

APA Equivalency of Pre-doctoral Internship

Please Note:

*If your pre-doctoral internship was accredited by the American Psychological Association (APA), you **DO NOT** need to complete this form.

*Please answer questions requiring a narrative in two sentences or less. If you have written materials about your internship, please include these materials with your application. You still need to complete this form even if you send supplementary material.

1. Name and describe the setting (e.g., hospital, outpatient clinic, school, consortium, etc.) of your internship site: Domain A/Domain C(4)

* **Was this a paid internship?** Yes No Domain C(3)(a)/Domain (A)(3)

2. What was your internship program's goal?: Domain A/B

3. Duration of internship (number of months): _____ **Start Date** _____ **End Date** Dom A(4)
Full-time (40 hours per week) Yes No
***If "No," indicate number of hours worked per week** _____ **AND**
Total number of hours completed during internship _____

4. Describe the population(s) (e.g., children, adults, Indian, homeless, chronically mentally ill, etc.) to which you provided direct psychological services: Domain A(2)

5. Describe the types of psychological services (e.g., individual therapy, group psychotherapy, psychological evaluations, etc.) you provided to patients/clients:

Domain B(4)(a)

***If you performed psychological evaluations, please indicate the number of evaluations you completed during your internship** _____

***Please specify the types of evaluations you completed (e.g., neuropsychological, full batteries including intellectual and projective and objective personality measures, etc.)**

6. **Approximate number of patients/clients seen per week:** _____ Domain A(2)
7. **Approximate number of hours spent providing face-to-face psychological services per week:** _____ Domain C(2)(c)
8. **Were you provided formal written policies and procedures (e.g., due process and grievance procedures, intern performance evaluation, goals and objectives, etc.) when beginning your internship:** Yes No Domain E(4)/Domain B(6)
9. **Total number of hours spent in supervision per week:** _____ Domain B(3)(c)
_____ **Hours spent in Individual Supervision per week**
_____ **Hours spent in Group Supervision per week**
10. **Number of full-time equivalent doctoral-level psychologists that were licensed, registered, or certified and served as primary supervisors at internship site:** _____
***Did supervisors carry clinical responsibility for the cases being supervised (e.g., countersigning documentation or having their name on the treatment plan or summary)?** Yes No Domain C(1)
11. **Name of Program/Training Director** _____
***Was this person licensed, registered, or certified to practice psychology in the jurisdiction in which the internship was located?** Yes No Domain B(3)(f)
***Number of hours per week the Program/Training Director was on site:** _____
12. **Number of Interns at your site (including yourself)** _____ Domain C(2)
***How many interns were full-time?** _____ **Half-time?** _____
***If not called "Interns," what title was used?** _____ Domain C(2)(g)
13. **Total number of hours spent in didactic activities** _____
***Specify the number of hours spent per week in each of the following:** Domain B(3)(b)
Domain C(3)(c)
_____ **Case Conferences**
_____ **Seminars**
_____ **In-service Training**
_____ **Grand Rounds**
_____ **Other (please specify)** _____

14. **Describe how your internship addressed issues related to Cultural and Individual Differences as they relate to the practice of psychology:** Domain D

15. How often were interns evaluated formally (written evaluation)? _____
Domain E(4)

16. Did the Program/Training Director (or primary supervisors) request feed back from you regarding your internship experience during the internship year or upon completion? Yes No Domain F

17. Were you issued a certificate of completion when you successfully completed your training program? Yes No Domain E(5)

18. Is the program described accurately and completely in documents are are available to current interns, prospective interns, and other members of the public?
 Yes No **If yes, where is the information located? (e.g., website, written materials, etc.)** _____ Domain G

19. Is your internship program in good standing with the accrediting body from which its accredited status granted? _____ Domain H