



CAL POLY

Psychology & Child Development

COLLEGE OF LIBERAL ARTS

MASTER OF SCIENCE IN PSYCHOLOGY

Marriage and Family Therapist

2019-2020

STUDENT HANDBOOK

**Psychology and Child Development Department
California Polytechnic State University**

San Luis Obispo, CA 93407-0387 (805) 756-2033

<http://psycd.calpoly.edu/graduate>

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INTRODUCTION

Welcome to Cal Poly and the Master of Science in Psychology. The program prepares you to become a marriage and family therapist and meets educational requirements for California's Marriage and Family Therapist License (LMFT).

This handbook answers questions regarding your academic and pre-licensure responsibilities. Please refer to it before questioning program support staff, your graduate advisor, or other faculty. It is an important resource and you should refer to it throughout your tenure at Cal Poly.

Please read this handbook (in its entirety) immediately. When finished, please read and sign the "**Master's Agreement**" found in Appendix A. You should return the form to your advisor when you meet to discuss your Working Formal Study Plan (described below).

Program Protocol

Although the MS Program is diverse in instructors, supervisors, and advisors, there are some basic expectations many share regarding classroom, office, and general program communication and conduct. Included below please find a few common (but certainly not exhaustive) items:

- Unless otherwise permitted, please address your instructors formally (e.g., "Dr." or "Mr./"Ms."), depending on their degree.
- Alert your instructor when and why you might leave early, be late to class, or absent; otherwise, please be on time, plan to stay, and be engaged.
- It is expected that you will attend all scheduled class sessions. Plan other commitments/responsibilities around your course schedule.
- Please minimize food/beverage noise—it is distracting. If possible, eat/hydrate before/after class or during breaks.
- Please do not talk to classmates during lectures. Quite simply, it is distracting to others and disrespectful to the instructor.
- Please do not assume you will receive an "A" in all your classes. An "A" still stands for "outstanding," and it is earned rather than something to which you are entitled.
- Please, please, please avoid unnecessary email messages. In other words, do not send messages that can wait until class or office hours; do not expect faculty to repeat in an email information you should have obtained in class; please come to office hours if you have a substantive question or need more than minimal help with an assignment; last, do not email faculty (or Ms. Nash) for information that's in this handbook.
- Give faculty a minimum of two weeks to write/send letters of recommendation.
- Do not expect the program to work around your schedule. We assume that if you're here, you've made the necessary changes in your work, family, and social calendar to accommodate an intensive, largely fixed, and demanding professional program schedule.
- Please refrain from using phones or other electronic devices for non-emergent and/or non-class related affairs. Phones should be turned off and put away during class/supervision time.

PROGRAM OVERVIEW

Content and Curriculum

To get started, please examine the skills and knowledge we expect you to acquire at Cal Poly (Appendix B). Next, please see a flow chart of the academic requirements you must fulfill to graduate and obtain an associate registration number (Appendix C). The curriculum, including Two- and Two +2 Quarter Year sample class schedules, is itemized in Appendix D.

Note: In the past, roughly 50% of students have completed required coursework in three (versus two) years due to family, work and other demands. Graduate classes are only offered once a year. Please keep this in mind as you plan.

Prerequisites: Program prerequisites are: Abnormal Psychology, Developmental Psychology/Lifespan Development/Theories, Personality, Introductory Statistics, and Research Methods in Psychology (or related discipline). You must complete all program prerequisites before your first quarter of enrollment.

Incomplete Grades: If you receive an incomplete (I) in a course, it will remain on your transcript for one calendar year. If you complete the course within that year, you will be issued the grade you earned. If you fail to successfully complete the course by year's end, you will be given an "F". Although professors may be sympathetic to a student's need for extra time, it is best if you fulfill your coursework as soon as possible to avoid being placed on Academic Probation and/or a Behavior Contract.

Graduating Writing Requirement (GWR)

Cal Poly wants you to write clearly and well. You must complete the GWR by the first quarter in the program. If you fail to meet the GWR by the end of your first quarter at Cal Poly, you will be put on Behavioral Contract.

To satisfy the GWR, you must meet one of the following six criteria:

1. You have earned a master's or higher-level graduate degree at any U.S.-accredited college or university. You must provide a copy of your transcripts showing that your degree has posted (official or unofficial transcripts are fine).
2. You have earned a bachelor's degree at another CSU (California State University) or at a UC (University of California). You must provide a copy of your transcripts showing that your degree has posted (official or unofficial transcripts are fine).
3. You have earned a bachelor's degree from a U.S.-accredited college or university that has an upper-division writing requirement. You must provide a copy of your transcripts showing that your degree has posted and that the school has an upper-division writing requirement (again, official or unofficial transcripts are fine). If your transcripts do not specify that you have fulfilled an upper-division writing requirement, you must also provide evidence, such as a web link or catalog excerpt, to indicate that the school has the requirement for all its students.
4. You have earned a bachelor's degree and have taken the GRE (Graduate Record Examination) and earned a score of 5 on the analytical writing section. You must provide a copy of your GRE scores.

5. You are a transfer student from another CSU or UC and have not yet earned a degree, but have met the GWR at the other CSU or UC. You must provide a copy of your transcripts showing that you met the GWR at the other CSU or UC.
6. You have completed coursework at another accredited four-year college or university that is the equivalent of Cal Poly coursework for GWR certification. If you use coursework to apply for the waiver, that coursework must meet the same standards that Cal Poly applies to its own students. (The exception is coursework specifically designated as meeting a school's upper-division writing requirement – see Option 3 above). To apply for a waiver based on coursework, complete the following steps:
 - a. Indicate on a copy of your transcripts (official or unofficial) which upper-division English course meets the requirements for the waiver. Remember that you must have enrolled in this course after you reached junior status.
 - b. Indicate the grade that you earned in the course (you must have earned at least a C).
 - c. Provide evidence of in-class writing of at least 500 words on a single unannounced topic (either a syllabus indicating the writing or a graded copy of the writing itself).
7. Provide an official description of the course from the course catalog.

To apply for a GWR waiver, collect the appropriate documents and submit them to Marikay Pannone at the University Writing and Rhetoric Center (UWRC), Building 10, Room 130. Please allow two weeks for the URWC to process your request.

Working Formal Study Plan and Advancement to Candidacy

After examining the Student Handbook, all graduate students are required to complete a Working Formal Study Plan *by the end of their first quarter* in the program; otherwise, a hold will be placed on your registration. To complete a Working Formal Study Plan, please make an appointment with your advisor (the faculty person assigned to you during orientation) within the first three weeks of fall quarter.

Continuous Enrollment

Graduate students are required to maintain continuous enrollment from the time of matriculation until completion of the degree. Students maintain continuous enrollment by being enrolled as a regular student or by registering in a special course designated for this purpose. Continuous enrollment is defined as being enrolled during at least three quarters each college year. The special course, GS 597 Continued Graduate Study, is taken through Cal Poly Continuing Education. It is a one-unit course graded credit/no-credit. Credits in GS 597 will not count toward meeting degree requirements.

Students who fail to fulfill this continuous enrollment requirement will not be permitted to graduate—even if all degree requirements have been completed—until payment has been made for all quarters of non-enrollment (for example, the student may register in GS 597 through Continuing Education for a number of units equal to the number of non-enrolled quarters). All students must be enrolled during the quarter in which they graduate.

The continuous enrollment requirement for graduate students will apply to all graduate programs unless an exemption is sought and approved. Programs offered only in summer must require continuous enrollment in summer quarter each year. Students on approved university leaves of absence as defined in the University catalog (Medical Leave; Planned Educational Leave) will not be required to enroll during the leave period.

Practicum (PSY 569)

In spring of your first year, you may be eligible to enroll in Practicum. This is a two- quarter supervised clinical sequence completed at the San Luis Obispo Counseling Service training center. In practicum you will begin assessing, diagnosing, and counseling individuals, couples, families, and groups. You will observe one another's sessions and provide feedback to your fellow clinicians. Intake examination, progress notation, clinic administration, crisis intervention, and other skills will also be employed.

Note: Due to BBS regulations, staffing limitations, and limited client availability, only 8 students will be permitted to enroll during Spring Quarter of their first year. All remaining students must wait until Fall Quarter of year two. Prerequisite courses GPA, Graduate GPA, and assessment of readiness for practicum will determine eligibility. In the event of a tie, faculty will conduct a lottery.

Collectively, PSY 569 and PSY 576 (see below) are the cornerstone of the M.S. program. Both courses should be approached and performed with the utmost of professionalism. For a detailed description of Practicum, please see the Practicum Handbook (Appendix E). In the meantime, an overview of practicum procedures and requirements is provided below:

1. Pre-Enrollment Form—submit during the quarter prior to enrolling in Practicum. Forms are available from the support staff in the PSY & CD Department Office.
2. Students must have completed all of the following courses:
 - a. PSY 520 – Marriage & Family Therapy
 - b. PSY 535 – Child & Adolescent Psychopathology
 - c. PSY 555 – Counseling & Communication
 - d. PSY 560 – Individual Therapy
 - e. PSY 565 – Diagnosis & Treatment
 - f. PSY 574 – Psychological Assessment
3. Insurance—you must secure Malpractice Insurance before Practicum. By becoming a member of CAMFT (California Association of Marriage and Family Therapists), you are eligible for free malpractice insurance. Applications are available on-line at: www.camft.org.
4. Counseling—40 hours of clinical service over the two-quarter Practicum sequence. Failure to accrue these hours may eventuate in a third or even fourth quarter of Practicum. The required 40 hours are divided as follows:
 - a. Individual Therapy (15 hours)
 - b. Couples/Family Therapy (15 hours)
 - c. Group Therapy (10 hours)

Observation—40 hours

Supervision—20 hours of individual and 40 hours of group supervision

Grading—Credit/No Credit. Students failing to demonstrate a minimum level of clinical competency over the 2-quarter sequence may be required to complete a third or possibly fourth quarter. Once the student successfully passes PSY 569, s/he may be advanced to PSY 576 (described below). Students who fail practicum will be removed from the program.

Traineeship (PSY 576)

Following completion of Practicum, you will complete four consecutive quarters of clinical work in the community. The Traineeship Handbook (Appendix F) details this experience, but the basic requirements are as follows:

Minimum Requirements:

- 150 hours per quarter in the fieldwork site (15 to 20 hours/week on-site).
- 60 of those hours must be providing face-to-face counseling each quarter.
- You should receive 10 hours of individual and 20 hours of group supervision on site per quarter.
- Your caseload should be comprised of at least 2 families, parent-child, and/or couples. Individual adolescent or child with periodic contact with parents/caregivers does not count as family counseling.
- You are required to attend University Supervision weekly and consistently throughout your Traineeship experience.
- Your on-site clinical supervisor is to complete and return an evaluation of your performance at the end of every quarter.

The Comprehensive Exam or Master's Thesis

To complete the program, you must pass the Comprehensive Examination OR write and defend a Master's Thesis:

Note: If your long-term career goal is to teach and conduct research, then you should pursue a Ph.D. Academic positions are largely research based, and students primarily interested in counseling do not need the extra schooling to become a licensed clinician at the master's level. Consequently, if you plan on pursuing doctoral training, complete a Master's Thesis—it will demonstrate that you have the interests and research skills conducive to an academic career. If teaching and research are not your primary objective, then take the comprehensive exam—it is quicker and excellent preparation for California's MFT licensure examination.

The Comprehensive Exam: This is a cumulative learning and assessment experience covering the entire M.S. curriculum. It is administered the second Friday of every quarter; during summer, it is usually offered the fifth Friday of the quarter. It consists of 100 multiple choice questions covering core curriculum domains and 6 essays on the following subjects: research design and analysis, assessment, diagnosis, treatment planning and intervention, legal/ethical issues, and cultural considerations. The core curriculum domains for the multiple-choice test and studying/preparation recommendations are provided in Appendix G. Sample multiple choice questions and clinical vignettes are in Appendix H.

To be eligible to take the exam you must not be on academic probation or have received any D or F grades. Additionally, you must have 12 or fewer units of remaining coursework (including coursework taken during the quarter you sit for the exam). You may make an examination reservation by contacting Andrea Nash in the PSY/CD office (805-756-2456; anash@calpoly.edu). The deadline to register is the end of the eighth week of the quarter prior to the one you plan to take the exam.

Note: If you pass one section (multiple choice, written essay) but fail the other, you need only re-take the section you failed. However, you will have to wait until the following quarter to complete the examination. Students who fail comps twice will need to petition to take the exam a third time. If the petition is granted and you fail again, you may be removed from the program.

The Master's Thesis: As mentioned above, the Master's Thesis is highly recommended for students interested in doctoral training and an academic career in Clinical/Counseling Psychology. Steps for completing a thesis are summarized below. A more detailed description of the thesis process is provided on the Graduate Education website (www.grad.calpoly.edu).

1. Start now. Specifically, think about what interests you (e.g., mood disorders, play therapy, diversity issues), review the literature on the subject, and talk to faculty, especially those with similar interests. The more you read and discuss, the more you will know what questions to ask and hypotheses to test.
2. Complete PSY 585. This course is designed to give you a foundation in research design and analysis that will allow you to execute your project.
3. Select a Chairperson and two readers for your thesis committee. Ideally, these faculty members' research interests will be similar to yours. Review Appendix I to get a sense of the PSY & CD faculty and their areas of expertise. Also, keep in mind only two of the three members need to be university affiliated. Faculty from other departments (e.g., Women's Studies) may also serve on your committee. The faculty strongly recommends that you review past thesis research before beginning your own.
4. Write your thesis proposal. Below is an outline of the thesis proposal format you must follow:
 - a. Title/Approval Page
 - b. Introduction
 - i. Definition of Terms
 - ii. Brief review of the Literature (5-8 pages)
 - iii. Statement of the Problem
 - iv. Hypothesis (Tentative)
 - c. Method
 - i. Subjects
 - ii. Instruments
 - iii. Procedure
 - iv. Analysis
 - d. References
5. Thesis Committee approval: Meet with committee members, discuss project, integrate suggestions, and secure signatures approving the project.
6. University Committee on Research with Human Subjects: If your research involves human subjects, you must get permission from this committee. Approval forms are available from the Research and Economic Development Department (www.research.calpoly.edu/HS-home page; Bldg. 38, Room 154; 756-1508).

Note: You may not collect data until steps five and six have been completed.

7. Collect your data and write your thesis. Style must follow the format provided in the

Publication Manual of the American Psychological Association (6th Edition) and the guidelines provided by the Graduate Education Office (*Master's Thesis and Project Formatting Guidelines*).

8. Thesis Defense: Meet with your thesis committee to present results, integrate suggestions, and obtain approval of the completed work.

Note: Give committee members a copy of your thesis at least two weeks (preferably longer) prior to the scheduled defense meeting.

9. Graduate Education Office Approval.

Outstanding Graduate Student Award

Every year the Psychology and Child Development Department acknowledges a graduating student who has demonstrated excellence with respect to academic performance, clinical skill, professional conduct, community service, research, and/or other factors. The student is formally recognized during the department's graduation celebration and at the College of Liberal Arts Student Awards Ceremony.

Conditions for Dismissal

You have entered a training program designed to teach you how to help others. Specifically, you will be taught to assess, diagnose, and treat children, adults, couples, families, and groups. You will interface with other students, academic faculty, clinical supervisors, treatment teams, hospital/legal/school personnel, and others involved in the everyday life of your clients. Consequently, you are held to the same professional standards as licensed clinicians and are expected to demonstrate knowledge and skill levels commensurate with post-baccalaureate education and training.

Occasionally, however, a student does not meet these basic expectations. If remedial efforts (e.g., Behavior Contract; Academic/Administrative Probation) are unsuccessful, or the behavior is particularly egregious, s/he may be disqualified from the program. Again, this does not often happen, but below please find the conditions under which a student may be removed. The protocol for program removal is detailed in Appendix J.

1. Poor academic performance: If your GPA drops below 3.0, you will be automatically placed on Academic Probation (AP). If you remain on AP for two consecutive quarters, you will be required to sign a Behavior Contract with the graduate faculty to maintain a 3.2 GPA until you bring your overall average up to 3.0. Failure to fulfill the Behavior Contract will result in dismissal from the program.
2. Unsatisfactory scholastic progress: Your GPA may be above 3.0, but frequent course withdrawals, failure to progress toward your degree, or noncompliance with an academic or administrative requirement may warrant a Behavior Contract or recommendation for program disqualification. In addition, D or F grades are unacceptable and the course must be repeated, regardless of your GPA.
3. Unsatisfactory performance in Practicum or Traineeship: If you receive a grade of "No Credit" (NC) in either course, you will automatically be placed on probation, regardless of your GPA. A second NC grade will result in program dismissal.
4. If you're a Conditionally Classified Student (entering GPA less than 3.0) and fail to maintain a 3.2 GPA the first 24 units of the program, you may be dismissed.
5. Unethical, illegal, or otherwise unprofessional conduct: As noted above, you are entering a profession designed to promote human welfare. Consequently, you are expected to be responsible, dependable, law abiding, and professional. Failure to do so may result in disqualification.

Notification of Process

The faculty meets quarterly to discuss student progress. If a student is performing unsatisfactorily, faculty will send him/her a letter describing the problem (e.g., low grade; poor attitude; cheating/plagiarism; other unprofessional conduct). The student will be expected to remedy the issue or demonstrate improvement within a specified time frame (e.g., one quarter). Failure to progress may result in a Behavior Contract and/or Academic/Administrative Probation. Contract and/or Probation failure will result in recommendation for disqualification.

Behavior Contract

As mentioned above, if a student engages in unsatisfactory academic and/or professional conduct, s/he may be placed on a Behavior Contract. It's important to note the spirit of the contract is not punitive; in fact, the intent of the document is to prevent behavior that could *eventuate* in punitive action (e.g., probation and/or program disqualification). The contract will be tailored to the needs of the student and include a time frame for expiration or renewal. The student will meet immediately with the graduate faculty to discuss the rationale and terms of the contract, including problem attitudes/behaviors and their attenuation. Likewise, the program Coordinator and/or the graduate faculty may meet periodically with the student to discuss progress or lack thereof. See Appendix K for examples of Behavior Contracts.

Student Disclosure of Personal Information

Throughout your training you will be asked to explore and comment on yourself, family of origin, relationships, and other personal items. Instructors, graders, and/or clinical supervisors will, at some point, ask you to introspect and share your observations in verbal and/or written form. The breadth and depth of your revelations, of course, is up to you, but the purpose of such requests is to help you understand yourself and increase your effectiveness in helping others.

As a general rule, the faculty keeps student disclosures confidential, regardless how they were secured. We treat such information much the same as material obtained from clients in therapy—it is held in "discretionary confidence." This means we will not share it unless, in the judgment of the faculty holding the information, such disclosure is necessary to best serve the interest of the student and/or the student's clients.

Financial Aid

Financial aid at Cal Poly is limited and many students work part-time. This is one reason why earlier in this handbook it's noted students often take three years to graduate. However, the university does offer some research grants and scholarships (please visit the Financial Aid Office and the Graduate Education website for more information) and, of course, there are always student loans. Below is a list of some potential funding opportunities available to you (see the Graduate Education website for application information and deadlines):

- California Predoctoral Program
- Chancellor's Doctoral Incentive Program
- Diverse Education Scholarship
- Graduate Equity Fellowship Program
- Graduate Presentation Award
- Non-Resident Tuition Waiver
- Resident Tuition Waiver
- State University Grants

Also, a limited number of Teaching Associate and Graduate Assistant positions are awarded through Graduate Education every year (deadline May 1st for the following year). Finally, the San Luis Obispo Counseling Service (where practicum is conducted) hires two new Clinical Assistants annually. These one-year positions provide extra clinical as well as financial opportunities. For a detailed job description please see the Clinical Assistant Handbook in Appendix N.

Professional Organizations

Appendix O provides a description and addresses of professional organizations relevant to the program and your career aspirations. If you plan on being a Marriage and Family Therapist, we highly recommend you become a student member of the California Association for Marriage and Family Therapy (CAMFT). The local chapter meets monthly and is an excellent venue for networking and meeting other local therapists. If you plan on pursuing a doctorate, we suggest you become a student member of the American Psychological Association (APA).

Request for Degree Evaluation

A student must request a final graduation evaluation from the Evaluations Office approximately three quarters prior to the anticipated date of degree completion. A student cannot graduate without this evaluation (evaluations@calpoly.edu).

Request for Transcripts and Program Certification Form B

Upon graduation, the Program Coordinator must certify that students have fulfilled various Business and Professions Code Section requirements regarding graduate education and training. Consequently, following graduation and completion of ALL coursework, you must contact the Registrar's Office and request that an electronic copy of your transcripts be sent to Dr. Sweatt, MS Program Coordinator, in the Psychology & Child Development Department. Request that your transcripts NOT be sent, however, until after your degree has posted. This transcript is necessary to complete the Board of Behavioral Science's Program Certification Form B (Appendix S).

On Program Certification Form B, complete *the top two lines* (last/first name, social security number, your enrollment date [e.g., when you began the MS program]) and then give or mail it to Dr. Sweatt. Program Certification Form B will be returned to you in a stamped and sealed Cal Poly envelope that you will enclose with your application for associate status registration.

Licensure Information

The purpose of our program is to prepare you for licensure and a professional career, but trainees (that's your official designation) and faculty often get lost in the morass of forms, documents and changing requirements of the State of California. Please see the Board of Behavioral Science's *Answers to Most Frequently Asked Question* relating to MFT Trainee and Intern and the MFT Student Handbook for more information about licensure. However, here is a list of the most pertinent information:

1. Trainees can accumulate a maximum of 750 hours of pre-degree clinical experience (face-to-face client contact) that will count toward the 3000 hours required for licensure.
2. Trainees may accumulate a maximum of 250 hours of workshops, seminars, etc., toward the 3000 hours required for licensure. Your Practicum and/or Traineeship supervisor must sign for these hours on your log.
3. Trainees may count clinical observation hours toward licensure.
4. All hours of experience must be gained within six years prior to applying for examination For licensure.

5. Trainees may receive hours of experience as volunteer or paid employees, however, they must receive supervision under a licensed professional.
6. Trainees must receive one hour of individual supervision OR two hours of group supervision for every five hours of clinical work.
7. Two clock hours of group supervision = one hour for licensure.

Note: Handbook and other forms and materials are available from the Board of Behavioral Sciences website at: bbs.ca.gov

Facts to remember about licensure following graduation:

1. Your official title is now Associate.
2. To officially acquire this title, you must register with the Board of Behavioral Sciences and receive an Associate Number.
3. If you make an application for your number within 90 days of degree conferral, all post degree hours can be counted as of the date of conferral. Otherwise, hours count only after the date the registration number was assigned.
4. An Associate can be registered for a maximum of six years. If you haven't finished your 3000 hours by then, you must apply for an extension. If you don't apply before your registration runs out, you will lose all of your hours and have to start all over again under a new number.

APPENDIX A



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Development

MASTER'S AGREEMENT

I, _____, acknowledge I have read the 2019/2020 Master of Science in Psychology Student Handbook and understand and will abide by the rules, regulations and procedures contained therein. I have consulted with my advisor regarding my questions of these rules, regulations and procedures. I understand this document will be placed in my file in the Psychology and Child Development Office.

Student Signature

Date

Advisor Signature

Date

1 Grand Ave. San Luis Obispo, CA 93407-0387
Tel: 805-756-2033, Fax: 805-756-1134, email: psycd@calpoly.edu

APPENDIX B

Program Learning Objectives

Cal Poly's Master of Science in Psychology is a 90-quarter unit professional degree program designed to prepare students for licensure as Marriage and Family Therapists (MFT). Graduates are also prepared for doctoral training in clinical or counseling psychology. To these ends, students in our program will:

1. Develop the intrapersonal and interpersonal knowledge and skills required for ethical, efficacious, and culturally responsive clinical practice. (Professional Development)
2. Demonstrate written, oral, and interpersonal communication skills conducive to empathic, respectful, and collaborative working relationships with diverse individuals, children, couples, families, and professionals. (Communication)
3. Demonstrate legal, ethical, and documentation knowledge of marriage and family therapy practice and how to apply these standards to diverse populations and contexts, such as public agencies, schools, and private practice. (Legal/Ethical)
4. Conduct evidence-based, culturally responsive core and advanced counseling and psychotherapy skills with diverse individuals, children, couples, and families. (Counseling Skills)
5. Conduct evidence-based, culturally responsive assessment and diagnostic procedures with diverse individuals, children, couples, and families. (Assessment & Diagnosis)
6. Conduct evidence-based, culturally responsive treatment planning, progress notation, and discharge planning with diverse individuals, children, couples, and families. (Treatment)
7. Demonstrate ability to access and utilize research as critical consumers to implement best practices strategies with diverse clients and issues. (Research)

FLOW CHART

ADMINISTRATIVE PROGRESSION THROUGH THE M.S. PSYCHOLOGY PROGRAM AT CAL POLY

(See Graduate Education website for complete details: www.grad.calpoly.edu)

1. ADMISSION TO M.S. PSYCHOLOGY PROGRAM

Eligibility determined by Admissions Office. Acceptance determined by program faculty. Admission categories:

- Graduate classified (regular or full admission), or
- Graduated conditionally classified (admission contingent on satisfying deficiencies or conditions)

2. GRADUATE WRITING REQUIREMENT

Completed during the first quarter of enrollment

- Pass Writing Proficiency Exam, or
- Pass approved English composition or literature course with a C or better and receive certification of writing proficiency, or

Certify requirement was met as part of under-graduate degree at Cal Poly or other CSU/UC campus; or

- Obtain waiver

3. WORKING FORMAL STUDY PLAN & ADVANCEMENT TO CANDIDACY

To be completed during the first quarter enrolled with your faculty advisor. It demonstrates your plan for completing core course requirements and electives.

4. THESIS OR COMPREHENSIVE EXAM

Register for and pass comprehensive exam, OR Select topic and thesis committee; Propose thesis; Conduct and defend thesis; Approval of thesis by Graduate Studies and Kennedy Library

5. REQUEST FOR GRADUATION EVALUATION & APPLICATION FOR MASTER'S DEGREE

File 3 quarters prior to degree completion. Establishes quarter of graduation: (maximum of 7 years from initial work noted on Working Formal Study Plan). Identifies any unmet requirements.

6. SUBMIT FINAL FORMAL STUDY PLAN

Submit within the first 3 weeks of the beginning of the quarter in which you plan to graduate

7. SUBMIT THESIS, PROJECT or EXAM APPROVAL FORM

Submit once you have completed your culminating experience, by the last day of the quarter in which you intend to graduate. Refer to Master's Thesis Submission Process for detailed instructions.

8. DEGREE POSTED – DIPLOMA MAILED

9. REQUEST FOR ASSOCIATE REGISTRATION NUMBER AND PROGRAM CERTIFICATION FORM

To be filed within 90 days of granting of M.S.; Order and send graduate Transcripts (after degree has posted) to Graduate Program Coordinator; Coordinator then sends you the Program Certification Form; Complete BBS associate registration packet and submit all required materials to BBS.

APPENDIX D

Two-Year and Two-Year + 2 Quarter Plans for the Master's Program in Psychology

Two-Year Plan

First Year

Fall

PSY 520- MFT: Professional Identity, Theory, & Practice*

PSY 535- Child and Adolescent Psychopathology*

PSY 560- Individual Therapy*

Winter

PSY 555- Counseling & Communication*

PSY 565- Diagnosis/ Treatment Planning*

PSY 574- Psychological Assessment*

Spring

PSY 556- Multicultural Counseling & Psychology

PSY 566- Group Psychotherapy

PSY 575- Gender, Couple, and Sexual Dysfunction Therapy

PSY 569- Practicum (3 units)

Summer

PSY 569- Practicum (3 units)

PSY 564- Ethical/Legal Issues**

*Must be completed prior to PSY 569

**Must be taken prior to or with PSY 569

Note: Practicum (PSY 569) only offered Spring/Fall. Only 8 students may enroll. Students will be ranked according to GPA and other factors.

Second Year

Fall

PSY 568- Advanced Psychotherapies or PSY 599-Thesis

PSY 571- Advanced Family Therapy

PSY 585- Research Methods

PSY 576- Traineeship

Winter

PSY 572- Child/Adolescent Therapy

PSY 588- Substance Abuse

PSY 576- Traineeship

Spring

PSY 504- Psychopharmacology

PSY 577- Community Mental Health: Issues and Practices

PSY 576- Traineeship

Summer

PSY 576- Traineeship

Two Year + 2 Quarter Plan

First Year

Fall

PSY 520- MFT: Professional Identity, Theory, & Practice*

PSY 535- Child and Adolescent Psychopathology*

PSY 560- Individual Therapy*

Winter

PSY 555- Counseling & Communication*

PSY 565- Diagnosis/ Treatment Planning*

PSY 574- Psychological Assessment*

Spring

PSY 556- Multicultural Counseling & Psychology

PSY 566- Group Psychotherapy

PSY 575- Gender, Couple, and Sexual Dysfunction Therapy

Summer

PSY 564- Ethical/Legal Issues**

Second Year

Fall

PSY 571- Advanced Family Therapy

PSY 585- Research Methods

PSY 569- Practicum

Winter

PSY 572- Child/Adolescent Therapy

PSY 588- Substance Abuse

PSY 569- Practicum

Spring

PSY 504- Psychopharmacology

PSY 577- Community Mental Health: Issues and Practices

PSY 576- Traineeship

Summer

PSY 576- Traineeship

Third Year

Fall

PSY 576- Traineeship

PSY 568- Advanced Psychotherapies or PSY 599-Thesis

Winter

PSY 576- Traineeship

APPENDIX E

PSY 569 COUNSELING PRACTICUM HANDBOOK

Welcome to Counseling Practicum. At this point in your training, you have had the basic coursework to begin helping others. This course is designed to promote your clinical skills and identity as a counselor. Specifically, you will be applying your knowledge of psychological assessment, psychiatric diagnosis, counseling theory and practice, and legal/ethical issues to real-time problems of community clients. As you counsel others, you may also learn something about yourself.

Section One: OVERVIEW AND EXPECTATIONS

INTRODUCTION

You are considered a “staff member” of the SLO Counseling Service. For two consecutive quarters, you will counsel individuals, couples, families, and groups. For every session, you will observe or be observed by your peers and give/receive feedback in a respectful, constructive, and professional manner. You will meet one hour a week with your faculty supervisor and two hours per week for group supervision to discuss client sessions.

During practicum, you will conduct assessment interviews for individuals, couples, and families. Specifically, you will take psychosocial/family histories, conduct mental status exams, and proffer psychiatric diagnoses. You will build therapeutic rapport with your clients, as well as develop theory-driven treatment plans based on his or her clinical needs. You will also document patient progress, integrate supervisor feedback, manage case files, and conclude your work with clients in an informed, timely, multiculturally competent, and professional manner.

As you begin working with clients, it is important that you understand your personal and interpersonal dynamics, strengths/weaknesses/biases, and the ways in which you may knowingly or inadvertently help or hinder your patients. It is not uncommon for students in the graduate program to undergo personal psychotherapy.

The SLO Counseling Service staff changes composition every two quarters. Like most groups, it takes time to bond; consequently, it is important to let others know how you would like to be supported and best receive feedback. Staff rapport and cohesion is an important element of practicum and helps mediate the stress of clinical work.

EVALUATION

At the end of each quarter, your supervisor will evaluate your progress. Although supervisors differ in theoretical orientation and interpersonal style, each one is looking for similar minimum competencies in assessment, diagnosis, treatment planning, core counseling skills, progress notation, professionalism, and legal/ethical conduct, among other things.

Throughout the quarter, your supervisor will give you feedback on one or more of the aforementioned variables. Consequently, you should not be surprised by the conclusions your supervisor draws at quarter’s end. After two quarters, your supervisor will determine whether or not you are qualified for traineeship placement, the four-quarter clinical sequence following practicum.

TRAINEESHIP

Once you’ve successfully completed practicum, you may apply for Traineeship (PSY 576). Specifically, during the second quarter of practicum, the PSY 576 Traineeship Coordinator will come to class to talk with everyone about the various agencies accepting interns. Afterwards, s/he will arrange for site representatives to visit group practicum and describe their training opportunities. Interviews are then arranged and, eventually, trainees are selected and placed. Please remember it is the Traineeship Coordinator’s job to notify agencies of your interest—you are not to contact traineeship sites without first consulting him/her.

Section Two: THE THERAPEUTIC PROCESS

CLIENT SCREENING

Clients are referred to the SLO Counseling Service by local mental health agencies, social services, schools, public health and other facilities. Clients are also self-referred due to advertising or the suggestion of current or former patients. Clients call the clinic (756-1532) and leave a message on the answering machine. A graduate Clinical Assistant returns their call within 24 hours. Potential clients are told the agency is staffed by trainees in a master's degree program and that fees range from \$3.00 to \$15.00, according to income.

However, it is clinic policy not to turn away clients due to insufficient means. The clinical assistant records the caller's primary problem and other basic information (see packet for sample). The clinic director assigns screened clients to practicum students during weekly group supervision meetings. As a general rule, staff members may not refer people they know to practicum due to dual relationship and other legal/ethical factors.

CONTACTING CLIENTS

1. Check clinic calendar for open times.
2. Arrange for observer.
3. Call client within 24 hours. If you reach an answering machine, only leave a message if the client has indicated it is okay to do so on the intake form. If you must leave a message, offer several times that you are available, and ask that they suggest a time best to call.
4. Clients can purchase parking permits or utilize the 90-minute parking meters. Many clients are unfamiliar with or intimidated by Cal Poly; consequently, they often find it helpful if staff direct them to nearby parking areas.
5. Post your appointment on the clinic calendar.
6. NOTE: To maintain confidentiality, ask for the client when phoning. When leaving messages, use your first name or just "Cal Poly." Do not say you are from the SLO Counseling Service—the client may not want others in their family or workplace to know they are seeking mental health services.

INTAKE

Access to the following will be needed for your intake session:

1. The Clinic Calendar: Designate your appointment time on this board.
2. An observer
3. A Videotape (VHS—120")
4. Client consent form and fee schedule (parents/guardians must give consent to treat children)
5. Client folder (where you file the intake form, progress notes, consent forms, etc.). Client folders may only leave the clinic for meetings with your supervisor. All client files are to be returned to and placed in the locked file cabinet.
6. In the event the client would like a receipt, which is rare, please bring a receipt book.

PURPOSE and PROCESS OF THE INTAKE SESSION

1. Establish rapport
2. Elicit the client's presenting complaint (e.g., "what brings you here?")
3. Elicit client's current coping mechanisms

4. Elicit the client's previous conditions, interventions, and outcomes
5. Conduct Psychosocial History (including family system information, especially if couple, family, or child)
6. Conduct Mental Status Exam
7. Summarize the problem
8. Release(s) of information—get their permission to consult with others involved in their care (e.g., physician, psychiatrist, other past/present therapists, etc.)
9. Begin completing the Adult Assessment Form after this first session. You should begin recording information and developing hypotheses. This form should be completed by your third session, even with incomplete information.

THE COUNSELING HOUR

1. Meet with clients weekly (unless more or less is clinically indicated).
2. Sessions last 50 minutes for individuals, or 80 minutes for couples and families. Length of the session should be clinically indicated.
3. Make an effort to end on time because others may be waiting to use the room.

PURPOSE OF FEEDBACK

A critical aspect of your practicum experience is getting timely feedback on your work (e.g., rapport, listening/intervention skills, questions, body position, gestures, eye contact). To make the most of this feedback:

1. Spend time with your observer beforehand. Get to know each other; let him/her know how you best take feedback.
2. Consult with your observer before each session. Between the two of you, material from the previous session should be more readily recalled.
3. During the break, you have limited time; hence, listen to what your observer has to say; if you observe, don't overload the therapist. Be quick and concise.
4. Following a session, you may be overwhelmed. Tell your observer you need to vent before you are able to listen and absorb their comments.
5. Try not to get defensive—your observer is attempting to help. If your observer is too aggressive or passive, let them know you'd better digest their comments if they were softer or tougher.
6. As an observer, feel free to offer your assessment, diagnostic, intervention, and/or homework ideas; on the other hand, please remember that the therapist is equally free to use as much or as little of your feedback as s/he likes.
7. After each session, make sure you provide ample time for discussion. Avoid making appointments right after one another. Likewise, don't schedule a meeting just before class, work, or some other activity. If you do, you will rob yourself (and your observer) of a critical learning opportunity.

SUPERVISION

As indicated earlier, you will meet weekly in individual and group supervision. Supervision is required not only by Cal Poly but by law. Supervisors differ in interpersonal style as well as orientation and expertise. You may feel more comfortable with some than others. You may self-disclose more to some than others. You may disagree and debate more with some than others. No one can tell you how to engage your supervisor—like any relationship, the two of you will be assessing one another and crafting ways in which you can best work together.

Although your supervisor will have the final say on how to address your client (you are working under their license), feel free to offer thoughts or opinions about your experience with the client: after all, you are the therapist in the room with the client—your experience of that client is very important. Be prepared to discuss your cases. Have your tape(s) cued up to salient moments in your sessions and organize your case notes, conceptualizations, and questions that you would like to address.

Like psychotherapy, supervision is subjective. In other words, supervisors vary in what they believe constitutes good clinical work. Nonetheless, Cal Poly supervisors agree that minimum competencies in assessment, diagnosis, treatment planning, intervention, and professional conduct must be evidenced before traineeship placement.

Specifically, the ability to take a good history, conduct an MSE, formulate a reasonable diagnostic impression, and skillfully question, empathize, confront, interpret, advise, and properly self-disclose are critical to passing practicum. Preparedness, reliability, maturity, sensitivity to individual differences, and the ability to integrate feedback are also essential. Deficits in one or more of these areas may eventuate in an extra quarter of practicum. Please understand this is not punishment; instead, it is your supervisor's commitment to your training and the welfare of the consumer.

PLANNING TREATMENT

1. Think about and process the case information.
2. Formulate hypotheses about an individual's, couple's, or family's diagnosis.
3. Reflect on client processes, personality characteristics, family dynamics, structure, and/or system.
4. Render a DSM-V diagnosis.
5. Formulate a problems and strengths list.
6. Formulate behavioral objectives related to client problems.
7. Formulate a theory driven treatment plan targeting your objectives.
8. Integrate supervisor and observer feedback into your assessment, diagnosis, and/or treatment plan.

During staff meetings, you're expected to bring up a case/client with whom you're having difficulty working or have questions about. This procedure helps you clarify your dynamics and skills, and it assists others in understanding the therapeutic process. The client benefits by your consultation, too.

REFERENCE MATERIAL AND OTHER RESOURCES

The clinic contains numerous reference materials (e.g., books, pamphlets, handouts), and when you begin practicum you will receive a folder containing a variety of BBS/Cal Poly forms, examples of completed intake questionnaires, sample progress notes/termination summaries, and other commonly used clinic materials. You are expected to read and familiarize yourself with them immediately and use as needed. At times, the practicum instructor will place additional references (e.g., multicultural resources, training/workshop announcements) on reserve. The clinic also contains material for conducting child/play therapy. Please do not remove any reference and/or other material from the agency.

CLIENT SAFETY PLAN

Early Warning Signs

- 1. _____
- 2. _____
- 3. _____

Internal Coping strategies

- 1. _____
- 2. _____
- 3. _____

Social settings that provide distraction

- 1. _____
- 2. _____
- 3. _____

People whom I can ask for help

- 1. Name: _____ Phone: _____
- 2. Name: _____ Phone: _____
- 3. Name: _____ Phone: _____
- 4. Name: _____ Phone: _____

Professionals or agencies I can contact during a crisis

- 1. SLO Hotline: 1-800-783-0607
- 2. Suicide Prevention Lifeline Phone: 1-800-273-8255
- 3. Cal Poly Counseling Services: 1-805-756-2511 (select #2 for 24/7 crisis line)
- 4. Crisis Text Line: text HOME to 741741
- 5. Imminent Crisis: 911
- 6. Not Imminent Crisis: SLO Counseling Service at Cal Poly: 1-805-756-1532
- a. Leave a voicemail stating that you'd like an appointment ASAP

Things I need to do to make my environment safe

- 1. _____
- 2. _____

My two biggest reasons for living

- 1. _____
- 2. _____

Client Signature & Date

Therapist Signature & Date

Section Three: CLINIC RULES AND GUIDELINES

We are a bonafide outpatient mental health treatment facility. We have our own faculty, staff, budget, rules of operation, and procedures including, but not limited to, the following:

1. The Graduate Clinical Assistants screen all clients.
2. Informed consent must be obtained during the first meeting. Specifically, clients must give written permission to be counseled, videotaped, observed, discussed in class, and supervised.
3. Fee: We charge \$3.00 to \$15.00 a session, depending on income; however, no one is turned away because of inability to pay.
4. Clarify confidentiality and its limits (e.g., danger to self/other/child/elder/dependent adult; your stance on confidentiality with couples and families, i.e., "no secrets" policy).
5. Staff members should not refer friends, family members, or close acquaintances to the clinic.
6. Client wishes for certain types of counselors (e.g., young/old, male/female) will be considered, but not guaranteed.
7. All client interviews are conducted and videotaped in the clinic.
8. Clinical records (e.g., progress notes; intake forms) are legal documents. They must be reviewed and signed by your clinical supervisor. Any written material sent to a client (e.g., termination letter; progress report) should be reviewed and signed by your supervisor, too.
9. Clinic files and tapes must be held in the strictest confidence. This is a small community, and the quickest way to get sued or lose referrals is to compromise patient privacy. All case files are stored in the clinic's locked file cabinet.
10. All counseling sessions must be observed. This is nonnegotiable. Maybe add here that CA's do NOT observe sessions under any circumstances. This is Dr. Moreno's rule & it's a good one to maintain boundaries. Please cancel, delay, and/or reschedule the session if your observer is late or otherwise unavailable. Clinical Assistants may observe but only as a last resort; otherwise, you must rely on each other and make sure you are as flexible for observation as possible. Remind your client all sessions are videotaped. Be prepared to discuss this with them—even though they've been told about this in advance, it is still jarring for some once they arrive and see the observation window as well as the camera.
11. Staff members must log all clinical activities. At the end of the quarter, this record will be instrumental in helping you complete various Board of Behavioral Science (BBS) forms crucial to your application for licensure. All BBS forms will be provided and signed by your individual supervisor.
12. You are required to attend one hour of individual supervision and two hours of group supervision (aka "group practicum") per week. At the beginning of each quarter, you will be assigned a supervisor for individual supervision.
13. Your supervisors are ultimately responsible for you, your client, and your work. Consequently, you should keep your supervisor up to date on all clients, especially those where you have safety and/or legal/ethical concerns.

HOUSEKEEPING

1. Although food and drink are allowed, please be judicious and conscientious regarding what you bring into the clinic. Spills disable equipment and discolor furniture and carpeting. It is your responsibility to keep the clinic clean. A list of staff "chores" will be compiled at the beginning of each quarter.
2. If you're the last one in the clinic, please make sure you turn off all equipment (cameras, monitors, computer), lock the file cabinet (which contains money as well as

confidential client information), and return all tables and chairs to their usual position. Please turn out the lights and lock the doors as you leave.

HOUR AND EXPERIENCE REQUIREMENTS

1. 40 clinical hours/Total 100 hours (i.e., observation, supervision, documentation)
 - a. 15 individual
 - b. 15 couple/family
 - c. 10 group
2. You are encouraged to be a “permanent observer” on two cases. As implied above, please give at least as much as you take. No one deserves special treatment. Everyone has jobs, families, classes, and a host of other commitments that make it difficult to observe others. One of the quickest ways to compromise staff cohesion is to be unavailable for observation.
3. One of your required experiences in Practicum is to lead or co-lead a group for at least ten hours. You may run a group through the clinic or a community agency. Given the time and effort it takes to start a group, most students co-lead with someone running one in the community. Do not try to start or co-lead an ongoing group without first consulting with your supervisors. If you run a group in the community, you will need to complete a Group Contract (see folder handouts).

CLINICAL ASSISTANTS

As indicated above, two Clinical Assistants (who already passed Practicum) help the Practicum Coordinator manage the clinic’s daily operations. Student therapists rely heavily on the Clinical Assistants and all practicum students should read the Clinical Assistant’s Handbook (Appendix N) in addition to this one. The Clinical Assistants are a valuable resource and clinic asset—please treat them with consideration and respect.

CLINICAL CASE FILE REQUIREMENTS

Accurate and complete clinical files will be kept for each client, even if seen only one time. Your files will be reviewed and signed off by your supervisor. These are legal records and may be subpoenaed. Your ability to assess, diagnose, and plan treatment, as well as your ability to provide treatment, is revealed in your case files. Good clinical record keeping in practicum is a prerequisite for many of the traineeship placements.

CLINIC FORMS

The filing cabinet contains most of the required forms (listed on following page). If you notice we’re running low or are out of something, please notify the clinical assistants.

Filing Cabinet Files List:

Frequently Used Files (A-Z)	Other Resources (A-Z)
<ul style="list-style-type: none"> • Case Notes • Campus Map • Clinic Payment Sheet • Confidentiality/Informed Consent (Adult) • Confidentiality/Informed Consent (Child) • Fee Schedule • Group Experience form – PRACTICUM • Intake History (Adult) • Intake History (Child) • Phone/Voicemail Instructions • Practicum Handbook • Practicum Rules • Release of Info (adults) • Release of Info (minors) • Responsibility Statement (Supervisors) • Suicidality Checklist • (NO) Suicide Contract 	<ul style="list-style-type: none"> • Child Abuse Report • Clinic Flyer • Cognitive Treatment Tools • Sexual Conduct Books • Stationary • Stamps
	<ul style="list-style-type: none"> • Clinic Assistant Files
<ul style="list-style-type: none"> • Treatment Summary Information • Weekly Summary of Licensure Hours (BBS; www.bbs.ca.gov) • Weekly Summary of Hours (Cal Poly) 	<ul style="list-style-type: none"> • Clinical Assistant Application • Master Forms • Sample Client Folders

APPENDIX F

PSY 576 MFT Traineeship Handbook

Congratulations! You have successfully completed two consecutive quarters of PSY 569, Counseling Practicum, and have been recommended for placement in Traineeship. Your next step is to contact the Traineeship Coordinator to begin the process of selecting and being selected by an agency.

REQUIREMENTS

You will enroll in PSY 576, MFT Traineeship. Your experience will be in the same agency for four consecutive quarters. You are expected to be at your site between 15 and 20 hours per week. Cal Poly's minimum requirements are that you spend at least 150 hours per quarter at the traineeship site. Sixty of those hours must be providing face-to-face counseling each quarter. The agency will provide you with 10 hours of individual supervision and 20 hours of group supervision each quarter. Other work such as case preparation, record keeping, etc., will require another 240 hours. The agency may require additional hours from you in return for providing you with a supervised Traineeship.

EXPECTATIONS UNDER LICENSED SUPERVISION

You are expected to be able to conduct individual, family, and child intake interviews as well as conduct appropriate screening for groups. You are also expected to conduct a mental status exam with your clients and to be able to accurately assess and diagnose individuals, family systems, and group processes. You may be expected to assess, diagnose, plan and provide treatment for children as well. You are expected to be able to formulate, construct, and execute a multiculturally informed treatment plan for individuals, children, families, and/or groups. You are also expected to be able to assess and conduct appropriate termination for all clients. You are expected to have mastered appropriate case file documentation while in practicum. Your traineeship agency may require variations of documentation specific to their needs.

Your traineeship counseling activities are to be conducted under the ongoing regular weekly individual and group supervision of an appropriately licensed and experienced supervisor who meets all continuing education requirements. You are expected to seek frequent consultation as well as the regularly scheduled supervision. If problems develop in your Traineeship, you are encouraged to discuss them with your on-site Clinical Supervisor initially, and to keep your University (Cal Poly) Supervisor informed.

SELECTING PLACEMENTS

Your counseling strengths and weaknesses, long term goals, time and energy limitations, and economic and geographic concerns are important factors in selecting possible placements. The Traineeship Coordinator will arrange placement interviews. You are to contact only those agencies and personnel the Traineeship Coordinator has approved. The agency will contact you to arrange for a screening interview. You should take a brief resume of your human service experiences with you to the interview.

WHAT YOU CAN EXPECT

Once accepted, it will take two to four weeks to get acquainted with the agency, complete necessary paperwork, and meet medical and background screening requirements. You can expect to begin to be assigned clients by the third week of your traineeship. Ideally, your outpatient caseload would include individuals, children/adolescents, groups, and at least two families. You will receive a minimum of one hour of individual and two hours of group supervision each week to meet graduate program requirements. However, the BBS requires you to receive one hour of individual and two hours of group supervision for every five hours of client contact; consequently, if your caseload averages over ten client contact hours, you will need additional supervision. The size of your supervision group may not exceed 8 trainees/interns.

Your supervisor is responsible for your supervision according to the standards established by the California State Board of Behavioral Sciences. S/he will provide you with a signed Responsibility Statement to that effect. The agency and supervisor will also meet Cal Poly's requirements for your traineeship and sign and return to you the contract contained in this packet.

YOUR RESPONSIBILITIES

- Be at your site between 15 and 20 hours per week.
- Enroll in 4 units of PSY 576 for 4 consecutive quarters of Traineeship. Obtain a signed BBS Responsibility Statement from your agency clinical supervisor (hold this until you are ready to file to take the licensing exam).
- File a signed Contract for Supervised Traineeship (between Cal Poly's M.S. in Psychology Program and the agency) within the first three weeks of Fieldwork.
- Keep accurate logs of your work and have them signed by your site supervisor. Attach a copy to each quarter's evaluation form for your Cal Poly supervisor and your file. Non-licensable hours should be documented as well. Arrange for a formal evaluation by your site supervisor each quarter using the Cal Poly MFT Traineeship Evaluation form .
- Meet weekly with your Cal Poly group supervisor. Attendance is required.
- Arrange your schedule, vacations and holidays with the traineeship agency, as agencies do not follow Cal Poly's academic schedule; you are responsible to follow theirs.
- Conduct yourself in a manner consistent with MFT professional, ethical, legal, and agency standards.

CAL POLY TRAINEESHIP SUPERVISOR

Your PSY 576 traineeship supervisor (who might be different from the traineeship Coordinator) will meet with you weekly. The purpose of meeting with a grad program supervisor is to monitor your progress and insure you're receiving appropriate training opportunities. You will meet in a group with other trainees and have the chance to learn about their experiences, casework, and supervision. You are required to attend every week.

EVALUATION

Your Cal Poly supervisor will contact or meet with your site supervisor at least once a quarter. More frequent contacts or meetings may be scheduled, if necessary. You may or may not be a part of those meetings. If you wish to be included, let your supervisor know. The purpose of these meetings is to monitor your progress, and determine if there are educational experiences that Cal Poly could provide to assist you. Your site supervisor is responsible for evaluating you, and s/he will recommend credit/no-credit to the University Supervisor, who records your grade. You are expected to participate in the evaluation process—be sure to sign the evaluation form. Note that you have the right to comment if you differ with your site or university supervisor's evaluation. Students who receive an 'I' (incomplete) or 'SP' (satisfactory progress) grade following their final quarter of fieldwork will continue to receive academic supervision of their fieldwork site through the first two weeks of the next quarter without having to enroll in PSY 576/500. However, if the student cannot complete the hours necessary for a change of grade by the add deadline, it will be necessary for the student to enroll in PSY 576/500.

NOTE: The M.S. Program faculty is proud of the coursework and practicum experiences we provide. We are in the business of educating and training excellent Master's level clinicians. We want your traineeship to successfully prepare you for post-Master's internships, licensure, and practice. Therefore, our goal is to place you in an agency in which your caseload will ideally include two ongoing couples/families in addition to individuals and groups.

TRAINEE CHECKLIST

- Contact MFT Traineeship Coordinator.
- Interview for traineeship placement.
- Have Contract between Cal Poly and agency signed and return to University Supervisor for your traineeship file.
- Obtain a signed Responsibility Statement for Supervisor of a Marriage, Family and Child Counselor Trainee; retain in your files until you apply for licensure.
- Obtain an original of any Agreements between your site supervisor and the agency. (Save to support your hours when you apply for licensure.)
- Keep record of hours on *BBS Track Your Hours*; keep signed original and provide a copy to your university supervisor each quarter along with your quarterly traineeship evaluation.
- Obtain a formal evaluation from Clinical Supervisor each quarter. Be sure you have signed it.
- Attend the required weekly supervision meeting with your University Supervisor.
- Update your contact information and traineeship schedule in your traineeship file each quarter.
- Complete Traineeship Evaluation Form at end of traineeship. This is your opportunity to comment on your supervisor and overall traineeship experience.

Remember Minimum Requirements:

1. 150 hours per quarter in the traineeship site (15 to 20 hours on-site per week).
2. 60 of those hours must be providing face-to-face counseling each quarter.
3. You should receive 10 hours of individual and 20 hours of group supervision on site per quarter.
4. Your caseload should be comprised of at least 2 families, parent-child, and/or couples. Individual adolescent or child with periodic contact with parents/caregivers does not count as family counseling.
5. You are required to attend University Supervision weekly and consistently throughout your Traineeship experience.
6. Your on-site clinical supervisor is to complete and return an evaluation of your performance at the end of every quarter.

TRAINEE INFORMATION

Traineeship PSY 576 -Quarter _____

Trainee Name _____

Phone (H) _____ (W) _____ (Cell) _____

E-mail _____

Home address _____

Placement agency _____

Phone _____

Address _____

Clinical Supervisor _____

Phone _____

Supervision times: _____

Agency Contract for Supervised MFT Traineeship

The graduate student named below is applying for an MFT Traineeship experience in counseling. To qualify for PSY 576, Supervised MFT Traineeship, the student must have completed prerequisite coursework and two quarters of PSY 569, Counseling Practicum. In addition, the student must have received recommendations for traineeship placement from the Counseling Practicum clinical supervisor, and the Master's degree concentration faculty. The student is viewed as qualified to join an agency, and to assume a counseling/therapy caseload under qualified weekly supervision.

Trainees are expected to complete a minimum of four consecutive quarters in your agency. Each quarter they should work a minimum of 150 hours at your agency, including at least sixty hours of face to face counseling. Each week of the quarter they should also receive one hour of individual supervision and two hours of group supervision. After four quarters the student should have logged at least two hundred forty clinical hours and six hundred total hours. The trainee is also encouraged to have a caseload that includes at least two families (this includes couples, parent-child, and siblings). Your agency may choose to establish additional hours and/or requirements for trainees. Trainees are required to spend 15-20 hours per week at their traineeship site. Trainees are expected to follow your agency's schedule.

A formal evaluation is required each quarter. A copy of supervisor verified hours should be attached to the evaluation submitted to the University Supervisor. You are requested to provide an assessment of "credit" or "no credit". The University Supervisor will honor your evaluation and will ultimately be responsible for assigning university grades. The University Supervisor will contact or meet with you, the on-site Clinical Supervisor, at least once each quarter.

Traineeship students must meet clinical and supervision requirements set forth by Cal Poly's Master's Program and the California Board of Behavioral Sciences. At least one hour of individual supervision and two hours of group supervision (with no more than 8 members) by a Licensed MFT, LCSW, Psychologist, or Board-Certified Psychiatrist associated with your agency is required for trainees with an average caseload of ten clients per week. If the trainee's caseload averages more than ten weekly client contact hours, the BBS requires that additional supervision must be provided.

The MFT Trainee is a guest in your agency and is expected to honor all organizational rules as well as the laws and ethics regulating the counseling profession. Trainees are directed to discuss any concerns or issues that arise with their agency and university supervisors. Agency or site supervisor concerns about Cal Poly Trainees should be discussed immediately with the university supervisor.

Occasionally agencies hire licensed supervisors from outside their agency to provide supervision. Should this be the case, the trainee shall be provided with a copy of the hiring contract between the agency and supervisor as required by the Board of Behavioral Sciences. The following contract will be signed by all parties and placed in the trainee's university file by the third week of his/her placement.

Agency Contract for Supervised MFT Traineeship - continued

Trainee's Printed Name Trainee's Signature Date

Clinical Supervisor's Printed Name Clinical Supervisor's Signature Date

Agency Title _____

Agency Representative's Name Agency Representative's Signature Date

University Supervisor's Name Printed University Supervisor's Signature Date

Comprehensive Exam Preparation

The comprehensive exam should be taken very seriously. It is a rigorous test of the student's breadth and depth of clinical knowledge. It also mirrors the state's licensure exam. Students rarely pass the exam without thorough and diligent preparation. To properly prepare, students should:

1. Thoroughly review course notes and texts for the ten domains listed below (Note: students would be wise not to throw away course notes or sell textbooks since both will be indispensable in preparing for comps).
2. Prepare with other students. Form study groups and divide exam content among group members.
3. Practice stress management skills (e.g., stress inoculation, relaxation techniques) and review test-taking strategies.
4. Discuss readiness and preparation strategies with faculty.

REFERENCE MATERIALS FOR WRITTEN COMPREHENSIVE EXAM

1. Child and Adult Psychopathology: Diagnosis and Treatment Planning
2. Ethics and the Law
3. Gender, Couple & Sexual Dysfunction Therapy
4. Group Therapy: Theory and Practice
5. Individual Therapy: Theory and Practice
6. Marriage and Family Therapy: Theory and Practice
7. Multicultural Psychology and Counseling
8. Psychological Assessment
9. Neuropsychology and Psychopharmacology
10. Research Methods and Statistics
11. Substance Use Disorders and Treatment
12. Child/Adolescent Therapy
13. Attachment, Trauma, & Parenting

APPENDIX H

COMPREHENSIVE EXAM SAMPLE QUESTIONS

PSYCHOPHARMACOLOGY:

- The term 'pharmacokinetics' refers to:
 - Neurotransmission
 - The effect of the body on the drug
 - Rate of drug absorption
 - The effect of the drug on the body
- Nardil inhibits the ability of the enzyme monoamine oxidase to metabolize serotonin and norepinephrine. Therefore, Nardil is a(n):
 - Antagonist
 - Agonist
 - Beta blocker
 - Inducer
- The part of the neuron that conducts electrical signals is referred to as the _____, and the part that stores neurotransmitter at the terminal button is called the ____
 - Axon; vesicle
 - Dendrite; vesicle
 - Axon; receptor
 - Endoplasmic reticulum; precursor
- The positive symptoms of schizophrenia include all of the following EXCEPT:
 - Hallucinations
 - Lack of motivation
 - Confused thought processes
 - Delusions
- When depression is manifested in a person for apparently no reason, it is considered to be a(n) a
 - reactive depression
 - Endogenous depression
 - Bipolar disorder
 - Situational depression
- Which of the following is TRUE:
 - 75% of panic attacks are genetic
 - Most panic attacks are triggered by an identifiable environmental event
 - Panic disorder is uncomfortable, but does not cause major life problems
 - Panic disorder is treated best with antidepressants augmented with benzodiazepines
- Second messenger substances:
 - Have a rapid impact on the neuron
 - Are released from the presynaptic membrane
 - Are enzymes which metabolize neurotransmitters
 - Are activated by G-protein coupled receptors and affect the internal structure of the neuron

Answers: 1-b 2-b 3-a 4-b 5-b 6-d 7-d

PSYCHOLOGICAL ASSESSMENT:

- In the assessment of brain function, a test used to measure verbal initiation (a frontal lobe process) is the:
 - Trail Making Test
 - Controlled Oral Word Fluency test (FAS)
 - Boston Naming test
 - Rey Auditory Verbal Learning Test (RAVLT)

2. To detect a learning disability, there must be a significant discrepancy between _____ and _____
 - a. Full scale IQ and achievement subtest (e.g., reading)
 - b. Full scale IQ and Performance IQ
 - c. Verbal IQ and Performance IQ
 - d. Performance IQ and achievement subtest

3. An example of a LEVEL A test would be the:
 - a. MMPI
 - b. WAIS-III
 - c. Strong-Campbell Vocational Interest Inventor
 - d. Wide Range Achievement

4. Which of the following is FALSE?
 - a. Norms reflect the distribution of scores by a standardization sample
 - b. The reliability of a test is a reflection of how well it measures a particular construct (e.g., intelligence)
 - c. A test cannot be valid if it is not reliable
 - d. Z-scores can be obtained by subtracting the raw score from the mean of the sample population and dividing by the standard deviation of the sample

5. Which of the following is FALSE?
 - a. Neuropsychological consultation is useful to aid in differential diagnosis
 - b. In psychological assessment, tests are used to determine the effect of the environment on behavior
 - c. In neuropsychological assessment, tests are used to explain the neuropathology of brain diseases such as Parkinson's disease
 - d. Neuropsychological examinations are more useful in identifying patient strengths and weakness than identifying the location of brain damage

answers: 1-b 2-a 3-c 4-b 5-c

PSYCHOPATHOLOGY:

1. Carl is diagnosed as having antisocial personality disorder. He tends to be loyal to his friends but exploits others. He is witty and articulate, and lies with great skill. What aspect of Carl's case is UNUSUAL for an antisocial personality?
 - a. Antisocial personalities tend to be women.
 - b. Antisocial personalities are rarely witty and articulate
 - c. Antisocial personalities are rarely loyal to anyone.
 - d. Antisocial personalities tend to withdraw from people, not exploit them.
 - e. C and D

2. Ken is constantly fearful that he will be watched and will do something that is humiliating if he eats in a restaurant. His fear is so strong that he not only refrains from eating outside his home, he will not apply for a job that might involve eating out. Ken's disruptive fear illustrates:
 - a. agoraphobia. disorder.
 - b. social phobia.
 - c. an obsession
 - d. generalized anxiety
 - e. a simple anxiety disorder

3. The chief difference between somatoform and factitious disorders is if the condition is:
 - a. produced by the doctor's treatment.
 - b. self-inflicted.
 - c. a way of avoiding responsibility.
 - d. physical.
 - e. fake.

4. Which of the following are symptoms critical for the diagnosis of schizophrenia?
- | | |
|------------------------|---------------------|
| a. Hallucinations | d. a and b |
| b. Delusions | e. all of the above |
| c. Fear of Abandonment | |
5. Unlike depression, in mania:
- the mood remains normal while the cognitive and behavioral symptoms change.
 - mood changes do not affect social or occupational functioning.
 - the mood is elevated, expansive, or irritable.
 - mood changes occur without any changes in behavior.
 - b and d

answers: 1-c 2-b 3-b 4-d 5-c

INDIVIDUAL THERAPY: THEORY AND PRACTICE:

- Pat wished to hurt her mother but is morally against violence. Psychoanalysts would say that the two personality structures involved in Pat's dilemma are:

a. the id and the ego.	d. the id and the superego.
b. the ego and the superego.	e. all of the above
c. the ego and the unconscious.	
- According to psychoanalysts, a businessman who, instead of directly expressing anger felt toward his boss, comes home and yells at the family dog illustrates excessive use of:

a. Rationalization	d. reaction formation.
b. repression.	e. projection
c. displacement.	
- According to Rogers, behavior disorders are the result of:
 - overindulging children.
 - incongruence between one's self-concept and one's potential.
 - a lack of direction from authority figures.
 - too much or too little gratification of unconscious sexual impulses.
 - unconditional regard.
- If a loud siren is sounded, any newborn infant will automatically scream. In classical conditioning terminology, the siren is:

a. an unconditioned response.	c. a conditioned response.
b. a conditioned stimulus	d. an unconditioned stimulus.
- The treatment approach that encourages the patient to gather all the evidence before coming to a conclusion or making a decision about oneself or others is:

a. rational-emotive therapy	d. a and b
b. cognitive therapy	e. all of the above
c. behavior therapy	

answers: 1-d 2-c 3-b 4-d 5-d

GROUP THERAPY: THEORY AND PRACTICE:

1. The type of group that most resembles a classroom is the:
 - a. Psychoeducational group
 - b. Support group
 - c. Counseling group
 - d. The psychotherapy group
 - e. All of the above
2. Norms are:
 - a. group rules for acceptable behavior
 - b. a unit of group analysis
 - c. one of the therapeutic factors in group
 - d. a and c
 - e. none of the above
3. A group's attraction to itself is called:
 - a. Narcissism
 - b. Recapitulation of the primary family
 - c. Cohesion
 - d. Culture building
 - e. None of the above
4. Which one of Yalom's 11 therapeutic factors examines misconceptions and self-defeating responses?
 - a. universality
 - b. interpersonal learning
 - c. emotional restructuring
 - d. imparting information
 - e. none of the above
5. One week the group is very engaged and involved. The next, they act as if they're strangers. The best leader technique in this case is:
 - a. give up
 - b. confrontation
 - c. empathy
 - d. sympathy
 - e. c and d

answers: 1-a 2-a 3-c 4-b 5-b

FAMILY THERAPY:

1. In strategic family therapy, and other family therapies derived from the communication model, the primary goal of the technique known as "prescribing the symptom" can be said to be which of the following:
 - a. undermining the family's resistance to change
 - b. changing the meaning of a situation by changing the way it is perceived
 - c. changing the meaning of a symptom by relabeling it
 - d. increasing differentiation among members of the family
2. A family begins therapy with a family therapist. The therapist relies primarily on Minuchin's structural approach to family therapy and can, therefore, be expected to:
 - a. join the family system but refuse to accommodate to its affective style
 - b. use interventions that stress the family system so as to unbalance the family's homeostasis
 - c. discourage confrontations between family members in order to reduce tension and help members think more rationally about their problems
 - d. help the family construct a multigenerational genogram during the first therapy sessions to facilitate history-taking

CHILD/ADOLESCENT THERAPY:

3. An adolescent's adoption of a "ready-made" identity that was formulated by a parent or other authority figure is referred to as:
 - a. foreclosure
 - b. moratorium
 - c. fusion
 - d. emersion

4. The symptoms of major depression vary somewhat, depending on the age of the afflicted person. Generally speaking, psychomotor agitation and somatic complaints are most characteristic of depression in:
 - a. elderly individuals
 - b. middle adulthood
 - c. adolescents
 - d. prepubertal children

MULTICULTURAL COUNSELING:

5. The Minority Identity Developmental Model proposes that people in which of the following stages begin to question absolute loyalty to their own group and rejection of the dominant culture:
 - a. encounter
 - b. dissonance
 - c. synergetic articulation and awareness
 - d. introspection

answers: 1-a 2-b 3-a 4-d 5-d

Essay Preparation Vignette

Terry is a 26-year-old single, white, female student who has come to you for help with her weight. She is about 5'6" tall and weighs about 135 lbs. She also presents with a variety of other complaints, including incontinence, gastric pain, sore throat, chronic anxiety, depression, and family conflict. In fact, she lives with her family, including her parents, 21-year-old obese brother, and 16-year-old sister. Terry and her siblings also work for the family business. Terry is a gifted painter, and dreams of going to Europe to study. She has, however, rejected scholarships to study abroad because she was afraid that it would devastate the family, personally and financially. On occasion, Terry presents with cuts on her arms and wrists. Sometimes she says she wants to die, while other times she says she wants to kill her father. Periodically, he masturbates over her bed while she is sleeping. He has done this since she was 12.

Vignette questions:

1. What are your diagnostic impressions and why?
2. What assessment procedures might you undertake and/or recommend to finalize a diagnosis and/or treatment plan?
3. What is your case XXXXXXXXXXXX? Select a theoretical orientation and design a treatment plan accordingly.
4. What are your legal/ethical responsibilities specific to this case and in general.
5. What are the cultural considerations in this case and/or in general?

APPENDIX I

PSY AND CD FACULTY

Kelly Bennion

Concentration in Cognitive Neuroscience. Research aims to elucidate the factors that may promote successful memory using a combination of behavioral, eye tracking, polysomnography, and neuroimaging approaches and the effects of several real-life variables (e.g., emotion, physiological arousal, stress, motivation) on memory, as well as understanding how sleep affects memory.

Jay Bettergarcia

LGBTQ mental health and wellness; affirming therapy approaches with transgender and non-binary clients; resistance and receptiveness to diversity trainings; community-based participatory action research (CBPAR); intersections of identities; social justice and multicultural psychology.

Shawn Burn

Application of social psychology to social problems, including racism, sexism, sexual assault, heterosexism, and environmental sustainability. Expertise in group dynamics and organizational psychology.

Laura Cacciamani

Cognition & Neural Systems emphasis. Investigating how the various senses (vision, touch, hearing, etc.) work together and separately to produce an understanding of the world around us. Understanding the ability to both perceive and remember the objects in our environment, as well as their spatial relationships.

Denise Daniels

Early learning environments and children's motivation; development of social cognition; beliefs about child development and practice.

Aaron Estrada

Multicultural and diversity considerations in psychological service provision; underserved populations; stereotype threat; the intersection of psychological assessment and academic achievement with ethnicity and culture; mental health promotion.

Laura Freberg

Learning, memory, and cognition; physiological psychology; history and systems of psychology; sensation and perception; behavior disorders in childhood. Ongoing research in the areas of the use of technological innovations in instruction and memory processes in adults with learning disabilities.

Julie Garcia

Social stigma; Self-esteem & self-concept; Stereotyping & prejudice; Multiple social identities.

Jennifer Jipson

Children's emerging theories of scientific domains, children's developing scientific reasoning skills, informal environments (e.g., museums, zoos, preschools) as contexts for learning, use of technology to support children's learning, social and cultural contexts of young children's cognitive development.

Jasna Jovanovic

Adolescent development; gender socialization. Ongoing research on family and school influences on adolescent academic achievement with a particular focus on gender differences.

Jessica Kaczorowski

Brain-behavior relationships in children with neurodevelopmental disorders, from a developmental psychopathology perspective including neuro-psychological factors associated with a wide range of neurodevelopmental disorders in childhood, such as autism spectrum disorders, attention deficit/hyperactivity disorder, intellectual disability, learning disorders, genetic syndromes, and emotional and behavioral disorders.

Carrie Langner

Group identity; Social status & health; Emotion; Political involvement; and Conflict resolution.

Gary Laver

Memory and cognition, research methodology, and quantitative analysis of data including computer applications; basic research on semantic memory and changes in it over the course of adult aging.

Linda Lee

Peer relationships in early childhood. Peer play, preferences, and friendship selection and formation in culturally diverse preschools. Ethnic identity development in early childhood.

Kelly Moreno

Eating disorders, mood and anxiety disorders; group therapy; psychodynamic theory and practice; forensic psychology.

Jennifer Teramoto Pedrotti

Counseling psychology; the intersection of multiculturalism and positive psychology constructs such as hope, coping, and well-being; multiracial identity development.

Julie Rodgers

Health psychology; cultural influences on mental and physical well-being; social stigma and perceptions of minority groups; research methods and advanced quantitative techniques.

Kathy Ryan

Schema theory as it applies to cognition, perception, and behavior; experimental psychology; statistics; learning and memory; physiological psychology; program evaluation.

Don Ryujin

Prejudice as it relates to sex and race, achievement/intrinsic motivation, relationships, race and sex biases in psychology, especially as it relates to psychotherapy.

Michael Selby

Clinical psychology, neuropsychology, forensic psychology, personality assessment and theory, prediction of violence and aggression.

Taylor Smith

Developmental origins of Attention-Deficit/Hyperactivity Disorder (ADHD); parental environmental influence on neurodevelopmental outcomes; gene-environment interaction; epigenetics; meta-analysis. Ongoing research on the interplay between genetic/epigenetic factors and prenatal environment on ADHD risk.

Lisa Sweatt

Childhood trauma and child sexual abuse, child forensic interviewing, violence prevention and intervention, psychology and social policy, multicultural training and counseling, and Latino/a psychology.

Debra Valencia-Laver

Memory and cognition, especially the changes that occur with advanced age. Psycholinguistics and the relationship of memory to language processing in healthy young and older adults.

Amber Williams

Role of race in shaping youths' self-concepts, their relationships with in- and out-group members, and their academic outcomes. Development of diverse children's racial cognition, including racial essentialism, stereotyping, and prejudice. How racial attitudes relate to children's behaviors, including their willingness to engage in cross-race friendships. Black children's and adolescents' race-related experiences and beliefs directly and indirectly impact their academic outcomes. Black youths' attitudes about race (racial identity) and their parents' socialization and involvement strategies influence Black youths' academic success.

APPENDIX J

Procedures For Removing a Student From the M.S. Psychology Program

1. Action to initiate consideration of removing a student from the M.S. Psychology program will be by writing to the program coordinator. The correspondence will identify the student, explain the reasons the student should be removed from the program or emphasis area, and describe the attempts to advise and assist the student pertaining to the grounds for requesting the student's removal. Such a request may be initiated by a faculty member at the university or a supervising clinician at a community field work site. Grounds for removal from the program are listed below.
2. The program coordinator will review the request and invite the individual initiating the request to meet in order to explain the procedures for removing a student from the M.S. program. The coordinator will explore ways to resolve this matter short of removing the student from the program.
3. If these informal resolution efforts are unsuccessful, the program coordinator will send a copy of the request to the student and to members of the program committee.
4. The program coordinator will enclose all relevant documents to the student and to the program committee which is to consider the student's case.
5. In the coordinator's correspondence, the student will be invited to prepare a written response to the request recommending his/her removal. The program coordinator will also notify the department chair that these procedures are being implemented.
6. If the student plans to bring individuals to speak on his/her behalf, the student must notify the coordinator in writing at least ten (10) working days before the meeting and provide the coordinator a written list of the individuals coming to the meeting.
7. Both the student and the individual initiating the request for the student's removal from the program will be invited to meet with the program committee at separate meetings.
8. The committee will interview the individual requesting the student's removal, the student and individuals identified in the student's list described in point #4.
9. The program committee will discuss the reasons for and against removing the student from the program.
10. After considering the information provided, the program committee will recommend retention or removal of the student from the program.
11. The program coordinator will inform the department chair in writing of the committee's recommendation and explain the reasons for the recommendation.
12. The program coordinator will send a copy of the correspondence to the student and to the individual requesting removal of the student.
13. The department chair will then endorse or dissent from the committee's recommendation and forward all written materials to the Dean of the College of Liberal Arts (CLA) and the Dean of Graduate Education.
14. Upon receipt of the notice, the CLA Dean will schedule separate appointments with the student and individual requesting the student's removal from the program.
15. Before arriving at a decision, the CLA Dean may consult other appropriate individuals as deemed necessary.
16. In these procedures, the Dean of Graduate Education serves in an advisory-consultant role to the student, program committee, and CLA Dean.

17. The Graduate Education Dean may counsel any of the parties as to the relative merit of the case and provide a check that all avenues for a fair resolution of the complaint have been adequately explored.
18. After reviewing the committee's recommendation and other written material pertaining to the case, meeting with the student and individual requesting the student's removal, and consulting with the Graduate Education Dean and others as deemed necessary, the CLA Dean will decide whether to retain or remove the student from the program.
19. The CLA Dean will inform the student in writing of the decision. If the decision is to remove the student, the dean will inform the student of the process of appeal at Cal Poly. Copies of the correspondence will be sent to the individual requesting the student's removal, to the program coordinator, the department chair, and the Graduate Education Dean.
20. If the CLA Dean's decision is to remove the student from the program the student can appeal that decision to the Vice President for Academic Affairs or designee within thirty days of being informed of the dean's decision. The student will initiate the appeal by writing to the Vice President or designee explaining the violations the student believes took place, i.e. the ways the student believes s/he was unfairly treated or treated in an arbitrary and capricious manner.
21. The decision of the Vice President for Academic Affairs or designee regarding the retention or removal of the student from the program is final. The Vice President of Academic Affairs or designee will inform the student in writing of the decision to retain him/her in the program. If the Vice President or designee decides in favor of the student, the CLA Dean will instruct the program/department to retain the student. If the appeal is unsuccessful, the Vice President for Academic Affairs or designee will inform the student in writing of the reasons the appeal was not successful and stating that there is no further appeal of the decision in the university. The student will be invited to meet with the program coordinator to assist in facilitating the student's transition into a more appropriate area of study. In the event that this meeting is disagreeable to the student, s/he will be referred to Career Services for such advising.
22. All documents of this process will be placed in the student's file.

GROUNDINGS FOR RECOMMENDATION OF DISQUALIFICATION:

Students can be removed from the M.S. program for the following reasons: 1) poor academic performance, 2) unethical, illegal or unprofessional conduct, and/or 3) failure to demonstrate minimal clinical skill to pursue licensure as a marriage family and child counselor.

Illustrations of poor academic performance include but are not limited to:

1. GPA < 3.0
2. Unsatisfactory progress toward completion of degree

Illustrations of unethical, illegal and unprofessional conduct include but are not limited to:

1. violating client privacy, confidentiality or privilege
2. having a dual relationship with a client
3. sexualizing a client's treatment
4. failure to report child, elder or dependent adult abuse or neglect

5. failure to issue a Tarasoff warning
6. failure to take reasonable steps to prevent client self-harm
7. engaging in unprofessional conduct for marriage, family and child counselors as noted in the Business and Professions Code Section 4982.

Insufficient clinical skills include but are not limited to the inability to:

1. establish therapeutic rapport
2. effectively utilize empathy, confrontation, probing, immediacy, information sharing, interpretation, self-disclosure, and other core counseling skills
3. develop a theory-driven psychosocial formulation of symptoms or problems
4. take a psychosocial history and conduct a Mental Status Exam
5. form a DSM diagnosis
6. obtain adequate client information and develop a treatment plan in a reasonable time frame
7. develop adequate treatment plan objectives
8. effectively implement clinical interventions to achieve treatment objectives
9. assess couple/family dynamics and design interventions to improve relationship functioning

ACADEMIC APPEAL POLICY

The Fairness Board is the primary campus group concerned with providing "due process" of academically related matters for students and instructors at the university, particularly in terms of student/faculty relationships. The Board hears grade appeals based on the grievant's belief that the instructor has made a mistake, shown bad faith or incompetence, or been unfair.

Fairness Board procedures can be obtained from the Office of Student Affairs (01-209); a general outline of those procedures follows.

1. Unresolved problem exists between student and the university.
2. Student is encouraged to go to Psychological Services and his/her academic advisor for the purpose of defining and clarifying the problem and achieving objectivity.
3. Student attempts to resolve the problem with appropriate party (e.g., instructor of record) and appropriate line of authority (e.g., instructor's department head).
4. If student feels the problem is unresolved, student consults with Fairness Board Chair.
5. Student submits a letter to the Fairness Board describing the problem.
6. Fairness Board reviews complaint and declares complaint to have merit or no merit.
7. If the Fairness Board finds no merit, the student may rebut the finding with new evidence.

APPENDIX K

Sample Behavior Contracts

MEMO

To: Student
From: Lisa I. Sweatt, Ph.D.
Professor of Psychology/MS
Coordinator Re: Behavior Contract
Date: April 13, 2016

According to the Master of Science in Psychology Student Handbook, graduate students are required to demonstrate mastery in writing within the first quarter at Cal Poly. This is a requirement for the degree. Because you have yet to demonstrate that mastery, this letter will serve as a contract requiring that you continue to make progress towards passing the WPE or an equivalent, acceptable method for completing your GWR. You must do this each quarter of your enrollment until the requirement is completed. Please feel free to work with the University's Writing and Rhetoric Center to identify services and resources that are available to you.

Student Signature: _____ Date: __

MS Coordinator Signature: _____ Date: _____ Cc: Michael Selby,
Ph.D. Kelly Moreno, Ph.D. Gary Laver, Ph.D.
Debra Valencia-Laver, Ph.D. Jennifer Teramoto Pedrotti, Ph.D.

MEMO

To: Student

From: Lisa I. Sweatt, Ph.D.

Professor of Psychology/MS Coordinator Re: Spring and Summer 2008 Behavior Contract

Date: March 12, 2016

I, Student, have been advised by the MS Graduate Faculty to pursue individual counseling. I understand this recommendation is intended to help me with personal problems that could interfere with my clinical work. I will allow my therapist to communicate monthly (in writing) with Dr. Moreno about my participation and progress. I will provide my therapist with the release forms required for his/her disclosure of my work. I understand the graduate faculty will meet with me six- months henceforth to evaluate my readiness for Fieldwork Placement. I understand my clinical training has been suspended until that time and that failure to make reasonable progress in treatment could impact my standing in the graduate program.

Student Signature: _____ Date: _____

MS Program Coordinator Signature: _____ Date: _____

MEMO

To: Student
From: Lisa I. Sweatt, Ph.D.
Professor of Psychology/MS
Coordinator Re: Spring 2016 Behavior
Contract Date: March 11, 2016

I, Student, understand I have been charged with plagiarism in Dr. Moreno's PSY 565, Psychopathology, and this claim has been substantiated. In addition to consequences at both the department and university level, I understand the MS Psychology faculty's concern with my behavior, particularly with respect to the unprofessional conduct and breach of ethics therein.

In order to prevent this experience from happening again, I agree to write a 5-8 page, 12 font, double-spaced paper identifying 1) the definition of plagiarism, 2) the antecedents associated with my misconduct and steps I can take to minimize or eliminate their impact on my behavior; 3) thoughts and behaviors associated with my plagiarism and alternative ones I can employ under similar future circumstances; and 4) my understanding of the consequences of my misconduct and the implications for me as a mental health professional should I later engage in similar or other unprofessional conduct.

I understand this is not an academic exercise but an intervention designed to help me refrain from future unprofessional behavior, particularly when the consequences for others as well as me could be worse. I will complete and submit this paper to Dr. Moreno by Monday, March 30, 2016. Last, I understand the graduate faculty may recommend disqualification should I engage in similar or other types of professional misconduct while a student in this program.

Student Signature: ___ Date: _

MS Program Coordinator Signature: __ Date: _

Cc:
Michael Selby, Ph.D. Kelly Moreno, Ph.D.
Jennifer Teramoto Pedrotti, Ph.D. Gary Laver,
Ph.D. Debra Valencia-Laver, Ph.D.

MEMO

To: Student
From: Lisa I. Sweatt, Ph.D.
Professor of Psychology/MS
Coordinator Re: Behavior
Contract Date: February 13, 2017

I, Student, understand and agree to the following:

I understand I have been placed on Administrative Academic Probation. I understand the reasons for my probationary status include failing PSY 571, engaging in behavior unbecoming of a mental health professional in training (e.g., tardiness, absenteeism, delinquent assignment completion, failure to communicate properly with instructors), failing to follow guidelines clearly itemized in the MS Program Handbook (e.g., enrolling in PSY 599 before being advanced to candidacy), and other academically and ethically questionable behavior (e.g., turning in a paper on a film without having seen the movie).

Consequently, I understand this Behavior Contract has been designed to help me perform in an acceptable academic and professional manner. I understand this contract is effective immediately, will be reviewed, updated, and renewed quarterly, and includes the following conditions and expectations:

- I will withdraw immediately from PSY 599.
- I will retake PSY 571 in Fall 2018.
- I will turn in my assignments on time.
- I won't be excessively absent or late to class
- I will inform my instructors *ahead of time* if/when I will be late or absent
- I will call, email, or visit faculty when I have issues to discuss.
- I will conduct myself in an ethical and professional manner and perform at a level expected of advanced graduate students in clinical training.

I understand I may contest any and/or all of the above terms. If I wish to do so, I will request to meet with Dr. Sweatt PSY MS Program Coordinator; Dr. Jasna Jovanovic, PSY & CD Department Chair; and/or Dr. Debra Valencia-Laver, CLA Associate Dean, to try to find a satisfactory solution.

Student Signature: _____ Date: __ MS Coordinator Signature: __ Date: _____

Cc:
Michael Selby, Ph.D. Kelly Moreno, Ph.D. Gary Laver, Ph.D., Debra Valencia-Laver, Ph.D.
Jennifer Teramoto Pedrotti, Ph.D.

APPENDIX L

Graduate Equity Fellowships - (Go to the Graduate Education website for application: www.grad.calpoly.edu)

Grants Available to Underrepresented Graduate Students

This program seeks to increase the diversity of students completing Master's degree programs in the CSU. It provides fellowships for economically disadvantaged CSU students, especially from groups that are underrepresented among graduate degree recipients in their areas of study, and also promotes faculty mentoring and research opportunities.

Qualifications

1. Academic Qualifications: You must either be making progress toward a Master's degree or have been accepted to a Master's program at Cal Poly and have satisfied all criteria for admission. For details concerning admission requirements, consult the current Cal Poly Catalog, or contact the graduate coordinator of your specific program. As a fellowship recipient, you will be required to maintain a grade point average of 3.0 or higher, and to engage in full-time studies toward your degree, which means you must enroll in a minimum of eight units per quarter of 400/500 level courses.
2. Residency: You must qualify as a California resident by meeting the CSU requirements for payment of in-state fees.
3. Financial Need: You must demonstrate financial need and you do so by filing a [Free Application for Federal Student Aid \(FAFSA\)](#). Additional information can be obtained from the Cal Poly [Financial Aid Office](#). You must also comply with all standard requirements for receiving financial aid at Cal Poly.
4. Duration: The typical grant period for this award is 2 academic quarters in the same academic year of the application cycle. The award is distributed during the Winter and Spring quarters.

Application Instructions

Applications for this fellowship should be submitted online through the [Cal State Apply website](#) and requires a letter of recommendation from the Graduate Program Coordinator. The application cycle is January 1st through October 1st. Your Free Application for Federal Student Aid (FAFSA) must have been filed 2 weeks before your application to ensure that the results are available for considerations for this fellowship. Award decisions will be announced via the email provided on the application no later than November 1st. If you have additional questions call the Graduate Education Office at (805) 756-2328.

APPENDIX M

Non-Resident Tuition Waivers (Go to the Graduate Education website for application: www.grad.calpoly.edu)

A limited number of non-resident tuition waivers are available for graduate students. The waiver is defined as a reduction in tuition fees for non-resident students to the resident rate. The waivers provide financial support for highly qualified applicants from outside the State of California. Application for waivers should be completed through the Cal State Apply website and require approval from the Graduate Program Coordinator. The criteria that should be addressed in the application includes:

- Scholastic achievement including GPA, standardized tests such as GRE, GMAT, etc., and honors/awards (only students with at least a 3.0 GPA overall will be considered).
- Significant accomplishments such as research or work experience.
- Contribution the student would make to the program (e.g., bring ethnic, gender, geographical diversity, or unique background and skills).
- Significance of the waiver in the student's decision to enroll: e.g., financial need, personal circumstances, competitive offers.

Tuition waivers will normally be for three consecutive quarters, beginning with the first term of enrollment. Recipients must be engaged in full-time studies toward their degree, which means enrollment in a minimum of 8 units per quarter.

Questions may be addressed to the Graduate Education Office (52-E47) or call (805) 756-2328.

Resident Tuition Waivers (Go to the Graduate Education website for application: www.grad.calpoly.edu)

A limited number of resident tuition waivers are available for graduate students who are legal residents of the State of California. The waiver applies to State Tuition only and does not cover University fees.

Application for waivers should be completed through the Cal State Apply link provided below. The waivers are for graduate students enrolled in state supported graduate programs only, not for self-support graduate programs. The criteria that should be addressed in the application include:

- Scholastic achievement including GPA, standardized test such as GRE, GMAT, etc., and honors/awards (only students with at least a 3.0 GPA overall will be considered).
- Significant accomplishments such as research or work experience.
- Contribution the student would make to the program (e.g., bring ethnic, gender, geographical diversity, or unique background and skills).
- Significance of the waiver in the student's decision to enroll: e.g., financial need, personal circumstances, competitive offers

Tuition waivers will normally be for three consecutive quarters, beginning with the first term of enrollment. Recipients must be engaged in full-time studies toward their degree, which means enrollment in a minimum of 8 units per quarter. Recipients of CA State University Grants (SUG) are not eligible for a Tuition Waiver. Questions may be addressed to the Graduate Education Office (52-E47) or call (805) 756-2328.

APPENDIX N

Clinical Assistant Handbook

RESPONSIBILITIES

A. Overview

1. Check SLO Counseling Service phone and messages daily
2. Screen potential SLO Counseling Service clients
3. Ensure all paperwork is stocked for SLO Counseling Service
4. Ensure all Clinic equipment is functioning properly
5. Collect money once per month, and turn in to Andrea Nash by the first of the month.
6. Attend weekly Practicum group supervision
7. Conduct clinic orientation for new Practicum students
8. Meet with Practicum Group Supervisor when needed
9. Assist in advertising for the SLO Counseling Service
10. Purge dated client files
11. In the event of an emergency, you may observe a practicum student's session. This should be rare.
12. Enroll in PSY 500 every quarter (get permission number from PSY & CD Office)

PHONE/INTAKE PROCEDURES

A. Check messages

- a. Check messages daily during the week.
- b. Write all new client messages in message book and then erase the message
- c. Save messages for current clients seen by Practicum Students
- d. For how to check voicemail, see voicemail instructions in Note 6 (below).
- e. For security reasons, call clients from the clinic or a blocked number (*67 before the number).
- f. Always leave the clinic number (756-1532) as the callback number when leaving a message for new clients. For safety reasons, do not ever leave personal cell or home phone numbers.
- g. Leave a message as follows: "Hi, this message is for. This is (graduate assistant name) returning your phone call from Cal Poly. Please call me back at 756-1532 and leave me a message with the best times to reach you and the best number to reach you at. Thank You."
- h. Please keep your supervisor and Clinic Director informed as to how many times you've attempted to reach your client. After several failed attempt/messages, they will discuss with you how to proceed.

B. Note in the message book, and *discuss with clinic supervisor*.

C. Client Intake calls

- a. A sample script is located in Note 1.
- b. Before gathering information about the client, it is best to let them know about the "unique features" of our clinic:

D. Our therapists are not licensed; consequently, they are supervised by a licensed Psychologist or Marriage and Family Therapist.

E. Each session is videotaped. The therapist in training views the videos with the supervisor during weekly supervision. The videotapes are not used for educational/teaching purposes and we don't keep them as a part of the client's files or records. The client *must* agree to being videotaped in order to receive services at the clinic.

- F. An observer, who is also a therapist in training, watches each session. The observer sits behind a one-way mirror and is held to the same limits of confidentiality as the student-therapist. We do our best to provide the same observer continuously with a particular case. The purpose of the observer is to give immediate feedback to the therapist in training.
- G. Fees are based on a sliding scale, namely three to fifteen dollars a session. The client chooses a fee based on income and/or affordability.
- H. The clinic is located at Cal Poly and follows the University schedule in terms of holidays and school breaks. The clinic is closed on weekends.
- I. Since we have a new group of therapists in training every six months, we CANNOT accept clients who are in severe crisis, actively suicidal, or acutely mentally ill.
 - a. Once the client has agreed to the clinic's terms, it is time to gather information. It is best to ask about: what brings them to counseling; have they had previous counseling; what they hope to gain from counseling; any medications they are taking; drug and alcohol use; and any other important items worth noting. Refer if necessary (i.e. drug/alcohol treatment, etc.).
 - b. If the client seems depressed, be sure to do a thorough suicide assessment while providing hotline numbers and other referrals.
 - c. Gather all the logistical information that is included in the intake form: name, address, phone numbers (including the best number to reach them), date of birth, how they heard about the clinic, and the date of the intake.
 - d. Once intake is completed, cross out the person's message in the message book, note the date, and initial. Also, place the client's name, phone number and date of intake call on the appropriate waiting list ("Individual" or "Couple/Family"). Place the intake form in the "Waitlist" file.
 - e. If a client is not interested in our clinic, simply mark not interested in the message book and cross out their message.
 - f. Always offer referrals to "not interested" clients (referral lists are located in Notes 2 and 3).
- J. Waiting List
 - a. Once screened, all clients are placed on a waiting list. On the other hand, children, couples, and families should get bumped to the top of the list since these are much harder hours to get.
 - b. There is also a wait list for Fall & Winter Quarter and a wait list for Spring & Summer Quarter.
 - c. At the weekly Practicum meeting, the group supervisor will distribute new intakes/cases to students. This is also an opportunity for the graduate assistant to provide any additional helpful feedback about the new client.
 - d. It is difficult to estimate "waiting time." You can give a rough estimate and/or let the client know they can call at any time to check their status. At the end of practicum (march and august), please inform callers of our upcoming break and limited number of weeks remaining before current staff will be leaving. Some people will still welcome a chance to talk, even if only for a few sessions. Likewise, remind them there will be roughly 2—5 weeks before new staff are available, and that they will be waitlisted and called in early April/October once we resume accepting new clients. Some callers won't want to wait, in which case, refer them to other agencies (e.g., CCC) that might be able to see them sooner.
- K. Suicidal Clients
 - a. If during an intake call a client describes feeling depressed, always ask about any thoughts of suicide or wanting to harm self.
 - b. If the client isn't suicidal, offer hotline information (800-783-0607). It is also helpful to ask about social support and check for coping mechanisms/self-care actions.
 - c. If the client has suicidal ideation, conduct a thorough suicide assessment.

- L. Suicide assessment: drugs/alcohol, previous attempts, hopelessness, plan (method, availability, time/place & lethality), social support, isolation/withdrawal, psychosocial triggers, making final arrangements, hostility, disorientation, mental illness, and inability to contract.
 - a. If risk is low, take down their information and bring to staff meeting, like any other client. If risk seems moderate, then provide hotline numbers and refer to other counseling centers better equipped to treat clients in more acute distress. Invite them to rely on family, friends, or others they can see or call and use any other coping skills that help while waiting to be seen.
 - b. If risk is high, try to get the person's location, phone number, and significant other(s) name/phone. Call the practicum supervisor immediately (call other supervisors if the first one is not available). If risk is immediate and danger seems imminent, call the police.
 - c. After having talked to a high risk, or even a low risk client, feel free to call the supervisor to process the call and ensure all appropriate steps were taken.
 - d. If observing in the clinic, refer to "SLO Counseling Services Emergency Procedures" in Note7
- M. Miscellaneous Phone Information
 - a. During quarter breaks (fall/winter/spring), we do not check messages. Thus, change the current Cal Poly message to a prerecorded message that so indicates. Instructions on how to change the outgoing voicemail messages are provided in the voice mail menu.
 - b. Break Script: "You have reached Cal Poly SLO Counseling Services. We are currently closed from to ____ and will not be checking messages during this time. If this is an emergency, please contact crisis hotline at 800-783-0607 or San Luis Obispo Mental Health Hotline at 1- 800-88-1381. SLO Counseling Service will reopen on. Thank you for calling.
 - c. General Script: Greetings. You have reached the SLO Counseling Service at Cal Poly. If this is an emergency, please hang up and dial 911. If you're calling in crisis, please hang up and dial 1-800-783-0607 or San Luis Obispo Mental Health at 805-781-4700. Please keep in mind we are not a walk-in clinic. If you would like to schedule an appointment with a counselor, please leave your name, phone number, and the best time to reach you after the beep. When returning your call, we will not leave a voicemail unless you indicate in your message that this is acceptable. If you would like to bypass this recording in the future, please press star and leave your message. Thank you kindly for calling.

CLINIC LOGISTICS

- A. Paperwork
 - a. Check paperwork and clinic forms weekly to ensure they are all fully stocked. Bring original and copy order form to Psychology Department Office...be sure to allow for about one week for most orders to be filled; special orders (duplicate/triplicate forms) take more than one week.
 - b. Let the Practicum students know they can leave a note for the clinical assistants on the "items needed" form next to the chores list.
 - c. Main Clinic forms include: the Initial Information form (duplicate copy), Informed Consent/Confidentiality Statement, Fee schedule (duplicate copy), Authorization to Release Information (duplicate copy), and Case Note.

- d. Other items to keep stocked: campus maps, Multimodal Evaluation packets, Intake Information packet (for students to complete for the client file), envelopes, folders, labels, videotapes, fasteners, cleaning supplies, and tissues.
- B. Money
 - a. Collect the Clinic money monthly and deliver to Andrea Nash.
 - b. Leave one-dollar bills and a few fives for change (about \$30).
 - c. Be sure to collect and submit the money before breaks to avoid theft.
- C. Equipment
 - a. Conduct periodic checks to ensure video equipment is working properly.
 - b. If any problems occur, inform Psychology Department Office/Andrea Nash and they will assist you and/or will contact media services.
- D. Files
 - a. Current client files are kept in the clinic's Active File Drawer.
 - b. Past client files are kept in the clinic in a separate filing cabinet (this is primarily accessible only to the Clinical Assistants).
 - c. After the past client files have been signed by a Practicum supervisor, place a label on the file that states: client's last name, first name, and the last date of treatment (e.g., Smith, Barbara, 9/05).
 - d. Past client files are then kept for 10 years from the last date of treatment. For past clients that were minors, files are kept until they are 18 and it has been 10 years since treatment.
 - e. Twice a year, sort through old files and shred those who received treatment more than 10 years ago.

PRACTICUM GROUP SUPERVISION

- A. Introduction
 - a. Clinical Assistants (CA) are required to attend the group supervision meetings for Practicum Students (2 hours a week). The CA may occasionally meet with the Practicum Group Supervisor before the meetings to touch base on a variety of topics (e.g., new clients, students, paperwork, clinical concerns).
 - b. For the first three weeks of Fall and Spring Quarter, the CA's primary task is to orient the new Practicum Students to the clinic. After that point, the CA's primary task is to distribute new clients and manage the logistics of the clinic (money, paperwork, observation hours, etc.).
- B. Orientation to the Practicum Clinic
 - a. At the first Practicum Group Supervision meeting, the director will instruct students to share contact information, observation availability, and ideas on how to best reach one another.
 - b. Make sure all students obtained malpractice insurance.
 - c. Before the first day of practicum, prepare a Sample Client Folder for each student (an example is in filing cabinet under "Sample File") with Intake Form, Informed Consent, Confidentiality Statement, Treatment Plan, and Case Notes. Students are responsible for creating all further client files, so be sure they know which forms to include and how to assemble. Also, be sure to distribute a list of all supervisor phone numbers, graduate assistant phone numbers, voicemail instruction sheet, campus map, directions to the clinic, and Emergency Procedures.
 - d. Briefly share with the Practicum students your role as a Clinical Assistant (e.g., primary duties are to screen phone calls and conduct all clinic intake interviews. Other duties include handling paperwork, money, and equipment).

- e. Provide a brief tour of the clinic including filing cabinet/forms, phone/video equipment, stereo/sound machine, waiting/treatment rooms, etc.
 - f. Describe the client Intake Form. Include what information you gather, who doesn't receive clinic services (intoxicated, suicidal/crisis, and acutely mentally ill clients), and any other information you deem useful to the students.
 - g. It is helpful to let the Practicum students know you have done the initial screening and later they can more fully assess the client and goodness of fit.
 - h. Instruct how to contact clients in terms of phone contact and leaving a message.
 - i. Stress the importance of always calling from our clinic or calling from a blocked number (*67 before you dial).
 - j. Phone contact and leaving messages: leave practicum student name, calling from Cal Poly, please call me back with a best number and time to reach you. Leave the clinic number as well.
 - k. Phone contact, if you reach the potential client: ensure the client is still interested in services and arrange a time to meet.
 - l. Show Practicum students the scheduling board in the back area. Go over rules of scheduling (no weekends).
 - m. Conduct a mock first session for the Practicum students. Do a complete "walk through" of meeting with a client (prepping equipment, waiting room, etc.). Include a discussion of informed consent, setting a fee, limits of confidentiality, and how to contact therapist in training if there is an emergency.
 - n. Feel free to add additional information you found helpful as a Practicum Student.
- C. Passing out cases:
- a. The Group Supervisor will briefly review and pass out cases at each Practicum supervision meeting...feel free to consult with the supervisor before this process to ensure appropriate fit, voice clinical concerns, etc.
 - b. The Practicum student signs and dates the Intake Form and includes it in the client's file.
 - c. On the wait list, write in the assigned therapist's name, and the assignment date by the client's name/phone number.
 - d. For clients that were assigned to a Practicum student but were no longer interested, recover the white copy of the Intake Form from the Practicum Student. Ensure that s/he documented his/her notes and efforts in communicating with the client.
 - e. Note: Just as there is a wait list for Fall/Winter and Spring/Summer Quarters, we create folders for "active clients" and "no contact" clients for Fall/Winter and Spring/Summer. Thus, once Fall/Winter Quarter is over the "Active Clients, Fall/Winter, 201_" folder is filed into a separate filing cabinet. The Clinical Assistants then make new folders titled "Active clients Spring/Summer 201_."

NOTES

1. Sample Phone Script
2. Referral List
3. Private Clinicians Referral List
4. Low-cost Healthcare Referral List
5. Important Contacts for Clinical Assistants
6. Voicemail Instructions
7. Emergency Procedures

NOTE 1: SAMPLE PHONE SCRIPT

- Hi, this is _____ returning your phone call from SLO Counseling Services. Is this a good time to talk?
- I believed you wanted information regarding our services. Is that correct? Well, how I normally like to proceed is to first tell you a little bit about our clinic as we have some unique features. Is that all right?
- First of all, all of our therapists are in training, meaning they are not licensed (can also be described as Masters level therapists). Because they are not licensed, they are supervised by a Licensed Psychologist or a Licensed Marriage and Family Therapist. Now what this means to you as a potential client is that we videotape each session. The videotape is strictly for the supervisor so that s/he can review the clients with the therapist in training. We do not use the videotapes for any teaching/educational purposes and we don't keep the videotapes as part of the client's record at the clinic.
- In addition to the videotape, there is an observer (also a therapist in training) who observes each session. The observer's main purpose is to provide immediate feedback for the therapist.
The observers are held to the same limits of confidentiality, meaning they will not discuss your case with anyone outside the clinic.
- We bill on a sliding scale, anywhere between \$3 and \$15 a session, depending on your income.
- We are located on the Cal Poly Campus, so we follow all University breaks/holidays. If you are not familiar with Cal Poly, your therapist can provide directions and parking instructions upon appointment scheduling.
- Because we are a training clinic, we do not accept chemically dependent, acutely mentally ill, or crisis clients.
- What are your thoughts about what I have just told you? OR How do you feel about the way our clinic operates? (It's helpful to validate the clients concerns and reservations).
- If the client agrees to everything, gather further information about them (see initial information form).
- Ask for permission for therapist to leave detailed messages on any provided phone numbers, and make appropriate notation on intake form.
- Feel free to share as much about our setup that you may feel will help the client make an informed decision.
- If you are unsure about the appropriateness of fit for a client, feel free to let the client know that all clients are "approved" by the Practicum Supervisor and you will discuss this case with him/her. If for some reason, the clinic will not be a good fit, you will call them back with additional referrals.

NOTE 2: REFERRAL LIST

- SLO HOTLINE: 800-783-0607
- COUNTY MENTAL HEALTH: 800-838-1381
- SLO COMMUNITY COUNSELING CENTER: 543-7969
- AIDS SUPPORT NETWORK: 781-3660
- ALCOHOL ANONYMOUS: 541-3211
- AL-ANON SLO: 543-7927; ATASCADERO: 466-0959
- DRUG AND ALCOHOL SERVICES SLO: 781-4753; NORTH COUNTY OFFICE: 461-6080
- GAY AND LESBIAN ALLIANCE OF THE CENTRAL COAST: 541-4252
- HOSPICE, SLO: 544-2266; NORTH COUNTY: 434-1164
- PEPPERTREE COUNSELING SERVICES, SLO: 545-9449
- RISE: 805-226-5400, CRISIS HOTLINE 855-886-7473 OPEN 24 HOURS
- STAND STRONG (WOMEN'S SHELTER) PROGRAM OF SLO: 781-6401 OPEN 24 HOURS
- COTTAGE CARE CENTER: 541-9113
- CENTRAL COAST OUTPATIENT PROGRAM FOR EATING DISORDERS: 688-5388
- CAL POLY PSYCHOLOGICAL SERVICES: 756-2511
- CAL POLY WOMEN'S CENTER: 756-2600
- FAMILY SERVICE AGENCY IN SANTA MARIA: 928-1707
- ALSO SEE THE HOTLINE DIRECTORY IN THE CLINIC FOR MORE REFERRALS AND SUPPORT GROUPS

MENTAL HEALTH PROVIDERS

PSYCHIATRY

Murat Z Akalin, MD MPH

895 Aerovista Place, Suite 106

San Luis Obispo, CA 93401

Phone: (760) 684-8773

Fax: (760) 608-8112

Web: www.DrAkalin.com

Email: Murat@DrAkalin.com

June Kramer 545-0725; [drjk at drjune-kramer dot com](mailto:drjk@drjune-kramer.com)

Dug Chisholm, MD

Coastal Psychiatric Care

Child Psychiatrist (Atascadero)

(805) 549-0169 [main line]

(805) 466-5626 [intake line]

Welby Nielson

Community Psychiatry (SLO)

(916) 571-1294

Peter Afsari

Community Psychiatry

(805) 506-5118

PSYCHIATRY-cont.

Amy Strachan
Pediatric Psychiatrist
(805) 400-5687

Darrow Thom
(805) 250-2996

PSYCHOLOGY

Erin Elfant (805) 540-0636 erinelfant@icloud.com
Kristyn Fowkes (805) 878-5459 kfm@drfowkesmuto.com
Jeff Friedman (805) 545-9410
Azarm Ghareman (805) 781-4739; (805) 546-2153 dr.ghareman@gmail.com
Eric Goodman (805) 473-3388 drericgoodman@yahoo.com
Dan Hawthorne (805) 594-1257
Kirsten Lowry drklowry@gmail.com
Eric Simon (805) 489-7333 EricSimon@yahoo.com

LMFT

Doug Bing (805) 546-0902
Carol Burch (805) 781-3535 (x155)
Kendra Williams (805) 440-7523
Dana Doneza (805) 215-4489 therapists@centralcoastcounseling.org
Dimitri Egan (805) 215-4489
Janet Emmons (805) 595-9231/ (805) 801-5247
Stephanie Fuller (805) 235-3691
Pam Gillette (805) 541-9499
Tom LaChappelle (805) 704-4402
Heidi Lewin-Miller (805) 549-9778
Alisa Piette (805) 549-8763
Casey Roos (805) 596-5100
Brad Rudd (805) 541-0553
Michelle Simone (805) 500-3056; (805) 550-0198 Lmsimone@hotmail.com
Cindy Smith (805) 462-1503
Tom Stein (805) 881-3131/ (805) 602-8556 tomstein@gmail.com
Judy Walters (805) 596-5100
Michael Young Michael.Young3@va.gov
Lewis Scott Peterson (805) 246-9456
Sarah Becker (805) 669-9097
Mary Kunz, MS, MA, MFT (805) 748-8261 mary.m.kunz.mft@gmail.com

LCSW

Ly-Lan MV Lofgren (805) 762-4398
Leonard Manzella leonardmann@gmail.com
Ben Elfant-Rea (805) 903-2604 benrea@earthlink.net

AGENCIES

CALM (Child Abuse Listening Mediation)
(805) 614-9160

TMHA

(805) 540-6500

Central Coast Freedom Center (Outpatient Drug and Alcohol Treatment)
(805) 461-1518

San Luis Obispo Vet Center
(805) 781-9101

NAMI (National Alliance on Mental Health) in SLO
For family caregivers of people with mental illness
(805) 550-3889

NOTE 5: IMPORTANT CONTACTS FOR GRADUATE ASSISTANTS

FACULTY NUMBERS LIST

KELLY MORENO

Office 805-756-2805

Emergency: Cell 550-9296; Home 805-627-1733

LISA SWEATT

Office 805-756-6123

Emergency: Cell 805-704-0319; Home 805-528-8982

AARON ESTRADA

Office 805-756-2125

Emergency: Cell 805-203-6534

MICHAEL SELBY

Office 805-756-2109

Emergency: Home 805-593-0187

MISCELLANEOUS

ANDREA NASH 805-756-2456

PSYC DEPT OFFICE 805-756-2033

CHILD ABUSE HOTLINE 805-781-5137

CHILD WELFARE SERVICES 800-367-0166

COUNTY MENTAL HEALTH SERVICES/EMERGENCY 1-800-838-1381

APPENDIX O

Professional Organizations

There are a number of professional organizations relevant to the M.S. Psychology program and the career aspirations of many of its students. Below you will find a brief description of these organizations and the benefits membership can provide. Students should seriously consider applying for membership in one or more of these organizations as a first step to becoming a professional in the counseling field.

The American Counseling Association (ACA)

ACA is a partnership of associations representing nearly 60,000 members. Founded in 1952, ACA is the world's largest association exclusively representing professional counselors. ACA's primary mission is to promote public confidence and trust in the counseling profession and it is dedicated to the growth and enhancement of the counseling profession. To this end the ACA has been instrumental in setting professional and ethical standards for counselors. The association has made considerable strides in accreditation, licensure and national certification. ACA also represents the interests of the profession before Congress and federal agencies and it provides leadership training, continuing education opportunities and advocacy services to its members.

ACA offers informative publications and scholarly journals that are valuable resources to counseling professionals and those interested in human development. Other benefits, such as the opportunity to gain continuing education units, networking opportunities and professional liability and other insurance program are some of the many benefits available to ACA members.

For additional information contact ACA at: AMERICAN COUNSELING ASSOCIATION 5999
Stevenson Ave.
Alexandria, VA 22304
1-800-347-6647
<http://www.counseling.org>

American Association for Marriage and Family Therapy (AAMFT)

AAMFT is the national association of mental health professionals with advanced training in marriage and family therapy. A principal goal of the AAMFT is to increase understanding, research and education of the discipline and to ensure that public needs for marriage and family therapy are met by well-trained, qualified practitioners. AAMFT accredits graduate degree and post-graduate training institutes throughout the U.S. It represents member concerns on legislative and policy matters and promotes research and education in the field of marriage and family therapy.

The AAMFT holds an annual conference and summer institutes for the professional development of MFTs and other mental health care providers interested in marriage and family therapy. The AAMFT publishes position papers, a newsletter and brochures to help educate professionals and consumers about marriage and family therapy; a series of training videotapes for professionals; and a quarterly *Journal of Marital and Family Therapy*. Other benefits include professional liability insurance and other insurance programs.

For additional information or a membership application contact AAMFT at:
AMERICAN ASSOCIATION FOR MARRIAGE AND FAMILY THERAPY
112 South Alfred St. Alexandria, VA 22314
703-838-9808 <http://www.aamft.org>

American Psychological Association (APA)

The APA was founded in 1892 as a professional organization for psychologists. It exists to advance psychology as a science, as a profession and as a means of promoting human welfare. The APA promotes research, establishes professional standards, maintains a personnel placement service, conducts meetings, holds an annual convention and provides information to members, the media, students and the public. Information services include the publication of 18 scholarly journals, an abstracting and indexing service and an online information service. Other benefits include advocacy for public policy before Congress and the accreditation of doctoral programs and internship sites. For additional information or a membership application contact APA at:

AMERICAN PSYCHOLOGICAL ASSOCIATION
750 First Street, NE Washington, DC 20002-4242
800-374-2721 <http://www.apa.org>

California Association of Marriage and Family Therapists (CAMFT)

CAMFT is an independent statewide professional organization representing the interests of over 25,000 California licensed and soon to be licensed marriage and family therapists (MFT's). It is dedicated to advancing the profession as an art and a science, to maintaining high standards of professional ethics, to upgrading the qualifications for the profession and to expanding the recognition and awareness of the profession.

CAMFT publishes a bi-monthly periodical, *The California Therapist*, designed to keep the professional abreast of legal, ethical and practice considerations which impact the profession. CAMFT also publishes an Insurance Compensation Manual and a variety of other useful resources for therapists. CAMFT is the organizational advocate and representative for California MFT's. It monitors and works cooperatively with the Behavioral Board of Science Examiners which regulates the profession, the state legislature and others.

Among the benefits CAMFT provides is legal consultation with the organization's legal counsel, executive director and staff attorneys. CAMFT also provides members with substantially reduced premiums on malpractice insurance and other insurance programs. The organization also holds an annual conference which features speakers and workshops for professional development.

For additional information contact CAMFT at:

CALIFORNIA ASSOCIATION OF MARRIAGE AND FAMILY THERAPISTS 7901 RAYTHEON ROAD SAN DIEGO, CA 92111-1606
WWW.CAMFT.ORG

CENTRAL COAST CHAPTER CALIFORNIA ASSOCIATION OF MARRIAGE AND FAMILY THERAPISTS
P.O. Box 12723
San Luis Obispo, CA 93406
(805) 545-8855 <http://www.centralcoasttherapists.org>

International Association of Marriage and Family Counselors (IAMFC)

The IAMFC is an organization dedicated to advancing the practice, training, and research of marriage and family counselors. Members may specialize in a variety of areas, including among others: premarital counseling, intergenerational counseling, separation and divorce counseling, stepfamilies, nontraditional family and marriage lifestyles, healthy and dysfunctional family systems, multicultural marriage and family concerns, and dual career couples.

In conducting their professional activities members commit themselves to protect and advocate for the healthy growth and development of the family as a whole, even as they conscientiously recognize the integrity and diversity of each family and family member's unique needs, situations, status, and condition.

The IAMFC recognizes that the relationship between the provider and consumer of services is characterized as an egalitarian process emphasizing co-participation, co-equality, co-authority, co-responsibility, and client empowerment.

With approximately 8,000 members, IAMFC is the largest division of the American Counseling Association. For additional information, contact IAMFC at:

AMERICAN COUNSELING ASSOCIATION
5999 Stevenson Avenue
Alexandria, VA 22304
1-800-347-6647 X222 <http://www.iamfc.org>

APPENDIX P

Master's Exam Approval Form

Graduate Education Office, Bldg. 52-D27

Instructions for completion of this form are located on the Graduate Education Office's website at <http://www.grad.calpoly.edu>

Student Information

_____ Last/Family Name _____ First Name _____ Middle Name _____

Student ID# _____ Cal Poly Email Address _____

Daytime Phone _____

Degree Objective _____

College _____ Date Submitted _____

What are your next steps after graduation?

- Received job offer
- Additional education
- Unknown at this time

Comprehensive Exam

I certify that on _____, the above-named student satisfactorily completed the comprehensive Master's examination. A record of the examination questions and responses are being maintained by the Graduate Coordinator for this program. Note that the Chancellor's Office requires that non-thesis oral presentations be recorded.

Exam Administrator, signature Printed name Date

Graduate Coordinator, signature Printed name Date

Exam Committee Member (if applicable), signature Printed name Date

Graduate Education Office

Graduate Education

Signature

Review Completion Date

Graduation Date

Graduate Education Office, Bldg. 52, Room D27 California
Polytechnic State University, San Luis Obispo CA 93407

APPENDIX Q

Master's Thesis Approval Form
Graduate Education Office, Bldg. 52-D27

* Attach your Digital Archiving Receipt to this form.

Instructions for completion of this form are located on the Graduate Education Office's website at <http://www.grad.calpoly.edu>

Student Information

Last/Family Name	First Name	Middle Name
Student ID# _____ Non-Cal Poly Email Address _____		
Daytime Phone _____		
Degree Type (BMS, MS, MA, etc.) _____		Program _____
College _____	Date Submitted _____	

What are your next steps after graduation?

- Received job offer
 Additional education
 Unknown at this time

Thesis Review and Acceptance (Original Signatures Required)

Thesis Title

The final thesis has been reviewed and accepted by:

Advisor/ COMMITTEE CHAIR, signature	Printed name	Dept./Program	Date
COMMITTEE MEMBER, signature	Printed name	Dept./Program	Date
COMMITTEE MEMBER, signature	Printed name	Dept./Program	Date
COMMITTEE MEMBER, signature	Printed name	Dept./Program	Date

My thesis committee and I agree that the above mentioned thesis be placed in the DigitalCommons@CalPoly with the following status (choose one):

- Option 1:** Provide open access (worldwide distribution) to the electronic thesis. (Most theses fall in this category)
- Option 2:** Restrict access to the electronic thesis for a period of (select one):
 1 year
 3 years

Have you signed an NDA for your thesis?
 Yes
 No
Reason:
 Patent
 Security
 Other: _____

Student Agreement

I certify that, if appropriate, I have obtained a written permission statement from the owner(s) of each third party copyrighted matter to be included in my thesis. I certify that the version I submitted is the same as that approved by my advisory committee. I grant California Polytechnic State University the non-exclusive license to archive and make accessible, under the conditions specified in this form, my thesis now or hereafter known. I retain all ownership rights to the copyright of this thesis.

NOTE: All graduate students are required to maintain continuous enrollment from the time of first enrollment until the completion of their degree regardless of catalog cycle. Students who fail to fulfill the continuous enrollment requirement will not be permitted to graduate.

STUDENT, signature

Date

Graduate Education Office

This thesis has been submitted to the Graduate Education Office of Cal Poly for further review.

Graduate Education

Signature

Review Completion Date

Graduation Date

California Polytechnic State University, San Luis Obispo CA 93407

APPENDIX R

REQUEST FOR GRADUATION EVALUATION

Go to the Cal Poly Graduate Educations Website: <http://www.grad.calpoly.edu> , click on “Checklist & Forms”, click on Request for Graduation (E-Form).

IMPORTANT: Please read, then detach and keep for your reference

Before submitting this form, you MUST:

BMS (4+1) Students Only

Any applicable forms (major specific), i.e., Tech Elective Statement; Concentration; Advisor Approved Electives; Individual Course of Study (ICS) should be submitted to the Office of the Registrar at this time. Your application will NOT be processed when it reaches the Registrar if this information is not on file.

Make sure your mailing address is updated on the portal.

Your diploma will be mailed to this address. You may update this information at <https://my.calpoly.edu> under the Personal Info tab and My Student Info section. Please make sure that this address is accurate after graduation to ensure the receipt of your diploma. Also, be sure to verify your DIPLOMA NAME on the Portal, and update it if needed. You are responsible for making sure your diploma reflects the name you want. (Use Personal Info tab; names, add a new name, choose “diploma” from the drop-down menu, update the remaining fields and save. In order to view your changes, you will need to choose “edit”, since the view is first and last name only.)



Board of Behavioral Sciences
 1625 North Market Blvd., Suite S200, Sacramento, CA 95834
 Telephone: (916) 574-7830 TTY: (800) 326-2297
www.bbs.ca.gov



**ASSOCIATE MARRIAGE AND FAMILY THERAPIST
IN-STATE DEGREE PROGRAM CERTIFICATION
 FORM B**

This form is for use by the following applicants:

- 1) You began graduate study on or after August 1, 2012 **OR**
- 2) You began graduate study before August 1, 2012, AND did not complete the degree on or before December 31, 2018.

Contact your school if you have questions about which form to use

Type or print clearly in ink

Applicant Name: Last	First	Middle
SSN or Individual Taxpayer ID Number	Enrollment Date	Degree Award Date

APPLICANT: The purpose of this form is for your school to verify completion of a degree program that complies with California law. Enclose it with your application in an envelope that has been sealed by your school.

SCHOOL: This applicant is applying for an MFT license or registration. Please complete this form including the certification on the next page, and provide applicant with the original form **IN A SEALED ENVELOPE**.

The full legal text of the educational requirements can be found in the Business and Professions Code (BPC), available on the Board’s website under [Statutes and Regulations](#).

1. Has this specific degree program been reviewed and accepted by the Board? ..Yes No
 - *If NO, contact the Board for information on how to proceed.*
 - *If YES, answer the questions below and indicate in question #5 how the applicant’s program differs from the Board-accepted program.*

2. Did this student complete the program as accepted by the Board?Yes No
 - *If NO, contact the Board for information on how to proceed.*
 - *If YES, answer the questions below and indicate in question #5 how the applicant’s program differs from the Board-accepted program.*

Applicant Name: Last	First	Middle
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3. Was the student notified by means of public documents or otherwise in writing that the degree program was designed to meet the requirements of BPC section 4980.36? Yes No
4. The degree program contained:
- a. TOTAL UNITS: At least 60 semester or 90 quarter units of instruction:Yes No
 - b. MFT COURSEWORK: 12 semester or 18 quarter units as specified in BPC section 4980.36(d)(1)(A):Yes No
 - c. PRACTICUM: At least 6 semester or 9 quarter units that included a minimum of 225 hours as defined in BPC section 4980.36(d)(1)(B):..... Yes No
 - d. ALL OTHER CONTENT: as required by BPC section 4980.36(c), (d) & (e).....Yes No
5. If you answered NO to any of the prior questions, mark the area where the program differed and specify how it differed:
- Total Units: _____
- MFT Coursework: _____
- Practicum: _____
- All Other Content required by BPC section 4980.36(c), (d) & (e): _____
- Other (explain): _____

<u>CERTIFICATION</u>	
<i>I hereby certify that all of the foregoing is true and correct</i>	
Signature of Chief Academic Officer or Authorized Designee	Name of Institution
Print Name	Institution Accredited or Approved by
Date Signed	