Applications due: November 15, 2020

Accreditation Status
The doctoral internship at the Milton Hershey School in Hershey Pennsylvania is accredited by the Commission on Accreditation of the American Psychological Association. The next site visit will occur during the calendar year 2023.

Questions related to the program’s accredited status should be directed to the Commission on Accreditation:
Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002
Phone: (202) 336-5979
Email: apaaccred@apa.org
Web: www.apa.org/ed/accreditation

Purpose
The purpose of the Milton Hershey School (MHS) Doctoral Internship Program is to provide interns with a variety of clinical, consultation and assessment experiences with children and adolescents from families of lower income within a residential school setting.
Application & Selection Procedures

Eligibility

Doctoral students in an APA-Accredited clinical, counseling or school psychology program are eligible to apply. Broad-based training in clinical child and adolescent psychology and psychopathology and a minimum GPA of 3.5 are required. Comprehensive exams must be passed by the application deadline and all coursework toward the doctoral degree must be completed by the end of the academic year prior to the start of internship. The applicant must complete four-plus years of graduate study leading to a doctorate by the time the internship starts. By the beginning of internship, interns are required to have a minimum of 650 practicum hours (minimum for intervention and assessment plus supervision) prior to beginning internship; a minimum of 400 hours in intervention and a minimum of 250 hours in assessment. Applicants need to have had supervised practice experience in both intervention and assessment with children and adolescents, implemented empirically-supported treatments and evidence based practice for children and adolescents and a solid background in test administration and report writing with children and adolescents.

Milton Hershey School is an equal opportunity employer. Milton Hershey School does not discriminate in hiring, promotion or any terms or conditions of employment, on the basis of race, color, national or ethnic origin, ancestry, sex, age, religion or religious creed, veteran status, disability or any other status protected under applicable federal or Pennsylvania law.

Procedures that Govern Intern Selection

The Milton Hershey School is seeking three full-time psychology interns. Our program utilizes the AAPI Online. In addition to a cover letter, applicants are required to submit: 1) a completed AAPI, 2) three letters of recommendation, 3) a current curriculum vitae, and 4) a transcript from all graduate programs attended. No additional materials are required. All application materials for the 2021-2022 year must be submitted through the APPIC portal by midnight EST on November 15, 2020.

The Milton Hershey School psychology internship program is a participating member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and adheres to all policies and procedures of the association. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant. Application is with the formal APPIC application and interns are identified through the “Match” process. Information about the Match process and application forms may be downloaded from the APPIC web site at http://www.appic.org.

Selection

The MHS internship program offers three intern positions per year. Applications are reviewed by members of the Internship Training Committee (ITC). Our selection criteria are based on a goodness-of-fit model. We seek interns whose academic and scientific background, clinical experience, and personal characteristics provide them with the knowledge and skills necessary to function well in a residential school setting. We also seek interns whose professional goals are well suited to the experiences we have to offer, such that our setting would provide them with a productive internship experience. The ideal candidate has demonstrated strengths in therapy, assessment, consultation, academic preparation, and personal characteristics related
to the profession. Because our training program emphasizes a practitioner-scholar model of training, we prefer applicants who have applied experience in working with children and adolescents. Experience working with children or adolescents in poverty, or with physical or psychological disabilities, is an additional plus factor. In addition to these selection factors, we seek diversity, in a broad sense, in our incoming class of interns: from different programs and different types of training or approaches; from different geographic areas or experience with various cultures; and with diverse demographic characteristics, backgrounds and life experiences. This approach is a reflection of our commitment to diversity in psychology, just as we have in admissions for students and hiring of staff.

There are no rotations within the internship; rather, each intern receives balanced opportunities to provide individual and group psychotherapy, consultation, psychoeducational and psychological assessment, serve as a member on a multi-disciplinary team, and obtain professional development.

We notify all applicants as to the status of their applications by December 15th. Applicants with the highest goodness-of-fit ratings are invited for an on-campus interview. While interviews may be conducted by telephone or Skype, interviews on campus are preferred. On-campus interviews include an interview with the Director of Training (DT), an interview with an ITC supervisor, group meetings with current interns, and an opportunity to have questions answered.

**Contacting current interns**
Current interns are one of the best sources of information about our program. We strongly encourage applicants to talk with current interns about their satisfaction with the training experience. This opportunity is available during the interview process and as requested. Please contact the DT at the email address provided above, and ask for the contact information for the interns.

**Schedule**
The internship is full-time for a year beginning on August 1st and ending on July 31st of the following year. Interns are given credit for a minimum of 2,000 hours of training for the full year, which is designed to meet all state licensure requirements. Interns work a 40-hour week. However, the residential nature of MHS necessitates that there will be times that the workday extends beyond these hours. It is estimated that interns will spend approximately 35 percent of their time in clinical activities, 25 percent of their time in consultation activities, 20 percent of their time in assessment activities, and 20 percent of their time in individual and group supervision.

**Human Resources Standards**
Interns are protected by and included under all personnel policies that apply to full-time staff at Milton Hershey School. These policies include right of review and appeal through the Human Resources department. At the beginning of the internship, interns receive an orientation by the Human Resources staff. As a part of the onboarding process, interns are advised to review the Administrative Reference Manual (ARM) which cites all policies and procedures that affect all staff. Additionally, interns have access to this information through the school’s intranet throughout the internship year.
Milton Hershey School is committed to providing a safe school environment for its students with adults who serve as role models. There are a number of background checks required to work in a Pennsylvania school, including the Pennsylvania State Criminal History Clearance (Act 34), the Pennsylvania Arrest/Conviction Report (Act 24), the Pennsylvania Child Abuse History Clearance (Act 151), the FBI Criminal History Clearance (Act 114), Sexual Misconduct Disclosure Release (Act 168) and a Former Employers check (Act 168). A TB test is also required. All employees seeking to work at the School are also subject to additional screening, including background and reference checks, social media screening and post-offer medical screening including a drug test.

**Stipend and Benefits**

The annual stipend for the doctoral psychology internship is $35,568.00. In addition to major medical health care, dental health care, and the Employee Assistance Program (EAP) are provided for the intern and his or her dependents as a part of the internship. MHS offers free meals during the hours when the interns are working on campus through the MHS school cafeteria. Administrative and clerical assistance are provided. Each intern has a private office and computer with Internet access. The interns have access to printing, photocopying, faxing, and scanning equipment as well as APA PsychNet and interlibrary loans. The Department has a large array of psychological and psychoeducation testing kits and equipment for the interns’ use. Online and computer scoring is available for many assessment measures. The interns also have available to them a large selection of therapeutic materials and resources. Payment for student membership in the American Psychological Association (APA) and Time2Track are provided. Interns receive a $200 spending allowance to purchase books and other resources that each intern can keep at the conclusion of the internship. Additionally, interns are provided with up to $300 toward professional conference/workshop expenses and receive up to 5 days of professional development leave. There are additional opportunities for continuing education during the internship year.

**Leave**

The intern receives paid 48 hours of vacation time, 16 hours of personal time, 64 hours of sick time (if needed) and 12 school holidays during the internship year.

**Liability Protection**

When providing professional services at Milton Hershey School, interns in the Psychology Department acting within the scope of their educational programs are protected from personal liability under the General Liability, Umbrella Liability and Excess Liability policies providing coverage to Milton Hershey School.

**The Training Setting**

The Milton Hershey School was founded in 1909 by Milton and Catherine Hershey to nurture and educate children so they may lead fulfilling and productive lives. Today, 2,100 boys and girls attend the school, residing at no charge to their families on a campus with more than 181 student homes, 10 Transitional Living Homes with apartment-style living for 12th-grade students, and more than 4,000 acres.

The location of the internship program within a residential school community allows us to provide a complete range of both clinical and school psychology services to our population of
children and adolescents between the ages of 4 and high school graduation. Consultation with those adults who impact the child’s life is an area of emphasis. Consultations that are internal to the campus include teachers, houseparents, social workers, psychiatrists, pediatricians, and other professional staff. Consultations that are external to the campus include parents, extended family, social agency personnel, and professional care providers from the child’s home community.

The school ascribes to numerous goals and missions. Most prevalent is the commitment to providing services that nurture and educate children from families of lower income by utilizing the talents of skilled professionals who are committed to excellence and integrity. Through integrated partnerships, psychology, academic/scholastic, Home Life, dental, medical, social work, family relations, healthy lifestyles, and religion/character education work collaboratively to meet the needs of all MHS students. Because MHS is a service and education-oriented facility with multi-disciplinary professionals dedicated to providing high-quality services, the internship program fits well with the overall culture and community of the institution. In addition, MHS is committed to ensuring that all trainees are afforded the necessary resources to fully prepare them to enter professional psychology upon completion of training. This is most evident through the ongoing funding and support of the internship program and all of the resources within the Department of Psychological Services.

**Academics**
The campus includes three separate and complete educational facilities for elementary (Pre-K through fourth grade), middle (fifth through eighth grade) and senior divisions (ninth through 12th grade).

Each student receives an excellent education that focuses on reading, writing, mathematics, science, career exploration, social studies and fine arts, with a strong emphasis on character and leadership development. The goal of the academic program is to prepare students for success in college and career. The school has a standards-based curriculum. Students must master basic learning for a particular subject and/or grade level before they are permitted to advance to a new area of learning or grade level. For students experiencing difficulty, remedial help is provided. Students come to MHS with varying aptitudes and competencies. Our employees strive to help them grow in their achievement and understanding. Thanks to the diligence of our students, our dedicated teachers and the support of houseparents, our students make impressive progress.

**Residential Program**
All students live in residence. There are no day students. Milton Hershey School understands the important role its residential program (Home Life) plays in student learning. The Home Life program is designed to teach personal and peer group responsibility. A family-like environment is provided for students from Pre-Kindergarten through 11th grade, who reside with a married houseparent couple (not members of the academic faculty) whose sole responsibility is to care for the eight to 12 students in their student home. Students are expected to perform chores and help with the upkeep of student homes, which instills a sense of responsibility. Twelfth grade students reside in Transitional Living (TL) which is an independent-living style environment with up to 25 students in a TL residence.

Because we want the focus of the program to be on learning, students selected for admission
are provided housing, all activities and equipment, meals, clothing, and medical and dental care at no cost to the student and his/her family.

**Support after Graduation**
Students can earn a Continuing Education Scholarship of up to $80,000, which may be applied to post-secondary education. They also receive support after graduation with their college and career planning, and have access to housing during holidays and college breaks.

Milton Hershey School employs a staff of 1,308 full-time employees with 239 full-time houseparent couples and 218 full-time teachers. In addition to the houseparents, teachers and coaches who work directly with the students, there are also hundreds of support employees who help to mentor and nurture students.

**Student Body**
All students are from families of lower income. Selection is made from those students who show the ability to learn and benefit from the opportunities available at Milton Hershey School. The school stresses appropriate student behavior, motivation and personal characteristics as admission criteria. Students are enrolled with the intent that they will remain a student until graduation.

All children must meet the following admissions requirements for enrollment:
- Come from a family of lower income.
- Be 4-15 years old at the time of enrollment.
- Have the ability to learn.
- Be free of serious behavioral problems that disrupt life in the classroom or home.
- Be able to participate in the school’s program.

**Psychological Services**
The sponsoring department for the doctoral internship program is the Department of Psychological Services, commonly referred to as “Psychological Services.” Psychological Services is comprised of staff in the three school buildings and the Health Center, under the leadership of the Director of Psychological Services and Training and Assistant Director of Psychological Services. Psychological Services employs 12 psychologists, four school psychologists, three psychotherapists, three psychology interns, 17 behavioral support specialists (eight full time and nine part time), one ADHD Clinic Coordinator and four administrative secretaries (two full time and two part time). These individuals serve our students in one of the three school buildings and/or the Health Center. A contracted drug and alcohol specialist, 2 part time contracted psychiatrists and one part time Psychiatric Mental Health Nurse Practitioner also provide services on campus. Inpatient and partial hospitalization services, if needed, are provided off campus.

The Department of Psychological Services encompasses the following program functions: clinical services, behavioral services, psychoeducational and psychological assessments, drug and alcohol services, and psychiatric services. Interns divide their time between clinical services and psychological/psychoeducational assessments, while being exposed to behavioral services and drug and alcohol services. Consultation is an integrated part of the internship experience across all programs.
The primary office location for all interns is the MHS Health Center. The interns provide direct clinical services within the elementary, middle and senior divisions; within the residential student homes; and within the MHS Health Center for students who are admitted on a short-term basis for psychological reasons. The DT’s office is also located at the MHS Health Center, thus affording a sense of identity for the internship class as well as ready access for supervision.

**Description of Service Recipients**

All MHS students are from families of lower income. The average family income for students enrolled during the 2017-2018 school year was $21,356, 63% at or below the Federal Poverty Guideline of $25,100 for a family of four. Many students come from the state of Pennsylvania, but 25 percent come from other states. Fifty percent of students are female and 50 percent of students are male. MHS data indicates that students identify as following racial or ethnic status, White (42%), Black (29%), Hispanic (10%), Asian (1%), and Other (19%). The MHS student population represents greater diversity when compared with the community of Hershey.

While students’ resiliencies often buffer them from adverse outcomes, many students still present with a variety of behavioral, emotional and learning problems associated with underserved families. Approximately 40 percent of students are in active psychological treatment at any one time. Many of these students, and others in the population, may also have learning disabilities, education gaps and medical issues. These factors are complicated by the unique home life program.

Common treatment concerns include neurodevelopmental disorders, bipolar and related disorders, depressive disorders, anxiety disorders, obsessive-compulsive and related disorders, trauma and stressor-related disorders, elimination disorders, as well as disruptive andimpulsive control disorders. Interns have an active role in the diagnosis, treatment, and ongoing management of these students to help them be successful at the school.

**Profession Wide Competencies in Health Services Psychology (HSP) and Model of Training**

The goal for the MHS internship program is to provide opportunities for all of our interns to demonstrate that they have met each of the required profession-wide competencies in Health Service Psychology (HSP). At the conclusion of the internship, interns will demonstrate competence in each of the required profession-wide competences:

- Research
- Ethical and legal standards
- Individual and cultural diversity
- Professional values, attitudes and behaviors
- Communication and interpersonal skills
- Assessment
- Intervention
- Supervision
- Consultation and interpersonal/interdisciplinary skills

Since we provide comprehensive psychological and behavioral health services within a residential school setting, and our goal is to train psychologists to work with children and
adolescents. The internship program adheres to a practitioner-scholar model of training.

Our program utilizes a competence-based education and training model in professional psychology. We use evidence base interventions when training and assessing interns. Our training for practice is sequential, cumulative and graded in complexity. The training method is experiential which is reflected in the intern work schedule, whereby the preponderance of time is devoted to clinical activity, the majority of which occurs during our extended school year.

Internship provides a year of intensive, supervised clinical experience intended as a transition between graduate school and entry into the profession of psychology. HSP competence is primarily achieved through supervised practice over the course of the internship year. Didactic trainings, professional development opportunities, staff meetings, and professional workshops augment this intensive training experience. Interns are closely involved in treatment in all settings and take greater responsibility for treatment decisions as their skills and knowledge increase. Our experience is that the combination of intensive clinical practice, supervision, didactics, directed readings, and self-reflection provides interns with the necessary foundation to evolve into independent practitioners.

By the end of the internship year, interns can expect to have developed and refined their skills in individual and group psychotherapy, consultation, psychological assessment, and professional development. Interns will learn to communicate their findings and recommendations effectively with a multi-disciplinary team. They will sharpen their interpersonal skills in order to be able to work effectively with students, their families, and other professionals. Interns will be able to generalize these skills in other settings. Interns can also expect to further develop their knowledge of, and sensitivity to, the cultural, ethical, and legal issues which impact psychological practice. Interns can expect to develop a more accurate understanding of their own strengths and limitations, and to become more confident in deciding when to act independently and when to seek consultation.

The intern's developing sense of himself or herself as a professional is as important as the development of skills. Professional identity includes a number of components. It involves understanding the unique skills and perspectives one brings as a psychologist to a professional environment, as well as appreciating how these qualities intersect with the contributions of other disciplines. It also involves an understanding and demonstration of professional behavior and conduct, including the ethical and legal guidelines related to professional practice. An additional component involves navigating the transition from the student role to the professional role.

Differences in life experience, belief systems, and career goals are often important factors that add depth to the learning environment. Since we learn a great deal from each other as colleagues, we encourage diversity in opinion and practice. The program also recognizes that the development of professional identity takes a different course for each individual and that our discipline is enriched by the variety of career pathways available to psychologists. Internship provides a time for each person to experiment with the variety of roles and activities available in psychology, as they develop their professional identity.
**Program philosophy and values**

- **Training is based on the practitioner-scholar model of training.**
  We believe the internship year should be devoted primarily to activities of professional psychology and science should guide all clinical practice. The core clinical activities consist of therapy, assessment, consultation, and supervision. Clinical practice and science are integrated throughout individual and group supervision. We utilize empirically validated assessments and treatment practices and expect our interns to implement evidence-based procedures, using a scientifically minded approach. It is also important that our interns are able to employ the practice-based research skills needed for the evaluation of service outcomes and quality improvement. We utilize a competency-based education and training model to ensure interns acquire the knowledge, skills, and attitudes needed for effective professional practice.

- **Training is the focus of the internship year.**
  At the beginning of the internship, interns develop individualized learning goals which align with our overall program goals. Service delivery and supervision are integral aspects of the learning experience for our interns. Our supervising psychologists are committed to providing quality supervision and actively mentor our interns to ensure they meet program and individual goals.

- **Generalist training is an important foundation for professional competence.**
  Our program is designed to prepare psychologists for practice in a wide range of professional settings which serve children and adolescents. Generalist training provides broad experiences in effective psychological practice, utilizing evidence-based psychological interventions, and the use of solid professional judgment. Our training provides interns with an extensive and flexible foundation of clinical, consultation, and assessment skills. Interns gain experience working with children and adolescents from low-income families who have diverse individual and cultural backgrounds.

- **Training is individualized.**
  The internship year allows for the consolidation of professional identity, and development of competencies in Health Service Psychology (HSP). As their competency grows, interns assume greater responsibility for the care they provide under the direction and guidance of their supervisors. We support our interns as they develop their professional identity and maintain responsibility for their learning experience.

- **Training is collaborative.**
  Central in professional practice at Milton Hershey School is a collaborative team approach designed to meet the needs of the school and community. An important aspect of the intern’s professional development includes the experience of working with other psychologists, health care professionals, and professionals from other disciplines to meet the needs of students. Interns are expected to work with and learn from staff from a variety of disciplines and to establish collaborative relationships.
• **Training is sensitive to cultural and individual diversity.**
  Our program is committed to ensuring interns and staff understand the cultural and individual factors of students which are necessary to provide effective and responsive psychological services. Interns need to practice within a sociocultural framework which considers the diversity of values, interactional styles, and cultural expectations in a systematic fashion. The sensitivity to individual and cultural differences is particularly relevant at Milton Hershey School which provides services to a very diverse community. Our training program places a high value on attracting a diverse group of trainees and on maintaining an awareness of cultural issues which impact professional practice.

• **Training prepares interns for a variety of professional roles.**
  Due to advances in psychological science, the focus in our field has transitioned from the primary focus on the treatment of mental health problems to the provision of broader services across the health care spectrum. While intervention and assessment skills remain important competencies, our program provides experience and training in the additional array of HSP competencies, including consultation, leadership, and outcome evaluation. Our setting is ideal to prepare interns for a variety of professional roles as we utilize a multi-disciplinary approach within a residential setting of over 2,100 students.

• **Training prepares interns to assume professional responsibility.**
  Internship provides an opportunity for full-time involvement in a professional role that requires personal dedication. Interns are provided with increased responsibility for decision-making throughout the course of the year. They are expected to meet problems in a professional manner, formulate and implement decisions appropriate to their assessment of situations, and consult with their supervisors. The ability to understand and navigate a large and complex system in a manner that maximizes the benefit for students is an important aspect of training.

  We also strive to build professional identity and responsibility of interns through their involvement in the training program itself. Interns are called upon to take responsibility for many decisions that impact their learning experiences. Interns are responsible for developing their individual learning goals which align with program-wide competencies. Interns are expected to take responsibility for their learning by identifying these goals, actively participating in their own learning by self-reflection and self-evaluation, identifying learning needs and fulfilling them by seeking relevant education and experiences, and by providing feedback and evaluation of their supervision and training experiences. Interns are expected to participate in the improvement of the training program itself by providing ongoing feedback and formal written feedback two times a year. Interns also participate in the intern selection process for the next year’s intern cohort.

**Internship Training Activities**

The primary training method of the MHS internship is experiential. Thus, interns provide direct services to students throughout the entire year under direct supervision. Clinical experiences are augmented by supervisor, didactic training and supervisory experiences. Each intern
receives balanced opportunities throughout the entire year for individual and group psychotherapy, consultation, psychoeducational and psychological assessment, crisis management, individual and group supervision, and didactics. More detailed information about these training activities is provided below.

**Individual and Group Psychotherapy**
Psychotherapy comprises a significant role during the internship year and accounts for approximately 35 percent of the interns’ time each week. Therapy experiences are available for children age 4 through high school graduation. An expansive range of child and adolescent disorders listed within the DSM-5 are treated at MHS, and each intern is expected to work with each age range over the course of the year. Each intern maintains a caseload of approximately 15 students. Referrals for counseling and psychotherapy come from the residential and academic staff, guardians, or from student self-referral. Interns will have the unique opportunity to plan the frequency of sessions, and length of treatment based on students’ needs, not third-party funding.

A variety of group psychotherapy experiences for all age ranges are also available throughout the year, and interns are expected to co-facilitate at least one group during the internship year. Some examples of groups offered include trauma, domestic violence, grief/loss, family of origin, animal assisted therapy, and substance abuse within the family.

**Consultation Activities**
Consultation is another primary area of emphasis for the MHS internship and accounts for approximately 25 percent of the interns’ time each week. Interns are expected to provide direct consultation services to MHS staff, including houseparents, teachers, and guardians, as well as other MHS health professionals. In addition, consultation with outside agencies, such as social and community agencies is also encountered. Consultation activities vary widely, and can include discussing common psychological disorders among adolescents with a house parent, discussing treatment issues of a particular case with a psychiatrist or pediatrician, or providing recommendations to the Health Center nurse concerning the treatment plan for a student who was admitted to the Health Center. The intern is also expected to meet with house parents and teachers to develop individualized treatment plans for learning and behavioral intervention. It is further expected that the intern will periodically reconvene these consultation meetings so those individual treatment plans may be revised and updated. The Psychology Department also has a significant commitment to the professional development of the school’s employees, and it is expected that the intern will actively participate in the development and implementation of the school’s training programs.

**Psychoeducational and Psychological Assessment**
Assessment and diagnosis are crucial components of the MHS internship program and account for approximately 20 percent of the interns’ time. Evaluations are conducted for a wide range of learning and psychological disorders for children ages 4 through high school graduation. A wide variety of psychometrically sound measures are utilized, and interns receive training as needed for administration of all measures. Psychological Services is well equipped with materials and space. Additionally, video equipment and two-way mirrors are also available for test administration and supervision purposes. The intern has a central role as a team member in a multi-disciplinary team in the diagnosis and intervention implementation for MHS students.
Psychological assessment measures are also utilized with psychotherapy cases as clinically indicated. A variety of psychometrically sound self-report and projective measures are available, and interns receive supervision on all assessment and diagnostic activities.

**Crisis Management**
A large component of psychological services provided at MHS consists of various crisis management services. To assist in managing these services, there is a licensed psychologist, certified school psychologist, or licensed psychotherapist on-call 24 hours each day. Staff rotate on-call responsibilities. Interns participate in crisis management services throughout the year and are required to shadow an on-call psychologist for a one-week period.

**Supervision and Didactics**
All interns receive two hours of individual supervision and two hours of group supervision each week. Individual and group supervision involves clinical, scientific, ethics, and professional aspects. Members of the ITC provide weekly individual and group supervision experiences. Members of the ITC include the DT, and other licensed psychologists. All of our supervisors have significant clinical care responsibilities and provide training at MHS. Interns will also have the opportunity to demonstrate good knowledge of supervision techniques and employ these skills in direct or simulated practice during the internship year.

**Individual Supervision:** All interns receive a minimum of two hours of scheduled, face-to-face individual supervision per week. A minimum of one hour is with the primary supervisor and a minimum of one hour is with the delegated supervisor. At the beginning of the internship, individual supervisors complete a supervision contract with the intern, which is intended to establish parameters of supervision, assist in supervisee professional development, and provide clarity concerning the responsibilities of the supervisor. Supervision involves clinical, scientific, ethics, and professional aspects. Interns can expect supervision that challenges them to thoughtfully examine their practice. Clinical aspects of supervision include a review of client progress, discussion of client status, discussion of therapeutic techniques and interventions, review of case notes, consultation notes, treatment plans, clinical case reviews, information for assessment (e.g., case conceptualization, selection of assessment measures, review of protocols), and review of videotaped sessions. Additionally, discussions of therapeutic techniques and interventions are held regularly. Each intern receives cases from all ages, as well as all possible diagnoses and referral questions to ensure appropriate breadth of clinical work. Scientific aspects of supervision include discussion of relevant scientific findings related to clinical practice, discussion of recent scientific findings, and education regarding a specific measure or technique in which the intern may be unfamiliar. Additionally, supervisors make specific reading assignments from the empirical literature when needed or appropriate. Professional aspects of supervision can include an array of issues and topics. Some examples include discussion of the transition from student to intern, discussions regarding working within a large organization, and problem-solving for staff or colleague problems encountered during the year. Ethical responsibilities and professional identity and development are also a focus of individual supervision.

Interns are expected to videotape select therapy and assessment cases (with appropriate documented consent and assent from clients) at minimum four times a year. Taped sessions are
reviewed to assess intern skill level and progress, to develop therapy goals, and to discuss the process of therapy and therapy techniques.

Although the individual supervisor is primarily responsible for the clinical work of the student, the ITC plays an important role in monitoring student progress. The ITC will review and provide regular feedback to individual supervisors regarding the intern’s progress. Members of the ITC are available for consultation and supervision on individual cases or situations and are expected to provide direction and guidance to interns as needed.

Since the ultimate clinical responsibility falls on the primary individual supervisor, interns and staff should direct questions to their individual supervisors. Also, significant concerns about an intern’s progress or problematic behavior will be discussed with individual supervisors.

**Group Supervision:** All interns receive a total of two hours of group supervision each week. The group supervision curriculum has been aligned to ensure that our training experiences match the required professional-wide competencies listed in the Aims, Training, Competencies and Outcomes section of the Standards of Accreditation in Health Service Psychology (SoA). The description of group supervision activities is listed below:

**Assessment: Case Presentation**
Interns learn and use a variety of psychological and psychoeducational measures to diagnose and treat DSM-5 disorders, learning disabilities, educational, social/emotional, and adjustment problems. Interns will select a current assessment case to present to the group for which they need additional feedback and peer supervision. The interns are expected to provide data from the assessment process, as well as describe observations and share teacher, houseparent, and sponsor reports as available. Interns are expected to engage in active discussion and to provide peer supervision. Interns should bring scientific and evidenced based articles and resources to group supervision for discussion.

**Consultation and Interprofessional/Interdisciplinary Skills: Case Presentation**
Interns will present a consultation case. Interns will select a current case for which they need additional feedback and peer supervision. The interns are expected to share their consultation model, strategies and evaluate the effectiveness of those strategies. Interns are expected to engage in active discussion and to provide peer supervision. Interns should bring scientific and evidenced based articles and resources to group supervision for discussion.

**Ethical and Legal Standards: Presentation of Ethical Dilemma(s)**
Interns will present an ethical dilemma or dilemmas for one of their cases for peer feedback and supervision. Interns are expected to review the APA Code and Ethics and describe the ethics decision making model that they utilized when considering on how to resolve the dilemma. Interns are expected to engage in active discussion and to provide peer supervision. Interns should bring scientific and evidenced based articles and resources to group supervision for discussion.

**Intervention: Case Presentation**
Interns will select cases from their assigned caseload. Interns are to present using a case conceptualization model which includes issues related to diversity and individual
differences for the client. They are encouraged to present cases that would benefit from peer feedback and supervision. The interns are expected to provide a video recording of the client, discuss evidence based treatment interventions and outcome of their progress monitoring. Interns are expected to engage in active discussion and to provide peer supervision. Interns should bring scientific and evidenced based articles and resources to group supervision for discussion.

**Intervention: Crisis Assessment and Safety Planning**
Interns will select a case for which a crisis assessment and safety planning was conducted. Interns are to present the assessments that were utilized, the outcome of the assessment and key aspects that lead to their decision making. Interns are to review their safety planning and the outcome of the case. Interns are expected to engage in active discussion and to provide peer supervision. Interns should bring scientific and evidenced based articles and resources to group supervision for discussion.

**Research: Presentation of Dissertation**
Interns will present their dissertation research or clinical research paper that contributes to the scientific and professional knowledge base.

**Supervision: Clinical Supervision in Health Service Psychology**
Interns will discuss theories, models and effective practices in supervision, specifically related to their career goals. The interns will employ these skills in simulated supervision by completing role-plays of supervision techniques in group.

**Bi-Monthly Didactic Trainings:** The bi-monthly didactic trainings are an additional professional development opportunity for our interns. Topics covered in the didactic training includes but is not limited to the following: assessment and treatment of children who exhibit sexual behavior problems, suicidal ideation and self-injurious behavior, trauma informed care, clinical considerations when working with diverse populations, bipolar disorder in children and adolescents, assessment and treatment of students diagnosed with Autism Spectrum Disorder, treatment of complex clinical presentations. Additional training opportunities are provided for our intern dependent on training needs and as requested.

**Facility and Training Resources**

**Staff Meeting:** The full Psychology staff meeting is held monthly for one hour and is attended by all clinical staff and interns. Staff meetings provide interns with an opportunity for professional development. Interns learn about organization prioritizes, policies and procedures, problem-solving efforts and institutional considerations which impact professional work. The interns are also encouraged to attend Division Psychology staff meetings. The focus of these meetings are clinical management of psychological cases within the Division and includes individual clinical case reviews and discussion of programmatic issues.

**Psychiatric Case Reviews:** This meeting is held weekly. During this time, the interns and other psychologists meet with the consulting psychiatrist to review cases and treatment plans. This meeting is designed to be a collaborative meeting between the psychiatrist and psychology interns and staff, but also contains an educational component. Interns are to attend these meetings for cases in which they are involved.
**Information Resources:** Psychological Services maintains access to APA PsychNet which is a valuable resource for interns and staff. Milton Hershey School provides state-of-the-art computer resources, training opportunities, and computer-support personnel to aid student care and professional development.

**Professional meetings:** Interns are encouraged to attend professional meetings and trainings, as a means of participating in the larger professional world, and to pursue individual professional interests. Interns receive up to 5 days of professional development leave.

**Evaluation of Intern Progress**

**Overview**
A range of evaluation methods is used in the training program. Since feedback and instruction are most valuable when immediate and specific, supervisors and interns are expected to exchange feedback routinely as a normal part of their interactions. Additionally, written evaluations using the profession-wide competencies in HSP are completed on a quarterly basis. Evaluations are discussed between the intern and supervisors. Interns are also encouraged to provide feedback concerning the supervision process.

It is always expected that supervisors would have previously identified and discussed with the intern any concerns that are recorded in a written evaluation. When necessary, concerns will be discussed with recommendations for improvement as a part of on-going feedback and evaluation. It is important that the intern has numerous opportunities to correct performance concerns with guidance and feedback. Supervisors meet routinely to discuss interns' progress for the purpose of identifying additional supports and resources that may assist interns in attaining the program competencies.

**Intern Self-Evaluation**
Interns are asked to evaluate themselves as a routine part of the evaluation process in order to ensure they develop a high degree of professional self-reflection and awareness. At the beginning of the internship year, interns meet with their supervisors to assess their previous training experiences and to identify strengths and weaknesses which could impact their internship experience. These areas are addressed in the individualized learning plan that each intern develops. As the year progresses, interns are periodically asked to evaluate their progress, to modify their goals and activities as appropriate, and to plan to attain these goals during the remainder of the year.

**Informal Evaluation**
Formative evaluation occurs on a regular basis. Interns meet with the DT on a monthly basis to discuss their adjustment to the internship, their training experience, and their training plan. As part of the supervisory relationship, supervisors are expected to routinely exchange feedback with interns regarding their performance, the supervision relationship and process, and other aspects of the overall learning experience. These discussions ensure that any difficulties or special training needs are identified at an early point in the internship so that remedial recommendations or assistance can be offered in a timely manner. They also provide an
opportunity for ongoing evaluation and improvement of the program.

**Formal Evaluation**
Interns receive a written evaluation of their performance in the program on a quarterly basis. The evaluation forms are standardized to measure the intern’s attainment of the profession-wide competencies. Additionally, verbal summative feedback is provided regarding the intern's achievement of her/his individualized learning plan.

**Evaluation of the Training Climate**
Our internship program conducts periodic self-assessment of our training climate in regards to diversity. In order to meet this aim, we complete a self-assessment checklist entitled Promoting Cultural Diversity and Cultural Competency two times a year. This checklist is intended to heighten the awareness and sensitivity of providers to the importance of cultural diversity and cultural competence in clinical practice. The checklist is completed by the interns at the internship mid-point and by the ITC near the conclusion of the internship.

**Requirements for Completion**
The Psychology Internship at Milton Hershey School is a generalist program designed to prepare psychologists for practice in a wide range of professional settings which serve children and adolescents. Our internship training is designed to provide opportunities for all of our interns to demonstrate that they have met each of the required profession-wide competencies in HSP. At the conclusion of the internship, interns will demonstrate competence in each of these required profession-wide competences. The goal for the intern-end-of-year evaluation is that at least 80% of competency areas will be rated at level of competence of 4 or higher. No competency areas will be rated as 1 or 2. The competency rating descriptions are listed below:

1. **Needs remedial work.** Requires remedial work.
2. **Entry level.** Continued intensive supervision is needed. Most common rating for practica and entry-level interns. Routine, but intensive, supervision is needed. Requires remedial work if trainee is in internship or postdoctoral training.
3. **Intermediate.** Should remain a focus of supervision. Common rating throughout internship and practica. Routine supervision of each activity.
4. **High Intermediate.** A frequent rating at completion of internship. Competency attained in all but non-routine cases; supervisor provides overall management of trainee’s activities; depth of supervision varies as clinical needs warrant.
5. **Advanced.** Skills comparable to autonomous practice at the licensure level. Rating expected at completion of postdoctoral training. Competency attained at full psychology staff privilege level.

**Due Process Procedures**
Interns are protected by and included under all personnel policies that apply to full-time staff at Milton Hershey School. These policies include right of review and appeal through the Human Resources department.

**Intern grievances**
We believe that most problems are best resolved through face-to-face interaction between intern and supervisor (or other staff), as part of the ongoing working relationship. Interns are
encouraged to first discuss any problems or concerns with their direct supervisor. In turn, supervisors are expected to be receptive to complaints, attempt to develop a solution with the intern, and to seek appropriate consultation. If intern-staff discussions do not produce a satisfactory resolution of the concern, additional steps are available to the intern.

1. Informal mediation
Either party may request that the Director of Psychological Services and Training act as a mediator or help in selecting a mediator who is agreeable to both the intern and the supervisor. Such mediation may facilitate a satisfactory resolution through continued discussion. Alternatively, mediation may result in recommended changes to the learning environment or a recommendation to change the supervisor(s).

2. Formal grievances
In the event that informal avenues of resolution are not successful or in the event of a serious grievance, the intern may initiate a formal grievance process by sending a written request for intervention to the DT.

The DT will notify the ITC of the grievance and review the complaint. In the event that the grievance involves any member of the ITC (including the DT), that member will excuse himself or herself from serving on the ITC due to a conflict of interest. A grievance regarding the DT may be submitted directly to the Executive Director of Student Support Services for review and resolution.

The intern and supervisor will be notified of the date that such a review is occurring, and be given an opportunity to provide any information regarding the grievance. The Director of Clinical Training (DCT) at the intern's graduate program will be informed in writing of the grievance and kept apprised of the review process.

Based upon a review of the grievance and any relevant information, the ITC will determine the course of action that best promotes the intern's training experience. This may include recommended changes within the internship itself and/or a change in supervisory assignment.

The intern will be informed in writing of the decision, and asked to indicate whether he or she accepts or disputes the decision. If the intern accepts the decision, the recommendations will be implemented and the intern's graduate program will be informed of the grievance outcome. If the intern disagrees with the decision, he or she may appeal to the Executive Director of Student Support Services. The Executive Director will render the appeal decision, which will be communicated to all involved parties. The intern's graduate program will be informed of the appeal and appeal decision.

Any findings resulting from a review of an intern grievance that involves unethical, inappropriate, or unlawful staff behavior will be submitted to the DT. The DT would consult with the Human Resources department to determine the appropriate personnel action.

These procedures are not intended to prevent an intern from pursuing a grievance under any other mechanisms available to Milton Hershey School employees, including EEO or under the mechanisms of any relevant professional organization, including APA or APPIC. Interns are also advised that they may pursue any complaint regarding unethical or unlawful conduct on the
part of psychologists licensed in the state of Pennsylvania by contacting the State Board of Psychology.

**Insufficient competence**
The internship program aims to improve professional competence. Rarely, an intern is seen as lacking the competence for eventual independent practice due to a serious deficit in skill or knowledge, or due to problematic behaviors that significantly impacts his or her professional functioning. In such cases, the internship program will help interns identify these areas, update the intern's individualized learning plan, and provide remedial experiences or recommended support in an effort to improve the intern's performance to a satisfactory degree. Very rarely, the problem identified may be of sufficient seriousness that the intern would not get credit for the internship unless the problem is remedied.

If this is a concern, the problem must be brought to the attention of the DT at the earliest opportunity so as to allow the maximum time for remedial efforts. The DT will inform the intern of the concern and call a meeting of the ITC. The intern and involved supervisory staff will be invited to attend and encouraged to provide any information relevant to the concern. The DCT at the intern's graduate program will be notified in writing of the concern and consulted regarding his/her input about the problem and its remediation.

An intern identified as having a serious deficit or problem will be placed on probationary status by the DT, should the ITC determine the deficit or problem is serious enough that it could prevent the intern from fulfilling the expected learning outcomes, and thereby not receive credit for the internship.

The intern, the intern's supervisors, the DT, and the ITC will produce a learning contract specifying the knowledge, skills and/or behavior that are necessary for the intern to develop in order to remedy the identified problem.

The intern and the supervisors will report to the ITC on a regular basis, as specified in the contract (not less than once a month) regarding the intern's progress.

The DCT of the intern's graduate program will be notified of the intern's probationary status, and will receive a copy of the learning contract. It is expected that the Internship Director of Training will have regular contact with the Academic Director of Training in order to solicit input and provide updated reports of the intern's progress. These contacts should be summarized in at least two written progress reports each quarter which will be placed in the intern's file. The intern may request that a representative of the graduate program be invited to attend and participate as a non-voting member in any meetings of the ITC that involve discussion of the intern and his/her status in the internship.

The intern may be removed from probationary status by a majority vote of the ITC when the intern's progress in resolving the problem(s) specified in the contract is sufficient. Removal from probationary status indicates that the intern's performance is at the appropriate level to receive credit for the internship.

If the intern is not making progress, or if it becomes apparent that it will not be possible for the intern to receive credit for the internship, the ITC will inform the intern at the earliest opportunity.
The decision for credit or no credit for an intern on probation is made by a majority vote of the ITC. The ITC vote will be based on all available data, with particular attention to the intern's fulfillment of the learning contract.

An intern may appeal the ITC's decision to the Director of Psychological Services and Training and the Executive Director of Student Support Services. They will render the appeal decision, which will be communicated to all involved parties, to the ITC, and to the DCT of the graduate program.

**Illegal or unethical behavior**

Illegal or unethical conduct by an intern should be brought to the attention of the DT in writing. Any person who observes such behavior, whether staff or intern, has the responsibility to report the incident.

The DT, the supervisor, and the intern may address infractions of a minor nature. A written record of the complaint and action becomes a permanent part of the intern's file.

Any significant infraction or repeated minor infractions must be documented in writing and submitted to the DT, who will notify the intern of the complaint. Per the procedures described above, the DT will call a meeting of the ITC to review the concerns, after providing notification to all involved parties, including the intern and DCT of the graduate program. All involved parties will be encouraged to submit any relevant information concerning the issue and invited to attend the ITC meeting(s).

Following a careful review of the case, the ITC may recommend either probation or dismissal of the intern. This recommendation would be shared by the DT with the Human Resources department for review and determination concerning termination of employment. Interns are protected by and included under all personnel policies which includes right of review and appeal through the Human Resources department.

**Training Faculty**

The psychology staff at MHS is committed to providing excellent care and training. The following psychologists provide education and training within our program. Professional staff who are not licensed as psychologists may not serve as primary supervisors, but may consult with interns on individual cases or projects. Additional consultation and case supervision is easily obtained from professionals of other disciplines with expertise to offer.

**Danielle Budash, Psy.D., RPT-S** is a licensed psychologist in the Elementary Division. She received her doctorate degree from the Combined-Integrated Doctoral program in Clinical and School Psychology at James Madison University. She completed her doctoral internship and residency training at Milton Hershey School. Dr. Budash is a licensed psychologist in Pennsylvania and Florida and is a Registered Play Therapist-Supervisor (RPT-S). She is also an approved play therapy provider through the Association for Play Therapy (APT). Dr. Budash has presented on numerous topics related to past research interests as well as play therapy. She has presented at the Association for Play Therapy Annual Conference on several occasions and is...
Dr. Budash is a graduate of APT’s Leadership Academy. After licensure, Dr. Budash worked at a private practice in Tampa, Florida, before she returned to Milton Hershey School as a staff psychologist. Dr. Budash primarily conducts individual therapy, group therapy, and consultation with children in Pre-K through fourth grade, coping with internalizing and externalizing disorders and trauma histories.

**Kimberly Carlson, Psy.D.** is a licensed psychologist in the Senior Division. She provides direct clinical assessments and treatment of students, including on-call emergency services for the student population. Dr. Carlson received her B.S. from The Pennsylvania State University in 1989, M.S. from Millersville University in 1995, and Psy.D. from the Philadelphia College of Osteopathic Medicine in 2009. She also holds a certificate in Cognitive Behavioral Therapy. Dr. Carlson has been employed at MHS since 1999, when hired as the Director of Behavioral Services. Clinical interests include mood disorders, anxiety, and trauma.

**Allison Carrier, Psy.D.** is a licensed psychologist in the Elementary Division. She received her doctorate in Clinical Psychology from Pacific University in 2013 and completed her doctoral internship and residency at Milton Hershey School. She additionally completed her Master of Science degree in Applied Developmental Psychology from the University of Pittsburgh in 2006. She has worked with children and adolescents in residential, partial hospital, intensive outpatient, school, and hospital specialty clinic settings. Her clinical interests include the treatment of trauma, anxiety, and mood disorders, and working with at-risk populations. Her orientation is predominantly cognitive-behavioral. Her research has focused largely on the dissemination of evidenced-based practices, including the treatment of compulsive hoarding, the application of exposure therapy and mindfulness, and clinical practice recommendations for working with transgender youth.

**Benjamin Herr, Psy.D.** is a licensed psychologist in the Middle Division. He received a Psy.D. from Wright State University’s School of Professional Psychology in 1996. Dr. Herr completed 12 years of employment at Milton Hershey School. Before coming to MHS, he worked in a number of other settings, including a community mental health center, a psychiatric hospital, a residential drug treatment center, an outpatient group practice, and a regional medical/health system. He has provided a number of services at these locations, including individual psychotherapy, group psychotherapy, family therapy, and couples treatment. He has also been involved in consultation in psychiatric and medical hospital settings, and has performed cognitive, psychoeducational, and personality assessments. His current areas of interest include the impact of complex trauma on children, consultation, supervision, personality/objective assessment, and understanding how the treatment relationship effects change.

**Rose Huntzinger, Ph.D.** is a licensed psychologist in the Senior Division. Dr. Huntzinger received a B.A. in Psychology at Shippensburg State College (now University) in 1982, an M.A. at Wake Forest University in Experimental Psychology in 1984, and a Ph.D. in Clinical Psychology from Virginia Polytechnic Institute and State University in 1989. She completed her residency training as a pediatric neuropsychologist at the Neuropsychiatric Institute and Clinic at UCLA in 1990. For nine years, she worked as a full time Director of the Pediatric Neuropsychology Clinic at Bradley Hospital in East Providence, Ri. She had a simultaneous appointment as an Assistant Clinical Professor with the Brown University Psychology training program. She also worked as a child neuropsychologist at Philhaven, a psychiatric facility in central Pennsylvania. She continues private consultations with Pennsylvania school districts upon request. She has
provided individual and group supervision to doctoral interns and residents. Her focus as a supervisor includes psychological and neuropsychological assessment, case formulation, and clinical issues as they relate to the treatment of children, adolescents, and their families. She has extensive experience working directly with public and private school administrators and teachers. Additional professional interests include suicide and lethality assessments, treatment of mood disorders, healthy sleep, and student transition from high school to postsecondary placements.

**Tammy Lazicki, Ph.D.** is a licensed psychologist in the Middle Division. She earned her doctorate in Clinical Child Psychology from the University of Kansas Clinical Child Psychology Program. Dr. Lazicki is a member of the Pennsylvania Psychological Association. She has extensive experience working with at-risk children and families. Areas of interest include: anxiety and depressive disorders, impulse control issues, the effects of trauma across the lifespan, the assessment of Autism spectrum disorders and the integration of faith and science within psychological treatment. Dr. Lazicki worked in various positions in mental health and child welfare agencies prior to entering graduate school. She received certification from the Philadelphia Child Guidance Clinic during her employment as a family-based therapist. Prior to her employment at Milton Hershey School, she worked at Philhaven for 11 years, providing assessment and consultative services to children and adolescents in community-based services, testing for children and adolescents at Philhaven’s Center for Autism and Developmental Disabilities, outpatient therapy for children, adolescents, adults and families, and supervision for the doctoral internship program.

**Crissy Miyake, Psy.D.** is a licensed psychologist in the Middle Division. She received her doctorate in Clinical Psychology from Argosy University in Honolulu, HI and is a member of the American Psychological Association. Dr. Miyake has focused on working with at-risk and diverse student populations. Her areas of specialization and interest are trauma, family systems, and diversity.

**Michael Valle, Ph. D., NCSP** is the Assistant Director of Psychological Services. He is a licensed psychologist and a Nationally Certified School Psychologist. Dr. Valle received his BA from the University of Notre Dame in 2001 and his Ph.D. in School Psychology from the University of South Carolina in 2006. He completed his doctoral internship and residency at Milton Hershey School. As part of the ITC, Dr. Valle has provided both group and individual supervision and currently serves as an individual assessment supervisor. He has an interest in positive psychology, resiliency, and assisting families and individuals who have experienced trauma.

**Erica Weiler-Timmins Ph.D., ABPP** is the Director of Psychological Services and Training, with 21 years of experience serving youth who come from low income families. She earned her bachelor's degree in psychology from Loyola College in Maryland and her master's and doctoral degrees in School Psychology from Temple University. She completed her doctoral internship at Milton Hershey School. Dr. Weiler-Timmins is a Pennsylvania Licensed Psychologist, Pennsylvania Certified School Psychologist and Board Certified in School Psychology. She is a member of the American Psychological Association and American Board of Professional Psychology. Her areas of interest are childhood maltreatment, diversity, ethics, training, and supervision. Her professional presentations and publications center on providing effective services to diverse and at-risk youth. Dr. Weiler-Timmins serves as the Vice President of the Board of Directors of Pennsylvania Family Support Alliance.
**Interns**

Recent interns have attended the following doctoral programs:

- Alliant International University, San Diego
- Antioch University, New England
- Bowling Green State University
- Catholic University of America
- Duquesne University
- Florida Institute of Technology
- George Washington University
- Illinois State University
- James Madison University
- La Salle University
- Michigan State University
- Northeastern University
- Oklahoma State University
- Pacific University
- Pennsylvania State University
- Regent University
- Rutgers University
- Saint John’s University
- Temple University
- Texas A&M University
- Texas Woman’s University
- The Chicago School of Professional Psychology
- University of Indianapolis
- University at Buffalo
- University of Maine
- University of Maryland, Baltimore
- University of North Dakota
- University of South Alabama

**Local Information**

Hershey, Pennsylvania is a 20-minute drive east of Harrisburg, the state capital. Philadelphia, Baltimore, and Washington, DC are all within two and a ½ hours by car.

The community of Hershey is best known as for its chocolate and amusement park. In addition to having the world’s largest chocolate factory, Hershey is also the location of The Pennsylvania State University College of Medicine. Cultural activities include museums, theater, ballet, music, festivals, and professional sports. Recreational opportunities include hiking, backpacking, skiing, bicycling, kayaking, fishing, and more.
**Internship Program Admissions**

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on intern selection and practicum and academic preparation requirements:

- Doctoral student in an APA-Accredited clinical, counseling or school psychology program.
- Broad-based training in clinical child/adolescent psychology and psychopathology.
- Comprehensive exams passed by application deadline.
- All coursework toward the doctoral degree must be completed by the end of the academic year prior to the start of internship.
- Certification of internship readiness by the applicant's academic program.
- Completion of four-plus years of graduate study leading to a doctorate by the time the internship starts.
- Minimum GPA of 3.5
- 650 total practicum hours (minimum for intervention and assessment plus supervision) prior to beginning internship.
- 400 hours of intervention
- 250 hours of assessment
- Supervised practice experience in both intervention and assessment with children and adolescents.
- Implementation of empirically-supported treatments and evidence based practice for children and adolescents.
- Solid background in test administration and report writing with children/adolescents.

<table>
<thead>
<tr>
<th>Does the program require that applicants have received a minimum number of hours of the following at time of application?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Direct Contact Intervention Hours:</td>
</tr>
<tr>
<td>Total Direct Assessment Hours:</td>
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</table>

Describe any other required minimum criteria used to screen applicants:

All criteria is listed above.

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**Financial and Other Benefit Support for Upcoming Training Year**

<table>
<thead>
<tr>
<th>Annual Stipend/Salary for Full-time Interns: $35,568.00</th>
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</thead>
<tbody>
<tr>
<td>Annual Stipend/Salary for Half-time Interns: N/A</td>
</tr>
<tr>
<td>Program provides access to medical insurance for intern?</td>
</tr>
<tr>
<td>Trainee contribution to cost required?</td>
</tr>
<tr>
<td>Question</td>
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<tr>
<td>------------------------------------------------------------------------</td>
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<tr>
<td>Coverage of family member(s) available?</td>
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<tr>
<td>Coverage of legally married partner available?</td>
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<tr>
<td>Coverage of domestic partner available?</td>
</tr>
<tr>
<td>Hours of Annual Paid Personal Time Off</td>
</tr>
<tr>
<td>Hours of Annual Paid Sick Leave</td>
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<tr>
<td>In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns in excess of personal time off and sick leave?</td>
</tr>
<tr>
<td>Other Benefits - Major medical health care, dental health care, and the Employee Assistance Program (EAP) are provided for the intern and his or her dependents as a part of the internship. MHS offers free meals during the hours when the interns are working on campus through the MHS school cafeteria. Administrative and clerical assistance are provided. Each intern has a private office and computer with Internet access. The interns have access to printing, photocopying, faxing, and scanning equipment as well as APA PsychNet and interlibrary loans. The Department has a large array of psychological and psychoeducation testing kits and equipment for the interns’ use. Online and computer scoring is available for many assessment measures. The interns also have available to them a large selection of therapeutic materials and resources. Payment for student membership in the American Psychological Association (APA) and Time2Track are provided. Interns receive a $200 spending allowance to purchase books and other resources that each intern can keep at the conclusion of the internship. Additionally, interns are provided with up to $300 toward professional conference/workshop expenses and receive up to 5 days of professional development leave. There are additional opportunities for continuing education during the internship year.</td>
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</tbody>
</table>
### Initial Post-Internship Positions
(Provide an Aggregated Tally for the Preceding 3 Cohorts)

#### 2016-2018

<table>
<thead>
<tr>
<th>Total # of interns who were in the 3 cohorts: <strong>Total of 9</strong> (2016-2017: 3, 2017-2018: 3, 2018-2019: 3)</th>
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</thead>
<tbody>
<tr>
<td>Total # of interns who did not seek employment because they returned to their doctoral program: <strong>1</strong></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Setting</th>
<th>PD</th>
<th>EP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community mental health</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Federally qualified health center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent primary care facility/clinic</td>
<td></td>
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<tr>
<td>University counseling center</td>
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<td></td>
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<tr>
<td>Veterans Affairs medical center</td>
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<tr>
<td>Military health center</td>
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<tr>
<td>Academic health center</td>
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<td></td>
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<tr>
<td>Other medical center or hospital</td>
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<tr>
<td>Psychiatric hospital</td>
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<td></td>
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<tr>
<td>Academic university/department</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Community college or other teaching setting</td>
<td></td>
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<tr>
<td>Independent research institution</td>
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<tr>
<td>Correctional facility</td>
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<tr>
<td>School district/system</td>
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<td>2</td>
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<tr>
<td>Independent practice setting</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Not currently employed</td>
<td></td>
<td></td>
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<tr>
<td>Changed to another field</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other: <strong>1</strong> (Needed to repeat internship)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unknown</td>
<td></td>
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</table>

Note: “PD” = Post-doctoral residency position; “EP” = Employed Position. Each individual in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.