

Doctoral Qualifying Examination Policies and Procedures
Summer/Fall 2017 ~ Spring 2018
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COUNSELING PSYCHOLOGY PROGRAM
Department of Educational Psychology
University of Utah
Summer/Fall 2017 ~ Spring 2018

Doctoral Qualifying Examination: Statement of Purpose

The Doctor of Philosophy (Ph.D.) degree is a research-based advanced academic degree that represents the highest certificate of membership in the academic community. It is not a degree granted solely on the basis of the completion of a prescribed course of study, no matter how faithfully pursued. The Ph.D. is granted to individuals who, in addition to completing a prescribed course of study, conduct original research culminating in the doctoral dissertation and demonstrate the presence of superior qualities of intellectual inquiry and the promise of future scholarly work. The Program admits students of the highest quality who demonstrate the clear potential to earn the Ph.D.

The University of Utah Counseling Psychology Program (“the Program”) administers the Doctoral Qualifying Examination (Prelim Exam) twice yearly. Passing the Prelim Exam is required for admitted graduate students in the Program to be advanced to doctoral level graduate candidacy. Even if you already have completed the master’s degree, your graduate candidacy is not at the doctoral level until you have passed the Prelim Exam. Students register to take the Prelim Exam in approximately the third year of their program of study. Prior to sitting for the Prelim Exam the student and her or his faculty advisor evaluate whether the student is ready to advance to doctoral candidacy. A student who has successfully been advanced to doctoral candidacy through the Graduate School has completed core preparatory course requirements as outlined in the student’s program of study with a B average or above (and no less than a B- in any single course), demonstrated proficiency in research methods through participation on research teams and completing requirements for the Master’s degree or the Pre-Doctoral Research Proposal (PDRP) (depending on cohort year), fulfilled the required counseling practice experiences including the sequential and cumulative practicum courses, and successfully completed and passed the oral and written portions of the Prelim Exam. Once this has been accomplished, advancement to candidacy is the Program’s acknowledgement that the candidate is ready to engage in advanced doctoral work and begin the doctoral dissertation as well as apply for a full-time pre-doctoral internship. (Note: Even if you entered the program with a previous master’s degree, you are still required to attend research teams as described above and complete the PDRP.)

The Prelim Exam is a culminating experience that allows students to integrate, organize, and critically apply their knowledge to the types of real-world problems and issues faced by doctoral level psychologists in research, practice, and professional contexts. Students demonstrate knowledge and skills gained in courses, readings, practical experiences, and research. In keeping with the program goal of developing life-long learners, students’ responses to Prelim Exam questions should reflect an understanding of current developments in the field. The Prelim Exam requires students to demonstrate competency in communicating information at a level commensurate with the doctoral degree that they are pursuing. Specifically, students should be able to synthesize a broad base of information and articulate that information in a professional manner.

Expectations of students on the Prelim Exam are guided by principles that drive the Program's training model. These can be found in the student Program Handbook. These principles are outlined below:

1. **Science:** The first principle concerns scholarly inquiry in psychology in a variety of professional contexts as it relates to the specialty of counseling psychology. The science of psychology encompasses knowledge about developmental, cognitive/affective, social/cultural, individual, and biological aspects of human functioning, processes of change, and the history and systems of psychology. In addition, it emphasizes basic knowledge in statistical methods and research design.
2. **Practice:** The second principle concerns the professional practice of psychology. We espouse a training paradigm that is sensitive to larger public health and policy issues (e.g., managed care, cultural diversity, and education). This training paradigm includes individual and group intervention theory and application, educational and clinical assessment and diagnosis, consultation and supervision, and evidenced-based approaches to evaluating the efficacy and effectiveness of interventions.
3. **Integration of Science and Practice:** The third principle concerns the integration of science and practice. The science and professional practice of counseling psychology are conceptualized as independent processes wherein science guides professional practice and, in turn, is influenced by demands from the professional arena to meet contemporary health needs.
4. **Individual and Cultural Diversity:** The fourth principle addresses individual and cultural diversity, including, but not limited to age, color, ethnicity, gender, language, national origin, race, religion, sexual orientation, ability/disability, and socioeconomic status. In addition, this principle promotes discussion, research, and intervention related to social justice issues. We view this principle as integral to all of the other principles that support our philosophy.
5. **Optimal Human Functioning and Adaptive Developmental Processes:** The fifth principle emphasizes optimal human functioning and adaptive developmental processes that focus on assets and strengths of the person, group, and community. Although we recognize that part of the science of psychology involves understanding and skill development in conceptualizing, diagnosing, and treating psychological problems and issues, our program also emphasizes normative human functioning in all of its variation and diversity. This focus on optimal human functioning includes examining the individual from a developmental context that emphasizes normative maturational processes.
6. **Professional Identity and Development:** The sixth principle concerns our program's commitment to providing opportunities for students to develop a professional identity in the broader field of psychology and more specifically as a counseling psychologist. It includes a commitment to lifelong learning and professional development, and it is designed to support students developing specializations in areas of personal and professional interest. This principle reflects the reality that graduates of counseling psychology programs, including our own, develop highly diverse professional and

academic pursuits and, using counseling psychology as their foundation, generates careers in a wide array of professional applications and academic and research areas.

7. Legal and Ethical Issues: The seventh principle reflects our commitment to training in professional integrity and ethical behavior. This commitment includes adherence to applicable Utah Statutes and Rules, APA's (2002) Ethical Principles of Psychologists and Code of Conduct, ASPPB's (2005) Code of conduct, as well as relevant professional guidelines in the field.

Doctoral Qualifying Examination Policies and Procedures

The Doctoral Qualifying Examination (also called the Prelim Exam) includes written and oral components. The written component is given twice each year shortly before the start of the fall semester and shortly after the start of the spring semester. The written exam is broken up into two 3-day segments with three items being administered during each segment.

Three Prelim Exam questions (Segment I: Measurement and Assessment, Multicultural Counseling and Human Diversity, and Research and Psychological Interventions in Counseling Psychology) will be transmitted by the Prelim Exam Coordinator by e-mail attachment by **8:30 a.m. the Friday of the first segment and must be returned by 8:30 a.m. the following Monday.**

Three additional Prelim Exam questions (Segment 2: Ethics, Methods of Quantitative Research Design and Analysis, and Vocational Psychology and Career Development) will be transmitted by e-mail attachment by **8:30 a.m. the following Friday and must be returned by 8:30 a.m. the following Monday.**

Completion of the written component of the Prelim Exam qualifies the student to sit for the oral component. The Counseling Psychology Committee conducts the oral component of the Prelim Exam. The oral component is scheduled approximately **three to six weeks after the start of the fall semester (for the fall exam – ONLY RETAKES) and three to six weeks after completion of the written exam in the spring.**

Note: In the Fall of 2015, the Counseling Faculty voted that the oral prelim will not be required for advancement to candidacy, and will be first offered in spring semester of the students 3rd year. Passing the oral prelim will not be required to propose the dissertation, but will be required to apply for internship.

Students must have completed a set of core courses deemed by the faculty as foundational courses prior to taking the written prelims. Although it is ideal for students to move efficiently through their programs of study and to complete the Prelim Exam in a timely manner, it is also important that they are adequately prepared for the Prelim Exam. Therefore, students should have completed the following courses prior to the semester in which they take prelims:

ED PS 6200 Counseling Theories and Procedures
ED PS 6210 Counseling Skills

ED PS 6360	Multicultural Counseling
ED PS 6710	Practicum in Counseling
ED PS 7010	Quantitative Methods I: Foundations of Inferential Statistics
ED PS 7020	Quantitative Methods II
ED PS 7180	Personality Assessment
ED PS 7200	Foundations of Counseling Psychology
ED PS 7220	Ethics and Standards in Psychology
ED PS 7300	Psychometric Theory
ED PS 7330	Career Development Theory and Assessment
ED PS 7400	Advanced Research Design
ED PS 7430	Research in Counseling Psychology
ED PS 7600	Diagnostic Adult Psychopathology
ED PS 7710	Practicum in Counseling Psychology (at least one semester)

It is strongly recommended that students take the prelims during the academic year prior to applying for internship. It is a program requirement--and is often a requirement of internship sites as well--that students have passed the Prelim Exam prior to applying for internship. Students are strongly advised to take the Prelim Exam no later than the spring before they apply for internships the following fall.

Please note: Two weeks and one day prior to the oral component of the Prelim Exam, a finished Case Conceptualization, along with a copy of the Outline of Practice Experiences and Synopsis of Theoretical Orientation should be placed in an envelope labeled with the student's name and Prelim Exam date. This should be submitted to the Prelim Exam Director.

The *Client Release of Information for Doctoral Qualifying Examination* for clients not seen at the University Counseling Center (UCC) should be included in this envelope. ***Students presenting case conceptualizations of clients from the University of Utah Counseling Center must leave the Client Release form in a manila envelope addressed to the Prelim Exam Director and then given to the UCC front desk staff to be stored in a secure location. Students presenting clients from the UCC must adhere to all instructions in the policy found near the end of this handbook.*** These materials should be completed well in advance of the written component of the Prelim Exam to avoid last-minute problems locating recordings, etc. The Prelim Exam Director reviews the work sample materials for completeness and then distributes them to the Counseling Psychology Examination Committee. As part of this process the Prelim Exam Director schedules a time for each examinee to participate in the oral component of the Prelim Exam.

You must notify the Prelim Exam Director as early as possible during the semester prior to that in which you wish to take the Prelim Exam and turn in all required materials by the deadline specified for either the SUMMER/FALL or the SPRING Prelim Exam (**i.e., three weeks prior to the schedule examination date in JULY for the SUMMER/FALL exam, the last day of finals in FALL semester for the SPRING examination**). The application process must be completed by the designated date, or the student will not be permitted to take prelims. Please be aware that there is considerable paperwork (forming a dissertation committee, submitting your Program of Study, obtaining your advisor's signature, etc.) to complete the registration process. Allow plenty of time to complete these requirements. **In addition, faculty signatures may be**

difficult/ impossible to obtain during the summer months because of faculty schedules; thus, students planning to take prelims in the SUMMER/FALL should complete these processes prior to the end of the spring semester before. All students will be notified by e-mail early during the semester prior to which they plan to take prelims, and the Prelim Exam manual will be included as an e-mail attachment as well as posted on the website.

Schedule for the Doctoral Qualifying Examination

General Schedule for the Written Component of the Doctoral Qualifying Examination

(Scheduled two times per academic year in fall [summer administration] and spring semesters)

Written Prelim Segment One

1. Measurement and Assessment
2. Research and Interventions in Counseling Psychology
3. Multicultural Counseling and Human Diversity

Written Prelim Segment Two

4. Vocational Psychology and Career Development
5. Methods of Quantitative Research Design and Analysis
6. Ethical, Legal, and Professional Issues in Psychology

3-6 weeks following beginning of fall semester (in fall) or conclusion of written prelims (in spring): Oral Examination

Schedule for Summer/Fall 2017 Written and Oral Doctoral Qualifying Examination*

Friday, June 30th, 5pm: All registration materials must be combined into a single scanned or PDF file and e-mailed to the department AA: jo.yates@utah.edu and cc the Prelim Coordinator, zac.imel@utah.edu

Friday, July 21, 8:30 am: Receive Segment One written prelim questions.

Monday, July 24, 8:30 am: Turn in Segment One written prelim responses.

Friday, July 28, 8:30 am: Receive Segment Two written prelim questions.

Monday, July 31, 8:30 am: Turn in Segment Two written prelim responses.

Oral Prelims (Fall – Retakes Only)

TBD, 2017, 12:00 pm: Turn in materials for oral prelims, turn in materials for oral prelims, electronically, using PHI designation and password protection for client conceptualization.

TBD, 2017: Prelim Coordinator distributes oral prelim materials to faculty.

TBD, 2017: Oral Examination (Please reserve the full day until scheduling has been completed. If there are more than 7 students taking the Oral component of the Prelim exam, an additional day will be scheduled).

*Students unable to participate in prelims on a Friday, Saturday, or Sunday due to religious observations must contact the Prelim Director prior to the registration deadline to make alternative arrangements.

Schedule for Spring 2018 Written and Oral Doctoral Qualifying Examination

Friday, December TBD, 5pm: All registration materials must be combined into a single scanned or PDF file and e-mailed to the Prelim Coordinator, zac.imel@utah.edu.

Friday, January TBD (usually begins mid to late January), 8:30 am: Receive Segment One written prelim questions.

Monday, January TBD, 8:30 am: Turn in Segment One written prelim responses.

Friday, January TBD, 8:30 am: Receive Segment Two written prelim questions.

Monday, February TBD, 8:30 am: Turn in Segment Two written prelim responses.

Oral Prelims Spring

Thursday, TBD, 12:00 pm: Turn in materials for oral prelims, Turn in materials for oral prelims, electronically, using PHI designation and password protection for client conceptualization.

Friday, TBD (typically in February): Prelim Coordinator distributes oral prelim materials to faculty.

Friday, TBD: Oral Examination (Please reserve the full day until scheduling has been completed. If there are more than 7 students taking the Oral component of the Prelim exam, an additional day will be scheduled).

Registration for the Doctoral Qualifying Examination

Registration to take the Doctoral Qualifying Examination constitutes a contract to receive and complete the examination process. Students wishing to retract their registration prior to receiving their first set of exam questions must petition the faculty (via the Training Director) in writing (either electronically or hard copy) at least one week prior to the start of the written examination process. If a student fails to notify the CP faculty of a desired retraction through the steps outlined above, the student's record will indicate that the student Failed all portions of the Prelim Exam. Once a student has started the written exam process, she or he is obligated to complete the process or receive a failing score. Any exceptions to these policies must be authorized by the majority of the CCP faculty, by written petition by the student and her/his advisor.

1. During the semester before the Prelim Exam is scheduled, the prospective examinee should:
 - a. Study for written examination.
 - b. Complete all prerequisites for the Doctoral Qualifying Examination (see below).
 - c. Fill out the *Doctoral Qualifying Exam Registration Form* (attached) and notify the Training Director of your intent to take prelims at the next scheduled examination date. ***You must attach a current unofficial transcript of your graduate studies since you began the Ph.D. Program. Also attach a copy of a grade change form for any change in grade that does not appear on the unofficial transcript.***
 - d. Students retaking one or more Prelim Exam questions must include (a) documentation of a remediation plan agreed up by the student and his or her advisor and (b) a letter stating how she or he responded to the remediation plan established following the previous failure of those questions; Remediation Plan Completion form signed by the student's advisor.
 - f. Obtain your Dissertation chairperson's signature on the registration, which certifies that all requirements are fulfilled.

2. Submit the completed Registration Form to the Prelim Director by the due date noted in the prelim guide. **Note that several weeks may be required to secure Departmental approval of your Doctoral Supervisory Committee and signatures on your Program of Study, as well as grade changes if needed. In the case of SUMMER Prelims, you may have difficulty contacting faculty in the summer if you do not begin early.** You will be asked to supply the following information on the Prelim Registration Form:
 - a. The dates you completed the pre-dissertation research project and that it was approved by the CCP faculty.
 - b. The date the Department approved your doctoral supervisory committee.
 - c. The date your Program of Study for the Ph.D. Degree was approved by the Department.
 - d. An indication on the Doctoral Qualifying Exam Registration Form that you currently have no outstanding incompletes in any courses (or Incompletes that have, by default, converted to an "E") on your current transcript. In this instance it

will be necessary for you to complete the course and obtain a passing grade. In addition, students must not have any grades below a B- in required courses. If you need to complete work or retake a course to make a grade change, you should do so well in advance of the due date for prelim registration, as you must have the grade change appear on your transcript or attach a signed copy of the grade change form to your prelim registration form for it to be accepted.

- e. The signature of the chair of your supervisory committee endorsing you to take prelims.
3. Attach an unofficial copy of your transcript of your studies to date in the Ph.D. Program, as well as copies of grade change forms for courses on your transcript that show an I, E, or grade below a B- in a required course.

Written Examination Procedures

1. Sample questions from previous prelim exams will be available for students to review.
2. **Prior to the beginning of the Prelim Exam, the Prelim Director will send you a test document at your e-mail address.** You should respond with a confirmation and attach a test document of your own. This will guard against communication problems on prelim day. You should have a back-up computer option for taking prelims in case of technological problems.
3. You will receive via e-mail the Segment One prelim questions by 8:30 a.m. the Friday of the start of the Prelim Exam, and you must return it by 8:30 a.m. the following Monday. Segment Two questions will be sent the following Friday at 8:30 a.m. and are due the following Monday at 8:30 a.m. **Late returns are not permitted. Failure to return a Prelim Exam question on time will be interpreted as a failed response for the question. In addition, failure to return a “good-faith” response to all three questions in the segment will result in having to retake the entire segment at the next scheduled examination period. (This policy was implemented in order that students who respond to all questions in a segment not be compared unfairly to a student who spends the entire period answering only one or two questions.)** E-mailing your Prelims involves some risk, and you are responsible for making backup arrangements so that your answers arrive on time.
4. Your answers to exam questions must be typewritten. An MS Word format (.doc, .docx, etc.) is preferred to avoid problems in sending and receiving documents. If you use a Mac, be sure the .doc or .docx extension appears on your document (you can check this by copying yourself on the e-mail). You may use your own computer and word processor or one on campus. If you do not have access to a computer, please notify the Prelim Director well in advance so that appropriate arrangements may be made. **It is assumed that you will complete the process electronically unless arrangements are made for a different format at least two weeks in advance of the scheduled Prelim Exam. It is your responsibility to be certain that you have a working computer with Internet access.**

5. The maximum page limit permitted for each question is 7 typed, double-spaced pages in 12-point font (not including references). Please adhere carefully to this limit. Do not retype the question on your paper before answering. Follow APA editorial style, except for the following:
 - a. Do not include a cover page.
 - b. **Type your ID# (given to you by the Exam Coordinator) only** in the upper right-hand corner of each page.
 - c. Paginate at the **bottom** of each page.
6. Students are to work independently but may use books, articles, the Internet, and notes in their responses (please cite references using APA style). Students are strongly discouraged from relying on personal communications with faculty or supervisors as a means of responding to the Prelim Exam questions.
7. Students should plan to allow for sufficient time to respond to each question. You must show evidence of having given serious effort to every question; otherwise all three questions for the segment will be considered as failed. This is because, although we have tried to allot sufficient time for all questions, if a student answers only two, it gives unfair advantage to the ones that are answered. Faculty must evaluate based on the understanding that you will have approximately 24 hours per question (though we certainly hope you will sleep during part of that time!).

Domains to be Evaluated

The counseling psychology Prelim Exam, written component, includes six questions that cover specific knowledge domains. The oral prelim component includes a written work sample and an oral presentation as noted below.

Knowledge Domains Tested by Written Examination Questions

1. Measurement and Assessment
2. Vocational Psychology and Career Development
3. Research and Interventions in Counseling Psychology
4. Methods of Quantitative Research Design and Analysis
5. Ethical, Legal, and Professional Issues in Psychology
6. Multicultural Counseling and Human Diversity

Professional Skill Domain Evaluated Through Oral Examination

7. Work Sample demonstrating assessment, conceptualization, and intervention skills with an individual, group, or organizational client

Formulation and Evaluation of Exam Questions

The Doctoral Qualifying Examination Director (Prelim Director) and Counseling Psychology Examination Committee (Examination Committee) are composed of Counseling and Counseling Psychology faculty members and associated faculty who have a key role in the education of our students. Appointment to the Examination Committee is made by the Program Director of the Counseling Psychology Program. Doctoral Qualifying Examination (Prelim Exam) questions are written by members of the Examination Committee. Questions reflect an expectation that students are familiar with the broad base of the domain, including, but not restricted to, information contained in the study guide below, which is updated regularly. Faculty who write exam questions also develop criteria for evaluating those questions. These criteria are agreed upon in advance by the writer and readers of each question to contribute to the reliability of the questions and evaluation process.

Students' written answers to the prelim questions are evaluated by the Examination Committee. The Examination Committee does not know the students' identities until after the questions have been evaluated. In addition, students are not given information about which faculty evaluate questions. Faculty are requested to return their evaluations within two weeks following the examination period. The Prelim Director will do everything possible to ensure that students receive feedback by the time they sit for the oral component of the Prelim Exam (approximately one month after beginning the written exams), although this cannot be guaranteed.

Each written response to the written component of the Prelim Exam is graded on a 5-point scale as follows: 5 = Exceptional Response, 4 = Above Average Response, 3 = Acceptable (passing) Response, 2 = Not a Passing Response, 1 = Seriously Flawed Response. The ratings are grounded in the following criteria:

Evaluation Criteria for the Counseling Psychology Written Doctoral Comprehensive Examination

- 5 Excellent. This response fully addresses the relevant essay tasks (presentation of empirical findings and/or documentation of problem-solving skills) and presents a thorough and accurate exploration of the topic. It shows both clarity and depth of thought and focused and coherent organization. The ideas are expressed with superior precision and literacy.
- 4 Above Average. This response addresses all relevant essay tasks and presents a substantial treatment of the topic that demonstrates understanding of the issues. It shows clear and sophisticated thinking and good organization. The ideas are expressed with good command of English syntax and grammatical conventions.
- 3 Acceptable/Passing. This response addresses all the relevant essay tasks and presents a defensible and adequate treatment of the topic. It shows clarity of thought and good organization. The ideas are expressed with good command of English syntax and grammatical conventions.

- 2 Not Pass. This response neglects or distorts one or more of the relevant essay tasks or presents a superficial or underdeveloped treatment of the topic. It may show some clarity of thought while being providing insufficient information to address the essay task . Problems in the organization of the response may be evident. The essay may demonstrate a basic fluency in English, but the writing impedes communication of the respondent’s ideas.
- 1 Seriously Flawed. This essay response seriously neglects or distorts one or more of the relevant essay tasks or offers insufficient treatment of the topic. In addition, the response may demonstrate substantial problems with the written analysis, synthesis, and organization of the topic. It may contain recurrent grammatical errors resulting in language that does not communicate respondent’s ideas.

Students taking the Prelim Exams are expected, and prepared, to pass the exam upon the first attempt. **Three faculty readers independently evaluate each question.** Readers use whole numbers (e.g., 3) rather than fractional ratings (e.g., 2.5) in evaluating each question. A passing score is reported to the student if at least two of the independent readers rate the response as a 3 or higher (e.g., received to ratings of passing or above). If at least two readers issue a score of 2 or lower, the student is failed on that item. Students demonstrating especially strong performance on any given item may be “Passed with Distinction” on that item. Such performance will be noted in the student’s file.

Students who fail to pass all portions of the written Prelim Exam will immediately be placed on probationary status. **The student will be required to repeat only those portions of the Prelim Exam that are failed and will be required to do so during the next regularly scheduled exam administration.** Failure of any question will result in the Program engaging the student in a formal remediation plan that will be established in consultation with the student, the student’s advisor, and at least one member of the Counseling Psychology program faculty (preferably one who has some content expertise in the failed domain). This remediation plan will be communicated to the student in writing by the student’s program advisor once the details of the formal remediation plan have been approved by the Prelim Director. Students reapplying to take the Prelim Exam in the following semester must include (a) this remediation plan and (b) a letter that specifically articulates how they adhered to the remediation plan.

Students retaking items for a second time will receive those items at a time consistent with their distribution to students taking the exam items for the first time (e.g., consistent with existing Segment One and Two distribution schedules). Students will have exactly 24 hours to complete each item being retaken (e.g., if receiving two retake items on Friday at 8:30 am, responses are to be turned in electronically at 8:30 am on Sunday).

If a student does not pass all portions of the Prelim Exam on a second attempt, she or he must petition the CCP faculty to sit for a third retake of the Prelim Exam. This petition must receive a majority vote of the CCP faculty and will be considered only under extraordinary circumstances. Failure of any portion of the Prelim Exam on a third attempt will result in immediate dismissal from the Counseling Psychology Program.

A student on probation for failing the Prelim Exam must, upon successfully passing the exam,

initiate a letter that is approved and countersigned by the student's program advisor petitioning the CCP program to remove the probationary status designation prior to progressing in the program.

After completing the written component of the Prelim Exam, the oral component of the Prelim Exam follows and is administered by the Counseling Psychology Program Committee. The content of the oral component of the Prelim Exam includes the work sample that is outlined in the study guide section of this document.

Students with Disabilities

If you have a disability or other issue that may affect your success completing the Prelim Exam, you are strongly encouraged to seek assistance from the Center for Disability Services, 162 Union, 581-5020. If this process leads to the development of recommended accommodations, such accommodations must be presented to the Prelim Director no later than the end of the semester prior to the semester that the student intends to take the Prelim Exam. Seeking assistance from the Center for Disability services is the student's responsibility.

Accommodations will be processed by the Prelim Director after consultation with the Counseling Psychology Program Director and the Center for Disability Services, if appropriate. Unless there is a formal exception, special requests to alter the Prelim Exam need to be communicated and approved through the Counseling Psychology Program Committee prior to taking the Prelim Exam.

In the past, some students have not realized until the Prelim Exam process that a physical, learning, or other kind of disability would affect them seriously enough to require accommodations. If you have any evidence from your past test-taking or intensive writing experiences that you may have trouble with the rigorous Prelim process, we urge you to discuss this situation with Center for Disability Services, your advisor, or the Prelim Coordinator. All such conversations will be held confidential. You are not required to disclose your disability to any program faculty; however, to receive reasonable accommodations, you will need to receive an accommodation letter from CDS.

Student Study Guide for the Written Examination

The purpose of this study guide is to assist you in reviewing and integrating what you have learned in the Counseling Psychology Program to help you prepare for the written component of the Prelim Exam. You should familiarize yourself with the **current course content** of the listed *key courses*. Under most circumstances, current or recently enrolled students will be willing to share their course notes and materials with you. If you are unable to locate this information, please contact the course instructor. Please note that courses taken prior to the Prelim Exam are designed to provide the basic academic foundation for the content areas to be tested. Students are expected, however, to supplement their course learning with knowledge and skills from additional texts, journal articles, and personal and professional experience. *Key texts* may include those texts in use in the key courses as well as other relevant contributions. *Key journals* include those central to the prelim question content domain; we recommend that you familiarize yourself with the relevant content of the domains that are covered by the prelim questions over a time period of at least the past two to three years in the journal(s) listed. You will also find *selected*

journal articles with which you should be familiar. Finally, you can rely on experiences and knowledge gained through your research and clinical work while you have been a matriculated student in the Counseling Psychology program.

Recommendations for Study

1. Students are encouraged to consider forming study groups to prepare for the Prelim Exam.
2. Because of changes in the various domains that are covered by the Prelim Exam questions over time, as well as changes in instructors, students may find that the textbooks they used when they took the class are outdated or that new textbooks have been adopted. Because newer texts should contain more current information, students who do not possess those texts are encouraged to obtain them for the purpose of studying for the Prelim Exam. Students in the past have found that placing a request by e-mail to the Counseling Psychology student distribution list (edps-ccp-phd-students@lists.utah.edu) has been useful. Also, copies of many textbooks may be found in the library and can be checked out at no cost.
3. The recommended reading list below is offered neither as a comprehensive nor an exclusive list. Students may find that some of the volumes listed are appropriate as reference sources. Please be sensitive to the needs of all students when checking sources out from our library.
4. You will notice that key courses are listed below for your convenience in identifying course syllabi that may be relevant to your study process. It is important to emphasize that the material covered in most examination questions goes well beyond the limits of specific course work, however. Thus, passing a particular course, even with a grade of "A," does not necessarily reflect your knowledge in the overall domain (which also includes overlap material from other courses, journal articles in the field, and additional recommended study materials).
5. Key journals in each domain are included to encourage you to become familiar with recent trends in the domain. Although you are not expected to know all of the contents in depth, you should familiarize yourself with the state of the field in each area.
6. Although the exam follows a take-home, open-book format, students are expected to begin their preparation for the Prelim Exam well in advance (e.g., 3 – 4 months or more). A comprehensive, integrative understanding of the domains that are covered by the questions in the Prelim Exam is necessary to pass the Prelim Exam questions. Students should be familiar with the journal literature in each area. Students must also be able to access materials that go beyond the books and notes for specific courses and must be able to integrate relevant material from courses other than those noted in the study guide section of this manual.

It is important to emphasize the *comprehensive* and *integrative* nature of the Prelim Exam. That is, you are expected to base your responses on the broad knowledge base to which you have been

exposed in your program of study in counseling psychology including independent readings, research, and clinical experience as well as the specific material covered in courses. It is also important to stress that you are being evaluated on your ability to organize and critically apply the resources at your disposal and to communicate your responses in a professional manner.

1. Measurement and Assessment

Key Courses: EDPS 7180, 7300, 7330

Key Texts:

American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders*. (5th Ed., Text Revision). Washington, DC: Author.

Crocker, L., & Algina, J. (1986). *Introduction to classical and modern test theory*. Fort Worth, TX: Harcourt Brace Jovanovich.

Groth-Marnat, G. (2003). *Handbook of psychological assessment* (4th Ed.). New York: Wiley.

Hersen, M. & Thomas, J. C. (2006). *Comprehensive handbook of personality and psychopathology*. Hoboken, NJ: Wiley.

Selected Journal Articles:

Cronbach, L., & Meehl, P. (1955). Construct validity in psychological tests. *Psychological Bulletin*, 52, 281–302.

Messick, S. (1995). Validity of psychological assessment: Validation of inferences from person's responses and performances as scientific inquiry into score meaning. *American Psychologist*, 50, 741-749

Shavelson, R. J., Webb, N. M., & Rowley, G. L. (1989). Generalizability theory. *American Psychologist*, 44, 922-932.

Key Journals:

Psychological Assessment
Journal of Personality Assessment

2. Vocational Psychology and Career Development

Key Courses: EDPS 7200, 7330

Key Texts:

Brown, S.D., & Lent, R.W. (Eds.). (2005). *Career development and counseling: Putting theory and research to work*. New York: Wiley.

Brown, S.D., & Lent, R.W. (Eds.). (2013). *Career development and counseling: Putting theory and research to work* (2nd ed.). New York: Wiley.

Key Journals:

Journal of Counseling Psychology
Journal of Vocational Behavior
Journal of Career Assessment
Career Development Quarterly

Selected Articles:

Brown, S. D., & Ryan Krane, N. E. (2000). Four (or five) sessions and a cloud of dust: Old assumptions and new observations about career counseling. In S. D. Brown and R. W. Lent (Eds.), *Handbook of Counseling Psychology* (3rd Ed.). New York: Wiley.

Leung, S. A. (1995). Career development and counseling: A multicultural perspective. In J. G. Ponterotto, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling*, pp. 549-566. Thousand Oaks, CA: Sage.

Savickas, M. L., & Baker, D. B. (2005). The history of vocational psychology: Antecedents, origin, and early development. In W. B. Walsh & M. L. Savickas (Eds.), *Handbook of vocational psychology: Theory, research, and practice* (3rd Ed.) (pp. 15-50). Mahwah, NJ: Erlbaum.

3. Research and Interventions in Counseling

Key Courses: EDPS 6200, 7200, 7710, 7430

Key Texts:

Barlow, D. H. (Ed.) (2008). *Clinical handbook of psychological disorders: A step-by-step treatment manual* (4th Ed.), NY: Guilford.

Cormier, S. & Nurius, P. S. (2003). *Interviewing and change strategies for helpers: Fundamental skills and cognitive behavioral interventions* (5th Ed.). Pacific Grove, CA: Brooks/Cole.

Goodheart, C. D., Kazdin, A. E., & Sternberg, R. J. (2006). *Evidence-based psychotherapy: Where practice and research meet*. Washington, DC: American Psychological Association.

Lambert, M. J. (2013). *Bergin and Garfield's handbook of psychotherapy and behavior change* (6th Ed.). New York: Wiley.

- Norcross, J. C., Hogan, T. P., & Koocher, G. P. (2008). *Clinician's guide to evidence-based practices: Mental health and the addictions*. Oxford, NY: Oxford University Press.
- Prochaska, J. O., & Norcross, J. C. (2007). *Systems of psychotherapy: A transtheoretical analysis* (6th Ed.). Belmont, CA: Thomson/Brooks Cole.
- Teyber, E. (2000). *Interpersonal process in psychotherapy: A relational approach* (4th ed.). Belmont, CA: Brooks/Cole/Wadsworth.
- Wampold, B. E. & Imel, Z.E. (2015). *The great psychotherapy debate: Models, methods, and findings*. Routledge.

Key Journals:

Clinical Psychology: Science and Practice
Journal of Counseling Psychology
Journal of Consulting and Clinical Psychology
Psychotherapy
The Counseling Psychologist

4. Methods of Quantitative Research Design and Analysis

Key Courses: EDPS 7010, 7020, 7400

Key Texts:

- Edwards, A. L. (1994). *An introduction to linear regression and correlation*. (2nd Ed.). New York: Freeman.
- Heppner, P. P., Kivlighan, D. M. Jr., & Wampold, B. E. (2007). *Research design in counseling* (3rd Ed.). Belmont, CA: Brooks/ Cole/ Wadsworth.
- Keppel, G. (2004). *Design and analysis: A researcher's handbook* (4th Ed.). Englewood Cliffs, NJ: Prentice-Hall.
- Shadish, W. Cook, T. & Campbell, D. (2002). *Experimental and quasi-experimental designs for generalized causal inference*. Boston: Houghton Mifflin.

Selected Articles:

- Baron, R.M. & Kenny, D. A. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology*, 51, 1173-1182.

Cohen, J. (1990). Things I have learned (so far). *American Psychologist*, 45, 1304-1312.

Cohen, J. (1992). A power primer. *Psychological Bulletin*, 112, 155-159.

Crits-Christoph, P. & Mintz, J (1991). Implications of therapist effects for the design and analysis of comparative studies of psychotherapy. *Journal of Consulting and Clinical Psychology* 59: 20-26.

Key Journals:

Psychological Methods

5. Ethical, Legal, and Professional Issues in Psychology

Key Courses: EDPS 7200, 7220, 7710

Key Documents:

American Psychological Association's (2010) Ethical Principles of Psychologists and Code of Conduct, Including 2010 Amendments: <http://www.apa.org/ethics/code/index.aspx>

Association of State and Provincial Psychology Board's (2005) Code of Conduct: <http://www.asppb.org/publications/model/conduct.aspx>

Current State of Utah "Psychologist Licensing Act": <http://www.dopl.utah.gov/laws/58-61.pdf>

Current State of Utah "Psychologist Licensing Act Rule": <http://www.dopl.utah.gov/laws/R156-61.pdf>

Key Texts:

Koocher, G.P. & Keith-Spiegel, P. (2008). Ethics in psychology and the mental health professions: Standards and cases (3rd Ed.). Oxford: Oxford University Press.

Pope, K.S. & Vasquez, M.J.T. (2011). Ethics in psychotherapy and counseling: A practical guide (4th Ed.). Hoboken, New Jersey: John Wiley & Sons, Inc.

Welfel, E. R. (2010). Ethics in Counseling & Psychotherapy: Standards, Research, & Emerging Issues (4th Ed.). Belmont, CA: Thomson Brooks/Cole.

Selected Articles:

Note: All APA Practice Guidelines can be accessed via: <http://www.apa.org/practice/guidelines/index.aspx>

- American Psychological Association, (2013). Specialty Guidelines for Forensic Psychology. *American Psychologist*, 68(1), 7-19. <http://www.apa.org/practice/guidelines/forensic-psychology.pdf>
- American Psychological Association, (2013). Guidelines for the Practice of Telepsychology: <http://www.apa.org/practice/guidelines/telepsychology.aspx>
- American Psychological Association Task Force on Appropriate Therapeutic Responses to Sexual Orientation (2009). Report of the Task Force on Appropriate Therapeutic Responses to Sexual Orientation. Washington DC: American Psychological Association. <http://www.apa.org/pi/lgbt/resources/therapeutic-response.pdf>
- American Psychological Association, Board of Professional Affairs' Committee on Professional Standards and Practice (COPPS), (2007). Record Keeping Guidelines. <http://www.apa.org/practice/guidelines/record-keeping.aspx?item=5>
- American Psychological Association (2000). Guidelines for psychotherapy with lesbian, gay, and bisexual clients. *American Psychologist*, 55, 1440-1451. <http://www.apa.org/pi/lgbt/resources/guidelines.aspx>
- American Psychological Association (2003). Guidelines on multicultural education, training, research, practice, and organizational change for psychologists. *American Psychologist*, 58, 377-402. <http://www.apa.org/pi/lgbt/resources/guidelines.aspx>
- American Psychological Association, Committee on Legal Issues, (1996). Strategies for private practitioners coping with subpoenas or compelled testimony for client records of test data. *Professional Psychology: Research and Practice*, 27, 245-251.
- DiLillo, D. & Gale, E.B. (2011). To Google or not to Google: Graduate students' use of the internet to access personal information about clients. *Training and Education in Professional Psychology*, 5 (3), 160-166.
- Fisher, C.B. & Oransky, M. (2008). Informed consent to psychotherapy: Protecting the dignity and respecting the autonomy of patients. *Journal of Clinical Psychology: In Session*, 64 (5), 576-588.
- Fisher, M.A. (2008). Protecting confidentiality rights: The need for an ethical practice model. *American Psychologist*, 63(1), 1-13.
- Fowers, B.J. & Davidov, B.J. (2006). The virtue of multiculturalism: Personal transformation, character, and openness to the other. *American Psychologist*, 61(6), 581-594.
- Kitchener, K. (1984). Intuition, critical evaluation and ethical principles: The foundation for ethical decisions in counseling psychology. *The Counseling Psychologist*, 12(3), 43-55.
- Lannin, D.G & Scott, N.A. (2013). Social networking ethics: Developing best practices for the new small world. *Professional Psychology: Research & Practice*, 44 (3), 135-141.

Meara, N. M., Schmidt, C. D., & Day, J. D. (1996). Principles and virtues: A foundation for ethical decisions, policies, and character. *The Counseling Psychologist*, 24, 4-77.

Pipes, R.B., Holstein, J.E., & Aguirre, M.G. (2005). Examining the personal-professional distinction: Ethics codes and the difficulty of drawing a boundary. *American Psychologist*, 60(4), 325-334.

Sternberg, R.J. (2012). A Model for Ethical Reasoning. *Review of General Psychology*, 16(4), 319-326.

Key Journals:

American Psychologist

Professional Psychology: Research and Practice

Journal of Clinical Psychology, Volume 64(5), 2008 (The entire issue is devoted to applied ethics in psychology practice and serves as an excellent review of the area. Available online in Wiley Interscience at: www.interscience.wiley.com)

6. Multicultural Counseling and Human Diversity

Key Courses: EDPS 6360, other courses in which multicultural content is infused.

Multicultural Counseling and Human Diversity

Key Courses: EDPS 6360, other courses in which multicultural content is infused.

Key Texts:

Adams, M., Blumenfeld, W.J., Castañeda, R., Hackman, H.W., Peters, M.L., & Zúñiga, X. (Eds.). (2010). *Readings for diversity and social justice (2nd Ed)*. New York: Routledge.

Sue, D. W. & Sue, S. (2007). *Counseling the culturally diverse: Theory and practice (5th Ed.)*. New York: Wiley.

Selected Articles:

Ali, S. R., & Liu, W., & Humedian, M. (2004). Islam 101: Understanding the religion and therapy implications. *Professional Psychology: Research and Practice*, 35, 635-642.

American Psychological Association (2000). Guidelines for psychotherapy with lesbian, gay, and bisexual clients. *American Psychologist*, 55, 1440-1451.

- American Psychological Association (2003). Guidelines on multicultural education, training, research, practice, and organizational change for psychologists. *American Psychologist*, 58, 377-402.
- American Psychological Association (2004). Guidelines for psychological practice with older adults. *American Psychologist*, 59, 236-260.
- Aten, J.D., Mangis, M.W., & Campbell, C. (2010). Psychotherapy with rural religious fundamentalist clients. *Journal of Clinical Psychology: In Session*, 66(5), 513-523.
- Balmforth, J. (2009). 'The weight of class': Clients' experiences of how perceived differences in social class between counselor and client affect the therapeutic relationship. *British Journal of Guidance & Counselling*, 37(3), 375-386.
- Carroll, L., Gilroy, P. J., & Ryan, J. (2002). Counseling transgendered, transsexual and gender-variant clients. *Journal of Counseling and Development*, 80, 131-139.
- Chang, D.F., & Berk, A. (2009). Making cross-racial therapy work: A phenomenological study of clients' experiences of cross-racial therapy. *Journal of Counseling Psychology*, 56(4), 521-536.
- Davis-Coelho, K., Waltz, J., & Davis-Coelho, B. (2000). Awareness and prevention of bias against fat clients in psychotherapy. *Professional Psychology: Research and Practice*, 31, 682-684.
- Day-Vines, N.L., Wood, S.M., Grothaus, T., Craigen, L., Holman, A., Dotson-Blake, K., & Douglass, M.J. (2007). Broaching the subject of race, ethnicity, and culture during the counseling process. *Journal of Counseling & Development*, 85, 401-409.
- Herek, G. M. (2006). Legal recognition of same-sex relationships in the United States: A social science perspective. *American Psychologist*, 61, 607-621.
- Kierski, W., & Blazina, C. (2009). The male fear of the feminine and its effects on counseling and psychotherapy. *The Journal of Men's Studies*, 17(2), 155-172.
- Lewis, A. E. (2003). Everyday race making: Navigating racial boundaries in schools. *American Behavioral Scientist*, 47, 283-305.
- Liu, W. M., Ali, S. R., Soleck, G., Kopps, J., Dunston, K., & Pickett, Jr., T. (2004). Using social class in counseling psychology research. *Journal of Counseling Psychology*, 51, 3-18.
- Lott, B. (2002). Cognitive and behavioral distancing from the poor. *American Psychologist*, 57(2), 100-110.
- McIntosh, P. (July/August, 1990). White privilege: Unpacking the invisible knapsack. *Peace and Freedom Magazine*, pp. 10-12: Philadelphia, PA: Women's International League

for Peace and Freedom.

- Olkin, R. (2002). Could you hold the door for me? Including disability in diversity. *Cultural Diversity & Ethnic Minority Psychology, 8*, 130-137.
- Pedersen, P. B. (1991). Multiculturalism as a generic approach to counseling. *Journal of Counseling and Development, 70*, 6-12.
- Phinney, J.S. (1996). When we talk about American ethnic groups what do we mean? *American Psychologist, 51*(9), 918-927.
- Poteat, V.P., Aragon, S.R., Espelage, D.L., & Koenig, B.W. (2009). Psychosocial concerns of sexual minority youth: Complexity and caution in group differences. *Journal of Consulting and Clinical Psychology, 77*(1), 196-201.
- Ridgeway, C.L., & Correll, S.J. (2004). Unpacking the gender system: A theoretical perspective on gender beliefs and social relations. *Gender and Society, 18*(4), 510-531.
- Smart, J.F. & Smart, D. W. (2003). Models of disability: Implications for the counseling profession. *Journal of Counseling & Development, 84*, 29-40.
- Smedley, A., & Smedley, B.D. (2005). Race as biology is fiction, racism as a social problem is real: Anthropological and historical perspectives on the social construction of race. *American Psychologist, 60*(1), 16-26.
- Smith, L. (2005). Psychotherapy, classism, and the poor: Conspicuous by their absence. *American Psychologist, 60*, 687-696.
- Steele, C.M. (1997). A threat in the air: How stereotypes shape intellectual identity and performance. *American Psychologist, 52*(6), 613-629.
- Steinfeldt, J.A., Steinfeldt, M.C., England, B., & Speight, Q.L. (2009). Gender role conflict and stigma toward help-seeking among college football players. *Psychology of Men & Masculinity, 10*(4), 261-272.
- Sue, D. W. (1978). Eliminating cultural oppression in therapy: Toward a general theory. *Journal of Counseling Psychology, 25*, 419-428.
- Sue, S. (1999). Science, ethnicity, and bias: Where have we gone wrong? *American Psychologist, 54*, 1070-1077.
- Szymanski, D., Kashubeck-West, S., & Meyer, J. (2008). Heterosexism: A historical and theoretical overview.
- Thompson, C.E. & Neville, H.A. (1999). Racism, mental health, and mental health practice. *The Counseling Psychologist, 27*, 155- 223.

Vera, E. M., & Speight, S. L. (2003). Multicultural competence, social justice, and counseling psychology: expanding our roles. *The Counseling Psychologist, 31*, 253- 272.

Williams, D.R., Neighbors, H.W., & Jackson, J.S. (2003). Racial/ethnic discrimination and health: Findings from community studies. *American Journal of Public Health, 93*(2), 200-208.

Zinnbauer, B. J., & Pargament, K. I. (2000). Working with the sacred: Four approaches to religious and spiritual issues in counseling. *Journal of Counseling and Development, 78*, 162-171.

Oral Examination of Professional Skills

In the Oral component of the Prelim Exam (the Oral Exam), the student demonstrates basic professional competencies in working with individuals and/or groups in a therapeutic context. Students present a work sample to the Counseling Psychology Examination Committee that demonstrates assessment, conceptualization, and intervention skills. The work sample may focus on an individual client, a thematic or unstructured group, or an organization or community. The work sample will include a written comprehensive case conceptualization and a related video or audio file example of the intervention. The Oral Exam is patterned after the specialty examination administered by the American Board of Professional Psychology (ABPP), which we expect many students will complete after they become licensed psychologists. In this regard, the Oral Exam mirrors a task that you will likely engage as a professional psychologist.

The work sample of the Oral Exam consists of two parts: (1) a written synopsis of the student's world view and theoretical orientation to psychotherapy and (2) a focused write-up of a client conceptualization including history, diagnosis and assessment, intervention, and outcomes. Ideally, the client therapy relationship from which the written work sample is based will have been concluded so that the outcome of the case can be reported in its entirety. This also eliminates the possibility of a current client feeling pressured or coerced into participating when the client in fact may not wish to do so. **However, if this is not possible, the student should have met with the client or client group over a significant enough period of time that a comprehensive case conceptualization can be developed.** It is essential that clients understand that their continued receipt of psychological services will not be affected should they decide not to participate. The counselor is ethically responsible to be certain the client does not feel coerced into agreement; any evidence of reluctance on the part of the client should be taken as an indication that this is not an appropriate client to present for the Oral Exam. Evaluative data on the effects of the intervention (e.g., ongoing measurement of symptoms or functioning) should be included.

The Committee assumes that in almost all instances students will be able to develop a written work sample that represents a client with whom she or he has worked while participating in a supervised practicum experience. **This should be a case in which you believe you have done exemplary work; every effort should be made to present a case that is no more than 1 year distant from the oral examination.** If there are mitigating circumstances that make this impossible, the student should consult with her or his advisor and the Prelim Director *at the beginning* of the semester before the scheduled date of the oral component of the Doctoral Qualifying Examination in order to arrange for a special training case.

The components of the written work sample for the Oral Exam include:

1. Necessary **release and/or consent forms** from the client (attached) and, where appropriate, from the practicum agency or professional facility where the student was being supervised when the services were provided. This release should indicate the licensed psychologist who supervised the examinee on this case. The release should be provided to the Prelim Director, who will retain this information until the Oral component of the Prelim Exam is completed. Upon completion of the oral component of

the Prelim Exam, the information release will be destroyed. A copy of the release should remain in the client's file.

2. A **“Clinical Vitae,” a one-page outline of relevant practice experiences** (practica, employment in counseling settings, relevant volunteer experience, etc., that have been supervised by a licensed professional).
3. A **brief synopsis of the student's theoretical model** and world view (no more than 5 pages, double-spaced) as it applies to psychological interventions.
4. A **written conceptualization of the case**, including identifying information and description of the client, population, or situation. Remember, the anonymity of the client(s) must be maintained. The case conceptualization should include at least the following:
 - a. A brief description of the context within which the professional services were rendered, including dates of contact with client.
 - b. The client's presenting problem.
 - c. The client's background and contextual information relevant to the case.
 - d. A comprehensive assessment of the problem or issues presented by the client that includes available psychometric data and leads to a statement of therapeutic objectives. All assessment data should be integrated into this report. A formal diagnosis should be provided using an acceptable diagnostic classification scheme such as the DSM-5.
 - e. A discussion of the intervention methods that were used, including a discussion of how these methods are related to the assessment data, diagnosis, and the treatment objectives of the case.
 - f. A summary of the client's situation at the time that the work sample is prepared, including any available outcome evaluation data.

The case conceptualization should be organized in a style that clearly demarcates subtopics, using headings and a style compatible with a presentation to professional colleagues in a staffing situation. A sample outline for a written conceptualization can be found below.

A 20-minute segment of video recording (audio files are discouraged), cued in advance, should be prepared for showing at the oral examination, demonstrating your intervention with the client. This segment should demonstrate your highest quality work and illustrate your use of your theoretical orientation. You may include more than one segment as part of the 20-minute whole if it will best demonstrate your work. Please note that this video recording will not be previewed by the Prelim Director or faculty; however, the student will be expected to play a file segment as part of the oral presentation portion of the Oral Exam. At the Oral Exam, ***please provide a***

transcript of the 20-minute segment of video recording that will be shown in the oral examination. The format for this transcript should include: (a) the transcript in a larger, left column; (b) a right column in which you may make comments, including notations about the interventions you are using (e.g., “Discussion of journal exercise, CBT orientation”) or notations about what you would do differently now. It is okay to include some self-critique if this will illustrate that you are able to see how you might have done it better knowing what you do now.

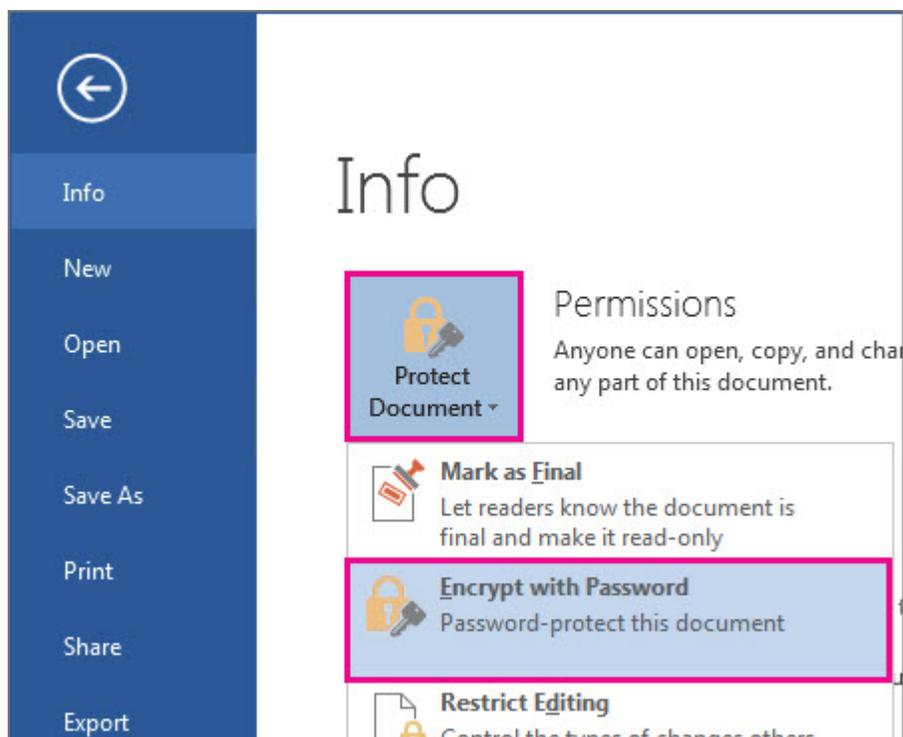
The release/consent form, outline of relevant experience, statement of personal theoretical model, written case conceptualization, and client release must be **submitted two weeks plus one day in advance of the Oral Exam**. This material should be transmitted to the Prelim Director, who will clear these materials and schedule you for the Oral Exam. The Counseling Psychology Examining Committee will receive all of the above materials except the release/consent forms and the video/audio file and transcript 2 weeks prior to the oral examination. ***Note specific instructions below for handling University of Utah Counseling Center materials, and check with other sites about any special protocols for handling confidential materials from their sites.*** Please note that this clearance by the Prelim Director will ascertain only whether all of the components of the work sample are present and in proper format. No evaluation of the content of the work sample materials will be made at that time. These materials should be of highest professional quality in content and format.

Protocol for Transmitting Oral Prelim Materials:

- Students will password protect their confidential Word documents (Client Conceptualization, Client Permission Form). The Prelim Director will assign a common password for these documents, which will be sent to students and evaluating faculty in a separate e-mail. The instructions for password protection appear below.
- Students will e-mail the password-protected Client Conceptualization and Client Permission Form to the Prelim Director (along with their clinical CVs and theoretical orientations, neither of which needs password protection) using the PHI designation. It needs to be mailed from the student’s university account (@utah.edu, @sa.utah.edu, or @hsc.utah.edu).
- Once received, the Prelim Director will save the materials to a separate file (the Client Conceptualization and Client Permission Form will remain password-protected) and will then delete the e-mail from her/his Sent Items and Deleted Items files. The Prelim Director will then instruct each student to do so as well and to inform him/her when the email is deleted from both folders.
- The Prelim Director will send all materials except the Client Permission Form to faculty reviewers. Reviewers will confirm receipt, save the materials to a file, and delete the email from their “Sent Items” folder and from their “Deleted Items” folder at their earliest convenience and let the Prelim Director know when that is done.

Directions for password protection:

1. Click **File>Info>Protect Document> Encrypt with Password**.



2. In the **Encrypt Document** box, type a password, and then click **OK**.
3. In the **Confirm Password** box, type the password again, and then click **OK**.

You can always [change](#) or [remove](#) your password.

IMPORTANT

- Passwords are case-sensitive. Make sure that the CAPS LOCK key is turned off when you enter a password for the first time.
- If you lose or forget a password, Word can't recover your information so it might be a good idea to keep a copy of your password in a safe place or create a strong password that you'll remember. Read more about [resetting or recovering a forgotten password](#) .

Oral Prelim Administration

Transcripts should be brought to the oral examination and passed out to faculty at the beginning of the scheduled hour.

The one-hour Oral Exam will include:

1. A prior review of your work sample materials by members of the Counseling Psychology Examining Committee.

2. A brief welcome and introduction by the Prelim Director.
3. Elaboration of the written material with a video recording sample of your professional skills. After a brief (5-minute) introduction to the case, you will play a 20-minute segment of the recording at the outset of the oral exam to support your written case materials. Please be certain this segment is cued. Your 5-minute introduction should assume that faculty have read your theoretical orientation and client conceptualization and should not repeat information contained therein. Rather, you should orient the faculty to the number of sessions [overall and which session(s) they will see] and any particular things they should look for (e.g., interventions consistent with your theoretical orientation).
4. A 25-minute period of questioning from the faculty related to your recorded presentation of the clinical case, as well as your understanding of your conceptual model as applied to this case. Cultural and ethical issues related to the case will also be discussed and evaluated.
5. A brief evaluation period by the faculty, during which time you will be asked to step out of the room. You will then be asked to return for the committee's decision.

A summary of the Oral Exam procedures follows:

1. After gaining client release, the examinee prepares oral prelim materials. It is advisable that these materials are developed while the examinee has access to feedback from practicum instructors and supervisors.
2. A date for the Oral Exam will be announced by the Prelim Director during the semester before the scheduled exam. You should keep that date open until the specific time for your Exam is scheduled.
3. The examinee will provide to the Prelim Director the components of the written work sample that are noted above two weeks prior to the scheduled date of the Oral Exam. At this time or before, the specific time of your Oral Exam will be scheduled.
4. The Prelim Director will clear the work sample and will copy it for distribution and coordinate Oral Exam times with the Counseling Psychology Examining Committee.
5. The examinee will then participate in the oral portion of the Doctoral Qualifying Examination at the predetermined time and place.

Criteria for evaluation of the Oral Exam include:

1. Demonstration (video segment) of abilities to establish working relationships with clients, observe appropriate boundaries, and conduct purposeful sessions in a manner congruent with the student's theoretical model.

2. Ability to assess, diagnose, and conceptualize client problems; set goals for therapy or consultation; implement relevant and evidence-based interventions; and evaluate when goals are met.
3. Ability to present client material in a comprehensive manner, showing evidence of having utilized a broad range of client disclosures, information, assessment data, and your own study to understand the client, the client's problem; and developing an effective strategy for intervening with the client.
4. Ability to present the case in a manner that is respectful of the client.
5. Attention to issues of culture, human diversity, and client uniqueness.
6. Attention to ethical issues relevant to the case.
7. Integration of your work with client(s) with your theoretical orientation.
8. Organization and professional formatting and appearance of written materials.

Students who fail to pass the Oral Exam will immediately be placed on probationary status. The Program will engage the student in a formal remediation plan that will be established in consultation with the student, the student's advisor, and at least one member of the Counseling Psychology program faculty. This remediation plan will be communicated to the student in writing by the student's program advisor once the details of the formal remediation plan have been approved by the Prelim Director. If the remediation plan requires the student to present again, the student must include (a) this remediation plan and (b) a letter that specifically articulates how she or he adhered to the remediation plan when applying to take Prelims during the next regularly scheduled administration.

If a student does not satisfy the requirements of the remediation plan within the timeline proposed, the student will be dismissed from the program.

A student on probation for failing the Oral Exam must, upon successfully meeting the requirements of the remediation plan, initiate a letter that is approved and countersigned by the student's program advisor petitioning the CCP program to remove the probationary status designation prior to progressing in the program.

Appendix

Client Release of Information for Doctoral Qualifying Examination

I, _____, understand that
(Type client name)

_____ wishes to prepare a professional
(Type counselor's or consultant's name)
 presentation based on his/her work with me to submit to the Doctoral Qualifying Examination Committee of the Counseling Psychology Program at the University of Utah. This committee is made up of faculty members in the Department of Educational Psychology, who are licensed psychologists in the state of Utah. I also understand that this information release is subject to the policies and regulations of the human services agency or professional organization that supported and sponsored my work with my counselor/consultant. (Attach any relevant agency documents.)

I give my permission for my counselor/consultant to share with each member of the examination committee a video recorded session, along with a written description of our work together. I also give permission for this information to be discussed by my counselor/consultant in response to questions from members of the committee during an oral examination conducted by the committee. I understand that the purpose of this sharing is to evaluate the counselor' s/ consultant' s progress and skills, and not to assess me, the client. My counselor/ consultant will assign a code name to all materials, and my real name will not be used at any time during the presentation except as it may appear incidentally on the recording.

All information about me will be viewed and discussed confidentially. Please note that recordings and other case material will be transported to a secure location in the Department of Educational Psychology for the duration of the examination. After the evaluation is completed, all materials will be returned to my counselor/consultant for proper storage or disposal according to the policies of the agency in which I saw him/her and the Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association.

I have read and discussed this release of information with my counselor/consultant. I have received a copy of this document for my records.

(Signature of Client) _____
(Date) _____
(Signature of Counselor) _____
(Date)

(Signature of Witness) _____
(Date) _____
(Signature of Supervising Psychologist) _____
(Date)

**Procedures for Oral Prelims
Working with Video Recordings, Client Files and Client Materials Related to UCC Clients.
Policy Adopted March, 2002**

These policies are to be modified according to above instructions for transmitting files.

1. Practicum counselor discusses the request for use of clinical material with the client, and the client signs "Client Release of Information for Doctoral Qualifying Examination." The discussion and the existence of this signed consent form should be noted in "progress notes" in the client's *Titanium* file. The consent form may be photocopied. Original should go in the client's "hard file" and should remain there even after the conclusion of the oral examination. A copy of the Release should also go in the envelope which contains client video recording (see #3 below). Counselors **may not** take a copy of this consent form outside the UCC.
2. All client-related information, including client files and materials (case notes, notes about case notes, etc.) must be kept at UCC, and the confidentiality of these materials must be maintained at all times. Only the final case conceptualization and video recording and transcript to be used for the oral prelim may be taken outside the UCC, in accordance with # 7 & 8 below.
3. Practicum counselors may save one or more video recordings of their work with the client. These recordings need to be placed in envelopes, labeled, and envelopes placed in a designated locked filing cabinet in the UCC file room. UCC secretary/receptionists are available to help with this process. UCC will keep these recordings until UCC is notified that they are not needed, or until UCC verifies that the counselor no longer needs them (e.g., student has passed oral prelims, graduated, or left the program). The student should inform the UCC front desk staff when they are finished with prelim materials.
4. Students preparing for prelims may access their former client's *Titanium* file and OQ-45, CCAPS, and other data by requesting access from the Associate Director for Assessment and Technology at UCC. This Associate Director will arrange for a time and place for the student to review the *Titanium* file and will also prepare OQ-45 and CCAPS reports as requested. Students should make their requests known in advance and, at the minimum, should allow several days for these arrangements to be made and for reports to be prepared. Students may take notes based on information in the file. These notes may not be taken outside the UCC. UCC will make accommodations for students to use computers at the UCC to write reports, or students may bring their own laptops. If students use personal laptops, notes, drafts, and presentations should be kept on ~~floppy disks or~~ CDs so they can be stored at the UCC, rather than on the hard drive.
5. When the final case presentation is complete, all drafts and preparatory notes should be erased or destroyed.
6. Two weeks and one day prior to the oral exam, the finished Case Conceptualization, along with a copy of the Outline of Practice Experiences and Synopsis of Theoretical Model, should be put in an enveloped labeled with the student's name and prelim date

and turned in at the UCC. UCC staff will put the envelope in a designated file cabinet in the file room. The video recordings should be placed in a second envelope, along with the Release Form, also labeled with the student's name and prelim date. The recording will be stored in the same locked file cabinet.

7. Two weeks prior to the orals the Prelim Director or a designated faculty member will ascertain that the video recording and signed release are in place and will pick up the envelope containing the written supporting materials (but not the video recording or signed release) from the UCC. The Prelim Director or designated faculty member will take the envelope to MBH. The Prelim Director is responsible for keeping the confidential documents (Case Conceptualization) in a secure (locked) location. Two weeks in advance of the orals, the Prelim Director will make and distribute copies of the documents to the Counseling Psychology Examining Committee. Committee members are responsible for keeping all copies of these case presentations in secure (locked) locations and guarding client confidentiality. Following the oral examination, all confidential documents must be shredded and the CD destroyed. The Prelim Director will be responsible for this procedure. Unless the client has given explicit written permission, the student may not keep a copy of the Case Conceptualization for his/her personal/professional files.
8. Video recordings must be kept at the UCC in designated locked files, accompanied by a copy of the signed Release until the date of the oral examination. Prelim students may hand-carry this recording (but not the Release, which is to remain at UCC) to their oral prelim on the day of the prelim. In the event of 8 a.m. orals, students should make arrangements with the UCC Clinical Director. At the end of the examination, the student must return the ~~video recording~~ CD to the UCC, where it will be destroyed. (Alternatively, the CD may be given to one of the UCC faculty to take back to UCC.)

Client Conceptualization: CONFIDENTIAL

Client Pseudonym: _____ **# Sessions to Date:** _____

Counselor: _____ **Presentation Date:** _____

Client Presentation, Mental Status, & Presenting Problem

Physical appearance of client at initial session and over time; affect; rapport

Mental status

What client described as presenting issues

Background Information & Significant Prior Events

Client demographics: Age; gender; race/ethnicity; socioeconomic status; immigration status; religious/spiritual orientation; sexual orientation; partner & parenthood status; other relevant demographics.

Family background: Type of family (one- or two-parent, alternative family); siblings & location in sibling constellation; SES of family of origin; work background of parents; past and current dynamics with family members (include if deceased and when if known).

Academic/work history: Include current status if student (major, year, GPA). Academic or work difficulties or relevant changes.

Social history: Intimate relationships (current status and relevant history). Friendships/acquaintanceships, social supports.

Identity/ statuses: What are the client's salient identities regarding her/his demographic or other information?

Medical/health/disability history.

Abuse history: Physical, emotional, sexual, neglect, domestic violence (observer, victim, perpetrator).

Substance use history: Drugs, alcohol.

Other issues: Eating issues, sleep issues, etc.

Significant Prior Events: Brief history of events leading up to the problem situation, significant factors that need to be known to understand the setting or the significance of the problem or the persons involved, etc. Include multicultural influences and variables such as race/ethnicity, gender, sexual orientation, socioeconomic class, age, religion/culture, ability/disability. Also include significant developmental events or issues.

Therapy History

Prior therapy (when, where, what for?)

Date of initial contact for current therapy, frequency and number of sessions, duration of therapy.

Assessment, Diagnosis, Conceptualization

Formal assessment procedures (e.g., instruments used to assess client state, OQ45, Beck, MMPI, Strong, FMTOM): What did you find, and what did it mean? (For example, on the OQ45, indicate the cutoff score and what the client's score means. Do not just report scores without giving an interpretation of their meanings.) In the case of less commonly known instruments, give brief information/ psychometrics.

Clinical assessment procedures: How did you gather relevant information for diagnosis and conceptualization? What key questions did you ask? (e.g., when screening for depression, you may have asked questions about sleep, eating, affect, behaviors. Related to salient identities, how did you assess the relevance to the client's various statuses and identities to the presenting issues?)

DSM diagnosis, all Axes. Briefly explain diagnosis, and give a brief interpretation of salient items in the diagnosis. [Note: some students, because of a humanistic, positive psychology, or feminist/multicultural orientation, are not fond of labels and diagnoses. Indeed, they should be approached critically. However, because the DSM is in common use throughout the mental health field, it is important to be able to use it appropriately and in a way that is congruent with your orientation to therapy. If another rubric is more appropriate, explain in your interpretation.]

Conceptualization: In light of your theoretical orientation to psychotherapy, how do you make sense of the client's issues? How do you understand the origins of your client's distress? How are client problems perpetuated?

Client strengths and coping strategies, especially as they affect the prognosis for successful problem resolution. Include resources, support systems, additional resources.

Goals

How established (client, therapist, collaborative?)

What were they (immediate, intermediate, long term)?

How have goals changed over the course of therapy?

Description of the Therapeutic Relationship and Processes

Describe the therapy relationship; that is, what behaviors and interactions characterized the client-counselor relationship? What did the client say or do that gave you information about how s/he perceived your relationship? How did you use the client-counselor relationship in therapy?

Intervention Strategies and Procedures

Give an overarching description of your interventions (e.g., cognitive behavioral), then describe specific strategies you used with this client. Note that interventions should be targeted to goals of therapy. Give rationale for your use of these interventions, and briefly relate to what is known in the field about the effectiveness of these interventions.

Multicultural Issues & Concerns

These issues should have been integrated into the prior material. If there are additional, specific issues, they may be included here.

Ethical Issues & Concerns

Describe ethical issues or concerns that arose with this client and how you dealt with them. Was the client suicidal, homicidal, or otherwise a danger to self or others? How did you assess for lethality and prevent harm? Did you seek supervision/consultation? Be specific. Were there other issues that emerged (e.g., reporting abuse or HIV status, dual relationships, other), and how did you handle them?

Outcomes of Therapy

Evaluate the outcomes of therapy. How were goals met? How did you know? Did you conduct any post-testing or formal evaluation of the client's progress and outcome? What issues remain(ed) unresolved?

Termination & Referral

If therapy is completed, describe termination and, if applicable, referral. Include your recommendations for further counseling/psychotherapy for this client.

Questions & Issues for Further Consideration

Include any additional comments/ questions to pose to the group (if class).

Keep in mind that there should be a clear relationship among the client's presenting problem and issues that are uncovered over the course of therapy, the goals of therapy, intervention strategies, and outcomes. All should be mediated by your theoretical orientation to psychotherapy.

Updated 7/15/14

Doctoral Qualifying Examination Evaluation Form

Student Number _____

Reader

Question:

Rating based on comprehension, documentation, integration, clarity of thought and expression, in addition to stated evaluation criteria. Please circle one rating (no decimal, fractional, or in-between ratings), and write or attach your comments.

Seriously Flawed	Not Pass	Acceptable Passing	Above Average	Exceptional
1	2	3	4	5

Comments (use reverse if needed):

Evaluation Criteria for the Counseling Psychology Written Doctoral Comprehensive Examination

- 5 Excellent. This response fully addresses the relevant essay tasks (presentation of empirical findings and/or documentation of problem-solving skills) and presents a thorough and accurate exploration of the topic. It shows both clarity and depth of thought and focused and coherent organization. The ideas are expressed with superior precision and literacy.
- 4 Above Average. This essay response addresses all relevant essay tasks and presents a substantial treatment of the topic that demonstrates solid understanding of the issues. It shows clear and sophisticated thinking and good organization. The ideas are expressed with good command of English syntax and grammatical conventions.
- 3 Acceptable/Passing. This essay response addresses all the relevant essay tasks and presents a defensible and sound treatment of the topic. It shows clarity of thought and reasonably good organization. The ideas are generally expressed with good command of English syntax and grammatical conventions.
- 2 Not Pass. This essay response neglects or distorts one or more of the relevant essay tasks or presents a superficial, underdeveloped treatment of the topic. It may show some clarity of thought while being overly simplistic. Problems in organization may be evident. The essay may demonstrate a basic fluency in English, but the writing frequently impedes communication of the writer's ideas.
- 1 Seriously Flawed. This essay response seriously neglects or distorts one or more of the relevant essay tasks or offers only minimal treatment of the topic. Alternatively, it may demonstrate substantial problems with analysis, synthesis, and organization of the topic. It may contain recurrent mechanical errors resulting in language that does not communicate effectively.