted to create a supportive and stimulating learning environment. Our expectation is that every admitted student will complete the program successfully, and we make every effort to facilitate student success. We also encourage students to make deliberate efforts to ensure their own psychological and physical health during their graduate training through appropriate health-enhancing and stress-reducing activities. At the same time, we are aware that graduate school can be a difficult and stressful time in a student's life, and that conflicts with other students, faculty, or a student's research mentor can occur. The stresses of graduate school also may contribute to physical or psychological difficulties. There are a number of avenues of support should a student experience difficulties. Students should turn first to their primary mentor or to the DCT for advice and direction. Some students feel the need for additional psychological support, and may seek personal therapy during their graduate training. Graduate students may seek evaluation, brief individual or group psychotherapy, and community-treatment referrals from Rutgers Counseling, Alcohol and Other Drug Assistance Program, and Psychiatry Services (CAPS, 848-932-7884).

C.   Academic Integrity, Student Code of Conduct, and Ethical Principles

Academic integrity and honesty are necessary preconditions to the academic freedom fundamental to any university. "Ethical conduct is the obligation of every member of the university community and breaches of academic integrity constitute serious offenses. The principles of academic integrity entail simple standards of honesty and truth. Each member of the university has a responsibility to uphold the standards of the community and to take action when others violate them" (catalogue of the Graduate School - New Brunswick). These are responsibilities of every student and faculty member. The full university policies on academic integrity and the university code of student conduct are summarized in the catalogue of the Graduate School – New Brunswick, and can be found online via the following link: http://catalogs.rutgers.edu/generated/nb-grad_current/pg79.html.

In addition, students enrolled in the Doctoral Program in Clinical Psychology at Rutgers are expected to adhere to the highest personal ethical and moral standards, and to conduct themselves according to the Ethical Principles of the American Psychological Association (APA) in all aspects of their professional behavior. It is your responsibility to be familiar with the Ethical Principles of APA and violation may be grounds for dismissal from the program. A statement about Clinical Ph.D. area ethical procedures and the Ethical Principles of APA are distributed to students at the beginning of each academic year and can be found in Appendix A. The APA Ethical Principles can be found on the APA website via the following link: http://www.apa.org/ethics/code/index.aspx.

III. Program Knowledge Areas and Competencies

During their time in the Rutgers Clinical Psychology Ph.D. Program, students will learn a number of skills and competencies that will help establish them as a well-rounded psychologist and clinical practitioner. These skillsets can be divided into Discipline Specific Knowledge Areas (DSKs) and Profession-Wide Competencies (PWCs) for clinical science. Although the Rutgers Clinical Ph.D. Program has unique objectives within each of these areas, we also follow all APA guidelines for DSK and PWC areas as outlined in the APA Standards of Accreditation (SoA).

Discipline Specific Knowledge (DSK) Areas

The following areas are essential for a clinical scientist to understand the state of clinical research and practice, evaluate the efficacy and veracity of scientific psychological assertations, and understand the complex factors that contribute to psychological processes and interventions.

History and Systems of Psychology

In order to understand the current status of psychological science, it is essential for doctoral students to have a broad understanding of the history of psychological research methods, theoretical modalities, and key figures. This knowledge base readies students to advance psychology from where it has been, to where it is going! Students gain a knowledge of psychology history and systems through coursework, independent research, and qualifying exams.

> *History and Systems of Psychology Knowledge Objective*: Demonstrated, evaluated knowledge of psychological history, thought, and systems foundations.

Biological Aspects of Behavior

The psychological basis of behavior is heavily dependent on multiple biological and physiological processes, ranging from the molecular level to the neurological level. Overt human behavior can be influenced by molecular mechanisms (e.g., drugs, medications), genetics, hormones, neurophysiological processes, eating, sleeping, substances, eating, sleeping, health and associated health features such as chronic pain. Thus, understanding the human organism is essential to effective diagnostic assessment, intervention, and prevention/dissemination. Upon completion of the program, program graduates will have developed a comprehensive understanding of biological and neurophysiological processes as relevant to health service psychology.

> *Biological Aspects of Behavior Knowledge Objective*: Demonstrated understanding of the biological underpinnings of human behavior across multiple levels (e.g., molecular, physiological) and systems (e.g., neural, hormonal).

Affective Aspects of Behavior

Emotions and moods (e.g., "affective" responses) are a core feature of the human experience, and to understand human behavior it is essential for clinical psychologists to have a strong grasp of the growing literature in emotions and behavior. Students will learn the essentials of affective science through coursework, training in psychological intervention, and application of this affective knowledge to the implementation of clinical practice.

> *Affective Aspects of Behavior Knowledge Objective*: Knowledge of the definitions, theory, and regulation of affective experiences and how emotions influence human behavior.

Cognitive Aspects of Behavior

Background in the cognitive aspects of behavior is essential for success as a health service psychologist and clinical scientist, as the way humans think and/or process information can drastically influence their behavior. Furthermore, some of the most empirically supported psychological interventions include cognitive components. By the time our students graduate, they will have established essential background knowledge in cognitive processing, cognitive neuroscience, visual perception, attention and consciousness, memory processes, language, problem solving, creativity, and decision making and reasoning.

>*Cognitive Aspects of Behavior Knowledge Objective:* Broad knowledge in the cognitive, memory, language, attention and decision-making processes that influence human behavior.

Developmental Aspects of Behavior

People experience major changes throughout the course of their lives, starting with the unique psychological aspects of infancy and childhood, through teenage and adult years, and into senior years. A strong grasp of developmental life stage on psychological experience is essential for research and health service psychology. Accordingly, our students complete essential course work and clinical experience with patients from multiple life stages.

>*Developmental Aspects of Behavior Knowledge Objective:* Knowledge of individual differences in behavior across the lifespan.

Social Aspects of Behavior

Humans are social organisms, and it is difficult to understand individual behavior outside the context of the social and community structure the individual is living in. Social aspects of behavior can influence how the experiences are perceived and interpreted, discourage or reinforce behavior, and influence behavior at the group or societal level. Upon completion of the program, graduates are expected to have a sound understanding of the foundations of social psychological science, including: culture, social cognition, attitudes and beliefs, social influence and persuasion, aggression, prosocial behavior, close relationships, prejudice and intergroup relations, and group behavior.

>*Social Aspects of Behavior Knowledge Objective:* Foundational knowledge of the social bases of intra-individual, inter-individual, group, and societal behavior.

Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas

A key foundation of the Rutgers Clinical Ph.D. Program is developing the ability to synthesize and integrate knowledge from multiple content areas into a balanced and adaptive understanding of complex issues. This includes the ability take information of one discipline specific content area (e.g., developmental basis of behavior) and apply that knowledge to the understanding of another discipline-specific content area (e.g., social basis of behavior), and vice versa. Such ability to integrate and enhance knowledge from multiple areas is essential to success as a clinical scientist, which requires knowledge of basic psychological science in the application of clinical practice activities. Due to the essential requirement of advanced integrative knowledge, the program has structured two of its courses to address this issue: 1) Motivation and Emotion is a course that combines foundational material on the biological and affective aspects of human behavior, and 2) Child Psychopathology, which combines foundational material from developmental science and social psychology, then using these knowledge areas to inform each other and better understand the nature of psychiatric symptoms in children. Upon completion of the program, our graduates are expected to have developed top notch skills in integrating advanced knowledge.

>*Advanced Integrative Knowledge Objective*: Students will be able to integrate and synthesize knowledge and information from multiple areas of scientific psychology in their conceptualization and approach to clinical practice and research.

Psychometrics

Psychological science is only as good as the psychological "constructs" we develop and the measures we use to assess those constructs, a topic known as "psychometrics." For students to develop intensive knowledge in clinical science and the research process, it is essential for student to know what makes a measure reliable and valid, what methods are used to evaluate the properties of a psychological measure or assessment, and how to identify potential flaws in psychological measures. With psychometric knowledge obtained from coursework and mentor-guided research, students can go on to create novel assessments and refine existing measures that exhibit flaws.

>*Psychometric Knowledge Objective*: Knowledge of psychological measurement and skills in application of this knowledge to research.

Statistical Analysis

For students to engage in research activities and to be a high level and wise consumer of advances in psychological research, it is essential to have an established knowledge base in behavioral statistics and research design. The Rutgers Clinical Psychology Ph.D. Program provides all students with a foundation that they can build on throughout their career. During their first year in the program students take elementary courses on statistics for psychological science and research design, which they can then build on with personalized research activities, advanced coursework, and opportunities for advanced statistical workshops. Program graduates demonstrate the following upon completion of the program:

Statistical Analysis Knowledge Objective 1: Knowledge of statistics and research design and skills in application of this knowledge to research.

Statistical Analysis Knowledge Objective 2: Demonstrated ability to design new research and critically evaluate it prior to execution and after completion.

Profession-Wide Competencies (PWC)

All Rutgers Clinical Ph.D. Program students are trained intensively in the foundations of clinical research and practice, and the vast majority of our students go on to obtain licensure as a practicing psychologist regardless of their professional career direction. To this end, we ensure that all of our students are competent or even excel in the following areas:

Research Methods and Empirical Evaluation

The Rutgers Clinical Psychology Ph.D. Program is a program that adheres to a "Clinical Science" philosophy, and accordingly, we integrate research into every aspect of our training, at both the formal research level to the clinical service provision level. During their time in the program, students are expected to establish a core set of research skills and knowledge, to acquire knowledge about different research methodologies for conducting process and outcome research in clinical psychology, and to apply this research skillset to all clinical professional competencies. Key research activities include conducting individual research with a Rutgers Clinical Faculty member, learning about the underlying research in support of intervention and clinical decision making, and sharpening a clinical research mindset for program evaluation and dissemination. Key research activity milestones include completion of an analytic Masters thesis, written and oral defense of existing research in the Qualifying Examination, and completion of an analytic Dissertation. Upon completion of the program, students will have established the following core research competencies:

Research Methods Competency 1: Demonstrated ability to critique existing research and theory.

Research Methods Competency 2: Demonstrated ability to derive research from theory.

Research Methods Competency 3: Skills in the design of research, execution of research, analysis of data, and interpretation of results.

Research Methods Competency 4: Knowledge of methodologies used in major outcome studies.

Psychopathology

Broad knowledge of psychopathology is essential to most research and clinical professional activities of a health service psychologist. The Rutgers Clinical Ph.D. Program ensures that all graduates from the program have a sound understanding of: multilevel evaluation of psychopathology (e.g., brain to behavior), social aspects of psychopathology, evidence based approaches to specific forms of psychopathology, and empirical evaluation of psychopathology. Upon completion of the program, students will have established the following core research competencies:

Psychopathology Competency 1: Knowledge of DSM diagnoses and skill in the diagnosis of clients.

Psychopathology Competency 2: Knowledge of psychopathology risk factors and mechanisms of development.

Psychopathology Competency 3: Understanding of psychological intervention for specific forms of psychopathology.

Psychopathology Competency 4: Skills in utilizing cultural context in the diagnosis of psychopathology.

Assessment

A key clinical training component of the program is to ensure that all students acquire essential skills in psychological and clinical assessment. Such skills include clinical diagnostic assessment, intellectual, academic, and

achievement assessment, personality assessment, risk assessment, and outcomes assessment, using primarily standardized and structured/semi-structured approaches. Key courses include courses in Cognitive Assessment and Learning Disorders, clinical trainings on diagnostic and risk assessment, and completion of at least four comprehensive psychological assessments in supervised clinical practica. Program graduates demonstrate the following upon completion of the program:

> **Assessment Competency 1**: Foundational knowledge of clinical psychological assessment theory and approaches.
> **Assessment Competency 2**: Skills in the use of evidence-based approaches to assessment.

Intervention

Training in evidence-based psychological intervention is one of the key foundations of the Rutgers Clinical Psychology Ph.D. Program, and we strive for our students to cultivate skills that apply to scientific knowledge and evidence-based interventions to the assessment, diagnosis, and treatment of health and mental health problems. We ensure that all of our students have immersive educational and practical experience in clinical intervention, with opportunities ranging from development of basic clinical skills to specialization in key modalities or with unique populations. Through specific course options and clinical practica, many offered in conjunction with the Rutgers GSAPP Psy.D. program, students have the opportunity for training with the following modalities: Cognitive Behavioral Therapy, Exposure Therapy, Dialectical Behavior Therapy, Sleep Treatments, Eating Disorder Treatments, Behavioral Medicine, Motivational Interviewing, and many other options. Students also have the opportunity to work with the following populations: outpatient, inpatient, acute risk, culturally diverse populations, youth and adolescents, school populations, geriatric patients, and in some cases global populations. After completion of extensive coursework, program graduates demonstrate the following upon completion of the program:

> *Intervention Competency 1:* Knowledge of psychological assessment and measurement approaches of relevance to evidence-based treatment.
> *Intervention Competency 2:* Knowledge of evidence-based approaches to treatment.
> *Intervention Competency 3:* Skills to evaluate the efficacy of specific interventions.
> *Intervention Competency 4:* Knowledge of how and under what conditions the findings of randomized clinical trials generalize to clinical service settings.
> *Intervention Competency 5:* Skills to establish and maintain a working alliance with clients.
> *Intervention Competency 6:* Skills in the development of treatment plans based on assessment data and knowledge of evidence-based treatments.
> *Intervention Competency 7:* Knowledge of evidence-based clinical practices, techniques, and treatments.
> *Intervention Competency 8:* Skills in the delivery of evidence-based treatment for at least one psychological disorder.

Legal and Ethical Aspects of Research and Practice

Knowledge of the legal and ethical standards of a practicing Psychologist and researcher is imperative to establishing the clinical independence and integrity of our students. Given the complexity of the world we live in, psychologists are faced with legal and ethical challenges both new and old, and the Rutgers Clinical Psychology Ph.D. Program is committed to helping students establish a sound understanding of ethics. Training in ethics and the legal aspects of practice includes coursework and seminars covering the application of ethics to clinical settings, research integrity, protecting patients, legal considerations, managing relationships, and working in a wide variety of settings. Program graduates demonstrate the following upon completion of the program:

> *Legal and Ethical Competency 1:* Knowledge of APA professional standards and ethics.
> *Legal and Ethical Competency 2:* Knowledge of research ethics and skill in the application of this knowledge to specific research dilemmas.
> *Legal and Ethical Competency 3:* Skills in the application of clinical ethics to clinical practice.

Individual and Cultural Diversity

A deep understanding of psychological individual differences based on sex, gender, race, ethnicity, creed and culture is essential to operating as a clinical psychologist in an incredibly diverse world. While comprehensive knowledge of every cultural or individual identity is a worthwhile endeavor, the Rutgers Clinical Ph.D. Program strives rather to start students on a life-long journey of knowledge and respect for people of all diverse backgrounds. Through culture-based coursework and integrated knowledge and discussion of diversity/cultural considerations in all areas of clinical psychology and practice, our students continue onward in their professional careers with

substantial experience working with diverse populations, and ready to provide health services to patients presenting from any background. Upon completion of the program, our graduates display the following competencies:

> ***Individual and Cultural Diversity Competency 1***: Knowledge of research concerning the impact of gender, ethnicity, race, culture, sexual preference, and physical disability on risk of various forms of psychopathology
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> ***Individual and Cultural Diversity Competency 2***: Knowledge of the impact of cultural identity on access to and utilization of service delivery systems
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> ***Individual and Cultural Diversity Competency 3***: Knowledge of research on the influence of cultural factors on response to interventions
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> ***Individual and Cultural Diversity Competency 4***: Awareness of self and personal values in interacting with culturally different clients
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> ***Individual and Cultural Diversity Competency 5***: An attitude of respect for others' standards, practices and beliefs related to health and psychological functioning
>
> ***Individual and Cultural Diversity Competency 6***: Skill in the application of knowledge of individual and cultural diversity to enhance client retention and response to treatment in clinical practice
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> ***Individual and Cultural Diversity Competency 7***: An attitude of willingness to consult outside professionals on relevant cultural issues to inform clinical practice

Professional Values, Attitudes, and Behaviors

The Rutgers Clinical Psychology Ph.D. program has developed a strong national reputation for training excellent psychologists and professionals that work in scientific, academic, medical, inpatient, outpatient, educational, community and industrial settings. We ensure our students develop strong professional values, attitudes, and skills by a) ensuring our faculty exemplify and demonstrate outstanding practices, and b) by providing our students with ample opportunity to learn and practice these skills. Our graduate students regularly present at professional regional, national, and international conferences, engage with community and educational programs, publish in peer reviewed science journals, contribute to field-wide professional publications and understand the importance of disseminating treatments nationally and globally. We also ensure our students understand the best ethical and professional practices involved in the practice of science, administration of clinical services, and facilitation of educational and teaching practices.

> ***Professional Values and Attitudes Competency***: Students will understand and emulate the best professional and research practices in scientific clinical psychology, embrace appropriate professional attitudes, behaviors and responsibilities.

Supervision

One of the most important professional activities of a health service psychologist involves the provision of clinical supervision to trainees and providers from associated health professions. With the development of psychological skills with intervention and assessment, the psychologist develops as a knowledge expert in the provision of these services. However, more than experience is necessary to become a highly skilled supervisor, additional knowledge of supervision models and approaches is necessary. Students will also have opportunities for supervision of more junior students, co-supervision in working in their mentor's laboratory, and opportunity for supervision of undergraduates working on clinical assessments and research protocols. Therefore, in addition to receiving and learning from outstanding clinical supervision while at Rutgers, graduates of the program also emerge as highly trained supervisors who will go on to train the next generation of health service psychologists!

> ***Supervision Competency***: Develop a skillset in the provision of supervision services to psychological trainees.

Consultation and Interprofessional/Interdisciplinary Skills

Psychologists work in a wide variety of settings, from clinical and hospital, to academic and educational, to industry and government. Accordingly, for students to be prepared to enter and engage as psychologists operating across various settings and interacting with practitioners from many other professions, we ensure our students are trained in the most updated clinical consultation techniques. Students undergo in-depth course coverage of consultation skills, as well as individual supervised training in consultation in psychology. Program graduates demonstrate the following upon completion of the program:

> ***Consultation Competency***: Develop a skillset in clinical consultation across various medical, educational, community and industrial settings.

Professional Communication, Dissemination, and Interpersonal Skills

It is important for our students to develop awareness of the importance of, and gaining experience in scientific communication, integrating scientific knowledge into clinical practice, communicating with professionals and lay audiences, and appropriate skills interacting with patients, families, other professionals and communities. Our program also places a heavy emphasis on the dissemination of scientific research and empirically supported treatments to the broader world, with the belief that psychologists really can improve global mental and physical health. Upon completion of the program, our graduates should display the following competencies:

Communication and Dissemination Competency 1: Skill in translation of research findings into practice.
Communication and Dissemination Competency 2: Knowledge of major journals and publication outlets, and experience in submitting manuscripts for publication
Communication and Dissemination Competency 3: A demonstrable attitude of interest in scholarly inquiry and communication of science to broad audiences.
Communication and Dissemination Competency 4: Skills in the dissemination of knowledge in clinical psychology with an emphasis on empirically-based approaches.

We anticipate that our graduates will use these areas of skill and knowledge in a range of career paths, including academic/clinical positions in departments of psychology or psychiatry in universities or medical schools, and clinical or clinical/administrative jobs in medical schools or mental health centers. A minority of our graduates focus exclusively on science-based clinical practice.

Upon completion of training, program graduates are expected to: (1) possess critical analytic skills; (2) be able to identify new knowledge and bring that knowledge to bear upon research and clinical problems; and (3) be competent to use core knowledge in the design of research studies, in teaching, and clinical service delivery. You should be competent to select and apply assessment approaches and treatments with empirical support for their effectiveness and should pass the state licensing examination without major difficulty. Program graduates should be able to read the scientific literature critically; select and formulate research questions; and be skilled in research design, data collection, data management, and data analysis. You should be actively involved in research and program evaluation, and dissemination of that research through presentations at professional meetings and publications in the scientific literature. In the conduct of your clinical work and the design of research, you should be knowledgeable about issues of clinical and research ethics, and function within the ethical guidelines of the American Psychological Association and the laws of your state. You should be competent in the treatment of diverse client populations, in the recruitment of diverse participant populations in your research, and competent to formulate research questions and select research methods appropriate to populations under study.

IV.   Core Faculty and Research Interests

The clinical training program draws from a large group of psychologists at five major units: the Department of Psychology, GSAPP, CAS, UBHC, and the Department of Psychiatry at RWJMS. Core faculty membership is defined by a contribution of 50% or more to the clinical psychology program and meeting one of three criteria: (a) an active program of research of direct relevance to issues in clinical psychology, (b) responsibility for teaching a required clinical course, (c) extensive student involvement, through a combination of mentoring an individual student, clinical supervision, and/or involvement on numerous student committees.

The core faculty group is committed to empirical science and disciplined scholarly inquiry. The Other Program Faculty members are contributing faculty who meet one of the three criteria above while not providing 50% of their time to the clinical program. It is noteworthy that these individuals take on these responsibilities despite their accountability structures being largely outside of our program area. This reflects the quality of our students, the appeal of our strong clinical scientist model, and the overall standing of our program in the larger environment of APA accredited programs.

Of these 26 faculty members, 15 are currently or have recently served as research mentors and 4 are planning to directly mentor students in the near future. This large group of contributing faculty members assures that no single faculty member carries responsibility for the mentoring of an unduly large number of students, and provides several

faculty members working in related areas of scholarship (e.g., behavioral medicine/health psychology, childhood disorders, prevention) with whom a student may work.

*Bolded names denote faculty who serve as primary mentors to students:

Core Faculty (with Primary Appointments in SAS Psychology)

*Richard Contrada, Ph.D., (Professor of Psychology and Member, Institute for Health, Health Care Policy and Aging Research) is a social psychologist whose work addresses behavioral and pathophysiological processes linking psychosocial factors to physical health and illness. He has conducted programs of research addressing these issues in laboratory, field, and medical settings. He has a longstanding interest in the role of personality in physical health. Current projects also include an investigation of the role of religious involvement in adaptation to cardiac surgery, and an examination of pro-inflammatory cytokines as a basis for associations between depressive symptoms and coronary disease. Among his other research interests are theories of self-regulation, health effects of ethnicity and ethnicity-related stress, and the psychophysiology of stress and emotion. He contributes to the clinical training program as a primary research mentor, and teaches courses in health psychology and social psychology methods.

*Maurice Elias, Ph.D., (Professor of Psychology) is Academic Director of The Collaborative Center for Community-Based Research and Service. He is a community-clinical psychologist whose research focuses in the area of social-emotional and character development, emotional intelligence, prevention and social competence promotion, resiliency, risk and protective factors, and promoting safe and civil schools. A current focus is on the social-emotional competencies of children that mediate mental health and behavioral and academic functioning, and the mechanisms through which primary socializing institutions foster or inhibit growth of social competencies. His research on evidence-based practice in school-community interventions focuses on sociocultural factors in urban contexts, such as ethnicity and neighborhood environments. He teaches an elective course in community psychology, and serves as a primary research mentor and field-based practicum supervisor for clinical students.

Samantha Farris, Ph.D. (Assistant Professor),* is a new faculty hire who started in the fall of 2018, and an extremely productive and promising young researcher. Her area of expertise involves anxiety pathology and its interplay with physical health. Her work explores the risks factors for, causes of, and consequences of clinical anxiety symptoms and disorders in their own right, and also in how they can influence physical health concerns or manifest as a function of physical health concerns. In particular, she is currently examining anxiety symptoms experienced during cardiac rehab, and how this can influence physical recovery and how psychological medicine can address these symptoms. Dr. Farris also collaborates on research exploring the link between anxiety and substance use.

*Jessica Hamilton, Ph.D. (Assistant Professor – Starting in January 2021), focuses on identifying modifiable risk factors for the onset and worsening of adolescent depression and suicidality (i.e., ideation and behavior). Given that depression and suicidality increase during adolescence, Dr. Hamilton's research applies a developmentally-informed approach to understand the unique factors that impact the development and course of depression and suicidality during this period. Her research centers on three interrelated questions: 1) which adolescents are most at risk?, 2) when are adolescents most at risk and through what malleable processes (e.g., sleep, social stress, rumination)?, and 3) How does technology both impact risk for suicidality and improve our ability to capture (and ultimately modify) these risk processes in real time? Integrating these questions, she is currently the PI on a NIMH-funded career development award (K01) that examines social media and sleep disruption in risk for suicidality among adolescents using an intensive monitoring design. Broadly, Dr. Hamilton's research aims to harness the power of advancing technology (e.g., passive mobile sensing, actigraphy, ecological momentary assessment (EMA), ambulatory psychophysiology) to better identify and detect suicide risk in the real world and in real time to inform prevention and early intervention programs among diverse youth.

Robert Karlin, Ph.D., (Associate Professor of Psychology) is an experienced clinician who works from a cognitive-behavioral perspective. He has specific expertise in clinical and forensic hypnosis and divorce mediation. Some years, he teaches the first semester Research Design and Analysis I course that students are required to take. He serves on numerous masters and dissertation committees. He also provides clinical supervision to students during the second-year practicum, and serves as a clinical supervisor and mentor to students.

Evan Kleiman, Ph.D. (Assistant Professor) is a prolific early career investigator who joined the clinical psychology faculty as an assistant professor in January of 2019. Dr. Kleiman has extensive expertise in the suicide risk assessment and intervention, treatment of inpatient populations, and use of mobile technologies to assess patient cognitive and emotional risk states. He has received multiple grants to support his work. Prior to joining the faculty at Rutgers, he has been a research associate at Harvard University. He also has clinical interests in psychological assessment and CBT supervision.

Teresa M. Leyro, Ph.D., (Associate Professor of Psychology and Member, Institute for Health, Health Care Policy and Aging Research) has research interests that lie in identifying the roles of cognitive-affective and biological vulnerability in the etiology and maintenance of substance use, with a focus on tobacco dependence, anxiety, and their comorbidity. Her translational research program employs stress provocation paradigms to explore the complex relations between these vulnerabilities and associated psychological impairment, in order to inform the development and subsequent testing of novel treatment interventions and adjuncts. She teaches Abnormal Psychology at the undergraduate level and will teach a graduate course in Psychophysiology. She serves as a research and clinical mentor to clinical graduate students.

Edward Selby, Ph.D. (Associate Professor of Psychology and Director of Clinical Training) serves as the DCT and Coordinator of Clinical Ph.D. Student Practica for the program. He is an associate professor and has research interests at the intersection of emotion regulation and severe psychopathology, such as suicidal and self-injurious behavior, personality disorders and eating disorders. He is known for the Emotional Cascade Model, a novel theoretical model about major mechanisms of psychopathology in borderline personality disorder and other forms of psychopathology. He has received funding from federal and private agencies, and currently serves on the editorial boards for multiple research journals. Dr. Selby regularly teaches our graduate program Adult Psychopathology course, which is a requirement for new students to the program, every fall. He is also well versed in advanced statistical modeling techniques such as hierarchical linear modeling, structural equation modeling, generalized linear modeling, mixture modeling, and latent growth curve analysis make him a key resource for student and faculty research in the program.

G. Terence Wilson, Ph.D., (Oscar Krisen Buros Distinguished Professor of Psychology, GSAPP) has served as Clinical Area Coordinator/Director of Clinical Training and continues to provide essential program leadership. He is a leader in the field of cognitive behavioral therapy. His internationally recognized expertise in the development, evaluation, dissemination, and implementation of evidence-based treatments for adult disorders is consistent with the program goal of training clinical psychologists according to the clinical scientist model. He directs the Eating Disorders Clinic that integrates teaching, clinical practice, and research in the education of graduate student trainees. He teaches core clinical courses in empirically-supported treatments including required courses Cognitive Behavior Therapy I and II and an elective in Dissemination and Implementation. He serves as a primary research and clinical mentor to students.

Associate Faculty (with Primary Appointments in GSAPP, BHI, UBHC, & RBHS)

*Vanessa Bal, Ph.D. (Associate Professor, GSAPP) is a new faculty member in GSAPP who conducts research on the measurement, prediction, and outcomes of developmental delays, including autism spectrum disorders. This includes studies evaluating both biological and behavioral approaches that may be useful in screening and diagnosis, tracking of symptoms across development, and evaluating response to treatment. By emphasizing a multidimensional, lifespan perspective, her research aims to delineate relationships between dimensions of social-communication, language, cognition and emotion in the context of neurodevelopmental disorders in order to inform the development of targeted interventions that capitalize on individual strengths in order to promote well-being for individuals with ASD across the lifespan.

*Marsha Bates, Ph.D., (Distinguished Professor, Department of Kinesiology) conducts research in cognitive neuropsychology and neurocognitive sequelae of alcohol and drug use and abuse and applications of biofeedback to the treatment of addictive disorders. She serves as a primary research mentor for students.

Nancy Boyd-Franklin, Ph.D. (Distinguished Professor, GSAPP) teaches a diversity course that students may take to fulfill their diversity training requirements and supervises practicum students at the Somerset Counseling Program.

Her specialty areas are family therapy and multicultural issues in clinical work.

__Brian Chu, Ph.D.__ (Associate Professor of Clinical Psychology and Director of Clinical Training for the Clinical Psychology Psy.D. Program, GSAPP), is interested in the assessment and treatment of anxiety and depressive disorders in youth, with a special emphasis on the dissemination of evidence-based practice, effectiveness research, and the evaluation of mediators and moderators of change. He directs the Youth Anxiety and Depression Clinic that serves as a practicum site and teaches GSAPP courses on CBT for youth. He serves as a primary research and clinical mentor to students.

Denise Hien, Ph.D., ABPP (Director, Center of Alcohol Studies) leads a program of research including longitudinal studies and prevention studies of posttraumatic stress disorder and alcohol and drug use. She is an internationally recognized leader in this area and has a substantial publication and external funding record. She serves on students' Master's, dissertation, and qualifying exam committees.

__Anna Konova__, Ph.D. (Assistant Professor, UBHC) is a member of the Rutgers Brain Health Institute. She focuses on understanding the cognitive neuroscience of substance use and addictive behaviors. Of particular interest are risk and resilience factors in addiction recovery, such as high risk and impulsive behavior, craving, stress and anxiety, and psychosocial functions such as social network and financial stability. She combines functional brain imaging methods, computational modeling, and experience sampling to examine how individual decision making including real-life drug-related, economic, and social decision making is influenced by fluctuations in these subjective states and environmental contexts.

__Robert H. LaRue__, Ph.D., BCBA-D (Clinical Associate Professor, GSAPP), serves as the Director of Behavioral and Research Services at the Douglass Developmental Disabilities Center and conducts research on the assessment and treatment of maladaptive behavior, staff and teacher training, and behavioral pharmacology. He serves as a practicum supervisor, serves on student committees, and presents in Grand Rounds.

__Shireen Rizvi, Ph.D.__, (Associate Professor of Clinical Psychology, GSAPP) leads a research program in borderline personality disorder, Dialectical Behavior Therapy, treatment of serious mental health problems, suicidal behavior, trauma, and developing mobile technology applications for skills generalization. She provides training for students in DBT and cognitive behavioral assessment. She serves as a primary research mentor and clinical supervisor.

__Marc Steinberg__, Ph.D. – RWJ Psychiatry – is an associate professor and associate director of addiction psychiatry in the Rutgers RWJ medical school. He conducts research in the area of tobacco use and dependence, especially amongst vulnerable populations with mental illness and low socioeconomic status. He has published extensively and currently serves as the Deputy Editor for the journal Nicotine & Tobacco Research. He regularly provides clinical mentorship to students working in substance use practica at Rutgers, and he is a frequent mentor within the PhD program, serving as mentor for two students at this time.

Other Contributors

Other contributors provide specific areas of non-research expertise to the program. They are not considered program faculty, but are important to the functioning of the training program. Most often, their expertise is in work with specific populations, assessment, clinical service delivery, program planning, or coordination of a significant aspect of students' clinical training. At the May faculty meeting each year, we review the Other Contributors to determine whether any individuals should be added or removed. These currently include:

Daniela Colognori, Psy.D. – GSAPP – directs practica at the Rutgers Tourette's Syndrome Clinic.

Lynn Clemow, Ph.D., (Clinical Associate Professor, RWJMS), supervises the behavioral medicine practicum within the Department of Family Medicine and gives guest lectures in Ph.D. classes, Forum, and Grand Rounds.

Lindsay Anderson, Psy.D., (Project Director, Foster Care Counseling Project) directs a practicum for clinical students. She provides training and supervision in clinic- and home-based services for children and families in foster care.

Lara Delmolino, Ph.D., (Clinical Associate Professor, GSAPP), serves as the Director of the Douglass Developmental Disabilities Center where clinical students conduct research and clinical practica.

Daniel Fishman, Ph.D., (Professor, GSAPP), provides behavioral therapy supervision and conducts research on organizational behavior management and the impact of managed care on service delivery.

Paul Lehrer, Ph.D., (Professor, Department of Psychiatry, RWJMS), conducts basic and applied research on psychophysiology, biofeedback interventions, anxiety-related disorders, and stress management. He provides lectures on these topics and biofeedback in required courses, and clinical supervision in behavioral medicine.

Andrea Quinn, *Psy.D*. (GSAPP). GSAPP Psychology Clinic. Director of the Anxiety Disorders Clinic.

Kenneth Schneider, Ph.D., (Professor Emeritus of School Psychology, GSAPP) teaches sections of the required course in cognitive assessment course and provides training and supervision in assessment through a cognitive assessment practicum.

V.   Student Admissions, Outcomes, and Other Data

A. Admission Data

	2013	2014	2015	2016	2017	2018	2019	2020
Number of Applicants	375	352	340	322	371	330	332	395
Number Offered Admission	9	6	5	8	5	6	5	5
Size of Incoming Class	7	4	4	5	4	4	4	4
Number of Incoming Students Receiving Full Support Including Tuition	7	4	4	5	4	4	4	4

GRE Scores for Admitted Students

Average Scores	2013	2014	2015	2016	2017	2018	2019	2020
Verbal	162	162	164	163	160	162	165	164
Quantitative	159	160	159	157	158	165	161	157

Additional Information Required by CUDCP Guidelines

		2013	2014	2015	2016	2017	2018	2019	2020
Undergraduate GPA		3.74	3.81	3.64	3.65	3.62	3.78	3.92	3.61
Verbal GRE	Median	162	162	164	160	159	162	165	164
	Percentile	88	89	91	85	84	91	96	94
Quantitative GRE	Median	159	160	159	157	156	163	161	157
	Percentile	77	79	78	67	60	83	76	64

B. Time to Completion for All Students Entering the Program

	Year in which Degrees were Conferred							
Outcome	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	Total
Total number of students with doctoral degrees conferred on transcript	6	5	4	6	2	5	5	33

Mean number of years to complete the program	5.2		6.2		5.5		5.5		6.5		5.8		6		5.8	
Median number of years to complete the program	5		7		6		6		6.5		6		6		6.1	
Time to Degree Ranges	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students in less than 5 years	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students in 5 years	5	43	2	80	2	50	5	83	0	0	1	25	0	0	13	40
Students in 6 years	1	43	0	20	1	25	1	17	1	50	4	75	5	100	15	45
Students in 7 years	0	14	3	0	1	25	0	0	1	50	0	0	0	0	5	15
Students in more than 7 years	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Students who have graduate course credit from another institution prior to enrollment (e.g., from a master's program), may be able to apply some credits for previously completed courses to the requirements for the doctoral degree if the student earned a B or better in the course and Rutgers program faculty consider the course equivalent to one taught at Rutgers after reviewing the syllabus for the external course. This does not typically reduce time to completion, as generally only electives or quantitative courses are considered equivalent to those offered in the program.

C. Program Costs

Description	2020-2021 1st-year Cohort Cost
Tuition for full-time students (in-state)	$17,736
Tuition for full-time students (out-of-state)	$30,144
Tuition per credit hour for part-time students	NA
University/institution fees or costs	$2,247
Additional estimated fees or costs to students (e.g., books travel, etc.)	$600
Estimated Total	$20,583 (in-state) and $32,991 (out-of-state)

Note: International Students are charged the following fees: International Student Fee $230.00, Major Medical Coverage Plan $967.00, and a $250.00-$335.00 SEVIS Administration Fee, per semester, for F1 and JI visa holders.

All students receive full financial support (a Fellowship, Teaching Assistantship, or Graduate Assistantship) that covers all tuition and provides an annual stipend. At the present time, Fellows receive a stipend of $25,000 and TA/GAs receive a salary of $28,569. All students are guaranteed support for five years provided they are in good standing in the program. Students are also eligible for summer support through TA and GA positions. These summer appointments usually carry a stipend of $1,700-$3,300, depending on responsibilities. Students are strongly encouraged to apply for residency in New Jersey (see http://nbregistrar.rutgers.edu/forms/ResidencyAppl.pdf) as soon as they are eligible to reduce tuition costs and enable the department to support more students. Students in their 6th year and beyond are given low priority for departmental funding.

D.   Internship Data
Internship Placement – Table 1

	Year Applied for Internship													
Outcome	2013-2014		2014-2015		2015-2016		2016-2017		2017-2018		2018-2019		2019-2020	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students who obtained APA/CPA-accredited internships	4	100	6	100	2	100	6	100	5	100	4	100	5	100
Students who obtained APPIC internships that were not APA/CPA-	0	0	0	0	0	0	0	0	0	0	0	0	0	0

accredited *(if applicable)*														
Students who obtained other membership organization internships (e.g., CAPIC) that were not APA/CPA-accredited *(if applicable)*	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students who obtained internships conforming to CDSPP guidelines that were not APA/CPA-accredited *(if applicable)*	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students who obtained other internships that were not APA/CPA-accredited *(if applicable)*	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students who obtained any internship	4	100	6	100	2	100	6	100	5	100	4	100	5	100
Students who sought or applied for internships including those who withdrew from the application process	4	-	6	-	2	-	6	-	5	-	4	-	5	-

Internship Placement – Table 2

Outcome	Year Applied for Internship													
	2013-2014		2014-2015		2015-2016		2016-2017		2017-2018		2018-2019		2019-2020	
	N	%			N	%	N	%	N	%	N	%	N	%
Students who sought or applied for internships including those who withdrew from the application process	4	-	6	-	2	-	6	-	5	-	4	-	5	-
Students who obtained paid internships	4	100	6	100	2	100	6	100	5	100	4	100	5	100
Students who obtained half-time internships *(if applicable)*	0	0	0	0	0	0	0	0	0	0	0	0	0	0

E. Attrition

Variable	Year of First Enrollment													
	2013-2014		2014-2015		2015-2016		2016-2017		2017-2018		2018-2019		2019-2020	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students for whom this is the year of first	7	-	4	-	4	-	5	-	4	-	4	-	4	-

enrollment (i.e., new students)														
Students whose doctoral degrees were conferred on their transcripts	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students still enrolled in program	6	86	4	100	4	100	5	100	4	100	4	100	4	100
Students no longer enrolled for any reason other than conferral of doctoral degree	1	14	0	0	0	0	0	0	0	0	0	0	0	0

F. Licensure

Outcome	2012 to 2020
Total number of students with doctoral degrees conferred on transcript in time period	26
Number of students with doctoral degrees conferred on transcripts who became licensed doctoral psychologists in time period	20
Licensure percentage	77%

VI. Facilities/Laboratories Available for Training

A. Research Facilities

Your mentor's research laboratory will likely serve as your primary research site. Program faculty lead active research programs, some in laboratory studies and others in healthcare or community settings. Faculty research ranges from experimental psychopathology research through intervention development and evaluation to dissemination and implementation. Program faculty affiliations with GSAPP, CAS, the Institute for Health, Health Care Policy and Aging Research, and RWJMS offer opportunities for research training in these settings. For more information about faculty research programs, please see the faculty profiles https://psych.rutgers.edu/academics/graduate/cl.

B. Practicum Sites

A range of sites is available for clinical training. The Psychological Clinic provides services to the community as a whole and is intended to serve as the primary practicum site for second-year students. Every student is required to carry at least one case in the Clinic, preferably in the second year. A variety of clinical problems are addressed through the Psychological Clinic, and the Clinic maintains a list of community supervisors with expertise in various areas of psychological service. The Clinic Director (incoming to be determined) and DCT (Dr. Edward Selby) consult on a routine basis about supervisor assignments, student progress, and student problems. During the first year, a multi-part clinic orientation and registration in the clinic record system is required. The Director of Clinical Training will work with the Clinic Director to ensure that this happens for each new class.

The Psychological Clinic houses several faculty-led specialty clinics, including: the Dialectical Behavior Therapy Clinic, Group Psychotherapy Services, the Tourettes Clinic, Women Helping Women, and the Youth Anxiety and Depression Clinic (YAD-C). Additional sites at Rutgers (e.g., the Douglass Developmental Disabilities Center, RWJMS Family Medicine at Monument Square, the Rutgers-Somerset Counseling Project, the Institute for Research on Youth Depression and Prevention, the Social-Emotional Learning Lab) offer students varied diverse training opportunities. Your mentor and the DCT can also facilitate matching to external practicum and externship sites in the region, including community mental health centers, schools, medical centers, and other specialized clinics. We match students to sites in which empirically supported approaches to assessment, treatment, and/or prevention will be used. You should

work closely with your mentor and Drs. Selby to select and secure external practica and externships. New practicum sites can and have been developed in response to changing circumstances in the field and student interests (e.g., neuropsychology, treatment of veterans and their families, behavior assessment and intervention in schools, youth leadership and empowerment, collaborative practica with medical settings), but this must be done in consultation with Dr. Selby. A list of recent external practicum sites is available through the Graduate School of Applied and Professional Psychology. An updated list is provided each winter. Login to http://portal.gsapp.rutgers.edu/cstudents/login.php to view this list.

VII.   Program Description, Requirements and Timetable for Completion of Program Requirements

A. Required Course work

   1. Required Core Courses:
   a. 16:830:521, 522   Research Design & Analysis I and II (6 credits, fall/spring 1st year)
   b. 16:830:537   Adult Descriptive and Experimental Psychopathology (3 credits; fall 1st year)
   c. 16.830:553   Strategies in Cognitive Behavior Therapy (3 credits, fall 1st year)
   d. 18:820:633   Cognitive Assessment (GSAPP, 3 credits, spring of 1st year)
   e. 18:821:558   Learning Disabilities in Children and Adults (GSAPP, 3 credits, summer of 1st or 2nd year)
   f. 16:830:623   Theory and Practice of CBT I (3 credits, spring 1st year)
   g. 16:830:624   Theory and Practice of CBT II-Dissemination/Implementation (3 credits, every fall)
   h. 16:830:528, 529   Clinical Ethics I & II (1.5 credits each; fall/spring 2nd year)
   i. 16:830: 572, 573   Proseminar I & II – Supervision & Consultation (6 credits, fall/spring 2nd year)

   2. Required Foundational Courses:
   a. 16:830:560   Emotion and Motivation: Biological & Affective Bases of Behavior (3 credits)
   b. 16:830:538   Child Descr. & Experim. Psychopathology: Social/Developmental Processes (3 credits)
   c. 16:830:554   Development of Cognitive Processes (3 credits)
   d. 16:830:580   History & Systems of Psychology (3 credits)
   e. 16:830:558   Psychopharmacology: Theory & Practice [*or Equivalent with approval*] (3 credits)
   f. One course in diversity/individual differences (GSAPP, 3 credits):
       18:820:570   Psychological Intervention with Ethnic and Racial Minority Clients and Families
       18:820:575   Diversity and Racial Identity

   3. Required Advanced Elective Courses:
   a. <u>One course in Advanced Psychological Intervention</u> (3 credits)
       18:821:630   Assessment and Treatment of Alcohol Abuse and Alcoholism (3 credits)
       18:821:562   Behavioral Couples Therapy (3 credits)
       18:821:566   Cognitive Behavioral Family Intervention for Adolescent Problems (3 credits)
       18:820:615   Family Therapy for Childhood Disorders (3 credits)
       18:821:567   Clinical Behavior Analysis with Childhood/Adolescent Disorders (3 credits)
       18:821:607   Interpersonal Psychotherapy (3 credits)
       18:821:608   Clinical Research and Treatment for Youth Anxiety and Depression (3 credits)
       18:821:612   Fundamentals of Dialectical Behavior Therapy (3 credits)
       18:821:613   Dialectical Behavior Therapy in Practice (3 credits)
       18:821:555, 556 Cognitive Behavior Therapy: Essential Skills for the Treatment of Anxiety and Depression (2 semesters, 3 credits each)
   b. <u>One course in Advanced Statistics or Research Methods</u> (3 credits)
       16:830:503   Applied Latent Variable & Hierarchical Modeling
       16:830:533   Exp. Design & Methods: Deeper Data Analysis for Neuroscience & Psychology
       16:830:504   Grant Writing-Write an NRSA grant
       [or Alternative Course Approved by DCT]
   c. <u>Two courses in at least two different topics areas in Advanced Science</u> (6 credits; only one course per topic area can be applied towards meeting this requirement)

          i. *Biological Basis of Behavior* (select one)
              16:830:592   Current Topics in Psychology: Applied Psychophysiology
              16:830:577   Health Psychology

16:830:647   Neurobiology of Mental Health Issues
        16.830:514   Perception
        16.830:567,568   Nervous System & Behavior I or II
        16.830:585   Psychoneuroimmunology
        [or Alternative Course Approved by DCT]
    AND/OR
    ii. *Social Basis of Behavior* (select one)
        16.830:612   Current Topics in Psychology: The Psychology of Gender
        16.830:618   Self Regulation and Self Control
        16.830:619   Self & Intergroup Relations
        16.830:506   Attitudes & Social Cognition
        [or Alternative Course Approved by DCT]
    AND/OR
    iii. *Cognitive Basis of Behavior* (select one)
        16.830:543   Conditioning & Learning
        16.830:534   Decision Making
        16.830:602   Psycholinguistics
        16.830:637   Seminar in Cognition: Digital Biomarkers for Brain Sciences
        [or Alternative Course Approved by DCT]

4. Open Electives
   a. Students are encouraged to consider other open electives - courses in any area of psychology or other disciplines (e.g., statistics, philosophy, additional research credits). These electives should be determined in consultation with advisor and DCT.

5. Professional Development
   a. Required attendance to monthly Clinical Grand Rounds (one Friday/month)
   b. Required attendance to Clinical Forums (once/semester)

   2.   Students are encouraged to consider other open electives - courses in any area of psychology or other disciplines (e.g., statistics, philosophy, additional research credits).

          Note: The DCT circulates a tentative schedule of course offerings each term for long-term planning, but this is subject to change. You can examine course offerings each semester using the on-line schedule of classes (look for courses under the following subjects: Psychology (830), Professional Psychology (820), and Clinical Psychology (821). Courses offered by GSAPP are open to clinical Ph.D. students, but GSAPP students are given preference. A special permission number is required for registration for some GSAPP courses (check with Silvia Krieger - kriegs@gsapp.rutgers.edu).

   3.   Sample Course sequencing (5 Years)

          The following distribution of courses is for students with a Teaching Assistantship or Graduate Assistantship. Note that students supported by a TA cannot pursue more than 24 credits in an academic year (including the summer), excluding TA/GA E-credits. A total of 6 Research in Psychology credits are needed by the time students defend their master's thesis. A total of 24 Research in Psychology credits are needed by the time students plan to leave for internship. A minimum of 9 credits (including e-credits) are needed to maintain full-time student status each semester. Students on internship must remain continuously enrolled (typically for one credit per semester) until all degree requirements, including internship, have been completed.

          Although students may be able to complete the program in a shorter timeframe, we faculty recommend a 5-year course of study in most cases, as this affords more time to develop a program of research and develop the clinical skills needed to match well to

internship and post-doctoral fellowship positions.

5-Year Model Course Sequence

Notes: All of the listed courses are required, unless noted as "*Optional*". When a course title is underlined, it indicates that the course must be taken when listed as part of pre-set course sequence.

YEAR 1	
Fall	
Research Design & Analysis I	3 credits
Adult Descriptive and Experimental Psychopathology	3 credits
Strategies in Cognitive Behavior Therapy	3 credits
GSAPP Clinic Practicum	0.5 credits
TA/GA Support	E6 credits
(Note: if Fellowship support, register for Graduate Fellowship)	0 credits
Semester Total Credits (including E) [A]	15.5 credits
Spring	
Research Design & Analysis II	3 credits
Cognitive Assessment (GSAPP)	3 credits
Theory and Practice of CBT I	3 credits
GSAPP Clinic Practicum	0.5 credits
TA/GA Support	E6 credits
(Iif Fellowship support, register for Graduate Fellowship)	0 credits
Semester Total Credits (including E) [A]	15.5 credits
Summer	
Research in Psychology [B]	3 credits
Learning Disorders	3 credits
Yearly Total Course (not including E) Credits [C]	**25 credits**
YEAR 2	
Fall	
Proseminar I (Supervision/Consultation)	3 credits
Ethics I	1.5 credits
GSAPP Clinic Practicum	0.5 credits
Theory and Practice of CBT II	3 credits
TA/GA Support	E6 credits
(If Fellowship support, register for Graduate Fellowship)	0 credits
Semester Total Credits (including E) [A]	14 credits
Spring	
Proseminar II (Supervision/Consultation)	3 credits
Ethics II	1.5 credits
GSAPP Clinic Practicum	0.5 credits
Diversity *OR* Child Psychopathology	3 credits
TA/GA Support	E6 credits
(If Fellowship support, register for Graduate Fellowship)	0 credits
Semester Total Credits (including E) [A]	14 credits
Summer [D]	
Research in Psychology [B]	6 credits
Yearly Total Course (not including E) Credits [C]	**22 credits**

YEAR 3	
Fall	
Practicum in Clinical Psych I [E]	3 credits
Motivation & Emotion *OR* Cognitive Processes	3 credits
Advanced Interventions Elective	3 credits
TA/GA Support	E6 credits
(If Fellowship support, register for Graduate Fellowship)	0 credits
Semester Total Credits (including E) [A]	15 credits
Spring	
Practicum in Clinical Psych II [E]	3 credits
Diversity *OR* Child Psychopathology	3 credits
Advanced Science Elective #1 (Bio-Social-Cog)	3 credits
TA/GA Support	E6 credits
(If Fellowship support, register for Graduate Fellowship)	0 credits
Semester Total Credits (including E) [A]	15 credits
Summer [D]	
Research in Psychology [B]	6 credits
Yearly Total Course (not including E) Credits [C]	**24 credits**

YEAR 4	
Fall	
Practicum in Clinical Psych III [E]	3 credits
Motivation & Emotion *OR* Cognitive Processes	3 credits
Advanced Stats/Methods Elective	3 credits
TA/GA Support	E6 credits
(If Fellowship support, register for Graduate Fellowship)	0 credits
Semester Total Credits (including E) [A]	15 credits
Spring	
Practicum in Clinical Psych IV [E]	3 credits
Psychopharmacology	3 credits
Advanced Science Elective #2 (Bio-Social-Cog)	3 credits
TA/GA Support	E6 credits
(If Fellowship support, register for Graduate Fellowship)	0 credits
Semester Total Credits (including E) [A]	15 credits
Summer [D]	
Research in Psychology [B]	6 credits
Yearly Total Course (not including E) Credits [C]	**24 credits**

YEAR 5	
Fall	
Practicum in Clinical Psych IV [E] *(Optional)*	3 credits
History and Systems	3 credits
Open Elective *(Optional)*	3 credits
TA/GA Support	E6 credits
(Note: if Fellowship support, register for Graduate Fellowship and 3 Research credits)	3 credits
Semester Total Credits (including E) [A]	15 credits
Spring	
Practicum in Clinical Psych IV [E] *(Optional)*	3 credits

Research in Psychology [B]	3 credits
Open Elective *(Optional)*	3 credits
TA/GA Support	E6 credits
(Note: if Fellowship support, register for Graduate Fellowship and 3 Research credits)	3 credits
Semester Total Credits (including E) [A]	15 credits
Yearly Total Course Credits (not including E) [C]	**18 credits**
Cumulative Total Course Credits (not including E)	113 credits

[A] Total credits for a given semester, including TA/GA-related E credits, cannot exceed 15.5. Taking more than 15.5 credits requires special permission from the graduate school. Such permission is not granted routinely.

[B] You must earn 6 credits in Research in Psychology before your master's degree can be conferred, so you must earn these credits by the fall of your third year. You must earn 18 more Research in Psychology credits (for 24 total) before you leave for internship.

[C] You cannot enroll for more than 24 course credits (including Practicum and Research in Psychology, but excluding TA-related E credits) in a given academic year (September through August) unless you or your advisor are willing to pay tuition for additional credits. *The exception is in Year 1.* Submission of a tuition-remission form is required at the beginning of each academic year and summer term.

[D] It is possible to take up to 6 credits in the summer, as long as you do not exceed the 24-credit course limit that year.

[E] Although it is possible to register for 1-3 credits of Practicum, we recommend enrolling for 3 credits in most instances. You may choose to enroll for fewer than 3 credits of Practicum if your course schedule is too full to permit registration for 3 Practicum credits while also staying within maximum credit loads recommended for each semester and each year. It is possible to complete required courses without having to reduce Practicum credits in most semesters, and we discourage you from exceeding your course credit limits unless necessary. Practicum is optional in year 5 of the program. All decisions should be made in consultation with your Advisor and the DCT.

B.   **Master of Science Degree**

1.   Requirements for the MS
   a.   30 graduate credits, 6 of which must be research credits
   b.   Completion of Master's thesis

2.   Time Limits for the Master's Degree
   a.   Normal Minimum - 1 year
   b.   Normal Maximum - end of 5th semester, as noted in the Graduate School and Departmental Regulations; permission for additional time must be requested from the Graduate School via the Vice Chair for Graduate Studies.
   c.   The policy regarding extensions beyond the five-semester time limit for the Master's Thesis: A six month extension will be granted if the rationale stated on the written request is acceptable. No meeting is required with the student. This six-month extension will be given only once. If the Master's Thesis is not completed at the end of this period, the student will be recommended for termination.

C.   **The Master's Thesis**

The purpose of the master's thesis is to help develop students' research and scholarship skills. The Clinical Area wants students to use the writing of the thesis to build skills needed for publication. These skills include focused conceptualization and concise writing. Accordingly, with the thesis committee, the student will determine a potential target peer reviewed journal for the thesis, determine the potential length of an

appropriate article (between 25-35 double spaced pages), and write up the thesis in the appropriate format. Additional material, which can include a more detailed introduction/conceptual/ literature review section, results tables, and discussion considerations, as well as specific instruments and detailed psychometric information about them, would be placed in Appendices. In general, either the master's thesis or the dissertation, but not both, may involve secondary analyses of existing data without collection of new data (as an independent project or as part of a collaborative project, such as one led by   your advisor).

1. A formal proposal for the thesis research must be presented to and approved by the student's committee. We require both a formal proposal meeting prior to the master's thesis, and a meeting to defend the thesis. All members of the committee must approve both the proposal and the final defense. The main purpose of the proposal meeting is to provide clarity and common understanding among committee members and the student regarding the scope, focus, and journal audience for the thesis. When circumstances preclude a full committee meeting to approve the proposal, an alternative can be acceptable with the approval of the DCT. The deadline for successfully defending this proposal is the end of the 3rd semester.

2. All research that involves human subjects must be submitted to and approved by the Rutgers Institutional Review Board (IRB) prior to the collection or analysis of any data. Even projects that use existing data must be submitted to the IRB for prior approval. Requirements, deadlines, and all forms are available at the website, https://orra.rutgers.edu/formsandtemplatesirb. All students must complete the Human Subjects Certification Program (HSCP) and successfully pass the HSCP exam before their research proposal will be approved by the IRB. Students are encouraged to take the on-line course during their first semester. Instructions to access the on-line course and exam can be found at the web site of the Office of Research and Sponsored Programs/IRB https://orra.rutgers.edu/citi. A copy of the letter of confirmation upon successful completion should be shared with your research advisor.

3. Timing of the thesis:
    a. Students should begin planning for their thesis research during the first year of graduate study. An ideal time to complete the proposal is during the summer between the first and second year. The Graduate School and Departmental Regulations state that the deadline for defending the proposal is the end of the 3rd semester.
    b. Students are strongly encouraged to complete their thesis research during the second year of graduate study and the deadline for completing the thesis is the end of the 5th semester.

4. Procedures and Regulations governing the Master's Thesis
    a. Application for Admission to Candidacy
        Be sure that the original final transcript from your undergraduate school is on file in the Psychology Department, Room 207, Busch Campus by the end of your first semester.
    b. Master's Committee:
        i. The Committee normally consists of a Chairperson and two members. They must all be either members or associate members of the Graduate Faculty, according to the most current list of members maintained by the Psychology Department (accessible to faculty via the SAS Psychology Dept Sakai site and maintained by Donna Tomaselli, Senior Department Administrator). Students may nominate one additional member of the thesis committee who is not a member of the Graduate Faculty of Psychology. In this case, however, there must still

be three members of the Graduate Faculty on the Committee, bringing the total number of members to four. The student must submit a current curriculum vita of that person and a brief statement on the reason this person would be useful on the Committee. All outside Committee members must satisfy the criteria for associate membership on our Graduate Faculty. If fewer than two members of the Committee are Psychology Department faculty, the chairperson must write a memo explaining why departmental faculty are not appropriate, and why selected committee members are appropriate and this must be approved by the DCT and Vice Chair for Graduate Studies.

  ii. Complete the Master's Thesis Committee form prior to beginning your research. This form can be obtained from the Graduate Psychology Office, Psychology Building, Busch Campus, or on line (https://gsnb.rutgers.edu/resources/graduate-student-forms). The completion of the form includes obtaining the concurrence and signature (to indicate that concurrence) of the Clinical Area Coordinator. The Graduate Director (Department Chair) will notify you of the approval of your Committee. The form is then filed in the office of the Vice Chair for Graduate Studies.

 c. Final Examination for M.S. Degree

  i. The clinical area requires an oral defense of the thesis. Prior to the defense, all members of the thesis committee must be given a written or electronic copy of the thesis for review and approval. In addition, title of the thesis and date and time of the defense must be announced at least two weeks prior to the defense. This information must be submitted to Anne to allow for posting at least two weeks prior to the scheduled defense. Committee members must be given sufficient time to review the thesis (usually two weeks), and the student should anticipate feedback and recommendations for revisions from committee members at the defense.   All Committee members must approve the thesis before the thesis is considered completed.

  ii. The thesis defense affords the faculty an opportunity to focus on the students' in depth understanding of the theories, mechanisms, methodology, research design, statistics, and/or research, theory, and practice implications of the research conducted. Thesis presentations should be limited to the typical 20 minute period of time given to research presentations at conferences, allowing more time for extended conversations about students' understanding of what they have done and an assessment of their ability to articulate that understanding.

  iii. Obtain an Application for Admission to Candidacy form and submit it to the Chairperson of your Committee. (Be sure that you have completed at least 24 course credits and 6 research credits required for the Master's Degree.)

  iv. The Chairperson will record the results of the final examination on this form signing Part II - A and C, or B. The "final examination" is the final decision of the Master's Committee to accept or reject the thesis. Final acceptance or rejection of the thesis may be based solely on an evaluation of the written thesis, or an evaluation of both the written thesis and an oral defense of the thesis. It is then your responsibility to have it signed by the other members of your Committee.

  v. The Thesis title, Part II-C, must also be completed. Return to the Senior Graduate Administrator, Anne Sokolowski, for processing prior to obtaining the Graduate Director's signature. Completed forms must be filed with the Graduate School no later than three weeks before Commencement (no later than announced deadlines for October and

January).

    d.   Submission of the thesis to the Graduate School is done electronically. Your thesis must be converted to a PDF file and then submitted online https://etd.libraries.rutgers.edu/login.php. Additionally, submission of one hard copy of the Master's thesis is required by the Department. A booklet entitled "Style Guide for Thesis and Dissertation Preparation" may be obtained from Room 203, Psychology Building, Busch Campus. You are required to submit an abstract not exceeding 350 words. The style guide for the School of Graduate Studies can be found here: https://gsnb.rutgers.edu/academics/master%E2%80%99s-degree-thesis-checklist

    e.   A Diploma Application must be filled out. This online diploma application is available at: http://www.ugadmissions.rutgers.edu/Diploma/Apply.aspx.

5.   Deadline Dates (Listed in Bulletin of the Graduate School):
The exact deadline date changes by a day or so each semester so students should double check with the Senior Graduate Administrator, Anne Sokolowski, for exact dates. Also see http://gsnb.rutgers.edu/academics/how-apply-degrees.

D.   Qualifying Examination

1.   The candidate selects his or her Qualifying Committee Chairperson. The Chairperson of this four-person committee must be a full member of the Graduate Faculty in Psychology. The remaining three persons may be either members or associate members of the Graduate Faculty (the current list is maintained by Senior Administrator Candace Green). There are provisions for appointing members to this Committee from outside of the Psychology Graduate Faculty, where this would reflect the interdisciplinary character of the student's program. It is the responsibility of the student, in collaboration with the Committee Chairperson, to select the three additional members of this Committee. It is possible for the same person to chair both the student's Dissertation Committee and Qualifying Examination Committee, but the Committee should not overlap substantially with either the Master's Thesis or anticipated Dissertation Committee.

2.   The student then meets with the Chairperson of this Committee to generate five topic areas. The Chairperson will consult with the other three Committee members as indicated. Together, the student and Committee Chairperson will select five topics for further thinking and formalize exact questions. The student should then distribute questions to the other Qualifying Examination Committee members for their suggestions and approval. Suggested changes, if any, will be referred back to the Committee Chairperson. The following topic areas must be addressed across the proposed questions, written responses, and oral examination:

    a) **psychopathology**, including knowledge of major criteria for psychiatric diagnoses, course and prognosis, associated features and specified relevant treatment approaches.

    b) **assessment**, including knowledge of major assessment approaches and methods, broad knowledge of assessment methodology, & limitations to psychological assessment.

    c) **intervention**, including knowledge of relevant evidence based therapeutic approaches, dissemination, & barriers to treatment access.

    d) **psychometrics**, including knowledge of measure development, reliability, validity, utility, limitations and statistical approaches for determining psychometrics, reliability, & predictive validity.

    e) **individual differences and racial/cultural diversity**, including knowledge of one's personal/cultural history attitudes & biases, knowledge of diversity evidence base in professional clinical activities, & integration of awareness and knowledge of cultural differences in the conduct of professional responsibilities.

3.   All students are required to integrate diversity, cultural, and individual difference

considerations into their qualifying examination questions, as appropriate. For example, when examining the efficacy of a treatment approach, literature reviewed should specify the cultural and ethnic groups for which a treatment has demonstrated effectiveness, as well as efficacy in the context of other relevant factors (e.g., gender, SES, family composition, religion, sexual orientation).

4. Conceptual formulations are primary to the qualifying examinations topics, although clinical applications of these formulations are usually germane. Some overlap between thesis and dissertation topics and the qualifying examination topics is acceptable, but exact duplication is to be avoided. It is advisable to avoid topics that are either too broad, on the one hand, or so under-investigated that no literature is available, on the other. These topics may require modification as preparation for Qualifying Examination proceeds. In this event, the student will check and confirm with the Committee Chairperson.

5. After obtaining approval of the five questions from all members of the Committee, the student is expected to prepare a Reference List for all five topics. The primary purpose of this list is to demonstrate broad mastery of the essential elements involved in a scholarly review of each topic. The student is not expected to produce an exhaustive, all-encompassing bibliography. In fact, the choices are, in themselves, a reflection of the student's knowledge and professional acumen. In preparing the list the student may and should consult with the Committee Chairperson and other Committee members. This list should be distributed to all Committee members at least five weeks prior to the date of the examination. This will give the Committee members time to suggest additions or other changes and the student time to react accordingly. The student should contact each Committee member for approval of the reading lists.

6. It is the student's responsibility to arrange a mutually convenient date and time for the Qualifying Examination, indicating to the Committee members the nature of the five topics. Committee members should explicitly be advised that at least two hours of their time will be required.

7. Exactly two weeks prior to the date of the oral qualifying examination, the student contacts the Qualifying Committee Chairperson to determine which two of the five topics are to be prepared in essay form. It is the responsibility of the Chairperson to give considerable thought to this choice beforehand, discussing the matter with his or her colleagues in the process.

8. Exactly one week prior to the date of the oral examination, the student presents copies of his or her two essays to all Committee members. These essays, double-spaced and referenced in APA style, should be highly readable, scholarly productions that reflect mastery of the subject, awareness of lacunae and unresolved issues, and organizational ability. While the optimum length is a matter for the student to decide, it is expected that each of the papers will range between 20 and 30 pages in length, exclusive of references. It is essential that the essays properly credit sources used. Students may cite sources beyond their approved reference list if they are relevant (e.g., references to methodological or conceptual approaches). The essays should also be polished and complete drafts of a scholarly analysis of the topic at hand.

9. The student may consult with the Committee, and particularly the Committee Chairperson, extensively about the formulation of the five topics and the reading lists (typically 15-20 articles per topic). Students may also consult with the Committee Chairperson about strategies to analyze and present material in essays (i.e., students can discuss issues they are experiencing in developing outlines addressing each topic with their advisors). This consultation should be limited to foster student independence and the final decisions about how to organize and present the material must be the student's. The essays must be prepared independently by the student without consultation with others during the one-week writing period.

10. At the oral Qualifying Examination, the student should be prepared to discuss and expand upon either or both of these papers, any of the other three subject areas or anything within the domain of clinical psychology that is broadly relevant to the five topics. The student is expected to be knowledgeable about most questions that he or she is asked. The student

should bring to the Qualifying Examination venue a copy of all necessary forms for signing by the Committee members. The Qualifying Committee then uses the **Qualifying Exams – Written and Oral Defense Faculty Ratings Checklist** which involves faculty assessment across all required areas of knowledge. The committee then makes a pass/fail decision at the end of the examination. If there is an unsatisfactory performance, the Committee can either recommend termination or remediation followed by re-examination. In either case, the entire Clinical faculty reviews the recommendation and makes the final decision.

11. Procedural aspects of the qualifying examination:
   a. Complete the Qualifying Examination Committee form. A copy of this form is attached or may be obtained in Room 203, Psychology Department, Busch Campus. Completion of the form includes obtaining the concurrence and signature (to indicate the concurrence) of the Clinical Area Coordinator. You will be notified of the approval of your Committee by the Graduate Director. The form is then filed in the Office of the Vice Chair for Graduate Studies.
   b. Time limits for passing the Qualifying Examination are no later than the end of the 7th semester after a student registers in Graduate School and at least two semesters before the final oral examination for the Ph.D. degree, in accordance with Graduate School and Departmental Regulations.
   c. Application for Admission to Candidacy for the Ph.D. Degree:
      i. Obtain the Admission to Candidacy form in Room 203, Psychology Department, Busch Campus or https://gsnb.rutgers.edu/resources/graduate-student-forms.
      ii. Complete the face page and submit to the Chairperson of your Committee after taking the Qualifying Examination. The Chairperson of your Committee will record the results by signing A <u>or</u> B on page 2. It is then your responsibility to have it signed by the other members of your Committee.
      iii. Return to Senior Graduate Administrator Anne Sokolowski for processing prior to obtaining the Graduate Director's signature. The signed form must be hand-delivered to the Graduate School Office or you will not be admitted to Candidacy for the Ph.D. degree.
      iv. You must remain in registration until you receive your Ph.D. If you do not, you will be withdrawn from the Program.

12. The Qualifying Examination must be completed and passed before any Ph.D. dissertation credits are taken. This means that no student may formally commence work on his or her doctoral dissertation until this portion of the Qualifying Examination has been completed successfully. This includes holding a dissertation proposal defense. A dissertation proposal cannot be approved by a Committee until a student has passed the qualifying examination and been admitted to Ph.D. candidacy.

13. The Qualifying Examination must be completed at least 2 terms before completing the doctoral degree. The Ph.D. may be obtained a minimum of two and a maximum of 4 years after the Master's degree. The student must remain in continuous registration with the University, although the student may register for Matriculation Continued in any semester that the student is not working on the dissertation.

E.   The Doctor of Philosophy

1. Requirements for the Ph.D.
   a. 72 graduate credits, 24 of which must be research credits
   b. Completion of the Master's degree
   c. Completion of all course requirements
   d. Successful completion of the Qualifying Examination
   e. Completion of a one-year, full-time, approved clinical internship
   f. Completion of the doctoral dissertation

2. Time Limits for the Ph.D.
    a. Normal Minimum - 3 year
    b. Normal Maximum - 7 years; permission for additional time must be requested from the Graduate School via the Vice Chair for Graduate Studies. Extensions will be granted only for exceptional circumstances.
    c. The procedure for obtaining an extension on the time limits imposed upon the Qualifying Examination (7th semester), and the Ph.D. (seven years) has been revised. All such requests will receive an intensive review at a formal meeting attended by the student, the Committee Chair, the DCT, the Vice-Chair for Graduate Studies, and the Graduate Director. Only one extension per student will be approved by the Graduate Director.

F. The Doctoral Dissertation

1. The doctoral dissertation is expected to be an original empirical study, representing an independent research effort on the part of the student.
2. All research that involves human subjects must be submitted to and approved by the Rutgers IRB prior to the collection of any data. Even studies that use existing data must be submitted for prior approval. Requirements, deadlines, and all forms are available at the website, http://orsp.rutgers.edu/content/institutional-review-board-irb. All students must complete the Human Subjects Certification Program and successfully pass the HSCP exam before their research proposal will be approved by the IRB. Students are required to take the on-line course during their first semester. Instructions to access the on-line course and exam are at the ORSP web site https://orra.rutgers.edu/citi. A copy of the letter of confirmation upon successful completion should be shared with your research advisor.
3. A formal proposal for the dissertation research must be presented to and approved by the student's Committee after the student is admitted to Ph.D. Candidacy. A formal meeting of the Dissertation Committee is required for approval of the proposal, and all members of the committee must review and approve a written proposal.
4. The Clinical Area requires students to defend their dissertation proposal by October 15 in the year that students are applying for Internship. Students who do not defend their proposal (successfully) by this date will not be allowed to apply for internship unless they petition for and are granted a waiver to do so, in writing, approved by the clinical faculty, indicating the reason for the delay and a specific credible timeline that student, advisor, and committee have agreed upon. For those who received a waiver, proposals must be defended prior to the deadline for submitting internship rankings in order to be eligible to accept internships; those who remain for an extra year will have a low priority for departmental funding.
5. Procedures and Regulations governing the Doctoral Dissertation:
    a. Ph.D. Dissertation Committee
        i. Complete the Dissertation Committee Form prior to beginning your research. This form may be obtained in Room 203, Psychology Department, Busch Campus or below. The completion of the form includes the concurrence and signature (to indicate that concurrence) of the Clinical Area Coordinator. You will be notified of the approval of your Committee by the Graduate Director. The form is then filed in the Office of the Vice chair for Graduate Studies.
        ii. The Committee consists of four members: A Chairperson who must be a member of the Graduate Faculty and two persons who may be either members or associate members of the Graduate Faculty. If fewer than two members of the Committee are Psychology Department faculty, the Committee Chairperson must write a memo explaining why departmental faculty are not appropriate, and why selected committee

members are appropriate. The fourth member of the Committee must be an "outside" member, defined as: a member or associate member of the Graduate Faculty in a program other than Psychology, *or* a qualified person from outside Rutgers University. In this case, approval must be obtained from the Graduate Director. Your Chairperson must furnish a paragraph describing the qualification of the outside member, along with a curriculum vita and mailing address of the individual.

b. Final Examination

i. Complete area course requirements: It is your responsibility to make sure you have completed area course requirements and that you have 48 course credits and 24 research credits for the Ph.D. degree.

ii. Select a Defense Date: The date for the final defense must be cleared with your Area Coordinator. Since dissertation orals are public, the Graduate Psychology Office must be notified at least 2 weeks before the scheduled orals (date, time, place, and title of dissertation) so that notices can be sent to faculty and students.

iii. Submit Final Draft: Normally, the final draft of the doctoral dissertation is prepared by the student with the guidance of his/her advisor and then submitted to the remaining Dissertation Committee members at least three weeks prior to the date of the final defense. Students are allowed one retake of the doctoral defense. The Graduate School allows one dissenting vote on the doctoral defense. A booklet entitled "Thesis Form: Style Guide for Thesis Preparation" is available in Room 203, Psychology Department, Busch Campus. You are required to submit an abstract not exceeding 350 words.

iv. Prepare Candidacy Application: Obtain candidacy application from the Graduate School office (on which results of the Qualifying Examination were recorded). Submit to the Chairperson of your Committee. The Chairperson will record the results by signing Part II, A *or* B. It is then your responsibility to have it signed properly by your Committee.

v. Submit Candidacy Application: Return to Senior Graduate Administrator Anne Sokolowski for processing prior to obtaining the Graduate Director's signature. Completed forms must be filed with the Graduate School office no later than three weeks before commencement (no later than announced deadlines for October and January).

vi. Submit Final Dissertation: An electronic copy of the dissertation is submitted to the Graduate School, and one paper copy is given to the Psychology Department. Your dissertation must be converted to a PDF file and then submitted online at https://etd.libraries.rutgers.edu/login.php. Five copies of the title page (the original on 100% rag cotton paper) are requested, plus three copies of the Abstract. It is necessary to bring the dissertation (along with the candidacy form) to the Graduate Psychology Office for approval before submitting it to the Graduate School.

G. Practicum Training/Clinical Training Sequence

Clinical training is scheduled to provide increasing levels of clinical responsibility and to train students in empirically supported approaches to assessment and treatment. In the first year, students receive formal coursework in adult psychopathology, cognitive behavior therapy, and clinic and crisis-management procedures to prepare them for later practicum experiences. Within their first three years of study, students complete an introductory course in clinical ethics. Clinical training in the program is provided in a standardized, incremental, and graded manner for the first 3 years of training. During the first year students are expected to register for 0.5 credits in the GSAPP clinic each semester. In the fall of the first year,

students receive a multi-part orientation to the GSAPP Psychological Clinic, including an overview of ethical considerations, procedures for managing risk of self-harm, crisis management and other emergencies, HIPAA rules, and details on clinic operations. Students also attend weekly case conferences as a part of clinic activities. For the remainder of the first year, students receive training on structured and unstructured clinical interviewing, and enter the rotation to complete new case intakes for the GSAPP clinic. These intakes provide the students with experience taking psychological histories, assessing clinical symptoms, and determining desired treatment outcomes and goals for the client. On average, first year students will conduct 1-2 intakes per month. Initial clinical experiences may also be arranged through the student's research mentor, and are typically geared to the student's level of experience and the mentor's target populations.

In the second year, students are required to register for .5 credits per semester in the GSAPP clinic. This is to ensure that students are receiving a structured and graded introduction to clinical practice. The second year in the GSAPP clinic is more intensive than the first. Second year students are expected to see a minimum of one to two cases in the Psychological Clinic at any given time, though in practice it is almost always more than one, and to complete one comprehensive assessment per semester. Students are provided with intensive clinical supervision, one hour of supervision for each hour of therapy, from faculty or community-based supervisors. Students also attend weekly case conferences in the clinic.

During the third year, training for students becomes more intensive and/or specialized. In the third year, students are required to complete a one year practicum, but this practicum can be tailored to individual interests. Students can select from the following options: (1) To continue another year in the GSAPP Clinic with the same expectations outlined during Year 2 (though caseloads are typically higher), (2) by seeing cases in a specialty clinic operating within the Psychological Clinic (such as the Tourettes Clinic, the Youth, Anxiety, and Depression Clinic, Anxiety Disorders Clinic, Women Helping Women, or the Dialectical Behavior Therapy Clinic), or (3) with the permission of the DCT a student may enroll in an external practicum in the local or extended area to pursue further specialized training. The program specifies that it does not wish students to engage in internal or external practicums that require more than cumulative 16 hours per week, save DCT permission in rare circumstances.

In fourth and fifth years, students typically participate in additional internal Rutgers-based or off-campus clinical practicum. There is a broad range of practicum training available to clinical students. Practica are coordinated by the DCT.

When students are in an on or off-campus practicum, they must develop a practicum contract with their supervisor and submit this for approval by the DCT. This contract lays out the goals the student sets for the year, describes the kind of work to be done, and serves as an agreement regarding supervision. This contract is used as the basis for the evaluation. These contracts and evaluations must be completed electronically with the link sent out by the DCT each semester, or provided in hard copy form to Anne Sokolowski.

Students should carefully record all clinical hours from the beginning of their training. Direct client contact for assessment or treatment, telephone contacts, case conferences, individual and group supervision, scoring of test protocols, and time devoted to maintaining clinical records and writing reports should all be recorded to assist in the internship application and licensure process. All students in APPIC graduate programs like ours have access to MyPsychTrack (http://mypsychtrack.com/) to track hours for internship at no cost using a coupon code provided by the Director of Clinical Training. Alternatively, students may invest in the Time2Track program: http://time2track.com/ (the cost is $52.20 per year) which is compatible with the APPI internship application system. Students are encouraged to use one of these programs from the beginning of first year. For information about what clinical hours to track for internship applications, see here: https://portal.appicas.org/applicants2012/instruction/ins_exp_intervention.htm

Students are also required to submit a clinical evaluation form to their supervisors for both individual cases and for practica. The evaluation form asks for feedback on the key clinical competencies that the program seeks to impart to students. Typically, we request that supervisors share these forms with students and then

submit them to our online evaluation system with a link provided by the DCT each semeser, as well as to the students' advisors, in mid-December and mid-May so that this information can be part of the semi-annual evaluations of student progress that take place in January and June of each year. As noted, the new electronic system may assist with meeting these timelines.

Each semester, students are required to attend a monthly Grand Rounds in which faculty, invited speakers, and/or students present clinical cases or cover clinical issues, approaches, or techniques. The Grand Rounds are typically held Fridays from 12:15 to 1:45 PM. Grand Rounds are designed to supplement clinical training and bring all students together to discuss clinical practice and research-service integration.

Model training sequences are shown below. A general outline of a five-year model are provided, followed by a detailed sample of activities and hour accrual for a student in residence five years. These are examples. You and your advisors will devise a training plan tailored to your needs and goals.

General Model Clinical Training Sequence

	Clinical Training Activities
Year 1	Required .5 Credit/Semester Enrollment in GSAPP Clinic; Completion of Orientation, Procedural and Ethical Training; Completion of 1-2 intakes/month
Year 2	Required .5 credit enrollment in GSAPP Clinic; See 1-2 clients minimum through the GSAPP clinic and complete at least 1 assessment/semester as a part of the Assessment Team
Year 3	Required .5 credit enrollment in GSAPP Clinic OR 3 credit enrollment in DCT approved external practicum (8-16 hrs)
Year 4	Optional: .5 credit enrollment in GSAPP Clinic OR DCT approved external practicum (16 hrs)
Year 5	Optional: .5 credit enrollment in GSAPP Clinic OR DCT approved external practicum (16 hrs)

*We do not encourage students to spend more than 16 hours per week in clinical training. You must speak to your Advisor and the DCT before applying for or committing to clinical training that will require more than 16 hours per week. Students may also elect to enroll in an external practicum during Year 3 pending approval by their primary mentor AND the DCT.

Sample Activities and Hour Accrual for a 5 Year Model

Year	Activity	Hours	Total Hours
1*	GSAPP Psychology Clinic	1 hr clinical intake and reporting/week for 40 weeks	40
		1 hr training & supervision/week for 45 weeks	45
		1 hr documentation /week for 40 weeks	40
	Clinical research with mentor	2 hrs service delivery/week for 40 weeks	80
		1 hr training &supervision/week for 45 weeks	45
		1 hr preparation & documentation /week for 40 weeks	40
2	GSAPP Clinic	2 hrs service delivery/week for 40 weeks	80
		2 hrs training/supervision per week for 45 weeks	90
		2 hrs preparation & documentation /week for 45 weeks	90
	Assessment team	2 assessments each with:	
		3 hrs testing	6
		1 hr supervision	2

		4 hrs report writing	8
3	GSAPP Clinic	2 hr service delivery/week for 40 weeks	80
		2 hr training/supervision per week for 45 weeks	90
		1 hrs preparation & documentation /week for 40 weeks	40
	Assessment team	2 assessments each with:	
		3 hrs testing	6
		1 hr supervision	2
		4 hrs report writing	8
	Practicum	4 hrs service delivery/week for 45 weeks	180
		3 hrs training & supervision/week for 45 weeks	135
		4 hrs preparation & documentation/week for 45 weeks	180
4	Assessment team	2 assessments each with:	
		3 hrs testing	6
		1 hr supervision	2
		4 hrs report writing	8
	Practicum or GSAPP Clinic	4 hrs service delivery/week for 45 weeks	180
		3 hrs training & supervision/week for 45 weeks	135
		4 hrs preparation & documentation/week for 45 weeks	130
5	Assessment team	2 assessments each with:	
		3 hrs testing	6
		1 hr supervision	2
		4 hrs report writing	8
	Practicum or GSAPP Clinic	2 hrs service delivery/week for 45 weeks	90
		1 hr training & supervision/week for 45 weeks	45
		2 hrs preparation & documentation/week for 45 weeks	90
Totals: Service Delivery=754, Supervision=593, Support=592; Grand Total=2,039 (does not include didactics)			

* Clinical work in the first year can also depend on your mentor's program of clinical research. You may be involved in conducting clinical interviews or administering assessments (including symptom measures or other scales). Students have the option of continuing to enroll in the GSAPP Clinic for further experience in Years 4 & 5.

Note: The estimates above are conservative and assume a high number of no shows (e.g., estimates are based on only 40-45 weeks out of the year and assume only 4 hours per week of contact time in an external practicum. As many practica now require two days per week, this conservatively estimates that only 25% of time at practicum is spent in service delivery.

H.   Clinical Internship

1. The clinical internship is one year of full-time clinical training designed to provide the student with intensive clinical experience under supervision.
2. Completion of the clinical internship is a requirement for completion of the doctoral degree. Degree requirements are not considered met without certification from the Director of the internship that the student has met all internship requirements satisfactorily.
3. Students are encouraged to consult closely with their research mentor or clinical mentor and the Clinical Area Coordinator in selecting sites to apply to for internship training. Students should select internship sites based on training needs, and the degree to which the internship fits into the student's long-term career path. Except under extraordinary circumstances, students should apply only to internships approved by the American Psychological Association.
4. Rules and regulations for the internship application, interview, and selection process are defined by the Association of Psychology Postdoctoral and Internship Centers (APPIC). Students are expected to know and abide by these rules and regulations. Because the procedures governing the internship selection process change each year, they are not included

in the student handbook. Students should access the APPIC website (http://www.appic.org) regularly to obtain current information.

5. Requirements for application to clinical internships:
    a. Completion of the Master of Science degree
    b. Completion of the Qualifying Examination
    c. Written certification to the Clinical Area Coordinator by the research mentor that the student is making acceptable progress on the doctoral dissertation and has successfully defended his/her dissertation proposal prior to applying for internship (by October 15), unless the student obtains a waiver of this requirement.
    d. Written certification from the Director of the GSAPP Psychological Clinic that all clinic paperwork is current and complete.
    e. Successful completion of second and third year clinical practica and affirmation by the Clinical Faculty in our semi-annual reviews that the student is clinically "ready" for internship.
6. Additional requirement for submitting the matching list for internship: Students who were granted a waiver of the requirement of successfully defending a dissertation proposal defense prior to October 15 must have successfully defended their dissertation proposal prior to submitting an internship matching list.

I.   Graduation

1. Students must meet all program requirements and complete their clinical internship prior to graduation.
2. Although many students wish to receive their diploma at the annual University graduation ceremony, which is held only in May, the American Psychological Association requires that all degree requirements, including the clinical internship, must be completed prior to the awarding of the doctoral degree. Students may instead participate in the graduation ceremony the May following completion of internship.

VIII.   Student Involvement

A.   Clinical Forums and Grand Rounds

1. Clinical Forums and Grand Rounds provide an opportunity for all students in the program to meet on a regular basis, and are used to address several key areas of program content. The DCT chairs the Forums and Grand Rounds, which are a required program activity.
    a. The Clinical Forum is a professional development series that meets three times per year. Topics are primarily devoted to professional development and research. Frequent topics cover clinical and research training planning, internship preparation, and career planning and preparation. Forums includes separate tracks for some sessions so material can be geared to students' developmental levels (e.g., first-year students participate in break-out sessions devoted to preparation for the start of clinical work and completing master's projects while fourth-year students participate in break-out sessions devoted to dissertation and internship preparation). The final forum in the spring of each year focuses on student research presentations with faculty discussants. This facilitates collaborations among students and faculty and increases student-faculty interaction.
    b. Clinical Grand Rounds occur monthly during the academic year on Fridays from 12:15 to 1:45 PM, typically. Clinical Grand Rounds focus on clinical practice issues and involve both didactic presentations and interactive discussion of issues in the diagnosis and treatment of mental health problems and the promotion of mental and physical health in diverse populations. Other topics can include professional development, research discussions, ethical considerations, and working with diverse populations and in diverse service provision settings. Rounds are required for all students throughout the duration in the program, and students should schedule

research activities and clinical practica such that they can attend.

B.   Colloquia

1. Departmental colloquia offer unique opportunities for students to learn from leading researchers in psychology as well as up-and-coming young psychologists being considered for positions in the department. Students are strongly encouraged to attend departmental colloquia and job talks. Announcements about colloquia are posted on the departmental website and bulletin boards.

C.   Clinical Area Committees

1. The clinical program maintains several standing student committees. Each student is expected to serve on at least one committee. These committees provide opportunities for students to contribute to the development and quality of their own training. Committees include: Student/Alumni Evaluation; Program Review/Student Handbook; Admissions/Welcoming; New Student /Housing; Diversity; Forum and Grand Rounds Planning/GSA; Clinic Advisory Committee; and Area Representatives.
2. On occasion a CBT Training Committee will be formed for routine program evaluation. The charge of this committee is to review our courses, course sequences, clinic opportunities, mentor/lab training opportunities, practicum/externships and sequences, qualifying examination, and internships to determine how well they conform with the recommendations of The Inter-Organizational Task Force on Cognitive and Behavioral Psychology, Doctoral Education Sponsored by the Association for Behavioral and Cognitive Therapies, and to make recommendations for bringing the CBT training in both programs in greater compliance with these recommendations. Students serve on this committee. The next CBT Training committee evaluation is expected to occur during the 2022-2023 academic year.
3. Other committees are convened as needed, some regularly. These include Admissions and Faculty Search.

IX.   Advisement and Evaluation Process

A.   Advisement and Mentoring

1. Prior to or upon arrival at Rutgers, incoming students are matched with a research mentor. Students typically have been admitted based on a close alignment of research interests with those of a core faculty member, so this assignment is based on mutual interest. Although most students work with the same mentor throughout, students have the option of changing mentors as they progress through the program, and some students either change mentors or work with more than one faculty member concurrently. In all cases, however, the student has a close, apprenticeship relationship with a faculty member who serves as the student's primary advisor to guide the student in decisions about courses, research, and clinical experiences, and who is aware of the student's progress and difficulties. Students whose primary research mentor is a nonclinical faculty member should also select a clinical faculty member to serve as a clinical mentor/advisor for purposes of career planning and mentoring around issues of professional behavior and development.
2. From the beginning of the first semester, the student works actively with the research mentor. The formal commitment to the research mentor is a minimum of eight hours per week, but most students spend more than this in research activities.
3. Students should engage in a variety of professional activities beyond research, clinical, and course requirements. Of foremost importance is publication of empirical research in peer-reviewed journals. Additional important activities include collaboration on scholarly chapters and presentation of research at meetings of professional societies. Students should also join professional societies most closely allied with their specific areas of scholarship.

Development of a plan for publication, presentation, and involvement in professional societies should be accomplished in consultation with the student's primary mentor.

B.   Performance Evaluations and Feedback

1. Our Clinical Ph.D. program is guided by a number of objectives, designed to prepare our students for success as future clinical scientist professionals in a wide range of settings. In our program structure, the Mentor/Advisor has the primary role of working with students to monitor progress in attaining these objectives, supported by the DCT as well as the rest of the faculty and staff. To facilitate that process, we provide a Faculty-Student Advising Tool available at the Resources/Forms section of the Clinical Psychology site on Sakai (requires login with Rutgers netid and password) and from the DCT. This is a table used to track student progress toward core competencies and our training objectives. This is a cumulative record of student accomplishment that is updated every semester. Students record accomplishments and training experiences under each training objective and the Advisor rates student progress toward each objective in the document.

2. Assessment of student progress is done formally twice a year, at the end of each semester, after course grades and written clinical supervisors' evaluations are available. Prior to these formal meetings, students meet with their advisors at least once during the semester to review progress in the program and to review and complete the Faculty/Student Advising Tool. Clinical evaluations are available to the Clinical Area Coordinator and all research mentors and are reviewed prior to bi-annual student evaluation faculty meetings. All Advisors attend these student evaluation meetings or provide input to the Clinical Area Coordinator prior to the meeting. After each meeting, students receive written feedback on the results of these evaluations, commending their accomplishments, and identifying any problems. A particular effort is made to identify students who may be having academic, clinical or personal difficulties in the program. Faculty discussions may result in a decision to meet with the student to provide feedback, to take a specific action such as requiring remedial action, or to continue to track the student's progress before acting. The faculty member designated to meet with the student may be the Advisor, the DCT, or another member of the faculty who is in an especially good position to share information or talk with the student. In addition to these formal evaluations, any faculty member may raise a concern or question about a student at any faculty meeting.

C.   Remediation

1. It is the intention of the faculty that each student admitted to the program will progress through the program to the successful completion of their doctoral degree. To that end, if a student is having difficulties in some aspect of their program, the faculty will consider remedial efforts to enable the student to complete the program.

2. Among the special methods we use to help students remediate deficits are the development of contracts concerning timetables for completion of work, assignment to special practicum settings where we have an especially close oversight opportunity, requiring the carrying of additional cases through the Psychological Clinic to monitor clinical progress, the granting of a leave of absence, and/or recommending personal therapy.

D.   Retention/Termination

Given our high degree of admissions selectivity, it is rare that a student cannot meet our academic requirements, but at times students experience personal issues or changes in life circumstances that interfere with their ability to progress through the program. If our remedial efforts fail, the clinical faculty will review the possibility of termination from the program. Students may be recommended for termination based on inadequate academic performance, ethical violations, violations of the University Policy on Academic Integrity (see http://catalogs.rutgers.edu/generated/nb-grad_current/pg79.html) or violations of the University Code of Student Conduct (see http://catalogs.rutgers.edu/generated/nb-

grad_current/pg82.html). A motion to recommend termination is voted upon by the Clinical Area Faculty. It is then voted upon by the entire Graduate Faculty in Psychology. The Graduate Director then makes a formal recommendation for termination to the Dean of the Graduate School. Note that only two students have been terminated from the clinical program in the past 20 years.

E   Complaints/Grievances

In accordance with the APA Standards of Accreditation for Health Service Psychology, our program maintains a record of all formal complaints and grievances filed against us. The file containing these grievances is maintained by the Senior Graduate Administrator, Anne Sokolowski, and is locked with access restricted only to her and to the Clinical Area Coordinator, although APA Accreditation Site Visitors reserve the right to examine these materials if they so choose. We also have a log that is anonymous and includes the date of the filing, the issue, the actions taken, and the level (area, department, administration) at which the complaint is adjudicated. No complaints/grievances have been filed since at least 2003.

The issues around which students may wish to file complaints or grievances include those related to the classroom, field placements, personal discrimination or harassment, sexual or physical misconduct, violation of APA ethical principles (discussed above), violations of scholarly ethics, and other potential violations of the Student Code of Conduct. Student academic appeals are, where possible, handled within the Psychology Department. Initially, the student should take the issue to the Clinical Area Coordinator. The Clinical Area Coordinator then consults with all parties and recommends a resolution. If this is unsuccessful, the matter is referred to the Student Appeals Committee within the Department. The Student Appeals Committee convenes, investigates, deliberates, and reports its recommendations for decision in closed session to the Department. Appeals may be reconsidered upon motion of the Department Chair or a petition of ten faculty members.

The procedure for ethical and other violations also should begin with the DCT or, if conflict of interest is a consideration, the Vice Chair for Graduate Studies. The University has specific procedures and remedies if the issues cannot be resolved to satisfaction at the Area or Departmental level or if confidentiality is a concern. These are detailed at the web links below. Ultimately, the Office of the School of Arts and Sciences Dean should be contacted if there are questions about how to proceed with a grievance or if there are concerns with handling the issue within the Department.

The following URL: **http://catalogs.rutgers.edu/generated/nb-grad_current/pg82.html**
 links to the overall University policies: "The University Code of Student Conduct (pdf) governs the student disciplinary process at Rutgers. The Code describes prohibited behaviors, potential sanctions for violations of the Code, and the process for adjudicating alleged violations of the Code."

The following URL: http://compliance.rutgers.edu/title-ix/ links to university grievance procedures related to misconduct by students and others.

The following URL: http://uhr.rutgers.edu/policies-resources/policies-procedures/policy-and-compliance-guidelines/discrimination-and links to university policies specific to general discrimination and harassment and procedures students can use to file complaints

X.   Funding and Support

A.   Period of Support

The clinical training program is committed to providing full support (tuition plus stipend) to all students for five years. Support is provided through Fellowships, Teaching Assistantships, Research Assistantships, and NIH predoctoral Research Training grants. Specific details about these are described in the on-line catalogue of The Graduate School – New Brunswick (see http://catalogs.rutgers.edu/generated/nb-grad_current/) and the special office for graduate student funding (http://gradfund.rutgers.edu).

B.   **Restriction on Financial Aid and Employment**

Students who hold fellowships, teaching assistantships, graduate assistantships, or Walter Russell Scholarships may not accept employment outside of their academic department without the permission of the Graduate Director and the Dean of the Graduate School.

C.   **Additional Sources of Support**

1. There are numerous sources of outside support for students. Students are encouraged to explore external fellowships and individual predoctoral training grants.
2. Common sources of external support include the National Institutes of Health, the National Science Foundation, the Ford Foundation, and the American Psychological Association.
3. Complete information about external funding sources is available from the GradFund program in the Graduate School (https://gradfund.rutgers.edu). Additional information is available from the University Office of Research and Sponsored Programs (http://orsp.rutgers.edu/).

D.   **Student Services**

A range of student services is available at the University, including libraries, computer facilities, housing, dining services, student health services and insurance, counseling services, services for international students, student assistance, day-care centers, the Rutgers University Police, intercampus transportation, the Paul Robeson Cultural Center, the Center for Latino Arts and Culture, the Asian-American Cultural Center, and the office of Diverse Community Affairs and Lesbian-Gay Concerns. All graduate students are automatically members of the Graduate Student Association. Each of these services is detailed in the on-line catalogue of The Graduate School - New Brunswick (see http://catalogs.rutgers.edu/generated/nb-grad_current/).

XI.   Intradepartmental Transfers

Students enrolled in any Psychology Departmental Program who wish to transfer to another Program within the Department of Psychology may do so only if the transfer request is approved by the Graduate Director, the new program's Area Coordinator and the new program's Admissions Committee. For the Clinical Area, decisions about transfers are made at the same time as decisions about new admissions to the program, and the core faculty operate as an admissions committee of the whole in making transfer decisions.

XII.   Key Contact Information

Clinical Area

Director of Clinical Training and Clinical Area Coordinator: Edward A. Selby, Ph.D., (848-932-1309), edward.selby@rutgers.edu
Senior Graduate Administrator: Anne Sokolowski, (848) 445-2555, annes@psych.rutgers.edu

Departmental Leadership:

Department Chair and Graduate Training Director: Lee Jussim, Ph.D., (848) 445-8883, psychair@psych.rutgers.edu
Vice-Chair for Graduate Studies: Tracey Shores, Ph.D., (848) 445-6968, shors@rutgers.edu
Vice-Chair for Undergraduate Studies: Julie Hudson, Ph.D., (848) 445-2179, jhudson@rutgers.edu

Departmental Staff:

Business Manager: Zsofia Pal, (848) 445-2555, szofia.paal@rutgers.edu
Departmental Administrator: Candace Green, (848) 445-8968, cdg91@psych.rutgers.edu
Unit Computer Manager: Tamela Pringle, (848) 445-8985, tpringle@psych.rutgers.edu

XIII.   Addition Information

Student Selection, Admission, and Degree Requirements:
Rutgers Psychology Dept: https://psych.rutgers.edu
Graduate Program overview; How to Apply: https://psych.rutgers.edu/academics/graduate/graduate-program-overview
Clinical Student Admissions Data and other statistics:
https://psych.rutgers.edu/cl/471-student-admissions-outcomes-and-other-data
Required Coursework:
https://psych.rutgers.edu/36-academics/graduate/clinical-psychology?start=8
Degree Requirements for MS and Ph.D. are outlined in pages 18-29 of the student handbook.
Graduation Requirements:
https://psych.rutgers.edu/36-academics/graduate/clinical-psychology/204-graduation

Graduate School–New Brunswick Catalog
http://catalogs.rutgers.edu/generated/nb-grad_current/

Academic Integrity, Code of Conduct, Employment Equity and Title IX:
Rutgers, The State University of New Jersey, Academic Integrity Policy:
http://catalogs.rutgers.edu/generated/nb-grad_current/pg79.html
University Code of Student Conduct Summary:
http://catalogs.rutgers.edu/generated/nb-grad_current/pg82.html
Title IX complaints:
http://compliance.rutgers.edu/title-ix/
Office of Employment Equity Investigations
http://uhr.rutgers.edu/policies-resources/policies-procedures/policy-and-compliance-guidelines/discrimination-and

Funding And Support:
Program Cost:
https://psych.rutgers.edu/academics/graduate/cl/student-admissions-outcomes-and-other-data
Graduate Program overview; Financial Aid: https://psych.rutgers.edu/academics/graduate/graduate-program-overview
Residency in New Jersey:
http://nbregistrar.rutgers.edu/forms/ResidencyAppl.pdf
Doctoral Fellowships, Assistantships, and Tuition
http://gsnb.rutgers.edu/doctoral-fellowships-assistantships-and-tuition
Funding and Support:
http://gradfund.rutgers.edu
University Office of Research and Sponsored Programs:
http://orsp.rutgers.edu/

XIV.   Important Departmental Forms (attached)

       A.   **Master's Thesis Committee Form**
       B.   **Qualifying Examination Committee Form**
       C.   **Dissertation Committee Form**

MASTERS THESIS COMMITTEE FORM

Student _____

Area _____   Admission Date_____

*Chairperson _____

Members _____

_____

_____

Thesis Title_____

_____

Approved by Area Coordinator _____

Approved by Vice Chair _____

Approved by Chair _____

 Date _____

*May be a Member or Associate Member of the Graduate Faculty.

<u>NOTE</u>: This is a <u>three</u> member committee. It is permissible to include an outside member. In this case, however, there must still be three members of the graduate faculty on the committee, bringing the total number of members to <u>four</u>.

PH.D. QUALIFYING EXAMINATION COMMITTEE

Student_____

Area_____   Admission Date_____

**Chairperson_____

Members_____

              _____

              _____

Approved by Area Coordinator_____

Approved by Vice Chairman_____

Approved by Chairman_____

Date_____

This is a four member committee.
**Chairperson must be a full member of the Graduate Faculty.
  Members must be full or associate members of the Graduate Faculty.

PH.D. DISSERTATION COMMITTEE

Student _____

Area _____ Admission Date _____

**Chairperson_____

  Other Members_____

_____

***Outside Member_____

Thesis Title _____

_____

Approved by Area Coordinator _____

Approved by Vice Chair _____

Approved by Chairman _____ Date_____

===

 Chairperson must be a full member of the graduate faculty.

*** **Outside member should be someone outside the University whenever possible, but in all cases, outside means outside the Program. Please include person's vita (including person's full name, address, and affiliation). The chairperson of your committee should also write a note stating the member's area of expertise.**

Appendix A

Policy of the Rutgers Clinical Ph.D. Program on Ethics and Academic
Integrity in all Aspects of the Program, including Psychological/
Practicum/Externship and other Practice/Field Placements

All participants of the Rutgers Clinical Ph.D. Program- faculty, students, and staff- are partners in adhering to the highest standards of ethical conduct and moral behavior. Students and faculty are expected to conduct themselves according to the Ethical Principles of the American Psychological Association (APA) in all aspects of their professional behavior. Violations of the Ethical Principles of APA may be grounds for dismissal from the program. Students and faculty are responsible for knowing the latest information about the ethical principles and standards of the APA. The best source for the most updated information is http://www.apa.org/ethics/code/index.aspx

Relatedly, academic integrity and honesty are necessary preconditions to the academic freedom fundamental to any university. "Ethical conduct is the obligation of every member of the university community and breaches of academic integrity constitute serious offenses. The principles of academic integrity entail simple standards of honesty and truth. Each member of the university has a responsibility to uphold the standards of the community and to take action when others violate them" (Catalogue of the Graduate School - New Brunswick).

These are responsibilities of every student and faculty member. The full university policies on academic integrity (http://academicintegrity.rutgers.edu/) and the university code of student conduct (https://slwordpress.rutgers.edu/studentconduct/wp-content/uploads/sites/46/2017/05/UCSC2016.pdf) are summarized in the catalogue of the Graduate School - New Brunswick (see http://catalogs.rutgers.edu/generated/nb-grad_current/).

Our Policy on Ethical Practices

1. At the beginning of each school year, all first-year students are oriented to the Ethical Principles and Code of Conduct, including its implications for their actions with each other and with their clients, and complete the University procedure for certifying knowledge of ethical procedures in the conduct of research with human participants.
2. At the beginning of each school year, the Area Coordinator/Director of Clinical Training emails the Clinical Ph.D. faculty and students to highlight the importance of the Clinical Ph.D. Program's commitment to abiding by APA's Ethical Principles and Code of Conduct.
3. Within the first three years, all students take a course on Ethics in Clinical Psychology that includes a special focus on the Ethical Principles and Code of Conduct and related documents from the APA, and research ethics. Knowledge of general principles, specific conduct codes, and the general process of ethical decision-making are emphasized.
4. In the Fall of their first year, all students are oriented toward ethical and legal procedures used in the GSAPP Psychological Clinic, prior to their direct participation in the Clinic. This includes applicable regulations of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
5. Adherence to ethical principles is incorporated into all assessments of clinical work by students.
6. Faculty and students are alert to potential violations of the Ethical Principles and Code of Conduct and take responsibility to seek preventive or remedial action when they occur.

Overview of the APA Ethical Code
(from the APA website)

Preamble

Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They strive to help the public in developing informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of principles and standards upon which psychologists build their professional and scientific work. This Ethics Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.

The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems.

General Principles

This section consists of General Principles. General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose.

Principle A: Beneficence and Nonmaleficence
Psychologists strive to benefit those with whom they work and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.

Principle B: Fidelity and Responsibility
Psychologists establish relationships of trust with those with whom they work. They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. They are

concerned about the ethical compliance of their colleagues' scientific and professional conduct. Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage.

Principle C: Integrity
Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities psychologists do not steal, cheat or engage in fraud, subterfuge, or intentional misrepresentation of fact. Psychologists strive to keep their promises and to avoid unwise or unclear commitments. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.

Principle D: Justice
Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.

Principle E: Respect for People's Rights and Dignity
Psychologists respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision making. Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status, and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices.