George Mason University

Clinical Psychology Doctoral Program
Student/Faculty Handbook

2012-2013

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I. INTRODUCTION

This handbook provides information about the Clinical Psychology Doctoral Program and guides faculty members and students in planning the student’s program of study. The Director of Clinical Training (DCT) updates the handbook annually. During the year, the DCT issues updates to students and faculty via email as policies and procedures change.

Please consult the University Catalog for the University’s policies and procedures for doctoral degree programs. The Catalog contains a lot of important information that is not contained in this Handbook.

In addition to becoming familiar with the contents of this Handbook and the policies and procedures described in the catalog, students should maintain close and continual contact with their advisors.

June P. Tangney
Director of Clinical Training

Lauren Cattaneo
Associate Director of Clinical Training
II. WHO’S WHO IN THE DEPARTMENT

Department Chair:
Dr. Robert Smith 993-4339 / DK 2044 bsmith@gmu.edu

Associate Chair for Graduate Studies:
Dr. Jim Thompson 993-9356 / DK 2056 jthompsz@gmu.edu

Associate Chair for Undergraduate Studies:
Dr. James Sanford 993-1351 / DK 2046 jsanford@gmu.edu

Office Manager:
Ms. Susan Ridley 993-1398 / DK 2003 sridley@gmu.edu

Graduate Programs Coordinator:
Ms. Darby Wiggins 993-1548 / DK 2014 dwiggin3@gmu.edu

Undergraduate Program Coordinator:
Ms. Whitney Hammond 993-1759 / DK 2086 whammond@gmu.edu

Grants and Budget Administrator:
Ms. Dawn Phillips 993-5281 / DK 2003 dphill11@gmu.edu

Research Coordinator:
Ms. Kristin Fairchild 993-1495 / DK 2003 kfairch1@gmu.edu

Fiscal Services Assistant:
Ms. Cara Eisel 993-3235 / DK 2003 ceisle@gmu.edu

Administrative Coordinator:
Ms. Cindy Koo 993-1384 / DK 2086 ckoo2@gmu.edu

Laboratory Manager:
Mr. Dave Cerri 993-1353 / DK 2024 dcerri@gmu.edu
Director of Undergraduate Advising/Teaching Assistant Coordinator:
Dr. Michael Hurley 993-1384 / DK 2086 mhurley2@gmu.edu

Director, Applied Developmental Program:
Dr. Susanne Denham 993-1378 / DK 1024A sdenham@gmu.edu

Director, Cognitive and Behavior Neuroscience Program:
Dr. Robert Smith 993-4339 / DK 2044 bsmith@gmu.edu

Director of Clinical Training:
Dr. June Tangney 993-1365 / DK 2007A jtangney@gmu.edu

Assistant Director of Clinical Training:
Dr. Lauren Cattaneo 993-4728 / DK 2021 lcattane@gmu.edu

Director of the Psychological Clinic:
Dr. Robyn Mehlenbreck 993-1371 / Clinic 202 rmehlenb@gmu.edu

Director, Human Factor/Applied Cognition Program:
Dr. Raja Parasuraman 993-1357 / DK 2055 rparasur@gmu.edu

Coordinator, Human Factor/Applied Cognition M.A. Program:
Dr. Matt Peterson 993-4255 / DK 2058 mpeters2@gmu.edu

Director, Industrial/Organizational Program:
Dr. Lois Tetrick 993-1372 / DK 3066A ltetrick@gmu.edu

Coordinator, Industrial/Organizational M.A. Program:
Dr. Louis Buffardi 993-1363 / DK 3072 buffardi@gmu.edu

Director, School Psychology/CAGS Program:
Dr. Grover Foehlinger 993-5127 / DK 2063 gfoehlin@gmu.edu
# III. Members of the Clinical Faculty

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Position/Role</th>
<th>Specialties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lauren Cattaneo</td>
<td>993-4728</td>
<td>Associate Director of Clinical Training</td>
<td>Community and institutional responses to intimate partner violence, helpseeking; risk assessment and empowerment.</td>
</tr>
<tr>
<td>Christy Esposito-Smythers</td>
<td>993-2039</td>
<td></td>
<td>Assessment, prevention, and treatment of adolescent suicide, depression, and substance abuse</td>
</tr>
<tr>
<td>Sarah Fischer</td>
<td>993-5635</td>
<td></td>
<td>Impulsivity, Bulimia Nervosa and co-occurring alcohol abuse, application of DBT to disordered eating</td>
</tr>
<tr>
<td>Todd Kashdan</td>
<td>993-9486</td>
<td></td>
<td>Anxiety and depressive conditions (especially social anxiety); self-regulation; risk and resilience processes; assessment and cultivation of positive emotions and traits.</td>
</tr>
<tr>
<td>Patrick McKnight</td>
<td>993-8292</td>
<td></td>
<td>Research methods and statistics, program evaluation.</td>
</tr>
<tr>
<td>Robyn Mehlenbeck</td>
<td>993-1371</td>
<td>Director of Center for Psychological Services.</td>
<td>Mental Health Administration and Training; Treatment of adolescents with chronic illness; Multidisciplinary practice and training.</td>
</tr>
<tr>
<td>Keith D. Renshaw</td>
<td>993-5128</td>
<td></td>
<td>Relationships of adults with anxiety and depression; Adjustment of military service members and their spouses after deployment; Combat-related posttraumatic stress disorder.</td>
</tr>
<tr>
<td>John Riskind</td>
<td>993-4094</td>
<td></td>
<td>Cognitive determinants of anxiety, fear, and worry; obsessive-compulsive disorder; social-cognitive vulnerability to psychopathology.</td>
</tr>
<tr>
<td>Jerome Short</td>
<td>993-1368</td>
<td></td>
<td>Family stress and coping; Prevention programs; Mental health promotion</td>
</tr>
<tr>
<td>June Tangney</td>
<td>993-4051</td>
<td>Director of Clinical Training</td>
<td>Personality, social, and emotional development; criminal rehabilitation.</td>
</tr>
</tbody>
</table>
IV. COLLEGE OF HUMANITIES AND SOCIAL SCIENCES GRADUATE POLICIES

These policies apply to all graduate students within the College of Humanities and Social Sciences (CHSS).

The Graduate Counsel

The Graduate Council is the governing body for all graduate academic policies and procedures. The council approves all new graduate programs; authorizes all graduate course work, policies, and degrees conferred by the university; and sets minimum standards for admission to and graduation from any graduate program. These are minimum standards that all programs must meet; individual programs may set and enforce higher standards. The Office of the Provost administers university graduate policies for the Graduate Council.

Policies for All Students

George Mason uses only Mason e-mail accounts to communicate with enrolled students. Students should activate their Mason e-mail account, use it to communicate with their department and other administrative units, and check it regularly for important information.

Registration and Degree Audit

Students are responsible for correctly registering for courses and paying all tuition and fees by the official university registration and payment deadlines. Instructors do not have the authority to add students to courses, and students may not sit in on classes for which they are not registered. All students should verify the accuracy of their enrollment before the end of the add period and should check Patriot Web to verify that they are registered for the classes that they think they are.

All students are responsible for reviewing their own transcripts and degree audits regularly to ensure that they are correct and that they are on track to meet all their requirements.

Withdrawal

Students are responsible for all courses in which they remain officially enrolled once the drop period has ended. Instructors do not have the authority to withdraw students from classes. Withdrawals after the published deadlines require the approval of the relevant dean (undergraduate academic affairs or graduate academic affairs) and are typically allowed only for full semesters at a time (a withdrawal from all enrolled courses). Withdrawals are only permitted for non-academic reasons; no withdrawals can be approved for academic reasons. When submitting a withdrawal request, students must provide verifiable, third-party documentation for the reason for the withdrawal. Requests for withdrawals should be submitted as early in the semester as possible and never after the last day of classes.

Grade Appeals

Grade appeals should be made to the department or program following the process specified in the Academic Policies chapter of the university catalog. If they are resolved within
the department or program, that unit is the final level of appeal. The departmental decision may be appealed to the dean only on the basis of procedural irregularity. Graduate students should address such appeals through the Office of Graduate Academic Affairs. If the grade appeal is not resolved within the department or program, the chair makes a recommendation to the dean, who makes the final determination. The decision of the dean is not subject to review or further appeal.

**Formal Complaints**

Formal complaints should be made in writing to the associate dean.

**Accommodations for Students with Disabilities**

Students with documented disabilities should contact the [Office of Disability Services](#) to open a file and learn more about accommodations that may be available to them.

**Full-Time Classification**

Graduate students are considered full time if they are enrolled in at least 9 graduate credits per semester or hold a full-time assistantship (total 20 hours a week) and are enrolled in at least 6 graduate credits per semester.

Master’s students may enroll in 1 credit of 799 and be considered full time only if they have completed 3 credits of 799 and the student along with their advisor and department chair certify each semester that the student is working full time on the thesis.

Doctoral students who are enrolled in dissertation credits (either 998 or 999) are considered full time if they are enrolled in at least 6 credits per semester, regardless of whether they hold an assistantship. Doctoral students who have advanced to candidacy and have completed the minimum number of credits required by the university and their degree program, including the minimum number of credits of 998 and 999, are considered full time if they are registered for at least 1 credit of 999 and the student along with their advisor and department chair certify each semester that they are working full time on the dissertation. See the Dissertation Registration section for more information regarding 998 and 999.

To be considered as full time under the aforementioned clauses, a student must complete and submit the appropriate forms to the Office of the University Registrar **prior** to the first day of classes for the semester.

Different requirements for full-time status may apply for tuition, verification, loan deferral, and financial aid. Contact Student Accounts, the Office of the University Registrar, and Student Financial Aid, respectively, for more information. Note that the official designation of time status for all students is determined by the Office of the University Registrar.


**Academic Advising**

When a student is admitted to graduate study, the student is assigned a faculty advisor by the academic program responsible for the student’s program of study. Registration for newly admitted graduate students, as well as continuing students, begins with a visit to the student’s
academic advisor. There, the student can obtain information about specific courses and degree requirements and develop an individual program of study. Progress in an approved program of study is the shared responsibility of the student and the advisor. The graduate student is responsible for compliance with the policies and procedures of the college, school, or institute, and all applicable departmental requirements that govern the individual program of study. Students should consult with their advisors before registration each semester.

**Voluntary Resignation from Graduate Academic Program**

Degree-seeking students may officially resign from their academic program with the approval of their department or program chair and their dean. The Voluntary Resignation form must be approved by the student’s program and Student Accounts, then submitted to the Office of the University Registrar for notation on the transcript. Resignations after the drop period will result in grades of W on the student’s transcript for that semester, and removal from any future registered courses. Program resignation is final. Students who have been granted a resignation will not be able to register for any courses unless admitted to another degree program or non-degree status in a different program. [http://registrar.gmu.edu/forms/VRGAP.pdf](http://registrar.gmu.edu/forms/VRGAP.pdf)

**Reduction of Credit**

The number of credits required by a doctoral, master of fine arts, or master’s program of more than 39 credits may be reduced on the basis of a previously earned master’s degree. Reduction of credit requires the approval of the program director and the dean or director of the school, college, or institute. They determine whether the credits are eligible for reduction of credit and applicable to the degree program and the number of credits to be reduced. Reduction of credit is limited to a maximum of 30 credits in a doctoral program, 20 in an MFA program, and 18 in the MA in psychology concentration in school psychology, and derive from the degree requirements given below.

Students requesting a reduction of credit must supply official transcripts with the degree conferral listed. For transcripts from outside the United States, students must supply an official transcript evaluation and an official translation for transcripts not in English if these documents were not supplied in the admission process. Reduction-of-credit requests from students who are admitted provisionally are not considered until the students have fulfilled the conditions of their admission and had the provisional qualifier removed from their records.

Credits used in reduction of credit are not subject to time limits, and the credits must have been applied to a previous degree. All the other conditions given above for eligibility of transfer of credit apply also to reduction of credits. [http://registrar.gmu.edu/forms/ROC.pdf](http://registrar.gmu.edu/forms/ROC.pdf)

**Transfer of Credit**

Graduate credit earned prior to admission to a certificate, master’s, or doctoral program may be eligible to be transferred into the program and applied to the certificate or degree. Transfer of credit requires the approval of the program director and dean or director of the school, college, or institute. They will determine whether the credit is eligible for transfer and applicable to the specific certificate or degree program. Note that credits accepted for transfer do not compute into any Mason GPA. Limits on the number of credits that can be transferred derive from the degree requirements given below.
Credit is usually considered for transfer at the student’s request at the time of initial registration as a degree-seeking student. Students must supply official transcripts. For transcripts from outside the United States, students must supply an official transcript evaluation and an official translation for transcripts not in English if these documents were not supplied in the admission process. Credit transfer requests from students who are admitted provisionally are not considered until they have fulfilled the conditions of their admission and the provisional qualifier has been removed from their records.

To be eligible for transfer credit, the credit must be graduate credit earned at another accredited university, earned at another institution and recommended for graduate credit in the American Council on Education guidebook, or earned at Mason while in a non-degree status or enrolled through extended studies. The credit must have been earned within six years prior to first enrollment as an admitted student in the specific certificate or degree program, and a minimum grade of B (3.00) must have been earned. The course must be applicable toward a degree at the institution offering the course. Extension and in-service courses that are not intended by the institution offering the courses to be applied to a degree program are not eligible for transfer credit to Mason. The credits cannot have been previously applied toward a degree at another institution or Mason; however, up to 3 credits previously applied to a degree program at another institution may be transferred into a certificate program at Mason. [http://registrar.gmu.edu/forms/GTC.pdf](http://registrar.gmu.edu/forms/GTC.pdf)

**Permission to Study Elsewhere**

Students enrolled in a degree program may take graduate courses at another accredited institution and apply these credits to a master’s or doctoral degree with prior approval. Approval must be secured in writing from the director of the graduate program and the dean or director of the school, college, or institute, and submitted to Mason’s Office of the University Registrar **before** registering at the other institution. Upon completion of the course, students must arrange for an official transcript to be submitted to Mason so that the credits may be transferred into their Mason degree program. These credits are subject to all the other conditions given above for transfer credit, including limits on numbers of credits that can be taken elsewhere. Note that credits accepted for transfer do not compute into any Mason GPA. Permission to take a course elsewhere does not exempt a graduate student from satisfying the degree requirements given below. [http://registrar.gmu.edu/forms/SE.pdf](http://registrar.gmu.edu/forms/SE.pdf)

**University Consortium**

Eligible students may enroll in courses at any of the institutions in the Consortium of Universities in the Washington Metropolitan area. Students are limited to one consortium course per semester, with a career maximum of 6 credits. To register for a consortium course, students must have an overall GPA of at least 3.00 and be in good academic standing. Students with grades of IN on their record or who earned grades of C or F in the most recent semester are not eligible to register for a consortium course. Students who have received a grade less than 3.00 in a consortium course are not permitted to enroll in additional consortium courses. Newly admitted graduate students are not permitted to enroll in consortium courses during their first semester of graduate study. Students who wish to enroll in consortium courses during their second semester of study must wait until the grades for the previous semester have been posted. [http://registrar.gmu.edu/consortium/index.html](http://registrar.gmu.edu/consortium/index.html)
Graduate Grading

The university-wide system for grading graduate courses is as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Quality Points</th>
<th>Graduate Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td>A+</td>
<td>4.00</td>
<td>Satisfactory/Passing</td>
</tr>
<tr>
<td>A</td>
<td>4.00</td>
<td>Satisfactory/Passing</td>
</tr>
<tr>
<td>A-</td>
<td>3.67</td>
<td>Satisfactory/Passing</td>
</tr>
<tr>
<td>B+</td>
<td>3.33</td>
<td>Satisfactory/Passing</td>
</tr>
<tr>
<td>B</td>
<td>3.00</td>
<td>Satisfactory/Passing</td>
</tr>
<tr>
<td>B-</td>
<td>2.67</td>
<td>Satisfactory*/Passing</td>
</tr>
<tr>
<td>C</td>
<td>2.00</td>
<td>Unsatisfactory/Passing</td>
</tr>
<tr>
<td>F</td>
<td>0.00</td>
<td>Unsatisfactory/Failing</td>
</tr>
</tbody>
</table>

* Although a B- is a satisfactory grade for a course, students must maintain a 3.00 average in their degree program and present a 3.00 GPA on the courses listed on the graduation application.

Information about additional grade notations that apply to graduate students as well as undergraduates may be found in the Academic Policies section of the catalog under Grading System.

Academic Warning

A notation of academic warning is entered on the transcript of a graduate student who receives a grade of C or F in a graduate course or while a grade of IN is in effect.

Academic Termination

<table>
<thead>
<tr>
<th>Student Status</th>
<th>Students may be terminated for any one of the following reasons:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provisionally admitted degree seeking graduate students</td>
<td>1. Fail to meet conditions of admission within time limits</td>
</tr>
<tr>
<td></td>
<td>2. Fail to make satisfactory progress toward the degree, as determined by the academic unit</td>
</tr>
<tr>
<td></td>
<td>3. Accumulate 12 credits of unsatisfactory grades in undergraduate courses</td>
</tr>
<tr>
<td></td>
<td>4. Accumulate grades of F in two graduate courses or 9 credits of unsatisfactory grades in graduate courses</td>
</tr>
<tr>
<td></td>
<td>[NOTE: undergraduate and graduate course grades are not combined to reach the termination threshold; they are considered separately.]</td>
</tr>
<tr>
<td>Non-degree graduate students</td>
<td>1. Accumulate 12 credits of unsatisfactory grades in undergraduate courses</td>
</tr>
<tr>
<td></td>
<td>2. Accumulate grades of F in two graduate courses or 9 credit</td>
</tr>
</tbody>
</table>
of unsatisfactory grades in graduate courses

<table>
<thead>
<tr>
<th>Fully admitted graduate students enrolled in degree and/or certificate program</th>
<th>1. Fail to make satisfactory progress toward degree or certificate requirements, including expiration of time limit.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[NOTE: Fully admitted graduate students who accumulate grades of F in two graduate courses or 9 credits of unsatisfactory grades in graduate courses qualify for dismissal, not termination.</td>
</tr>
</tbody>
</table>

Although the university will make every effort to notify students when their performance reaches the threshold for termination, each student is responsible for knowing the termination criteria, for knowing when their grades have met the standard and for initiating any appeal to their dean. Once the appeal period has expired, or the student’s appeal has been denied, a letter of termination is sent by the dean or director of the school, college, or institute, and notification of academic termination is affixed to the graduate student’s official record. Students who are terminated are no longer eligible to take courses in the program, but may apply to another degree program or may apply to take courses in other programs through non-degree studies. [http://chss.gmu.edu/graduate/policies/gradterminationappeal](http://chss.gmu.edu/graduate/policies/gradterminationappeal)

**Academic Dismissal**

A degree-seeking graduate student is dismissed after accumulating grades of F in two courses or a total of 9 credits of unsatisfactory grades (C or below) in graduate courses. These are minimum standards of academic performance; some programs have higher standards. Although the university will make every effort to notify students when their performance reaches the threshold for dismissal, each student is responsible for knowing the dismissal criteria for degree-seeking graduate students at Mason, for knowing when their grades have met the standard, and for initiating any appeal to their dean. A student may also be dismissed for failure to meet other program requirements such as doctoral competence exams. Note that the university reserves the right to dismiss any student based on cancellation (by the testing administrator) of any test score required for admission. The notation of academic dismissal is affixed to the graduate student’s official record. A student who is dismissed may not take additional course work at Mason. [http://chss.gmu.edu/graduate/policies/graddismissalappeal](http://chss.gmu.edu/graduate/policies/graddismissalappeal)

**Thesis Submission**

The university has a policy on the dissemination of scholarly works created by graduate students. The Electronic Thesis and Dissertation (ETDs) program encourages masters-level graduate students to submit an electronic copy of their thesis for broad scholarly dissemination through the Mason Archival Repository Service (MARS). Student participation in the ETDs program is strongly encouraged, but not mandatory. All students choosing to participate in this program will be required to sign the MARS Author/Contributor Permission Agreement. On or before the thesis deadline for any semester, the student will submit a complete (signed Signature Sheet through Curriculum Vitae) 100% cotton copy of his or her thesis to the University Libraries along with a transmittal sheet. The student may also opt to submit an electronic copy of his/her thesis. These submissions can be in Word, WordPerfect, or in portable document format (PDF). Media formats (tiff, jpeg, png, wav, avi, mpeg, mov, rm, wmv, wma,
etc.) for supporting materials will also be accepted. Datasets may be accepted at the discretion of the libraries. The files may be submitted on CD, DVD, or USB memory device. Please note that those students opting out of the ETDs program are required to submit two 100% cotton copies of their thesis.

For degree conferral in a particular semester, the above materials must be submitted to the library by 5 p.m. on the last Friday of classes in that semester. For specific deadlines and other information, go to registrar.gmu.edu.

**Dissertation Submission and Fees**

Submission of an additional PDF on CD of the dissertation to University Microfilms International (ProQuest) is required; a fee of either $55 or $150 (depending on publishing option chosen) is paid by the student for this process. Submission of a completed Survey of Earned Doctorates is also required. All copies of the dissertation must be submitted and all fees paid before the doctoral degree is awarded.

For degree conferral in a particular semester, the above materials must be submitted to the library by 5 p.m. on the last Friday of classes in that semester. (For specific deadlines and more information, go to registrar.gmu.edu).

**University Dissertation and Thesis Services**

University Dissertation and Thesis Services (UDTS) facilitates completion and submission of dissertations, theses, and graduate-level projects. The program assists Mason students in all stages of production. The UDTS web site, thesis.gmu.edu, provides students with useful tools, including downloadable templates of necessary elements, forms required for the submission process, and links to related web sites. Students completing a thesis or dissertation are required to complete a format review. UDTS is located in Fenwick Library, Special Collections and Archives, Wing 2C. For more information, contact the university dissertation and thesis coordinator at 703-993-2222.
V. CLINICAL PROGRAM CURRICULUM

Training Model and Goals

The APA-accredited clinical psychology doctoral program at George Mason University is committed to the clinical science model. Our goal is to train clinical psychologists who are capable of integrating research and applied clinical activities. We believe that the best clinical skills are grounded in empirical and theoretical knowledge, and clinical application continuously informs the evolution of clinical theory and research. Toward this end, we provide rigorous training in scientific methods and clinical activities, with an emphasis on those that are informed by empirical research. Our training encourages students to be integrative and innovative while guided by the principles of science and ethics.

We believe that clinical psychologists have a responsibility to have a positive impact on individuals and communities. We emphasize theoretically informed, applied research that is capable of producing results with meaningful implications for positive change at the level of the individual, family, and community. Our program involves students in research from the beginning of the first year throughout the entirety of their training.

The program is unique in approaching clinical psychology from social psychological and contextual perspectives. A social psychological perspective uses theory and research from social psychology to understand emotional, cognitive, behavioral, and interpersonal functioning. A contextual perspective stresses the impact of social and cultural factors on the individual and vice versa. These perspectives share the assumption that psychological well-being, adjustment, and dysfunction are best understood in the context of the individual’s relationships, community, and culture.

Our faculty views students as junior colleagues and collaborators, and we strive on a daily basis to treat all students with dignity and respect. We aim to train students who have the flexibility to fill the evolving functions of clinical psychologists, including research, direct provision of clinical services, supervision, program development and evaluation, and consultation.

Requirements

A minimum of 76 graduate credits is required for the Ph.D. — 17 hours of general courses, 41 hours of core clinical courses, 6 hours of electives, and 12 hours of dissertation. With approval, students can take elective courses offered by the other universities that belong to the Washington Area Consortium of Universities.

Students must pass courses with a grade of “A” or “B”. A student who earns a “C” or lower in a course will have a second opportunity to take the course and pass with an acceptable grade. A student who fails to meet this requirement the second time may be removed from the program.
GENERAL REQUIREMENTS

Biological Bases of Behavior (PSYC 702, 685, 558, or 559) 3
Developmental Bases of Behavior (PSYC 704, 666, or 669) 3
Advanced Statistics I (PSYC 611) 4
*Advanced Statistics II (PSYC 612) 4
Methods for Social Research (PSYC 644) 3

*Advanced Statistics I and II are the minimum requirement. While all students must take PSYC 611, options for increased focus on statistics in the curriculum are described below, and include substituting other courses for PSYC 612.

CLINICAL REQUIREMENTS

Psychological Assessment I (PSYC 810) 4
Psychological Assessment II (PSYC 811) 4
Scientific Foundations of Clinical Psychology (PSYC 822) 3
History, Systems, and Theories of Personality and Psychotherapy (PSYC 830) 3
Social and Cognitive Foundations of Clinical Psychology (PSYC 833) 3
Introductory Helping Skills and Motivational Interviewing (PSYC 860) 3
Cognitive Behavioral Therapy for Youth (PSYC 861) 6
Cognitive Behavioral Therapy for Adults (PSYC 862) 6
Practicum in Clinical Psychology (PSYC 881) 6
Ethical and Professional Issues in Clinical Practice (PSYC 883) 3

ELECTIVES 6

Dissertation (PSYC 998 & 999) 12
(Students must take at least 3 hours of 998 and at least 3 hours of 999)
Internship (Full time for one year—no course credit)
Optional: Part-time Externship in the 4th and 5th years (no course credit)

TOTAL 76

TYPICAL SCHEDULE

YEAR ONE (25)

FALL (14)
Psychological Assessment I (810) (4)
Introductory Helping Skills and Motivational Interviewing (860) (3)
Advanced Statistics I (611) (4)
Methods for Social Research (831) (3)

SPRING (11)
Psychological Assessment II (811) (4)
Scientific Foundations of Clinical Psychology I (822) (3)
Advanced Statistics II (612) (or Advanced Stats/Elective/Core) (4)

YEAR TWO (18)
FALL (9)
  Cognitive Behavioral Therapy for Youth (861) (3)
  Cognitive Behavioral Therapy for Adults (862) (3)
  Advanced Stats/Elective/Core (3)
SPRING (9)
  History, Systems, and Theories of Personality and Psychotherapy (830) (3)
  Cognitive Behavioral Therapy for Youth (861) (3)
  Cognitive Behavioral Therapy for Adults (862) (3)

YEAR THREE (24)
FALL (12)
  Social and Cognitive Foundations of Clinical Psychology (833) (3)
  Practicum in Clinical Psychology (881) (3)
  Advanced Stats/Elective/Core (3)
  Doctoral Dissertation Proposal (998) (3)
SPRING (12)
  Ethical and Professional Issues in Clinical Psychology (3)
  Practicum in Clinical Psychology (881) (3)
  Advanced Stats/Elective/Core (3)
  Doctoral Dissertation Proposal (998) (3)

YEAR FOUR (9)
FALL (6)
  Advanced Stats/Elective/Core (3)
  Doctoral Dissertation Proposal (998) (3)
SPRING (3)
  Doctoral Dissertation (once proposal is approved; 999) (3)

YEAR FIVE: Additional research/clinical/teaching/training experiences OR Internship*
  Doctoral Dissertation credits until completion (999)

YEAR SIX: Internship*
  * In order to apply for internship, a student must have an approved dissertation proposal by November 1, prior to submitting any applications for internships that start the following year.

Additional Program Requirements

In the first year of training, upon completion of PSY810, each student is required to complete two intellectual assessments to demonstrate competency. These cases will be provided by the GMU CAP program located at the Center for Psychological Services.

Across the second year of training, students are required to complete three comprehensive assessment cases (one adult case, one child case and one that can be either child
or adult). These cases will be provided by the GMU Center for Psychological Services. This ensures a basic level of competency in providing assessment services.

Supervisor feedback on these assessments will be added to the end of year evaluation forms.

**Electives**

An “elective” is defined as any non-required coursework that is directly relevant to a student’s education and training as a clinical psychologist, as determined by the student and the advisor. A “course” is defined as any experience that is awarded credit hours by the university. Courses can be regularly offered courses, special topics (PSYC 892), or practica (PSYC 881). (This list is not exclusive.). Research experiences already required by the program (second-year project, dissertation) cannot meet the elective requirement.

“Directly relevant” is a difficult term to define. Decisions will be made on a case-by-case basis. A good example of an ineligible course is a course in Spanish. An eligible course might focus on mental health issues among Latinos in the United States. A course on accounting is ineligible. A course focused on management issues in health care settings is eligible.

**Eligible courses** include those offered by the Department of Psychology, other departments at George Mason University, and the universities in the Consortium of Universities in the Washington DC Metropolitan Area (see University Catalogue for more information).

The student’s advisor and the Director of Clinical Training (DCT) approve electives. A request for approval of an elective should include a catalogue description of the course, a syllabus, and a brief explanation of how the course meets the student’s education and training needs.

**Externship (PSYC 885-No Course Credit)**

Students may take a Clinical Psychology Externship in the fourth year. Students should consult with their advisors, the DCT, and current senior students in selecting sites and preparing their applications. The externship site should have an established training program, offer a full range of psychological services and training experiences, and provide weekly supervision by a qualified mental health professional.

The Clinical program cannot guarantee a student an externship position, as applicants from the various clinical doctoral programs in the Washington area compete for these positions. The application process usually involves submission of a formal application or cover letter, curriculum vitae, letters of recommendation, and a personal interview.

Students apply in early February to mid-March for positions beginning the following academic year. Students need to contact the desired sites for application information and independently proceed with the application process. Because training experiences, theoretical orientation, and supervisory styles vary widely across externship sites, students should carefully investigate the sites of interest to them before applying and before accepting an offer.
Twice a year the DCT will distribute copies of the Extern Evaluation Form (see Appendix) to students on externships. It is the student’s responsibility to inform the externship supervisor to complete the form and return it to the DCT. Extern evaluations are available for review by the clinical faculty and placed in the student’s file. Students should also complete the Evaluation of Externship Site form (see Appendices) and return it to the DCT.

**Internship**

Internship consists of one year of full-time employment (2,000 hours) as a clinical psychology trainee in any number of different mental health and health care settings, including psychiatric hospitals, medical hospitals, university counseling centers, and community mental health centers. A few sites offer a two-year 20-hour a week internship.

The internship must be in clinical psychology (as opposed to school or counseling psychology) and, ordinarily, must be APA-accredited. A student must obtain the permission of the advisor and the DCT to apply to sites that are not APA-accredited. Prior to application, the student must submit a written request that includes details of the program, the training it offers, and a rationale for application to that program.

Information about training sites is available from the Association of Psychology Postdoctoral and Internship Centers (www.appic.org).

**Eligibility**

A student is eligible for internship when he/she has passed the doctoral comprehensive exams, has an approved dissertation proposal, has gained adequate clinical training, and will have completed all coursework prior to the beginning of the internship. Students are encouraged to complete the dissertation before leaving for internship.

In order to apply for internships, students must have an approved dissertation proposal by November 1 for internships that start the following year.

**Process**

Students intending to apply for internships meet with their advisors in the spring before the application year to discuss their readiness for internship. They then work with their advisors and the Internship Application Committee to select internship sites that will best meet their training needs. In the fall of the application year, students work with their advisors and the Internship Application Committee to finalize their applications and prepare for interviews.

One of the application forms requires a detailed accounting of specific clinical experiences. Completion of this form will be much easier if the student keeps a running log of clinical experiences and hours beginning in their first semester. Please note also that one of the forms is a verification of readiness for internship that must be signed by the DCT. You will need, therefore, to submit a copy of your completed application to the DCT with sufficient time for the DCT to review and endorse it (at least one week).
Students usually receive invitations for interviews by internship programs during December. Interviews start in December, but more typically occur in January. Both internship programs and student applicants then submit rankings expressing their preferences, usually in early February. These rankings are submitted to a computerized Matching Program coordinated by APPIC. The results of the computerized Matching Program are released in late February on a single designated Match Day. At that time, students are informed of the internship site with which they have been matched, and then must contact the site to accept and make arrangements for the internship year. Students also should inform the DCT and their advisors about the results of their internship application.

Applicants not matched through this process then participate in a second phase of the Matching Program (which mirrors the same process as the first phase, only with phone interviews and a shorter timeframe). Any applicants who do not match during the second phase can participate in the APPIC Clearinghouse, which provides information on programs that still have vacancies to applicants who have not matched. The Clearinghouse is less formalized, with applicants and sites able to make decisions about offers and acceptances on a case-by-case basis with no set timeline.

A student may not arrange his/her own internship outside of the APPIC matching or Clearinghouse process without prior consultation with and permission of the advisor and the DCT.

Evaluations of the student’s performance are provided by internship supervisors at the end of the internship year, reviewed by the DCT and clinical faculty, and placed in the student’s file. Internship directors use their own evaluation forms, not a program form. Upon completion of the internship, an internship official should fill in and sign the Internship Completion Form.

**Internship Registration**

During internship, students must register for at least one dissertation credit (PSYC 999) per semester. If the student has completed a dissertation and turned in the final copy to the library, the student does not need to register for a dissertation credit. Any student wishing to be considered full-time while on internship must register for ZREG 80 Clinical Internship. Contact the Graduate Program Coordinator, Darby Wiggins (dwiggin3@gmu.edu), for more information about registration.

**Program of Study**

Students are required to prepare a Program of Study (see Appendices) that indicates the courses the student has taken and plans to take to satisfy graduation requirements (but not semester-by-semester). This is a University requirement and must be completed and approved before the student may advance to candidacy. Thus, students complete the Program of Study form and submit it for approval by the end of the fourth year. The advisor, DCT, and Associate Chair for Graduate Studies must approve the Program of Study. Students should submit an electronic copy to the Graduate Program Coordinator for review prior to obtaining signatures. Students should also retain an electronic copy for their records. Students should meet with their advisors before the end of the first year to review the Program and Study and develop
a plan for the next several years (e.g., electives, externship).

**Reduction of Degree Requirements**

Students may apply for a reduction of up to 30 hours of doctoral coursework based on prior graduate coursework. To do so, the student must present documentation and written justification for these reductions. Documentation consists of the following information:

1. Course title and a transcript showing the grade for the course.
2. A copy of the catalog description of the course.
3. A syllabus for the course or a list of topics covered in the course.
4. Identification of the text(s) used in the course.
5. A written description of how the course(s) fits into a coherent program of study.

- Requests for reductions are best made early, but are due by the beginning of the third year of study.
- The advisor, DCT, and Associate Chair for Graduate Studies approve requests for reductions and forwards them onto the Graduate Programs Coordinator for processing of the Reduction of Credit Form.

**Outside Employment/Assessment for Pay**

A student who seeks employment involving direct provision of clinical services in a setting that does not have a training relationship with the Clinical program (e.g., a private practice) must submit a written request to the advisor and the DCT prior to accepting such a position. This request must include a description of the job tasks, number of hours per week the student plans to work, a summary of the student’s training and education experiences that establish his/her competence for the position, and a description of the supervision he/she will receive. Students cannot begin such employment without the approval of the advisor and the DCT. Students are encouraged to consult with the DCT prior to entering into discussions with outside employers.

Students who engage in employment activities of a psychological nature must comply with the American Psychological Association Ethical Principles and the regulations of the Virginia Board of Psychology. The DCT may solicit evaluations of graduate student performance in these positions.

Once students become eligible according to Center policy, they may also wish to conduct assessment at the Center for Psychological Services for pay. Students should carefully consider how such activities fit into their career goals and progress in the program, taking care not to become overloaded. Each year, in order to facilitate advisor-advisee planning, students complete the Outside Clinical Work Agreement (see Appendices), review it with their advisor, and return the signed copy to the Graduate Programs Coordinator, Darby Wiggins.
VI. THE ADVISOR

The Advisor-Advisee Relationship

The advisor serves a number of functions. He/she helps the student determine the schedule of classes for each semester; answers questions about the program; serves as the student’s advocate; helps guide the student in the selection of specialty and research interests; helps the student develop a Program of Study; helps the student in decision-making regarding externship and internship applications; helps with the formation of the Dissertation Committee; provides feedback to the student following departmental student evaluations made at the end of each semester. The advisor also is the first point of contact if problems arise and should be consulted before program changes are made. Typically, but not always, the advisor serves as the student’s research mentor and dissertation supervisor. The student shares in the responsibility for developing a relationship within which he/she may achieve his/her academic goals.

Assignment and Selection of Advisors

Entering students are initially assigned an advisor by the DCT based on a best-fit match between student and faculty research interests. The advisor helps the student become oriented to the program and answers questions on an as-needed basis.

The student may later change advisors if his/her research interest change. Both student and advisor are free to terminate the relationship if it proves unsatisfactory to either. The student must inform the DCT and the Graduate Programs Coordinator if he/she decides to change advisors.
VII. RESEARCH EXPECTATIONS

Students become involved in research early in the program and make steady progress toward completion of the dissertation, as follows:

(1) During the first semester of study, each student will work with a research advisor and begin discussions of research interests and possible dissertation topics.

(2) Under the supervision of their supervisor, students develop a research proposal during their first year. This is a course requirement. This proposal is submitted to the clinical faculty through the letter of intent procedure described below.

(3) Students are expected to maintain regular contact with the research advisor. Different advisors will have different expectations as to whether this contact involves individual meetings, group meetings, phone or e-mail contacts, and/or regular submissions of written material.

(4) At the end of each spring semester, students complete a Research Activity Report (See Appendices) summarizing their research activities during the year and email or hand the report to the program’s administrative assistant.

(5) By September 1 of the beginning of the third year, students are required to complete, under the direction of the research Advisor, an empirical research project consisting of the collection of original data or secondary analysis of data that have already been collected, and write an APA-formatted article suitable for peer-review based on the research project.

(6) All students must complete a doctoral dissertation (See section XIII).

(7) The GMU Human Subjects Review Board must approve all research before data collection can begin.

(8) Students and faculty will participate in Wednesday bi-weekly lunchtime brown bags which will provide students with opportunities to present completed research (third-year students present their second-year projects in the fall semester), and to discuss topics relevant to research (methods, communication skills, funding, etc.).
VIII. LETTER OF INTENT PROCEDURE

One of the first stages in proposing your second year project or dissertation will be the submission of a letter of intent (LOI) that will be circulated to all members of the clinical faculty. The LOI should be a maximum of three pages. This research proposal or LOI should address the significance of the problem being addressed, methodology, and anticipated results. Before submission, please go over the LOI with your primary advisor. Their feedback is not only allowed but strongly recommended prior to submission.

Faculty will respond within two weeks of the submission of your dissertation LOI and within a month of the 2nd year project LOI, using the rating form below. The benefits of a LOI include the (1) assurance that your research efforts will be dedicated to producing research that will make a novel contribution to the field, (2) multiple perspectives and orientations to view your ideas and the avoidance of insular thinking from a particular lab, mentor, and student, and (3) constructive feedback before you invest substantially into a project.

For first year students, the submission deadline for the LOI for your second year project is August 1st. Please know that can submit your LOI anytime before this deadline (and this is encouraged). You will meet with your advisor to discuss and address feedback from the faculty. If the second member of your second year project committee or dissertation has been decided it is recommended to go over the feedback with them as well. It will be up to the advisor to make a final decision of how to proceed.

For your dissertation, there is no firm deadline as different students will be on different schedules. Nonetheless, please be aware that you will always need more time for revisions than you expect.

**LOI Review Form**

Faculty check one of the following for each criterion, and add their comments as appropriate:

- Below threshold
- At threshold
- Above threshold
- Not enough information to rate
- Rater does not have sufficient expertise to rate or comment

**Criterion 1:** Rate the quality of the background, study justification, and conceptual framework (Significance of the Study).

**Criterion 2:** Rate the potential for a successful study to contribute to the scientific literature.

**Criterion 3:** Rate the feasibility of the project.

**Criterion 4:** Rate the quality of the methods overall.

**Criterion 5:** Rate the quality of the limitations acknowledgement and contingency plans.

Please offer any additional overall comments.
IX. THE CLINICAL PRACTICUM SUPERVISOR

The Supervisor-Supervisee Relationship

It is the responsibility of the supervisor to provide feedback and guidance, evaluate the student’s clinical skills, and serve as a role model during the early development of the student’s clinical skills.

The supervisor supervises the student’s work with psychotherapy and/or assessment clients. The number and type of clients to be seen by students depends on the course/practicum experience, and is established at the beginning of the course/practicum. In addition, the comprehensive assessments completed with Center clients during the second year must be completed within eight weeks of the assignment.

The nature of the supervision experience will vary among supervisors. Different supervisors may emphasize different clinical techniques and theoretical approaches. In addition, the format of supervisory sessions may differ. The form in which clinical material is presented and discussed also will vary among supervisors (e.g., listening to taped sessions versus reading typed transcripts). There are some basic similarities in what supervisors will do, as specified in Supervisor’s Responsibilities (below).

The supervisor evaluates the student’s clinical skills at the end of each semester and completes the Supervision Evaluation Form (See Appendices), which becomes part of the student’s permanent record.

Students also evaluate the supervisors at the end of each semester using the Practicum Supervisor Evaluation Form (See Appendices). These evaluations are submitted to the DCT.

Supervisor Responsibilities

1. Knowledge about the use and interpretation of the major assessment instruments/strategies routinely used in the clinical assessment courses and practica, including:
   - WAIS and WISC
   - Child Behavior Checklist
   - BDI
   - Diagnostic interviewing
   - MMPI and PAI
   - Woodcock-Johnson

2. Familiarity with the APA Ethical Code.
3. Listening to recordings of students’ interactions with clients on a regular basis. The way in which tapes are used as a supervisory tool will vary among supervisors.
4. Providing at least 60 minutes of supervision per week.
5. Providing ongoing feedback to each supervisee either verbally or in writing.
6. Completing the Supervision Evaluation Form and reviewing it with the student at the end of each semester.
7. Distributing the Practicum Supervisor Evaluation Form to their supervisees at the end of
each semester.
8. Helping/training students to use consultants, including other members of the faculty.
10. Attending the Center for Psychological Services Orientation at the beginning of the Fall semester.
11. Maintaining a professional manner in connection with clients and supervisees. This includes returning phone calls and replying to emails promptly, being on time for meetings, spending adequate time on each case, and reviewing and initialing client file entries.
12. Returning reports, progress notes, and other written material to supervisees in a timely manner. Supervisors are required to provide feedback to students on drafts of psychological assessment reports within one week of receipt of the report.
13. Reviewing with students the lists of supervisors and supervisees’ responsibilities and the forms used for evaluation, during the first supervision meeting of the year.

Supervisee Responsibilities

1. Bringing recordings of therapy and assessment sessions or process notes to supervision as requested by the supervisor.
2. Making sure that assessment instruments and scoring have been checked by the appropriate Center staff before they are presented in supervision.
3. Promptly completing psychological reports, process notes, intake and termination summaries and other written material.
4. Making and maintaining client contacts in a prompt and professional manner.
5. Familiarity with the current APA Ethical Code.
6. Familiarity with the policies and procedures of the Center for Psychological Services.
7. Attending the Center for Psychological Services Orientation at the beginning of the Fall semester.
8. Treating clients and supervisors with respect and professionalism, including being on time for supervision.
9. Being prepared for supervision, including reviewing recordings ahead of time, and formulating questions for the supervisor.
10. Completing and turning in to the DCT the evaluation of the Practicum Supervisor Evaluation Form.
X. THE CENTER FOR PSYCHOLOGICAL SERVICES

The George Mason University Center for Psychological Services (formerly the Psychological Clinic) has been in operation since 1976 and is the primary training facility for students completing practicum requirements in the clinical psychology doctoral program and school psychology MA/CAGS program. The Center is located off campus, within the northern Virginia community to allow for easier access by clients who are from northern Virginia, the District of Columbia, and Maryland. Center services include intellectual, academic, and psychological assessments; short-term and long-term psychological interventions for individuals, couples, and families; mental health evaluations and a variety of psychological consultations. All clients who are seen at the Center are asked to participate in the Center research database. In addition, The Center Mission Statement encourages clinical research at the Center.

In addition, Center staff positions allow some students to receive hands-on training in various aspects of mental health administration. The Center staff includes a head administrator and several graduate students who receive stipends for working in various administrative and clinical service positions. The Center Director, Dr. Robyn Mehlenbeck, a licensed clinical psychologist, supervises the staff members.

A Center Handbook describes Center policies and procedures, including guidelines for personnel using the Center (e.g., confidentiality, supervision, scheduling), procedural guidelines for assessment and psychotherapy, commonly used forms, and ethical principles of psychologists. The Center orientation is held each year on the Friday before the start of the Fall semester classes. All clinical and school psychology students attend this orientation yearly.

Proper attire: The Center for Psychological Services has a professional dress code. Students and faculty in the suite during service hours are expected to abide by the dress code, even if he/she is not working with a client. Prohibited at the Center are blue jeans, shorts, mini-skirts, tank tops/camisoles (unless covered with an over-shirt of some sort), sneakers, flip flops, caps, and any attire that is excessively revealing. Clients come to the Center to consult with a professional. Attire that is too casual or too revealing takes away from the professional atmosphere and can influence a client's perception of the quality of service and client confidence in the person delivering the service.

Criminal background investigations: Because the Center provides services to minors, in accordance with University and Department of Psychology policy, all incoming clinical doctoral students will be subject to a criminal background investigation before the beginning of the Fall semester. More information on this policy can be found at: http://www.gmu.edu/facstaff/policy/newpolicy/2221adm.html
XI. CONFERRAL OF MASTER'S DEGREE

Students who have been admitted to the doctoral program with a concentration in clinical psychology may apply for the M.A. in Clinical Psychology upon completion of the 31 hours of coursework designated below. Students must also be in good standing in the program, as determined by the DCT.

The M.A. is awarded only to students admitted to the clinical doctoral concentration. The M.A. may qualify the student for a larger salary in University positions, as well as increasing his or her eligibility for off-campus employment.

The student must initiate and complete all the administrative procedures for obtaining the Master’s degree, including the following:

1. Checking and/or updating your graduation expected date on Patriot Web:
2. Submitting a “Graduation Intent Forms (GIFs) via Patriot Web
3. Requesting to change all “IP” to final grades.

Requirements:

Psychological Assessment I (PSYC 810) (4)
Psychological Assessment II (PSYC 811) (4)
Scientific Foundations of Clinical Psychology I (PSYC 822) (3)
Introductory Helping Skills and Motivational Interviewing (PSYC 860) (3)
Advanced Statistics I (PSYC 611) (4)
Advanced Statistics II (PSYC 612) (4) (or substitutions as described in Quantitative Options)
Methods for Social Research (PSYC 644) (3)
Cognitive Behavioral Therapy for Youth (PSYC 861) (3)
Cognitive Behavioral Therapy for Adults (PSYC 862) (3)
XII. THE COMPREHENSIVE EXAMINATION

The University requires that all doctoral students undergo a written comprehensive examination, with the option of an oral examination in addition to the written examination. The comprehensive examination in Clinical Psychology consists of two parts: (1) a research paper to evaluate the student’s research knowledge and abilities and (2) a clinical paper and oral examination to evaluate the student’s clinical knowledge and abilities.

The Research Comprehensive Examination

By September 1 of the third year, students are required to complete, under the direction of the research advisor, an empirical research project involving either the collection of new data or an original analysis of existing data. The project must be initiated after the student has entered the clinical program and must be approved by the research advisor before work on the project can begin.

By August 1 of the second year, the student will write a letter of intent (see relevant section in this handbook) and submit it to faculty for feedback. The student will then write by September 1 of the third year an APA-formatted article that is suitable for submission to a peer-reviewed journal. (Actual submission to a journal is not required as part of the examination).

The article will be graded by two members of the clinical faculty—the research advisor and one other member of the clinical faculty to be selected by the student and the advisor. It is recommended that this second committee member function as a consultant during the formulation and post-feedback review of the LOI.

The article will be graded using the Clinical Research Comprehensive Examination Feedback Form (See Appendices). The following scale will be used for determining passing and failing of the article.

- Strong Pass……3.5 to 4.0
- Pass…………….2.5 to <3.5
- Marginal Pass 2.0 to < 2.5
- Failure………..< 2.0

The two readers will complete the feedback form jointly and sign the form. The advisor will review the form with the student, who will then also sign the form. The signed form will be submitted to the DCT by October 1.

In the fall semester of the third year, each student will give a brief presentation (up to 30 minutes) based on the article to a meeting of the Clinical Faculty and students. The presentation will not be graded.

Procedures following failure of exam:
- The clinical faculty as a whole will review the article and meet to discuss and make recommendations for a remediation plan.
By November 1, the advisor and student will submit to the DCT a remediation plan based on the recommendation of the clinical faculty. This plan will consist of specific revisions that must be made in the article in order to earn a passing grade. The plan may also consist of remediation experiences such as additional coursework, directed readings, consultation with statistical consultants, etc. The plan must be signed by the advisor and student and dated.

- A revised article must be submitted by the following September 1.
- The same two-person committee will review by October 1 the resubmitted article following the procedures used in the first review.
- *Failure to obtain a passing grade on the revision will result in dismissal from the Clinical program.*

The Clinical Comprehensive Examination

Overview and eligibility

The clinical comprehensive exam includes both a written and an oral component. A student selects a client for whom s/he has conducted an intake within the past several months, writes a conceptualization of this client’s case, and presents two videotaped portions of a session with this client to a faculty committee assigned by the DCT. The committee then examines the student for basic clinical skills and case conceptualization.

The oral exam can be completed anytime after the end of Fall semester of the 3rd year, and must be completed by the end of the Spring semester of the 3rd year. To be eligible, the student must have completed all coursework required in the first two and a half years of the program with a grade of “A” or “B”.

Detailed Student Instructions

1. After the end of Fall semester of the 3rd year, you will select a therapy case to use for your Clinical Oral Comprehensive Exam.
   a. The case should be one where YOU did the intake (not a transfer case)
   b. The case should NOT be one where the client has been extensively tested and diagnosed elsewhere, unless you also did your own testing and diagnosing.
   c. The intake should have occurred within the past four months.
   d. If you are having difficulty identifying a case that meets these specific parameters, contact the DCT.

2. Once you have selected a case and have decided what theoretical frameworks you will use, fill out the Case Description Sheet (see Appendix) and send it to the DCT, who will approve the form or request any clarification that is needed within a week. After final approval of the form, the DCT will assign you a committee.

3. You will write a paper on the case you have selected. The paper should be a maximum of 15 to 20 pages of text (double-spaced, 12-point font, 1-inch margins, APA style); however, it CAN be less! Succinct writing is valued. The reference list is not included in the page total.
The paper should include three primary sections:

a. **Section 1: Intake assessment**
   i. Presenting complaint
   ii. Relevant history
   iii. Procedures used (including clinical interview, any measures, collateral info, etc.)
   iv. Diagnosis (5 axes)

b. **Section 2: Conceptualization/Formulation**
   i. In the conceptualization/formulation section, you will present an explanation of the development and maintenance of the client’s problems. This explanation should be rooted in theory.
      1. We are defining theory as a coherent understanding of the etiology and maintenance of problems that uses a distinct terminology. It is not just a collection of techniques for treating problems, but is an explanation of them. Examples (NOT an exhaustive list) of theory include: CBT, ACT, Family Systems, Attachment, Psychodynamic, Humanistic, Existential, and Feminist.
   ii. This section must include at least two theories. You may use the theories to present two distinct conceptualizations, or you may integrate them into a single conceptualization. Note: you can include more than 2 theories if desired.
   iii. Be sure that you use appropriate terminology and citations to demonstrate your understanding of the theories being used.

c. **Section 3: Treatment Plan**
   i. Should be tied to diagnosis and conceptualization.
   ii. Should include specific targets and procedures.
   iii. Should include a consideration of common factors in this particular case.
   iv. Note any anticipated challenges in carrying out the treatment plan.

d. **Integration of research and clinical elements**
   i. Wherever relevant in the three sections, be sure that you integrate the relevant research. This should involve synthesis of information, rather than citations of individual studies (unless individual studies are all that exist for a specific piece of information).
   ii. Some examples of research integration might include (a) literature supporting the use of particular techniques or measures, (b) literature supporting a particular framework, (c) literature suggesting comorbidities for particular diagnoses.

4. Consultation with faculty or peers on the comps case will be limited to guidance in seeking out resources, rather than assistance in writing the paper. When consulting with anyone (faculty or peers) about a potential comps case, you should make the faculty member aware that it may be a case you will write about for comps. All work on the written document should be independent, with no consultation from any outside sources.

5. Once you have your assigned committee, consult them to schedule the oral defense.
a. Meetings will last approximately 2 hours. The committee will meet for the first 30 minutes, without you. You will then be present for the oral defense, which should last approximately 1½ hours (this includes time for feedback).
b. Reserve a room at the clinic for 2.5 hours, to allow for extra time in case it is needed.

6. A minimum of one week before the meeting, e-mail a password-protected copy of your paper (which should include no client-identifying information) to your committee members.

7. Before and during your defense, your committee members will also evaluate your helping skills by watching two sections of a session with the client you selected for the comprehensive exam. You will choose one 10-minute section you would like your committee to watch, and the committee will select another 10-minute section from the same session.
   a. The committee will watch the 10-minute section that you select immediately before the defense (during the 30-minute window when they meet without you). Make sure your committee has the DVD with information about your chosen section by the time they meet.
   b. The committee will select a second 10-minute section from the same DVD, which they will watch with you during the oral defense.

8. The oral defense portion of the exam will have two parts.
   a. The first part will focus on clarifying or elaborating issues raised in the written paper.
   b. The second part will focus on your general helping skills, as demonstrated in the sections of the session your committee has seen (see point #7 above).

Summary of Timeline:
- Choose case and submit form after end of fall semester
- DCT responds with committee assignment a week after form is submitted.
- Student makes appointment with committee for defense. Appointment is a maximum of 8 weeks later.
- Student submits paper to committee at least one week before the meeting.
- Student and faculty meet immediately after defense for verbal feedback.
- Faculty give written feedback to student one week later.
- The defense (but not necessarily the revision and feedback process) must be completed by the last day of finals of the Spring semester of the third year.

Faculty committee assignment and responsibilities
1) When students submit the Case Description Sheet to the DCT, the DCT will review the case, assign two faculty members to the committee, and appoint one of them as chair. The Chair is responsible for written feedback and administrative paperwork. Committee
members are assigned based on their expertise with the potential conceptualizations expected based on the Case Description Sheet. One committee member will be a faculty member who does ongoing supervision at the Center. However, the direct supervisor of the particular case will not be on the committee. A student who has good reasons to believe that one or both of the members of his/her committee will not be able to judge his/her performance in a fair and unbiased manner can appeal to the DCT for a change in the composition of the committee.

2) Committee members are expected to read and grade the written portion of the clinical oral comprehensive exam prior to the oral defense date.

3) On the defense date, committee members will meet 30 minutes before the actual defense is scheduled. During this 30 minutes, the committee will:
   a. Compare and discuss their grades on the written paper, and discuss questions that should be asked during the clarification portion of the oral defense (approx. 10-15 minutes)
   b. Watch the 10-min segment of a session chosen by the student for helping-skills assessment, and discuss questions that should be asked during the helping-skills evaluation portion of the oral defense (approx. 15-20 minutes)

4) At the time of the oral defense, the student will join the faculty. It is expected that the oral defense will take approximately 1 hour to 1 hour 15 minutes, including:
   a. 30-45 minutes for clarification of written exam
      i. Graded based on domains #1-4 (see grading criteria in appendix)
   b. 15-30 minutes for helping skills video
      i. Graded based on domain #5 (see grading criteria in appendix)

5) After the oral exam is complete, the committee will meet for an additional 10-15 minutes to discuss any need for re-writing and final grades, based on grading criteria (see appendix). Faculty will provide written feedback, including any instructions for re-writing, within a week. Once grades for all sections of the report are final, copies of the grading sheet will be provided to both the student and the DCT and places in the students file in the Graduate Programs Coordinators office.

**Grading and Their Consequences**

The examination has four possible outcomes—fail, rewrite/remediation, pass, and high pass (see Appendix for details on grading process and grading form). A grade of remediation/rewrite will come with specific instructions and a deadline recommended by the committee, with consultation from the clinical faculty as needed. The remediation/rewrite is the responsibility of the student, and will be evaluated by the committee after completion. The committee will have 2 weeks to evaluate the rewrite/remediation product and provide a final grade and feedback to the student. A student who fails must be re-examined with material from a new client with the same specifications as above. A student who fails this second oral examination will be terminated from the Clinical program.
Grading Criteria for Clinical Comprehensive Exam

Primary Domains of Assessment

1. Ability to conduct appropriate intake assessment
   a. Gathering relevant diagnostic information
      • Accurate use of DSM – attention to current/recent symptoms, history
      • Inclusion of all axes
      • Appropriate attention to likely comorbid diagnoses
   b. Gathering relevant information for conceptualization/formulation
      • Example: information regarding thoughts and behaviors for CBT conceptualization
      • Example: thorough information regarding relationships for IP conceptualization
   c. Use of appropriate approaches to gathering information
      • Consideration of structured interview vs. unstructured
      • Consideration of collateral information where appropriate
      • Consideration of measures (comprehensiveness vs. incremental validity)

2. Conceptualization/Formulation
   a. Demonstrates knowledge and use of more than 1 theoretical framework
      • Note: This can be done via presentation of two or more separate conceptualizations or a conceptualization that integrates two or more separate theories
   b. Demonstrates knowledge of theory supporting frameworks used
   c. Includes discussion of which framework is recommended (including integrative framework, if appropriate) and why

3. Treatment plan
   a. Appropriately tied to both diagnosis and conceptualization/formulation
   b. Includes specific targets and specific techniques for those targets
   c. Includes how common/non-specific factors may be relevant to the case and execution of the treatment plan
   d. Includes discussion of anticipated roadblocks

4. Integration of research literature in clinical thinking and planning
   a. This aspect will stretch across all 3 areas above, and students may emphasize it more in some areas than in others.
   b. Some examples of how this might be included are provided below, but this list is not meant to be exhaustive, nor is it meant to imply that all of these should be addressed (in fact, they likely cannot all be addressed in any one case).
      • Research regarding common comorbidities to assess, given presenting problem
      • Research supporting the theoretical frameworks selected
      • Research supporting choice of measures
• Research supporting which framework is recommended for treatment (may include consultation of research in related areas, when no research for the specific issue is available)
• Research supporting the importance of “common factors”

5. Clinical/helping skills (evaluated via video clips and oral evaluation only – see below)
   a. Ability to build rapport
   b. Ability to demonstrate empathy
   c. Listening skills balanced with appropriate directiveness for an assessment

Grading Rubric

Each domain will be graded using a 4 point scale:

0 = Fail Inarticulate, vague, clearly below what is expected of a student at this level
1 = Rewrite/Remediation Underdeveloped, clear area of significant weakness, below what is expected of a student at this level
2 = Pass Clear, complex, concise, expected performance of a student at this level
3 = High Pass Exceptional, better than expected of a student at this level

Grading Process

1. Domains 1-4
   a. Each committee member reads the written product and assigns a grade for each major domain
   b. Committee members compare ratings in pre-defense meeting, generate questions for first half of oral defense
   c. After the oral defense, committee members re-visit any areas of concern or disagreement to assign a final grade on each domain
      • Note: Adequate performance in oral portion cannot override clear inadequacies in written component
      • Can help clarify, overcome marginal areas of concern
      • Can help clarify potential remediation/rewrite assignment for clear areas of concern
   d. Any domain scored a 1 must be addressed via a rewrite or some other remediation plan specified by the committee
   e. One domain scored a 0 results in either a rewrite/remediation plan or a failure of the comprehensive exam, pending the decision of the committee.
   f. Two or more domains scored a 0 result in an automatic failure of the comprehensive exam.
   g. Significant grading discrepancies among committee members may be addressed by the clinical faculty

2. Domain 5
   a. In the pre-defense meeting, the committee members watch one 10-minute segment of an intake session for the case, selected by the student. During the second half of the
oral defense itself, the committee will watch a second 10-minute segment that is selected from the same session by the committee.

b. Committee members generate questions about the first 10-minute segment during the pre-defense meeting. Questions on the second 10-minute segment are generated while watching it with the student, during the second half of the oral defense.

c. After the oral defense, committee members assign a final grade for Domain 5.

d. A score of 1 results in a remediation plan and/or the need to retake the second half of the oral evaluation.

e. A score of 0 results in a failure and a remediation plan. The second half of the oral evaluation must be retaken with a new case.

3. Example rewrite/remediation plans

   a. Rewrite a particular portion of the written component, based on feedback from the faculty
   b. Write an addendum that addresses an area of weakness (e.g., summary of research on common comorbidities for a particular diagnosis)
   c. Retake the basic helping skills course
   d. Have additional therapy supervision targeting the problem areas for a specified time period (e.g., one semester)
XIII. ADMINISTRATIVE ACTIONS ASSOCIATED WITH STUDENT EVALUATION

At the end of each semester, the Clinical Faculty meet to evaluate students. Shortly after the May meeting, each student will receive the Summative Evaluation form completed by her/his advisor, summarizing the results of the evaluation, and together the student and advisor will specify future goals for the coming year. In exceptional circumstances, additional outcomes include the following (except dismissal, which is a University decision):

**Commendation**

Students may be commended when faculty perceive them to be making outstanding progress in one or more aspects of their work in the program.

**Letter of Concern**

When problems of any kind are identified by faculty, the student may receive a letter that describes the concerns about his/her performance or progress in the program. Such communication should serve as an impetus for the student to contact his/her advisor to discuss these concerns and appropriate ways to address them.

**Probation**

A student is placed on probation when the faculty has serious concerns about his/her progress in the program or his/her professional conduct. Probation increases the likelihood of termination from the program. When a student is placed on probation, he/she will be given in writing the specific reasons for the decision and the specific conditions that must be met for removal of probation. The student and his/her advisor will be required to develop a written plan for remediation. At the end of the probationary period, the Clinical faculty will meet to determine whether or not the student’s progress has been sufficient to warrant (1) taking the student off probation, (2) continuing probation, or (3) termination of the student from the program.

**Termination**

A student may be terminated from the Clinical program when the faculty judge that the student is not making sufficient progress in the program and is not an appropriate candidate for a doctoral degree in Clinical Psychology. Causes for such action include, but are not limited to, unsatisfactory grades in courses, inadequate progress toward the completion of the degree, and failure to perform competently in practicum, externship, and internship settings. Termination means that the student may no longer enroll in coursework as a student in the Clinical program and cannot earn the PhD with a concentration in Clinical Psychology. It does not, however, preclude the student from applying to or taking courses in other programs of the Department of Psychology or the University.

**Dismissal**

This is a formal action taken by the University, usually as a result of accumulation of
more than 9 hours of unsatisfactory graduate grades. The University may also dismiss students if
they exceed the time limit for program completion after advancement to candidacy (five years,
including internship). Violations of the University Honor Code may also result in dismissal.
Dismissal disqualifies students from all further courses and programs at the University.

**Student Awards**

*Outstanding First-Year Student Award.*

The clinical faculty usually gives this award to one first-year clinical student who has
demonstrated excellence in more than one of the following areas: coursework, research,
teaching, assessment, job-related work, program service, or other training-related activities.

*Outstanding Advanced Student Award.*

The clinical faculty usually gives this award to an advanced clinical student who has
demonstrated excellence in more than one of the following areas: coursework, research,
teaching, assessment, psychotherapy, consultation, supervision, administration, job-related work,
program service, or other training-related activities.
XIV. ADVANCEMENT TO CANDIDACY & TIME LIMIT TO COMPLETION

Before doctoral students may be advanced to candidacy by the Dean, they should have (a) completed ALL COURSEWORK except for proposal/dissertation hours, including electives; (b) been certified in all doctoral research skills required; (c) passed the comprehensive candidacy examination; (d) an approved POS; and (e) been recommended by the doctoral program director. If the student has not completed any course other than dissertation proposal or dissertation, the student is not allowed to advance.

When a student’s record is reviewed, if the student has completed all courses listed on the Program of Study, he or she will be permitted to advance. If the student has not completed all courses, he or she will not allowed to advance until the remaining course(s) has been completed.

Students wishing to advance to candidacy should ensure they meet all requirements then request that their adviser recommend them for advancement to their program director. As soon as the above steps are completed, making sure that the adviser and director approve their advancement is the responsibility of the student. Assuming the program director approves, he/she should notify Darby Wiggins in the Graduate Programs Office of their approval. Once received in the Graduate Programs Office, the request will be recorded and forwarded onto the Dean’s Office for approval.

Doctoral students are expected to advance to candidacy in no more than six years and to complete all other degree requirements for graduation in no more than five years from the time of advancement to candidacy. Students who will not meet published time limits because of circumstances beyond their control may petition for an extension. Extensions to the time limit for advancement to candidacy may be granted for a maximum period of one calendar year. The one year extension granted to advance to candidacy will run concurrently with the five years provided to complete the dissertation. The total time limit to degree will not exceed eleven (11) years even for those students granted a time extension for advancement to candidacy. Students who are given permission to re-enroll following an absence from Mason may not count the time limits as beginning on the date of re-enrollment. Failure to meet the time limits or to secure approval of an extension request may result in termination from the program.

Advancement will only occur during the add/drop period at the beginning of each term. Requests for Advancement must be made no less than 2 weeks prior to the first day of the term.
XV. THE DOCTORAL DISSERTATION

All students are required to complete a dissertation – an empirical research project that contributes to scientific knowledge in psychology. This contribution is generally achieved through the exploration of a problem on the boundaries of knowledge in the field. The dissertation involves the formulation of a research question or problem, the design of a study to answer the question, the collection and analysis of data, and the interpretation of this data in light of the research question. Specific guidelines for the formatting and submission of your dissertation can be found on the University Dissertation and Thesis Webpage.

Students must take at least 12 hours of dissertation credit, including at least 3 hours of Dissertation Proposal (PSYC 998) and at least 3 hours of Dissertation (PSYC 999). No more than 24 hours of 998 and 999 can be counted toward the hours required for the PhD.

Dissertation Registration Requirements

**PSYC 998: Dissertation Proposal:** A student may sign up for a minimum of 1 hour of PSYC 998 at any time with permission of the advisor. Enrollment in 998 does not have to be continuous once begun. Students must earn a minimum of 3 hours of PSYC 998.

**PSYC 999: Dissertation:** Students may not begin enrolling in PSYC 999 until they have:

1. An approved dissertation committee as documented in the Dissertation/Committee Composition Form;
2. Successfully defended their dissertation proposal;
3. A copy of the Dissertation Proposal Signature Sheet is on file with the Dean’s Office (this is done by submitting a signed copy of the form along with a hard copy of the proposal to the Graduate Programs Coordinator);
4. All IP grades for PSYC 998 changed to S and:
5. Advanced to candidacy.

Students are required to enroll in 3 credits of dissertation (PSYC 999) in the term immediately preceding the one in which they submitted their Dissertation Proposal Cover Sheet to the Graduate Program Coordinators Office. In each subsequent semester thereafter, students are required to enroll in at least 3 credits of dissertation until they have completed the minimum 12 hours combined. Only after completing the minimum combined 12 hours of proposal and dissertation combined, may a student enroll in 1 credit of dissertation per term. During this period, the University will only certify you as having part-time enrollment status if you are enrolled in 4.5 credits. Full-time status is awarded when a student is registered for 9 credits or 6 credits with a 20-hour teaching assistantship. (Loans from external sources may have a more stringent definition of “full-time study”. ) International students must follow registration rules set forth by the Office of International Programs and Services (IOPS): [http://oips.gmu.edu/](http://oips.gmu.edu/)

You are strongly encouraged to discuss your proposal and dissertation credit plans with your advisor to avoid enrolling in unnecessary credits.
Students on internship must maintain continuous registration in PSYC 999. When on internship, a student will be certified as full-time provided they contact Darby Wiggins (dwiggin3@gmu.edu) and request a ZREG 80 for each term they are on internship.

Students must maintain continuous registration until final copies of the dissertation have been submitted Fenwick Library. This policy helps ensure that students remain active and gives them access to use of Fenwick Library, Johnson Center Library, Consortium libraries, and other campus facilities, as well as the advice and feedback of faculty members.

For 998 registrations, contact Darby Wiggins, Graduate Program Coordinator, for a call number. The call number will be used to register online.

For 999 registrations, email chssgrad@gmu.edu with number of credits and the name of the dissertation committee chair. A reply email will be sent with a call number.

**The Dissertation Proposal**

**Selection of Advisor**

Dissertation projects usually are developed under the direction of the clinical faculty advisor. However, students are free to ask non-clinical faculty members to serve as dissertation advisors. The dissertation advisor must be a full-time tenured or tenure-track faculty member in the Department of Psychology.

**The Dissertation Committee**

The dissertation committee is responsible for supervising and approving the dissertation proposal and the final dissertation. The committee consists of the advisor and at least two other members of the graduate faculty at George Mason University. Graduate faculty members are typically full-time tenured or tenure-track faculty members, although term (non-tenure-track) faculty members also are eligible for appointment as graduate faculty. The student and his/her major advisor select a second member from the Clinical Faculty to serve on the committee. The third member of the committee must be selected from the graduate faculty outside the Department of Psychology. Additional committee members may be selected from inside or outside the University.

The dissertation advisor provides the primary guidance and serves as chair of the committee. The roles and functions of the other members will vary depending on the preferences of the advisor and the other committee members.

If a member of the committee resigns at any point of the dissertation process, the student must immediately find a replacement and notify the DCT. Neither the proposal nor the dissertation can be approved without a complete committee, as specified above.

**Thesis and Dissertation Committee Composition Form**

Once a student has identified those who will serve on their respective committees, they
should have each member sign the *Thesis and Dissertation Committee Composition Form*. The student should obtain both the printed and signed name of each member of their committee along with the DCT and turn the form into Darby Wiggins, Graduate Programs Coordinator, 2013F DKH. Students are strongly advised to submit this form prior to holding a Thesis/Dissertation Proposal defense.

**Writing the Proposal**

One of the first stages in proposing your dissertation will be the submission of a letter of intent (LOI) that will be circulated to all members of the clinical faculty. The LOI should be a maximum of three pages. This research proposal or LOI should address the significance of the problem being addressed, methodology, and anticipated results. Before submission, please go over the LOI with your primary advisor. Their feedback is not only allowed but strongly recommended prior to submission. (See LOI section in handbook.)


Different advisors and committees may have different expectations for the writing of the proposal and different styles of supervision. The student should determine as early as possible these expectations and supervisory styles but generally, students will conduct and write up a theoretical and empirical literature review designed to inform their research question(s). The proposal will be composed of an introduction that includes the literature review of publication quality and a well-articulated methods section. No guidelines can be provided here concerning how long the proposal or dissertation should be, how large the research samples should be, how many drafts should be written, how often one should meet with the committee, how often one should meet with individual members of the committee, how one should resolve differences among committee members, and other such matters. The student should consult with the advisor and the committee on these matters.

**Approval of the Proposal**

The committee members indicate their approval of the proposal by signing the *Dissertation Proposal Signature Sheet*. This signing occurs at the end of a meeting of the committee and the student in which they discuss the proposal and decide on the final design of the study, appropriate data analysis, and other matters. By signing the Dissertation Proposal Signature Sheet, the Committee members indicate agreement that

a. The review of the literature is sufficient for the research problem or question.

b. The hypotheses are clearly stated.

c. The methodology of the study (measures, procedures, subjects) is clearly described and is appropriate for testing the hypotheses.

d. The plan for data analysis is clear and specific and is appropriate for testing the hypotheses.
After approving the proposal, the committee may not require significant modifications to the methodology of the study. The Committee may require, however, additional statistical analyses beyond those planned and an updated literature review for the final version of the dissertation.

After the committee has approved the proposal and signed the Dissertation Proposal Signature Sheet, the student should contact the Graduate Programs Coordinator to discuss obtaining the signature of both the DCT and Associate Chair for Graduate Studies. Once all signatures are obtained, students should forward both the signed Dissertation Proposal Signature Sheet and a hard copy of the Dissertation Proposal to the Graduate Programs Coordinator.

**Data collection may not begin until the proposal has been approved by the GMU Human Subjects Review Board.**

**The Dissertation**

**Conducting the Research**

The student implements the research plan as agreed upon for the approval of the proposal. The student consults with the Advisor on a regular basis and with the Committee as needed.

**Writing the Dissertation**

The student writes the final dissertation with guidance from the Advisor and the Committee. The dissertation will be presented in the form of one (or more) empirical articles in a format suitable for submission to a peer-reviewed journal. The full literature review (from the proposal) will be included as an appendix as another manuscript. Components of the research planned but not suitable for publication will also be included as an appendix.

**Dissertation Defense**

Approval of the final dissertation is contingent upon passing an oral defense of the dissertation before the Committee. The oral defense of the dissertation is the final demonstration that the doctoral candidate has mastered the content and research methods of the discipline.

**Approval to Defend Form**

No dissertation can proceed to a defense until each member of the committee and the Associate Chair have signed the Approval to Defend Dissertation Form, signifying that each has individually read the dissertation draft and has concluded that it is in final form except for minor changes. Dissertations will NOT be scheduled without the submission of this form to the Graduate Programs Coordinator.

**Scheduling the Dissertation Defense**

The oral defense of the dissertation should be scheduled through the Graduate Programs Coordinator who informs the Graduate Dean of the defense at least four weeks before the projected defense date. When scheduling the defense, contact the Graduate Programs
Coordinator if you need to reserve a room. Students affiliated with programs who have existing lab space are encouraged to reserve those rooms. Once a room reservation has been secured, forward the following information onto the Graduate Programs Coordinator for scheduling:

1. Your full name;
2. Date of defense;
3. Location – Building and room number (this is only necessary if you have scheduled a room on your own);
4. Beginning and end time of defense;
5. Dissertation committee members names – please indicate who is Chair;
6. Dissertation title;
7. Approval to Defend Dissertation Signature Sheet. Please note, original or approved electronic signatures are required. Please no email approvals;
8. ½ - ¾ page abstract;
9. Any A/V equipment needs.

Do not ask your Dissertation Committee Chair to schedule your oral defense until your committee has seen and approved your last draft. It is very common for several drafts of the dissertation to be required prior to scheduling your defense and, if all goes well, at least one revision after orals. The dissertation represents the culmination of your program and an important contribution to the body of psychological knowledge. It is the faculty’s responsibility to the field and to you that the final product meets a high standard.

The candidate and all members of the committee should be present at the defense. If a committee member cannot attend the defense as scheduled, the student must notify the Associate Chair for Graduate Studies to discuss alternative means for examination by that committee member.

The advisor chairs the defense and is responsible for directing the examination. The advisor opens the meeting by reviewing the examination procedures. The specific procedures will vary depending upon the wishes of the dissertation committee. The examination typically opens with a presentation of the dissertation research by the candidate. The student should consult with the advisor regarding the preferred length of this presentation. Following this presentation, the committee examines the candidate concerning any aspect of the dissertation and the student’s knowledge of the broader discipline. Only members of the committee may participate in the examination. Other persons present who wish to question the candidate must submit questions in writing to the advisor in advance of the examination.

The defense is open to all members of the University community. The Dean may appoint an observer to attend the defense. Because the defense is a formal academic examination, the University does not permit attendance by family members and friends of the student who are not members of the University community.

Following the examination, the chair asks the student and observers to leave, and the committee discusses the adequacy of the dissertation and of the candidate’s performance. The committee then takes a vote on the outcome of the defense. The chair calls the candidate back.
into the room and privately describes the decision of the committee. No spectators or guests are present during this part of the examination.

Four outcomes of the committee’s deliberations are possible.

a. Pass without changes in the dissertation. The committee signs the approval form, approving the dissertation as is. This is a rare event.

b. Pass with changes. The committee signs the approval form, but with the expectation that the student and the advisor will make specific revisions agreed upon by the Committee.

c. One or more Committee member withholds his/her signature until the student makes specific revisions in the dissertation and submits them to the committee for review. This review may occur by circulating copies of the revised dissertation. The committee also may require a second and final oral defense.

d. Fail. If the student fails the defense, another defense must occur within two months of the first examination. The DCT will terminate a student from the program.

Dissertation Signature Sheets

Students must have the Dissertation Signature Sheet signed by all committee members, their Program Director, Associate Chair for Graduate Studies, and Associate Dean for Research and Graduate Programs. **It is the responsibility of the student to collect all signatures.** Students are encouraged to make appointments to secure signatures with both the Associate Chair (Dr. Jim Thompson jthompsz@gmu.edu) and Associate Dean (Dr. Matthew Zingraff - chssgradstudent@gmu.edu). When obtaining the Dean’s signature, students must bring all paperwork required for submission to the library so that copies can be made. Students who wish to obtain a second opinion on the formatting of their Dissertation Signature Sheet may email it to chssgradstudent@gmu.edu and ask for clarification of the formatting.

Formatting Review and Submission

The library conducts the review for formatting of all dissertations. Students will submit completed dissertations directly to the library and hand all the requisite paperwork (for University Microfilms International and the National Opinion Research Center). For additional information contact the University Dissertations and Theses Coordinator. They can be reached at (703) 993-2222, udts@gmu.edu, or http://thesis.gmu.edu

Dissertation Submission and Fees

Dissertations are generally due to the library by 5pm on the last Friday of classes. For exact dates, please visit the Checklist For Graduation website at: http://chss.gmu.edu/graduate/graduation-checklist/checklists

Specific information on formatting, fees, ancillary forms, types of paper and number of copies required can be found on the UDTS site: http://thesis.gmu.edu/index.html

Late submissions will not be accepted.
XVI. PROFESSIONAL ETHICS

Both faculty and students are expected to abide by the ethical code set forth by the American Psychological Association (see Appendices)

A student who believes that another student or a faculty member has committed an ethical violation should follow the procedures described in the APA Ethical Principles. A confidential consultation can be obtained from the American Psychological Association Ethics Office in Washington, DC 202-336-5500.

Policy on Discrimination

The University does not tolerate discrimination on the basis of age, race, sex, national origin, disability or religious beliefs. A student who believes he/she has been subject to such discrimination should contact the DCT, the Chair of the Department, or the University’s Affirmative Action/Equal Employment Officer (703-993-8730).

Sexual Harassment

The Department of Psychology and the University do not tolerate sexual harassment by either faculty or students. A student who believes that he/she has been subject to sexual harassment should contact the DCT, the Chair of the Department, or the University’s Affirmative Action/Equal Employment Officer.
XVII. GUIDELINES FOR GRADUATE STUDENT GRIEVANCES AGAINST FACULTY

During the course of graduate study, disagreement and conflict may arise between students and faculty either during formal classroom instruction or in the more informal individual instruction that takes place during the supervision of research and practica experiences. Indeed, the nature of the close working relationships inherent in graduate education in psychology, especially in a program with an applied focus, almost guarantees that conflict will arise on occasion.

When such conflict does arise, the Department expects that both the student(s) and faculty involved will conduct themselves in a professional manner. In addition, the Department is committed to ensuring that students and faculty are treated fairly when such disagreements arise. To this end, the Department endorses the following principles and guidelines for resolving disagreements and conflicts between students and faculty regarding instruction, training, and student-faculty relationships. (NOTE: Student concerns about faculty behavior that involves sexual harassment or racial/ethnic/gender discrimination should be handled according to the University guidelines described in the University Catalog.) The resolution of disagreement and grievances will be resolved more effectively if the following principles are kept in mind.

Faculty

1. The professional performance and behavior of faculty is subject to continual evaluation and review, including evaluation and review by students. Student evaluation may, on occasion, involve the resolution of a complaint by a student concerning faculty performance.

2. The Department expects faculty to treat a student's concerns with dignity and respect. Essential to this is listening to a student's concern attentively and nondefensively. Although defensiveness is difficult to avoid when one believes one is being unfairly criticized or challenged, nondefensive listening is the first step toward a successful resolution of a conflict. Nondefensive listening may be facilitated by recognition of the apprehension and anxiety a subordinate (the student) usually feels when confronting a person of power and authority.

Students

1. Faculty and students enter into an educational alliance whose objective is the imparting to students of knowledge and skill. As part of this alliance, faculty are responsible for setting standards for mastery of this knowledge and skill and for evaluating students' progress toward meeting these standards. Students in professional psychology programs provide services to various types of clients (individuals and organizations), and faculty are ultimately responsible for the quality of these services. Thus, faculty evaluation of student performance and progress provides assurance of the quality of these services.

2. Graduate education is, by nature, difficult, demanding, and stressful (If it wasn't, anyone could get a Ph.D.). Thus, subjective distress alone is not a valid indicator that a course is inappropriately demanding or that a student is being treated unfairly by a faculty member.
3. In trying to fulfill their responsibility in setting standards and evaluating students' progress, faculty will, on occasion, make errors in judgment that are usually unintentional. Even for faculty, to err is human, and most student grievances concern faculty behavior that is nonmalevolent in intent. Nonetheless, when such errors create problems or hardships for students, they have the right to address their concerns with the faculty in question.

4. The ability to effectively address and resolve disagreement and conflict in a mature manner is essential for the effective functioning of a professional psychologist in any setting. Thus, disagreement and conflict with faculty offers an opportunity for personal and professional development.

5. Faculty members also deserve to be treated with respect and dignity. Complaining about faculty behavior to one's Program Coordinator or the Department Chairperson is a serious matter and should not be done with malicious intent or simply to seek retribution for a perceived wrong or slight. Also, approaching a faculty member in an angry or hostile manner or complaining to others about the behavior of the faculty member is not an effective strategy for resolving conflict. Students also should be prepared to listen nondefensively to a faculty member's explanation of his/her side of the conflict.

6. The Department cannot guarantee that resolution of a complaint or conflict will be favorable to the student. Nor should faculty expect that the issue will be resolved in their favor simply based on their position as faculty. The Department does guarantee, however, that students and faculty will be fully heard, that their concerns will be treated with dignity, and that an honest attempt will be made to reach a reasonable solution.

7. A student who, in good faith and in keeping with the above principles and with the procedures outlined below, complains about faculty behavior will be protected from retribution by the faculty member in question and by other faculty to the extent that the university has control over faculty behavior. Retributive or vengeful behavior by faculty toward a student complainee will not be tolerated. The Department has no control, however, over a faculty member's emotions, and a faculty member may decide to sever a working relationship (e.g., dissertation supervision, collaborative research or writing project) with a student following a complaint that the faculty member views as frivolous, unfounded, or malicious. Faculty who do so will not necessarily be viewed as engaging in retributive behavior. If a faculty advisor terminates a working relationship with a student following a complaint by that student against that faculty member, the Department will make a good faith effort to secure another advisor for that student. The Department cannot, however, force a faculty member to work with a student.

**Grievance Procedures**

With these caveats in mind, the Department recommends that a graduate student who has concerns about the professional behavior of a faculty member take the following steps in the following order. Following these procedures will better ensure that the grievance will be resolved expeditiously and fairly.
1. Discuss the problem with the faculty member in question. Many disagreements, disputes, and conflicts between faculty and students are the result of miscommunication or misinformation and can be resolved informally between the concerned parties. Consultation with the academic Advisor usually will be helpful in determining whether or not a grievance is legitimate and in developing an effective strategy for presenting the concern to the faculty member in question. If a student cannot discuss the concern with his/her Advisor, the student should consult another faculty member. The goal of such a consultation is to seek advice, not to spread rumor or simply complain.

The faculty member with whom the student consults concerning the grievance incurs certain responsibilities by agreeing to serve in this capacity: (1) To review with the student the Departmental policy and procedures described here. (2) To assist the student in determining the legitimacy of his/her concern and in developing a plan for discussing the concern with the faculty in question. In addition, the advisor may also choose a more active role in the resolution of the grievance by serving as the student's advocate or as a mediator. If the advisor/advocate believes that the faculty member in question has committed an illegal act or ethical violation, he/she should consult the Ethical Guidelines of the American Psychological Association.

2. If the discussion with the faculty member with whom the student has a concern does not produce a fair resolution, the student should consult with his/her Advisor (or other advising faculty) about the feasibility of bringing the matter to the attention of the student's Program Coordinator.

3. If consultation with the Program Coordinator does not produce a satisfactory resolution, the student should consult with his/her advisor (or other advising faculty) about the feasibility of bringing the matter to the attention of the Associate Chairperson for Graduate Studies. The Associate Chairperson may appoint an ad hoc committee charged with working with the student and faculty member in resolving the grievance. This committee may include a graduate student as a member.

4. If consultation with the Associate Chairperson for Graduate Studies does not produce a satisfactory resolution, the student has the option of bringing the matter to the attention of the Department Chairperson.

5. If consultation with the Department Chairperson does not produce a satisfactory resolution, the student should consult with his/her Advisor (or other advising faculty) about the feasibility of bringing the matter to the attention of the office of the Dean of the College of Humanities and Social Sciences.
**XVIII. DISSERTATION, THESIS, AND TRAVEL SUPPORT**

**Dissertation and Thesis Support**

The department will provide up to $400 to help cover the cost of dissertation research and up to $250 to cover the cost of master’s thesis research. Thesis research funding is only available for those students in terminal masters programs. These funds are to be used to assist in the collection of data, including payment to participants if the research requires a population not readily available at the University. All equipment, books, software, tests, etc that are purchased with department funds becomes the property of the department. Keep good records of your expenses, including all receipts. Only original receipts (not photocopies) will be accepted.

Requests should be submitted to the Associate Chair for Graduate Studies with a copy to the Office Manager. To apply, you must provide:

1. A copy of the signature sheet of your approved dissertation or thesis proposal.
2. A budget that specifies how you plan to spend the money.  
   - The budget must be signed by your advisor.
3. A statement from your advisor that he/she does not have funds to support this research (e.g., from a grant).
4. Students may apply for thesis/dissertation support or travel support but not both.

**Travel Support**

The department will provide up to $400 to doctoral students to help pay for travel to a conference at which the student is presenting. To be eligible, the student must be either first author of the paper/poster or second author if the first author is a faculty member. Ordinarily only one such request per year will be approved. The department will help pay for airfare and conference registration but not lodging, meals, taxis, etc.

Requests should be submitted to the Associate Chair for Graduate Studies. To apply, you must provide:

1. A letter from the conference indicating that your paper, poster, etc. has been accepted.
2. A budget describing how you plan to spend the money, including the exact cost of the airfare and/or conference registration fee.
3. Evidence that you have at least attempted to get money from other sources, including the organization sponsoring the conferences (some but not all offer support for students presenting), your advisor’s grant, the University’s graduate student organization (student may apply for Graduate Student Umbrella funds and department funds simultaneous but must provide evidence of GSU award or refusal before department funds will be awarded.
4. All of the above must be submitted at least **two months** prior to the date of travel.
5. Students may apply for thesis/dissertation support or travel support but not both.
Following approval of your request for funds, you must **immediately** complete a **Travel Authorization Form**, which must be signed by the Chair before travel arrangements can be made. No travel expenses will be reimbursed unless the Travel Authorization Form has been signed by the Chair prior to the travel.

Reimbursement request worksheets (obtained in DK 2003) with original receipts (not photocopies) must be submitted within one week of completion of travel. Nametags cannot be submitted in place of a conference registration receipt. You may make your own travel arrangement. You must submit a boarding pass with your airline ticket receipt. Dates of travel and cost must be on the ticket receipt. Travel authorizations can be found by contacting the Department Fiscal Coordinator.

**The Graduate Student Travel Fund**

The Graduate Student Travel Fund was established to help George Mason University graduate students attend and participate in professional conferences pertaining to their field of study. Conference travel plays an essential role in the academic growth and development of graduate students by providing opportunities for training, networking and exposure to the latest academic research. Support for conference travel from the GSTF also provides an opportunity for George Mason University degree seeking graduate students to present their work in a professional academic setting. This type of participation helps promote the graduate programs available at Mason on the regional, national and international levels, and aids in the process of attracting outstanding scholars to Mason to pursue their graduate degrees.

The GSTF is charged with the responsibility of administering funds received from the Office of the Provost and student fee funds allocated by the Student Funding Board (SFB). The application standards utilized by the GSTF are designed to evaluate requests in a fair and unbiased manner, providing equal opportunity for all Mason graduate students. The GSTF as it currently exists provides financial support for conference travel only. At this time, requests for dissertation support or job interview travel cannot be honored as these types of requests fall beyond the scope of the GSTF. The GSTF was established to help supplement conference related expenses; it is not meant to fund your entire conference. Award amounts vary depending on conference location and type of participation, award amounts range from $150.00-$250.00 this amount is subject to change at any time. For specific policies and requirements, visit their webpage at: [http://www2.gmu.edu/org/gstf/](http://www2.gmu.edu/org/gstf/)
The Clinical faculty members are aware that doctoral training in clinical psychology is demanding and at times stressful. Training in clinical work can be especially emotionally demanding, and it often raises personal issues that would benefit from working with a professional. Seeking such help is a common and worthwhile part of professional development in this area. Below is a list of psychologists in private practice in Northern Virginia who are willing to provide reduced-fee psychotherapy services to GMU clinical psychology doctoral students. Information about fees can be obtained from the individuals listed below. These individuals have no formal relationship with the Clinical Program.

Alisa Schreier, Ph.D.
703-536-8799
131 W. Great Falls Street, Suite 101
Falls Church, VA 2204
lschri@yahoo.com

Carole W. Sebenick, PhD
703-362-9313
10721 Main St Suite 307
Fairfax, VA - 22030

Gail Curran, Ph.D.
703-734-6266

Ginny Gutman, Ph.D.
703-568-3744

Janet Laubgross, Ph.D
703-591-7828
http://www.drjanetlaubgross.com/

Jennifer Lager, Ph.D.
703-244-9656
http://www.drjenniferlager.com/

Kolleen Martin, Ph.D.
703-623-4406
13890 Braddock Road Centreville, VA 20121

"Leslie K. Dalton, Ph.D.
(703) 550-405
DrLeslieDalton@yahoo.com
www.thestonehouse.ws/ldalton.htm

Luanne Turrentine, PhD
Marcia Gre nell, Ph.D
(540) 947-1949
6107 G Arlington Boulevard, Falls Church, VA 22044
MMGre nellPhD@aol.com
http://therapists.psychologytoday.com/rms/name/Marcia_M_Gre nell_PhD_FallsChurch_Virginia_32126

Martin Schuh, Ph.D.
(703) 440-9284

Marya A. Myslinski, Psy.D., PLLC
703-538-2770
http://Therapists.Psychologytoday.com/44327

Michelle F. Eabon, Ph.D
(703) 691-420
11244 Waples Mill Road, Suite G-1
Fairfax, VA 2203
http://dreabon.net/

Neil Makstein, PhD
7700 Leesburg Pike Suite 406
Falls Church VA 22043
neilmak@aol.com

Roy S Wilensky, PsyD
7700 Leesburg Pike, Suite 200
Falls Church, VA 2204
drewilensky@gmail.com

Sarita B. Kaplan, Psy.D
703-742-8665
11333 Sunset Hills Rd, Reston, VA 20190

Tessa Cochran, PhD
703-683-691
635 S. Washington St.
Alexandria, VA 22311

List updated December 2011. Contact individual clinicians for current availability.
XX. RESEARCH INTERESTS OF NON-CLINICAL FACULTY

APPLIED DEVELOPMENTAL

Rachel Chazan-Cohen  993-5626 / DK 2045  Infants and toddlers; early parenting; environmental and biological factors that place children at risk for poor outcomes; program evaluation; public policy.

Tim Curby        993-2457 / Aquia 337  Classrooms as a context for student learning and development; Teacher-student interactions; Classroom quality; Development of classroom observational measures; Quantitative methods.

Susanne Denham  993-1378 / DK 1024A  Director, Applied Developmental Program  Preschoolers’ social-emotional development and its assessment and promotion; Peer competence in preschool and elementary school; Developmental psychopathology; Parenting: Its impact on the above

Elyse Lehman  Faculty Emeritus  Memory, attention, and problem solving in children and older adults; Educational applications-Learning disabilities, gifted children, attention deficit disorder; Everyday cognition-Children’s art, soft object attachments; Eyewitness testimony

Robert Pasnak  993-1354 / DK 2049  Cognitive and socioemotional development in preschool, elementary school, and special education children

Johannes Rojahn  993-4241 / DEM 202  Intellectual and/or developmental disabilities, autism (socio-emotional competence, mental illness, psychopathology, severe behavior problems; applied behavior analysis; assessment)

Adam Winsler  993-1881 / DK 2023  Development of self-regulation; Private speech; Bilingualism; ADHD; Early childhood education; School readiness among low-income, ethnically diverse children
COGNITIVE AND BEHAVIORAL NEUROSCIENCE PROGRAM

Susan Bachus  
Rat models of tardive dyskinesia

Marge Battaglia  993-1748 / DK 2063  
The intersection of developmental psychology and neuroscience, aging populations, Alzheimer's research.

Doris Bitler  993-8817 / DK 2051  
Experimental Psychology, with a specialization in animal learning and memory

Linda Chrosniak  993-4139 / DK 2045  
Research interests include implicit and explicit memory processes, and relationships between stress, cognition and health. In addition, in collaboration with Dr. Flinn, she has investigated effects of trace metals (zinc, copper and iron) on memory processes.

Jane Flinn  993-4107 / DK 2022  
Director of Undergraduate Program in Neuroscience

The role of metals in learning and memory, including fear conditioning. The effect of metals in neurological conditions, such as Alzheimer's disease, in humans and transgenic mice.

Craig G. McDonald  993-2277 / DK 2018  
Psychophysiology of visual perception and cognition; nicotine-induced changes in executive functioning

Robert F. Smith  993-4339 / DK 2006  
Department Chair, Cognitive and Behavioral Neuroscience Program


Affiliates:
Carryl Baldwin (Human Factors/Applied Cognition)
Christy Esposito-Smythers (Clinical)
Pam Greenwood (Human Factors/Applied Cognition)
Todd Kashdan (Clinical)
Frank Krueger (Krasnow Institute  http://www.brainbuilding.org/)
Raja Parasuraman (Human Factors/Applied Cognition)
Matt Peterson (Human Factors/Applied Cognition)
Tyler Shaw (Human Factors/Applied Cognition)
Jim Thompson (Human Factors/Applied Cognition)

**CLINICAL**

Lauren Cattaneo  993-4728 / DK 2021  
**Associate Director of Clinical Training**  
Community and institutional responses to intimate partner violence, helpseeking, risk assessment, survivor-centered services and empowerment.

Christy Esposito-Smythers  993-2039 / DK 2061  
Assessment, prevention, and treatment of adolescent suicide, depression, and substance abuse.

Todd Kashdan  993-9486 / DK 2047  
Emotional disturbances, social anxiety, self-regulation, personality, interpersonal processes, positive emotions, well-being, character strengths.

James Maddux  
*Faculty Emeritus* Social-clinical interface; Health psychology; Self-efficacy theory.

Patrick McKnight  993-8292 / DK 2065  
Health services research, research methods, statistics, measurement, and program evaluation.

Robyn Mehlenbeck  993-1371 / DEM 202  
**Director of Center for Psychological Services**  
Adolescent weight management; Eating disorders in children and adolescents. Clinical specialty in pediatric psychology.

Sarah Fischer  993-5635 / DK 2044  
Impulsivity, Bulimia Nervosa and co-occurring alcohol abuse, application of DBT to disordered eating.

Keith D. Renshaw  993-5128 / DK 2042  
Adjustment of military service members and their spouses after deployment; Combat-related posttraumatic stress disorder; Relationships of adults with anxiety and depression.
John Riskind 993-4094 / DK 2043  Anxiety disorders, Generalized Anxiety and Obsessive Compulsive Disorder, Cognitive Vulnerability factors and processes, Cognitive behavioral theories and treatment, anxiety and suicide ideation, cognitive vulnerability and stress-generation

Jerome Short 993-1368 / DK 2019  Family stress and coping; Prevention programs; Mental health promotion.

June Tangney 993-1365 / DK 2007A  **Director of Clinical Training**  Personality and social psychology, Moral emotions (shame, guilt, and empathy), Criminal behavior and rehabilitation, Substance abuse and HIV risk, Research ethics.

**HUMAN FACTORS/APPLIED COGNITION**

Carryl Baldwin 993-4653 / DK 2062  Auditory cognition, auditory and multimodal displays, cognitive aging, speech processing, transportation (highway and air) safety, mental workload, adaptive automation, individual differences, training, spatial navigation and neuroergonomics.

Deborah Boehm-Davis 993-8720 / College Hall 100  Understanding interruptions, dual-task performance and cognitive workload; aviation safety; medical human factors

Pam Greenwood 993-4268 / DK 2060  Cognitive aging and the genetics of cognitive aging which she examines using behavioral, neuroimaging, and genetic methods. The modulation by normal genetic variation of attention, working memory, and the role of attention in forming and maintaining mental representations in working memory. Collaborating in a longitudinal study of the genetics of cognitive change in midlife.
Raja Parasuraman        993-1357 / DK 2055
Director, Human Factors/Applied Cognition Program
Director, Center of Excellence in Neuroergonomics, Technology, and Cognition (CENTEC)

Matt Peterson        993-4255 / DK 2058
Director, Human Factors/Applied Cognition M.A. Program

James Sanford        993-1351 / DK 2046
Associate Chair for Undergraduate Studies
Human memory and cognition, false memory, testing effect

Tyler Shaw        993-5187 / DK 2059
Neurophysiological underpinnings and individual differences in human sustained attention, automation, team collaboration and coordination dynamics

Jim Thompson        993-1342 / DK 2056
Associate Chair for Graduate Studies
Cognitive neuroscience, including fMRI and ERPs; biological motion; social cognition; robotics.

Robert Youmans        993-5627 / DK 2057
Cognition of creativity and innovation in design; design fixation; attention and vigilance; heuristic decision making; usability testing and evaluation; group processes.
INDUSTRIAL/ORGANIZATIONAL

Louis Buffardi  993-1363 / DK 3072
Coordinator, Industrial/Organizational M.A. Program
Employee attitudes; Quality of work life organizational surveys; Work and family issues; Human error

Jose Cortina  993-1347 / DK 3074
Statistical interaction; Philosophy of quantitative analysis; Personality testing

Reeshad Dalal  993-9487 / DK 3077
Employee performance, and its links with mood/emotions, job attitudes and individual differences, and advice-giving and advice-taking from a decision-making perspective.

Theodore Gessner
Faculty Emeritus. Evaluation research; Survey research; Person perception; Humor

Seth Kaplan  993-8475 / DK 3073
Personality, emotions, and well-being at work. Team dynamics in crisis situations. Psychometric and statistical issues.

Eden King  993-1620 / DK 3076
Effective and equitable management of diversity in organizations, discrimination, social stigma in the context of work

Lois Tetrick  993-1372 / DK 3066A
Director, Industrial/Organizational Program
Occupational health psychology including stress, work-family, and safety; the employee-organization relationship including psychological contracts, social exchange theory, and the norm of reciprocity; organizational climate and culture; innovation and creativity; positive aging and retirement transitions; cross-cultural aspects of industrial organizational psychology.

Stephen Zaccaro  993-1355 / DK 3066B
Leadership, executive assessment and development, team dynamics and effectiveness, shared leadership, multiteam systems.
SCHOOL PSYCHOLOGY PROGRAM

John Blaha  
Faculty Emeritus. Assessment, learning disabilities

Grover Foehlinger  993-5127 / DKH 2063  
Program evaluation.

Director, School Psychology M.A./CAGS

Johannes Rojahn  993-4241 / DEM 202  
Intellectual and/or developmental disabilities, autism (socio-emotional competence, mental illness, psychopathology, severe behavior problems; applied behavior analysis; assessment)

Ellen Rowe  993-4266 / DEM 202C  
Assessment and remediation of social, emotional, and behavioral problems among children and adolescents and developmental psychopathology.
APPENDICES
DOCTOR OF PHILOSOPHY IN CLINICAL PSYCHOLOGY
PROGRAM OF STUDY

Name: ____________________________  G#: ____________________________
Address: ____________________________________________________________  Phone: ____________________________
Date: ____________________________

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<th>COURSE TITLE</th>
<th>COURSE NUMBER</th>
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<tr>
<td><strong>GENERAL REQUIREMENTS (20 HOURS)</strong></td>
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<td><em>Biological Bases of Behavior (Choose one)</em></td>
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<td>Cognitive Neuroscience</td>
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<td>Behavior Chemistry</td>
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<td>Social and Emotional Development</td>
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<td>Methods for Social Research</td>
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<p>| CLINICAL REQUIREMENTS (41 HOURS)                  |               |              |
| Psychological Assessment I                        | PSYC 810 (4)  |              |
| Psychological Assessment II                       | PSYC 811 (4)  |              |
| Scientific Foundations of Clinical Psychology I   | PSYC 822 (3)  |              |
| Introductory Helping Skills and Motivational Interviewing | PSYC 860 (3)  |              |
| Cognitive Behavioral Therapy for Youth            | PSYC 861 (6)  |              |</p>
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<td>History, Systems, and Theories of Personality and Psychotherapy</td>
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<td>Social and Cognitive Foundations of Clinical Psychology</td>
<td>PSYC 833</td>
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<td>Practicum in Clinical Psychology</td>
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<td>Ethical and Professional Issues in Clinical Psychology</td>
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<td><strong>EXTERNSHIP AND INTERNSHIP</strong></td>
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<tr>
<td>Externship (optional)</td>
<td>PSYC 885</td>
<td>(0)</td>
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<tr>
<td>Internship</td>
<td>ZREG 800</td>
<td>(0)</td>
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<td><strong>TOTAL HOURS</strong></td>
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</table>

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<tr>
<th>Applied to MA</th>
<th>Post MA</th>
<th>Dissertation</th>
<th><strong>GRAND TOTAL</strong>*</th>
</tr>
</thead>
</table>

*must be at least 76 for PhD only and 77 for both MA & PhD.

____________________________________  _________________
Major Advisor                     Date

____________________________________  _________________
Director of Clinical Training     Date

____________________________________  _________________
Department Chair/ Assoc. Chair    Date
Agreement on Outside Clinical Activities
(Copy to be kept in file with Darby Wiggins)

Graduate Student: ____________________________
Advisor:______________________________________________

Please list actual clinical work done for pay in the Spring 2012 semester:

CAP Cases: _________ (total number)
CAP Comprehensive Assessments: _________ (total number)
Center Comprehensive Assessments: _________ (total number)
Center Mental Health Evals/Consults: _________ (total number)

Other paid clinical work (state what it is & # cases or hours):
____________________________________________________________________________
____________________________________________________________________________

Estimated # hours spent in paid clinical work in the Spring Semester: _________

Please list expected clinical work for pay in the Summer 2012:

CAP Cases: _________ (total number)
CAP Comprehensive Assessments: _________ (total number)
Center Comprehensive Assessments: _________ (total number)
Center Mental Health Evals/Consults: _________ (total number)

Other paid clinical work (state what it is & # cases or hours):
____________________________________________________________________________

Please list expected clinical work for pay in the Fall 2012 semester:

CAP Cases: _________ (total number)
CAP Comprehensive Assessments: _________ (total number)
Center Comprehensive Assessments: _________ (total number)
Center Mental Health Evals/Consults: _________ (total number)

Other paid clinical work (state what it is & # cases or hours):
________________________________________________________________________
________________________________________________________________________

We agree that this level of outside clinical work will enhance rather than impede the student’s professional goals and progress in the program.

__________________________________________  ________________
Student                                  Date

__________________________________________  ________________
Advisor                                  Date
**Application for Equivalency Examination for a Required Course**

The following information must be provided in order to determine if a petition to take an equivalency examination is to be granted.

**Date:**

________________________________________________________

**Name:**

________________________________________________________

**Address:**

________________________________________________________

**Telephone:**

________________________________________________________

**Core Course:**

________________________________________________________

**Documentation:**

________________________________________________________

**Course Title:**

________________________________________________________

**Attach**

Transcript

Catalog description of course

Syllabus

Texts or copies of tables of contents

Examinations

Papers

**Justification:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Research Activity Report

Name: _____________________________________________________

Advisor’s Name: _____________________________________________

Date: ________________

Please complete and return this form to dwiggin3@gmu.edu before 4:00 pm on [new date/time TBD] This information will be used in preparation of our annual report to APA and in the annual evaluation of clinical students. If you cannot email this document, you may fax this document to (703) 993-8279 – Attn: Darby Wiggins.

ANNUAL UPDATES

Professional Activities* (For the [date] academic year ONLY)

1. Indicate if the student was a member of a professional or research society:  ___Yes ___No

2. Number of books, book chapters, or articles in peer reviewed professional/scientific journals student was an author or co-author of. (Publications "in press," "under review," or "submitted" should not be counted here.):

3. Number of workshops, oral presentations and or poster presentations at professional meetings student was an author or co-author of:

4. Indicate if the student was involved in leadership roles/activities professional organizations (e.g., Roles in local, state/provincial, regional, or national organizations):  ___Yes ___No

5. Indicate if student presented a psychological topic to lay or community audience:  ___Yes ___No

Doctoral Internship

1. Did the student apply for a doctoral internship during the 2011-2012 academic year (to take place during the 2012-2013 academic year)?*
   ___Yes, applied for internship
   ___Yes, applied for second 1-year part-time internship (already completed a 1-year part-time program)
   ___No, student still enrolled in a 2-year part-time internship
No, student previously completed the full internship requirement (1-year full-time or equivalent)

No, did not apply for internship

If yes, please answer question 2. If no, skip to Enrollment Information section.

2. Did the student obtain an internship during the 2011-2012 reporting year (to take place during the 2012-2013 reporting year)?
   ____Yes  ____No

   If yes, please answer questions 3-10. If no, skip to Enrollment Information section.

3. Internship name:_____________________________________________

4. Expected internship start date:
   _____ / _____ /_____
   (mm)         (dd)      (yyyy)

5. Expected internship end date:
   _____ / _____ /_____
   (mm)         (dd)      (yyyy)

6. Is internship APA/CPA-accredited:
   ____Yes  ____No

7. If internship is not APA or CPA accredited, indicate if internship is affiliated with another membership organization (please select one):
   ____APPIC
   ____CAPIC
   ____CDSPP
   ____Other

8. Is the internship ____ one year or ____ two years?
9. Is the internship ____ full-time or ____ part-time?
10. Is the internship ____ funded or ____ not funded/not fully funded?

ENROLLMENT INFORMATION

1. Date student started doctoral program:
   _____ / _____ /_____
   (mm)         (dd)      (yyyy)

2. Date student left doctoral program (if applicable):
   _____ / _____ /_____
   (mm)         (dd)      (yyyy)
If student left during the academic year, please answer question 2a. If not, skip to question 3.

2a. Reason for leaving (please select the most applicable):

  ____Successful completion of program
  ____Academic reasons
  ____Awarded terminal master’s degree
  ____Change in psychology area specialization
  ____Change in career / Employed elsewhere
  ____Death of student
  ____Did not return from absence
  ____Dismissed – failed program requirements
  ____Family or relationship matters
  ____Financial
  ____Health / Medical
  ____New interest outside psychology
  ____No reason provided to program
  ____Personal reasons
  ____Student relocated
  ____Transferred to a different university
  ____Transferred to follow academic advisor
  ____Voluntary withdrawal – academic difficulties
  ____Other Reasons

3. Academic status:

  ____Full-Time  ____Part-Time
Semester Summative Evaluation (SSE) Advisor Form

INSTRUCTIONS: This form is to be completed at the end of every semester for each of your doctoral advisees. Ratings and comments should be based on input from all faculty members that is shared during the end-of-semester student review meeting. In areas where students do not receive a “meeting expectations” rating, explanations should be provided in the comments section of this form. You should meet with each of your advisees to discuss this evaluation. Signed forms should be submitted to the Graduate Programs Coordinator, who will place the forms in the students’ files.

Please return this form completed and signed no later than __ to Darby Wiggins, Graduate Programs Coordinator.

Student: ____________________________________________

Semester and Year of Evaluation: ______________

Advisor: ______________

Mark the box that corresponds with the faculty evaluation of the student in the given area.

<table>
<thead>
<tr>
<th>Course Work</th>
<th>Does Not Meet Expectations</th>
<th>Making Progress Toward Expectations</th>
<th>Meets Expectations</th>
<th>NA</th>
</tr>
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<tbody>
<tr>
<td>All Courses</td>
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<tr>
<td>Is on track to receive B or better in courses</td>
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<tr>
<td>Prepares adequately for class (e.g., completes readings)</td>
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<tr>
<td>Completes assignments on time (e.g., papers, projects, reports)</td>
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<tr>
<td>Interacts with instructors and peers in a professional and respectful manner</td>
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<tr>
<td>Demonstrates ethical behavior in clinical and classroom settings (e.g., confidentiality)</td>
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<tr>
<td>Provides adequate attention to detail (e.g., accurate test scoring and reporting)</td>
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<td>Seeks supervision, consultation, and feedback when needed</td>
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<tr>
<td>Is receptive to supervision and feedback</td>
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<td>Demonstrates adequate knowledge and attention to individual differences and cultural diversity</td>
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<tr>
<td><strong>Clinical Supervision/Practice</strong></td>
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<td>Completes clinical paperwork on time (e.g., records, notes)</td>
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<td>Prepares adequately for clinical supervision sessions</td>
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<tr>
<td>Prepares adequately for meetings with clients</td>
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<td>Interacts with clients in a professional &amp; respectful manner (e.g., good boundaries, returns phone calls promptly)</td>
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<td>Understands, demonstrates, and practices sensitivity to client individual differences and sociocultural diversity</td>
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<td>Demonstrates adequate knowledge and skills in assessment</td>
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<tr>
<td>Demonstrates adequate knowledge and skills in therapy</td>
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<tr>
<td><strong>GTA/Instructor/GRA Work</strong></td>
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<tr>
<td>Is adequately performing work assigned in GTA/instructor role</td>
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<tr>
<td>Is adequately performing work assigned in GRA role</td>
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<table>
<thead>
<tr>
<th>Research</th>
<th>Does Not Meet Expectations</th>
<th>Making Progress Toward Expectations</th>
<th>Meets Expectations</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is making adequate progress on program research requirements (e.g., 2nd year project, dissertation)</td>
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<td>Is meeting personal research goals (attach a copy)</td>
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<td>Demonstrates ethical behavior in research (e.g., informed consent, HSRB guidelines)</td>
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<td>Uses educational opportunities available within and outside of program (e.g., brown bags, speakers, conferences)</td>
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Areas of greatest strength/competency; main assets:
Areas of needed growth/improvement (comment on all “does not meet expectations” areas from above):

Recommendation/goals for focus of continuing training (comment on all “does not meet expectations” areas from above):

___________________________________  __________________________________
Student (print name)                      Student (signature)

___________________________________  __________________________________
Advisor (print name)                      Advisor (signature)

___________________________________  __________________________________
Dir. Clinical Training (print name)       Dir. Clinical Training (signature)
Personalized Professional Goals

Guidelines: These goals should be formulated by the student in collaboration with his/her advisor. Students and advisors should consider year in program, skill level, and competing demands when devising personalized goals so that those selected are realistic and achievable. Students are NOT expected to develop goals in each area specified on the next page.

<table>
<thead>
<tr>
<th>Goals To Be Specified By Student and Advisor:</th>
<th>Does Not Meet Expectations</th>
<th>Making Progress Toward Expectations</th>
<th>Meets Expectations</th>
<th>NA</th>
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EXAMPLES OF PERSONALIZED GOALS

Examples of Research Goals
- Regular attendance at mentor’s weekly lab meetings
- Regular attendance at weekly individual supervision meetings with mentor
- Attendance at other faculty lab meetings if relevant
- Attendance at a research-oriented conference
- Completion of a literature review in an area of interest
- Completion of training in a relevant clinical research method (e.g., diagnostic interviewing, treatment manual, statistical approach, etc.)
- Completion of a specified clinical experience with a population of research interest (e.g., running a group for individuals with Social Phobia using an EBT)
- Submission of articles for publication (specify data source, topic, authorship order)
- Submission of book chapters for publication (specify topic, authorship order)
- Submission of posters at national conferences (specify data, topic, authorship order)
- Draft/submission of a grant application (F31, private foundation)
- Preparation of an HSRB application for a study
- Proposal/completion of second year project or dissertation
- Completion of data collection for a project
- Develop research skills by generating multiple testable hypotheses in my area of research and getting feedback on them.

Examples of Clinical-Community Service Provision Goals
- Do a clinical or consultation externship
- Form a reading group to learn more about clinical or consultation topics
- Identify externship possibilities in an area of interest
- Identify opportunities to gain experience in clinical supervision
- Attend presentations on service provision on campus or at a conference
- Learn about conferences on service provision that you might wish to attend
- Work with clinical supervisor on case conceptualization skills
- Work with clinical supervisor to learn new intervention strategy
- Prepare for clinical supervision by bringing cued videotapes of sessions
- Read journal articles on strategies, issues, or populations relevant to current clinical work

Examples of Teaching Goals
- Teach a new course
- Develop syllabus for a new course
- Observe “master teachers” teach a class
- Meet every other week with teaching mentor
- Attend workshop offered by the Center for Teaching Excellence
- Receive consultation on teaching from the Center for Teaching Excellence
- Attend workshop on teaching strategies at a conference
- Develop ideas for integrating new strategy or content into a course (e.g., experiential learning, diversity issues, group work)
- Read theoretical or empirical papers on classroom instruction
- Join and participate in professional organization focused on teaching of psychology
Student's Name _______________________________________ Date ______________________

Supervisor ___________________ Training Site _____________________________

1 = Performed well below expectations for current level of training
2 = Performed below expectations for current level of training
3 = Met expectations for current level of training
4 = Performed above expectations for current level of training
5 = Performed well above expectations for current level of training
NA = Not applicable to work done this semester

A. Psychological Assessment Skills (e.g., interviewing and assessment techniques):

____ 1. Develops rapport with clients.
____ 2. Obtains relevant information efficiently.
____ 3. Formulates a clear referral question or problem.
____ 4. Applies clinical theory and research in case formulation.
____ 5. Designs an assessment strategy (e.g., test selection) appropriate to the referral question.
____ 6. Administers and scores tests correctly.
____ 7. Organizes and integrates assessment information skillfully.
____ 8. Generates appropriate and useful recommendations.
____ 10. Completes assessments in a timely manner.

B. Psychological Interventions (e.g., psychotherapy and case management):

____ 1. Develops working alliances with clients.
____ 3. Develops appropriate goals and strategies with different clients.
____ 4. Carries out psychotherapy techniques effectively.
____ 5. Makes useful observations and interpretations of client material.
6. Challenges clients when necessary.
7. Responds appropriately to relationship issues.
8. Recognizes clinically important material and follows up appropriately.

C. Supervision Issues:

1. Comes to supervision meetings prepared.
2. Actively participates in supervision by presenting ideas, showing initiative, and giving feedback to others.
3. Receptive to feedback and listens nondefensively.
4. Is appropriately assertive in expressing own ideas.
5. Presents own ideas in a clear manner.
6. Actively seeks input from supervisor and (when appropriate) peers.
7. Responds to feedback non-defensively.
8. Incorporates feedback in clinical work (e.g., in interactions with clients, in written reports).
9. Gives feedback to others in a supportive and professional manner.

D. Professional Reliability:

1. Writes progress notes and therapy reports skillfully.
2. Manages clients’ scheduling, fees, and case issues efficiently.
3. Professional reliability in attending meetings, completing reports and contacting clients in a timely fashion; and keeping client charts properly documented.
4. Deals with clients in a respectful and professional manner.
5. Deals with staff and colleagues in a respectful and professional manner.
6. Sensitivity and adherence to ethical practices.
7. Awareness of diversity issues and effectiveness in working with diverse populations.

Briefly list the professional activities that this student has engaged in.
Describe the student's strengths.

Describe the student's relative weaknesses.

Comments and suggested directions for the student's future growth.

_____________________________
 Supervisor's signature Date

________________________________
 Student's signature Date
Practicum Supervisor Evaluation Form

Name of supervisor __________________________ Semester _______________

Scale
1 2 3 4 5 6 7
Strongly Disagree Strongly Agree

Time and Effort Expended

My supervisor

_____ 1. Was accessible.
_____ 2. Regularly listened to and critiqued tapes.
_____ 3. Regularly read and critiqued case notes.
_____ 4. Monitored all of my cases for which he/she was responsible.
_____ 5. Helped me make productive use of supervision time.
_____ 6. Demonstrated familiarity with Clinic policies and procedures as described in the Clinic Handbook and the Clinical Program Handbook
_____ 7. Was reliable (returned reports and other write-ups in a timely manner, kept appointments, on time for appointments, returned calls, etc.)

Please describe problems, if any.

________________________________________________________________________

________________________________________________________________________

Specific Input on Client Management
My supervisor

______ 10. Assisted in developing treatment plans, strategies, techniques and/or skills.
______ 11. Demonstrated familiarity with the APA ethnical code and monitored potential ethical concerns.
______ 12. Demonstrated expertise with a wide range of client problems.
______ 13. Demonstrated knowledge of a wide range of theoretical approaches.
______ 14. Demonstrated knowledge about the use and interpretation of the major assessment instruments/strategies we used in supervision this semester.
______ 15. Helped me seek out and use consultants effectively.
______ 16. Provided me with ongoing feedback throughout the semester.
Please describe problems or concerns.

________________________________________________________________________

17. My supervisor reviewed with me at the beginning of the semester the Supervisee Responsibilities, Supervisor Responsibilities, the Supervision Evaluation Form, and the Supervisor Evaluation Form.
   Yes _______   No _______

18. My supervisor provided a Supervisor Evaluation Form to me at the end of the semester.
   Yes _______   No _______

19. My supervisor missed or cancelled ____ individual supervision meetings this semester.

20. My supervisor missed or cancelled ____ group supervision meetings during the semester.
Clinical Research Comprehensive Examination Feedback Form
(Adopted 03-08-07)

Student:___________________________________________________________________

Advisor:_________________________________________________________________

Second Reader:_____________________________________________________________

1. Introduction: Thorough review and integration of theoretical and empirical literatures
   (thoughtful comparison of related studies/concepts, reasonable conclusions drawn).

   1  2  3  4
   Fail Marginal Pass Pass Strong Pass

2. Introduction: Quality of research aims, hypotheses, and predictions (clearly stated,
   complete, arising from literature review)

   1  2  3  4
   Fail Marginal Pass Pass Strong Pass

3. Methods: Appropriateness of the design to answer the question(s) posed

   1  2  3  4
   Fail Marginal Pass Pass Strong Pass

4. Methods: Adequacy of operationalization/assessment approach (e.g., construct validity
   of experimental manipulation, reliability of predictor and criterion variables, rationale
   for selection of measures)

   1  2  3  4
   Fail Marginal Pass Pass Strong Pass
5. Methods: Consideration of statistical power, experiment-wise error (where relevant)

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<tr>
<td></td>
<td>Fail</td>
<td>Marginal Pass</td>
<td>Pass</td>
<td>Strong Pass</td>
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6. Results: Appropriateness of the data analysis strategy to answer the question(s) posed

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<tr>
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<td>Fail</td>
<td>Marginal Pass</td>
<td>Pass</td>
<td>Strong Pass</td>
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7. Results: Quality of the presentation of results (accurate, clear, complete)

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<td>Fail</td>
<td>Marginal Pass</td>
<td>Pass</td>
<td>Strong Pass</td>
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8. Discussion: Reasonableness of the inferences or conclusions drawn from the data

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<td>Fail</td>
<td>Marginal Pass</td>
<td>Pass</td>
<td>Strong Pass</td>
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9. Overall: Clarity of presentation and writing, organization

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<td>Strong Pass</td>
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10. Overall: Potential contribution to field (theoretical, empirical, or both – above and beyond what is out there)

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<td>Marginal Pass</td>
<td>Pass</td>
<td>Strong Pass</td>
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</table>

Mean of rated items: ____________
Exam Outcome:
Strong Pass ..... 3.5 to 4.0
Pass ............... 2.5 to <3.5
Marginal Pass 2.0 to < 2.5
Failure .......... < 2.0

Comments:

Date: ___________________________ Student signature _______________________

Date: ___________________________ Advisor signature _______________________

Date: ___________________________ 2nd Reader signature _____________________
Clinical Comprehensive Exam Case Description Sheet
(adopted Fall 2011)

Name of Student:

Date of application:

Description of Case:

Date of Intake (must be within 4 months of planned defense):

Diagnosis:

Type of Case:

Adult ________  Child ________  Teen ________

Individual ________  Family ________  Couple ________

Number of sessions seen at time of application: ____________

Current supervisor: ____________________________________________

Proposed theoretical frameworks: ________________________________


Committee Assignment:

1) ____________________________________________

2) ____________________________________________

DCT Signature Date

Student Signature Date
Professor John Doe

Clinical Comprehensive Exam
Individual Faculty Member Grading Sheet: Written Paper
(Adopted Fall 2011)

Domain 1: Ability to conduct appropriate intake assessment

Circle one: 0 = Fail
1 = Rewrite/Remediation
2 = Pass
3 = High pass

Comments:

Domain 2: Conceptualization/Formulation

Circle one: 0 = Fail
1 = Rewrite/Remediation
2 = Pass
3 = High pass

Comments:

Domain 3: Treatment plan

Circle one: 0 = Fail
1 = Rewrite/Remediation
2 = Pass
3 = High pass

Comments:

Domain 4: Integration of research literature in clinical thinking and planning

Circle one: 0 = Fail
1 = Rewrite/Remediation
2 = Pass
3 = High pass

Comments:
Clinical Comprehensive Exam
Committee Grading Sheet: Overall (Written and Oral)
(Adopted Fall 2011)

Domain 1: Ability to conduct appropriate intake assessment

Circle one: 0 = Fail
            1 = Rewrite/Remediation
            2 = Pass
            3 = High pass

Comments:

Domain 2: Conceptualization/Formulation

Circle one: 0 = Fail
            1 = Rewrite/Remediation
            2 = Pass
            3 = High pass

Comments:

Domain 3: Treatment plan

Circle one: 0 = Fail
            1 = Rewrite/Remediation
            2 = Pass
            3 = High pass

Comments:
Domain 4: Integration of research literature in clinical thinking and planning

Circle one:  
0 = Fail  
1 = Rewrite/Remediation  
2 = Pass  
3 = High pass

Comments:

Domain 5: Clinical/Helping Skills

Circle one:  
0 = Fail  
1 = Rewrite/Remediation  
2 = Pass  
3 = High pass

Comments:

Overall Grade

Circle one:  
0 = Fail  
1 = Rewrite/Remediation  
2 = Pass  
3 = High pass

Comments:

Rewrite/Remediation Plan (if applicable)
George Mason University Clinical Psychology Program
Consultation Rating Form

Student's Name ______________________________ Date ____________________

Contact Person ___________________________ Organization ____________________

1 = Performed well below my expectations
2 = Performed below my expectations
3 = Met my expectations
4 = Performed above my expectations
5 = Performed well above my expectations
NA = Not applicable.

A. Needs Assessment Skills:
   ____ 1. Developed rapport with the contact person and others in the organization.
   ____ 2. Obtained relevant information efficiently.
   ____ 3. Understood the needs of the organization.
   ____ 4. Formulated a clear description of the services she/he could offer.

B. Implementation of Project:
   ____ 5. Collaborated with contact person and others in the organization.
   ____ 6. Made useful observations.
   ____ 7. Was receptive to feedback.
   ____ 8. Was appropriately assertive in expressing her/his own ideas.
   ____ 9. Adapted the project to best serve the needs of the organization.
   ____ 10. Was aware of diversity-related issues and effectively responded to them.

C. Professional Reliability:
   ____ 11. Was reliable in attending scheduled meetings.
   ____ 12. Came to meetings prepared.
   ____ 13. Completed project in a timely way.
D. Use of Project.

14. Please describe the use of the student’s project in your organization with the following scale.

1 = No plan to use the project;
2 = With more revision, plan to use the project in the future;
3 = Will use current version of the project in the future;
4 = Have begun use of the project;
5 = The project has already changed our organization.

E. Please describe below and/or on another page any comments that you have about this student’s work.
Extern Evaluation Form
(Adopted Fall, 2006)

Student's Name ___________________________ Date ____________________

Supervisor ____________________ Training Site ______________________

1 = Performed well below expectations for current level of training
2 = Performed below expectations for current level of training
3 = Met expectations for current level of training
4 = Performed above expectations for current level of training
5 = Performed well above expectations for current level of training
NA = Not applicable to work done this semester

A. Psychological Assessment Skills (e.g., interviewing and assessment techniques):

____ 1. Develops rapport with clients.
____ 2. Obtains relevant information efficiently.
____ 3. Formulates a clear referral question or problem.
____ 4. Applies clinical theory and research in case formulation.
____ 5. Designs an assessment strategy (e.g., test selection) appropriate to the referral question.
____ 6. Administers and scores tests correctly.
____ 7. Organizes and integrates assessment information skillfully.
____ 8. Generates appropriate and useful recommendations.
____ 10. Completes assessments in a timely manner.

B. Psychological Interventions (e.g., psychotherapy and case management):

____ 1. Develops working alliances with clients.
____ 3. Develops appropriate goals and strategies with different clients.
____ 4. Carries out psychotherapy techniques effectively.
____ 5. Makes useful observations and interpretations of client material.
6. Challenges clients when necessary.
7. Responds appropriately to relationship issues.
8. Recognizes clinically important material and follows up appropriately.

C. Supervision Issues:

1. Comes to supervision meetings prepared.
2. Actively participates in supervision by presenting ideas, showing initiative, and giving feedback to others.
3. Receptive to feedback and listens non-defensively.
4. Is appropriately assertive in expressing own ideas.
5. Presents own ideas in a clear manner.
6. Actively seeks input from supervisor and (when appropriate) peers.
7. Responds to feedback non-defensively.
8. Incorporates feedback in clinical work (e.g., in interactions with clients, in written reports).
9. Gives feedback to others in a supportive and professional manner.

D. Professional Reliability:

1. Writes progress notes and therapy reports skillfully.
2. Manages clients’ scheduling, fees, and case issues efficiently.
3. Professional reliability in attending meetings, completing reports and contacting clients in a timely fashion; and keeping client charts properly documented.
4. Deals with clients in a respectful and professional manner.
5. Deals with staff and colleagues in a respectful and professional manner.
6. Sensitivity and adherence to ethical practices.
7. Awareness of diversity issues and effectiveness in working with diverse populations.

Briefly list the professional activities that this student has engaged in.
Describe the student's strengths.

Describe the student's relative weaknesses.

Comments and suggested directions for the student's future growth.

__________________________________________________________________________

Supervisor's signature       Date       Student's signature       Date
## Evaluation of Externship Site

<table>
<thead>
<tr>
<th>Extern's Name ____________________________</th>
<th>Placement Site ________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor(s) ____________________________</td>
<td>Date ________________________</td>
</tr>
</tbody>
</table>

Please assign a rating of 1, 2, 3, 4, or 5 to each item below using the following scale. In deciding upon ratings, compare the externship with what you would expect from an externship in general with a similar amount of work responsibility. Indicate NA when Not Applicable.

<table>
<thead>
<tr>
<th>Unsatisfactory</th>
<th>Needs Improvement</th>
<th>Acceptable</th>
<th>Very Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Quality of Supervision:
___ 1. Amount of Supervision.
___ 2. Level of Supportiveness.
___ 3. Case Conceptualization.
___ 4. Feedback on Written Work.

Comments:

Client Contact Opportunities:
___ 5. Assessment Cases.
___ 6. Individual Intervention Cases.
___ 7. Couple/Family Intervention Cases.
___ 8. Group Interventions.

Comments:
Externship Environment:
___ 9. Comfort of Working Environment (e.g., adequate office space, parking, safety).
___ 10. Quality of Seminars.
___ 11. Interaction with Other Trainees.
___ 12. Professional Manner with Clients and Other Staff.

Comments:

Briefly list the professional activities that this extern can engage in.

Describe the externship's strengths.

Describe the externship's relative weaknesses.

Comments and suggestions for getting the most from this externship.
Clinical Psychology Internship Completion Form

Intern’s Name: _________________________________________________

Internship Site: _________________________________________________

Beginning Date of Internship: _____________________________________

Ending Date of Internship: _______________________________________  

Approximate Number of Hours Worked: _____________________________

Name of Person Completing Form: _________________________________

Title or Position: ________________________________________________

Signature and Date: ______________________________________________
George Mason University
Department of Psychology

Thesis and Dissertation Committee Approval Form

This form must be signed by all members of your Thesis/Dissertation Committee and your Program Coordinator before the committee will be approved by the Department and recommended to the Dean’s Office. You are responsible for obtaining ALL signatures.

Students Name: __________________________________________

GNumber: ________________________________________________

Degree: _________________________________________________

Program: ________________________________________________

Thesis/Dissertation Chair: _________________________________

Signature: _______________________________________________

Committee Member #1: __________________________________________

Signature: _______________________________________________

Committee Member #2: __________________________________________

Signature: _______________________________________________

Program Coordinator/ Director of Clinical Training ___________________________ Date __________________________
Approval to Defend Dissertation Form

This form must be signed by all members of your dissertation committee and the Associate Chair for Graduate Studies. You are responsible for getting ALL signatures.

The signed form and a copy of your dissertation must be submitted to the Graduate Program Coordinator least three weeks prior to your anticipated defense date.

By signing this form the dissertation committee member agrees that he/she:

(1) has carefully read the dissertation
(2) finds the analysis and interpretation of the data appropriate.
(3) Does not anticipate that major changes will be necessary, and
(4) Believes that approval of the dissertation is conditional on only minor corrections and a successful defense.

Name: ____________________________________________

Dissertation Title: ______________________________________

________________________________________________________________________

Dissertation Chair: ____________________________________________

Committee Member: ____________________________________________

Committee Member: ____________________________________________

Committee Member: ____________________________________________

________________________________________________________________________

Associate Chair for Graduate Studies, Psychology __________________________ Date __________

Proposed Dissertation Defense Date: ________________________________
Dissertation Proposal Cover Sheet

NOTE: This page is to be used for the proposal only and NOT to be used for the final dissertation or thesis.

George Mason University

TITLE OF THESIS, DISSERTATION, OR PROJECT PROPOSAL
FOR MASTER’S OR DOCTORAL DEGREE

Student’s Name: Date:

Department/Program:

Degree:

Tentative Title:

Committee Members:

Signature Date Director

Signature Date Member

Signature Date Member

Signature Date Member

Approved by Program Coordinator (if appropriate)

Signature Date

Approved by Department Chairpersons

Signature Date

Date Received by the Graduate Dean of Director
Summary of F31 Predoctoral Fellowship Guidelines

The Ruth L. Kirschstein National Service Award for Individual Predoctoral Fellowship (F31) provides predoctoral training support for doctoral candidates who have completed their comprehensive examinations or the equivalent by the time of award and will be performing dissertation research and training. The applicant should provide evidence of potential for a productive research career based upon the quality of previous training and academic record. The applicant must propose a dissertation research project and training program which falls into a research area within the scientific mission of the NIAAA, NIBIB, NIDCD, NIDA, NIMH, or NINDS. The research training experience must enhance the applicant’s conceptualization of research problems and research skills, under the guidance and supervision of a committed mentor who is an active and established investigator in the area of the applicant's proposed research.

The research training program should be carried out in a research environment that includes appropriate human and technical resources and is demonstrably committed to the research training of the applicant. The application must include evidence that current and ongoing instruction in the principles of responsible conduct of research will be incorporated into the proposed research training plan. Fellowship awardees are required to pursue their research training on a full-time basis, devoting at least 40 hours per week to the training program. The F31 fellowship supports research training applied toward preparation of a dissertation and does not support study leading to the M.D., D.O., D.D.S., Psy.D., or similar professional degrees.


Writing Successful Proposals

A. General Strategies for Successful Proposals

Convincing reviewers of the merits of your proposal. Proposals are typically reviewed by a panel or group of scholars who are reasonably knowledgeable about the research area of your proposal. To succeed, you will have to be at least as knowledgeable as they are. Consider the reviewers to be "informed strangers." A primary function of your proposal is to persuade the review group that what you plan to do stands out in terms of conceptual innovation, methodological rigor, and substantive content. Remember that the review group has to choose among or rate many highly competitive proposals. Reviewers also can’t read your mind—if you don’t write it in the proposal, they won’t know about it. You must include enough detail to convince them your hypothesis is sound and important, your aims are logical and feasible, you understand potential problems, and you can properly analyze the data.

The typical peer reviewer:
► has a breadth and depth of knowledge and a vested interest in ranking applications in an unbiased and fair manner based on likely contribution to knowledge.

► may not be extremely familiar with all techniques used in a grant. All parts of the grant must therefore be clear and written in such a way that a non-expert can
understand them.

► ▶ may not know the applicant personally, or feel comfortable with his or her level of independence, knowledge of the field, ability to design experiments with appropriate controls, ability to decide what to do if proposed experiments don't work out, etc. It is the job of the applicant to convince the reviewer.

► ▶ may not fully understand the significance without a compelling argument.

► ▶ is capable of understanding preliminary data if presented.

► ▶ must read several applications in great detail and evaluate all of them. Therefore, the successful application is clear, precise, easy to read, and free of errors.

**Basic questions reviewers ask about research proposals:**

► How high are the intellectual quality and merit of the study?

► What are we going to learn as a result of the proposed project that we do not already know, i.e., what is its potential impact and why is it worth knowing?

► How novel is the proposal? If not novel, to what extent does potential impact overcome this lack? Is the research likely to produce new data and concepts?

► Is the hypothesis valid and is there evidence to support it?

► Are the goals or aims logical?

► Are the procedures appropriate, adequate, and feasible for the research?

► Is the investigator qualified to conduct the research?

► Are the facilities adequate and the environment conducive to the research?

**Additional questions reviewers ask about training plans:**

► Is the training plan distinct from the regular course of graduate study?

► Is the training plan feasible, i.e., can it be accomplished within time, funding, and geographic constraints?

► Will the training plan contribute significantly to the applicant’s academic career?

► Is there appropriate coordination between research and training components?

*Writing the proposal.* Writing a grant or fellowship proposal is different from writing up the results of research. A major difference is that the proposal details what you *plan to do*, rather than reporting on work already completed. You must also take care to communicate effectively
through clear and concise writing. Well-written proposals are organized, direct, concise, and carefully crafted to address the guidelines in the application. It is helpful to have several objective experts review your proposal before you submit it.

**Writing Tips**

1. Prefer the active rather than the passive voice. For example, write "We will develop a cell line," not "A cell line will be developed."
2. Keep related ideas and information together, e.g., put clauses and phrases as close as possible to - preferably right after the words they modify.
3. Simplify and break up long, involved sentences and paragraphs. In general, use short simple sentences; they are much easier on the reader. Your goal is communication.
4. Edit out redundant words and phrases. Edit and proofread thoroughly. Look carefully for typographical and grammatical mistakes, omitted information, and errors in figures and tables. Sloppy work will definitely suffer in review. Reviewers feel that if the application is sloppy or disorganized, the applicant's research may be as well.

**Writing a Proposal for a Research Project Grant**

The sections below are based on a typical NIH research project grant.

**Title**

1. Make your title specific and detailed. If your application is a revision, do NOT change the title.
2. Stay within the 56-character limitation (this includes spaces between words).

**Developing the Hypothesis**

1. Most reviewers feel that a good grant application is driven by a strong hypothesis. The hypothesis is the foundation of your application. Make sure it's solid. It must be important to the field, and you must have a means of testing it.
2. Provide a rationale for the hypothesis. Make sure it's based on current scientific literature. Consider alternative hypotheses.
3. A good hypothesis should increase understanding of biologic processes, diseases, treatments and/or preventions.
4. Your proposal should be driven by one or more hypotheses, not by advances in technology (i.e., it should not be a method in search of a problem). Also, avoid proposing a "fishing expedition" that lacks solid scientific basis.
5. State your hypothesis in both the specific aims section of the research plan and the abstract.

**Developing Your Research Plan**

1. A top-quality research plan is the most important factor determining your application's success in peer review. As with a scientific publication, developing your ideas is key. Read the grant application kit carefully for specific elements to be included in the research plan. Before proceeding into specific sections of the plan, here are some general tips:
2. Your application should be based on a strong hypothesis.
3. Be sure your project has a coherent direction.
4. Keep the sections of the plan well coordinated and clearly related to the central focus.
5. Emphasize mechanism: A good grant application asks questions about mechanisms.
6. Don't be overly ambitious - your plan should be based on a feasible timetable.
7. Specific aims and experiments should relate directly to the hypothesis to be tested

**PHS agency research plans include sections outlined in PHS 398 as follows:**

**A. Specific Aims (Should include 2-4 aims)**
1. Your specific aims are the objectives of your research project, what you want to learn, not activities you plan to conduct. The project aims should be driven by the hypothesis you set out to test. Make sure they are highly focused.
2. Begin this section by stating the general purpose or major objectives of your research in a brief introductory statement. You also want to catch reviewers’ attention, so make sure this is well written and compelling.
3. Be sure all objectives relate directly to the hypothesis you are setting out to test. If you have more than one hypothesis, state specific aims for each one. Keep in mind your research methods will relate directly to the aims you have described.
4. Choose objectives that can be easily assessed by the review committee. Do not confuse specific aims with long-term goals.

**B. Background and Significance**
1. Keep the statement of significance brief. State how your research is innovative, how your proposal looks at a topic from a fresh point of view or develops or improves technology.
2. Show how the hypothesis and research will increase knowledge in the field. Relate them to the longer-term, big picture scientific objectives and to the betterment of public health.
3. Justify your proposal with background information about the research field that led to the research you are proposing. The literature section is very important because it shows reviewers you understand the field.
4. Use this opportunity to reveal that you are aware of gaps or discrepancies in the field. Show familiarity with unpublished work, gained through personal contacts, as well.
5. Identify the next logical stage of research beyond your current application.

**C. Preliminary Studies/Progress Report**
1. By providing preliminary data, this extremely important section helps build reviewers' confidence that you can handle the technologies, understand the methods, and interpret results.
2. Preliminary data should support the hypothesis to be tested and the feasibility.
3. Explain how the preliminary results are valid and how early studies will be expanded in scope or size.
4. Make sure you interpret results critically. Showing alternative meanings indicates that you've thought the problem through and will be able to meet future challenges.
5. Preliminary data may consist of your own publications, publications of others, or unpublished data from your own laboratory or from others.
6. Include manuscripts submitted for publication.
D. Research Design and Methods

1. Describe the experimental design and procedures in detail and give a rationale for their use.

2. Organize this section so each experiment or set of experiments corresponds to one of your specific aims and is stated in the same order. Even holding to this structure, the experiments still must follow a logical sequence. They must have a clear direction or priority, i.e., the experiments should follow from one another and have a clear starting or finishing point.

3. Convince reviewers that the methods you chose are appropriate to your specific aims, that you are familiar with them, and that, unless innovative, they are well established. If your methods are innovative, show how you have changed existing, proven methods while avoiding technical problems. Describe why the new methods are advantageous to the research you propose to do.

4. More and more applicants are including colored charts, graphs, and photographs in their applications. If you must use color to get your point across, it is wise to also place a copy of the item in an appendix, noting this in the body of the text. (However, do not put important figures only in the appendix, or overly-reduced figures in the body of the application with enlargements in the appendix. The Research Plan must be self-contained. The appendix should not be used to circumvent the Research Plan page limits.) Many applicants are not aware that most of the study section members may receive only black and white photocopies of their original application. However, assigned reviewers do receive originals of the appendices (which is why five copies are requested) and usually receive original copies of the application as well. Now many applications are being distributed electronically.

Approach

1. State why you chose your approach(es) as opposed to others.

2. If you are choosing a nonstandard approach, explain why it is more advantageous than a conventional one. Ask yourself whether the innovative procedures are feasible and within your competence.

3. Call attention to potential difficulties you may encounter with each approach.

4. Reviewers will be aware of possible problems; convince them you can handle such circumstances. Propose alternatives that would circumvent potential limitations.

5. Consider the limitations of each approach and how it may affect your results and the data generated.

6. Spell it out in detail. While you may assume reviewers are experts in the field and familiar with current methodology, they will not make the same assumption about you. It is not sufficient to state, "We will grow a variety of viruses in cells using standard in vitro tissue culture techniques." Reviewers want to know which viruses, cells, and techniques; the rationale for using the particular system; and exactly how the techniques will be used. Details show you understand and can handle the research.

7. Make sure any proposed model systems are appropriate to address the research questions and are highly relevant to the problem being modeled.

Results

1. Show you are aware of the limits to - and value of - the kinds of results you can expect based on current knowledge of the subject. State the conditions under which
the data would support or contradict the hypothesis and the limits you will observe in interpreting the results.

2. Show reviewers you will be able to interpret your results by revealing your understanding of the complexities of the subject.
3. Many applications benefit from statistical analysis. The early involvement of a statistician to determine the amount of data to collect and the methods for analyses will favorably impress reviewers.
4. Describe your proposed statistical methods for analyzing the data you plan to collect. Define the criteria for evaluating the success or failure of a specific test.

**E. Human Subjects**
Assuring NIH human subjects are protected is a key responsibility of the applicant, in concert with the applicant's institution. Awards cannot be made until assurances are on file. If your proposed research does not involve human subjects, indicate this by noting "Not applicable in this appropriate section." Anyone reading your application will know immediately you have not just forgotten to complete this section. If your proposed research involves human subjects or samples from human subjects, read carefully and follow the Human Subjects Research section of the instructions. Include enough information so reviewers have no questions about what you propose to do. In addition, your research plan must be certified by your institution's institutional review board (IRB) prior to funding (unless exempt). Though IRB approval is not required at the time of application, you should start the process early because revisions and final approval can take time. Before an application can be funded, a Human Subjects Assurance must be on file with the Office of Human Research Protections (OHRP). Contact OHRP or your institutions grants and contracts office for details and help.

**F. Vertebrate Animals**
If the proposed research involves vertebrate animals, your project must be reviewed and approved by an institutional animal care and use committee (IACUC) prior to review, and an Animal Welfare Assurance must be on file with the Office of Laboratory Animal Welfare. See the instructions for item 5 of the face page of PHS 398 for further details.

**G. Literature Cited**
Refer to the literature thoroughly and thoughtfully but not to excess. The publications you cite need not be exhaustive but should include those most relevant to your proposed research. Research proposals typically do not fare well when applicants fail to reference relevant published research, particularly if it indicates that the proposed approach has already been attempted or the methods found to be inappropriate for answering the questions posed. Each citation must include the names of all authors (not et al.), name of the book or journal, volume number, page numbers (not first page only), and year of publication

**Common Mistakes for Research Grant Proposals**

**Problems with significance:**
1. Not significant nor exciting nor new research
2. Lack of compelling rationale
3. Incremental and low impact
Problems with specific aims:
1. Too ambitious, too much work proposed
2. Unfocused aims, unclear goals, listing of activities rather than research objectives

Problems with experimental approach:
1. Too much unnecessary experimental detail
2. Not enough preliminary data to establish feasibility
3. Little or no expertise with approach
4. Lack of appropriate controls
5. Not directly testing hypothesis or discussing alternative models
6. No discussion of interpretation of data

What are the major obstacles to grant writing and how can I overcome them?

“It’s such an overwhelming task”
Probably the biggest obstacle to writing grants and fellowships is that it seems to be an overwhelming task to many students. There is an array of information available from your school’s grants and contracts office, websites, department information, your advisor, and other students. Simply sifting through this information can seem daunting. Further, once you have identified a potential funding source and application process, the sheer amount of detail and work to complete as required is difficult to imagine. How can you overcome this obstacle? As with all complex tasks, it is important to approach grant writing one step at a time. You should first develop your research ideas carefully (and related training needs). Next you should identify viable sources of funding and consult with others about the specific procedures to follow. Another strategy for simplifying this process is to talk with others who have been successful and gather copies of successful applications for the funding source you are interested in.

“I don’t have time”
This problem is not limited to applying for grants and fellowships. Graduate students and faculty typically juggle multiple tasks which makes it difficult to find time for everything (or sometimes for anything). But fellowships and grants almost always are submitted by specific deadlines. One strategy is to select a deadline and allocate an appropriate amount of time before that deadline to focus almost exclusively on preparing your application (which will require having already collected pilot data, reviewing the literature, etc.). This time will be specifically for putting it all together and writing the proposal. Some students find it helpful to create a timeline and ask their advisor to help them meet each deadline. You must also leave enough time for your department and university to process your submission.

“I don’t have any pilot data”
Grants and fellowships that emphasize a research plan often require some type of pilot data. For doctoral students, this is usually collected as part of the second year or master’s project, or collected in collaboration with your advisor. It is not necessary to have an accepted publication based on this pilot data, but it is important to make a case for your proposed research based on work you have already done (or ongoing work in your lab). Pilot data is
particularly important if you are using new measures, novel situations, or participants from different ethnic or cultural groups (compared to previous studies).

“My area of research is hard to get funding for”
It is true that certain areas of research come into vogue for funding, often linked to specific advances in the fields, pressing social problems, or political winds. These concerns are often more pronounced for large-scale research projects. Remember that funding for predoctoral and postdoctoral students is linked primarily to the student and his or her capacity for success in academia. A strong academic record and clear career trajectory are very important!

“It’s just too much responsibility to have to worry about grants, budgets, reports, etc.—I just want to get through graduate school!”
But you also want to start a successful career, and grant funding is important!

What is my advisor’s role in the grant and fellowship process?
As with all research and training activities, you should always consult regularly with your advisor. Predoctoral applications benefit by one or two years in your advisor’s research lab, although some fellowships are for beginning graduate students only. For most fellowships with a training component, your training plan will be written in collaboration with your advisor. In some cases (for instance, NSF dissertation grants), your advisor must submit as the Principal Investigator (PI) on your behalf and you will be the Co-PI.

What is the review process?
Many foundations will assign reviewers to read and write a review of your proposal; in some cases, the reviewers meet to discuss their comments and in other cases the recommendations are sent to the foundation and evaluated by a specific committee appointed by the foundation. Applications to federal institutes are reviewed by committees comprised largely of academic researchers. Proposals under Program Announcements typically are reviewed by standing committees which may or may not be made public. For example, rosters for NIH committees are found on the agency website; however, NSF does not publish rosters. For NIH, you can request a specific committee at the time of submission in a cover letter. This makes sense if you find a review committee that has people who are working in your area. If you do this, it is a good idea to cite their work in your literature review. In most all cases, you will receive written and detailed reviews of your proposal. These will be very important in preparing a resubmission (when allowed). It is important to think of your reviews as helpful advice!

What are my chances of success and how can I improve them?
Success rates vary by source of funding, typically hovering between 10% and 30%. As an example, the graph below illustrates number of F31 (predoctoral fellowship) the National Institutes of Health (NIH) applications reviewed and awarded. As you can see, the submission rate has increased significantly over the last decade, although funding levels have increased only slightly. One way to improve your chance of success is to resubmit when appropriate and to be persistent! As another example, the National Science Foundation (NSF) receives approximately 40,000 proposals in all areas and funds about 11,000. Approximately 1,000 graduate fellowships are awarded each year from several thousand applications. If you search carefully on most websites you can determine number of grants received and number
funded each year to determine success rates.

**Mason ID Cards**

After registering, each student is required to obtain a university photo identification card. It must be presented to use the library and is required for admission to university events, when using university facilities and can be used as a debit-card at various food concessions and copy machines. Questions may be directed to the Photo ID Office at (703) 993-1004. You can obtain your G-Card at The HUB, Lower Level Room 1103. For more information, visit the University All Card Office.

**GMU E-Mail**

Students are required to activate and use their GMU E-Mail account to obtain Psychology Department list-serve messages and to access the university mainframe computer and library. Only GMU E-Mail accounts will be used for official university communication with students. For more information regarding access your E-Mail visit the ITU Support Center.

**Parking**

Parking decals may be purchased in person in the Parking Services Office located in the Shenandoah Parking Deck, or via Patriot Web. You will need a G-Card to purchase parking passes in person. Handicapped parking permits are available in the Parking Services Office. Parking registration information is also mailed to students several weeks before the start of the fall semester. For more information contact Parking Services.

**Health Insurance/Student Health Services**

George Mason provides a variety of health insurance options for graduate students. For students who meet specific qualifications, premiums for the Aetna Student Health Insurance Plan will be subsidized by the University. Students who do not qualify for the subsidy, may elect to purchase the policy and should contact Student Health Services regarding enrollment. The Student Health Services Office is available to all students at no or reduced fees. To determine eligibility for subsidized insurance, please click here.

**Student Wage/Hourly Employees**

All student wage/hourly employees are required to use Direct Deposit and must submit a time sheet online in order to be paid. To set up Direct Deposit and record your hours, please visit Patriot Web and click on "Employee Services","Time sheets" (to enter your hours) and/or "Pay Information" (to enroll in direct deposit).

**Mailboxes**

Each student is assigned a mailbox. Doctoral student mailboxes are located in the hallway next
to the Psychology Graduate Office in David King Hall. Faculty and Staff boxes are located in the copy room (DK 2001). MA mailboxes are located in the Physio Lab for CBN, alongside the doctoral mailboxes for Applied Developmental, The ARCH Lab for Human Factors, The Clinic for School Psychology and Robinson 211C for Industrial Organizational. Be sure to check the mailboxes periodically for any messages that might be left for you by faculty, staff, or students. Please be aware that student mailboxes are not secured, so use caution in what you place in them.

**Additional Resources for Graduate Students**

The following websites may be helpful to new and returning students:

- **General resources for students** - [http://www.gmu.edu/resources/students/](http://www.gmu.edu/resources/students/)
- **Graduate Student Life** - [http://gradlife.gmu.edu/](http://gradlife.gmu.edu/)
- **Office of Postgraduate Fellowships and Scholarships** - [http://honorscollege.gmu.edu/pgfs/](http://honorscollege.gmu.edu/pgfs/)
- **The Writing Center** - [http://writingcenter.gmu.edu](http://writingcenter.gmu.edu)
- **College of Humanities and Social Sciences Graduate Student Assistance** - [http://chss.gmu.edu/graduate/for-graduate](http://chss.gmu.edu/graduate/for-graduate)
- **Counseling and Psychological Services** - [http://caps.gmu.edu/](http://caps.gmu.edu/)
- **Learning Services** - [http://caps.gmu.edu/learningservices/](http://caps.gmu.edu/learningservices/)
- **Multicultural Services** - [http://caps.gmu.edu/multiculturalservices/](http://caps.gmu.edu/multiculturalservices/)
- **Office of Student Support and Case Management** - [http://osscm.gmu.edu/](http://osscm.gmu.edu/)
- **University Registrar** - [http://registrar.gmu.edu/index.html](http://registrar.gmu.edu/index.html)
- **Financial Aid** - [http://financialaid.gmu.edu/](http://financialaid.gmu.edu/)
- **Student Accounts** - [http://studentaccounts.gmu.edu/](http://studentaccounts.gmu.edu/)