Graduate Program Review
2014-2015

Department of
Community, Family, and Addiction Services
Sterling Shumway, Chair

College of
Human Sciences
Linda Hoover, Dean

November 2014
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VII. **Appendices** – should include, but not be limited to, the following:

Table of Contents
A. Strategic plan
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B. Curriculum Map
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I. Program Overview

The Department

The Community, Family and Addiction Services (CFAS) Department was created in the Fall of 2012 as a result of the significant growth in the CFAS undergraduate major, the increasing interest in Addictive Disorders and Recovery Studies (ADRS), and the desire to expand and further grow the master’s and doctoral degrees in Marriage and Family Therapy (MFT). The CFAS major, ADRS minor and graduate certificate, and the MFT graduate programs were previously part of the Applied and Professional Studies (APS) Department that was established in the Fall of 2004 and disbanded at the time the CFAS Department was created. Prior to the establishment of the CFAS and APS Departments, the MFT program had a long history of academic service and success within the Human Development and Family Studies Department (HDFS). The MFT Ph.D. program was established here at Texas Tech in 1981.

In 2007 the B.S. degree in CFAS was approved within the Department structure of APS and has been jointly staffed by the ADRS and MFT program faculty, under the direction of Dr. Nichole Morelock. This is a growing undergraduate degree that now has over 142 majors and is beginning to add a significant number of Student Credit Hours (SCH). The CFAS Department also oversees the Family Therapy Clinic (training clinic for the MFT program). Beginning in the Fall of 2014 the Center for the Study of Addiction and Recovery (CSAR) became part of the CFAS department, having previously been under the auspices of the College of Human Sciences (COHS).

The CFAS mission of preparing future professionals to enrich the lives of others is guided by the following goals and core principles:

- Promote sustained recovery and wellness for all individuals and families through a continuum of care
- Educate scientist-practitioners to facilitate therapeutic change in couples and families
- Produce meaningful scholarship that is accessible to a wide audience
- Develop authentic connections with students, colleagues, and community partners
- Encourage self-reflection, accountability, and growth
- Embrace diverse individuals and their communities
- Enhance teaching, research, and outreach through ongoing clinical practice
- Mentor emerging scholars and foster ongoing development of the science-practitioner model

Academic Programs within CFAS

Community, Family and Addiction Services (CFAS) and Addictive Disorders and Recovery Studies (ADRS)

The Addictive Disorder and Recovery Studies (ADRS) program was initially created to offer addiction and recovery education to students and to fulfill the educational requirements to become a Texas State Licensed Chemical Dependency Counselor (LCDC). Since its initial inception in 1985, course offerings related to addiction and recovery have increased in number and scope. Currently, ADRS undergraduate courses are offered as part of the CFAS major and some of these courses are taught by MFT doctoral students. This “ADRS concentration” within the CFAS major provides students with an understanding of the physiological, psychological, familial, and societal factors contributing to addictive disorders and recovery. Non-CFAS majors may obtain an ADRS minor by completing 18 hours of coursework. Beginning in the Fall of 2008, ADRS graduate courses were added to the Marriage and Family Therapy (MFT) Master’s program degree plan where students are required to take a minimum of four ADRS courses. The CFAS Department also offers a graduate certificate in Addictions and the Family.
The CFAS undergraduate Program was created to address the workforce needs in the growing field of human services related to addiction and recovery. The program is designed for students who want to work in human service organizations at either the direct service or administrative level. Students complete coursework in areas of addiction and recovery, administration, family policy, grant writing, and family therapy. The curriculum is meant to prepare them for a successful transition into the workforce or to graduate school. Many CFAS students choose to pursue a M.S. in a mental health field such as counseling or MFT. The growth of the CFAS major and further interest in the area of addiction and recovery has compelled us to develop a proposal for a Ph.D. program in ADRS, to be submitted fall of 2014.

The CSAR, though previously under the direction and auspices of the COHS, has had a close relationship with the ADRS Program and the CFAS Department given we share faculty, graduate students and some financial resources. The CSAR was developed as part of a comprehensive Collegiate Recovery Community (CRC). This community provides a model of support and relapse prevention for college students recovering from addictive behaviors—primarily alcohol/drug addiction and eating disorders. The CRC model is specifically targeted for implementation in the college/university setting and has been operating at TTU for 26 years.

Marriage and Family Therapy (MFT)

The Marriage and Family Therapy graduate programs at TTU provide systematic clinical training to prepare students for licensure and scholarly achievement. MFT is known for its supportive and rigorous programs, and when all CFAS faculty are considered, it provides one of the largest groups of MFT faculty in the country (e.g., the CFAS department currently has 12 faculty who are MFT licensed or trained and can teach courses in this discipline). Our graduates have found success in a wide variety of academic, clinical, agency, and other settings. There are two graduate programs in MFT; a doctoral and a master’s program.

*MFT Doctoral Program*

The MFT doctoral program has a distinguished history of preparing students for contributions in academics, administration and clinical work. There is a strong emphasis on training in research methodology as well as theoretical and clinical sophistication. Many of TTU’s doctoral graduates can be found in academic institutions around the country, and this program is recognized as one of the top in the country. TTU students and faculty regularly present research at professional conferences, serve in leadership positions, and are honored with awards for dissertations and other refereed presentations. The Doctoral Program has been continuously accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) since 1981. The current accreditation period is effective until May 1, 2017. Though the MFT Program has been housed within three Departments, it has always been in the College of Human Sciences.

The mission of the Texas Tech Marriage and Family Therapy doctoral program is to provide clinical and academic training to students who will function as marriage and family therapists at the highest level of clinical and scholarly competence. The doctoral program is guided by the scientist-practitioner model, with an emphasis on preparing students who will be capable of making unique contributions to the field of marriage and family therapy through: a) quality research, b) clinical supervision and therapy, and c) academic instruction. This training is done in a context that is supportive of diversity, student-faculty mentoring and support, and authenticity.
Upon graduating from the MFT doctoral program, students are:

- Qualified to conduct high-quality independent research that is accepted for national presentation and publication to peer-reviewed audiences.
- Able to provide clinical services and supervision with a variety of relational systems and presenting problems, and practice as a licensed Marriage and Family Therapist.
- Able to prepare curriculum and instruct students at the university level in principles and content related to Marriage and Family Therapy.

MFT Master’s Program

The MFT master’s program is clinically-focused and includes a curriculum focused on the treatment of addictions within a relational context. The MFT faculty work in partnership with the ADRS faculty to provide training that prepares students for licensure as an MFT, LCDC, or for future doctoral work. The Master’s program is not currently accredited; however, it does include the specific academic and clinical requirements to meet both national accreditation standards as well as licensure requirements in the State of Texas and most other states. It is anticipated that the Master’s program will submit for accreditation through COAMFTE when the doctoral program submits for reaccreditation in 2017.

The mission of the Texas Tech Marriage and Family Master’s program is to provide outstanding clinical and academic training. The students will receive clinical training in traditional and contemporary family therapy theories and models, as well as in addiction and recovery within a systemic context. Students will not only receive excellent clinical training, but will also become competent consumers of research and clinical scholarship. This training is done in a context that is supportive of diversity, student-faculty mentoring and support, and authenticity.

Upon graduating from the MFT Master’s program, students are:

- Prepared for clinical licensure at the associate level for both the LMFT and LCDC, and be able to take and pass the national LMFT exam.
- Able to provide clinical services with a variety of relational systems and presenting problems, including addictive disorders.
- Able to identify what quality clinical research consists of, and be able to critique and draw upon research in therapy practice.

The Family Therapy Clinic

The Family Therapy Clinic (FTC) is the on-site facility where clinical services are provided by Doctoral and Master’s students under the supervision of MFT faculty. The FTC serves the community by providing affordable, high quality therapeutic services to individuals, couples, and families of Lubbock and surrounding counties. The FTC is one of a few clinical facilities in the region that provides family therapy on a sliding scale fee basis, which helps the program reach out to a diverse clientele. The mission of the FTC goes beyond providing high quality therapy services, and includes providing educational and support groups, as well as research. Within the clinic, research projects by students and faculty are conducted through the use of assessment instruments, interviews, and video data. This research has been used for dissertations and other student publications, as well as faculty projects.
The 18 Characteristics of Texas Public Doctoral programs can be found in Appendix C. Discussion of this data as it relates to the MFT Ph.D. program can be found throughout the Graduate Program Review document.
II. Graduate Curricula and Degree Programs

A. Scope of programs within the department

The Department of Community, Family, and Addiction Services (CFAS) supervises graduate degree programs in Marriage and Family Therapy and a graduate certificate in Addictions and the Family. Students develop their courses of study in consultation with a graduate advisory committee. As described in the student handbook, during the first year of doctoral study, the graduate faculty in the major field will make a formal evaluation of the student’s academic background and a program of study is developed and leveling courses recommended. A proposal for an Addictive Disorders and Recovery Studies Ph.D. is currently in process and will be followed by a proposal for an ADRS undergraduate major.

Community, Family and Addiction Services (CFAS)

Bachelor of Science in Community, Family and Addiction Services—the B.S. in Community, Family, and Addiction Services (CFAS) prepares graduates to work in administrative and direct service roles in agencies serving communities and families of diverse needs and populations. This plan of study places emphasis on organizational effectiveness, program development, and service delivery. An ADRS minor is also offered for non-CFAS students.

Marriage and Family Therapy (MFT) Program

Master of Science in Marriage and Family Therapy—the M.S. degree is intended to provide the academic requirements leading to associate licensure as a marriage and family therapist in the state of Texas. Clinical licensure requires additional post-master’s degree clinical experience. Both a thesis and non-thesis plan of study are offered, along with specialization in addiction and recovery. The time frame for completing the master’s degree in MFT is two years, although this may be shortened slightly for students who already have another master’s degree and approved transfer coursework. Due to the clinically intensive nature of the master’s program, students are enrolled full-time and complete a standard plan of study. Students admitted to the Master’s program are assigned a temporary advisor from among the MFT or ADRS faculty.

Doctor of Philosophy in Marriage and Family Therapy—the Ph.D. degree requires a minimum of 78 credit hours beyond the master’s degree, including a clinical internship and at least 12 credit hours of dissertation research. The Ph.D. program is accredited by COAMFTE. A graduate certificate in “Addiction and the Family” can be obtained at both the MFT Master’s and Doctoral levels.

Doctoral students usually take between 3-5 years to complete their degree (full-time), although some take longer. The delays in completion are often related to the students becoming busy with internship or other clinical employment opportunities, as many of the students are sought for local clinical positions. Traditionally, all doctoral students receive financial support through teaching or research assistantships for their first two years. As mentioned, after that many go on to funded internship or other paid clinical/research positions.

When admitted to the Doctoral Program, students receive a temporary MFT faculty advisor. These advisors can be switched per the student’s request. All of the faculty advise multiple students, and meet with them regularly through small groups and individual mentoring.

Graduate courses are offered either every year or every other year to ensure that students are able to take them within their typical plan of study. The doctoral students take some electives through other departments (e.g., HDFS, Psychology, Women’s Studies, etc.), while the master’s students have less


flexibility in this regard. MFT faculty members also teach specialized seminar courses on topics related to their particular interests, and these can be taken as electives as well. The courses within the plan of study are reviewed by faculty yearly to ensure that all relevant areas are covered and to include measurable outcomes that are regulated by COAMFTE accreditation standards.

Students are recruited through the AAMFT website, as well as our program website and promotional materials. Also, TTU has a large presence at the AAMFT conference, with a table of materials and personnel, as well as a faculty and student presence through research posters and presentations. Given the large number of alumni employed at other universities, many potential students are referred to our program through this network. Over the course of the year the program director answers many inquiries regarding the programs, and faculty members have made recruiting trips to HBCUs and to universities with large undergraduate programs in family sciences. Students are attracted to the programs because of reputation, low cost of study, and opportunities to receive financial support.

Although the Doctoral program is close to capacity according to COAMFTE accreditation standards, some growth in the program is feasible. Enrollment in the Master’s program (which has grown significantly since our last GPR) is limited to ensure quality clinical instruction. However, with support from the ADRS program faculty, mindful growth can occur.

B. Number and types of degrees awarded

![Degrees Awarded - Academic Year](image)

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In our previous GPR, we established a plan for increasing enrollment in the M.S. program. The data above demonstrates the execution of this growth plan and the resulting increased enrollment and graduation rates. Compared to the University of Minnesota, our graduation rates for Ph.D. students is slightly lower, but rates for Master’s degrees is significantly higher. It is important to note that this growth has been achieved with roughly half the number of faculty as reported for the University of Minnesota.

C. Undergraduate and graduate semester credit hours

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*Source: IRIM via COGNOS (10/22/14)
The graph and table above show a clear pattern of growth in both the graduate and undergraduate SCH generated by the department. At the undergraduate level, this is due to increased enrollment as well as growth in two undergraduate courses that are included in the TTU core curriculum. The graduate SCH increase is attributed to increased enrollment in the MFT Master’s program.

Operating costs for 12/13 show strong increase, but this number is misrepresenting actual operating costs. The increase was actually a graduate student fellowship that was transferred into the operating funds account. The following year this error was corrected, and the monies were allocated to the appropriate account. The transfer was approximately $21,000, which accounts for the differential between 11/12 and 13/14.
D. Number of majors in the department for the fall semesters

Compared to our peer institutions, our enrollment at the Master’s and Doctoral level are competitive. It is important to note that our faculty count is significantly lower than both the University of Minnesota and the University of Connecticut.
Consistent with enrollment data, this table also reflects growth in the Master’s program that significantly impacts our SCH and WSCH.

E. Course enrollments over the past six years (enrollment trends by course)
- Figures are totals – classes may be offered more than once a year

**Course Enrollments by Academic Year**
Source: Institutional Research and Information Management

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</table>

F. Courses cross listed (syllabus included behind)

There are no cross listed courses in the department.
III. Faculty

The Department of Community, Family, and Addiction Services was officially recognized by the University in the fall of 2012, following a reorganization of a previous department housing multiple programs. The process of transitioning faculty and student department affiliation in numerous TTU data systems began in fall of 2011, but took multiple semesters to complete. Data provided by TTU Institutional Research may not fully represent the new department during this transition period. When inconsistencies were noticed, internal data is presented for comparison.

A. Number, rank, and demographics of the graduate faculty
As seen in the numbers above, as a new department our faculty count remained relatively flat even though our number of graduate students increased. We are pleased to offer many of our doctoral students with teaching assistantships.
Department Tenured and Tenure-Track by Rank* - Fall Data
(Community, Family, and Addiction Studies)

*Program was new as of FY 2012, previously APS

<table>
<thead>
<tr>
<th></th>
<th>08/09</th>
<th>09/10</th>
<th>10/11</th>
<th>11/12</th>
<th>12/13</th>
<th>13/14</th>
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<tr>
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<td>Assistant Professor</td>
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Comparison of Full-time Faculty

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<tbody>
<tr>
<td>Tenure/Tenure Track</td>
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<td>16</td>
<td>16</td>
<td>16</td>
</tr>
<tr>
<td>Non-tenure track</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>4</td>
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<td>-</td>
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<table>
<thead>
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<th>11/12</th>
<th>12/13</th>
<th>13/14</th>
</tr>
</thead>
<tbody>
<tr>
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<td>21</td>
<td>21</td>
<td>21</td>
<td>21</td>
<td>19</td>
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<tr>
<td>Non-tenure track</td>
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<td>4</td>
<td>6</td>
<td>4</td>
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<tr>
<td>TA's</td>
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<td>28</td>
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</table>

<table>
<thead>
<tr>
<th>Texas Tech University</th>
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<th>10/11</th>
<th>11/12</th>
<th>12/13</th>
<th>13/14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenure/Tenure Track</td>
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<td>-</td>
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<tr>
<td>Non-tenure track</td>
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<tr>
<td>TA's</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>4</td>
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</tbody>
</table>
The CFAS department is comprised of a healthy balance of tenured and non-tenured faculty during this reporting period. Although the department includes diversity of faculty gender and age, we would like to improve our ethnic diversity with future hires. Compared to the University of Minnesota and the University of Connecticut, we have fewer faculty. In comparison to Connecticut, we have far fewer TA’s as well.

B. List of faculty members

The following list includes all faculty who were a part of the Marriage and Family Therapy, Community, Family, and Addiction Services, and Addictive Disorders and Recovery Studies academic programs over the past six years. Faculty who currently work or worked within the newly established department of Community, Family, and Addiction Services are shown in italics.

<table>
<thead>
<tr>
<th>FACULTY NAME</th>
<th>JOB TITLE</th>
<th>HIRE DATE</th>
<th>END DATE</th>
<th>Member of Grad Faculty? Y or N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comiskey, George</td>
<td>Instructor, CSAR Associate Director</td>
<td>1/1/2004</td>
<td></td>
<td>N</td>
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<tr>
<td>Dempsey, Jared</td>
<td>Assistant Professor</td>
<td>8/1/2013</td>
<td>5/1/2014</td>
<td>N</td>
</tr>
<tr>
<td>Harris, Steven</td>
<td>Professor</td>
<td>9/1/1996</td>
<td>5/31/2009</td>
<td>Y</td>
</tr>
<tr>
<td>Harris-Wilkes, Kitty</td>
<td>Professor</td>
<td>9/1/1986</td>
<td></td>
<td>Y</td>
</tr>
<tr>
<td>Ivey, David</td>
<td>Professor</td>
<td>9/1/1993</td>
<td></td>
<td>Y</td>
</tr>
<tr>
<td>Karakurt, Gunnur</td>
<td>Assistant Professor</td>
<td>9/1/2008</td>
<td>5/1/2010</td>
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</table>
C. Summary of the number of refereed publications and creative activities.

<table>
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<th>Publication Type</th>
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<th>9/13-8/14</th>
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<td>N= 10</td>
<td>N= 10</td>
<td>N= 11</td>
</tr>
<tr>
<td></td>
<td>F = 13</td>
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<td>Refereed Articles/Abstracts</td>
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<tr>
<td>Books/Book Chapters</td>
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<td>Other Publications</td>
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<tr>
<td>Presentations/Posters</td>
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<td>29</td>
<td>33</td>
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<tr>
<td>Encyclopedia of Earth</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
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<tr>
<td>Authored Teaching Materials</td>
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<tr>
<td>Research Reports</td>
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</table>

As reflected in the data above, our faculty are actively engaged in scholarship and have contributed to the field through multiple articles, books, book chapters, and presentations. Our faculty are routinely sought out to serve as keynote speakers, media representatives, and content experts because of their knowledge and reputation as well-rounded professionals.
D. Responsibilities and leadership in professional societies

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<thead>
<tr>
<th></th>
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<tr>
<td>Editor/Editorial</td>
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<td>Executive Board</td>
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<tr>
<td>Officer in National Org.</td>
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<td>1</td>
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<td>Committees</td>
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<td>DOD Review</td>
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<tr>
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<tr>
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<td>Science oversight committee for World Recreational Fishing Conference</td>
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</table>

In addition to being highly productive scholars, several CFAS faculty members also fulfill administrative assignments in the department and college, serving as Department Chairs, Associate Deans, Center Directors, and Program Directors. Not included in the table above is the amount of academic service and community outreach provided by CFAS faculty. Our faculty are very involved with service on departmental, college, and university committees as well as being vital members of local nonprofit organization advisory and leadership boards. A complete listing of all faculty members’ professional achievements can be found in Appendix G, which lists Graduate Faculty information.

Service on Graduate Student Committees 2008 - 2014

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Committees Chaired Masters</th>
<th>Committees Chaired Doctoral</th>
<th>Committees Served in department Masters</th>
<th>Committees Served in department Doctoral</th>
<th>Committees Served outside department Masters</th>
<th>Committees Served outside department Doctoral</th>
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<tbody>
<tr>
<td>Dempsey, Jared*</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Harris, Steven*</td>
<td>0</td>
<td>4</td>
<td>0</td>
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<tr>
<td>Harris-Wilkes, Kitty</td>
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<tr>
<td>Ivey, David</td>
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<td>5</td>
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<td>Ko, Meryl*</td>
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<td>Shumway, Sterling</td>
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</table>
E. Assess average faculty productivity for Fall semesters only (use discipline appropriate criteria to determine)

<table>
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<tr>
<th>Name</th>
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<th>2011</th>
<th>2012</th>
<th>2013</th>
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</thead>
<tbody>
<tr>
<td>University</td>
<td>16.07</td>
<td>15.52</td>
<td>17.96</td>
<td>17.54</td>
<td>17.70</td>
<td>16.90</td>
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<tr>
<td>College</td>
<td>15.69</td>
<td>16.95</td>
<td>18.39</td>
<td>19.7</td>
<td>18.1</td>
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<td>Department</td>
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<td>14.83</td>
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</table>

Average Full-Time Faculty Productivity, Fall semesters only

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</thead>
<tbody>
<tr>
<td>CFAS Department</td>
<td>17.96</td>
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</table>

The table above reflects the average workload based on data for full-time CFAS faculty pulled from multiple Institutional Research reports. Many faculty are included on lists of either incorrect departments or the old department name, requiring careful mining of the data to calculate an accurate workload. When compared to the University as a whole, CFAS faculty exceeds workload expectations. Fall 2014 data has been included for comparison purposes only. Workload calculations and teaching assignments are guided by TTU OP 32.18. Workload calculations for 2012 is an anomaly; a workload of 15-17 is more likely because of our lower faculty count.
The growth in our SCH can be attributed to increased enrollment in the CFAS undergraduate major and increased enrollment in the MFT Master’s program. In addition, two popular core-curriculum courses are housed in the department (CFAS 2300 and ADRS 2310), and demand for these courses increases each year.
IV. Graduate Students

A. Demographics of applicants and enrolled students

With the exception of 2010, the number of applicants to the Marriage and Family Therapy graduate programs has remained relatively stable. The program has begun target recruiting efforts to increase the number and quality of applicants. The recruiting efforts include additional recruiting scholarships available, targeted recruiting trips to institutions with undergraduate or master’s degree student populations appropriate for recruiting into MFT graduate programs, and a reevaluation of curriculum and accreditation status of the Master’s degree program in advance of reaccreditation of the Doctoral program in 2017.

Application to both the Master’s degree program and the Doctoral program is a two step process. Applicants submit written applications to the graduate school and supplemental materials to the program (writing samples, publications, letters of reference, etc.). The MFT faculty reviews all
applications and selects a pool of applicants to invite to campus for an all day group interview (conducted separately for MS and Ph.D applicants). The on campus interview includes introductions to College and Department faculty, an overview of research opportunities, tours of the Family Therapy Clinic, tours of campus, small group interviews, large group interviews, and clinical role plays. Current students of the programs host applicants during their stay for the interview, are active participants in the interview day, provide structured feedback to faculty on the applicants, and the student association hosts a dinner for the applicants and all current students of the programs. The MFT faculty meet immediately following the on campus interviews to select applicants to invite to the program.

Note: Students Graduated data is by Academic Year

<table>
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<tr>
<th>Year</th>
<th>Total Applicants</th>
<th>Total Admitted</th>
<th>New Grad Students</th>
<th>Students Graduated</th>
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<td>2013</td>
<td>49</td>
<td>18</td>
<td>15</td>
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</table>
The lack of international or out of state applicants as shown in the previous bar graph is a result of errors in data collection—this is corrected in the bar graph above. For example, during the previous admissions cycle, the MFT program had 18 applicants from outside the state of Texas, including two international students.
## Graduate Applicants - Fall Data

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<th>2012</th>
<th>2013</th>
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<td>F</td>
<td>M</td>
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<td>American Indian/Alaskan Native</td>
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<td><strong>Gender Total</strong></td>
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<td>37</td>
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<tr>
<td><strong>Total Applicants</strong></td>
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<td>50</td>
<td>74</td>
<td>53</td>
<td>47</td>
<td>49</td>
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</table>
### Enrolled New Graduate Students - Fall Data

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<tr>
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**Gender Total**

**Total Enrolled**

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### Demographics of Enrolled Graduate Students - Fall Data

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**Gender Total**

**Graduate**

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Community, Family, and Addiction Studies

28
B. Test scores (GRE, GMAT and/or TOEFL) of enrolled students
C. GPA of new students

* 2013 Doctoral GPA is actually 3.84 and the 2008 Master’s GPA is actually 3.65 according to internal program data.
D. Time to Degree in Years – Average years to graduate for all students graduating each year

![Chart of Time to Degree in Years for Marriage & Family Studies](image)

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<tr>
<th>Year</th>
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<td>2013-2014</td>
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The MFT program data differed slightly from the graduate school data and are presented in the chart and graph above.
The MFT Doctoral program determines admissions totals, in part, based on the number of graduate, research, and teaching assistantships available each year. The Doctoral program typically provides all Ph.D students with a TA or RA position for the first two years of graduate studies. While the first two years are prioritized, many doctoral students are offered assistantships in their third year. There are fewer opportunities for Master’s degree students to receive assistantships because the doctoral students are given priority and because the majority of available assistantships are teaching assistantships. However, Master’s degree students do occasionally receive research or graduate assistantships.

F. Initial position and place of employment of graduates over the past 6 years

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<th>Location</th>
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<tr>
<td>Supervisor</td>
<td>TTU EAP</td>
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<tr>
<td>Asst Professor</td>
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<td>Greenville, NC</td>
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<td>Eugene, OR</td>
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<td>Asst Professor</td>
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<tr>
<td>Position</td>
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<td>Location</td>
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<tr>
<td>Asst Director</td>
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<td>Lubbock, TX</td>
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<tr>
<td>Executive Director</td>
<td>New Hope Christian Counseling</td>
<td>Lubbock, TX</td>
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<td>Bixby, OK</td>
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Graduates of the MFT Doctoral program have been very successful attaining clinical directorships and academic positions. Graduates of the MFT program are found in faculty roles in many MFT programs across the country. Our master’s degree students have been successful entering careers as clinicians and at pursuing doctoral education.

G. Type of financial support available for graduate students

Graduate students admitted to programs in CFAS are not guaranteed a teaching or research assistantship. Positions are assigned based on student qualifications and the available funding within the department. For the most part, there are more students than available positions or available funding. However, the CFAS (and previously APS) Department has provided two years of assistantship for every entering Ph.D student during the period covered by this review. Ph.D. students have priority given their more extensive skill set, their ability to teach undergraduate courses and their research competency.

Graduate students seeking an assistantship with CFAS are required to apply for Federal Work Study. Although the application is a requirement, if the student does not receive a work study...
award, they will still be considered for an assistantship. Students who are awarded work study funding often see their federal loan amounts reduced when work study funds are issued. Students have the option of declining the work study award and accepting the higher loan amount with no hindrance to their assistantship.

CFAS employs an average of 25 graduate students per year as Graduate Part Time Instructors, Research Assistants, or Teaching Assistants. Salaries for graduate assistantships are $15,000 (nine month base) for Ph.D. students and $13,500 (nine month base) for M.S. students. Graduate assistantships are offered as .50 FTE or 20 hours per week. Graduate assistantships also provide a significant tuition and fee waiver, as well as, granting in-state tuition to out of state students. There are limited assistantships offered during the summer sessions. Students are selected for summer assistantships based on performance, seniority, and scheduling needs.

In addition to funding offered to students via assistantships, a number of competitive scholarships and fellowships are awarded to MFT graduate students (See item H). A scholarship committee, composed of department faculty, awards competitive scholarships on the basis of the requirements of the individual scholarships (e.g. GPA, GRE scores, community service, etc.). Scholarships are also available to all students through the College of Human Sciences.

In addition to Departmental support, the College, Graduate School, and the MFT program provide some funds for student travel to present professional papers/posters at State and National conferences. Student travel funding typically averages $600.00.

Students who are employed as TA/RAs and GPTIs have office space in the graduate student area. The MFT graduate students are housed in room 269 in COHS. Students all have a comfortable work space that includes computer and printer resources.

<table>
<thead>
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<th>AWARD</th>
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<td>$4,000</td>
</tr>
<tr>
<td>Hazlewood</td>
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<td>Water Conservation Research Scholarship</td>
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<td>CH Foundation</td>
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H. Number of students who have received national and university fellowships, scholarships and other awards
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<tr>
<th>Total</th>
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<th>11</th>
<th>31,800</th>
<th>7</th>
<th>36,500</th>
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<td>11/12</td>
<td># Stud</td>
<td>12/13</td>
<td># Stud</td>
<td>13/14</td>
<td># Stud</td>
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<td>$4,000</td>
<td>1</td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Water Conservation Research Scholarship</td>
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<td>1</td>
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<tr>
<td>Covenant Health and Social Services Fellowship</td>
<td>$4,000</td>
<td>1</td>
<td>$16,000</td>
<td>4</td>
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<tr>
<td>United Supermarkets</td>
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<td>Total</td>
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<td>4</td>
<td>$19,500</td>
<td>5</td>
<td>$53,800</td>
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Additional Information from Internal Data:

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<th>AWARD</th>
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<th># Stud</th>
<th>09/10</th>
<th># Stud</th>
<th>10/11</th>
<th># Stud</th>
</tr>
</thead>
<tbody>
<tr>
<td>CJ Davidson HS Scholarship</td>
<td>$3000</td>
<td>3</td>
<td></td>
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</tr>
<tr>
<td>5th Yr Exemption ATHL</td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>TTU Misc Scholarship</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TTU Neugebauer HS Scholarship</td>
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<td>1</td>
<td></td>
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<tr>
<td>Excellence in Health Scholarship</td>
<td>$4000</td>
<td>1</td>
<td>$4000</td>
<td>1</td>
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<tr>
<td>Rushing F S Scholarship</td>
<td>$1500</td>
<td>2</td>
<td>$1500</td>
<td>1</td>
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<tr>
<td>CR V Hutcheson HS Scholarship</td>
<td></td>
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<tr>
<td>Broyles HS Scholarship</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>USH Grad Asst Scholarship</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>MFT Clinic Scholarship</td>
<td>$1000</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>HS Desg Sch</td>
<td>$7500</td>
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<tr>
<td>Student # With Assistantships</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Ph.D.</td>
<td>MS</td>
<td>Ph.D.</td>
<td>MS</td>
<td>Ph.D.</td>
<td>MS</td>
<td>Ph.D.</td>
</tr>
<tr>
<td>1st Year</td>
<td>5</td>
<td>1</td>
<td>8</td>
<td>2</td>
<td>8</td>
<td>3</td>
</tr>
</tbody>
</table>
The CFAS Department has provided two year assistantships to 100% of incoming MFT doctoral students. Because students often leave campus to complete doctoral internships or pre/post-doctoral fellowships, assistantships are less frequent after the second year of study. The majority of MFT Doctoral students accept paid internship positions and many continue to receive additional scholarship or fellowship funding.

J. Graduate Student Publications and Creative Activities

<table>
<thead>
<tr>
<th></th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Master’s Students</td>
<td>13</td>
<td>14</td>
<td>19</td>
<td>26</td>
<td>30</td>
<td>34</td>
</tr>
<tr>
<td>Doctoral Students</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The MFT Master’s degree and Doctoral programs have adopted an article format for the thesis and dissertation requirements. The article format is intended to facilitate the publication of thesis and dissertation work. While the new format has only been in place for two years, we have seen an increase in the publication rates. However, the rates may not be reflected above due to the lag time often associated with publication in scholarly journals. Overall, MFT students are successful presenting and publishing their research.

K. Programs for mentoring and professional preparation of graduate students

The MFT graduate programs accomplish student mentoring through several means. Each student is assigned a faculty advisor upon entering the program. The faculty advisor is responsible for mentoring students’ research projects, facilitating small group meetings of advisees, and often becomes the thesis or dissertation committee chair. This process helps students have regular access to their advisor and to each other and to encourage progress on existing projects.

<table>
<thead>
<tr>
<th>Current Number of Advisees</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MS</strong></td>
</tr>
<tr>
<td>Dr. David Ivey</td>
</tr>
<tr>
<td>Dr. Jason Whiting</td>
</tr>
<tr>
<td>Dr. Douglas Smith</td>
</tr>
<tr>
<td>Dr. Anne Prouty</td>
</tr>
<tr>
<td>Dr. Kristy Soloski</td>
</tr>
<tr>
<td>Dr. Nicole Springer</td>
</tr>
<tr>
<td>Dr. Tom Kimball</td>
</tr>
</tbody>
</table>
MFT Doctoral and Master’s degree students are required to complete a research project (MFT 7000). The 7000 projects are mentored by the student’s faculty advisor.

The MFT program utilizes a cohort model. Each incoming group of students moves through the program and the majority of the curriculum together. The cohort model provides opportunities for peer support and mentoring.

MFT students receive extensive clinical mentoring and support as part of their clinical training. Students who are active in the Family Therapy clinic enroll in clinical practicum (MFT 6395). The clinical practicum is led by a faculty instructor who provides live observation and feedback of students’ clinical work and, in addition to class time, meets for an additional one hour a week with the student to discuss and review video of clinical cases. Practicum instructors are also available to student outside regular class times for assistance with difficult cases or crises management.

L. Department efforts to retain students and graduation rates.

<table>
<thead>
<tr>
<th>Year</th>
<th>Admitted Rate</th>
<th>Graduated</th>
<th>Grad. Rate</th>
<th>Contextual information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MS</td>
<td>PhD</td>
<td>MS</td>
<td>PhD</td>
</tr>
<tr>
<td>2008</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>2009</td>
<td>8</td>
<td>5</td>
<td>8</td>
<td>4</td>
</tr>
<tr>
<td>2010</td>
<td>13</td>
<td>7</td>
<td>12</td>
<td>7</td>
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<tr>
<td>2011</td>
<td>13</td>
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<td>0</td>
</tr>
<tr>
<td>2012</td>
<td>9</td>
<td>7</td>
<td>8</td>
<td>N/A</td>
</tr>
<tr>
<td>2013</td>
<td>13</td>
<td>8</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

MFT

The program does not, with the exception of the 2008 cohort, have problems with retention. The majority of students who do not finish the programs do so because of changes in the personal lives (death in the family, financial changes, family related work moves, etc.) or because of concerns related to clinical performance. The clinical nature of both programs adds a layer of
complexity to recruitment, retention, and evaluation of students. The MFT program conducts on-campus interviews precisely because of the clinical nature of the program and the professional gatekeeping requirements related to clinical licensure. Despite good retention and graduation rates, the programs are always looking for ways to increase the numbers. Some of these steps include:

- Increasing the quality of the applicant pool through targeted recruiting strategies
- Increasing the quality of the applicant pool by exploring accreditation of the master’s degree program
- Increased support for the graduate student organization (SAMFT)
- Identifying additional mechanisms to provide financial support and travel/research funding.

M. Percentage of Full-Time Master and Doctoral students per year – Fall Data

Both the MFT master’s degree and doctoral programs are designed for full time students. The clinical component of both programs, the licensure requirements for curriculum, and accreditation requirements make it difficult to accommodate part-time students. Over the past 6 years, 1 student assumed part-time status during their Master’s program, but has since resumed full-time status. However, both programs will make accommodations for students wishing to complete the program using an alternate plan of study on a case-by-case basis.
V. Department

A. Department operating expenses

The operating costs shown for 12/13 also include a graduate fellowship awarded to a doctoral student. These funds were incorrectly transferred to this account, but this was corrected in 13/14. The $21,000 difference is attributed to this error.

### Department Operating Costs as a Fraction of Employees

*Source: AF Information Systems Management

<table>
<thead>
<tr>
<th></th>
<th>11/12</th>
<th>12/13</th>
<th>13/14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dept Operating Cost</td>
<td>$23,793.48</td>
<td>$91,750.19</td>
<td>$69,819.93</td>
</tr>
<tr>
<td>Faculty &amp; Staff</td>
<td>34</td>
<td>32</td>
<td>32</td>
</tr>
<tr>
<td>Dept Op Cost /FS</td>
<td>700</td>
<td>2,867</td>
<td>2,182</td>
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</table>

*** Faculty and staff numbers reflect tenure/tenure track and non-tenure track faculty as provided in Section III. A
B. Summary of Proposals (submitted)

**Summary of Number of Proposals Written and Accepted**

*Source: Office of Research Services*

<table>
<thead>
<tr>
<th>BY CATEGORY</th>
<th>Federal</th>
<th>Federal Pass-Through</th>
<th>Foreign</th>
<th>Industrial Groups/Organizations</th>
<th>Nonprofit Organizations</th>
<th>Other</th>
<th>State</th>
<th>University</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>D</td>
<td>M</td>
<td>D</td>
<td>D</td>
<td>M</td>
<td>D</td>
<td>M</td>
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<td>M</td>
</tr>
<tr>
<td>2013</td>
<td>1.00</td>
<td>0.15</td>
<td>1.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>1.00</td>
<td>0.00</td>
</tr>
<tr>
<td>2012</td>
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<td>0.00</td>
<td>0.15</td>
<td>0.00</td>
</tr>
<tr>
<td>2011</td>
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<td>2010</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2008</td>
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<td></td>
<td></td>
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<tr>
<td>Grand Total</td>
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<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
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<td>0.00</td>
<td>0.00</td>
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</tbody>
</table>

*The number of proposals are calculated by summing up the percentage contribution of the faculty on the given proposal.

D = Disciplinary (Internal)  M = Multidisciplinary (External)

C. External Research expenditures

**Summary of Faculty Awards by Home Department**

*Source: Office of Research Services

*Source: ORS Website*

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Awards</th>
<th>Facilities &amp; Administrative*</th>
<th>Award Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2009</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2012</td>
<td>1.05</td>
<td>$11,164</td>
<td>$112,745</td>
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<tr>
<td>2013</td>
<td>0.64</td>
<td>$13,657</td>
<td>$113,737</td>
</tr>
<tr>
<td>Totals:</td>
<td>1.69</td>
<td>$24,821</td>
<td>$226,481</td>
</tr>
</tbody>
</table>

**Summary of Faculty Awards**

*Based on Internal Data*

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Proposals (Count)</th>
<th>Number of Awards (Based on Percent Effort)</th>
<th>Award Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>7</td>
<td>3.1</td>
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<tr>
<td>2013</td>
<td>4</td>
<td>1.3</td>
<td>$157,371</td>
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</table>

The data reflected in the ORS report above does not include all CFAS faculty, therefore we created a more inclusive table. Three of our faculty were housed in the CSAR during this report period, and their funding activities do not show on standard departmental reports. A more specific review of CFAS faculty proposals and awards demonstrates that our faculty are actively pursuing federal and foundation support for research and community outreach.
As stated above, the data reflected in this table and graph most likely does not include research expenditures for all CFAS faculty.

D. Internal Funding

<table>
<thead>
<tr>
<th>Source of Internal Funds (TTU)</th>
<th>11/12*</th>
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<td>Research Enhancement</td>
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<td>Research Incentive</td>
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<td>$4,972</td>
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<tr>
<td>Line Items</td>
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</tr>
<tr>
<td>Interdisciplinary Seed Grants</td>
<td>$10,000</td>
<td>$5,000</td>
<td></td>
</tr>
<tr>
<td>New Faculty Start-ups</td>
<td>$5,750</td>
<td>$4,623</td>
<td></td>
</tr>
<tr>
<td>Matching from VP of Research</td>
<td>$43,494</td>
<td>$80,436</td>
<td></td>
</tr>
<tr>
<td>Special needs and opportunities</td>
<td>$7,806</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research Promotion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Graduate School Fellowships</td>
<td>$21,138</td>
<td>$14,000</td>
<td></td>
</tr>
<tr>
<td>HEAF</td>
<td>$3,171</td>
<td></td>
<td></td>
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<tr>
<td><strong>TOTALS:</strong></td>
<td>$70,221</td>
<td>$26,110</td>
<td>$109,371</td>
</tr>
</tbody>
</table>

*Department officially established in FY12; data for 11/12 has been difficult to obtain and analyze.
E. Scholarships and endowments

Once the new CFAS department was established, we began working consistently with the COHS Development Officer to increase the number of department-specific scholarships. Although there is a very healthy scholarship endowment connected with the College, the new department had very few scholarships to award to students. Departmental scholarships have increased from 6 to 8. Graduate and undergraduate students in the department receive scholarships from COHS including, large multi-year graduate scholarships and fellowships. COHS currently offers the Helen Devitt Jones Fellowship in the amount of $10,000 per year for two years; this award rotates through the graduate programs in the College. Students also receive fellowships from the Graduate School on a competitive basis. In FY14, the CFAS department awarded $20,000 in scholarships to 14 doctoral students.

F. Departmental resources for research and teaching (i.e., classroom space, lab facilities)

<table>
<thead>
<tr>
<th>Type of Space</th>
<th>Number of Rooms</th>
<th>Total Assignable Square Feet</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICES</td>
<td>31</td>
<td>6,044.54</td>
</tr>
<tr>
<td>LABS:</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>STORAGE:</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>TEACHING:</td>
<td>17</td>
<td>1895.01</td>
</tr>
<tr>
<td>LIBRARY:</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>OTHER</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>TOTAL SQUARE FEET</td>
<td>48</td>
<td>7,939.55</td>
</tr>
</tbody>
</table>

The source of this data is not known. However, CFAS faculty have individual offices, and we have two storage areas allocated to the department. In 2013, space for a neuroscience laboratory was established and research is ongoing. We are currently remodeling space in the college that will include a new seminar room, two faculty offices, and graduate student research space. The reconfiguration of this space provides greater visibility for the department and a better use of the physical space. The additional faculty offices and seminar room are critical to the growth of the department, as mentioned in our previous Graduate Program Review.

G. HEAF expenditures

<table>
<thead>
<tr>
<th>Year</th>
<th>Labs</th>
<th>Classroom</th>
<th>Other (Identify)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
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<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>2013</td>
<td></td>
<td>Adobe Acrobat X Pro License</td>
<td></td>
<td>$181.86</td>
</tr>
<tr>
<td>2012</td>
<td></td>
<td>Table for Chair office</td>
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<td>$194.40</td>
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<tr>
<td>2012</td>
<td>Display Board for recruiting</td>
<td></td>
<td></td>
<td>$525</td>
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<tr>
<td>2012</td>
<td>Table cover for recruiting</td>
<td></td>
<td></td>
<td>$519.04</td>
</tr>
<tr>
<td>2012</td>
<td></td>
<td>Clock for Department reception area</td>
<td></td>
<td>$37.28</td>
</tr>
</tbody>
</table>

HEAF funds were awarded in FY12 to assist with establishing the new CFAS Department.
H. External Program Accreditation

The MFT Program (doctoral) is accredited through the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE). The TTU MFT program was last reviewed in January of 2010 (see Appendix J), and will again be reviewed (through a self-study process and site visit) in January of 2017. The master’s program is not accredited, although we may be moving toward that direction soon.

The American Association for Marriage and Family Therapy (AAMFT) Commission on Accreditation for Marriage and Family Therapy Education ("COAMFTE" or "the Commission") is the national accrediting agency for marriage and family therapy education and training. The Commission recognizes the following specific purposes in performing its function:

- To provide oversight and ensure, on behalf of the Association, quality MFT education through accreditation.
- To stimulate the improvement of professional marriage and family therapy education, including helping training institutions and agencies develop quality programs by fostering ongoing self-study and development.
- To establish and maintain standards which will ensure that institutions and agencies meeting them provide students with appropriate learning resources to acquire the requisite skills, knowledge, and ethical sensitivity to be professionally competent.
- To provide an authoritative guide to programs in the field of marriage and family therapy which deserve public and professional confidence and support, including providing prospective students with a dependable basis for the selection of educational programs and providing state boards which license or certify marriage and family therapists with a list of accredited graduate degree and post-degree programs.

The following is the description of COAMFTE taken from:
http://www.aamft.org/iMIS15/AAMFT/Content/coamfte/About_COAMFTE.aspx

The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) is a specialized accrediting body that accredits master's degree, doctoral degree, and post-graduate degree clinical training programs in marriage and family therapy throughout the United States and Canada. The Council for Higher Education Accreditation (CHEA) officially recognizes the COAMFTE. CHEA is a non-governmental organization that works to foster and facilitate the role of accrediting bodies in promoting and insuring the quality and diversity of American post-secondary education. CHEA regularly reviews the policies and practices of COAMFTE for continued recognition.

COAMFTE Organization
The COAMFTE is made up of nine (9) Commissioners -- seven (7) professional members and two (2) public members. Professional Commission members must be senior marriage and family therapy educators or clinicians. Public members represent the interests of the general public and are not professional marriage and family therapy educators, supervisors or practitioners. In
selecting Commission members, every effort is made to maintain a balance with regard to race, ethnicity, gender, and geographic location. The Commission must also reflect a balance regarding academicians and practitioners as well as training contexts (master's, doctoral, and post-degree).

Purpose of Accreditation

Specialized accreditation of marriage and family therapy programs is a public service that aims to:

• encourage programs to continue their own self-study and development; and
• indicate that programs are meeting established standards and their own stated objectives.

This specialized accreditation is both a process and a condition. The process, or the act of accrediting, entails assessing a program's operations through compliance with specified professional standards developed by a national consensus of professionals in the field. The condition, or the state of being accredited, provides a credential to the public which attests that a program has accepted and is fulfilling its commitment to educational quality.

The COAMFTE works cooperatively with its parent organization, the American Association for Marriage and Family Therapy (AAMFT), state licensing and certification boards, and the Association of Marital and Family Therapy Regulatory Boards (AMFTRB). The COAMFTE program educational standards often serve as the foundation for the development of individual credentialing requirements. The accreditation process is a voluntary process that requires self-study by the program, an on-site review by a selected group of peers, and a review and decision by the COAMFTE to determine compliance with accreditation standards. Once a program has become accredited, it is required to submit annual reports demonstrating continued compliance with standards. Accredited programs are reviewed at least every six years.

Benefits of Accreditation

In fostering quality assurance and program improvement, the COAMFTE's accreditation process benefits the public, programs, students, and the profession.

• To the public and consumers, accreditation provides assurance that the program has undertaken extensive external evaluation, and meets standards established by the profession.
• Accreditation serves programs by providing a stimulus for self-evaluation and a cost-effective review mechanism which strengthens the reputation and credibility of a program because of the public regard for accreditation. Accredited programs become eligible for funding under several Federal grant programs. Click here for listing of current grant opportunities.
• Students can be assured that the appropriate knowledge and skill areas will be included in the course of study that are necessary for entry into a chosen field and that the program demonstrates financial stability. An accredited degree assures a prospective employer that the student has undertaken a superior course of professional preparation. An accredited degree also allows students to apply for Clinical Membership in AAMFT through the accelerated Accredited Program Track in the absence of state licensure.
• The MFT Profession benefits because specialized accreditation contributes to the unity of the profession. It brings together practitioners, teachers, and students in the vital activity of setting standards for the education of entry level professionals, and of continually improving professional preparation, education, research, scholarship, and clinical practice.

Scope of Accreditation

The COAMFTE's scope of accreditation includes three types of programs:

• Master's Degree Programs provide students with broad areas of theory and practice in marriage and family therapy. These programs provide entry level educational requirements for independent clinical practice in the profession. They are designed to prepare individuals for beginning a career in marriage and family therapy by providing basic didactic and clinical skills, as well as professional development and socialization.
• Doctoral Degree Programs prepare students for academic careers, research, advanced clinical practice and supervision. The doctoral curriculum includes advanced instruction in marriage and family therapy research, theory construction and supervision.
• Post-Graduate Degree Clinical Training Programs provide clinical education in marriage and family therapy to trainees with a master's or doctoral degree in MFT, or in a closely related field. A program may allow for specialized training in a particular modality or treatment population.
VI. Conclusion

The CFAS Department has been in operation for a little more than 2 years. We feel that the Department has done very well building a strong foundation for future success with limited resources. Though contributions and needs will be addressed specifically for the MFT Graduate Program, some of the contributions and needs within the Department are also highlighted. The contributions include:

- The CFAS undergraduate major has experienced continued growth since its inception and has provided an undergraduate pathway to our MFT and ADRS graduate offerings. This will become even more important as we put in place an ADRS Ph.D. Program.
- The development of “mega-section” courses related to CFAS 2300 and ADRS 2310 and their University core curriculum status has yielded significant undergraduate student credit hours with less cost to the Department (limit GPTI’s and allow more flexibility in funding). The CFAS major and ADRS courses are actively being grown, and due to the popularity of the ADRS minor we plan to ultimately create and ADRS undergraduate major.
- Both internal and external applications and funding are on the rise.
- CFAS faculty produced:
  - 38 articles and 2 books during 2013-2014
  - 23 articles, 1 book, and 1 book chapter during 2012-2013
- Two faculty members hold Regents Professorships (S. Shumway & T. Kimball) and one holds a senior hire position responsible for a college-wide research cluster related to addiction and recovery (K. Harris).
- CFAS faculty have received numerous awards at the national, university, college, and community level recognizing their excellence in teaching, research, service, and community outreach. A list of faculty awards and professional honors can be found in Appendix H.
- Three CFAS faculty are members of the Texas Tech Teaching Academy. This is a prestigious appointment that requires a nomination, application, and review before acceptance by active academy members.

There are also some very important needs the CFAS Department has. These include:

- Graduate Teaching and Research Assistantships—with the charge to grow graduate programs and increase enrollment, support for graduate students who are teaching and conducting research is critical to the growth of our programs and department. In order to recruit and retain high-quality graduate students we must be able to offer competitive funding to support them during their program of study. Specifically, we need funds to support RA’s and GPTI’s as well as offset costs related to providing fee waivers for students on assistantship.
- Resources for Creating and Sustaining Online and Distance Education—as the University has requested us to expand online and distance education offerings, subsequent support and funding must follow. Though there is a competitive process to receive funds, the percent of funding that flows back to the department
has been reduced compared to traditional face-to-face courses. This makes it difficult to cover the cost of providing distance education in the early portion of development until student enrollment in online courses grows to the point of being profitable.

- Scholarships and Developmental Resources—although we have gained new scholarships for the CFAS undergraduate major, there is still a great need in this area. To rectify this concern, a new institute and center structure has been proposed that will create new funding streams to support student engagement, graduate students, and faculty and student research projects (see Appendix I). The institute and center structure will also support the proposed ADRS Ph.D. program by providing resources for staff, graduate student financial support, and faculty initiatives.

- Startup Needs for New Faculty—since the last graduate program review, the university has improved startup packages for new faculty. However, the process of negotiating startup is still tenuous and lengthy, which inhibits the timely recruitment of top candidates. Startup is often finalized so late in the hiring process that it no longer functions as an incentive for standard faculty hires. The process of requesting startup for new faculty needs to be further clarified and resources provided in a manner that is simple, equitable, and has the potential (in dollar amount and timing) to draw targeted candidates.

- Space—a master-plan of CFAS faculty offices would be helpful to create uniformity and cut down the physical distance between faculty members. Plans need to include space for full-time and part-time instructors, and additional RA’s and TA’s.

MFT Graduate Programs

There are many strengths of the MFT Program. The Doctoral program is one of the largest and best known in the country, with as many quality faculty and students as any other program of its kind. The Master’s program has grown significantly and will continue to grow with support from the ADRS program faculty. The undergraduate CFAS program likewise is growing, and is equally staffed by both MFT and ADRS faculty. All of the faculty members are very active researchers with many of them receiving some type of internal or external funding. Current efforts are being made to endow the Family Therapy Clinic (FTC) and obtain federal funding for an important project related to brain neuroimaging and violence within relationships. Great strides have been made to bring income into the FTC and to increase community outreach efforts.

Students participate in these many projects and are mentored in the process, which helps them become successful in their own process of publication and professional presentation. The MFT Program has been able to provide funding for many of these doctoral students and some of the master’s students in partnerships with ADRS faculty and the CFAS Department. The students also receive strong clinical training in our on-site FTC clinic that serves the Lubbock community and the South Plains area. Though the MFT program has a long history of success, we expect even greater things to come as we
grow the faculty, the programs, and the number of students who participate at both the undergraduate and graduate level.

Despite the strengths of the MFT program, there are some challenges and changes that have impacted the program. As mentioned earlier, the MFT programs have been housed within three different departments. This is by no fault of their own, however it has necessitated change and has required much understanding and flexibility. A few established faculty have left to take other opportunities though they have been replaced with bright and talented faculty who have achieved tenure and are now providing fresh leadership and renewed vision. With the recent addition of two faculty (one new hire and one faculty transition to their program), greater individual and team mentoring will be required. Some of these transitions have left them short of faculty until this current academic year! Though existing faculty filled the gaps in amazing ways, we expect an even greater level of stability over the next several years.
VII. Appendices

The following appendices are included for review:

A. Strategic Plan
B. Curriculum Map
C. 18 Characteristics for Doctoral Programs
D. Graduate Course Offerings
E. Graduate Student Handbook: Master’s program manual, Ph.D. program manual, MFT Clinic Manual
F. SAMFT Graduate Student Association
G. Graduate Faculty Information
H. Faculty Awards and Professional Honors
I. Institute and Center Structure
J. COAMFTE Self-Study
Appendix A

Strategic Plan
for the Department of Community, Family, and Addiction Services

The mission of the Community, Family, and Addiction Services department is to prepare future professionals to enrich the lives of individuals, families, and communities. Our mission is guided by the following goals and core principles:

- Promote sustained recovery and wellness for all individuals and families through a continuum of care;
- Educate scientist-practitioners to facilitate therapeutic change in couples and families;
- Produce meaningful scholarship that is accessible to a wide audience;
- Develop authentic connections with students, colleagues, and community partners;
- Encourage self-reflection, accountability, and growth;
- Embrace diverse individuals and their communities;
- Enhance teaching, research, and outreach through ongoing clinical practice;
- Mentor emerging scholars and foster ongoing development of the science-practitioner model.

Consistent with the College of Human Sciences and Texas Tech University, we have adopted five strategic priorities with related performance indicators to guide our growth and measure our success as we strive to fulfill our mission.

Priority # 1- Increase Enrollment and Promote Student Success

➢ We will grow and diversify our student population in order to improve higher education participation and supply a well-equipped, educated workforce for the state of Texas.

Key Strategies:
- Develop articulation agreements with community colleges to attract more students from underrepresented groups.
- Initiate online courses to increase availability of courses to non-traditional students.
- Develop new undergraduate and graduate degree programs to meet rising workforce demands.
- Participate in TTU programs designed to engage students from underrepresented groups such as Upward Bound, McNair Scholars, Pegasus, and MentorTech.
- Update departmental and program websites to reflect current best-practices in recruiting and retention of a diverse, college-age student body.

Priority # 2- Strengthen Academic Quality and Reputation

➢ We will attract and retain the best faculty in the country in order to enhance our teaching excellence and grow our number of nationally recognized programs.

Key Strategies:
• Maintain COAMFTE accreditation for the Ph.D. program in Marriage and Family Therapy.
• Pursue COAMFTE accreditation for the M.S. program in Marriage and Family Therapy.
• Decrease student-faculty ratio to emulate AAU characteristics.
• Work with the Office of Diversity to support targeted faculty searches from underrepresented groups.
• Support faculty development activities such as participation in TLPDC workshops and other teaching seminars.
• Support faculty travel to professional meetings.
• Increase references and appearances in the popular media and academic publications.
• Support and increase service on local, state, and national professional boards and committees.

Priority # 3- Expand and Enhance Research and Creative Scholarship
➢ We will significantly increase the amount of public and private research dollars in order to advance knowledge, improve the quality of life in our state and nation, and enhance the state’s economy and global competitiveness.

Key Strategies:
• Formalize mentoring relationships between established, senior faculty and newer faculty to facilitate successful grant development.
• Create an Institute and Center structure that expands funding for all programs within the department.
• Create a faculty research consortium to encourage collaboration among faculty.
• Utilize college and university resources to identify potential funding sources and incentives for research.
• Increase the number of graduate students supported on research grants.
• Develop programs of research geared towards the involvement of undergraduate students.
• Provide travel support to faculty presenting research at national and international conferences.
• Support graduate student travel for research presentations at national conferences.
• Encourage student-faculty publication collaborations.

Priority # 4- Further Outreach and Engagement
➢ We will expand our community outreach, promote higher education and continue to engage in partnerships in order to improve our communities and enrich our quality of life.

Key Strategies:
• Support faculty involvement with community agencies.
• Provide therapeutic support for the Lubbock community through the Family Therapy Clinic.
• Continue providing Great Start premarital courses to the Lubbock community.
• Continue providing recovery groups, seminars, and continuing education opportunities.
• Support and encourage outreach efforts of department related student organizations, TTU SAMFT, ASAS, and TechCFR.
• Develop relationships with global partners in the area of addiction, recovery, and family therapy.
• Formalize study abroad experiences relevant to our undergraduate majors and graduate programs.

Priority # 5- Increase and Maximize Resources
➢ We will increase funding for scholarships, professorships, and world-class facilities and maximize those investments through more efficient operations in order to ensure affordability for students and accountability to the State of Texas.

Key Strategies:
• Develop and equip a seminar room to enhance graduate seminars, distance education, and community outreach.
• Increase visibility of our unique programs and student success to attract prospective scholarship donors.
• Cultivate matching donors for existing scholarship endowments in conjunction with the College of Human Sciences Development Officer.
• Support faculty efforts to develop service contracts and other creative lines of revenue to support outreach and educational activities.
# APPENDIX B

## CURRICULUM MAPS

<table>
<thead>
<tr>
<th>Degree Title:</th>
<th>9/25/2010</th>
<th>SELECTED PROGRAM LEARNING OUTCOMES</th>
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<td>MFT 5322 Family Systems</td>
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<tr>
<td>MFT 6311 contemporary directions in MFT</td>
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<td>MFT 6322 Family Systems I Research Methods in MFT</td>
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<td>MFT 6323 Qualitative Methods in MFT</td>
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<td>MFT 6342 Violence</td>
<td>M R F</td>
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<td>MFT 6342 Mindfulness</td>
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<td>MFT 6342 Grief and Loss</td>
<td>M R F</td>
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**Legend**
- [I] OUTCOME STATEMENT: The program outcome is either (O) UPFRONTLY (score of 2), or (M) IMPACTLY (score of 1) reflected in the course syllabus as being one of the learning outcomes for the course.
- [II] LEVEL OF CONTENT DELIVERY:
  - [R]: INTRODUCED: Students are not expected to be familiar with the content or skills at the graduate level. Instruction and learning activities focus on basic knowledge, skills, and competencies and entry-level complexity. Only one (or a few) aspect of a complex program outcome is addressed in the given course (score of 1).
  - [R]: REINFORCED: Students are expected to possess a basic level of knowledge and familiarity with the content or skills at the graduate level. Instruction and learning activities concentrate on enhancing and strengthening knowledge, skills, and acquiring complexity. Several aspects of the outcome are addressed in the given course, but these aspects are treated separately (score of 2).
  - [A]: ADVANCED - Students are expected to possess a strong foundation in the knowledge, skill, or competency at the graduate level. Instructional and learning activities continue to build upon previous competencies with increased complexity. All components of the outcome are addressed in the integrative contexts (score of 3).
- [III] FEEDBACK ON STUDENT PERFORMANCE / ASSESSMENT:
  - [F]: Students are asked to demonstrate their learning on the outcome through homework, projects, tests, etc., and are provided formal feedback (score of 1).
# Texas Tech University Program Level - Curriculum Map

## Degree Title:

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Date</th>
<th>Selected Program Learning Outcomes</th>
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<tbody>
<tr>
<td>MFT 5200 - Introduction to MFT Practice</td>
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<td>Students will be able to design and present a research project (PhD).</td>
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<tr>
<td>MFT 6402 - Family Therapy I</td>
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<td>Students will be able to complete MFTs in a competent manner (PhD).</td>
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<tr>
<td>MFT 5304 - Somatic Evaluation</td>
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<td>Students will be able to complete the core competencies at the graduate level (PhD).</td>
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<tr>
<td>MFT 5200 - Use of the DSM, Psychopathology, and Assessment in MFT</td>
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<td>Students will be able to articulate the theory of teaching (PhD).</td>
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<tr>
<td>MFT 5122 - Family Systems</td>
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<td>Students will be able to complete the core competencies at the graduate level (PhD).</td>
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<tr>
<td>MFT 5511 - Research Methods in Individual and Family Studies</td>
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<td>Students will be able to articulate the theory of teaching (PhD).</td>
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<td>MFT 5270 - Issues in Professional Development</td>
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<td>Students will be able to articulate the theory of teaching (PhD).</td>
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<td>MFT 6600 - Master's Thesis</td>
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<td>MFT 6303 - Family Therapy II</td>
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<td>MFT 6111 - Contemporary Directions in MFT</td>
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<tr>
<td>MFT 6542 - Gretard Loss</td>
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<td>Students will be able to articulate the theory of teaching (PhD).</td>
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</table>

### Notes:
- Students are expected to possess a basic level of knowledge and familiarity with the content or skills at the collegiate level. Instruction and learning experiences may address the desired competencies, but additional knowledge, skills, and supporting competencies. Several aspects of the outcomes are addressed in the given course (score of 4).
- Students who are not expected to be familiar with the content or skills at the collegiate level. Instruction and learning experiences focus on increasing the student's competence and mastery level competencies. Only one (or less than two) aspect of a complex program outcome is addressed in the given course (score of 2).
- Students are not expected to possess a basic level of knowledge and familiarity with the content or skills at the collegiate level. Instruction and learning experiences focus on increasing the student's competence and mastery level competencies. Only one (or less than two) aspect of a complex program outcome is addressed in the given course (score of 1).

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**Legend**

- **OUTCOME STATEMENT:** The program outcome is: (a) EXPERTISE - (b) KNOWLEDGE - (c) SKILLS - (d) ATTITUDES - (e) ATTITUDES - (f) COMPETENCIES - (g) COMPETENCIES - (h) COMPETENCIES - (i) COMPETENCIES - (j) COMPETENCIES - (k) COMPETENCIES - (l) COMPETENCIES - (m) COMPETENCIES - (n) COMPETENCIES - (o) COMPETENCIES - (p) COMPETENCIES - (q) COMPETENCIES - (r) COMPETENCIES - (s) COMPETENCIES - (t) COMPETENCIES - (u) COMPETENCIES - (v) COMPETENCIES - (w) COMPETENCIES - (x) COMPETENCIES - (y) COMPETENCIES - (z) COMPETENCIES.

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**Levels of Content Delivery**

- **ADVANCED:** Students are expected to possess a high level of knowledge and familiarity with the content or skills at the collegiate level. Instruction and learning experiences focus on increasing the student's competence and mastery level competencies. Only one (or less than two) aspect of a complex program outcome is addressed in the given course (score of 5).

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**Feedback on Student Performance/Assessment**

- Students are asked to evaluate their learning on the outcome through homework, projects, tests, etc., and are provided feedback (score of 3).
<table>
<thead>
<tr>
<th>Courses in Degree Program (Siclo).</th>
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<th>Students will be able to lead graduate students in discussion and lecture on 5MFT content (P520)</th>
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| MFT 5004 Systems Evaluation | X | R | F  
| MFT 5015 Use of the DSM, Psychopathology, and Assessment in MFT |  |  
| MFT 5222 Family Systems |  |  
| MFT 5515 Research Methods in Individual and Family Studies |  |  
| MFT 5270 Issues in Professional Development |  |  
| MFT 6000 Masters Thesis |  |  
| MFT 6003 Family Therapy II | M | R | F  
| MFT 6111 Contemporary Directions in MFT |  |  
| MFT 6222 Family Systems III Research Methods in MFT | X | R | F  
| MFT 6222 Qualitative Methods in MFT | X | R | F  
| MFT 6422 Violence | X | A | F  
| MFT 6422 Mindfulness | X | R | F  
| MFT 6542 Advanced Guided Theory | M | R | F  
| MFT 6543 Client and Case Management | X | R | F  

**Legend:**
- **ENRICHED:** Students are expected to possess a basic level of knowledge and familiarity with the content or skills at the collegiate level. Instruction and learning activities focus on enhancing the student’s understanding of knowledge, skills, and abilities necessary for professional practice.
- **ADVANCED:** Students are expected to possess a strong foundation in the knowledge, skills, and competencies at the collegiate level. Instruction and learning activities continue to build upon previous knowledge and skills, and are designed to provide opportunities for students to apply and integrate their knowledge and skills in complex, real-world situations.

**Feedback on Student Performance/Assessment:** Students are asked to participate in feedback sessions, where they are able to reflect on their progress and receive guidance and support for their learning.
### Texas Tech University Program Level - Curriculum Map

| Date       | 8/2/10 |

#### Selected Program Learning Outcomes

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Outcomes Achieved</th>
</tr>
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<tbody>
<tr>
<td>MFT 642 Child and Adolescence</td>
<td>M R F X A F X A F</td>
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<tr>
<td>MFT 617O Diversity in MFT</td>
<td>M R F X A F M A F</td>
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<td>MFT 6305 Practice in MFT</td>
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<td>HDFS 5565 Qualitative Methods IV</td>
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<tr>
<td>ADRS 5310 Issues of Addiction and Recovery</td>
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<tr>
<td>ADRS 6307 Couple and Family Dynamics of Addiction</td>
<td>M R F M R F M R F</td>
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<td>ADRS 5315 Systematic Treatment of Addictions</td>
<td>M R F M R F M R F</td>
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<tr>
<td>ADRS 5328 Eating Disorders</td>
<td>M R F M R F M R F</td>
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#### Notes

- **Outcome Statement:**
  - The program outcome is (a) **DIFFICULTY** (absolute 0) or (b) **DIFFICULTY** (relative 0) of the outcome as being one of the learning outcomes for this course.

- **Level of Content Delivery:**
  - **Introductory:** Students are not expected to familiar with the content at all at the collegiate level. Instruction and learning activities focus on areas where students have limited contact with the content level complexity. Only one or two aspects of a complex program outcomes are addressed in the given course (score of 0).
  - **Reinforced:** Students are expected to possess a basic level of knowledge and familiarity with the content at the collegiate level. Instruction and learning activities focus on areas of the content level complexity. Only one or two aspects of a complex program outcomes are addressed in the given course (score of 1).
  - **Advanced:** Students are expected to possess a deep level of knowledge and familiarity with the content at the collegiate level. Instruction and learning activities focus on areas of the content level complexity. All aspects of the program outcome are addressed in the given course (score of 3).

- **Feedback on Student Performance/Assessment:**
  - Students are asked to demonstrate their learning on the outcome through homework, projects, tests, and are provided feedback on their performance.
Texas Tech University Program Level - Curriculum Map

<table>
<thead>
<tr>
<th>Degree Title:</th>
<th>Selected Program Learning Outcomes</th>
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<tbody>
<tr>
<td>Courses in Degree Program (Syllabus)</td>
<td>Students will be able to</td>
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<tr>
<td></td>
<td>conceptualize and design independent research (PhD)</td>
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<td></td>
<td>Students will complete and present a research project (PhD)</td>
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<td>Students will be able to supervise MFTs at the collegiate level (PhD)</td>
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<tr>
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<td>Students will be able to articulate their theory of teaching (PhD)</td>
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<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Outcome (E, R, W, A)</th>
<th>Feedback (E, R, W, A)</th>
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<td>Diversity in MFT</td>
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<td>Practicum in MFT</td>
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<td>Supervision Practicum in MFT</td>
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<p>| Number of Courses | 10 |</p>
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<th>Date</th>
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<th>Degree Title:</th>
<th>Students will be able to lead graduate students in discussions and lectures of MFT content (PhD)</th>
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### SELECTED PROGRAM LEARNING OUTCOMES

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<th>Courses in Degree Program (Selecting)</th>
<th><a href="M">MFT 6342 Childhood and Adolescence</a></th>
<th><a href="R">MFT 6170 Diversity in MFT</a></th>
<th><a href="P">MFT 6305 Practicum in MFT</a></th>
<th><a href="I">MFT 6307 Supervision Practicum in MFT</a></th>
<th><a href="A">MFT 7600 Research in MFT</a></th>
<th><a href="A">MFT 7305 Internship in MFT</a></th>
<th><a href="A">MFT 8000 Dissertation</a></th>
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<tbody>
<tr>
<td>Degree Title:</td>
<td>Students will be able to lead graduate students in discussions and lectures of MFT content (PhD)</td>
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</table>

**Legend**

- **M**: Must be achieved
- **R**: Recommended
- **P**: Pass
- **I**: Internship
- **A**: Advanced

**Feedback on Student Performance/Accreditation**

- Students are asked to demonstrate their learning on the outcome through homework, projects, tests, etc., and are provided feedback (score of 1).
"The learning objective, "Students will be able to articulate their theory of teaching," is assessed primarily through the teaching portfolio required as part of the qualifying examination for doctoral candidacy. The majority of MFT doctoral students receive teaching assistantships, during which they receive practical experience and teaching mentorship. Students that do not have a teaching assistantship are given opportunities to assist with courses or guest lecture in courses to gain the practical experience and mentorship."
### MFT Courses Mapped to the AAMFT Core Competencies

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<th>Course Number</th>
<th>Course Title</th>
<th>Instructor</th>
<th>Semester Taken</th>
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<td>MFT 6311</td>
<td>Contemporary Directions in MFT:</td>
<td>Whiting</td>
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<td>Family Systems II—RESEARCH</td>
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<td>MFT 6323</td>
<td>Qualitative Methods in MFT:</td>
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<td>MFT 6342</td>
<td>Seminar—Child/Adolescent</td>
<td>Ko</td>
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<td>MFT 6342</td>
<td>Seminar—Grief and Loss:</td>
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<td>MFT 6342</td>
<td>Seminar—Violence</td>
<td>Whiting</td>
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<td>Ko</td>
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<td>MFT 6395</td>
<td>Practicum:</td>
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<td>MFT Supervision:</td>
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<td>Supervision Practicum:</td>
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1 - Fall 1st yr, 2 - Spring 1st yr, 3 - Summer 1st yr, 4 - Summer 2nd yr, 5 - Fall 2nd yr, 6 - Spring 2nd yr, 7 - Summer 2nd yr, 8 - Summer 3rd yr, 9 - Fall 3rd yr, 10 - Spring 3rd yr
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<tr>
<th>Core Competencies</th>
<th>1.1 Conceptual Skills</th>
<th>1.2 Perceptual Skills</th>
<th>1.3 Executive Skills</th>
<th>1.4 Evaluative Skills</th>
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X = The specified core competency appears to be addressed to some extent in the identified course. *= no syllabus
R = It is recommended that the specified core competency be addressed in the identified course
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<th>2. Clinical Assessment and Diagnosis</th>
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MFT MASTERS CURRICULUM

STUDENTS ENTERING THE PROGRAM (FALL 2013)

USUAL COURSE SEQUENCE

Masters degree: students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions.

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<td>MFT 6304 - Systems Evaluation</td>
<td>MFT 7000 - Advisor (if needed)</td>
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<td>MFT 6305 - Practicum</td>
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ELECTIVES
Students must take one course.

Students may choose from the following courses:
- MFT 6342 Seminar (Gender, Violence, Grief & Loss, Child & Adolescent)
- HDFS 5310 (Theories of Human Development)
- HDFS 5313 (Psychosocial Development)
- HDFS 5317 (Adolescent Development)
- PSY 5336 (Child and Adolescent Development)
- HDFS 5321 (Family Theories)
- SOC 5336 (Seminar on Family Change)
# Marriage and Family Therapy Master's Degree 2013

**Master's Degree (Leveling requirements for Doctoral Degree)**

Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.) on a course-by-course substitution basis upon approval of the MFT faculty and the Graduate School.

## Marriage and Family Therapy (18 hours)

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<td>MFT 6342 DSM-IV</td>
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<td>MFT 5302 Family Therapy II (Intergenerational)</td>
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<td>MFT 5370 Issues in Professional Development</td>
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## Electives (6 hours)

**Option 1**

*If no previous grad course work in Addictions (advisor approval)*

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**And Choose ONE of the following six courses**

- Options are limited to MFT 6342, HDFS 5310, HDFS 5313
- PSY 5336, HDFS 5317, HDFS 5321, SOC 5336

**Option 2**

*If you have previous Grad course work in Addictions, (advisor approval)*

**Choose TWO of the following six courses**

- Options are limited to MFT 6342, HDFS 5310, HDFS 5313
- PSY 5336, HDFS 5317, HDFS 5321, SOC 5336

## Research (3 hours)

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## Clinical Practice and Professional Development (18 hours)

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## Addictive Disorders and Recover Studies (9 hours)

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## Other Program Requirements (2 hours)

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**Total hours: 56**

Revised: 11/13/2014
MFT MASTER’S (Thesis Option) CURRICULUM

STUDENTS ENTERING THE PROGRAM (FALL 2013)

USUAL COURSE SEQUENCE

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ELECTIVES

Students must take one course.

Students may choose from the following courses:
- MFT 6342 Seminar (Gender, Violence, Loss, Child & Adolescent)
- HDFS 5310 (Theories of Human Development)
- HDFS 5313 (Psychosocial Development)
- HDFS 5317 (Adolescent Development)
- PSTY 5336 (Child and Adolescent Development)
- HDFS 5321 (Family Theories)
- SOC 5336 (Seminar on Family Change)

Revised 11/19/2013
## MARRIAGE AND FAMILY THERAPY
### MASTER’S DEGREE 2013
#### (THESIS OPTION)

**MARRIAGE AND FAMILY THERAPY (18 hours)**

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<td>MFT 5370 Issues in Professional Development</td>
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**ELECTIVES (6 hours)**

**OPTION 1**

*If you have previous grad course work in Addictions (advisor approval)*

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<tbody>
<tr>
<td>ADRS 5310 Introduction/Overview to ADRS</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

And Choose ONE of the following six courses:

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Options are limited to MFT 6342, HDFS 5310, HDFS 5313</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>PSY 5336, HDFS 5317, HDFS 5321, SOC 5336</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

**OPTION 2**

*If* you have previous Grad course work in Addictions, *(advisor approval)*

**Choose TWO of the following six courses:**

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Options are limited to MFT 6342, HDFS 5310, HDFS 5313, PSY 5336, HDFS 5317, HDFS 5321, SOC 5336</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

**RESEARCH (3 hours)**

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 5351 Research Methods in MFT or HDFS 5551 <em>(if MFT 5351 not offered on 2 year cycle)</em></td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

**CLINICAL PRACTICE AND PROFESSIONAL DEVELOPMENT (18 hours)**

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 5300 Intro to Clinical Practicum</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6395 Practicum</td>
<td></td>
<td>15 min</td>
</tr>
</tbody>
</table>

**ADDICTIVE DISORDERS AND RECOVERY STUDIES (9 hours)**

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADRS 6301 Couple and Family Dynamics of Addiction</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>ADRS 6315 Systems Treatment of Addictions</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>ADRS 6329 Eating Disorders and other Process Addictions</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

**OTHER PROGRAM REQUIREMENTS (2 hours)**

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 6000 Thesis</td>
<td></td>
<td>6</td>
</tr>
</tbody>
</table>

**TOTAL M.S. Hours**

59

Revised: 11/13/2014
# MFT Doctoral Curriculum

**Students Entering the Program (Fall 2013)**

**Usual Course Sequence**

Doctoral degree: Students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions. Students entering with a master's degree from an accredited MFT program may be excused from all or most of the standard curriculum (Masters level courses). Course transfers are done on a course-by-course basis, as evaluated and approved by the instructor for the course. When a student is not eligible for exclusion from one or more of the above listed courses, the student will be required to take these classes and some modification may be necessary to follow the course sequence listed below. Students are encouraged to discuss the most appropriate course sequence with their advisor.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>FALL 2013</th>
<th>SPRING 2014</th>
<th>SUMMER I 2014</th>
<th>SUMMER II 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>MFT 6323 - Qualitative Methods</td>
<td>MFT 6370 - Diversity</td>
<td>MFT 6395 - Practicum</td>
<td>MFT 6395 - Practicum</td>
</tr>
<tr>
<td></td>
<td>MFT 6342 - Child/Adolescent</td>
<td>MFT 6395 - Practicum</td>
<td>MFT 6342 - Seminar — Violence</td>
<td>MFT 6342 - Seminar CR Elective</td>
</tr>
<tr>
<td></td>
<td>MFT 6305 - Practicum</td>
<td>HDF 6352 - Quant. Methods II (ANOVA)</td>
<td>HDF 6352 - Quant. Methods II (MANOVA)</td>
<td>HDF 6352 - Quant. Methods IV (SEM)</td>
</tr>
<tr>
<td></td>
<td>MFT 7000 (advisor)</td>
<td>MFT 6342 Seminar — Violence</td>
<td>MFT 6305 - Practicum</td>
<td>MFT 6305 - Practicum</td>
</tr>
<tr>
<td></td>
<td>HDF 5349/Intro to Stats - OR</td>
<td>MFT 6305 - Practicum</td>
<td>MFT 6305 - Practicum</td>
<td>MFT 6305 - Practicum</td>
</tr>
<tr>
<td></td>
<td>MFT 5353 Research Methods - if needed</td>
<td>MFT 6305 - Practicum</td>
<td>MFT 6305 - Practicum</td>
<td>MFT 6305 - Practicum</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YEAR</th>
<th>FALL 2014</th>
<th>SPRING 2015</th>
<th>SUMMER I 2015</th>
<th>SUMMER II 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>2nd</td>
<td>MFT 6311 - Contemporary MFT</td>
<td>MFT Research - MFT 6322</td>
<td>MFT 7000 (If not taken previously)</td>
<td>MFT 6342 - Seminar CR Elective</td>
</tr>
<tr>
<td></td>
<td>HDF 6354 - Quant. Methods III (MANOVA)</td>
<td>MFT 6397 - Supervision Practicum</td>
<td>HDF 6365 - Quant. Methods IV (SEM)</td>
<td>QUALS</td>
</tr>
<tr>
<td></td>
<td>MFT 6396 - Supervision</td>
<td>Elective : HDF 6365 - Quant. Methods IV (SEM)</td>
<td>MFT 6305 - Practicum</td>
<td>MFT 6305 - Practicum</td>
</tr>
<tr>
<td></td>
<td>MFT 6305 - Practicum</td>
<td>MFT 7000 (If not taken previously)</td>
<td>MFT 6305 - Practicum</td>
<td>MFT 6305 - Practicum</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3rd</td>
<td>MFT 7395 - Internship</td>
<td>MFT 7395 - Internship</td>
<td>MFT 8000 - Dissertation</td>
<td>MFT 8000 - Dissertation</td>
</tr>
<tr>
<td></td>
<td>Elective: ADRS 6301 - Couple/Family Dynamics of Addictions (if needed)</td>
<td>MFT 7395 - Internship</td>
<td>MFT 8000 - Dissertation</td>
<td>COMPLETE P.A.O.</td>
</tr>
<tr>
<td></td>
<td>MFT 8000 - Dissertation</td>
<td>MFT 8000 - Dissertation</td>
<td>MFT 8000 - Dissertation</td>
<td>MFT 8000 - Dissertation</td>
</tr>
</tbody>
</table>

**Electives:** Doctoral students are required to take **Three Electives.**

Electives may be selected among the following courses: HDF 6365 - Quant. Methods IV (SEM); MFT 6342 - gender, Addictions, grief/loss, violence; HDF 5353 - Proposal/Grant Writing; ADRS 6301 - Addictions & the Family; ADRS 6333 - Treatment of Addictions, PSY 5335 - Psych of Trauma & Abuse, PSY 5331 - small group behavior, SOC 5315 - Violence) and/or outside the department/college.

**Notes:** MFT 7395 Internship(s) Students should be enrolled during the semester(s) they are working on internship. This may or may not be the fall semester of their third year and will vary by student and internship site.

MFT 8000 (Dissertation) It is also important to remember that once students register for dissertation credits, they must continue to be enrolled for these credits each semester until they graduate.

Revised: 11/13/2014
TEXAS TECH UNIVERSITY  
DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SERVICES  
MARRIAGE AND FAMILY THERAPY  

DOCTORAL DEGREE 2013

Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.) on a course-by-course substitution basis upon approval of the MFT faculty and the Graduate School.

<table>
<thead>
<tr>
<th>RESEARCH (15 hours)</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HDFS 6352 Quantitative Methods II-ANOVA</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>HDFS 6364 Quantitative Methods III-MANOVA</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>HDFS 6365 Quant. Methods IV – SEM</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6322 Family Systems II-RESEARCH</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6323 Qualitative Methods in MFT</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 7000 Research</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MARRIAGE AND FAMILY THERAPY (15 hours)</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 6370 Diversity in MFT</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6311 Contemporary Directions in MFT</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6342 MFT Seminar – Child/Adolescent</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6342 MFT Seminar – (e.g., violence)</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6396 MFT Supervision</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDITIONAL COURSES (12 hours)</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 6397 Supervision Practicum</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>3 Electives (e.g., HDFS 6365-SEM; HDFS 5353-Grantwriting-Writing for Publication; ADRS 6301–Addictions &amp; the Family; ADRS 6315 – Treatment of Addictions; MFT Seminar: gender, violence, grief/loss; PSY 5335- Psych of Trauma &amp; Abuse; PSY 5331 – Small Group Behavior).</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OTHER PROGRAM REQUIREMENTS (24 hours minimum)</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 6395 Practicum</td>
<td></td>
<td>15 min.</td>
</tr>
<tr>
<td>MFT 7395 Internship</td>
<td></td>
<td>6 min</td>
</tr>
<tr>
<td>MFT 7000 Advisor</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DISSERTATION (12 hours minimum)</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 8000 Dissertation</td>
<td></td>
<td>12 min.</td>
</tr>
</tbody>
</table>

| TOTAL Ph.D. HOURS | 78 |

<table>
<thead>
<tr>
<th>PROJECTED DATE FOR QUALIFYING EXAMINATION:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>Spring</td>
<td>20</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PROJECTED DATE FOR GRADUATION:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>Spring</td>
<td>20</td>
</tr>
</tbody>
</table>

Revised: 11/13/2014
APPENDIX C

18 CHARACTERISTICS OF DOCTORAL PROGRAMS
### 18 Characteristics of Texas Public Doctoral Programs

Programs included only if in existence 3 or more years. Program is defined at the 8-digit CIP code level.

<table>
<thead>
<tr>
<th>Department</th>
<th>Doctoral Degree Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Sciences</td>
<td></td>
</tr>
<tr>
<td>Marriage and Family Therapy</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Degrees Per Year</th>
<th>FY 2010-2011</th>
<th>FY 2011-2012</th>
<th>FY 2012-2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average, 2007-2009</td>
<td>5</td>
<td>2</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Graduate Rates</th>
<th>Fall 2010</th>
<th>Fall 2011</th>
<th>Fall 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students Starting 1997-1999</td>
<td>100%</td>
<td>80%</td>
<td>80%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Average Time to Degree</th>
<th>FY 2010-2011</th>
<th>FY 2011-2012</th>
<th>FY 2012-2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students Starting 1997-1999</td>
<td>4.5</td>
<td>2.5</td>
<td>4.3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employment Profile - (in field within one year of graduation)</th>
<th>Fall 2010</th>
<th>Fall 2011</th>
<th>Fall 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employed In Academia</td>
<td>3</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Employed as Post-Doctorates</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Employed In Industry/Professional</td>
<td>5</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Employed in Government</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Still seeking employment</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unknown</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Admissions Criteria</th>
<th>Description of Admission Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1) Graduate School Application</td>
</tr>
<tr>
<td></td>
<td>2) Official Transcripts</td>
</tr>
<tr>
<td></td>
<td>3) Official copy of the TOEFL scores (for international students)</td>
</tr>
<tr>
<td></td>
<td>4) GRE scores</td>
</tr>
<tr>
<td></td>
<td>5) Letters of Recommendation</td>
</tr>
<tr>
<td></td>
<td>6) Writings</td>
</tr>
<tr>
<td></td>
<td>7) Goals Statement</td>
</tr>
<tr>
<td></td>
<td>8) On-campus interview (for those invited)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Percentage of Full-time Students</th>
<th>Fall 2010</th>
<th>Fall 2011</th>
<th>Fall 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>FTS/number students enrolled (headcount) for last three fall</td>
<td>71.4%</td>
<td>70.4%</td>
<td>61.3%</td>
</tr>
<tr>
<td>Definition of Full-Time Student (FTS) is institutional by program.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Average Institutional Financial Support Provided</th>
<th>Fall 2010</th>
<th>Fall 2011</th>
<th>Fall 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>For those receiving financial support, the average monetary institutional support provided per full-time graduate student for the prior year from assistantships, scholarships, stipends, grants, and fellowships (does not include tuition or benefits). Note: This number represents the weighted average monthly salary of all Research &amp; Teaching Assistants and Graduate Part-Time Instructors.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Section</td>
<td>Description</td>
<td>Fall 2010</td>
<td>Fall 2011</td>
</tr>
<tr>
<td>---------</td>
<td>-------------</td>
<td>-----------</td>
<td>-----------</td>
</tr>
<tr>
<td>8</td>
<td>Percentage Full-time Students with Institutional Financial Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>In the prior year, the number of FTS with at least $1000 of annual support/the number of FTS.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Number of Core Faculty</td>
<td>Fall 2010</td>
<td>Fall 2011</td>
</tr>
<tr>
<td></td>
<td>Number of core faculty in the prior years</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td><em>Core faculty: Full-time tenured and tenure-track faculty who teach 50 percent or more in the doctoral program or other individuals integral to the doctoral program who can direct dissertation research.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Student-Core Faculty Ratio</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>For each of the three most recent years, average of full-time equivalent (FTE)/average of full-time faculty equivalent (FTFE) of core faculty</td>
<td>3.04</td>
<td>0.93</td>
</tr>
<tr>
<td>11</td>
<td>Core Faculty Publications</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>For each of the three most recent calendar years, average of the number of discipline-related refereed papers/publications, books/book chapters, and creative/performative accomplishments, and notices of discoveries filed/patents issued per core faculty member.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Referred Papers/Publications</td>
<td>Calendar Year 2010</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Books/Book Chapters</td>
<td>Calendar Year 2011</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Creative/Performance Accomplishments</td>
<td>Calendar Year 2012</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Notices of Discoveries Filed/Patents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Core Faculty External Grants</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>For each of the three most recent years, average of the number of core faculty receiving external funds, average external funds per faculty, and total external funds per program per academic year</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>All external funds received by core faculty from any source including research grants, training grants, gifts from foundations, etc., reported as expenditures.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of Core Faculty receiving external funds</td>
<td>Calendar Year 2010</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Average External Grant $ per Faculty</td>
<td>Calendar Year 2011</td>
<td>$67,162</td>
</tr>
<tr>
<td></td>
<td>Total External Grant $</td>
<td>Calendar Year 2012</td>
<td>$335,812</td>
</tr>
<tr>
<td>13</td>
<td>Faculty Teaching Load</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total number of semester credit hours in organized teaching courses taught per academic year by core faculty divided by the number of core faculty.</td>
<td>118</td>
<td>53</td>
</tr>
<tr>
<td>14</td>
<td>Faculty Diversity</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Core faculty by ethnicity (White, Black, Hispanic, other) and gender,</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Black</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>15</td>
<td>Student Diversity</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Enrollment headcount by ethnicity (White, Black, Hispanic, Other) and gender in program</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td></td>
<td>White</td>
<td>13</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Black</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Date of Last External Review</td>
<td>9/30/2007</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------</td>
<td>-----------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Six-year Texas Tech University Graduate Program Review</td>
<td></td>
<td></td>
<td></td>
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APPENDIX D

GRADUATE COURSE OFFERINGS
GRADUATE COURSES REQUIRED IN THE MFT CURRICULUM

The curriculum for both the master’s degree program and PhD program in MFT are governed in large part by accreditation and licensure standards. Therefore, the majority of coursework in both programs is delivered by the program, with the ADRS program offering the addictions and recovery focused courses for the MFT master’s degree. A small number of required courses for the PhD program are offered through the HDFS program (also in the College of Human Sciences). Students may choose elective courses to match their own interests, but the nature of the curriculum limits the number of opportunities to take electives (MS degree allows 1 elective, PhD allows 3 electives). A benefit of the structured curriculum is that the required courses are always available to students in sequence.

Course offerings are continuously reviewed using several mechanisms. The MFT program faculty meets for weekly faculty meetings and curriculum review is frequently a topic on the agenda. The doctoral program is accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), is required to submit annual accreditation reviews, and is required to reaccredit every seven years. The doctoral program is currently approaching an accreditation renewal under new accreditation standards and is conducting an extensive review of the curriculum. While the master’s degree program is not currently accredited, the upcoming doctoral accreditation review requires that we review the master’s degree curriculum so that at a minimum it remains consistent with the accreditation standards. However, it is the intention of the MFT program to move the master’s degree program toward accreditation during the doctoral accreditation renewal.

Both the CFAS Department Chair and the MFT Program Director receive copies of the faculty teaching evaluations for all faculty in the MFT program. Faculty teaching evaluations are used to evaluate not only faculty teaching performance, but student satisfaction with course material and the performance of the course.

All MFT courses require instructor permission for non-MFT students. The restriction ensures small graduate classes and, because we are a clinical training program working with community clients, protects the confidentiality of clients material often used as part of course instruction. Class sizes are restricted based on classroom size. However, because the programs use a cohort model, class enrollments are typically one or two cohorts (for alternating year courses). Class sizes do not exceed 25 people and are typically in the 6 to 14 person range.
COURSES IN MARRIAGE AND FAMILY THERAPY (MFT)

MFT 5300. Introduction to Marriage and Family Therapy Practice
Prerequisite: Consent of instructor. Analyses of and solutions for common problems in marriage and family therapy practice.

MFT 5302. Family Therapy II.
Prerequisite: Consent of instructor. Examination of transgenerational and object relations approaches to family therapy including the work of Bowen, Boszormenyi-Nagy, Whitaker, and Satir.

MFT 5304. Systemic Evaluation
An in-depth examination of a systemic approach to clinical evaluations. Students receive training in administration and application of systemic assessment methods.

MFT 5305. Use of the DSM, Psychopathology, and Assessment in Marriage and Family Therapy
Students will be trained to use the Diagnostic and Statistical Manual of Mental Disorders (DSM) in family therapy assessment and practice.

MFT 5322. Family Systems.
Application of general systems theory and cybernetics to family systems. Exploration of interactional patterns, information processing, family structure, family belief systems, and family life cycle transitions with an emphasis on change processes.

Study of research strategies and techniques relevant to human development, family studies, and marriage and family therapy including experience in conducting research investigations.

MFT 5370. Issues in Professional Development.
An examination of the major issues for professionals in marriage and family therapy. Emphasis on ethical standards, professional identity, and private practice issues.

MFT 6000. Master’s Thesis. (Variable credit)

MFT 6303. Family Therapy III. [Couple/Sex Therapy]
Prerequisite: Consent of instructor. An examination of family influences on human sexual functioning, basic interactional assessment, and interventions for common sexual dysfunctions. Intervening in incestuous families and the role of addiction in sexual behavior.

MFT 6311. Contemporary Directions in MFT
An examination of postmodern thought in marriage and family therapy with emphasis on the collaborative and narrative approaches.

MFT 6322. Family Systems II.
Prerequisites: MFT majors only; consent of instructor. Advanced topics and issues in systems theory. Special focus on marriage and family therapy research.

MFT 6323. **Qualitative Methods in MFT**
This course will focus on qualitative research methodologies specifically related to marriage and family therapy research. Students will gain practical experience applying qualitative methods to their research with clinical populations and family therapy topics.

MFT 6342. **Advanced Family Therapy Topics.**
Prerequisite: Consent of instructor. Advanced topics in the field of family therapy that may include family therapy with special populations and recent developments in family therapy theory and application.
- Violence
- Mindfulness
- Advanced Grounded Theory
- Grief and Loss
- Child/Adolescent

MFT 6370. **Diversity in MFT**
An examination of issues of race, ethnicity, and culture as they relate to family therapy. The course is designed to raise awareness and to train multiculturally competent therapists.

MFT 6395. **Practicum in Marriage and Family Therapy.**
Supervised experiences designed to prepare the student for involvement in marriage and family therapy and family life education. May be repeated for credit up to 48 hours.

MFT 6396. **Supervision of Marriage and Family Therapy.**
Prerequisite: Two years marriage and family therapy practicum and consent of instructor. Theory, research, and supervised practicum of family therapy supervision.

MFT 6397. **Supervision Practicum in Marriage and Family Therapy.**
Prerequisite: Completion of MFT 6396 or equivalent and consent of instructor. Course provides structured experience in supervision of marriage and family therapy students.

MFT 7000. **Research.** (Variable credit)

MFT 7395. **Internship in Marriage and Family Therapy.**
Prerequisite: Permission of Director of Marriage and Family Therapy Program. Full-time supervised internship in an appropriate setting. May be repeated for up to 12 hours credit.

MFT 8000. **Doctor’s Dissertation.** (Variable credit)

**COURSES IN HUMAN DEVELOPMENT AND FAMILY STUDIES (GHDFS)**

HDFS 5349. **Quantitative Methods I [Intro. Statistics]**
An introduction to the quantitative methods and statistics necessary to conduct research with children and families through a developmental perspective.

**HDFS 6352. Quantitative Methods II – ANOVA**
History, philosophy, and current issues relevant to the areas of human development and family studies.

**HDFS 6364. Quantitative Methods III – MANOVA**
Prerequisite: HDFS 5349, 6363. The third course in the quantitative methods sequence focusing on multivariate techniques involving multiple dependent variables in human development and family studies.

**HDFS 6365. Quantitative Methods IV – SEM**
Prerequisite: HDFS 5349, 6363. The final course in a four-course sequence on methods for conducting relationship research through a developmental perspective. A focus on Factor Analysis, Structural Equation Modeling, HLM, etc.

**COURSES IN ADDICTIVE DISORDERS AND RECOVERY STUDIES**

**ADRS 5310. Issues of Addiction and Recovery.**
Provides students with an introduction to addiction, including the nature of addiction, epidemiology, history, models, lifespan issues, treatment, and recovery.

**ADRS 6301. Couple and Family Dynamics of Addiction.**
Study of the theory and research related to addictive behaviors and couple/family relationships. Focuses on systemic etiological factors and relational outcomes.

**ADRS 6315. Systemic Treatments and Addictions.**
Study of systematically relevant treatment approaches and strategies for addictive behaviors. Focus is on treating addictions and compulsive behaviors using systemic-focused (e.g., couple and family) approaches.

**ADRS 6329. Eating Disorders: An Overview of Advanced Topics.**
Provides an overview of advanced topics related to eating disorders. Topics range from their definitions in the current literature to a continuum of treatment options and recovery.
APPENDIX E

GRADUATE STUDENT HANDBOOKS
MFT PROGRAM TRAINING
MANUAL FOR
MASTER’S GRADUATE STUDENTS

MARRIAGE AND FAMILY THERAPY PROGRAM

COMMUNITY, FAMILY, AND ADDICTION SERVICES DEPARTMENT

COLLEGE OF HUMAN SCIENCES
TEXAS TECH UNIVERSITY

AUGUST 2014

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TTU MFT Faculty 2014-2015

[For full vitae, see the MFT website]

David C. Ivey, Professor
Ph.D. University of Nebraska-Lincoln, 1993
Clinical judgment, medical family therapy, assessment, training, gender and ethnicity in marital and family therapy, treatment acceptability

Anne Prouty, Associate Professor
Ph.D. Purdue University, 1996
Women’s health; family resiliency during cancer treatment, health care providers’ perceptions of the need for family therapy as part of interdisciplinary care; family dynamics around eating disorders; medical family therapy training; supervision and mentorship in MFT training

Nicole Springer, Associate Professor of Practice, Director, Family Therapy Clinic
Ph.D. Texas Tech University, 1999
Grief and loss, Poor Pre-natal Diagnosis and Relational Coping Process, Resilience in Families Living with Down Syndrome

Douglas Smith, Associate Professor, Program Director
Ph.D. Kansas State University, 2006
Systemic intervention for Intimate Partner Violence and systemic implications of traumatic stress

Jason Whiting, Associate Professor
Ph.D. Michigan State University, 2001
Couple conflict and violence, appraisal distortions, relationship education, mindfulness, theory and qualitative inquiry

Sara Smock-Jordan, Associate Professor
Solution Focused Brief Therapy, Microanalysis

Kristy Soloski, Assistant Professor

Nichole Morelock, Assistant Professor, Associate Chair, CFAS Program Director
Ph.D., Texas Tech University, 2005
Idiosyncratic couple communication, intimacy maintenance, and positive relational behaviors.
Marriage and Family Therapy at 

Texas Tech University

Mission Statement and Learning Outcomes

2014

The Marriage and Family Therapy graduate programs at TTU provide systemic clinical training to prepare students for clinical licensure and scholarly achievement. TTU is known for its supportive and rigorous programs, and is one of the largest MFT programs in the country. Our graduates have found success in a wide variety of academic, clinical and other professional settings. There are two graduate programs in MFT at TTU: a doctoral and a master’s program.

The MFT doctoral program has a long and distinguished history of preparing students for contributions in academics, administration and clinical work. There is a strong emphasis on training in research methodology as well as theoretical and clinical sophistication. Many of TTU’s doctoral graduates can be found in academic institutions around the country. The doctoral program has been accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) since 1981.

The master’s program at TTU is a clinically-focused program that includes an emphasis in the treatment of addictions within a relational context. The MFT faculty provide training that prepares students for licensure as an MFT, LCDC, or for future doctoral work.
TTU MFT Master’s Degree Program

Educational Outcomes and Mission Statement
The mission of the Texas Tech Marriage and Family Therapy Master’s Degree Program is to provide academic and clinical training to students who will function as marriage and family therapists at the highest level of scholarly and clinical competence. The master’s degree program is conceptually grounded by the scientist-practitioner model, preparing students who will be capable of making unique contributions to the field of marriage and family therapy through: a) knowledgeable consumption and production of research and b) skilled and ethical delivery of clinical therapy. This training is done in a context that is supportive of diversity, student-faculty mentoring and support, and authenticity. The following outcomes are nested within this broad educational mission.

Student Learning Outcomes
These learning outcomes are expected for all graduates of the master’s degree program. They are divided into three primary areas that correspond to our mission. Each contains sub areas that are demonstrated by specific measures.

Upon graduating from the TTU MFT master’s degree program, students will:
1. Be knowledgeable consumers of research and understand the connection between clinical research and therapeutic intervention. They will demonstrate an ability to:
   a. Write clearly and professionally for a scholarly audience.
      i. Specific class assignments
      ii. 7000 Research project (substantive contribution to a research project)
      iii. Thesis (optional)
   b. Understand and apply quantitative and qualitative research methodology.
      i. Assignments and grades in the research courses (MFT 5351)
      ii. 7000 research Project
      iii. Thesis (optional)

2. Provide competent and ethical clinical services with a variety of relational systems and presenting problems, and practice as a licensed Marriage and Family Therapist. They will demonstrate an ability to:
   a. Understand and critically apply MFT theory with relational and individual systems.
      i. Quals Theory Paper (passing)
      ii. Practicum evaluation forms
      iii. Theory class assignments (e.g., for MFT 6311)
   b. Maintain professional records for clinical use.
      i. Case file management
      ii. Internship Evaluation
   c. Have clinical and ethical competence:
      i. Practicum evaluations and grades
      ii. Quals Theory Paper
iii. Internship Evaluation

**Faculty Outcomes**

All TTU MFT faculty are expected to contribute to the program and to the profession. It is expected that faculty will:

1. **Be active in producing and sharing high quality research.** They will:
   a. Publish in professional journals and present research at national conferences.
      i. Faculty vita
   b. Participate in funded research, including grants and contracts, and submit proposals for these projects.
      i. Faculty vita
   c. Mentor students in research projects including class papers, qualifying exams, small groups, 7000 article, and the dissertation.
      i. Co-authored publications on vita
      ii. Student feedback for class papers
      iii. Ongoing research meetings with students (e.g., small group, individual meetings)

2. **Be active contributors to the development of the profession of MFT.** This occurs through clinical practice, supervision of interns, and service in their professional spheres. Faculty will:
   a. Be involved in clinical activity.
      i. Private practice, co-therapy with students, etc.
   b. Provide clinical supervision of students and interns.
      i. Evaluations for practicum (MFT 6395)
   c. Serve in departmental, university, and national roles.
      i. Faculty vita

3. **Teach high quality graduate and undergraduate courses and socialize doctoral students in teaching and instruction.** Faculty will:
   a. Teach doctoral curriculum and provide examples and mentoring for instructors.
      i. Course instruction and student feedback
      ii. Accomplished student learning outcomes

**Program Outcomes**

The following are outcomes expected from the MFT Doctoral Program in general, and may consist of items that the faculty, staff, students and graduates of the program contribute in their various spheres of influence. These TTU MFT associates will:

1. **Contribute to MFT scholarship.** Through:
   a. Research presentations and publications.
      i. Measured by: activity in the scholarly community

2. **Provide professional clinical services.** The students, faculty and alumni will:
   a. Provide clinical services to the community locally and in other sectors.
      i. Measured by: client evaluations of therapy in our Family Therapy Clinic
ii. Measured by: activity as therapists in various professional settings including internship sites and external placements
iii. Measured by Licensure rates and job descriptions of alumni

3. **Contribute service and instruction to the profession.** Through:
   a. Alumni securing jobs in their chosen area of work.
      i. Measured by: Alumni Surveys
      ii. Measured by: Activity (e.g., service) in various professional domains from current TTU faculty and students, as well as alumni

4. **Foster an environment that is respectful of diversity in others.** Through:
   a. Creating an environment in our courses, faculty-student interaction, research and clinic services that honors the rights, safety, dignity, and well being of all members no matter their race, gender, religion, sexual orientation, socioeconomic status, national origin, religious beliefs, or physical and cognitive ability. The concept of diversity encompasses acceptance and respect that each individual is unique. To the extent possible and appropriate, interactions will be healthy and authentic, while still welcoming of differences.
      i. Meeting program benchmarks for diversity
      ii. Feedback from alumni, current students, clients, and each other
SECTION II

GENERAL INFORMATION
MAJOR STEPS IN MFT MASTER’S PROGRAM

Academic Course Work

Following admission to the program, students are assigned a temporary MFT faculty advisor. Students are responsible for contacting their advisors during pre-registration periods each semester. Students must conform to the rules of the graduate school at Texas Tech University as reflected in the current University catalogue.

Students should be registered for the number of hours that reflects the extent of their involvement in the graduate program. This applies to research courses as well as to formally structured MFT classes. Students who are not teaching assistants or research assistants need to be enrolled full-time (6 total hours over the summer sessions and 9 hours during each long semester). Students holding assistantships or scholarships must be enrolled for the appropriate number of hours each semester (including summer sessions). To be eligible for assistantships, the minimum is 9 hours each long semester and 3 to 6 hours for the summer. For scholarship recipients, the required minimum is 9 hours each long semester and 3-6 hours for the summer.

Continuous Enrollment. In no case may a student be enrolled in less than 3 hours during the long terms (Fall and Spring) and one of the two Summer terms. It is a policy of the Graduate School and the Marriage and Family Therapy Program that every student must be enrolled on a continuous basis from entry into the program to graduation. The normal course load for MFT students is 9-12 hours in each long semester and 3 hours in each Summer term. However, every student, regardless of status, MUST be enrolled in a minimum of 3 hours each long term and 3 hours in one of the Summer term. The only exception would be a leave granted by the Program Director in consultation with the MFT faculty for health or family reasons.

Failure to enroll in the minimum of 3 hours in any long semester or in at least one summer term will be taken as grounds for dismissal from the MFT program—that is, the Graduate School will be notified that you have been formally terminated from the program for lack of progress. Your readmission to the MFT program cannot be guaranteed. If you are readmitted you will have to pay additional reapplication fees set by the Graduate School and you will be required to register for extra hours reflecting the period of non-enrollment.

Plan of Study Meeting

The Plan of Study/Examination meeting with MFT faculty is held during the second semester of enrollment. The meeting is considered the candidacy examination for master students. The purpose of this meeting is to:

- Evaluate the student’s initial progress in the program
- Determine the degree of fit
- Officially approve the students’ plan of study
- Choose a permanent advisor
The meeting itself consists of a discussion and final approval of the materials submitted by the student (see Section V for specific details). Following this meeting, the MFT faculty makes a recommendation regarding continuation in the program. The transfer of courses from another institution is rarely permitted, and exceptions are generally made only in relation to standard curriculum (master’s level) courses and in the case of students who are coming from non-MFT or non-accredited MFT graduate programs. The Graduate School permits the transfer of no more than two courses (six hours) into the master’s program and up to ten courses (thirty hours) into the Ph.D. program; however, any decisions about course transfers and substitutions will be made by the program faculty.

**Practicum**

The required number of client contact and supervision hours must be completed as part of the degree plan. (See Section Practicum.) The student must apply for Associate licensure as an MFT in the State of Texas as soon as she/he is eligible. (See Section Licensure.)

**Completion of Clinic Responsibilities**

In addition to completing the required hours in practica, students must receive permission from the faculty to be released from practicum and begin internship (see Final Report of Client and Supervision Hours form in Practicum section of this manual).

**Annual Evaluations**

Students will be evaluated on a regular basis in coursework, practicum, and the fulfillment of their assistantship and other responsibilities. Formal evaluations will take place at the time of their Plan-of-Study/Examination meetings in the Spring of their first year. Opportunities for informal feedback from faculty and staff will be abundant, however, an appointment with the faculty can be scheduled during the Fall semester each year for any continuing students (meeting dates and times will be announced).

**7000 Research Project**

The master’s program is a non-thesis program. In place of a thesis, master’s students are expected to work on a 7000 research project with their advisor or one of the other MFT faculty. (See Section 7000 research project.)

**External Placement**

All students will complete a external placement as part of the master’s program (see Section External Placement)
Comprehensive Examination

A comprehensive examination is required to complete the master’s degree in Marriage and Family Therapy. There are four ways to meet this requirement. (1) Students must take and pass the national level Marriage and Family Therapy Licensure Examination. The passing grade is defined as identical to the grade identified as passing by the Texas board of Examiners of Marriage and Family Therapists. Written documentation of the score and its passing level must be provided to the Program Director. (2) The student may take an exam that is similar to the national licensure exam. This exam will be administered and graded by the TTU faculty. Pass will be an 80% or above. (3) The student may elect to meet with an examination committee of the faculty for an oral examination in the Spring term of their second year in the master’s program. This examination will cover the material in the basic MFT master’s curriculum, clinical knowledge, and the student’s 7000 research project. (4) The student may complete a master’s thesis under the direction of a thesis chair and committee.
SECTION III

PROGRAM OBJECTIVES
Texas Tech University
Marriage and Family Therapy Program – M.S.

Program Objectives

The objective of the MFT M. S. Program at Texas Tech University is to provide clinical and academic training in marriage and family therapy to students who are committed to extending the practice and profession of marriage and family therapy. Our goal is to train students who will function as marriage and family therapists at the highest level of clinical competence, and who also are capable of making unique contributions to the field of marriage and family therapy through research, teaching, and other activities extending beyond helping particular clients.

Texas Tech is committed to the principle that in no aspect of its programs shall there be differences in the treatment of persons because of race, creed, national origin, sexual orientation, age, sex, or disability, and that equal opportunity and access to facilities shall be available to all.

Students completing the master’s program in MFT will meet the educational requirements for Associate Marriage and Family Therapist licensure in Texas. Students graduating with a M. S. in MFT are required to complete 300 hours of face-to-face therapy (at least 150 hours with couples or families). The total hours are comprised of hours accumulated in clinical work at the TTU Family Therapy Clinic, approved community placements outside the Family Therapy Clinic, alternative hours and internship hours. (See Practicum and External Placement sections for further explanation of hours.)

In Texas, full licensure as an MFT requires 1500 hours of face-to-face therapy and an additional 1500 hours of therapy-related activities BEGINNING ONLY AFTER the granting of the Associate License. While other states’ requirements differ, AAMFT requires full state licensure for Clinical Membership. In addition to meeting program requirements, it is the student’s best interest to take the examination for Associate MFT as soon as possible so that the student can begin accumulating hours toward state licensure. The TTU MFT program is not designed to meet the requirements for licensure in other professions (e.g., licensed professional counselor [LPC]).

Upon completion of the M.S. with an Emphasis in Marriage and Family Therapy, we expect the student to have obtained:

- A basic knowledge of marriage and family theory and research
- A basic knowledge of the major approaches to marriage and family therapy at the level necessary to teach others about these approaches
- An ability to function at the professional level as a marriage and family therapist, including:
  - a philosophy of therapy,
  - a commitment to the professional ethics and standards established by AAMFT,
➢ an ability to evaluate his/her own strengths and limitations as a clinician,
➢ an ability to assess functional and dysfunctional family systems,
➢ an ability to diagnose and treat mental illness as defined by the Diagnostic and Statistical Manual, Version 4 (DSM-IV) and succeeding versions of DSM,
➢ an ability to conduct original research, including evaluation research on the effectiveness of family therapy,
➢ a professional maturity including a commitment to participating in relevant professional organizations and to representing the profession of marriage and family therapy to the broader community through education, policy making and other activities,
➢ a commitment to a systemic orientation.

We believe marriage and family therapy as a profession is in a unique position to advance our understanding of the human condition. The social and behavioral sciences have turned increasingly to the study and recognition of the importance of the family in its impact on societal problems ranging from behavior problems in children to depression and alcoholism in adults. Unfortunately, much of the academic work on these problems has been undertaken by those with little direct clinical experience and understanding of families and social context. On the other hand, the field of marriage and family therapy has developed with too little attention to establishing the validity of its theoretical base and clinical wisdom by a body of competent research findings.

The TTU MFT Faculty have achieved national recognition and have advanced the integration of human development and family studies with marriage and family therapy by continually highlighting the systems theory point of view. The integration of the traditional academic approaches of family studies and human development with those of marriage and family therapy can be observed in the integration of all three sources in the graduate course syllabi of all faculty, the types of research questions asked by faculty, and the broad integrative knowledge of our doctoral students, both clinical and non-clinical.

We view the academic and clinical portions of our program as equally important. Clinical training must proceed from a solid understanding of child development, adult development and aging, and marriage and family processes. To be meaningful, however, we believe the academic understanding must be applied and tested by a knowledge that comes only by working directly with couples and families. Marriage and family therapy is an enterprise that involves such direct contact. Because we do not think the clinical and academic enterprises should be separated, both are integrated and emphasized throughout the student’s training.

As a faculty, we do not teach or adhere to a single theory or school or approach to marriage and family therapy. Rather, we teach all of the major approaches and expect the student to be willing to examine each of these in her/his work with clients. We want the student to understand, compare, and evaluate the major approaches. The student’s task is to integrate them into a personally meaningful and effective approach for the purpose of helping families change, and for the purpose of helping others understand families better through teaching and research. The faculty have a collective interest in helping students understand their role in the
clients’ change process. They believe it is vital for students to recognize how their own actions and values may facilitate or hinder clients’ change.

The MFT Faculty are actively involved in all aspects of the student’s education and training and provide extensive and sustained mentoring in both research and clinical work throughout the program.
SECTION IV

POLICIES

Grievance and Dismissal Policy
Confidentiality Policy
Assistantship Priorities
Human Dignity Statement
Diversity Statement
Grade Policy
Texas Tech University  
Marriage and Family Therapy Program  

Confidentiality in Supervision and Training  

Marriage and family therapists are under an ethical obligation to avoid exploiting the trust and dependency of students and supervisees (AAMFT Code of Ethics, Section 4.1, August, 1991). Students are expected to share personal information about themselves and their family of origin in MFT classes and in supervision. We believe that dealing with such material is essential to the process of MFT training. Such information will be treated sensitively and will not be shared with anyone outside of fellow class members and the MFT faculty.

Section 4.3 of the AAMFT Code of Ethical Principles defines the limits of confidentiality for supervisees. The Texas Tech University Marriage and Family Therapy Program has a clear responsibility to protect clients under the care of student therapists from unethical or incompetent practices (see AAMFT Code of Ethical Principles for Marriage and Family Therapists, Sections 1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 3.1, 3.2, 3.5, 3.6, 3.8, & 4.2). We have an additional responsibility to Texas Tech University to protect the integrity and well-being of the Marriage and Family Therapy program as well as an obligation to the profession of marriage and family therapy to prevent unethical and/or incapacitated individuals from entering the profession.

In response to our ethical obligations to avoid exploiting students, any decision regarding the fitness of any student to continue training as a marriage and family therapist must be made in consultation with the entire MFT clinical faculty. Comparative evaluations of students must be made among faculty members. Such information will not be shared with other students. For these reasons, the MFT clinical faculty must operate as a confidentiality unit meaning that information defined as sensitive will be retained within the group. The information gathered in supervision, classes, or individual conversations between students and faculty members, which is relevant to the well-functioning and ongoing evaluation of the student, must be shared among the clinical faculty. Students retain responsibility for those things which they choose to share with faculty members. This policy on supervisee confidentiality is in accordance with Section 4.3, (d) of the AAMFT Code of Ethics.

Another confidentiality group consists of the mentors (advanced doctoral students) and the instructor in the supervision course and supervision practicum. These students and this instructor together supervise first year master’s and doctoral students throughout the first year. As Supervisors in Training, the mentors are learning about and experiencing supervision of more junior therapists. Of necessity, they must individually and collectively discuss first year students with the instructor and their colleagues in the class as part of both these courses. As with the faculty confidentiality unit, the mentors treat all information discussed as confidential.

With these two exceptions, information related to student’s clinical performance will not be
shared with other non-clinical faculty or administration. Should a student be required to enter personal therapy and/or cease doing therapy for remedial reasons, other faculty members outside of the MFT program, including administrators, will be informed only that the actions are being taken for personal reasons. This will also be MFT policy should personal information concerning a student be related to the dismissal of a student from the program. If a student appeals any decision regarding standing in the program, then confidentiality cannot be maintained in the appeal process. It is imperative that supervisee confidentiality be maintained within these outlined parameters.

Successful MFT training and supervision is, in large part, dependent on the quality of relationships between faculty and students. These relationships are built over time. The MFT faculty are committed to the respect and dignity of students (See Mission Statement and Program Outcomes). We feel that maintaining a faculty confidentiality unit is the most effective way of dealing with students’ personal issues in a respectful manner, allowing us to fulfill our obligations to clients, Texas Tech University, and the profession of marriage and family therapy.
Diversity Statement

Texas Tech University
Graduate Programs in Marriage and Family Therapy

As stated in the Statement of Human Dignity in the MFT Program Manual, the Texas Tech Marriage and Family Therapy program adopts a posture of respect with regard to understanding and accepting the variability among social, religious, cultural, and other groups with regard to the worth and uniqueness of each individual. We endorse and uphold the anti-discrimination and affirmative stance of our University and embrace the plurality of the human experience as an invaluable resource to the quality and vitality of our program and profession. We define diversity in terms of the variability and differences between people according to a wide and potentially inexhaustible set of concepts including but not limited to: race, ethnicity, religious affiliation, sexual orientation, gender and gender identity, physical disability, and socio-economic status (See Mission Statement and Learning Outcomes document: Program Outcomes number 3).

Our rationale for establishing this definition rests in our philosophy that all humans must be afforded dignity and respect and that the oppression of any member or group within a society occurs to the detriment of all members of that society. Also, we believe that without intentional intervention to resolve sources of discrimination and oppression, all social systems contribute to the continuation of the oppression of underprivileged individuals and groups.

We recognize that our goal of achieving a more diverse program entails accepting that our goals are aspirations that will not be completely fulfilled. Nevertheless, we value the process of seeking human dignity and we attempt this in many ways, including: prioritizing program resources to recruit and maintain a diverse faculty and student body, promoting an atmosphere conducive to mutual respect for individual and group differences, identifying aspects of the program which promote disadvantages for marginalized groups or individuals, and implementing interventions to resolve and eliminate identified problem areas.

This process involves efforts to value diversity in ways that are not always easily measured (e.g., beyond ethnic breakdown of students). For example, we try to teach and emulate respect for various viewpoints, and infuse this type of instruction and content into all of our classes. However, even though it is not always adequate or measureable, we do take specific steps to help make this happen.

Our benchmarks for achieving diversity include the following:

1. We assess the composition of the faculty, supervisors, student body, and clinical populations in terms of diversity definition of the program. This is done with our annual report to COAMFTE as well as faculty reviews during meetings and yearly retreats.
2. During recruitment we do several things in regard to our goals for diversity:
a. We invite applicants to speak to “unique contributions to diversity” in their application statements (e.g., first to go to college, unique background, etc.).
b. We calculate the number of applications of diverse status, as well as the numbers accepted and enrolled in the program.
c. When appropriate, we use department and graduate school funds to help bring in diverse students out for interviews where financial concerns exist.
d. We ask questions of our interviewees regarding their appreciation and comfort with diverse individuals in potential clinical settings.
e. We attempt to connect with diverse faculty and potential students at national conferences.

3. In general we try to help diverse students identify appropriate financial or scholarly support (e.g., scholarships, research opportunities). Specific scholarships are targeted for improving diverse representation among our cohorts, and we seek to keep students aware of opportunities such as the minority student awards from AAMFT. We have so far been successful in securing the AAMFT/SAMHSA Minority Fellowships, as well as other awards.

4. We discuss in practicum and other classes issues of diversity, which generates an openness regarding this topic that can lead to further in- and out-of-class discussions.

5. We have a doctoral class on diversity (MFT 6370) that focuses on cross-cultural research and diversity in clinical populations.

6. We have encouraged members of the MFT faculty to act as official Texas Tech University mentors for students of color at the undergraduate level.

7. All faculty are required to complete Employee Non-Discrimination training every two years at TTU.

8. In general we try to foster a spirit of respect and tolerance for others and take corrective action when we feel like an individual’s rights or dignity are not being protected. This has happened with individual meetings with the Program Director as well as meetings between faculty and students. When significant problems arise, policies are in place for the filing of complaints or grievances.
Texas Tech University
Graduate Programs in Marriage and Family Therapy

Grade Policy

A final letter grade of A or B must be earned in all required master's and doctoral coursework in order to satisfy the MFT program graduate degree plan requirements. Final course grades of C or lower will not be accepted or applied to your degree plan. Any course in which a final grade of C or lower is earned must be repeated until a grade of A or B is achieved. An alternative course may be substituted if the required course will not be offered within a reasonable timeframe. Any substitutions must be pre-approved by the MFT Program Director; certain specialized courses may not have any acceptable substitutions. In such instances, the student must wait until the required course is offered again within the program or department.
Setting Priorities for Graduate Assistantships

The MFT Program and the Department of Community, Family, and Addiction Services have limited funding for graduate assistantships. Responsible stewardship requires that we use the available resources to support both the teaching and research functions of the department. Every MFT student is required to apply for Fall and Spring, work-study funding and, separately, for Summer work-study to be eligible for an assistantship.

Assistantship assignments will be based on the following criteria.

Criterion 1. Priority for funding will be given to students who accept the total amount of the work-study funding offered. Failure to apply for work-study funding will disqualify the student for an assistantship.

In our experience, almost all MFT graduate students qualify for some work-study funding. Work-study funds are applied directly to an assistantship, i.e., these funds do not add to the assistantship stipend, but do reduce the department’s expense for the assistantship.

However, some students elect to take student loans that reduce the work-study funds available on a dollar for dollar basis. The decision to take a loan instead of work-study means that the department pays a greater share of the assistantship, reducing resources for other students.

Criterion 2. Priority for funding will be given to students in the first two years of the doctoral program who are performing satisfactorily and making steady progress toward finishing the doctorate. If the qualifying doctoral students can be supported in their first two years, assistantships will be made available to outstanding master’s students in their second or first years in the program.

The Texas Tech MFT program has been recognized for its excellence in training doctoral students who are competent in research, therapy, and teaching. Priority is given to doctoral students making steady progress toward finishing the doctoral program on time. Because funds are limited, it may not be possible to support all doctoral students. Doctoral students not performing at the expected level will not be supported. Once the needs of the doctoral program are met, available funding will be targeted to outstanding master’s students who are deemed likely to continue into the doctoral program.

Criterion 3. Doctoral students (a) meeting the first two criteria, (b) who are beyond their first year, and (c) who have not taught previously will be considered as having a high priority for teaching assistantships. However, next priority for teaching assistantship funding will be given to those students meeting the first two criteria who have taught previously and who have received satisfactory student and faculty
assessments of their teaching. Teaching assistantships will generally be limited to a maximum of two years.

Supervised teaching is required of all doctoral students, with or without an assistantship. Every effort will be made to provide teaching assistantships to second and third year doctoral students meeting Criteria 1 and 2 and who have not taught previously. When possible, teaching assistantships will be continued for students who have positive faculty and student evaluations of courses they have taught previously. Normally, teaching assistantships will be limited to a maximum of two years to allow the graduate student also to experience a research assistantship.

Criterion 4. Other assistantships will be provided based on the first two criteria and available funding.

a. Faculty with outside funding or start-up funds will have priority in selecting assistants.

b. The Program Director normally will be provided with a 50% time graduate program assistant across the academic year, including summer.

c. Faculty who have had outside funding in one or both of the previous two years will have next priority after funded faculty and the Program Director.

d. If additional funding is available, assistantships will be assigned by the Program Director and Department Chair to reflect the needs of the MFT program as a whole.

Obviously, funding from outside the department conserves the department’s resources. Faculty with such resources will have priority in selecting students for assistantships (master’s or doctoral-level).

Because of the nature of the duties of the Program Director, it is a high priority that s/he have a 50%-time graduate assistant to help with recruitment, interviews, correspondence, publicity, record keeping and data analysis, reports, etc.

Often, when funding on a project ends, there are unfinished matters of data collection and analysis that require help from a graduate assistant to complete. Because future funding often depends on publishing and presenting data from previous studies, such assistance increases the chances of future funding.

There are other reasons to provide graduate assistants to faculty—special projects, preparing grant proposals, conducting research/data collection/data analysis, etc. Such assignments are necessarily left to the discretion of the Program Director and Department Chair.
Texas Tech University
Marriage and Family Therapy Program

Grievance and Dismissal Policies and Procedures
for Graduate Students

In almost all cases, it is preferable to handle a grievance informally at the level at which the grievance has arisen. Specifically with regard to students in the MFT Program, the individual with a grievance should attempt to resolve it directly with the other person or persons involved. If satisfactory resolution is not reached, the individual should bring the grievance to the Director of the MFT Program who will attempt to help the parties reach a resolution.

If the issue still remains unresolved, the individual with the grievance should initiate a formal grievance process by writing a letter to the Department Chair outlining the grievance, summarizing attempts to reach resolution, and requesting the initiation of the formal grievance procedure. The appeal is on the basis of whether or not appropriate procedures were followed. The goal of the appeals process is not to resolve the issue, but rather, to ensure that the student was treated fairly following established procedures. At this point, the Department Chair may refer the grievance to the Departmental Executive Committee.

If satisfactory resolution of the grievance is not achieved with the Departmental Executive Committee the individual would next bring the issue to the Associate Dean of Academics, and, if necessary, then to the Dean of the College. The next level of appeal is the Dean of the Graduate School (see Figure 1).

With both the informal and formal grievance process, it is crucial to proceed in a timely manner. Normally, the individual with a grievance would initiate the resolution process as soon as possible after the incident or incidents in question occurred, within 60 days at the latest. According to graduate student handbook, grievances of discrimination must be filed within 30 days of the alleged incident. Formal written appeals of grades must be submitted within 45 days of the next long semester. An electronic copy of the student handbook can be found at http://www.depts.ttu.edu/dos/handbook/. At each level, every effort should be made to attempt to resolve the grievance within two weeks.

Many of the established procedures have been developed in compliance with existing legislation and the associated procedures have been articulated in major documents, including the Graduate Catalog, the Graduate School’s Manual for Graduate Advisors, Code of Student Affairs, and Operating Systems and Procedures Manual. Among the legislatively-based areas of University compliance are Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 (45 CFR 86), and Sections 503 and 504 of the Rehabilitation Act of 1973 (all requiring nondiscrimination on the basis of race, color, national origin, religion, sex or handicap) plus the Age Discrimination in Employment Act of 1957 and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974 and Executive Order 11246 as amended (nondiscrimination due to age or toward disabled veterans of Vietnam era). This is not an exhaustive list but each item encompasses a particular pattern of compliance with associated procedures for assuring accountability.
FIGURE 1

APPEALS PROCESS

GRIEVANCE BY A STUDENT
begins with
Individual Student

MFT Program Director

Department Chair

Departmental Executive Committee

Associate Dean for the College of Human Sciences

Dean of the College of Human Sciences

Vice President for Students Affairs

President
Texas Tech University

DISMISSAL OF GRADUATE STUDENT
begins with
MFT Faculty

Graduate Dean

Provost for Academic Affairs

1 Grievance involves access to personal records, sex discrimination, sexual harassment, discrimination based on disability.

2 Grievance involves performance in the clinical role, publications and co-authorship, grade appeals, appeals for exceptions to program requirements, assignment to and performance in the assistantship role, suspensions, probation, and dismissal.
SPECIFIC AREAS OF CONCERN

Performance in the Clinical Role

Students and faculty in the MFT Program must adhere to the AAMFT Code of Ethical Principles for Marriage and Family Therapists, even if the individual is not a member of AAMFT. Complaints and grievances related to clinical supervision or the student's clinical role should first be discussed with the clinical supervisor. If the issue is not resolved, the grievance procedure should follow the steps outlined previously. It is crucial that clinical training occur in a climate that is respectful of clients, therapists, and supervisors. Feedback on an individual's work should be made specifically and directly to the individual involved. It is important to state positive aspects of the individual's performance as well as areas of needed change in a respectful manner, using specific examples. Comments made in the observation room during a case should be respectful and shared with the therapist who is being observed. If the grievance involves unethical behavior on the part of an AAMFT member (Student, Associate, Clinical AAMFT member or Fellow), the individual bringing the grievance is also encouraged to report the alleged unethical behavior to the AAMFT Ethics Committee in the national office in Washington, D.C.

Publications

In conducting research and in assigning authorship to publications, students and faculty in the MFT Program follow the relevant regulations on conduct of research with human participants as well as the AAMFT Ethical Principles. Assigning authorship credit follows the principle of assigning credit in proportion to each individual's contribution. It is very helpful to negotiate, in advance, responsibilities and authorship issues on joint research projects. A written contract agreed to by all parties prior to beginning a joint research project is highly recommended.

Co-authorship by a faculty member and a student on work done in the course by the student is not automatic. The faculty member's contribution would have to be substantial, going beyond editing or giving comments on papers at the level ordinarily provided by the instructor of a course. Similarly, students who conduct library research or data analyses for a faculty member as part of an assistantship or independent study would not ordinarily receive co-authorship. In the event of substantial contributions, co-authorship by faculty members and students is warranted. For more details refer to the Publications Manual of the American Psychological Association, 5th. Edition, Section 1.03, pp. 6-7.

Access to Personal Records

Guidelines governing student access to personal records and the procedures for
challenging information in these records are contained in the University records policy which is printed in the Directory of Classes each semester. The records policy may also be viewed at http://www.depts.ttu.edu/opmanual/OP01.04.pdf.

**Sex Discrimination**

Title IX of the Higher Education Amendments of 1972 prohibits discrimination on the basis of sex in student programs and activities. Complaints concerning any violation of Title IX should be directed to http://www.depts.ttu.edu/studentresolutioncenter/ or 742-SAFE.

**Sexual Harassment**

Student concerns about sexual harassment which involve faculty or staff should be directed to http://www.depts.ttu.edu/studentresolutioncenter/ or 742-SAFE. Harassment incidents among students should be reported to http://www.depts.ttu.edu/studentresolutioncenter/ or 742-SAFE.

**Students with Disabilities**

Students wanting to file a complaint based on disability discrimination should start by filing a complaint with the Campus ADA Coordinator located in West Hall 335. The phone number for the office is 806-742-2405. The student can also obtain the email address of the current Campus ADA Coordinator from the Student Disability Services office. The mailing address of the Campus ADA Coordinator is: Box 45007, Lubbock, Texas 79409. The Campus ADA Coordinator will begin an investigation of the allegation within 10 calendar days of receiving the complaint and will issue a ruling within 20 calendar days. Should the investigation require a longer period of time, the complainant will be notified within the 20 calendar days of the anticipated ruling date and the reasons for the need for extended time.

**Grade Appeals**

Students who wish to appeal a course grade should consult the Office of the Dean of the College of Human Sciences where copies of the grade appeals policy, procedures, and forms are available. Note that grades may be appealed through this process only when there is demonstrable evidence that prejudice, or arbitrary or capricious action on the part of the instructor has influenced the grade. A student who wishes to appeal the results of a comprehensive examination, alleged excessive requirements by an advisor or committee, and other matters relating strictly to graduate education, may appeal under procedures established by the Graduate School. The relevant policy is contained in section 64.07 of the Texas Tech Operating Systems and Procedures Manual.

**Appeals for Exceptions to Program Requirements**

If the requirement at issue is a MFT Program requirement, the student should present a
written request to the MFT Program Director. The Director will consult with the MFT faculty, and respond in writing to the student. If the matter is not resolved at the program level, the student should follow the appeals procedure already outlined, beginning with the Department Chair. Appeals for waivers of particular courses based on previous course work should be made to the program director and the faculty member primarily responsible for the course in accordance with departmental procedures. However, waiver of a required course must be formally approved. If the student is not satisfied, the above grievance procedures apply.

**Assignment to and Performance in Assistantship Role**

Complaints and grievances related to employment within the department should first be discussed with the supervisor in charge of the position. If the issue is not resolved the student should present the matter in writing to the Department Chair. If the student is still not satisfied, he/she may ask that the matter be presented to the Executive Committee of the department for resolution. Beyond this level, the University’s grievance mechanism is to be invoked. The Office of Affirmative Action and Personnel Relations located in Room 163 of the Administration Building should be contacted in such cases.

**Suspension, Probation, and Dismissal**

The University Catalogue specifies the circumstances under which students may be put on probation, suspended, or dismissed for academic reasons. In addition, the MFT graduate faculty may probate, suspend, or dismiss from the program any student who does not fulfill the academic requirements specified in the graduate student manual handbook or any student whose work over a period of time shows a demonstrable lack of progress toward their degree. Usually such action would be initiated by the MFT Faculty and communicated in writing to the student, the student's advisory committee, and the Department Chair. The student may request a meeting with the MFT faculty to discuss the matter and/or may appeal to the Department Chair. The levels of appeal follow those already stated.

Because it is a clinical program, it may be necessary to dismiss a student from the MFT Program for other than academic reasons. One of the most difficult tasks facing a faculty occurs when a student's behavior is deemed to be so inappropriate as to warrant major concern as to whether the person is emotionally, interpersonally, or ethically suited for entry into the profession of marriage and family therapy. With regard to ethical matters, students are required to be familiar with and abide by the AAMFT Code of Ethical Principles for Marriage and Family Therapists, as well as the Texas Tech Code of Student Conduct. Web addresses containing these codes are:
http://www.aamft.org/resources/LRMPlan/Ethics/ethicscode2001.asp and
The professional role is a decidedly sensitive one. Responsibility must be assumed by the MFT faculty to assure that those who might pose serious risks to clients and the standards of the profession (due to emotional instability or questionable ethical standards) are not allowed to enter the profession. Although such measures are most unpleasant, such decisions occasionally are necessary in considering the welfare of everyone involved. Such issues may transcend effective adjustments via feedback provided in day-to-day supervision and instruction. Accordingly, when such problems occur, the MFT faculty convenes to specify its concern in writing to the student and the student’s advisor. Where possible, this statement specifies the particular behaviors in question, the desired changes and means of addressing them, and a time for re-evaluation of the concern where appropriate. If remedial action on the part of the student is not deemed feasible, the student should be informed about the reasons why he/she is regarded as unsuitable for this particular MFT training program.

The written statement will accompany full verbal feedback to the student, particularly from faculty or others with information from direct observations of the student. If the student feels the matter has been misrepresented, she/he will reply to these concerns and present his/her perspectives on the matter. The matter may be arbitrated at the level of the MFT Program level or the recommended measures invoked (e.g., suspension from the program, pending a student’s attempts to resolve the problem via therapy). At the end of the stated time or process the matter would be reviewed and, in the absence of sufficient change in the desired direction, measures would be taken to dismiss the student from the program.

At any point in this process, the student has a right to appeal. Because these cases are unusually sensitive, students are reminded that they are not required to appeal and that the matter may be resolved without bringing it to the attention of the full graduate faculty. If the student does wish to appeal a decision of this type, he/she may do so, in writing, to the Department Chair. From that point, the appeal procedure follows that already stated.

Usually students who would be dismissed under these circumstances would be dismissed from the graduate program of the department. However, under some circumstances, a dismissal decision may specify that the student retains the right to apply for admission to other graduate programs within the department.

**Academic Conduct**

Students are expected to hold themselves to high standards of ethical conduct in all phases of their academic work. Students should understand that such actions as plagiarism or cheating, or attempts to do so, are unethical and will not be condoned.

**PAPERS CANNOT BE SUBMITTED TO FULFILL REQUIREMENTS FOR MORE THAN ONE COURSE.** To do so constitutes academic misconduct. This is not meant to deter students from further development of a research or topical area through extension of previous work. Students should consult with the course instructor to be clear on the acceptability of papers that are based on prior
coursework or other projects.

Academic misconduct may result in a course grade of F for coursework or, in some circumstances, dismissal from the program and suspension or dismissal from the University.
Texas Tech University  
Marriage and Family Therapy Program  

Statement of Human Dignity

The Texas Tech Family Therapy Program is dedicated to the idea that all human beings are of worth and value simply by virtue of their humanity. We believe that all of our professional activity as family therapists and family therapy trainees should reflect this value and worth by according our clients and each other basic human dignity and respect. This is a core value of our training program.

The Texas Tech Family Therapy program respects and encourages the expression of a wide diversity of personal values and behavior. As family therapists, we are aware that we will encounter clients, colleagues and trainees with values and behaviors that are different from our own, perhaps even in opposition to our own. In our role as helping professionals, the accordance of dignity and respect to all humans requires us to help those who seek our expertise, regardless of how we might personally feel about their values, behavior and lifestyle.

Clearly, part of our role as helping professionals involves responding appropriately to illegal behavior or behavior that endangers others who are not willful, knowledgeable participants. However, it is not our professional role to evaluate and respond to other people's behavior based on our own code of ethics and conduct. It is reflective of the devaluation and disrespect of humans when we behave in a judgmental manner toward those who conduct themselves in a manner that we might not find appropriate for our own moral or ethical code.

Refusal to provide family therapy services to those whose values and behavior are not reflective of our own devalues and denigrates those human beings. This principle also applies to lecturing or moralizing about behavior that is different from our own, but is conducted in a manner that is reflective of the participants' values.

We believe that an underlying concept in dealing with those whose values and behaviors are different from ours should be:

"If I do not respect the values and choices of others who are different, then how can I possibly expect others to respect me and the values and choices I have made?"

As a family therapy program, we understand that personal values are very important. We also believe that the core values of the program and profession of marriage and family therapy are important for those who wish to pursue the profession. There may be times when personal values come in conflict with program and professional values. It seems very important for each of us to evaluate personal and professional values in an ongoing manner. If maintaining the program value of basic human dignity cannot be accomplished without compromising an individual’s personal values, it is the duty of that person to seriously evaluate his/her continued participation in the profession. It is also the duty of the program to make a similar evaluation of the wisdom of offering continued training to persons who cannot accept core professional values.
SECTION V

PLAN OF STUDY

Forms from Graduate School
Degree Plan and Courses Forms
DEPARTMENT OF APPLIED AND PROFESSIONAL STUDIES
MARRIAGE AND FAMILY THERAPY PROGRAM

PLAN OF STUDY/EXAMINATION MEETING

PRELIMINARY EXAMINATION (Masters Students)

The purpose of the Plan of Study/Examination meeting is to:
1. Confirm the fit between the student’s goals and the goals of the MFT Program
2. Make a decision as to student’s continuation in the MFT Program (Recommended, Conditional Continuation, Not Recommended)
3. Approve the Plan of Study
4. Develop a plan for remedial work if needed
5. Confirm the student’s choice of the Advisor

Please adhere to the following instructions in preparing materials for your Plan of Study/Examination meeting. The meeting is scheduled with the MFT Faculty for the Spring Semester of your first year in the Master’s Program.

I. In preparation for the informal meeting in the Fall, prepare the following materials and bring them to the meeting:
   1. An MFT degree plan (program form)
   2. Graduate School Degree Plan (Graduate School form)

II. In preparation for the informal meeting in the Spring:
   1. Submit a clean version of the program degree plan form, the Graduate School Degree Plan and the sequence chart to the program secretary.
   2. Distribute evaluation forms to the faculty: Request that every departmental faculty member from whom you have taken courses fill out the faculty evaluation form and return it directly to the MFT Program Director (top of form should be filled out by the student before distributing).
   3. Decide on an Advisor: You were assigned a temporary advisor when you entered the program. At the time of the Spring Plan of Study/Examination meeting, you must name a faculty member as your advisor. This may be the faculty member originally assigned as a temporary advisor or another MFT or Addiction and Recovery Studies full-time graduate faculty member.
TEXAS TECH UNIVERSITY  
DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SERVICES

MARRIAGE AND FAMILY THERAPY  
MASTER'S DEGREE 2014  
(THESIS OPTION)

MASTER'S DEGREE (Leveling requirements for Doctoral Degree)  
Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.) on a course-by-course substitution basis upon approval of the MFT faculty and the Graduate School.

<table>
<thead>
<tr>
<th>MARRIAGE AND FAMILY THERAPY (18 hours)</th>
<th>Semester</th>
<th>Hours</th>
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<tr>
<td>MFT 5322 Family Systems</td>
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<td>MFT 6342 DSM-IV</td>
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<tr>
<td>MFT 5302 Family Therapy II [Intergenerational]</td>
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<td>MFT 5304 Systemic Evaluation</td>
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<td>MFT 5370 Issues in Professional Development</td>
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<tr>
<td>MFT 6303 Family Therapy III [Couple/Sex]</td>
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**ELECTIVES (6 hours)**

**OPTION 1**
*If no previous grad course work in Addictions (advisor approval)*

| ADRS 5310 Introduction/Overview to ADRS |          | 3     |

*And Choose ONE of the following six courses.*

Options are limited to MFT 6342, HDFS 5310, HDFS 5313  
PSY 5336, HDFS 5317, HDFS 5321, SOC 5336

**OPTION 2**
*If you have previous Grad course work in Addictions, (advisor approval)*

*Choose TWO of the following six courses:*

Options are limited to MFT 6342, HDFS 5310, HDFS 5313,  
PSY 5336, HDFS 5317, HDFS 5321, SOC 5336

**RESEARCH (3 hours)**

| MFT 5351 Research Methods in MFT or HDFS 5351 (if MFT 5351 not offered on 2 year cycle) |          | 3     |

**CLINICAL PRACTICE AND PROFESSIONAL DEVELOPMENT (18 hours)**

| MFT 5300 Intro to Clinical Practicum |          | 3     |
| MFT 6395 Practicum                  |          | 15 min|

**ADDICTIVE DISORDERS AND RECOVER STUDIES (9 hours)**

| ADRS 6301 Couple and Family Dynamics of Addiction |          | 3     |
| ADRS 6315 Systems Treatment of Addictions        |          | 3     |
| ADRS 6329 Eating Disorders and other Process Addictions | | 3 |

**OTHER PROGRAM REQUIREMENTS (2 hours)**

| MFT 6000 Thesis |          | 6     |

TOTAL M.S. Hours **59**

Revised: 11/10/2014
TEXAS TECH UNIVERSITY
DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SERVICES

MARRIAGE AND FAMILY THERAPY
MASTER'S DEGREE 2014

MASTER'S DEGREE (Leveling requirements for Doctoral Degree)
Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.)
on a course-by-course substitution basis upon approval of the MFT faculty and the Graduate School.

**MARRIAGE AND FAMILY THERAPY (18 hours)**

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**ELECTIVES (6 hours)**

**OPTION 1**

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</table>

*And Choose ONE of the following six courses.*

Options are limited to MFT 6342, HDFS 5310, HDFS 5313
PSY 5336, HDFS 5317, HDFS 5321, SOC 5336

**OPTION 2**

*IF you have previous Grad course work in Addictions, (advisor approval)*

*Choose TWO of the following six courses:*

Options are limited to MFT 6342, HDFS 5310, HDFS 5313,
PSY 5336, HDFS 5317, HDFS 5321, SOC 5336  

**RESEARCH (3 hours)**

MFT 5351 Research Methods in MFT  
or HDFS 5351 (if MFT 5351 not offered on 2 year cycle)

**CLINICAL PRACTICE AND PROFESSIONAL DEVELOPMENT (18 hours)**

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<tr>
<td>MFT 6395 Practicum</td>
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**ADDICTIVE DISORDERS AND RECOVER STUDIES (9 hours)**

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<td>ADRS 6329 Eating Disorders and other Process Addictions</td>
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**OTHER PROGRAM REQUIREMENTS (2 hours)**

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**TOTAL M.S. Hours**

56

Revised: 11/10/2014
**Electives**

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<th>Fall 2015</th>
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<td>MFT 6939 - Practicum</td>
<td>MFT 6942 - DSM</td>
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<td>MFT 6304 - Group Therapy</td>
<td>MFT 6303 - Couple’s Therapy</td>
<td>MFT 6302 - Group Therapy</td>
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<tr>
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<td>MFT 6301 - Research Methods</td>
<td>MFT 6300 - Thesis</td>
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**Second Year**

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<td>ADMS 6910 - Internship</td>
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<td>ADMS 6910 - Internship</td>
<td>MFT 6000 - Thesis</td>
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</table>

**In addition,**

- MFT 6935 - Internship
- MFT 6939 - Practicum
- MFT 6942 - DSM

**MFT Master's Thesis Option Curriculum**

Usual course sequence: Students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions.

Students entering the program (Fall 2014)
TEXAS TECH UNIVERSITY
DEPARTMENT OF APPLIED AND PROFESSIONAL STUDIES
MFT PROGRAM

REPORT OF CANDIDACY EXAMINATION (Master’s)

Name_________________________ Date______________

I. Committee Members Attending:
_________________________ (Chairperson) _______________________
_________________________ _______________________
_________________________ _______________________

II. Strengths:

III. Concerns:

IV. Plan for Remediation:

V. MFT Faculty Action:

____________ Continuation in Program Recommended
____________ Conditional Continuation Recommended (letter attached)
____________ Continuation in Program Not Recommended (letter attached)

VI. Approved: ____________________________

MFT Program Director
EXAMPLE

TEXAS TECH UNIVERSITY—THE GRADUATE SCHOOL
PROGRAM FOR THE MASTER'S DEGREE AND ADMISSION TO CANDIDACY

After admission to a degree program, every applicant for the master's degree is required to complete and submit one copy of this form to the Graduate School for approval before the second semester of enrollment in the program.

CIP Code: 
Date: 

Full legal name: 
Student R.#: 

Current mailing address (include zip code): 

Degree sought: 
MS 
Major: 
MFT 
Expected Graduation Date: 

Previous Degree(s) 
Institution(s) 
Year(s) Awarded 

Circle one: 
Non-Thesis 
Thesis 
(Complete committee and thesis title sections below—not for report option.) 

Thesis committee (at least two Graduate Faculty members; indicate chairperson):

Thesis title (if known at this time, otherwise list area of thesis research):

Coursework (prefix and number as it appears in catalog or on official transcript):
See TTU Graduate Catalog for hours required for degree sought.

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<th>Leveling</th>
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</table>

*In order for transfer courses to be entered on the TTU transcript, courses must be given the TTU equivalent number. For example, MGMT 630 at TAMU may be equivalent to MGT 5371 at TTU. Please indicate when course was (or will be) taken and provide an official transcript to the Graduate School. No more than 6 hours may be transferred on a 35-hr. and 9 on a 46-hr. program. Grades from transfer courses will not appear on TTU transcripts. Grades below B are not accepted on transfer work.

Signature of Graduate Advisor of major department

Signature of Graduate Advisor of minor dept.(if declared)

Graduate Dean

Date

Approved [ ] Conditional Approval [ ] Not Approved [ ]

Remarks or Conditions of Approval:

Approval of this form by the Dean of the Graduate School merely indicates that the proposed program is acceptable; it carries no assurance of the applicant's attainment of a degree. Changes to this program may be made only with the approval of the department concerned and the Graduate School, using the form available in the Graduate School. Conditions for approval for admission to candidacy must be met before the proposed semester of graduation. Revised 3/8/10.
Texas Tech University
Marriage and Family Therapy Program

Moving From the Master’s Program to the Ph.D. Program.

Admission to the MFT doctoral program following completion of the master’s program is not automatic. The MFT master’s program is an opportunity for students and faculty to examine the match between the student’s skills, knowledge, and interests and the MFT program. Master’s-level MFT students who are interested in entering the MFT doctoral-level program must reapply for the Ph.D. in MFT.

Students who successfully complete the master’s program and are interested in entering the MFT doctoral program are required to submit a complete application to the program. They do not have to pay another fee, submit transcripts, or re-take the GRE. If they are admitted, they send a change of level of study form (attached) to the Graduate School. The Graduate School sends the Program Director a form asking for program approval (attached). Following reclassification as a doctoral student, students must complete a plan of study form for the doctoral degree and have it approved by the Program Director.

NOTE: For any communication or correspondence with the Graduate School, the Program Director is the Graduate Advisor for MFT. That is, any form requiring the signature of the “Graduate Advisor” must be signed by the Program Director, not your advisor.
SECTION VI

MFT 7000 Research
MFT PROGRAM
APPROVAL OF MFT MS 7000
RESEARCH PROJECT
EVALUATION FORM

Student’s Name

Date

Title of Research Project:

Advisor or Project:

Other Collaborators on the Project:

Please rate the student from 1(strongly disagree) to 5 (strongly agree) on the following items:

1) The student participated in the above research project
   1 2 3 4 5
2) Contributed significantly to the research project
   1 2 3 4 5

The student submitted this research project as a poster to AAMFT

YES NO

Date Submitted to AAMFT: ________________

Attach a copy of the submitted AAMFT poster for the student’s file.

Grad that reflects the student’s participation: ________________

Comments:

Advisor of Project’s Signature

Date

Advisor’s Signature

Date
MFT PROGRAM

Example of a Contract for the MFT MS 7000
Research Project

Nature and Scope of Project:

Source of Data:

Advisor of Research Project:

Additional Collaborators on Project:

Expected Timeline:

Expected Main Contributions of Student:

Student Signature   Date

Advisor’s Signature   Date

Project Advisor’s Signature   Date
SECTION VIII

PRACTICUM
Texas Tech University  
Marriage and Family Therapy Program  
Clinical Experiences

I. Professional Standards and Professional Behavior

MFT faculty and students enrolled in the MFT Program must adhere to AAMFT standards of ethical professional behavior in their therapy training, teaching, and research. A complete copy of the most current edition of the AAMFT Code of Ethical Principles for Marriage and Family Therapists is available in the Texas Tech Family Therapy Clinic and on-line at http://www.aamft.org/resources/LRMP/Plan/Ethics/ethicscode2001.asp.

Violations of these standards must be reported to the MFT Program Director (See Section on Grievance and Dismissal Procedures). Any violation may be reported also, in writing, to the AAMFT Committee on Ethics and Professional Practices.

Adherence to the AAMFT ethical standards includes carrying proper liability insurance to protect the clients and agencies involved in training students. MFT students and faculty are required to carry professional liability coverage. The MFT program purchases liability coverage through Texas Tech University each year for all students in Lubbock. This excludes students who have moved away to teach and practice but have not yet graduated from the program.

The leading national professional organization for marriage and family therapists is AAMFT. MFT faculty and students are expected to become members of AAMFT and to become actively involved in the work of AAMFT at the local, state, and national level.

Professional conduct with clients, other students, MFT faculty, and other agencies is an absolute requirement of the MFT Program. MFT faculty are expected to demonstrate appropriate models of such professional conduct, and students are expected to follow appropriate models of professional behavior.

A. PRACTICUM

For Master’s students there are 2 different categories. These categories include: Master’s MFT Students who will apply for associate licensure

a. To complete the Master’s in MFT degree and to meet the Texas State Board’s requirements to sit for the licensure examination for an associate license, the student must complete one full year of supervised practicum. This requirement can be met by successful completion of four consecutive semesters of Practicum and Internship — MFT Practicum (Fall, Spring,
Summer I, Summer II) in the same calendar year.

b. Contract/Grant/Volunteer—Additional therapy experiences may be obtained by providing services to clients in a community setting directly supervised by a MFT faculty member (e.g., service contract, volunteer services). Students who are given opportunities to engage in these outside activities are selected at the discretion of the faculty member who has the final say in such matters.

c. Alternative Therapy Hours—the number of alternative hours is limited to 1/5th of the direct clinical contact hours credited to the student over the period of the master’s program enrollment. See the section on alternative hours for a definition of activities that are considered alternative hours. The Director of Clinical Training must approve the source of alternative hours in advance.

Requirements for AAMFT Clinical Membership and Licensure in Texas

Currently, AAMFT clinical membership requires 1,000 hours of direct client contact and 200 hours of supervision by an AAMFT Approved Supervisor (or equivalent) for persons in states/provinces without licensure or certification.

However, in states/provinces, such as Texas, where AAMFT has approved the licensure/certification process, a state/provincial license as a Marriage and Family Therapist is required for clinical membership. Currently, the State of Texas requires 3000 postgraduate hours (a minimum of 1500 hours of direct clinical services of which a minimum of 750 hours must be direct clinical services to couples and/or families) and 200 hours of supervision (100 hours of which must be individual supervision).

Only clinical hours obtained following completion of a master’s in MFT or its equivalent will be counted toward full licensure. Therefore, it is imperative that students apply for licensure as a Marriage and Family Therapist-Associate as soon as they meet the requirements for the Associate license. Associate status is required for some paying positions and some internships.

➢ Students completing a master’s degree in MFT with (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist are eligible to apply for licensure as a Licensed Marriage and Family Therapist-Associate license.
Supervision Hour Requirements (Practicum and Internship)

A. PRACTICUM

Students in practicum must obtain individual or dyadic supervision with an appropriate supervisor (AAMFT Approved Supervisor, AAMFT Supervisor-in-training, or equivalent) at least once every week in which they have direct client contact in order to have direct client service hours counted toward the 300/150-hour requirement.

During the period of the practicum, the student will be expected to maintain the required ratio of direct client contact hours to hours of supervision of five hours of client contact to one hour of supervision. A minimum of 60 hours of supervision is required. Thirty of these hours must be individual supervision. Supervision requirements for the internship period are discussed in the associated section.

Under the current rules of the COAMFTE, individual supervision is defined as meeting with the supervisor with no more than one other supervisee. Group supervision is defined as meeting with the supervisor with no more than five (6) total student supervisees. Under normal circumstances, every student in the Texas Tech MFT Program will receive more hours of supervision than the COAMFTE minimum requirement.

Students are responsible for maintaining acceptable supervision for any hours of direct client contact obtained after the first three years of enrollment in the MFT Program if the practicum requirement is not met by that time. Students are also expected to obtain appropriate supervision for on-going clinical work after practicum is complete. Arranging for appropriate supervision is the responsibility of the student. Such supervision may or may not be provided by the MFT Program faculty. Under no circumstances may a full-time MFT faculty member receive payment from a student for supervision of a current MFT graduate student.

In the Texas Tech MFT Program, hours of supervision will be counted only when the supervisor is either an AAMFT Approved Supervisor, Supervisor-in-Training, or equivalent. Prior determination by the MFT faculty that the supervisor meets an equivalent standard is required if the proposed supervisor is not an AAMFT Approved Supervisor or an AAMFT Supervisor-in-Training.

Hours of supervision of graduate students by other graduate students in the MFT program cannot be counted toward the required hours of supervision.

Meeting both the letter and the spirit of these regulations does not preclude student supervision of other students. Quite the contrary, the Texas Tech MFT faculty recognize the great value of students providing feedback, suggestions, and supervision to other students as a means of learning about therapy styles and broadening the therapist's skills and repertoire of interventions. Training in supervision is a key part of doctoral training, and
supervision-of-supervision will be provided to MFT students as part of the course on supervision after they have completed the practicum experience. Students may supervise another student's clinical work under the supervision of MFT faculty; however, the student being supervised in therapy may not count these supervision hours toward MFT Program requirements and may decline to be supervised by a fellow student. The student being supervised must continue to meet with an approved supervisor or equivalent at least every other week to ensure that the hours of direct client contact are available to meet MFT Program, COAMFTE, LMFT, and AAMFT Clinical Membership requirements.

**Documentation of Hours (Practicum and Internship)**

To meet the direct client contact requirements in practicum over a two to three-year period, the student therapist will need to conduct 6-8 hours of therapy sessions each week under appropriate weekly or biweekly supervision. It is advisable that the MFT student leaves at least one evening each week free for clinical work (Monday through Thursday nights) in addition to the regularly scheduled evening practicum class (i.e., two nights each week should be reserved for clinical work). Good clinical practice dictates setting aside 2-3 large blocks of time for clinical work, rather than trying to fit clients into odd free hours scattered through the week. In reality, more client contact hours must be scheduled to allow for vacation periods, slow times, clients who fail to attend appointments, illness, etc. Similarly, supervision sessions should be scheduled to allow for vacation times, conferences, illnesses, etc.

During the course of each semester, FT Clinic records will be used to update the student's permanent record of hours of therapy and hours of supervision, using the Weekly Clinical Supervision Report form (WCSR, see Clinic Manual), supplemented by client records. The updated information will be based on the FT Clinic record as corrected by the student therapist and her/his supervisor. *The WCSR, with required signatures, must be filed with the Director of Clinical Training no later than 30 days after the last day of the week of the report in order for the client contact and supervision hours for both practicum and internship to be included in the student's permanent record.* The FT Clinic records will be considered the definitive record of a student's therapy and supervision hours. Student therapists will have periodic opportunities, i.e., at least yearly, to correct errors in the FT Clinic records with their supervisor's approval. FT Clinic records are not subject to further change as the result of student action after this review.

**Other Information**

1. **Evaluation of Practicum Performance.** One week prior to the end of the semester, the student therapist and the practicum supervisor will meet to review practicum performance. The most recent revision of the form, 'Evaluation of Student Performance in Practicum,' will be used as a basis for evaluation. The student must be allowed to review this document, signing the evaluation to certify the review. The student's signature does not imply agreement with the supervisor’s comments or evaluation. The student may add her/his own comments regarding the evaluation; however, these comments do not constitute an appeal of the grade for practicum
(See Section on Grievance and Dismissal Policies and Procedures, for grade appeal procedures). The Evaluation of Student Performance in Practicum will become part of the student's MFT program record. In addition, each student will be requested to evaluate the practicum experience in writing. These evaluations will be collected by the secretary for the MFT Program and typed to provide anonymity for the student. A copy of the anonymous statements will be circulated to all MFT faculty, including the practicum supervisor.

2. **Completion of Clinic Responsibilities.** In addition to completing the required hours in practica and receiving permission from the faculty, students who wish to be released from practicum and begin internship must provide written documentation that they have taken the national-level Marriage and Family Therapy Licensure Examination and received a score that would be considered passing by the Texas Board of Examiners of Marriage and Family Therapists or have permission from the Board to take the next examination available.

3. **State of Texas Marriage and Family Therapy Licensure Requirements**
   Currently, AAMFT clinical membership requires 1,000 hours of direct client contact and 200 hours of supervision by an AAMFT Approved Supervisor (or equivalent) for persons in states/provinces without licensure or certification. However, in states/provinces, such as Texas, where AAMFT has approved the licensure/certification process, a state/provincial license as a Marriage and Family Therapist is required for clinical membership. Currently, the State of Texas requires 3000 postgraduate hours (a minimum of 1500 hours of direct clinical services of which a minimum of 750 hours must be direct clinical services to couples and/or families) and 200 hours of supervision (100 hours of which must be individual supervision).

**Statement on client load.** Over the period of time spent in the Family Therapy Clinic, client loads are expected to increase to between 3 and 5 hours a week. However, client loads are determined by the student’s supervisor in consultation with the Clinic Director, and may be more than 6 a week. Further, the mix of individual, couple, family, and group cases is also a matter determined by the student’s supervisor and the Clinic Director. Because the Family Therapy Clinic operates as a public facility, there may be times when loads increase over the expected level and the mix of cases desired by the student may not be feasible.
**MFT Program**  
Texas Tech University  
Student Practicum Evaluation Form

Student Name: __________________________ Signature: __________________________

Supervisor Name: __________________________ Signature: __________________________

Semester: __________________________ Date of Evaluation: __________________________

Evaluation based on: Group _____ and/or Individual _____ Supervision

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</table>

**Exceles beyond expected developmental level** (is rarely awarded. Reflects that you are well beyond others at the same developmental level.)

**Appropriate for developmental level** (hopefully most often used category. Reflects that you are right on target developmentally and that the supervisor has every expectation that you will continue to grow and develop in this area.)

**Adequate** (Reflects that supervisor believes clients may benefit from this level of performance but room for improvement is generous)

**Inadequate** (Reflects that supervisor believes that clients' experience of therapy may be hampered by your lack of expertise in this area)

**Inappropriate for developmental level** (unlike a "room for improvement type of category" this reflects serious doubts that you understand this particular concept and how it applies to therapy. Receiving this would indicate a need on your part for serious consideration and further discussion of your problems associated with this category. Your actions in this category may dip into unethical waters.)

**Unable to assess** (reflects a supervisor's inability to properly address the issue)
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<td>Violence/domestic violence knowledge</td>
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**Additional Comments:**

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**Excels beyond expected developmental level** (is rarely awarded. Reflects that you are well beyond others at the same developmental level.)

**Appropriate for developmental level** (hopefully most often used category. Reflects that you are right on target developmentally and that the supervisor has every expectation that you will continue to grow and develop in this area.)

**Adequate** (Reflects that supervisor believes clients may benefit from this level of performance but room for improvement is generous)

**Inadequate** (Reflects that supervisor believes that clients’ experience of therapy may be hampered by your lack of expertise in this area)

**Inappropriate for developmental level** (unlike a “room for improvement type of category” this reflects serious doubts that you understand this particular concept and how it applies to therapy. Receiving this would indicate a need on your part for serious consideration and further discussion of your problems associated with this category. Your actions in this category may dip into unethical waters.)

**Unable to assess** (reflects a supervisor’s inability to properly address the issue)
Interpretation Guidelines for TTU Student Practicum Evaluation Form

Use of self: use of humor, ability to provide both personal and professional reflection, sharing emotional experience of the session ("I am feeling really sad about what you are saying."), presenting "as if" ("If my partner said that to me, I would feel really hopeless."), active physical presence in sessions. Cross-Cultural Dynamics in MFT Supervision Can be empathic even with clients who are difficult or obnoxious. Does not include competing with client's story or inappropriate disclosure of own history or feelings.

Knowledge of theory: Has increased formal knowledge of theory by following through with suggested readings, finding new readings, attending workshops, viewing video presentations. Is conversant with more than one theory.

Application of theory: Can take theoretical knowledge (assumptions and constructs) and translate that into interventions, can view own/others' work and describe process in theoretical terms, can explain why intervention from one theory base is appropriate in a second theoretical application.

Case conceptualization: Goes beyond immediate data to describe process(es) operating in the client system, takes theoretical position seriously in planning interventions and setting goals, can use DSM-IV appropriately, can conceive of effects of larger system(s). Strives to understand each client's worldview. Does not miss important information presented by the client system in session or written assessment.

Session structuring: Sessions have a beginning, middle, and timely end. Therapist can articulate agenda/goals for session. Session does not bog down in endless wrangles or endless storytelling by either therapist or client. Data presented by client is integrated into larger picture (e.g., "So your experience with your mother is like what is happening now with your partner."). Does not allow verbally aggressive behavior to escalate. Tracks content and affect. Clients are not allowed attack each other or the therapist without taking responsibility for the behavior, clients' emotions are brought out and examined without endless expression of them.

Develops appropriate interventions: Uses theoretical knowledge and knowledge of techniques to intervene with client system. Can draw from a repertoire of interventions based in different theories, but can integrate these interventions with own theoretical approach. Is not "gimmicky," using same intervention with every client or using intervention as self-promotion or to show off.

Creativity: Is flexible in sessions, allows clients to bring up unexpected topics and deals with them. Adapts established techniques in ways that help the client to make sense of her/his/their situation. Can be spontaneous with interventions.

Confidence: Presents a comfortable, professional appearance. Can lay aside own anxieties to listen to clients. Does not allow clients to take over session in destructive ways. Intervenes to
stop unhealthy interactions. Presents interventions in positive, “can do“ ways; encourages clients to try new things.

**Joining and connection:** Displays an interest in clients. Gathers information appropriately, taking notes as needed. Acknowledges and involves each member of the system. Uses previous knowledge of clients to engage them in the session.

**Openness to supervision:** Actively seeks supervision. Uses supervision time to learn more, obtain suggestions, and expand expertise. Is prepared for supervision with case reviews, session tapes, and readings as requested by supervisor. Accepts criticism without undue defensiveness, can disagree constructively. Accepts expertise of supervisor, tries to avoid power struggles or “yes, but...”. Spends time reviewing therapy tapes and self-supervising.

**Implements feedback into action:** Takes suggestions and criticisms seriously. Strives to “own” the suggestions. Uses criticism to improve therapy without being overly self-critical about previous behavior. Willing to try new techniques even when uncomfortable.

**Self-reflection:** Awareness of own biases and prejudices, including gender, power, religion, ethnicity, and sexuality issues. Aware of own emotions during session, able to use the emotions to develop interventions and/or share with client. Can acknowledge and use strengths and weaknesses. Not defensive about errors, can learn from them. Alert to isomorphic processes (reactivity to clients based on own issues, supervision issues, etc.). Aware of family of origin issues.

**Group participation:** Collegial. Presents suggestions in tentative, positive manner; criticisms are presented in constructive ways with possible solutions. Shares own experiences and knowledge appropriately in context. Facilitates group communication, willing to share relevant personal information. **Does not attempt to dominate group process. Does not belittle colleagues.**

**Sensitivity to gender and power issues:** With clients, is aware of power differentials between genders. Tracks own behavior in regard to client’s gender. Maintains proactive stance with clients in terms of supporting less powerful members of the system, encouraging development of more equitable interpersonal transactions. Assesses the presence of violence in client systems, acts to prevent harm to clients and others. Aware of community resources. With colleagues, recognizes power and approach differences. Demonstrates an awareness of own role in establishing and maintaining group rules and attitudes about gender. Encourages and supports awareness of gender issues within group and in cases.

**Sensitivity to diversity:** Demonstrates awareness of issues of diversity (ethnic/race, social class, sexual preference, age, and religion). Shows respect for clients with diverse values and behaviors. Demonstrates willingness to learn about clients from diverse populations.

**Record keeping:** All records are maintained properly and prepared in a timely manner. Clinic
forms are properly completed and filed within 24 hours of providing services. Case files are maintained up to date. Case notes are written within 24 hours of services. Notes are sufficiently detailed to describe the process of the case.

**Application of substance abuse knowledge:** Asks about drug and alcohol use in client, nuclear and extended family. Aware of community facilities for treatment and support of users and their relatives. Aware of Twelve Step values and teachings. Willing to confront substance abuse. Aware of own issues around substance abuse.

**Application of violence/domestic violence knowledge:** Aware of risks of conducting therapy in cases of domestic violence. Takes steps to protect targets of domestic violence. Aware of community resources for targets and their networks. Willing to confront perpetrator(s). Does not blame, even by implication, the target of violence.

**Application of sexual/physical abuse knowledge:** Aware of the signs of abuse in children, persons with handicaps, and adults, especially the elderly. Acts to protect target of such abuse, report perpetrator(s) to appropriate agency. Willing to confront perpetrator(s) as needed. Does not expose clients to unnecessary risks.

**Sensitivity to sexual issues:** Willing to ask about sexual behaviors and preferences. Treats sexual issues as important and relevant. Aware of own issues and limitations in treating sexual issues, seeks information regarding appropriate treatments. Demonstrates acceptance and valuing of clients, regardless of sexual preference or behaviors. This position does not require endorsement of behaviors; rather, it acknowledges the need to accept and support clients to allow them to make choices for themselves.

**Ethical behavior:** Follows ethical standards of the American Association for Marriage and Family Therapy. Aware of ethical dilemmas peculiar to MFT. Acts to protect clients and others at risk. Is aware of risks in vulnerable populations, and reports suspicions of sexual and/or physical abuse of children, elders, or persons with disabilities. Active in protecting targets of domestic violence. Acts to deal with threats of homicide or suicide. Keeps supervisor(s) informed of problems as they arise. Behaves in ethical fashion with colleagues, supervisors, clients, and other agencies.

**Fee setting and collecting:** Follows Clinic rules and expectations in setting and collecting fees. Refers problematic cases to supervisor as needed.

**Professional relationships:** Demonstrates professional relationships and interactions with community agencies, referral sources, and other professionals. Can use knowledge of systems to provide resources for clients.
SECTION IX

ALTERNATIVE CLIENT CONTACT HOUR
Alternative Client Contact Hours

The MFT Program allows for 60 of the 300 required clinical practicum client contact hours to be comprised of alternative experiences that may not be strictly clinical in nature. The alternative hours MUST be systemic and interactive in nature, and PRIOR approval is needed to claim such hours.

The TTU MFT faculty has determined that these alternative experiences may include:

1. **Interactive Team Member**
   
   Time spent as an interactive team member who follows, observes, and discusses the ongoing case(s) with the primary therapist. This team member need not act in the capacity of a co-therapist, but **must directly observe** the case from the observation room and offer input to the primary therapist. Time spent participating as a team member as described herein during practicum is eligible under these criteria.

   The following activities may count as an Alternative Team Hour *if you have received faculty approval* via the Alternative Hour Activity Proposal form with which you have been previously provided:

   a. **If you observe a live session during practicum** and participate by providing input to the therapist. Any participation that would be considered as “Live Group Supervision” during practicum can also be counted as an Alternative Team activity.

   b. **If you observe a live session of a student therapist and you participate by providing input to the therapist PROVIDED YOU CAN HONESTLY DOCUMENT THE SESSION AND HAVE YOUR ALTERNATIVE HOURS WCSR VERIFIED VIA SIGNATURE OF AN MFT FACULTY.**

   c. **If you serve as a co-therapist to another student therapist during a live session ONCE YOU HAVE COMPLETED ALL OF YOUR PRACTICUM HOURS REQUIREMENTS.**

   d. **If you accurately report your participation on the Alternative Hours WCSR form, following the same 30-day rule that governs the standard WCSR form.**

   e. **If you do not exceed the total cumulative limit for ALL alternative activities specified under Section VII-Practicum.**

   NOTE: Observation and interaction as a Supervisor-in-Training will not be considered as an Alternative Hour activity.

2. **Providing Therapeutic Psycho-Education**
   
   Providing **therapeutic psycho-education** (e.g., a depression support group), as opposed to therapy, will count as long as the experience is face-to-face, direct contact. This does NOT include a psycho-educational presentation to a group of therapists for the purpose of professional development (e.g., local, state or national conference presentations), nor does this include any classes you may have taught or will teach in the future.
Prior approval by the MFT faculty of ANY proposed Alternative Hour activity is required in order for the experience to be considered acceptable as an Alternative Hour Activity. Approval must be obtained for each different activity and/or site via the new “Alternative Hour Activity Proposal” form which MUST be presented to the faculty BEFORE any activity will be counted.

Alternative hours must be recorded on a separate MCSR, clearly identified as Alternative Hour Experience, and signed first by your current practicum, project, or internship supervisor, and then by the Clinic Director. Alternative Hours will be entered separately into the data bank and reported as a different entity so we can keep track of the number of alternative hours accumulated.

NOTE: Alternative Hours cannot be substituted for any portion of the minimum number of hours you are required to spend serving clients in the Family Therapy Clinic.
Alternative Hours Activity Proposal

Up to 60 hours (MA) or 100 hours (Doc) of your 150 (MA) or 250 (Doc) practicum hours; may be counted as alternative therapeutic contact hours. Teaming hours accrued during your designated practicum do NOT require prior approval. Leading a therapeutic group, conducting Adult Attachment Interviews or moderating focus groups are examples of hours that require approval by your faculty supervisor prior to the experience. These alternative hours must be systemic, interactional, and add diversity to your practicum experience.

Your name: __________________________________________

Site (name, address, contact person, phone) for alternative hours:

____________________________________________________

____________________________________________________

Proposed hours and dates of service: ____________________________

Using 2-3 sentences, respond to the following:

1. How will this work be systemic and interactional?

2. How will this client contact add diversity to your practicum experience?

3. How will the client(s) know that a therapeutic contract exists in this setting?

π Approved
π Not Approved
π Approved pending

Signature of Faculty Supervisor ________________________________ Date ______________

**********

After providing the hours, you must provide a brief write-up of your experience answering the above questions as well as a paragraph on what you learned from the experience. Attach this form and the write-up of your experience to your hours log, and turn them in to your Practicum supervisor at the end of the quarter.

Number of alternative hours approved: ____________________________

Signature of Faculty Supervisor ________________________________ Date ______________
SECTION IX

EXTERNAL PLACEMENT
EXTERNAL PLACEMENT INFORMATION

I. DEFINITION OF AN EXTERNAL PLACEMENT

"The external placement is to provide doctoral students with a supervised, full-time experience of at least 9 months (and/or 150 hours) duration, emphasizing relationally focused practice." In the Texas Tech MFT doctoral program, "full-time" is interpreted to mean approximately 5-8 hours a week on site(s). The external placement typically begins in the 2nd year of the master's program, and each student must complete sufficient direct client contact hours to achieve the total of 300 (150 individual and 150 relational) direct client contact hours required for completion of the master's degree. One hundred and fifty of those hours will take place in the external placement. Further, the student should consider whether the external placement will provide sufficient hours of direct client contact and supervision to meet licensure and/or clinical membership requirements. Direct contact hours must be supervised by an AAMFT-Approved Supervisor or equivalent, and supervision must take place at least every other week.

Prior to beginning the external placement, a written external placement proposal must be submitted to and approved by the Director of MFT External placements and the MFT Program Director.

II. THE PURPOSE OF AN EXTERNAL PLACEMENT

An external placement is intended to build on the student's existing clinical and research skills and to provide an intensive professional experience. Training is the primary focus of the external placement. Establishing an external placement involves student-faculty-site collaboration.

III. PROCEDURES TO BEGIN AN EXTERNAL PLACEMENT

A. First, the student should enter into a dialogue with her/his MFT faculty advisor and the Director of External placements well before approaching potential external placement sites. Other MFT faculty may be consulted as well. The product of such a dialogue should be an assessment of the student's training interests, identification of potential external placement sites, and a preliminary statement of the requirements for completion of the external placement.

B. Second, the student should approach potential external placement sites to determine which site(s) will meet the external placement requirements for that student. Once agreement is reached with the site, the student will complete the development of a formal External placement Proposal to be submitted to the MFT faculty advisor and Director of External placements for approval.
C. Third, once the External placement Proposal is approved, the External placement Agreement must be completed by the site(s), and returned to the Director of External placements.

D. Any change in the External placement Proposal or External placement Agreement(s) must be approved by the student’s MFT faculty advisor and the Director of External placements.

IV. WHO IS QUALIFIED TO BEGIN AN EXTERNAL PLACEMENT

A. The student must be in good standing in the MFT program (individuals on academic or clinical probation or on leave of absence cannot apply)

B. The student must have completed the majority of organized coursework in Areas VII (theory), VIII (clinical practice), IX (individual development and family relations), and 1st year clinical courses.

C. The student must have completed practicum direct client contact/supervision total/individual supervision hours/group supervision hours (150/60/30/30).

D. The student must be sufficiently advanced in the MFT program to maximally benefit from the external placement experience. This means that external placement activities do not interfere with completion of coursework and continued progress in the MFT program and vice versa.

E. Preferred Qualifications
   1. Completed at least 100 direct contact clinical hours and have completed intro to practicum and three semesters of practicum (spring, summer I, and summer II).
   2. No incompletes

V. DOCUMENTATION REQUIRED BEFORE THE EXTERNAL PLACEMENT BEGINS

A. External placement Proposal
B. Student’s current curriculum vitae
C. External placement Supervisor Application (required of each supervisor)
D. External placement Agreement from each site
VI. SUPERVISION OF EXTERNAL PLACEMENT

In an external placement that involves direct client contact, the intern must meet with an AAMFT Approved Supervisor (or equivalent) at least every other week for case supervision. Regardless of the Approved Supervisor, each site must provide an administrative and/or clinical supervisor who is responsible for the efforts of the intern and who provides supervision of cases at least every other week. If that supervisor is not an AAMFT Approved Supervisor, the student must still obtain appropriate supervision.

VII. DOCUMENTATION REQUIRED IN THE EXTERNAL PLACEMENT

A. Weekly Clinical Supervision Report (MCSR). The MCSR must be submitted for each month and each site in the external placement. The AAMFT-Approved Supervisor (or equivalent) must sign each MCSR, along with the Director of Clinical Training. The MCSR, with appropriate signatures, must be submitted to the Director of Clinical Training within 30 days of the last day of the month of the report.

B. The external placement requirements are deemed completed once all of the following criteria have been met:
   a. The duration of the external placement experience has lasted a minimum of nine (9) months and no more than twelve (12) months; and
   b. The concluding date as stipulated on each “External placement Agreement” form has been reached; and
   c. All required evaluation forms for each external placement site have been filed with the Director of External placements; and
   d. The student has accumulated a minimum of 300 documented and verified hours of direct face-to-face client contact as required by to complete the master’s in MFT; and
   e. A certificate of completion addressing the external placement experience has been placed in the student’s program file.

   Should it become evident that an external placement experience will stretch beyond the maximum twelve (12) month period, a new “External placement Agreement” form must be completed and submitted to the Director of External placements prior to the expiration date of the original agreement.

C. At the completion of the external placement or upon leaving an external placement site, the Intern Self Evaluation (student), the Intern Evaluation (separately, AAMFT-Approved Supervisor and the site supervisor(s)), the External placement Site Evaluation (student), and Intern Evaluation of Supervision (student) must be submitted to the Director of External placements.
VIII. EXTERNAL PLACEMENT SITE REQUIREMENTS

The program will maintain clear relationships with all external placement site(s), which will be specified in a written document.

Activities of each intern will be documented at the external placement site(s). These records will made available to the marriage and family therapy program.

The institution sponsoring the external placement site(s) will have been in operation for at least two years.

External placement site(s) will provide adequate facilities and equipment for the intern to carry out designated responsibilities.

Mechanisms for student evaluation of external placement site(s) and supervision, and site evaluation of the intern's performance, will be demonstrated.

Documentation of liability insurance for interns will be confirmed. Liability insurance may be provided by the external placement site(s), the marriage and family therapy program, or the intern.

External placement site(s) will publish and adhere to policies prohibiting discrimination on the basis of age, culture, ethnicity, gender, physical ability, race, religion, sexual orientation, and socioeconomic status.

An AAMFT Approved Supervisor or the equivalent will supervise the intern's clinical work.

The external placement supervisor will be available to the intern and will be an active participant in her/his training.

The external placement supervisor will be clearly senior in experience to the intern.
Texas Tech University
MS in Marriage and Family Therapy and Addictive Disorders and Recovery Studies
Box 41210
Lubbock, TX 79409-1210
(806) 742-3060

EXTERNAL PLACEMENT AGREEMENT

This agreement is made on _______________ by and between
(date)

________________________________________, ____________________________
(Student) (External Placement Site)

and The Marriage and Family Therapy Program at Texas Tech University. The agreement will be

effective from _______________ to _______________ for the external

(start date) (concluding date)

placement of ________________________________.

(student's name)

Purpose:

The purpose of this agreement is to specify the conditions for external placement of a qualified
MFT master’s student.

Texas Tech University MFT Program Responsibilities:

1. Select external placement candidates who have successfully completed all prerequisite courses and
   practica for external placement.

2. Facilitate placements conducive to the student's training needs and qualifications, and the interests
   and capacities of the external placement agency.

3. Provide information to both the student and external placement site delineating the responsibilities
   of the MFT program, the external placement agency, and the student.

4. Maintain a collaborative relationship with the external placement site.

5. Monitor student development throughout the experience and provide grades based on the student's
   performance.

6. Maintain records of student's client contact and supervision hours completed during external
   placement.

7. Students will be covered under malpractice liability coverage by TTU at no additional charge to the site.

An Affirmative Action Institution
External Placement Site Responsibilities:

1. Maintain charter or license by appropriate state authority.

2. Provide a caseload sufficient to fulfill the student's client contact requirements as described under Student Responsibilities.

4. Maintain contact with the MFT MS Director of External Placement Training, foster the student's development as a marriage and family therapist in collaboration with the MFT MS program, and advise of any difficulties encountered with the student's performance.

5. Provide adequate facilities and training to the student relevant to the performance of assigned responsibilities.

6. Provide a confidential office space for the student intern to conduct therapy services.

7. Supplies and materials to create the required record-keeping of therapy services.

8. A secure file to store confidential records of the therapy services provided.

9. Provide documentation of the student's client contact and supervision hours to the MFT Director of External Placement Training.

10. Provide written evaluations (at least two over the course of the external placement) of the student's performance to the MFT Director of External Placement Training.

11. An administrative supervisor who will agree to sign the documentation form of monthly hours completed at the site by the student.

Student Responsibilities:

1. Maintain responsibility for assigned cases throughout the external placement.

2. Adhere to the policies and standards of professional practice set forth by the MFT program and external placement site.

3. Complete a sufficient number of on-site, direct client contact hours, of which at least 50% must be with couples and families.

4. Complete a minimum of nine (9) months of external placement experience.

5. Complete on-site supervision with student

6. Maintain regular contact (no less than monthly) with the MFT Director of External Placement Training and advise of any difficulties encountered associated with the external placement experience.

An Affirmative Action Institution
7. Maintain availability for supervision and other necessary appointments with the MFT/ADRS Director of External placement Training as requested.

8. Complete written evaluations regarding the external placement experience as specified in the course syllabus.

9. Ensure that adequate malpractice coverage is maintained throughout the external placement.

We the undersigned have read and agree to the conditions of external placement delineated in this contract.

__________________________
(Student)

__________________________
(External Placement Agency Director)

__________________________
(External Placement Site Supervisor)

__________________________
(MFT/ADRS Director of External placement Training)

__________________________
(MFT/ADRS Program Director)

Date: ____________________

Date: ____________________

Date: ____________________

Date: ____________________

Date: ____________________

An Affirmative Action Institution
Texas Tech University
Marriage and Family Therapy Program

MS INTERN EVALUATION

Date: ___________________  Intern’s Name: _________________________________

Clinical Internship Supervisor: ____________________________________________

   (1) Excellent   (2) Very Good   (3) Good   (4) Adequate   (5) Poor   (6) Very Poor

I.  Case Management

   _____ Attendance
   _____ Punctuality
   _____ Case Conceptualization
   _____ Treatment Planning
   _____ Caseload Maintenance
   _____ Interaction with Collateral Parties/Agencies
   _____ Interaction with Clinic Personnel
   _____ Adherence to Clinic Procedures and Policies
   _____ Record Keeping/Case Notes

II. Clinical Skills

   _____ Listening Skills
   _____ Expressive Skills/Feedback/Suggestions
   _____ Assessment
   _____ Joining
   _____ Empathic Ability
   _____ Facilitation of Rapport
   _____ Regard for Client Welfare
   _____ Congruence/Consistency
   _____ Genuineness
   _____ Sensitivity to Individual Differences
   _____ Promotion of Client Autonomy
   _____ Facilitation of Client Participation
   _____ Differentiation/Clarity of Boundaries
   _____ Flexibility
   _____ Emotional Sensitivity
   _____ Emotional Availability
   _____ Goal Setting
   _____ Intervention Implementation
   _____ Intervention Congruence With Goals
   _____ Technical Sophistication
   _____ Facilitation of Change/Growth
   _____ Crisis Management
   _____ Theoretical Application
(1) Excellent  (2) Very Good  (3) Good  (4) Adequate  (5) Poor  (6) Very Poor

____ Session Structuring
____ Termination/Closure
____ Case Follow-up

III. Collegial Relations

____ Receptivity to Feedback
____ Solicitation of Feedback
____ Response to Feedback
____ Expressing Feedback
____ Investment in Collegial Relationships
____ Facilitation of Collegial Rapport
____ Facilitation of Colleagues' Development
____ Response to Group Process
____ Participation in Group Process
____ Respect for Individual Differences
____ Sensitivity to Group Dynamics

IV. Response to Supervision

____ Receptivity to Feedback
____ Solicitation of Feedback
____ Response to Feedback
____ Expressing Feedback
____ Investment in Supervisory Relationship
____ Response to Supervision
____ Openness to Supervision
____ Integration of Feedback with Clinical Practice

V. Global

____ Case Presentation
____ Gender Sensitivity
____ Racial Sensitivity
____ Ethnic Sensitivity
____ Sensitivity to Personal Issues/Values/Conflicts
____ Sensitivity to Personal Limitations
____ Sensitivity to Personal Strengths
____ Response to Sexual Issues
____ Response to Substance Abuse/Use Issues
____ Response to Clients at Risk
____ Ethical Standards
____ Professional Identity
____ Motivation to Learn/Develop
____ General Professional Conduct

Comments: ________________________________________________________________

________________________________________________________________________
MS INTERN EVALUATION OF SUPERVISION

Date: ____________________  Intern's Name: ________________________________

Name of Agency: __________________________________________________________

Address: __________________________________________________________________

Type of Agency: ____________________________________________________________

Length of Internship: ______________________________________________________
                        (beginning and ending dates)

Name of Primary On-Site Supervisor: _______________________________________
(if you had a secondary supervisor please complete a separate evaluation for that individual)

Frequency (per week) and Duration of Supervision: __________________________

Please indicate the time proportions (1/2, 1/3, ¼, etc.) for your supervisor’s use of the following modalities:

______ case discussion  ______ videotape review

______ co-therapy  ______ live observation

______ chart review  ______ audiotape review

______ other (specify) ________________________________

Please describe your supervisor’s style and approach to supervision:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please describe the quality of your relationship with your supervisor:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Please indicate your perceptions of your internship supervisor by responding to the remaining questions using the following six-point scale:

1. completely inadequate
2. primarily inadequate
3. slightly inadequate
4. slightly adequate
5. primarily adequate
6. completely adequate

_____ Availability/Approachability
_____ Investment in intern training and development
_____ Identification with an MFT orientation
_____ Flexibility
_____ Acceptance and respect for intern
_____ Recognition of intern’s strengths
_____ Recognition of intern’s weaknesses
_____ Consistency of feedback
_____ Clarity of feedback
_____ Relevance of feedback
_____ Utility/timeliness of feedback
_____ Utility/timeliness of suggestions
_____ Listening ability
_____ Empathic ability
_____ Conceptual and case planning ability
_____ Clinical intervention ability
_____ Ability to promote intern development
_____ Recognition and respect for individual differences
_____ Expectations for intern
_____ Rapport with intern
_____ Ethical sensitivity
_____ General professional conduct
_____ Recognition of personal limitations
_____ Fairness in evaluations
_____ Avoidance of duality in relationship with intern
_____ Overall influence of supervision

What was most helpful in supervision? _______________________________________

Would you recommend this supervisor to others? _____ Please explain: __________

What would have improved your supervision? __________________________________
Texas Tech University
Marriage and Family Therapy Program

MS INTERN SELF EVALUATION

Date: ____________________  Intern’s Name: ____________________________

Name of Agency: _______________________________________________________

Address: _____________________________________________________________

Type of Agency: _______________________________________________________

Length of Internship: ________________________________
                        (beginning and ending dates)

Name of Primary On-Site Supervisor: ________________________________

Please describe the personal goals you established for the internship experience:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please discuss how successful you have been in accomplishing these goals:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

What aspect of your internship experience (if any) would you prefer to have handled differently?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please explain: _________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please offer recommendations for improving the overall quality and effectiveness of the internship experience:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Please assess your personal development occurring in relationship to the internship experience by responding to the remaining questions using the following six-point scale:

1. deterioration in development
2. no development
3. slight development
4. moderate development
5. significant development
6. very significant development

___ Case management
___ Case conceptualization/theoretical application
___ Treatment planning
___ Treatment implementation/clinical technique
___ Empathic ability
___ Listening ability
___ Ability to provide feedback and suggestions
___ Ability to develop rapport
___ Ability to join with a family
___ Sensitivity to individual differences
___ Sensitivity to gender issues
___ Sensitivity to racial issues
___ Sensitivity to ethnic issues
___ Sensitivity to personal issues
___ Openness to supervision
___ Ability to collaborate with other professionals
___ Ability to promote client growth/change
___ Sensitivity to ethical issues
___ Relationships with other interns/students
___ Relationships with supervisors
___ Record keeping
___ General professional conduct
___ Recognition of personal limitations
___ Self confidence
___ Personal identification as an MFT
___ Overall growth and development

What aspects of internship were/are most influential in your development?

__________________________

Please discuss any areas of personal limitation that remain:

__________________________

How do you plan to address these areas?

__________________________
SECTION X

STUDENT EVALUATION OF PROGRAM
Texas Tech University
Marriage and Family Therapy Program

EVALUATION OF INDIVIDUAL SUPERVISION

Supervisor: ________________________________  Agency: ____________________________

Name (student): ____________________________  Date: ____________________________

1. Please indicate the typical frequency _____/month and duration ______ hours of your supervisory meetings.

2. Please indicate the % time a particular modality of supervision was used:
   _____% case discussion    _____% review of videotapes
   _____% joint therapy with supervision    _____% live supervision
   _____% other, specify ____________________________

3. Rate your supervisory experience using the following scale
   1=inadequate  2=partly adequate  3=adequate  4=good  5=outstanding
   a. _____ Overall Supervisory Experience
   b. Supervisor’s ability to:
      _____ (1) Recognize my anxiety
      _____ (2) Assist me with personal anxiety
      _____ (3) Identify problems in my performance
      _____ (4) Make effective recommendations
      _____ (5) Convey interest in my learning
      _____ (6) Contribute to development of my clinical judgment
      _____ (7) Contribute to my development as a family therapist

4. Comment generally about what was most helpful, problems with the experience and how it may be improved, plus other items as you desire.

FORM DEVELOPED BY THE FAMILY THERAPY PROGRAM AT HAHNEMANN UNIVERSITY
Texas Tech University
Marriage and Family Therapy Program

COURSE AND PRACTICUM EVALUATION

Please put the complete form in the envelope provided. The MFT secretary will type a summary of all responses and then destroy the individual handwritten forms. A copy of the summary will be given to all MFT Faculty.

Course ____________________  Instructor ____________________

Semester and Year ____________________  Date ________________

1. What were the most positive aspects of this course/practicum?

2. What are the most important things that could be changed in order to improve this course/practicum?
SECTION XI

ANNUAL STUDENT EVALUATIONS
TEXAS TECH UNIVERSITY – MFT PROGRAM
STUDENT PROGRESS REPORT

Student: __________________________ Year: ____________

Overall Level of Concern: (Circle One) No Concern Some Concern Serious Concern

<table>
<thead>
<tr>
<th>Particular Strength</th>
<th>Demonstrated Competence</th>
<th>Needs Improvement</th>
<th>Some Concern</th>
<th>Serious Concern</th>
<th>No Basis for Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Knowledge/Mastery of General Courses</td>
<td></td>
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<tr>
<td>B. Skills/Application of Knowledge/Clinical Insight</td>
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<tr>
<td>C. Research Courses/Research Skills</td>
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<tr>
<td>D. Written Presentation</td>
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<tr>
<td>E. Oral Presentation</td>
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<tr>
<td>F. Class Participation (includes attendance, maturity of behavior in class, motivation and attitude)</td>
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<tr>
<td>G. Professionalism: Behavior/Attitude Clinical/Academic</td>
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</tbody>
</table>

Strengths:

Areas for improvement (with specific suggestions):

Overall Clinical Performance for Developmental Level: (Circle One) Outstanding Very Good Good Marginal Poor

Overall Academic Performance: (Circle One) Outstanding Very Good Good Marginal Poor

MASTER'S ONLY: Student is progressing toward admission into the MFT Doctoral Program

YES NO (See rationale attached)

MFT Program Director __________________________ Date ____________ Student Signature __________________________ Date ____________

Rev. 10-7-03
SECTION XII

AAMFT MEMBERSHIP
It is expected that all students become student members of AAMFT within their first semester of joining the TTU MFT program (if they are not already). Guidelines for applying are found on the website at www.aamft.org.

It is also expected that all students will join and participate in our student chapter of SAMFT.
SECTION XVI

TEXAS LICENSURE LAW
MFT LICENSURE IN TEXAS

AS SOON AS YOU ARE ELIGIBLE (See attached table) YOU MUST APPLY FOR LICENSURE AT THE STATUS FOR WHICH YOU ARE ELIGIBLE (Licensure, Associate Intern License, Provisional License)

You can practice MFT without a license as long as you practice MFT only as part of your doctoral program. Practice as part of your program is defined as (a) practice in the Family Therapy Clinic, (b) practice in service contracts accepted as a part of the program, e.g., LCYC, PEP, (c) practice as part of an official external practicum placement or internship. For the last category, you would have an external practicum agreement or internship agreement on file that was approved by the program director and all other relevant parties. These are, of course, the same hours the program “counts” towards program requirements.

The appropriate forms are available on-line at http://www.dshs.state.tx.us/mft. For the supervision report, ask the Clinic Coordinator for a summary of contact and supervision hours, complete the form, attach the relevant computer printout and give to the MFT Program Director for verification and signature. For hours earned outside the program, send another supervision form to each of your old supervisors. The hours “in the computer” are our official records. As always, it is your responsibility to make sure they are accurate and up-to-date. The Clinic Director must approve any changes. The MFT secretary is a notary and can witness your forms. A model “Supervisory Agreement Form” is included in your Program Manual.

The MFT secretary keeps a copy of all licensure rules and forms.
<table>
<thead>
<tr>
<th>Comparison of Requirements for MFT Credentials</th>
</tr>
</thead>
<tbody>
<tr>
<td>QUALIFYING DEGREE</td>
</tr>
<tr>
<td>MASTERS IN MFT (Accredited Program)</td>
</tr>
<tr>
<td>MASTERS IN OTHER MENTAL HEALTH PROFESSION</td>
</tr>
<tr>
<td>NON-QUALIFYING MASTERS DEGREE</td>
</tr>
<tr>
<td>NUMBER OF CONTACT HOURS AT START OF PHD</td>
</tr>
<tr>
<td>500</td>
</tr>
<tr>
<td>0 - 500</td>
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<tr>
<td>0</td>
</tr>
<tr>
<td>WHEN TO APPLY FOR TEXAS ASSOCIATE LICENSE</td>
</tr>
<tr>
<td>At entry to Ph.D. Program</td>
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<tr>
<td>When complete Master's equivalent MFT coursework + Practicum</td>
</tr>
<tr>
<td>At completion of Ph.D. degree</td>
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<tr>
<td>PRACTICUM CONTACT HOURS IN PHD PROGRAM</td>
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<tr>
<td>250 +</td>
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<tr>
<td>500</td>
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<td>500</td>
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<tr>
<td>WHEN TO APPLY FOR SUPERVISOR INTENT TO TRAIN</td>
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<tr>
<td>At entry into Ph.D. Program</td>
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<tr>
<td>At completion of 500 hours in Ph.D. Program</td>
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<tr>
<td>At completion of 500 hours in Ph.D. Program</td>
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<tr>
<td>REQUIRED CONTACT HOURS IN INTERNSHIP</td>
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<td>500</td>
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<td>500</td>
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<tr>
<td>500</td>
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<tr>
<td>WHEN TO APPLY FOR AAMFT CLINICAL MEMBERSHIP</td>
</tr>
<tr>
<td>Upon receipt of LMFT licensure</td>
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<tr>
<td>Upon receipt of LMFT licensure</td>
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<tr>
<td>Upon receipt of LMFT licensure</td>
</tr>
<tr>
<td>WHEN TO APPLY FOR TEXAS FULL LICENSURE</td>
</tr>
<tr>
<td>Two years post masters + 1500 direct &amp; 1500 indirect + exam</td>
</tr>
<tr>
<td>Two years post masters + 1500 direct &amp; 1500 indirect + exam</td>
</tr>
<tr>
<td>Two years post Ph.D. + 1500 direct &amp; 1500 indirect + exam</td>
</tr>
<tr>
<td>WHEN TO APPLY FOR LICENSURE IN OTHER STATES</td>
</tr>
<tr>
<td>[Issue here is whether other states will take clinical membership or must document hours past the qualifying degree]</td>
</tr>
<tr>
<td>WHEN TO APPLY FOR APPROVED SUPERVISOR</td>
</tr>
<tr>
<td>MINIMUM HOURS TO TEXAS LICENSURE</td>
</tr>
<tr>
<td>1500</td>
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<td>1500</td>
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<tr>
<td>2000</td>
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</tbody>
</table>

Note: AAMFT and the Texas Licensure Board have been taking masters degrees in HDFS, Sociology, Psychology, Counseling, Social Work, etc. as "mental health degree." The problem has been in degrees like history and English, and some MDiv's. The appropriateness of the degree will be evaluated at the time of application.
MFT PROGRAM TRAINING MANUAL FOR DOCTORAL GRADUATE STUDENTS

MARRIAGE AND FAMILY THERAPY PROGRAM

Department of Community, Family & Addiction Services

COLLEGE OF HUMAN SCIENCES
TEXAS TECH UNIVERSITY

REVISED: AUGUST 2014

Copyright: Texas Tech Marriage and Family Therapy Program
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The Marriage and Family Therapy graduate programs at TTU provide systemic clinical training to prepare students for clinical licensure and scholarly achievement. TTU is known for its supportive and rigorous programs, and is one of the largest MFT programs in the country. Our graduates have found success in a wide variety of academic, clinical and other professional settings. There are two graduate programs in MFT at TTU: a doctoral and a master’s program.

The MFT doctoral program has a long and distinguished history of preparing students for contributions in academics, administration and clinical work. There is a strong emphasis on training in research methodology as well as theoretical and clinical sophistication. Many of TTU’s doctoral graduates can be found in academic institutions around the country. The doctoral program has been accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) since 1981.

The master’s program at TTU is a clinically-focused program that includes an emphasis in the treatment of addictions within a relational context. The MFT faculty provide training that prepares students for licensure as an MFT, LCDC, or for future doctoral work.
TTU MFT Doctoral Program

Educational Outcomes and Mission Statement
The mission of the Texas Tech Marriage and Family Therapy Doctoral Program is to provide academic and clinical training to students who will function as marriage and family therapists at the highest level of scholarly and clinical competence. The doctoral program is conceptually grounded by the scientist-practitioner model, preparing students who will be capable of making unique contributions to the field of marriage and family therapy through: a) quality research, b) clinical supervision and therapy, and c) academic instruction. This training is done in a context that is supportive of diversity, student-faculty mentoring and support, and authenticity. The following outcomes are nested within this broad educational mission.

Student Learning Outcomes
These learning outcomes are expected for all graduates of the doctoral program. They are divided into three primary areas that correspond to our mission. Each contains sub areas that are demonstrated by specific measures.

Upon graduating from the TTU MFT doctoral program, students will:

1. Be qualified to conduct high-quality independent research that is accepted for national presentation and publication to peer-reviewed audiences. They will demonstrate an ability to:
   a. Write clearly and professionally for a scholarly audience.
      i. Specific class assignments
      ii. 7000 Research project (first author on a submitted empirical article)
      iii. Quals written portion (passing)
      iv. Dissertation (proposal and defense)
   b. Understand and apply quantitative and qualitative research methodology.
      i. Assignments and grades in the research courses (MFT 6322, 6323)
      ii. Quals methods portion
   c. Conceptualize and design independent research.
      i. Research proposals written in the research courses (MFT 6313, MFT 6322).
      ii. Dissertation (proposal)
      iii. Quals Methods (passing)
   d. Complete and present a research project.
      i. Presenting research at state or national settings
      ii. Dissertation (defense)

2. Provide competent and ethical clinical services and supervision with a variety of relational systems and presenting problems, and practice as a licensed Marriage and Family Therapist. They will demonstrate an ability to:
   a. Understand and critically apply MFT theory with relational and individual systems.
      i. Quals Theory Paper (passing)
ii. Practicum evaluation forms
iii. Theory class assignments (e.g., for MFT 6311)

b. Maintain professional records for clinical use.
   i. Case file management
   ii. Internship Evaluation

c. Have clinical and ethical competence:
   i. Practicum evaluations and grades
   ii. Quals Theory Paper
   iii. Internship Evaluation

d. Supervise MFTs in a competent manner.
   i. Grades in supervision practicum (MFT 6395)
   ii. Development of a clearly articulated theory of supervision

3. Have the ability to prepare curriculum and instruct students at the university level in principles and content related to Marriage and Family Therapy. They will demonstrate an ability to:
   a. Competently teach an undergraduate course and prepare a teaching portfolio.
      i. Student evaluations
      ii. Teaching reviews conducted by fellow students and teaching academy
   b. Articulate their philosophy of teaching.
      i. Teaching philosophy reviewed by their advisor
   c. Lead students in discussion and lecture of MFT content:
      i. Class presentations in various doctoral classes

Faculty Outcomes
All TTU MFT faculty are expected to contribute to the program and to the profession. It is expected that faculty will:

1. Be active in producing and sharing high quality research. They will:
   a. Publish in professional journals and present research at national conferences.
      i. Faculty vita
   b. Participate in funded research, including grants and contracts, and submit proposals for these projects.
      i. Faculty vita
   c. Mentor students in research projects including class papers, qualifying exams, small groups, 7000 article, and the dissertation.
      i. Co-authored publications on vita
      ii. Student feedback for class papers
      iii. Ongoing research meetings with students (e.g., small group, individual meetings)

2. Be active contributors to the development of the profession of MFT. This occurs through clinical practice, supervision of interns, and service in their professional spheres. Faculty will:
   a. Be involved in clinical activity.
      i. Private practice, co-therapy with students, etc.
b. Provide clinical supervision of students and interns.
   i. Evaluations for practicum (MFT 6395)
c. Serve in departmental, university, and national roles.
   i. Faculty vita

3. **Teach high quality graduate and undergraduate courses and socialize doctoral students in teaching and instruction.** Faculty will:
   a. Teach doctoral curriculum and provide examples and mentoring for instructors.
      i. Course instruction and student feedback
      ii. Accomplished student learning outcomes

**Program Outcomes**
The following are outcomes expected from the MFT Doctoral Program in general, and may consist of items that the faculty, staff, students and graduates of the program contribute in their various spheres of influence. These TTU MFT associates will:

1. **Contribute to MFT scholarship.** Through:
   a. Research presentations and publications.
      i. Measured by: activity in the scholarly community

2. **Provide professional clinical services. The students, faculty and alumni will:**
   a. Provide clinical services to the community locally and in other sectors.
      i. Measured by: client evaluations of therapy in our Family Therapy Clinic
      ii. Measured by: activity as therapists in various professional settings including internship sites and external placements
      iii. Measured by Licensure rates and job descriptions of alumni

3. **Contribute service and instruction to the profession.** Through:
   a. Alumni securing jobs in their chosen area of work.
      i. Measured by: Alumni Surveys
      ii. Measured by: Activity (e.g., service) in various professional domains from current TTU faculty and students, as well as alumni

4. **Foster an environment that is respectful of diversity in others.** Through:
   a. Creating an environment in our courses, faculty-student interaction, research and clinic services that honors the rights, safety, dignity, and well being of all members no matter their race, gender, religion, sexual orientation, socioeconomic status, national origin, religious beliefs, or physical and cognitive ability. The concept of diversity encompasses acceptance and respect that each individual is unique. To the extent possible and appropriate, interactions will be healthy and authentic, while still welcoming of differences.
      i. Meeting program benchmarks for diversity
      ii. Feedback from alumni, current students, clients, and each other
TTU MFT Faculty 2014-2015

[For full vitae, see the MFT website]

David C. Ivey, Professor
Ph.D. University of Nebraska-Lincoln, 1993
Clinical judgment, medical family therapy, assessment, training, gender and ethnicity in marital and family therapy, treatment acceptability

Anne Prouty, Associate Professor
Ph.D. Purdue University, 1996
Women's health; family resiliency during cancer treatment, medical family therapy and interdisciplinary care; supervision and mentorship in C/MFT and MedFT training; creative teaching in C/MFT

Nicole Springer, Associate Professor of Practice, Director, Family Therapy Clinic
Ph.D. Texas Tech University, 1999
Grief and loss, Couples facing Infertility, Miscarriage and Poor Pre-natal Diagnosis, Resilience in Families Living with Down Syndrome

Douglas Smith, Associate Professor, Program Director
Ph.D. Kansas State University, 2006
Systemic intervention for Intimate Partner Violence and systemic implications of traumatic stress

Sara Smock-Jordan, Associate Professor
Ph.D. Virginia Polytechnical Institute and State University, 2006
Solution Focused Brief Therapy, Microanalysis

Kristy Soloski, Assistant Professor
Ph.D. Kansas State University, 2014
Substance use, child/adolescent development, family factors related to adolescent binge drinking, emotionality of the family system and substance use, training clinicians to be culturally competent in working with minority populations and in being cognizant of power and privilege in the therapy room

Jason Whiting, Associate Professor
Ph.D. Michigan State University, 2001
Couple conflict and violence, appraisal distortions, relationship education, mindfulness, theory and qualitative inquiry
SECTION II

GENERAL INFORMATION
MAJOR STEPS IN MFT PROGRAM

I. Academic Course Work

Following admission to the program, students are assigned a temporary MFT faculty advisor. Students are responsible for contacting their advisors during pre-registration periods each semester. For the first semester only, the MFT Program Director will provide academic advising for all incoming MFT students. Students must conform to the rules of the graduate school at Texas Tech University as reflected in the current University catalogue.

Students should be registered for the number of hours that reflects the extent of their involvement in the graduate program. This applies to research courses as well as to formally structured MFT classes. Students who are not teaching assistants or research assistants need to be enrolled full-time (6 total hours over the summer sessions and 9 hours during each long semester). **Students holding assistantships or scholarships must be enrolled for the appropriate number of hours each semester (including summer sessions). To be eligible for assistantships, the minimum is 9 hours each long semester and 3 to 6 hours for the summer.** For scholarship recipients, the required minimum is 9 hours each long semester and 3-6 hours for the summer.

**Continuous Enrollment.** In no case may a student be enrolled in less than 3 hours during the long terms (Fall and Spring) and one of the two Summer terms. It is a policy of the Graduate School and the Marriage and Family Therapy Program that every student must be enrolled on a continuous basis from entry into the program to graduation. The normal course load for MFT students is 9-12 hours in each long semester and 3 hours in each Summer term. Once past qualifying examinations (i.e., moving to Ph.D. candidate status), some students may elect to continue enrolling in 9-12 hours a semester (and 3 each Summer term); however, other students may elect to reduce their enrollment to reflect their limited contact with faculty and/or their off-campus status. However, every student, regardless of status, MUST be enrolled in a minimum of 3 hours each long term and 3 hours in one of the Summer terms. The only exception would be a leave granted by the Program Director in consultation with the MFT faculty for health or family reasons.

Failure to enroll in the minimum of 3 hours in any long semester or in at least one summer term will be taken as grounds for dismissal from the MFT program—that is, the Graduate School will be notified that you have been formally terminated from the program for lack of progress. Your readmission to the MFT program cannot be guaranteed. If you are readmitted you will have to pay additional reapplication fees set by the Graduate School and you will be required to register for extra hours reflecting the period of non-enrollment.
Once students enroll in dissertation hours (MFT 8000), students must continue to enroll for dissertation hours each semester until graduation (every long semester and at least one summer session each year).

II. Plan of Study Meeting

The Plan of Study/Examination meeting with MFT faculty is held during the second semester of enrollment. The meeting is considered the candidacy examination for master students and the preliminary examination for doctoral students. The purpose of this meeting is to:

- Evaluate the student's initial progress in the program
- Determine the degree of fit
- Officially approve the students’ plan of study
- Choose a permanent advisor

The meeting itself consists of a discussion and final approval of the materials submitted by the student (see Section V for specific details). Following this meeting, the MFT faculty makes a recommendation regarding continuation in the program. The transfer of courses from another institution is rarely permitted, and exceptions are generally made only in relation to standard curriculum (master’s level) courses and in the case of students who are coming from non-MFT or non-accredited MFT graduate programs. The Graduate School permits the transfer of no more than two courses (six hours) into the master’s program and up to ten courses (thirty hours) into the Ph.D. program; however, any decisions about course transfers and substitutions will be made by the program faculty.

III. Practicum

The required number of client contact and supervision hours must be completed as part of the degree plan. (See Section VIII on practicum.) The student must apply for Associate licensure as an MFT in the State of Texas as soon as she/he is eligible. (See Section XVI on licensure.)

IV. Completion of Clinic Responsibilities

In addition to completing the required hours in practica, students must receive permission from the faculty to be released from practicum and begin internship (see Final Report of Client and Supervision Hours form in Practicum section of this manual).

V. Annual Evaluations

Students will be evaluated on a regular basis in coursework, practicum, and the fulfillment of their assistantship and other responsibilities. Formal evaluations will take place at the time of their Plan-of-Study/Examination meetings in the Spring of their first year.
Opportunities for informal feedback from faculty and staff will be abundant, however, an appointment with the faculty can be scheduled during the Fall semester each year for any continuing students (meeting dates and times will be announced).

VI. 7000 Research Project

Doctoral students must meet requirements for the 7000 project. For students entering at the doctoral level, this should begin during their first year in the program. (See Section VI for details about the 7000 research project.)

VII. Doctoral Qualifying Examination

The qualifying examination, taken after the completion of most course work and the 7000 research project, permits the student to integrate materials from a variety of different courses and to identify specific strengths and weaknesses prior to beginning the dissertation. Following successful completion of the qualifying examination, the student is officially admitted to candidacy for the Ph.D. degree. (See Section VII for details about the Qualifying Examination.) Upon admission to candidacy, the student has a maximum of four (4) years in which to complete the dissertation.

VIII. Internship

All students will complete a clinical internship as part of the doctoral program (see Section X on Internship.)

IX. Dissertation (Doctoral Students)

Students in the doctoral program will complete a dissertation.
SECTION III

PROGRAM OBJECTIVES
TTU MFT Doctoral Program

Texas Tech University
Marriage and Family Therapy Program

Program Objectives

The objective of the MFT Program at Texas Tech University is to provide clinical and academic training in marriage and family therapy to students who are committed to extending the practice and knowledge-base of marriage and family therapy through research and teaching. Our goal is to train students who will function as marriage and family therapists at the highest level of clinical competence, and who also are capable of making unique contributions to the field of marriage and family therapy through research, teaching, and other activities extending beyond helping particular clients. We view training excellent clinicians as a worthy goal of a training program, and as a necessary, but not sufficient objective for a program at the doctoral level.

Texas Tech is committed to the principle that in no aspect of its programs shall there be differences in the treatment of persons because of race, creed, national origin, sexual orientation, age, sex, or disability, and that equal opportunity and access to facilities shall be available to all.

Students graduating with a Ph.D. in MFT are required to complete 1000 hours of face-to-face therapy (at least 500 hours with couples or families), which is comprised of hours accumulated in a prior master’s program (assuming these hours meet certain standards), clinical work at the TTU Family Therapy Clinic, approved community placements outside the Family Therapy Clinic, and alternative and internship hours. (See Practicum and Internship sections for further explanation of hours.)

In Texas, full licensure as an MFT requires 1500 hours of face-to-face therapy and an additional 1500 hours of therapy-related activities BEGGINING ONLY AFTER the granting of the Associate License. While other states’ requirements differ, AAMFT requires full state licensure for Clinical Membership. In addition to meeting program requirements, it is the student’s best interest to take the examination for Associate MFT as soon as possible so that the student can begin accumulating hours toward state licensure. The TTU MFT program is not designed to meet the requirements for licensure in other professions (e.g., licensed professional counselor [LPC]).

Upon completion of the Ph.D. with an Emphasis in Marriage and Family Therapy, we expect the student to have obtained:

- A comprehensive knowledge of marriage and family theory and research
- A comprehensive knowledge of the major approaches to marriage and family therapy at the level necessary to teach others about these approaches
- An ability to function at the professional level as a marriage and family therapist, including:
a definite philosophy of therapy,
a commitment to the professional ethics and standards established by AAMFT,
an ability to evaluate his/her own strengths and limitations as a clinician,
an ability to assess functional and dysfunctional family systems,
an ability to diagnose and treat mental illness as defined by the Diagnostic and Statistical Manual, Version 4 (DSM-IV) and succeeding versions of DSM,
an ability to conduct original research, including evaluation research on the effectiveness of family therapy,
a professional maturity including a commitment to participating in relevant professional organizations and to representing the profession of marriage and family therapy to the broader community through education, policy making and other activities,
an articulated philosophy of supervision,
a commitment to a systemic orientation.

We believe marriage and family therapy as a profession is in a unique position to advance our understanding of the human condition. The social and behavioral sciences have turned increasingly to the study and recognition of the importance of the family in its impact on societal problems ranging from behavior problems in children to depression and alcoholism in adults. Unfortunately, much of the academic work on these problems has been undertaken by those with little direct clinical experience and understanding of families and social context. On the other hand, the field of marriage and family therapy has developed with too little attention to establishing the validity of its theoretical base and clinical wisdom by a body of competent research findings.

The faculty views the academic and clinical portions of our program as equally important. Clinical training must proceed from a solid understanding of child development, adult development and aging, and marriage and family processes. To be meaningful, however, they believe the academic understanding must be applied and tested by a knowledge that comes only by working directly with couples and families. Marriage and family therapy is an enterprise that involves such direct contact. Because they do not think the clinical, academic, and research enterprises should be separated, all three are integrated and emphasized throughout the student's training.

The faculty does not teach or adhere to a single theory or school or approach to marriage and family therapy. Rather, they teach all of the major approaches and expect the student to be willing to examine each of these in her/his work with clients. They want the student to understand, compare, and evaluate the major approaches. The student's task is to integrate them into a personally meaningful and effective approach for the purpose of helping families change, and for the purpose of helping others understand families better through teaching and research. The faculty has a collective interest in helping students understand their role in the clients’ change process. They believe it is vital for students to recognize how their own actions and values may facilitate or hinder clients’ change.

The MFT Faculty are actively involved in all aspects of the student’s education and training and provide extensive and sustained mentoring in both research and clinical work throughout the program.
SECTION IV

POLICIES

Accreditation Statement
Grievance and Dismissal Policy
Confidentiality Policy
Assistantship Priorities
Human Dignity Statement
Diversity Statement
Assessment and Improvement of Educational Outcomes
**COAMFTE Standards Version 11**

The Texas Tech University Marriage and Family Therapy Program adheres to the COAMFTE Accreditation Standards, Version 11 set forth by the American Association of Marriage and Family Therapy Commission. All accredited programs are expected to meet or exceed the standards through their particular period of accreditation. These accreditation standards can be viewed online at [www.aamft.org/](http://www.aamft.org/) by all registered AAMFT members or through obtaining a copy in the Program Director’s office.
Texas Tech University
Marriage and Family Therapy Program

Grievance and Dismissal Policies and Procedures for Graduate Students

In almost all cases, it is preferable to handle a grievance informally at the level at which the grievance has arisen. Specifically with regard to students in the MFT Program, the individual with a grievance should attempt to resolve it directly with the other person or persons involved. If satisfactory resolution is not reached, the individual should bring the grievance to the Director of the MFT Program who will attempt to help the parties reach a resolution.

If the issue still remains unresolved, the individual with the grievance should initiate a formal grievance process by writing a letter to the Department Chair outlining the grievance, summarizing previous attempts to reach resolution, and requesting the initiation of the formal grievance procedure. The appeal is on the basis of whether or not appropriate procedures were followed. The goal of the appeals process is not to resolve the issue, but rather, to ensure that the student was treated fairly following established procedures. At this point, the Department Chair may refer the grievance to the Departmental Executive Committee.

If satisfactory resolution of the grievance is not achieved with the Departmental Executive Committee the individual would next bring the issue to the Associate Dean of Academics, and, if necessary, then to the Dean of the College. The next level of appeal is the Dean of the Graduate School (see Figure 1).

With both the informal and formal grievance process, it is crucial to proceed in a timely manner. Normally, the individual with a grievance would initiate the resolution process as soon as possible after the incident or incidents in question occurred, within 60 days at the latest. According to graduate student handbook, grievances of discrimination must be filed within 30 days of the alleged incident. Formal written appeals of grades must be submitted within 45 days of the next long semester. An electronic copy of the student handbook can be found at http://www.depts.ttu.edu/dos/handbook/. At each level, every effort should be made to attempt to resolve the grievance within two weeks.

Many of the established procedures have been developed in compliance with existing legislation and the associated procedures have been articulated in major documents, including the Graduate Catalog, the Graduate School's Manual for Graduate Advisors, Code of Student Affairs, and Operating Systems and Procedures Manual. Among the legislatively-based areas of University compliance are Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 (45 CFR 86), and Sections 503 and 504 of the Rehabilitation Act of 1973 (all requiring nondiscrimination on the basis of race, color, national origin, religion, sex or handicap) plus the Age Discrimination in Employment Act of 1957 and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974 and Executive Order 11246 as amended (nondiscrimination due to age or toward disabled veterans of Vietnam era). This is not an exhaustive list but each item encompasses a particular pattern of compliance with associated procedures for assuring accountability.
GRIEVANCE BY A STUDENT begins with Individual Student

MFT Program Director

Department Chair

Departmental Executive Committee

Associate Dean for the College of Human Sciences

Dean of the College of Human Sciences

Vice President for Students Affairs\(^1\)

Graduate Dean\(^2\)

Provost for Academic Affairs

President Texas Tech University

DISMISSAL OF GRADUATE STUDENT begins with MFT Faculty

FIGURE 1

APPEALS PROCESS

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\(^1\) Grievance involves access to personal records, sex discrimination, sexual harassment, discrimination based on disability.

\(^2\) Grievance involves performance in the clinical role, publications and co-authorship, grade appeals, appeals for exceptions to program requirements, assignment to and performance in the assistantship role, suspensions, probation, and dismissal.


SPECIFIC AREAS OF CONCERN

Performance in the Clinical Role

Students and faculty in the MFT Program must adhere to the AAMFT Code of Ethical Principles for Marriage and Family Therapists, even if the individual is not a member of AAMFT. Complaints and grievances related to clinical supervision or the student's clinical role should first be discussed with the clinical supervisor. If the issue is not resolved, the grievance procedure should follow the steps outlined previously. It is crucial that clinical training occur in a climate that is respectful of clients, therapists, and supervisors. Feedback on an individual's work should be made specifically and directly to the individual involved. It is important to state positive aspects of the individual's performance as well as areas of needed change in a respectful manner, using specific examples. Comments made in the observation room during a case should be respectful and shared with the therapist who is being observed. If the grievance involves unethical behavior on the part of an AAMFT member (Student, Associate, Clinical AAMFT member or Fellow), the individual bringing the grievance is also encouraged to report the alleged unethical behavior to the AAMFT Ethics Committee in the national office in Washington, D.C.

Publications

In conducting research and in assigning authorship to publications, students and faculty in the MFT Program follow the relevant regulations on conduct of research with human participants as well as the AAMFT Ethical Principles. Assigning authorship credit follows the principle of assigning credit in proportion to each individual's contribution. It is very helpful to negotiate, in advance, responsibilities and authorship issues on joint research projects. A written contract agreed to by all parties prior to beginning a joint research project is highly recommended.

Co-authorship by a faculty member and a student on work done in the course by the student is not automatic. The faculty member's contribution would have to be substantial, going beyond editing or giving comments on papers at the level ordinarily provided by the instructor of a course. Similarly, students who conduct library research or data analyses for a faculty member as part of an assistantship or independent study would not ordinarily receive co-authorship. In the event of substantial contributions, co-authorship by faculty members and students is warranted. For more details refer to the Publications Manual of the American Psychological Association, 5th. Edition, Section 1.03, pp. 6-7.

Access to Personal Records

Guidelines governing student access to personal records and the procedures for
challenging information in these records are contained in the University records policy which is printed in the Directory of Classes each semester. The records policy may also be viewed at http://www.depts.ttu.edu/opmanual/OP01.04.pdf.

Sex Discrimination

Title IX of the Higher Education Amendments of 1972 prohibits discrimination on the basis of sex in student programs and activities. Complaints concerning any violation of Title IX should be directed to http://www.depts.ttu.edu/studentresolutioncenter/ or 742-SAFE.

Sexual Harassment

Student concerns about sexual harassment which involve faculty or staff should be directed to http://www.depts.ttu.edu/studentresolutioncenter/ or 742-SAFE. Harassment incidents among students should be reported to http://www.depts.ttu.edu/studentresolutioncenter/ or 742-SAFE.

Students with Disabilities

Students wanting to file a complaint based on disability discrimination should start by filing a complaint with the Campus ADA Coordinator located in West Hall 335. The phone number for the office is 806-742-2405. The student can also obtain the email address of the current Campus ADA Coordinator from the Student Disability Services office. The mailing address of the Campus ADA Coordinator is: Box 45007, Lubbock, Texas 79409. The Campus ADA Coordinator will begin an investigation of the allegation within 10 calendar days of receiving the complaint and will issue a ruling within 20 calendar days. Should the investigation require a longer period of time, the complainant will be notified within the 20 calendar days of the anticipated ruling date and the reasons for the need for extended time.

Grade Appeals

Students who wish to appeal a course grade should consult the Office of the Dean of the College of Human Sciences where copies of the grade appeals policy, procedures, and forms are available. Note that grades may be appealed through this process only when there is demonstrable evidence that prejudice, or arbitrary or capricious action on the part of the instructor has influenced the grade. A student who wishes to appeal the results of a comprehensive examination, alleged excessive requirements by an advisor or committee, and other matters relating strictly to graduate education, may appeal under procedures established by the Graduate School. The relevant policy is contained in section 64.07 of the Texas Tech Operating Systems and Procedures Manual.

Appeals for Exceptions to Program Requirements

If the requirement at issue is a MFT Program requirement, the student should present a
written request to the MFT Program Director. The Director will consult with the MFT faculty, and respond in writing to the student. If the matter is not resolved at the program level, the student should follow the appeals procedure already outlined, beginning with the Department Chair. Appeals for waivers of particular courses based on previous course work should be made to the program director and the faculty member primarily responsible for the course in accordance with departmental procedures. However, waiver of a required course must be formally approved. If the student is not satisfied, the above grievance procedures apply.

Assignment to and Performance in Assistantship Role

Complaints and grievances related to employment within the department should first be discussed with the supervisor in charge of the position. If the issue is not resolved the student should present the matter in writing to the Department Chair. If the student is still not satisfied, he/she may ask that the matter be presented to the Executive Committee of the department for resolution. Beyond this level, the University's grievance mechanism is to be invoked. The Office of Affirmative Action and Personnel Relations located in Room 163 of the Administration Building should be contacted in such cases.

Suspension, Probation, and Dismissal

The University Catalogue specifies the circumstances under which students may be put on probation, suspended, or dismissed for academic reasons. In addition, the MFT graduate faculty may probate, suspend, or dismiss from the program any student who does not fulfill the academic requirements specified in the graduate student manual handbook or any student whose work over a period of time shows a demonstrable lack of progress toward their degree. Usually such action would be initiated by the MFT Faculty and communicated in writing to the student, the student's advisory committee, and the Department Chair. The student may request a meeting with the MFT faculty to discuss the matter and/or may appeal to the Department Chair. The levels of appeal follow those already stated.

Because it is a clinical program, it may be necessary to dismiss a student from the MFT Program for other than academic reasons. One of the most difficult tasks facing a faculty occurs when a student's behavior is deemed to be so inappropriate as to warrant major concern as to whether the person is emotionally, interpersonally, or ethically suited for entry into the profession of marriage and family therapy. With regard to ethical matters, students are required to be familiar with and abide by the AAMFT Code of Ethical Principles for Marriage and Family Therapists, as well as the Texas Tech Code of Student Conduct. Web addresses containing these codes are: http://www.aamft.org/resources/LRMPlan/Ethics/ethicscode2001.asp and http://www.depts.ttu.edu/studentaffairs/CampusCrime/documents/Code%20of%20Student%20Conduct%202005-2006.pdf
The professional role is a decidedly sensitive one. Responsibility must be assumed by the MFT faculty to assure that those who might pose serious risks to clients and the standards of the profession (due to emotional instability or questionable ethical standards) are not allowed to enter the profession. Although such measures are most unpleasant, such decisions occasionally are necessary in considering the welfare of everyone involved. Such issues may transcend effective adjustments via feedback provided in day-to-day supervision and instruction. Accordingly, when such problems occur, the MFT faculty convenes to specify its concern in writing to the student and the student's advisor. Where possible, this statement specifies the particular behaviors in question, the desired changes and means of addressing them, and a time for re-evaluation of the concern where appropriate. If remedial action on the part of the student is not deemed feasible, the student should be informed about the reasons why he/she is regarded as unsuitable for this particular MFT training program.

The written statement will accompany full verbal feedback to the student, particularly from faculty or others with information from direct observations of the student. If the student feels the matter has been misrepresented, she/he will reply to these concerns and present his/her perspectives on the matter. The matter may be arbitrated at the level of the MFT Program level or the recommended measures invoked (e.g., suspension from the program, pending a student's attempts to resolve the problem via therapy). At the end of the stated time or process the matter would be reviewed and, in the absence of sufficient change in the desired direction, measures would be taken to dismiss the student from the program.

At any point in this process, the student has a right to appeal. Because these cases are unusually sensitive, students are reminded that they are not required to appeal and that the matter may be resolved without bringing it to the attention of the full graduate faculty. If the student does wish to appeal a decision of this type, he/she may do so, in writing, to the Department Chair. From that point, the appeal procedure follows that already stated.

Usually students who would be dismissed under these circumstances would be dismissed from the graduate program of the department. However, under some circumstances, a dismissal decision may specify that the student retains the right to apply for admission to other graduate programs within the department.

Academic Conduct

Students are expected to hold themselves to high standards of ethical conduct in all phases of their academic work. Students should understand that such actions as plagiarism or cheating, or attempts to do so, are unethical and will not be condoned.

PAPERS CANNOT BE SUBMITTED TO FULFILL REQUIREMENTS FOR MORE THAN ONE COURSE. To do so constitutes academic misconduct. This is not meant to deter students from further development of a research or topical area through extension of previous work. Students should consult with the course instructor to be clear on the acceptability of papers that are based on prior
coursework or other projects.

Academic misconduct may result in a course grade of F for coursework or, in some circumstances, dismissal from the program and suspension or dismissal from the University.
Confidentiality in Supervision and Training

Marriage and family therapists are under an ethical obligation to avoid exploiting the trust and dependency of students and supervisees (AAMFT Code of Ethics, Section 4.1, August, 1991). Students are expected to share personal information about themselves and their family of origin in MFT classes and in supervision. We believe that dealing with such material is essential to the process of MFT training. Such information will be treated sensitively and will not be shared with anyone outside of fellow class members and the MFT faculty.

Section 4.3 of the AAMFT Code of Ethical Principles defines the limits of confidentiality for supervisees. The Texas Tech University Marriage and Family Therapy Program has a clear responsibility to protect clients under the care of student therapists from unethical or incompetent practices (see AAMFT Code of Ethical Principles for Marriage and Family Therapists, Sections 1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 3.1, 3.2, 3.5, 3.6, 3.8, & 4.2). We have an additional responsibility to Texas Tech University to protect the integrity and well-being of the Marriage and Family Therapy program as well as an obligation to the profession of marriage and family therapy to prevent unethical and/or incapacitated individuals from entering the profession.

In response to our ethical obligations to avoid exploiting students, any decision regarding the fitness of any student to continue training as a marriage and family therapist must be made in consultation with the entire MFT clinical faculty. Comparative evaluations of students must be made among faculty members. Such information will not be shared with other students. For these reasons, the MFT clinical faculty must operate as a confidentiality unit meaning that information defined as sensitive will be retained within the group. The information gathered in supervision, classes, or individual conversations between students and faculty members, which is relevant to the well-functioning and ongoing evaluation of the student, must be shared among the clinical faculty. Students retain responsibility for those things which they choose to share with faculty members. This policy on supervisee confidentiality is in accordance with Section 4.3, (d) of the AAMFT Code of Ethics.

Another confidentiality group consists of the mentors (advanced doctoral students) and the instructor in the supervision course and supervision practicum. These students and this instructor together supervise first year master’s and doctoral students throughout the first year. As Supervisors in Training, the mentors are learning about and experiencing supervision of more junior therapists. Of necessity, they must individually and collectively discuss first year students with the instructor and their colleagues in the class as part of both these courses. As with the faculty confidentiality unit, the mentors treat all information discussed as confidential.

With these two exceptions, information related to student's clinical performance will not be
shared with other non-clinical faculty or administration. Should a student be required to enter personal therapy and/or cease doing therapy for remedial reasons, other faculty members outside of the MFT program, including administrators, will be informed only that the actions are being taken for personal reasons. This will also be MFT policy should personal information concerning a student be related to the dismissal of a student from the program. If a student appeals any decision regarding standing in the program, then confidentiality cannot be maintained in the appeal process. It is imperative that supervisee confidentiality be maintained within these outlined parameters.

Successful MFT training and supervision is, in large part, dependent on the quality of relationships between faculty and students. These relationships are built over time. The MFT faculty are committed to the respect and dignity of students (See Mission Statement and Program Outcomes). We feel that maintaining a faculty confidentiality unit is the most effective way of dealing with students' personal issues in a respectful manner, allowing us to fulfill our obligations to clients, Texas Tech University, and the profession of marriage and family therapy.
Texas Tech University
Graduate Programs in Marriage and Family Therapy

Grade Policy

A final letter grade of A or B must be earned in all **required** master's and doctoral coursework in order to satisfy the MFT program graduate degree plan requirements. Final course grades of C or lower will not be accepted or applied to your degree plan. Any course in which a final grade of C or lower is earned must be repeated until a grade of A or B is achieved. An alternative course may be substituted if the required course will not be offered within a reasonable timeframe. Any substitutions must be pre-approved by the MFT Program Director; certain specialized courses may not have any acceptable substitutions. In such instances, the student must wait until the required course is offered again within the program or department.
Setting Priorities for Graduate Assistantships

The MFT Program and the Department of Community, Family, and Addiction Services have limited funding for graduate assistantships. Responsible stewardship requires that we use the available resources to support both the teaching and research functions of the department. Every MFT student is required to apply for Fall and Spring, work-study funding and, separately, for Summer work-study to be eligible for an assistantship.

Assistantship assignments will be based on the following criteria.

Criterion 1. Priority for funding will be given to students who accept the total amount of the work-study funding offered. Failure to apply for work-study funding will disqualify the student for an assistantship.

In our experience, almost all MFT graduate students qualify for some work-study funding. Work-study funds are applied directly to an assistantship, i.e., these funds do not add to the assistantship stipend, but do reduce the department’s expense for the assistantship.

However, some students elect to take student loans that reduce the work-study funds available on a dollar for dollar basis. The decision to take a loan instead of work-study means that the department pays a greater share of the assistantship, reducing resources for other students.

Criterion 2. Priority for funding will be given to students in the first two years of the doctoral program who are performing satisfactorily and making steady progress toward finishing the doctorate. If the qualifying doctoral students can be supported in their first two years, assistantships will be made available to outstanding master’s students in their second or first years in the program.

The Texas Tech MFT program has been recognized for its excellence in training doctoral students who are competent in research, therapy, and teaching. Priority is given to doctoral students making steady progress toward finishing the doctoral program on time. Because funds are limited, it may not be possible to support all doctoral students. Doctoral students not performing at the expected level will not be supported. Once the needs of the doctoral program are met, available funding will be targeted to outstanding master’s students who are deemed likely to continue into the doctoral program.

Criterion 3. Doctoral students (a) meeting the first two criteria, (b) who are beyond their first year, and (c) who have not taught previously will be considered as having a high priority for teaching assistantships. However, next priority for teaching assistantship funding will be given to those students meeting the first two criteria who have taught previously and who have received satisfactory student and faculty
assessments of their teaching. Teaching assistantships will generally be limited to a maximum of two years.

Supervised teaching is required of all doctoral students, with or without an assistantship. Every effort will be made to provide teaching assistantships to second and third year doctoral students meeting Criteria 1 and 2 and who have not taught previously. When possible, teaching assistantships will be continued for students who have positive faculty and student evaluations of courses they have taught previously. Normally, teaching assistantships will be limited to a maximum of two years to allow the graduate student also to experience a research assistantship.

Criterion 4. Other assistantships will be provided based on the first two criteria and available funding.

a. Faculty with outside funding or start-up funds will have priority in selecting assistants.
b. The Program Director normally will be provided with a 50% time graduate program assistant across the academic year, including summer.
c. Faculty who have had outside funding in one or both of the previous two years will have next priority after funded faculty and the Program Director.
d. If additional funding is available, assistantships will be assigned by the Program Director and Department Chair to reflect the needs of the MFT program as a whole.

Obviously, funding from outside the department conserves the department’s resources. Faculty with such resources will have priority in selecting students for assistantships (master’s or doctoral-level).

Because of the nature of the duties of the Program Director, it is a high priority that s/he have a 50%-time graduate assistant to help with recruitment, interviews, correspondence, publicity, record keeping and data analysis, reports, etc.

Often, when funding on a project ends, there are unfinished matters of data collection and analysis that require help from a graduate assistant to complete. Because future funding often depends on publishing and presenting data from previous studies, such assistance increases the chances of future funding.

There are other reasons to provide graduate assistants to faculty—special projects, preparing grant proposals, conducting research/data collection/data analysis, etc. Such assignments are necessarily left to the discretion of the Program Director and Department Chair.
Statement of Human Dignity

The Texas Tech Family Therapy Program is dedicated to the idea that all human beings are of worth and value simply by virtue of their humanity. We believe that all of our professional activity as family therapists and family therapy trainees should reflect this value and worth by according our clients and each other basic human dignity and respect. This is a core value of our training program.

The Texas Tech Family Therapy program respects and encourages the expression of a wide diversity of personal values and behavior. As family therapists, we are aware that we will encounter clients, colleagues and trainees with values and behaviors that are different from our own, perhaps even in opposition to our own. In our role as helping professionals, the accordance of dignity and respect to all humans requires us to help those who seek our expertise, regardless of how we might personally feel about their values, behavior and lifestyle.

Clearly, part of our role as helping professionals involves responding appropriately to illegal behavior or behavior that endangers others who are not willful, knowledgeable participants. However, it is not our professional role to evaluate and respond to other people's behavior based on our own code of ethics and conduct. It is reflective of the devaluation and disrespect of humans when we behave in a judgmental manner toward those who conduct themselves in a manner that we might not find appropriate for our own moral or ethical code.

Refusal to provide family therapy services to those whose values and behavior are not reflective of our own devalues and denigrates those human beings. This principle also applies to lecturing or moralizing about behavior that is different from our own, but is conducted in a manner that is reflective of the participants' values.

We believe that an underlying concept in dealing with those whose values and behaviors are different from ours should be:

"If I do not respect the values and choices of others who are different, then how can I possibly expect others to respect me and the values and choices I have made?"

As a family therapy program, we understand that personal values are very important. We also believe that the core values of the program and profession of marriage and family therapy are important for those who wish to pursue the profession. There may be times when personal values come in conflict with program and professional values. It seems very important for each of us to evaluate personal and professional values in an ongoing manner. If maintaining the program value of basic human dignity cannot be accomplished without compromising an individual's personal values, it is the duty of that person to seriously evaluate his/her continued participation in the profession. It is also the duty of the program to make a similar evaluation of the wisdom of offering continued training to persons who cannot accept core professional values.
Diversity Statement

Texas Tech University
Graduate Programs in Marriage and Family Therapy

As stated in the Statement of Human Dignity in the MFT Program Manual, the Texas Tech Marriage and Family Therapy program adopts a posture of respect with regard to understanding and accepting the variability among social, religious, cultural, and other groups with regard to the worth and uniqueness of each individual. We endorse and uphold the anti-discrimination and affirmative stance of our University and embrace the plurality of the human experience as an invaluable resource to the quality and vitality of our program and profession. We define diversity in terms of the variability and differences between people according to a wide and potentially inexhaustible set of concepts including but not limited to: race, ethnicity, religious affiliation, sexual orientation, gender and gender identity, physical disability, and socio-economic status (See Mission Statement and Learning Outcomes document: Program Outcomes number 3).

Our rationale for establishing this definition rests in our philosophy that all humans must be afforded dignity and respect and that the oppression of any member or group within a society occurs to the detriment of all members of that society. Also, we believe that without intentional intervention to resolve sources of discrimination and oppression, all social systems contribute to the continuation of the oppression of underprivileged individuals and groups.

We recognize that our goal of achieving a more diverse program entails accepting that our goals are aspirations that will not be completely fulfilled. Nevertheless, we value the process of seeking human dignity and we attempt this in many ways, including: prioritizing program resources to recruit and maintain a diverse faculty and student body, promoting an atmosphere conducive to mutual respect for individual and group differences, identifying aspects of the program which promote disadvantages for marginalized groups or individuals, and implementing interventions to resolve and eliminate identified problem areas.

This process involves efforts to value diversity in ways that are not always easily measured (e.g., beyond ethnic breakdown of students). For example, we try to teach and emulate respect for various viewpoints, and infuse this type of instruction and content into all of our classes. However, even though it is not always adequate or measureable, we do take specific steps to help make this happen.

Our benchmarks for achieving diversity include the following:

1. We assess the composition of the faculty, supervisors, student body, and clinical populations in terms of diversity definition of the program. This is done with our annual report to COAMFTE as well as faculty reviews during meetings and yearly retreats.
2. During recruitment we do several things in regard to our goals for diversity:
a. We invite applicants to speak to “unique contributions to diversity” in their application statements (e.g., first to go to college, unique background, etc.).
b. We calculate the number of applications of diverse status, as well as the numbers accepted and enrolled in the program.
c. When appropriate, we use department and graduate school funds to help bring in diverse students out for interviews where financial concerns exist.
d. We ask questions of our interviewees regarding their appreciation and comfort with diverse individuals in potential clinical settings.
e. We attempt to connect with diverse faculty and potential students at national conferences.

3. In general we try to help diverse students identify appropriate financial or scholarly support (e.g., scholarships, research opportunities). Specific scholarships are targeted for improving diverse representation among our cohorts, and we seek to keep students aware of opportunities such as the minority student awards from AAMFT. We have so far been successful in securing the AAMFT/SAMHSA Minority Fellowships, as well as other awards.

4. We discuss in practicum and other classes issues of diversity, which generates an openness regarding this topic that can lead to further in- and out-of-class discussions.

5. We have a doctoral class on diversity (MFT 6370) that focuses on cross-cultural research and diversity in clinical populations.

6. We have encouraged members of the MFT faculty to act as official Texas Tech University mentors for students of color at the undergraduate level.

7. All faculty are required to complete Employee Non-Discrimination training every two years at TTU.

8. In general we try to foster a spirit of respect and tolerance for others and take corrective action when we feel like an individual’s rights or dignity are not being protected. This has happened with individual meetings with the Program Director as well as meetings between faculty and students. When significant problems arise, policies are in place for the filing of complaints or grievances.
Evaluation of MFT Educational Outcomes

Assessment and Improvement

Each year the Educational Outcomes of the TTU MFT doctoral program will be assessed and evaluated. This will occur through the use of gathering data and updating the following: 1) The TracDat System, 2) The Student Learning Outcomes Spreadsheet, 3) The Program Outcomes Spreadsheet, 4) The Faculty Outcomes Spreadsheet and 5) The Alumni Survey Spreadsheet. This process will be led by the Program Director with the help of the faculty and will follow this timeline.

<table>
<thead>
<tr>
<th>Task</th>
<th>Early Summer</th>
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<th>Early Fall</th>
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<td>Updated Policies put in Fall Program Manual</td>
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<td>Revise and Create Policies</td>
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Alumni Survey

It is important to receive feedback from our alumni to know if we are meeting our Educational Outcomes. Feedback will be sought from all alumni via the Alumni Survey. This is sent to all alumni one year post graduation, and every two years after that. The surveys will be sent out in the summer. Data from the surveys will be included into our Alumni and Program Outcomes Spreadsheets.
SECTION V

PLAN OF STUDY

Forms from Graduate School
Degree Plan and Courses Forms
DEPARTMENT OF APPLIED AND PROFESSIONAL STUDIES
MARRIAGE AND FAMILY THERAPY PROGRAM

PLAN OF STUDY/EXAMINATION MEETING

PRELIMINARY EXAMINATION (Doctoral Students)

The purpose of the Plan of Study/Examination meeting is to:
1. Confirm the fit between the student’s goals and the goals of the MFT Program
2. Make a decision as to student’s continuation in the MFT Program (Recommended, Conditional Continuation, Not Recommended)
3. Approve the Plan of Study, including transfer courses
4. Develop a plan for remedial work if needed
5. Confirm the student’s choice of the Advisor
6. Approve any waiver of client contact and supervision hours

Please adhere to the following instructions in preparing materials for your Plan of Study/Examination meeting. The meeting is scheduled with the MFT Faculty for the Spring Semester of your first year in the Doctoral Program.

I. In preparation for the informal meeting in the Fall, prepare the following materials and bring them to the meeting:
   1. An MFT degree plan (program form)
   2. Graduate School Degree Plan (Graduate School form)

II. In preparation for the formal meeting in the Spring:
   1. Submit a current vitae to the program secretary.
   2. Submit a clean version of the program degree plan form, the Graduate School Degree Plan and the sequence chart to the program secretary.
   3. Distribute evaluation forms to the faculty: Request that every departmental faculty member from whom you have taken courses fill out the faculty evaluation form and return it directly to the MFT Program Director (top of form should be filled out by the student before distributing).
   4. Decide on an Advisor: You were assigned a temporary advisor when you entered the program. At the time of the Spring Plan of Study/Examination meeting, you must name a faculty member as your advisor. This may be the faculty member originally assigned as a temporary advisor or another MFT or Addiction and Recovery Studies full-time graduate faculty member.
DEPARTMENT OF COMMUNITY, FAMILY AND ADDICTION SERVICES
MARRIAGE AND FAMILY THERAPY PROGRAM

FACULTY EVALUATION FORM

Student’s Name _______________________________    Date _________________

Faculty Member ______________________________

Capacity in which faculty member has known you:
Course #  __________ __________
Research Assistant __________ __________
Teaching Assistant  __________ __________

I agree (   ) do not agree (   ) that diagnostic statements solicited may be kept confidential. If I agree, I understand that such statements may not be released to me at a later date without the expressed permission of those who wrote them. I further understand that if I do not agree to the confidentiality of the diagnostic statements, this will not in itself disqualify me from being considered for continuation in my degree program.

_____________________________________  _______________________
Signature        Date

Based upon any experiences you have had with this student, please rate the following on a 1 - 5 scale, 1 = lowest, 5 = highest.

RATING
_____ 1. Capability of completing work in the MFT program
_____ 2. Degree of fit between student ability/interests and MFT program
_____ 3. Organizational/time management skills
_____ 4. Writing skills
_____ 5. Potential for contributing to the MFT Profession
_____ 6. In your opinion, should this student be continued in the MFT program (Yes, No, or comment below)

COMMENTS

__________________________________   _____________________
Faculty Signature      Date

**Return Directly to the MFT Program director**
Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.) on a course-by-course substitution basis upon approval of the MFT faculty and the Graduate School.

### RESEARCH (15 hours)

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<tr>
<td>HDFS 6364 Quantitative Methods III-MANOVA</td>
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<td>HDFS 6365 Quant. Methods IV – SEM</td>
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<td>MFT 6322 Family Systems II-RESEARCH</td>
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<td>MFT 6323 Qualitative Methods in MFT</td>
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<tr>
<td>MFT 7000 Research</td>
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### MARRIAGE AND FAMILY THERAPY (15 hours)

<table>
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<th>Course</th>
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<th>Hours</th>
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<td>MFT 6370 Diversity in MFT</td>
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</tr>
<tr>
<td>MFT 6311 Contemporary Directions in MFT</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6342 MFT Seminar – Child/Adolescent</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6342 MFT Seminar – (e.g., violence)</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6396 MFT Supervision</td>
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### ADDITIONAL COURSES (12 hours)

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester</th>
<th>Hours</th>
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</thead>
<tbody>
<tr>
<td>MFT 6397 Supervision Practicum</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>3 Electives (e.g., HDFS 6365-SEM; HDFS 5353-Grantwriting-Writing for Publication; ADRS 6301–Addictions &amp; the Family; ADRS 6315 – Treatment of Addictions; MFT Seminar: gender, violence, grief/loss; PSY 5335- Psych of Trauma &amp; Abuse; PSY 5331 – Small Group Behavior).</td>
<td></td>
<td>3</td>
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### OTHER PROGRAM REQUIREMENTS (24 hours minimum)

<table>
<thead>
<tr>
<th>Course</th>
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<tr>
<td>MFT 6395 Practicum</td>
<td></td>
<td>15 min.</td>
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<tr>
<td>MFT 7395 Internship</td>
<td></td>
<td>6 min.</td>
</tr>
<tr>
<td>MFT 7000 Advisor</td>
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</table>

### DISSERTATION (12 hours minimum)

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 8000 Dissertation</td>
<td></td>
<td>12 min.</td>
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</tbody>
</table>

### TOTAL Ph.D. HOURS

78

### PROJECTED DATE FOR QUALIFYING EXAMINATION:

<table>
<thead>
<tr>
<th>Semester</th>
<th>Year</th>
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</thead>
<tbody>
<tr>
<td>Fall</td>
<td>20___</td>
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<tr>
<td>Spring</td>
<td>20___</td>
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### PROJECTED DATE FOR GRADUATION:

<table>
<thead>
<tr>
<th>Semester</th>
<th>Year</th>
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<tbody>
<tr>
<td>Fall</td>
<td>20___</td>
</tr>
<tr>
<td>Spring</td>
<td>20___</td>
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</tbody>
</table>

Revised: 9/16/2014
MFT DOCTORAL CURRICULUM

STUDENTS ENTERING THE PROGRAM (FALL 2014)

USUAL COURSE SEQUENCE

Doctoral degree: students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions. Students entering with a master’s degree from an accredited MFT program may be excused from all or most of the Standard Curriculum (Masters level courses). Course transfers are done on a course-by-course basis, as evaluated and approved by the instructor for the course. When a student is not eligible for exclusion from one or more of the above listed courses, the student will be required to take these classes and some modification may be necessary to follow the course sequence listed below. Students are encouraged to discuss the most appropriate course sequence with their advisor.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>FALL 2013</th>
<th>SPRING 2014</th>
<th>SUMMER I 2014</th>
<th>SUMMER II 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>MFT 6311 – Contemporary MFT</td>
<td>MFT 6370 - Diversity</td>
<td>MFT 6395 - Practicum</td>
<td>MFT 6395 - Practicum</td>
</tr>
<tr>
<td></td>
<td>MFT 6342 - Child/Adolescent</td>
<td>MFT 6395 - Practicum</td>
<td>MFT 6395 - Practicum</td>
<td>MFT 6395 - Practicum</td>
</tr>
<tr>
<td></td>
<td>MFT 6395 - Practicum</td>
<td>HDFS 6352 - Quant. Methods II (ANOVA)</td>
<td></td>
<td>MFT 6395 - Practicum</td>
</tr>
<tr>
<td></td>
<td>MFT 7000 (advisor)</td>
<td>MFT 6342 Seminar – Mindfulness</td>
<td></td>
<td>MFT 6342 – Seminar OR Elective</td>
</tr>
<tr>
<td></td>
<td>HDFS 5349 Intro to Stats OR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MFT 5351 Research Methods – if needed</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>YEAR</th>
<th>FALL 2014</th>
<th>SPRING 2015</th>
<th>SUMMER I 2015</th>
<th>SUMMER II 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>2nd</td>
<td>MFT 6323 – Qualitative Methods</td>
<td>MFT 6322 - MFT Research</td>
<td>MFT 7000 (if not taken previously)</td>
<td>MFT 6342 - Seminar OR Elective QUALS</td>
</tr>
<tr>
<td></td>
<td>HDFS 6364 - Quant. Methods III (MANOVA)</td>
<td>MFT 6397 - Supervision Practicum</td>
<td></td>
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<tr>
<td></td>
<td>MFT 6396 - Supervision</td>
<td>Elective : HDFS 6365 - Quant. Methods IV (SEM)</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>MFT 6395 - Practicum</td>
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</tr>
</thead>
<tbody>
<tr>
<td>3rd</td>
<td>MFT 7395 - Internship</td>
<td>MFT 7395 - Internship</td>
<td>MFT 8000 - Dissertation</td>
<td>MFT 8000 - Dissertation</td>
</tr>
<tr>
<td></td>
<td>Elective: ADRS 6301 – Couple/Family</td>
<td>MFT 8000 - Dissertation</td>
<td>COMPLETE PH.D.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dynamics of Addictions (if needed)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>MFT 8000 - Dissertation</td>
<td></td>
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</tbody>
</table>

**ELECTIVES:** Doctoral students are required to take **THREE ELECTIVES.**
Electives may be selected among the following courses (HDFS 6365 - Quant. Methods IV (SEM); MFT 6342- gender, Addictions, grief/loss, violence; HDFS 5353 - Proposal/Grant Writing, ADRS 6301 – Addictions & the Family, ADRS 6315 – Treatment of Addictions, PSY 5335 – Psych of Trauma & Abuse, PSY 5331 – small group behavior, SOC 5335 - Violence) and/or outside the department/college.

**NOTES:** MFT 7395 (Internship) Students should be enrolled during the semester(s) they are working on internship. This may or may not be the fall semester of their third year and will vary by student and internship site.
MFT 8000 (Dissertation) It is also important to remember that once students register for dissertation credits, they must continue be enrolled for these credits each semester until they graduate.

Revised: 9/16/2014
<table>
<thead>
<tr>
<th></th>
<th>FALL</th>
<th>SPRING</th>
<th>SUMMER I</th>
<th>SUMMER II</th>
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<tr>
<td>Year 4</td>
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<tr>
<td>Year 5</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
GRADUATE COURSES REQUIRED IN THE MFT CURRICULUM

COURSES IN MARRIAGE AND FAMILY THERAPY (MFT)

MFT 5304. Systemic Evaluation
   An in-depth examination of a systemic approach to clinical evaluations. Students receive training in administration and application of systemic assessment methods.

MFT 5322. Family Systems.
   Application of general systems theory and cybernetics to family systems. Exploration of interactional patterns, information processing, family structure, family belief systems, and family life cycle transitions with an emphasis on change processes.

MFT 5370. Issues in Professional Development.
   An examination of the major issues for professionals in marriage and family therapy. Emphasis on ethical standards, professional identity, and private practice issues.

MFT 5302. Family Therapy II.
   Prerequisite: Consent of instructor. Examination of transgenerational and object relations approaches to family therapy including the work of Bowen, Boszormenyi-Nagy, Whitaker, and Satir.

MFT 5303. Family Therapy III. [Couple/Sex Therapy]
   Prerequisite: Consent of instructor. An examination of family influences on human sexual functioning, basic interactional assessment, and interventions for common sexual dysfunctions. Intervening in incestuous families and the role of addiction in sexual behavior.

   Study of research strategies and techniques relevant to human development, family studies, and marriage and family therapy including experience in conducting research investigations.

MFT 6311. Contemporary Directions in MFT
   An examination of postmodern thought in marriage and family therapy with emphasis on the collaborative and narrative approaches.

MFT 6322. Family Systems II.
   Advanced topics and issues in systems theory. Special focus on marriage and family therapy research.

MFT 6323. Qualitative Methods in MFT
This course will focus on qualitative research methodologies specifically related to marriage and family therapy research. Students will gain practical experience applying qualitative methods to their research with clinical populations and family therapy topics.

MFT 6342. **Advanced Family Therapy Topics.**
Prerequisite: Consent of instructor. Advanced topics in the field of family therapy that may include family therapy with special populations and recent developments in family therapy theory and application.
- Gender, Violence, Grief/Loss, etc. -

MFT 6342. **Advanced Family Therapy Topics.**
Prerequisite: Consent of instructor. Advanced topics in the field of family therapy that may include family therapy with special populations and recent developments in family therapy theory and application.
- Child/Adolescent -

MFT 6370. **Diversity in MFT**
An examination of issues of race, ethnicity, and culture as they relate to family therapy. The course is designed to raise awareness and to train multiculturally competent therapists.

MFT 6395. **Practicum in Marriage and Family Therapy.**
Supervised experiences designed to prepare the student for involvement in marriage and family therapy and family life education. May be repeated for credit up to 48 hours.

MFT 6396. **Supervision of Marriage and Family Therapy.**
Prerequisite: Two years marriage and family therapy practicum and consent of instructor. Theory, research, and supervised practicum of family therapy supervision.

MFT 6397. **Supervision Practicum in Marriage and Family Therapy.**
Prerequisite: Completion of MFT 6396 or equivalent and consent of instructor. Course provides structured experience in supervision of marriage and family therapy students.

MFT 7000. **Research.** (Variable credit)

MFT 7395. **Internship in Marriage and Family Therapy.**
Prerequisite: Permission of Director of Marriage and Family Therapy Program. Full-time supervised internship in an appropriate setting. May be repeated for up to 12 hours credit.

MFT 8000. **Doctor’s Dissertation.** (Variable credit)
COURSES IN HUMAN DEVELOPMENT AND FAMILY STUDIES (GHDFS)

HDFS 5310. Theories of Human Development.
Introduction to the application of concepts and theories in human development.

HDFS 5321. Family Theory.
A comprehensive exploration of theory in family studies. The role of theory in empirical investigation; conceptual frameworks; strategies of theory building; examination of systems theory and a spectrum of other models useful in the interdisciplinary study of individual, couple, and family behavior.

HDFS 5349. Quantitative Methods I [Intro. Statistics]
An introduction to the quantitative methods and statistics necessary to conduct research with children and families through a developmental perspective.

HDFS 6363. Quantitative Methods II – ANOVA
History, philosophy, and current issues relevant to the areas of human development and family studies.

HDFS 6364. Quantitative Methods III – MANOVA
Prerequisite: HDFS 5349, 6363. The third course in the quantitative methods sequence focusing on multivariate techniques involving multiple dependent variables in human development and family studies.

HDFS 6365. Quantitative Methods IV – SEM
Prerequisite: HDFS 5349, 6363. The final course in a four-course sequence on methods for conducting relationship research through a developmental perspective. A focus on Factor Analysis, Structural Equation Modeling, HLM, etc.

COURSES IN ADDICTIVE DISORDERS AND RECOVERY STUDIES (ADRS)

ADRS 5310. Introduction Overview to ADRS
Introduction

ADRS 6301. Couple and Family Dynamics of Addiction

ADRS 6315. Systems Treatment of Addictions

ADRS 6329. Eating Disorders and Other Process Addictions
TEXAS TECH UNIVERSITY
DEPARTMENT OF APPLIED AND PROFESSIONAL STUDIES
MFT PROGRAM

REPORT OF PRELIMINARY EXAMINATION (Doctoral)

Name__________________________________        Date_________________

I. Committee Members Attending:
_________________________ (Chairperson)    _________________________
_________________________                           _________________________
_________________________        _________________________

II. Strengths:

III. Concerns:

IV. Plan for Remediation:

V. MFT Faculty Action:

_________________Continuation in Program Recommended
_________________Conditional Continuation Recommended (letter attached)
_________________Continuation in Program Not Recommended (letter attached)

VI. Approved: ______________________________

MFT Program Director
Transfer of Client Hours from Work completed
Prior to Doctoral Program

Student’s Name __________________________________________________________

A. For work completed in COAMFTE – accredited/candidacy Master’s program

Name of Program _________________________________________________________

Program Director _______________________________________________________

(Attach verifiable form signed Program Director)

B. For work completed and supervised by AAMFT Approved Supervisor

Location where therapy completed ________________________________________

Approved Supervisor _________________________________________________

(Attach verification signed by Approved Supervisor)

<table>
<thead>
<tr>
<th>Client Contact</th>
<th>Supervision</th>
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<tbody>
<tr>
<td>Individual</td>
<td>Individual-Live</td>
</tr>
<tr>
<td>Couple</td>
<td>Individual-Audio</td>
</tr>
<tr>
<td>Family</td>
<td>Individual – Video</td>
</tr>
<tr>
<td>Group Individual</td>
<td>Individual – Case Note</td>
</tr>
<tr>
<td>Group Couple</td>
<td>Group-Live</td>
</tr>
<tr>
<td>Group Family</td>
<td>Group-Audio</td>
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<tr>
<td>Total Hours</td>
<td>Group-Video</td>
</tr>
<tr>
<td></td>
<td>Group-Case Note</td>
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</table>

Accepted by ____________________________ on ____________________________

(TTU Program Director) (Date)

Entered into TTU computer records by ____________________________ on ____________________________

When complete, place in student’s clinical file in MFT Secretary’s office with documentation attached.
FORM FOR REPORTING CHANGES ON GRADUATE DEGREE PROGRAMS

Date ___________________

Student’s Name_________________________________     SSN:___________________

Check One:  Master’s ___________                         Doctorate_____________

Major: _________________________________________________________________

Expected Graduation Date: _________________________________________________

Delete Course(s): ________________________________________________________

Add Course(s): __________________________________________________________

_______________________________________________________________________

______________________________
Signature of Graduate Advisor
TEXAS TECH UNIVERSITY
The Graduate School

STATEMENT OF INTENTION TO GRADUATE
Doctoral Students

The *Statement of Intention to Graduate Form (Secure)* – should be completed online at:

https://www.depts.ttu.edu/gradschool/private/default.aspx
A graduate student attending Texas Tech must pay tuition and fees every semester until the degree is completed. There is a big differential between in-state and out-of-state tuition. Texas residents pay in-state tuition. Graduate students who are not Texas residents when they apply for graduate school pay tuition at the in-state rate if they have at least a $1000 scholarship or fellowship from the University for that academic year. A scholarship or fellowship allows students to pay in-state tuition for every semester that year they are enrolled, including summer. A half-time graduate assistantship also allows students to pay at the in-state rate for the semester they are actually an assistant. For each term (Fall, Spring, Summer I, Summer II), students with no scholarship must pay out-of-state tuition if they do not have a half-time assistantship for that term.

Most out-of-state graduate students in the CFAS Department have paid tuition at the in-state rate because they have had scholarships and/or assistantships.

Some students pay in-state tuition because they decide to become permanent residents of Texas. If a student has moved to Texas for the purpose of attending school, the student can apply to be re-classified to in-state for tuition purposes if (a) the student is employed full-time for at least 12 months and in school no more than part-time during this period, (b) the student has other evidence of full-time residence status such as car license plates, driver’s license, buying a home, and local bank account, and (c) the student intends to remain in Texas to work after the degree is completed. A spouse’s residence status does not affect the student’s status. Thus, a student could be out-of-state for tuition purposes even though the spouse has worked full-time for 12 months and is considered a Texas resident.

There is an Admissions Evaluator in the Graduate School who can discuss the residency status of an individual student and determines whether or not a graduate student may be re-classified from out-of-state to in-state based on a Residence Questionnaire.
SECTION VI

MFT 7000 Research
MFT PROGRAM

MFT 7000 DOCTORAL RESEARCH PROJECT

MFT 7000 is intended to be an intensive research project, conducted under the supervision of the student’s advisor. The research may involve collection of data or analysis of an existing data set, however, the end product must be a manuscript based on the research project and must be submitted to a peer-reviewed scholarly journal with the prior approval of the advisor. The specific nature and scope of the 7000 project must be negotiated between the student and advisor, with the advisor, ultimately, using his/her discretion to make decisions about what constitutes an acceptable MFT 7000 project.

Authorship is not “automatic” and must be based on actual contribution. Authorship must follow the “Ethical Standards for Reporting and Publishing of Scientific Information” published by the American Psychological Association. A copy of these standards is included in this section of the Program Manual. It is recommended that the scope, nature, time line, and authorship of the MFT 7000 project be formalized in a contract between advisor and student. An example of a contract is attached.

Requirements for the 7000 project differ somewhat between the master’s and doctoral levels as follows:

**Doctoral 7000 Project**

It is expected that the student will be first author on the manuscript, reflecting that the student made the primary contributions to the specific research being reported and the preparation of the manuscript. Usually, the advisor will be co-author of the manuscript, reflecting the advisor’s contribution to the research and to the write-up. Students entering the program at the doctoral level are expected to begin research on their 7000 topic during their first year in the program. Students with previous research experience should speak with their advisor about the specifics of the 7000 project as it may relate to a past project (e.g., completed thesis or manuscript) or it may relate to the next phase of their research plan.

Completion of the 7000 requirement will be demonstrated by student’s enrollment in MFT 7000 with the co-authoring faculty member (3 credit hours) and a completed 7000 project (as verified with a completed Approval form and a copy of the submitted manuscript).
MFT PROGRAM

APPROVAL OF MFT 7000
RESEARCH PROJECT

_______________________________________  ________________________
Student’s Name      Date

Title of Manuscript: _______________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Authors: ________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Name of Journal: _________________________________________________________
________________________________________________________________________
________________________________________________________________________

Date Submitted: __________________________________________________________

Attach a copy of the manuscript for the student’s file.

________________________________________  ________________________
Advisor’s Signature      Date
MFT PROGRAM

Example of a Contract for the MFT 7000
Research Project

Nature and Scope of Project: ______________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Source of Data: __________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Expected Authorship: ______________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Expected Timeline: _______________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Expected main contributions of student: _____________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Expected main contributions of advisor: _____________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Student Signature ____________________________ Date __________________________

Advisor’s Signature ____________________________ Date __________________________
SECTION VII

QUALIFYING EXAMINATION
MFT Program Qualifying Examination

I. Purpose of the Qualifying Examination

The purpose of the exam is to assess the student’s knowledge of the clinical and research portions of doctoral study, reflecting the program’s emphasis on the scientist-practitioner model of training. According to the University Catalogue, the Qualifying Examination for Admission to Candidacy for the doctor’s degree is one of the major features of the doctoral program and will be administered in both the major and minor areas of study (if a formal minor has been declared). The examination requires a synthesis and application of knowledge acquired during the course of study for the doctoral degree; consequently, satisfactory performance in course work does not necessarily guarantee successful performance on the Qualifying Examination. A student is eligible to stand for this examination after receiving approval of the doctoral degree plan from the dean of the Graduate School, completing all language and tool requirements, and completing most of the course work prescribed by the approved plan. Students must take this examination within one calendar year of completing all requirements listed on the degree plan. Failure to do so will be cause for dismissal from the program.

II. Role of Faculty

The full-time members of the MFT Faculty in residence that semester will serve as the qualifying examination committee for MFT students. It is possible that some of the faculty will read only the methods portion of the exam and others will read only the theory portion of the exam. The examination is to represent the student’s own work and is to be done independently. Faculty are not to serve as consultants on any aspects of the qualifying examination. It is assumed that the student has received faculty feedback on her/his work during coursework and supervision. To make sure that all students receive the same information, all questions about quals should be addressed to the MFT Program Director. The Program Director will also have an information meeting on quals in November and in July.

Faculty shall treat quals results as confidential. One copy of each quals answer will be kept in the MFT office as part of our official records. Students may show other students their own copy of their quals answers after the quals process is finished.

In extremely rare cases, the student may request in writing special consideration with respect to involving an outside person in the quals process. For example, a student with dyslexia may require the help of a technical (not content) editor. The student will turn in both the edited and unedited versions.
III. Timing of the Qualifying Examination

The qualifying examination will be offered twice a year just before the beginning of the two long semesters (August and January). The two written parts will be completed prior to the start of the semester and any rewritten examinations will be submitted within the first four (4) weeks of the semester. In an extremely rare case, a student may not be able to take quals at the usual time (e.g., religious reasons). The rare request for an exception should be made in writing to the MFT Program Director.

Generally, the earliest it is feasible to take quals is the middle of the second year and the latest is the middle of the third year. Usually quals are taken prior to beginning the internship. Consultation with your advisor is helpful. You must have completed the following to take quals:

1. The preliminary examination
2. Your 7000 research project
3. The majority of coursework
4. MFT practicum
5. Teaching portfolio

Teaching Portfolio
The pre-quals requirements (1-4) are discussed in detail in other sections of the manual. However, the teaching portfolio portion is discussed here. It is designed to help prepare you for an academic profession, and will consist of five primary components. These should be compiled into a professional looking portfolio (cover sheet, table of contents, appropriate binding) and turned into your advisor prior to sitting for the qualifying exams. The components should be acquired during the student’s first two years in the program. If you have not been able to work in a teaching role as a graduate assistant during your first two years, you will need to complete this as best as you can based on guest lectures or other presentations you have done or prepared.

1. At least one course evaluation from the TLPDC
2. Peer review (supporting letter from peer who has observed your teaching)
3. Teaching Philosophy Statement (one page or less)
4. Sample syllabus (from a class you have taught or created)
5. Letter from advisor concerning consultation/support efforts in regard to your teaching experience in program

Your advisor will evaluate the teaching portfolio using the rubric presented on the next page before submitting the teaching portfolio and completed rubric to the MFT Program Director for final approval.
Teaching Portfolio Requirements [From the Quals section of the Doctoral Program Manual] - [The teaching portfolio] is designed to help prepare you for an academic profession, and will consist of six primary components. These should be turned into your advisor in one folder prior to sitting for the qualifying exams. These should be acquired during the student’s first two years in the program. If you have not been able to work in a teaching role as a graduate assistant during your first two years, you will need to complete this as best as you can based on guest lectures or other presentations you have done or prepared.

1. At least one course evaluation from the TLTC
2. Evidence of additional training on teaching (attending a workshop/class or other instruction)
3. Peer review (supporting letter from peer who has observed your teaching)
4. Teaching Philosophy Statement (one page or less)
5. Sample syllabus (from a class you have taught or created)
6. Letter from advisor concerning consultation/support efforts in regard to your teaching experience in program

Teaching Portfolio Rubric
To be filled out by doctoral advisor.

Each item is ranked from 1-5 along the following scale: (1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree)

<table>
<thead>
<tr>
<th>Item</th>
<th>Ranking (From 1-5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is an evaluation from the TLTC.</td>
<td></td>
</tr>
<tr>
<td>The student has sought out training and support on pedagogical skills.</td>
<td></td>
</tr>
<tr>
<td>There is a constructive peer review letter.</td>
<td></td>
</tr>
<tr>
<td>The teaching philosophy is well thought out and complete.</td>
<td></td>
</tr>
<tr>
<td>The sample syllabus is well constructed and shows appropriate learning outcomes, course materials and assignments.</td>
<td></td>
</tr>
<tr>
<td>The advisor supports this student portfolio.</td>
<td></td>
</tr>
<tr>
<td>The student is ready for collegiate-level instruction.</td>
<td></td>
</tr>
<tr>
<td><strong>Total (from 5-35)</strong></td>
<td></td>
</tr>
</tbody>
</table>

Comments:  

_______________________________  ___________________  
Signature of Advisor Date
A quals notification form should be signed by you and your advisor and forwarded to the MFT Program Director at least one month prior to the next date quals are offered. The Program Director will check to see if you have met the requirements above and present your request to the MFT Faculty. There is no penalty if you change your mind and decide not to take the exam until a future time.

IV. Content and Format for Qualifying Exam

The quals will focus on both clinical and research knowledge and consist of three parts: Research and Theory papers that will be graded by the MFT faculty, and an oral defense of your theory, research, and teaching that is graded on a pass/fail scale. Papers will be identified only with an ID number provided by the MFT Program Secretary. You will be given a cover sheet for the two written exams with your ID on it. Faculty have a responsibility to treat quals answers as confidential documents. Because of the nature of the quals, it is recognized that the use of an ID does not guarantee anonymity, especially on the clinical theory portion. A copy of each paper must be provided for each MFT faculty member along with a file copy. Exams are received from and turned into the MFT Program Secretary. The two written portions must be typed and in APA style. The three parts are:

1. Clinical Theory.
   Written 25 page (maximum) paper on your theory of therapy and a written presentation and analysis of a couple or family case that illustrates your theory. Extreme care must be taken to obtain permission to use case information and to protect the confidentiality of the client couple or family. Give a copy of the completed permission form to the MFT secretary when you turn in your theory paper. The secretary will place the form in a confidential file.
   Students must write this portion of their qualifying examination at the earliest point (August or January) following the completion of their clinical hours in the TTU MFT Clinic. In an extremely rare case, a student may not be able to take this portion of quals at the usual time (e.g., religious reasons). The rare request for an exception should be made in writing to the MFT Program Director.

2. Research.
   A 25 page (maximum) written critique of a research article along with a research proposal designed to address the concerns you raised in your critique. The article will be chosen by the faculty from the last five years of one of the following journals: Family Process, Journal of Marital and Family Therapy, Journal of Family Psychology, and Journal of Consulting and Clinical Psychology. The article selected may be either qualitative or quantitative. The articles selected in the recent years are available for students to see in the MFT Clinic.
3. **Oral Presentation of Theory, Research, and Teaching.**

This presentation will cover your professional preparation up to this point in the program and can be based on your theory, research and/or teaching experience. The presentation should last no more than 30 minutes in length and should display your professional skills as you would in a job talk. The time spent on each subject should be negotiated with advisor to be specific to a particular job talk you would be giving for your profession of choice (i.e. a clinical emphasis for clinical position, research emphasis for academic position).

V. **Grading the Qualifying Examination**

The MFT faculty members will independently score each of the two written parts on a four-point scale (see below). The scores for each part will be averaged and a mean score of 3 or above will be a pass. A mean of 1 to 1.99 is a fail. For the two written parts, a mean of 2 to 2.99 means that a limited re-write will be scheduled. In cases of a limited rewrite, students will be provided with written feedback from the faculty regarding their exam’s associated problems and deficiencies. In addressing the feedback, it is recommended that students prepare a cover letter identifying how they addressed each point or critique, and where the changes can be found in the document (i.e., what page numbers). Faculty will then read the document, as rewritten and will vote again using the same scale (see below).

4 = HIGH PASS  
3 = PASS  
2 = POOR - LIMITED REWRITE OF PAPER IF STUDENT PASSES BUT WITH SIGNIFICANT PROBLEMS.  
1 = FAIL - COMPLETE REWRITE OF PAPER IF STUDENT FAILS.  
*Scores from faculty can include decimals (i.e. 3.5)*

The qualifying examination is a unified whole and is not considered to be passed until the student has passed both parts of the exam. The clinical presentation will not be graded. The student may retake, one time, any part of the qualifying examination that was failed. If any part is failed a second time, the student will be dismissed from the MFT Program, as TTU Graduate School regulations allow only two attempts at the qualifying examination. The Graduate School will be notified of the results (Pass or Fail) of each attempt at the qualifying examination. A student who passes the qualifying examination is normally admitted to Candidacy by the Graduate School and has four years from that date to complete the dissertation.

VI. **Criteria for Scoring**

The faculty will consider the following in scoring the exam:
1. Knowledge of the relevant clinical theories/research literature (factual knowledge).
2. Knowledge of the relevant clinical and research skills.
3. Writing ability, including use of APA style, proper grammar, organization, and clarity of expression.
4. Ability to think analytically, ethically, and creatively. Ability to develop informed ideas and opinions, and integrate and synthesize the respective elements in a logical and coherent fashion.
5. Extent, accuracy, and appropriateness of cited references.
6. Epistemological and theoretical consistency, including congruence between theory of therapy and case illustration.
7. Extent to which the answer is relevant to the question.

BE SURE TO ANSWER EACH PART OF EACH QUESTION AND STAY WITHIN THE PAGE LIMITS.

VII. Schedule

1. At least one month prior to quals (December/July), obtain advisor’s permission to take quals and turn form into MFT Program Director. When approved, obtain ID cover sheets from MFT Secretary.

2. Friday, prior to the week of classes starting (August, January)
   a. Turn Clinical Paper in to MFT Secretary by 1 p.m.
   b. Pick up research article for critique from MFT Secretary, available at 1 p.m.

3. Monday, first week of class
   Turn Research Paper in to MFT Secretary by 1 p.m.

4. Friday, first week of class
   a. Faculty meet to turn in scores for the two written parts of the exam.
   b. Faculty develop written feedback for any exam with an average score of less than 3.

5. Tuesday, second week of class
   a. MFT Program Director gives results to the student.
   b. If the score on either part is not a pass, student receives written feedback on major deficiencies.
   c. If the average score is between 2 and 2.99 (Poor), a limited rewrite is required.
   d. If the student has passed both written parts (theory and research), the clinical presentation is scheduled.
6. Friday, Third week of class
   Limited rewrite is due to MFT secretary by 1 pm. Results will be available from Program Director on Friday of the following week.

7. Fourth and Fifth week of class
   a. Oral presentations are scheduled.
   b. Faculty will provide feedback to students, with the standard being what would be appropriate for a “job talk” quality presentation

I. Theory of Therapy with Case Illustration (25 pages)

A. Theory of Therapy

Address the following points, not necessarily in this order. However, use headings for each section and address each point.

1. Epistemological and Theoretical Base - Which theories guide your work? Identify the key assumptions and guiding principles of your model. Describe the process you went through in developing your own theory of therapy.
2. What brings people into therapy?
3. What leads people to change? Assumptions about how change occurs.
4. How is your theory informed by the systems paradigm and what is the basis for your preference for an interactional or relational (as opposed to an individual or intrapsychic) orientation.
5. When would you work with different family constellations (individual, couple, family, other subsystems)?
6. How does diversity (gender, race, ethnicity, social class, sexual orientation, age, religion) inform your theory of therapy?
7. How do you conceptualize family health?
8. What is the role of the therapist?
9. How do you adapt your approach to different presenting problems?
10. How do you conceptualize the therapist’s use of self in therapy?
11. How do you assess clinical progress and treatment outcomes?

B. Written Case Illustration (use headings as appropriate)

1. Choose a couple or family case.
2. Obtain written consent to present the case in both a written and oral format.
3. As your professional responsibility, disguise the identity of the clients so than an outsider would not be able to identify the clients. Think of how you would disguise your clients if you were using the case as an illustration in a published article or book. For example, change location, profession, ages, etc., anything that would be particularly
identifying. Make changes so that the meaning would not be changed (e.g., 11 yr. old a “12 yr. old,” not a 3 yr. old; teacher a “professional” not a construction worker; keep gender the same).

4. Briefly describe the clients, including your initial assessment. Include data from the assessment package.

5. Describe your conceptualization of the case.

6. Describe the interventions you used.

7. Describe the progress of the case over time.

8. Discuss the relevant ethical and legal issues.

9. Identify and describe the relevant social, cultural, ethnic, racial, and gender considerations.

10. Using the DSM-IV system, state your diagnostic impressions for each of the members of the family. Discuss the basis for your impressions.

11. Discuss all referrals and/or consultations you actually made and considered making with reference to this case, including your work with the faculty supervisor.

12. Assess how this case reflects your theory of therapy. Evaluate the quality of your therapy with this case.

II. Research Methodology Qualifying Examination

Using an absolute maximum of 25 doubled-spaced pages, provide a response to the following two-part task.

A. Review and Critique (60%) the article by addressing each of the items listed below (use headings and address each point):

QUANTITATIVE ARTICLE – Review and Critique
• Rationale and Justification for the study
• Theoretical and Literature foundations for the study
• Sample and Sampling Methods
• Variable Operationalization and Research Hypotheses
• Design
• Procedures
• Measurement, including validity and reliability
• Data Analyses
• Conclusions and Presentation of Results
• Discussion of Findings and Conclusions
• Limitations

QUALITATIVE ARTICLE – Review and critique
♦ Rationale and Justification for the Study
♦ Purpose of the Study
B. Develop and describe a Research Proposal (40%) using the same topic identified in the attached article that addresses the areas of concern discussed in your critique. The proposal may use either a quantitative or qualitative methodology. Include the following items and use headings for each item:

QUANTITATIVE – Research Proposal
- Specific Aims of the Project
- Background & Significance
- Sample & Sampling Methods
- Variable Operationalization & Statement of Hypotheses
- Design
- Procedures
- Measurement
- Data Analyses
- Time Schedule
- Cost Estimates

QUALITATIVE – Research Proposal
- Rationale and Justification for the study - state the Problem and the Purpose of your Study
- If appropriate, include the Theoretical Foundations for the Study
- Specify the Qualitative Tradition/s to be employed in your study (phenomenology, grounded theory, etc.). State the Assumptions and Rationale for this type of Study and Outline the Design of the Study
- Delimitations and Limitations of the Study
The Grand Tour Question and Follow-up Questions, if appropriate for the study
♦ Role of the Researcher
♦ Site and Sample Selections
♦ Data Collection Procedures
♦ Managing and Recording Data
♦ Data Analysis Procedures
♦ Methods for verification – trustworthiness, triangulation of data, etc.
♦ Time schedule
♦ Cost Estimates

Remember to utilize APA style throughout your paper, including appropriate references.

III. Oral Presentation

In a 30-minute presentation for MFT students/faculty, present yourself professionally according to the criteria listed above. It is assumed that most, if not all, students will be asked to give a “job-talk” or professional presentation and this is the standard that you should work toward. This means that students can dispense with introductory information regarding their model or research (e.g., given the audience, there is no need to define differentiation or other basic conceptual points) and overly personal information about their formative/developmental experiences (e.g., information that would be distracting to future employers at a job interview).

Following the presentation, MFT faculty and students will ask questions, followed by a brief time to meet alone with the MFT faculty to clarify any points in your presentation.

The faculty will vote either pass/fail for the student’s oral presentation. If the majority of the faculty pass the student, a formal written recommendation that the student be admitted to candidacy for the doctoral degree will be sent to the Graduate School. The student will have 5 years from the date of completing the qualifying examination to complete his/her dissertation.

NOTE: Too often students are unable to complete their presentations because of poor planning and timing, including failing to leave sufficient time for videotaped examples. In a “real” job talk, such a problem can be fatal to your chances for a position. Practice your presentation several times with a select audience (friends/partner/pets) to ensure that your presentation will run smoothly and on time.
COVER SHEET

MFT QUALIFYING EXAM

Circle one: THEORY or METHODS

DATE: ________________

STUDENT ID NUMBER: ________________

In order to maintain anonymity to the extent possible in the review process, please do not place your name, social security number, or any other identifying information on your paper. Please use this sheet as the cover sheet for your answer. Use the name of the exam (theory or methods) and your ID as a header on each page. The MFT secretary will maintain a file with your identification number. If you misplace your number, please contact the secretary directly.

Submit your paper with the cover sheet electronically in a PDF form. Submit the electronic form by email to the MFT secretary. You must also turn in one (1) hard copy for the files.
MFT PROGRAM

NOTIFICATION FORM FOR QUALIFYING EXAMINATION

Student Name: ____________________________________________

Date: _______________________

I have completed the following requirements and request to take quals in January/August (circle one) of ____________ (year).

1. The preliminary examination: Date: __________
2. Your 7000 research project: Date: __________
3. The majority of coursework:
   List any courses on your plan of study not yet taken:
       __________________________________________
       __________________________________________
       __________________________________________
4. Removal of incompletes:
   (List below any courses with a current grade of Incomplete)
       __________________________________________
       __________________________________________
       __________________________________________
5. MFT practicum (250 or 500 client contact hours and approval of faculty):
   Date: __________

6. Passing grade on the national level Marriage and Family therapy Licensure Examination as identified as passing by the Texas board of Examiners of Marriage and Family Therapists.

Yes, I approve the student’s request to take quals:

Advisor: ______________________________ Date: ________________

MFT Program Director: __________________________ Date: ____________
Qualifying Exam Results

This is to inform you that the following student has successfully/unsuccessfully passed the qualifying examination:

Student Name: ____________________________________________________

Student SSN: ______________________________________________________

Department/College: ________________________________________________

Date: ____________________________________________________________

The Department/College recommends student be/not be admitted to candidacy.

____________________________________________________
Signature: Chair of Committee

Mail to:
Lora Lopez
The Graduate School
M.S. 1033

Or Fax to:
742.1746
SECTION VIII

PRACTICUM
Hours Policy – Summary

- The TTU doctoral program requires 1000 hours of client contact. This total must be completed by graduation. However:
  - Students who are coming from accredited master’s programs will be able to transfer in up to 500 clinical hours from their master’s (with the corresponding 100 supervision hours).
  - Students coming from non-accredited or other clinical master’s programs will be able to transfer in some of their clinical hours (see the full policies for more detail).
  - The remaining hours must be achieved during the doctoral work under the guidance of the clinical faculty in doctoral practicum (at least 200 hours) and in your formal internship, as well as other outside placements that have been approved.
- For hours to count under the internship umbrella, requirements for the internship (e.g., contract) must be in place.
- Generally, when students choose to work at clinical positions outside of the FTC and their internship, these hours will count toward that student’s total licensure hours, but will not count toward their 1000 total in their degree plan. Our first priority is the clinical experience the students have in our clinic and in their internship.
- Doctoral students coming with an MFT master’s degree will be expected to enroll in practicum for at least 4 long semesters (Fall, Spring, Summer, and Fall of their 2nd year). However, they will usually be transitioning into a supervisory role during their second fall semester. They may continue seeing clients (or teaming) during that time if needed for hours.
I. Professional Standards and Professional Behavior

MFT faculty and students enrolled in the MFT Program must adhere to AAMFT standards of ethical professional behavior in their therapy training, teaching, and research. A complete copy of the most current edition of the AAMFT Code of Ethical Principles for Marriage and Family Therapists is available in the Texas Tech Family Therapy Clinic and on-line.

Violations of these standards must be reported to the MFT Program Director (See Section on Grievance and Dismissal Procedures). Any violation may be reported also, in writing, to the AAMFT Committee on Ethics and Professional Practices.

Adherence to the AAMFT ethical standards includes carrying proper liability insurance to protect the clients and agencies involved in training students. MFT students and faculty are required to carry professional liability coverage. The MFT program purchases liability coverage through Texas Tech University each year for all students in Lubbock. This excludes students who have moved away to teach and practice but have not yet graduated from the program.

The national professional organization for marriage and family therapists is AAMFT. MFT faculty and students are expected to be members of AAMFT and to become actively involved in the work of AAMFT at the local, state, and national level.

Professional conduct with clients, other students, MFT faculty, and other agencies is an absolute requirement of the MFT Program. MFT faculty are expected to demonstrate appropriate models of such professional conduct, and students are expected to follow appropriate models of professional behavior.

II. Client Contact Hour Requirements

Prior to graduation from the MFT doctoral program, each student is required to complete at least 1,000 hours of direct client contact (face-to-face) under the supervision of an AAMFT Approved Supervisor (or equivalent). At least 500 hours of the 1000 hours must be with couples or families.

- “Direct contact" means face-to-face contact with clients.
- Two therapists working together in the room with the clients is considered "direct contact" for both therapists.
- Psychoeducation may be counted as direct client contact.
Observation of another therapist's work, although valuable, does not constitute "direct contact" unless during a team or practicum.

Up to 100 hours may consist of alternative therapeutic contact that is systemic and interactional. Prior approval by the Director of Clinical Training is required to include alternative therapeutic contact and psychoeducation hours in the 1,000 hour requirement. (See “Alternative Client Contact Hours” Section)

Half of the 1,000 hours of client contact must be with couples or families (relational). Regardless of experience and regardless of completing formal requirements for practicum and internship, students are expected to be seeing clients in some setting until the completion of the MFT Ph.D. program.

The 1,000 hour requirement for the TTU MFT program is met as follows:

A. PRACTICUM

Because the MFT program includes both master’s and doctoral-level students, it is important to determine the requirements for each student. There are 4 categories: (1) master’s students (2) students who enter the Ph.D. program with a master’s degree in an area that does not include clinical experience, (3) students who enter the Ph.D. with a master’s degree in an area that does include clinical experience, but is not accredited by Commission on Accreditation of Marriage and Family Therapy Education (COAMFTE), and (4) students who enter the doctoral program with a master’s from a program accredited by the COAMFTE.

1. Master’s MFT students.
   a. For Master’s policies on hours, please refer to the Master’s Program Manual.

2. Ph.D. MFT students with a master’s degree in a nonclinical area (e.g., sociology, family studies).
   a. Although these students may be able to transfer in classes (up to 9 credits worth) from their nonclinical master’s degree, they will then be required to complete the equivalent of an MFT master’s degree from TTU (and will follow those program policies as noted above) before proceeding to the PhD clinical requirements.

3. Ph.D. MFT students with a master’s degree in a related clinical area (e.g., clinical or counseling psychology, social work) or from a MFT master’s program not accredited by COAMFTE.
   a. These doctoral students may transfer in up to 300 of their clinical hours if a Formal Waiver is granted by the Clinic Director.
b. *Formal Waiver:* Students who have clinical experience and have received a Master’s degree from a program that is NOT accredited by the COAMFTE may apply to have a portion (up to 300) of their clinical experience hours transferred if these hours were accumulated under the direct supervision of an AAMFT Approved Supervisor or a supervisor who has been deemed as being equivalent to a AAMFT Approved Supervisor by the Director of Clinical Training. The remaining hours toward their 1000 must be accumulated in their doctoral program.

c. Family Therapy Clinic
   i. All direct contact hours earned in the Clinic or accepted by the Director of Clinical Training from elsewhere are counted toward the required 1,000 hours for the Ph.D.

d. Students who have a full 300-hour waiver
   i. Will provide services in the Family Therapy Clinic on a continuous basis for a minimum of one and half (1 1/2 ) years (through their second fall semester).
   ii. This experience will be completed in the Texas Tech University Family Therapy Clinic under MFT faculty supervision. At least half of these hours must be relational. Students must be enrolled in MFT 6395 while providing direct client services in the Family Therapy Clinic.

e. Students with less than a full 300-hour waiver
   i. Will provide services in the Family Therapy Clinic on a continuous basis for a minimum of two (2) years.
   ii. A minimum number of direct client contact hours required in practicum will be set by the Director of Clinical Training (i.e., 500 hours – the number of hours accepted). At least half of these hours must be relational. Students must be enrolled in MFT 6395 while providing direct client services in the Family Therapy Clinic.

f. Alternative Therapy Hours—the number of alternative hours is limited to 1/5th of the direct clinical contact hours credited to the student over the period of the Ph.D. program enrollments (limit = 100 hrs.). See the section on alternative hours for a definition of activities that are considered alternative hours. The Clinic Director must approve the source of alternative hours in advance.

4. **Students with a Master’s from a COAMFTE-Accredited Program.**
   a. These students may transfer in up to 500 of their clinical hours (including 100 hours of supervision) if a Formal Waiver is granted by the Clinic Director.
b. The “Transfer of Client Hours” form must be submitted to the Director of Clinical Training prior to the student’s Plan of Study meeting with the Program Director. A copy of this form may be found in the MFT Program Training Manual for Graduate Students, Section V: Plan of Study.

c. Family Therapy Clinic
   i. Students in this category will provide services in the Family Therapy Clinic on a continuous basis for a minimum of one-and-one-half (1.5) years (through their 2nd fall semester).
   ii. A minimum of 200 hours of direct client contact in practicum must be completed in the Texas Tech University Family Therapy Clinic under MFT faculty supervision. At least half of these hours must be relational. Students must be enrolled in MFT 6395 while providing direct client services in the Family Therapy Clinic. Students may choose to earn more of their hours in the Family Therapy Clinic.

d. Alternative Therapy Hours—the number of alternative hours is limited to 1/5th of the direct clinical contact hours credited to the student over the period of the Ph.D. program enrollments (limit = 100 hrs.). See the section on alternative hours for a definition of activities that are considered alternative. The Director of Clinical Training must approve the source of alternative hours in advance.

III. Requirements for AAMFT Clinical Membership and Licensure in Texas

Currently, AAMFT clinical membership requires 1,000 hours of direct client contact and 200 hours of supervision by an AAMFT Approved Supervisor (or equivalent) for persons in states/provinces without licensure or certification.

*However,* in states/provinces, such as Texas, where AAMFT has approved the licensure/certification process, a state/provincial license as a Marriage and Family Therapist is required for clinical membership. Currently, the State of Texas requires 3000 postgraduate hours (a minimum of 1500 hours of direct clinical services of which a minimum of 750 hours must be direct clinical services to couples and/or families) and 200 hours of supervision (100 hours of which must be individual supervision).

*Only clinical hours obtained following completion of a master’s in MFT or its equivalent will be counted toward full licensure. Therefore, it is imperative that students apply for licensure as a Marriage and Family Therapist-Associate as soon as they meet the requirements for the Associate license. Associate status is required for some paying positions and some internships.*

- Students completing a master’s degree in MFT with (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses
required by the State Board of Examiners of Marriage and Family Therapist are eligible to apply for licensure as a Licensed Marriage and Family Therapist-Associate license.

- Students who enter the MFT Ph.D. program with a master’s in a nonclinical area (e.g., sociology, family studies) must complete (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as an Licensed Marriage and Family Therapist-Associate license.

- Students who enter the MFT Ph.D. program with a master’s in a related clinical area (e.g., clinical or counseling psychology, social work) are still required to meet the following requirements (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as an Licensed Marriage and Family Therapist-Associate license. It is the student’s responsibility to present sufficient evidence to the Board for acceptance of clinical experiences and master’s-level coursework.

- Students entering the MFT Ph.D. Students who enter the MFT Ph.D. program with a master’s from an accredited (COAMFTE) MFT program must present evidence that they meet the following requirements (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as an Licensed Marriage and Family Therapist-Associate license. Students meeting these criteria are encouraged to apply immediately for Associate licensure.

III. Supervision Hour Requirements (Practicum and Internship)

A. PRACTICUM

Students in practicum must obtain individual or dyadic supervision with an appropriate supervisor (AAMFT Approved Supervisor, AAMFT Supervisor-in-training, or equivalent) at least once every week in which they have direct client contact in order to have direct client service hours counted toward the hour requirement.

During the period of the practicum, the student will be expected to maintain the required ratio of direct client contact hours to hours of supervision of five hours of client contact to one hour of supervision. For students from COAMFTE-accredited master’s programs, a minimum of 50 hours of practicum supervision is required (25 hours of individual supervision). For others, a minimum of 100 hours of supervision is required.
Fifty of these hours must be individual supervision. Supervision requirements for the internship period are discussed in the associated section.

Under the current rules of the COAMFTE, individual supervision is defined as meeting with the supervisor with no more than one other supervisee. Group supervision is defined as meeting with the supervisor with no more than five (6) total student supervisees. Under normal circumstances, every student in the Texas Tech MFT Program will receive more hours of supervision than the COAMFTE minimum requirement.

Students are responsible for maintaining acceptable supervision for any hours of direct client contact obtained after the first three years of enrollment in the MFT Program if the practicum requirement is not met by that time. Students are also expected to obtain appropriate supervision for on-going clinical work after practicum is complete. Arranging for appropriate supervision is the responsibility of the student. Such supervision may or may not be provided by the MFT Program faculty. Under no circumstances may a full-time MFT faculty member receive payment from a student for supervision of a current MFT graduate student.

In the Texas Tech MFT Program, hours of supervision will be counted only when the supervisor is an AAMFT Approved Supervisor, Supervisor-in-Training, or equivalent. Prior determination by the MFT faculty that the supervisor meets an equivalent standard is required if the proposed supervisor is not an AAMFT Approved Supervisor or an AAMFT Supervisor-in-Training.

Hours of supervision of graduate students by other graduate students in the MFT program cannot be counted toward the required hours of supervision. The student being supervised must continue to meet with an approved supervisor or equivalent at least every other week to ensure that the hours of direct client contact are available to meet MFT Program, COAMFTE, LMFT, and AAMFT Clinical Membership requirements.

IV. Documentation of Hours (Practicum and Internship)

To meet the direct client contact requirements in practicum over a two to three-year period, the student therapist will need to conduct 6-8 hours of therapy sessions each week under appropriate weekly or biweekly supervision. It is advisable that the MFT student leaves at least one evening each week free for clinical work (Monday through Thursday nights) in addition to the regularly scheduled evening practicum class (i.e., two nights each week should be reserved for clinical work). Good clinical practice dictates setting aside 2-3 large blocks of time for clinical work, rather than trying to fit clients into odd free hours scattered through the week. In reality, more client contact hours must be scheduled to allow for vacation periods, slow times, clients who fail to attend appointments, illness, etc. Similarly, supervision sessions should be scheduled to allow for vacation times, conferences, illnesses, etc.
During the course of each semester, FT Clinic records will be used to update the student's permanent record of hours of therapy and hours of supervision, using the Monthly Clinical Supervision Report form (MCSR, see Clinic Manual), supplemented by client records. The updated information will be based on the FT Clinic record as corrected by the student therapist and her/his supervisor. The MCSR, with required signatures, must be filed with the Director of Clinical Training no later than 30 days after the last day of the month of the report in order for the client contact and supervision hours for both practicum and internship to be included in the student’s permanent record. The FT Clinic records will be considered the definitive record of a student's therapy and supervision hours. Student therapists will have periodic opportunities, i.e., at least yearly, to correct errors in the FT Clinic records with their supervisor's approval. FT Clinic records are not subject to further change as the result of student action after this review.

V. Other Information

1. Evaluation of Practicum Performance. One week prior to the end of the semester, the student therapist and the practicum supervisor will meet to review practicum performance. The most recent revision of the form, 'Evaluation of Student Performance in Practicum,' will be used as a basis for evaluation. The student must be allowed to review this document, signing the evaluation to certify the review. The student's signature does not imply agreement with the supervisor's comments or evaluation. The student may add her/his own comments regarding the evaluation; however, these comments do not constitute an appeal of the grade for practicum (See Section on Grievance and Dismissal Policies and Procedures, for grade appeal procedures). The Evaluation of Student Performance in Practicum will become part of the student's MFT program record. In addition, each student will be requested to evaluate the practicum experience in writing. These evaluations will be collected by the secretary for the MFT Program and typed to provide anonymity for the student. A copy of the anonymous statements will be circulated to all MFT faculty, including the practicum supervisor.

2. Completion of Clinic Responsibilities. In addition to completing the required hours in practica and receiving permission from the faculty, students who wish to be released from practicum and begin internship must provide written documentation that they have taken the national-level Marriage and Family Therapy Licensure Examination and received a score that would be considered passing by the Texas Board of Examiners of Marriage and Family Therapists or have permission from the Board to take the next examination available.

3. State of Texas Marriage and Family Therapy Licensure Requirements
Currently, AAMFT clinical membership requires 1,000 hours of direct client contact and 200 hours of supervision by an AAMFT Approved Supervisor (or equivalent) for persons in states/provinces without licensure or certification. However, in
states/provinces, such as Texas, where AAMFT has approved the licensure/certification process, a state/provincial license as a Marriage and Family Therapist is required for clinical membership. Currently, the State of Texas requires 3000 postgraduate hours (a minimum of 1500 hours of direct clinical services of which a minimum of 750 hours must be direct clinical services to couples and/or families) and 200 hours of supervision (100 hours of which must be individual supervision).

**Statement on client load.** Over the period of time spent in the Family Therapy Clinic, client loads are expected to increase to between 6 and 8 hours a week. However, client loads are determined by the student’s supervisor in consultation with the Clinic Director, and may be more than 6 or either more or less than 8 a week. Further, the mix of individual, couple, family, and group cases is also a matter determined by the student’s supervisor and the Clinic Director. Because the Family Therapy Clinic operates as a public facility, there may be times when loads increase over the expected level and the mix of cases desired by the student may not be feasible.
## Texas Tech University Family Therapy Program

### Monthly Clinical Service Report

#### PRACTICUM

**Month of:**

**Site:**

**Cumulative Practicum Hours:**

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<th>Date</th>
<th>Client #</th>
<th>Supervisor</th>
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<th>Ind Vid</th>
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**TOTAL**

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**Student:**

__________

Print

Signature

Date:

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**Supervisor:**

__________

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Signature

Date:

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**Clinic Director:**

__________

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Signature

Date:
MFT Program
Texas Tech University
Student Practicum Evaluation Form

Student Name: __________________________Signature: __________________________

Supervisor Name: __________________________Signature: __________________________

Semester: __________________________Date of Evaluation: __________________________

Evaluation based on: Group _______ and/or Individual ________ Supervision

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**Excels beyond expected developmental level** (is rarely awarded. Reflects that you are well beyond others at the same developmental level.)

**Appropriate for developmental level** (hopefully most often used category. Reflects that you are right on target developmentally and that the supervisor has every expectation that you will continue to grow and develop in this area.)

**Adequate** (Reflects that supervisor believes clients may benefit from this level of performance but room for improvement is generous)

**Inadequate** (Reflects that supervisor believes that clients’ experience of therapy may be hampered by your lack of expertise in this area)

**Inappropriate for developmental level** (unlike a “room for improvement type of category” this reflects serious doubts that you understand this particular concept and how it applies to therapy. Receiving this would indicate a need on your part for serious consideration and further discussion of your problems associated with this category. Your actions in this category may dip into unethical waters.)

**Unable to assess** (reflects a supervisor’s inability to properly address the issue)
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Additional Comments: __________________________________________________________
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**Unable to assess** (reflects a supervisor’s inability to properly address the issue)
Interpretation Guidelines for TTU Student Practicum Evaluation Form

Use of self: use of humor, ability to provide both personal and professional reflection, sharing emotional experience of the session (“I am feeling really sad about what you are saying.”), presenting “as if” (“If my partner said that to me, I would feel really hopeless.”), active physical presence in sessions. Cross-Cultural Dynamics in MFT Supervision
Can be empathic even with clients who are difficult or obnoxious. Does not include competing with client’s story or inappropriate disclosure of own history or feelings.

Knowledge of theory: Has increased formal knowledge of theory by following through with suggested readings, finding new readings, attending workshops, viewing video presentations. Is conversant with more than one theory.

Application of theory: Can take theoretical knowledge (assumptions and constructs) and translate that into interventions, can view own/others’ work and describe process in theoretical terms, can explain why intervention from one theory base is appropriate in a second theoretical application.

Case conceptualization: Goes beyond immediate data to describe process(es) operating in the client system, takes theoretical position seriously in planning interventions and setting goals, can use DSM-IV appropriately, can conceive of effects of larger system(s). Strives to understand each client’s worldview. Does not miss important information presented by the client system in session or written assessment.

Session structuring: Sessions have a beginning, middle, and timely end. Therapist can articulate agenda/goals for session. Session does not bog down in endless wrangles or endless storytelling by either therapist or client. Data presented by client is integrated into larger picture (e.g., “So your experience with your mother is like what is happening now with your partner.”) Does not allow verbally aggressive behavior to escalate. Tracks content and affect. Clients are not allowed attack each other or the therapist without taking responsibility for the behavior, clients’ emotions are brought out and examined without endless expression of them.

Develops appropriate interventions: Uses theoretical knowledge and knowledge of techniques to intervene with client system. Can draw from a repertoire of interventions based in different theories, but can integrate these interventions with own theoretical approach. Is not “gimmicky,” using same intervention with every client or using intervention as self-promotion or to show off.

Creativity: Is flexible in sessions, allows clients to bring up unexpected topics and deals with them. Adapts established techniques in ways that help the client to make sense of her/his/their situation. Can be spontaneous with interventions.
Confidence: Presents a comfortable, professional appearance. Can lay aside own anxieties to listen to clients. Does not allow clients to take over session in destructive ways. Intervenes to stop unhealthy interactions. Presents interventions in positive, “can do” ways; encourages clients to try new things.

Joining and connection: Displays an interest in clients. Gathers information appropriately, taking notes as needed. Acknowledges and involves each member of the system. Uses previous knowledge of clients to engage them in the session.

Openness to supervision: Actively seeks supervision. Uses supervision time to learn more, obtain suggestions, and expand expertise. Is prepared for supervision with case reviews, session tapes, and readings as requested by supervisor. Accepts criticism without undue defensiveness, can disagree constructively. Accepts expertise of supervisor, tries to avoid power struggles or “yes, but...“. Spends time reviewing therapy tapes and self-supervising.

Implements feedback into action: Takes suggestions and criticisms seriously. Strives to “own” the suggestions. Uses criticism to improve therapy without being overly self-critical about previous behavior. Willing to try new techniques even when uncomfortable.

Self-reflection: Awareness of own biases and prejudices, including gender, power, religion, ethnicity, and sexuality issues. Aware of own emotions during session, able to use the emotions to develop interventions and/or share with client. Can acknowledge and use strengths and weaknesses. Not defensive about errors, can learn from them. Alert to isomorphic processes (reactivity to clients based on own issues, supervision issues, etc.). Aware of family of origin issues.

Group participation: Collegial. Presents suggestions in tentative, positive manner; criticisms are presented in constructive ways with possible solutions. Shares own experiences and knowledge appropriately in context. Facilitates group communication, willing to share relevant personal information. Does not attempt to dominate group process. Does not belittle colleagues.

Sensitivity to gender and power issues: With clients, is aware of power differentials between genders. Tracks own behavior in regard to client’s gender. Maintains proactive stance with clients in terms of supporting less powerful members of the system, encouraging development of more equitable interpersonal transactions. Assesses the presence of violence in client systems, acts to prevent harm to clients and others. Aware of community resources. With colleagues, recognizes power and approach differences. Demonstrates an awareness of own role in establishing and maintaining group rules and attitudes about gender. Encourages and supports awareness of gender issues within group and in cases.

Sensitivity to diversity: Demonstrates awareness of issues of diversity (ethnic/race, social class, sexual preference, age, and religion). Shows respect for clients with diverse values and behaviors. Demonstrates willingness to learn about clients from diverse populations.
Record keeping: All records are maintained properly and prepared in a timely manner. Clinic forms are properly completed and filed within 24 hours of providing services. Case files are maintained up to date. Case notes are written within 24 hours of services. Notes are sufficiently detailed to describe the process of the case.


Application of violence/domestic violence knowledge: Aware of risks of conducting therapy in cases of domestic violence. Takes steps to protect targets of domestic violence. Aware of community resources for targets and their networks. Willing to confront perpetrator(s). Does not blame, even by implication, the target of violence.

Application of sexual/physical abuse knowledge: Aware of the signs of abuse in children, persons with handicaps, and adults, especially the elderly. Acts to protect target of such abuse, report perpetrator(s) to appropriate agency. Willing to confront perpetrator(s) as needed. Does not expose clients to unnecessary risks.

Sensitivity to sexual issues: Willing to ask about sexual behaviors and preferences. Treats sexual issues as important and relevant. Aware of own issues and limitations in treating sexual issues, seeks information regarding appropriate treatments. Demonstrates acceptance and valuing of clients, regardless of sexual preference or behaviors. This position does not require endorsement of behaviors; rather, it acknowledges the need to accept and support clients to allow them to make choices for themselves.

Ethical behavior: Follows ethical standards of the American Association for Marriage and Family Therapy. Aware of ethical dilemmas peculiar to MFT. Acts to protect clients and others at risk. Is aware of risks in vulnerable populations, and reports suspicions of sexual and/or physical abuse of children, elders, or persons with disabilities. Active in protecting targets of domestic violence. Acts to deal with threats of homicide or suicide. Keeps supervisor(s) informed of problems as they arise. Behaves in ethical fashion with colleagues, supervisors, clients, and other agencies.

Fee setting and collecting: Follows Clinic rules and expectations in setting and collecting fees. Refers problematic cases to supervisor as needed.

Professional relationships: Demonstrates professional relationships and interactions with community agencies, referral sources, and other professionals. Can use knowledge of systems to provide resources for clients.
Final Report of Client and Supervision Hours

Student’s Name______________________________________________

Completed the client contact and supervision required for practicum hours in the MFT Program at Texas Tech University.

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<thead>
<tr>
<th>CLIENT CONTACT</th>
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<th>CONTRACT/GRANT</th>
<th>ALTERNATIVE</th>
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Total Relational Hrs ____________ Total Individual Hrs ____________

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<td><strong>Total Supervision Hrs</strong></td>
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Completion Approved by ______________________________     _____________
(Clinic Director)

Completion Approved by MFT Faculty on __________________________
(Date)

Accepted by ______________________________ on ___________________ 
(MFT Program Director)

When complete, place in student' clinical file in MFT Secretary’s office with documentation attached.
### Final Report of Client and Supervision Hours

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<th>TOTAL HOURS</th>
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(Date)

(Date)
SECTION IX

ALTERNATIVE CLIENT CONTACT HOUR
Alternative Client Contact Hours

The MFT Program allows for 100 of the 500 required clinical practicum client contact hours to be comprised of alternative experiences that may not be strictly clinical in nature. The alternative hours MUST be systemic and interactive in nature, and PRIOR approval is needed to claim such hours.

The TTU MFT faculty has determined that these alternative experiences may include:

1. **Interactive Team Member**
   Time spent as an interactive team member who follows, observes, and discusses the ongoing case(s) with the primary therapist. This team member need not act in the capacity of a co-therapist, but must directly observe the case from the observation room and offer input to the primary therapist. Time spent participating as a team member as described herein during practicum is eligible under these criteria.

   The following activities may count as an Alternative Team Hour if you have received faculty approval via the Alternative Hour Activity Proposal form with which you have been previously provided:

   a. **If you observe a live session during practicum and participate by providing input to the therapist.** Any participation that would be considered as “Live Group Supervision” during practicum can also be counted as an Alternative Team activity.

   b. **If you observe a live session of a student therapist and you participate by providing input to the therapist PROVIDED YOU CAN HONESTLY DOCUMENT THE SESSION AND HAVE YOUR ALTERNATIVE HOURS WCSR VERIFIED VIA SIGNATURE OF AN MFT FACULTY.**

   c. **If you serve as a co-therapist to another student therapist during a live session ONCE YOU HAVE COMPLETED ALL OF YOUR PRACTICUM HOURS REQUIREMENTS.**

   d. **If you accurately report your participation on the Alternative Hours WCSR form, following the same 30-day rule that governs the standard WCSR form.**

   e. **If you do not exceed the total cumulative limit for ALL alternative activities specified under Section VII-Practicum.**

   NOTE: Observation and interaction as a Supervisor-in-Training will not be considered as an Alternative Hour activity.

2. **Providing Therapeutic Psycho-Education**
   Providing therapeutic psycho-education (e.g., a depression support group), as opposed to therapy, will count as long as the experience is face-to-face, direct contact. This does NOT include a psycho-educational presentation to a group of therapists for the purpose of professional development (e.g., local, state or national conference presentations), nor does this include any classes you may have taught or will teach in the future.
Prior approval by the MFT faculty of ANY proposed Alternative Hour activity is required in order for the experience to be considered acceptable as an Alternative Hour Activity. Approval must be obtained for each different activity and/or site via the new “Alternative Hour Activity Proposal” form which MUST be presented to the faculty BEFORE any activity will be counted.

Alternative hours must be recorded on a separate MCSR, clearly identified as Alternative Hour Experience, and signed first by your current practicum, project, or internship supervisor, and then by the Clinic Director. Alternative Hours will be entered separately into the data bank and reported as a different entity so we can keep track of the number of alternative hours accumulated.

**NOTE:** Alternative Hours cannot be substituted for any portion of the minimum number of hours you are required to spend serving clients in the Family Therapy Clinic.
Alternative Hours Activity Proposal

Up to 100 hours of your 500 hours of clinical practicum may be alternative therapeutic contact hours. These hours must be approved by your faculty supervisor prior to the experience. **These alternative hours must be systemic, interactional, and add diversity to your practicum experience.**

Your name: __________________________________________

**Site** (name, address, contact person, phone) for alternative hours:

____________________________________________________

____________________________________________________

____________________________________________________

Proposed hours and dates of service: ________________________________

Using 2-3 sentences, respond to the following:

1. How will this work be systemic and interactional?

2. How will this client contact add diversity to your practicum experience?

3. How will the client(s) know that a therapeutic contract exists in this setting?

π Approved _____________________________ Signature of Faculty Supervisor _________________ Date

π Not Approved _____________________________

π Approved pending _____________________________

**********

After providing the hours, you must provide a brief write-up of your experience answering the above questions as well as a paragraph on what you learned from the experience. Attach this form and the write-up of your experience to your hours log, and turn them in to your Practicum supervisor at the end of the quarter.

Number of alternative hours approved: _____________________________

Signature of Faculty Supervisor _________________ Date
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<tr>
<th>Date</th>
<th>Client #</th>
<th>Supervisor</th>
<th>Ind</th>
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**TOTAL**

0 0 0 0 0 0 0 0 0 0 0 0 0

**DESCRIBE ALTERNATE HOURS ACTIVITY**

- Psychoeducation, Team Hour, Research Interview, etc.

---

**Student:**

Print: ____________________________

Signature: ______________________

Date: ____________________________

---

**Supervisor:**

Print: ____________________________

Signature: ______________________

Date: ____________________________

---

**Clinic Director:**

Print: ____________________________

Signature: ______________________

Date: ____________________________
SECTION X

INTERNSHIP
INTERNSHIP INFORMATION

I. DEFINITION OF AN INTERNSHIP

“The internship is to provide doctoral students with a supervised, full-time experience of at least 9 months duration, emphasizing relationally focused practice and/or research.” In the Texas Tech MFT doctoral program, “full-time” is interpreted to mean approximately 30 hours a week on site(s). The internship typically begins in the 3rd or 4th year of the doctoral program, and each student must complete sufficient direct client contact hours to achieve the total of 1,000 direct client contact hours required for completion of the doctoral degree. Further, the student should consider whether the internship will provide sufficient hours of direct client contact and supervision to meet licensure and/or clinical membership requirements. An internship may be carried out sequentially or concurrently at multiple sites, and may include a combination of research and direct client contact activities. Direct contact hours must be supervised by an AAMFT-Approved Supervisor or equivalent, and supervision must take place at least every other week.

Prior to beginning the internship, a written internship proposal must be submitted to and approved by the Director of MFT Internships and the MFT Program Director.

II. THE PURPOSE OF AN INTERNSHIP

Satisfactory completion of an internship is a required component of accredited doctoral MFT programs. An internship is intended to build on the student’s existing clinical and research skills and to provide an intensive professional experience. An internship may be taken in a variety of settings and may include various combinations of research and clinical activities, depending on the student’s interests, needs, and prior experience. Training is the primary focus of the internship. Establishing an internship involves student-faculty-site collaboration.

III. PROCEDURES TO BEGIN AN INTERNSHIP

A. First, the student should enter into a dialogue with her/his MFT faculty advisor and the Director of Internships well before approaching potential internship sites. Other MFT faculty may be consulted as well. The product of such a dialogue should be an assessment of the student’s training interests and needs in both research and clinical activities, identification of potential internship sites, and a preliminary statement of the requirements for completion of the internship.
B. Second, the student should approach potential internship sites to determine which site(s) will meet the internship requirements for that student. Once agreement is reached with the site, the student will complete the development of a formal Internship Proposal to be submitted to the MFT faculty advisor and Director of Internships for approval.

C. Third, once the Internship Proposal is approved, the Internship Agreement must be completed by the site(s), and returned to the Director of Internships.

D. Any change in the Internship Proposal or Internship Agreement(s) must be approved by the student’s MFT faculty advisor and the Director of Internships.

IV. WHO IS QUALIFIED TO BEGIN AN INTERNSHIP

A. The student must be in good standing in the MFT program (individuals on academic or clinical probation or on leave of absence cannot apply).

B. The student must have completed the majority of organized coursework in Areas VII (theory), VIII (clinical practice), IX (individual development and family relations), and XI (research) (COAMFTE Standards 509-511).

C. The student must have completed practicum direct client contact/supervision/individual supervision hours (500/100/50 for students who have not completed a master’s degree from an AAMFT-accredited program; 250/50/25 for students who have completed a master’s degree from an AAMFT-accredited program).

D. The student must be sufficiently advanced in the MFT program to maximally benefit from the internship experience. This means that internship activities do not interfere with completion of coursework and continued progress in the MFT program and vice versa.

E. Preferred Qualifications
   1. completed 7000
   2. completed qualifying examinations
   3. have proposed dissertation and started data collection
   4. no remaining (or very few) required courses
   5. no incompletes
   6. licensed as a Marriage and Family Therapist (either as associate or fully licensed)
V. DOCUMENTATION REQUIRED BEFORE THE INTERNSHIP BEGINS

A. Internship Proposal
B. Student’s current curriculum vitae
C. Internship Supervisor Application (required of each supervisor at each site)
D. Internship Agreement from each site

VI. SUPERVISION OF INTERNSHIP

In an internship that involves direct client contact, the intern must meet with an AAMFT Approved Supervisor (or equivalent) at least every other week for case supervision. When the internship involves multiple clinical sites, each site must agree to a plan of supervision for the intern. This could involve a single Approved Supervisor or multiple Approved Supervisors. Regardless of the Approved Supervisor, each site must provide an administrative and/or clinical supervisor who is responsible for the efforts of the intern and who provides supervision of cases at least every other week. If that supervisor is not an AAMFT Approved Supervisor, the student must still obtain appropriate supervision.

VII. DOCUMENTATION REQUIRED IN THE INTERNSHIP

A. Monthly Clinical Supervision Report (MCSR). The MCSR must be submitted for each each site in the internship. The AAMFT-Approved Supervisor (or equivalent) must sign each MCSR, along with the Director of Clinical Training. The MCSR, with appropriate signatures, must be submitted to the Director of Clinical Training within 30 days of the last day of the week of the report.

B. The internship requirements are deemed completed once all of the following criteria have been met:
   a. The duration of the internship experience has lasted a minimum of nine (9) months and no more than twelve (12) months; and
   b. The concluding date as stipulated on each “Internship Agreement” form has been reached; and
   c. All required evaluation forms for each internship site have been filed with the Director of Internships; and
   d. The student has accumulated a minimum of 1000 documented and verified hours of direct face-to-face client contact as required by to complete the doctorate in MFT; and
   e. A certificate of completion addressing the internship experience has been placed in the student’s program file.
Should it become evident that an internship experience will stretch beyond the maximum twelve (12) month period, a new “Internship Agreement” form must be completed and submitted to the Director of Internships prior to the expiration date of the original agreement.

C. At the completion of the internship or upon leaving an internship site, the Intern Self Evaluation (student), the Intern Evaluation (separately, AAMFT-Approved Supervisor and the site supervisor(s)), the Internship Site Evaluation (student), and Intern Evaluation of Supervision (student) must be submitted to the Director of Internships.

VIII. INTERNSHIP SITE REQUIREMENTS

The program will maintain clear relationships with all internship site(s), which will be specified in a written document.

Activities of each intern will be documented at the internship site(s). These records will made available to the marriage and family therapy program.

The institution sponsoring the internship site(s) will have been in operation for at least two years.

Internship site(s) will provide adequate facilities and equipment for the intern to carry out designated responsibilities.

Mechanisms for student evaluation of internship site(s) and supervision, and site evaluation of the intern's performance, will be demonstrated.

Documentation of liability insurance for interns will be confirmed. Liability insurance may be provided by the internship site(s), the marriage and family therapy program, or the intern.

Internship site(s) will publish and adhere to policies prohibiting discrimination on the basis of age, culture, ethnicity, gender, physical ability, race, religion, sexual orientation, and socioeconomic status.

An AAMFT Approved Supervisor or the equivalent will supervise the intern’s clinical work.

The internship supervisor will be available to the intern and will be an active participant in her/his training.

The internship supervisor will be clearly senior in experience to the intern.
IX. INTERNSHIP CREDIT HOURS

Students must be continuously enrolled in internship (MFT 7359) while completing the internship requirements. Students may not count clinical hours from an external clinical site if they are not enrolled in internship and/or have not completed the necessary internship agreements.
INTERNERSHIP SUPERVISOR APPLICATION

Please provide the following information: Date: ______________________

Supervisor Name: ___________________________ Intern Name: ___________________________

Name of Agency: ____________________________________________________________

Agency Address & Phone Number: ______________________________________________
___________________________________________________________________________

If supervision is to be provided in a location separate from the above listed agency, please indicate the location (agency name, private office, etc.) where supervision will be conducted.___________________________________________________________________________

Intended Beginning Date for Supervision: _________________________________________

Supervisor Background:

Highest Degree Attained: _________ Area (MFT, Psychology, etc.): ____________________

Year Degree Awarded: ___________ Granting Institution: ____________________________

I. Licensure

A) Do you hold a current license in marriage and family therapy? __________

If yes, in what state(s)? ______________________________

In what year did you initially receive your license in marriage and family therapy? ______

What is your license number? __________________________

Note: Please attach a copy of your current license to this application

B) Do you hold a license in any other area of clinical practice? _____________

If yes, in what professional area (social work, counseling, psychology, etc)? ___________

C) Has your license ever been revoked or suspended? _________________

If yes, please explain _______________________________________________________

D) Are any complaints currently pending against you before your state’s licensing board? ___

If yes, please explain __________________________________________________________________
II. MFT Clinical Experience

A) Please indicate the number of years you have been practicing marriage and family therapy. _______________

B) Please indicate the approximate number of direct client contact hours you have completed in each of the following areas:

- Individual Adult Counseling/Therapy _______________
- Individual Child Counseling/Therapy _______________
- Couple Counseling/Therapy _______________
- Family Counseling/Therapy _______________
- Group Counseling/Therapy _______________
- Other (please specify) _______________

III. AAMFT Membership

A) Are you currently a Clinical Member of the American Association for Marriage and Family Therapy? _______________

If yes, in what year did you initially become a member? _______________

B) Are you currently recognized as an Approved Supervisor or Supervisor in Training by the American Association for Marriage and Family Therapy? _______________

If yes, for how many years have you been an approved supervisor? _______________

IV. Training in MFT Supervision

Please indicate (with yes or no) which of the following training activities you have completed.

A) An AAMFT approved seminar/workshop in MFT supervision _______________

If yes, please provide dates _______________, topic (seminar title) _______________, and location _______________.

B) A Graduate MFT supervision course through an accredited program _______________

If yes, please provide dates _______________, topic (course title) _______________, and location _______________.

C) Seminars or Coursework in general (not specific to MFT) supervision _______________

If yes, please provide dates _______________, topic (course title) _______________, and location _______________.

D) Supervision of Your Supervision of Others _______________
If yes, please provide dates ______________________, degree and discipline of supervisor (i.e., psychology) ______________________________. Was your supervisor licensed as a marriage and family therapist? ___________ Was your supervisor Approved by the AAMFT? __________

E) Other Training, Study, or Preparation for Supervision ________________

If yes, please specify __________________________________________________________

V. MFT Supervision Experience

A) For how many years have you been supervising marriage and family therapy trainees? ______

B) Please indicate the total number of supervision hours you have completed in each of the following:

_____________ Individual MFT Supervision
_____________ Group (2 or more supervisees) MFT Supervision
_____________ Individual (Non MFT) Supervision
_____________ Group (Non MFT) Supervision

C) How many trainees do you currently supervise? ____________________

D) Please indicate the percentage of supervision you devote to each of the following (total should = 100)

_____________ Live Supervision
_____________ Videotape Review
_____________ Audiotape Review
_____________ Case Discussion (without video or audio review)
_____________ Other (please specify _____________________________)

Thank you for your cooperation in providing the requested information. Please feel free to contact the Director of Internship Training should you have any concerns or questions pertaining to these matters.

All inquiries can be directed to:
Nicole Springer, Ph. D.
Director of Internship Training
Box 41250
Marriage and Family Therapy Program
Texas Tech University
Lubbock, TX 79409-1250
Phone: (806) 742-3074
INTERNERSHIP AGREEMENT

This agreement is made on _____________________________ by and between

(date)

______________________________, ____________________________________,

(Student)  (Internship Site)

and The Marriage and Family Therapy Program at Texas Tech University. The agreement will be

effective from _________________________ to _________________________ for the internship of

(start date) (concluding date)

______________________________.

(student's name)

Purpose:

The purpose of this agreement is to specify the conditions for internship placement of a qualified
MFT doctoral student.

Texas Tech University MFT Program Responsibilities:

1. Select internship candidates who have successfully completed all prerequisite courses and practica
   for internship placement.

2. Facilitate placements conducive to the student's training needs and qualifications, and the interests
   and capacities of the internship agency.

3. Provide information to both the intern and internship site delineating the responsibilities of the
   MFT program, the internship agency, and the intern.

4. Maintain a collaborative relationship with the internship site.

5. Monitor student development throughout the internship and provide grades based on the student's
   performance.

6. Maintain records of student's client contact and supervision hours completed during internship.
Internship Site Responsibilities:

1. Maintain charter or license by appropriate state authority.

2. Provide a caseload sufficient to fulfill the intern's client contact requirements as described under Intern Responsibilities.

3. Provide a minimum of 100 hours of supervision by an AAMFT Approved Supervisor, Supervisor-In-Training, or alternate supervisor approved by the MFT faculty, and a minimum of one hour of supervision for every five hours of client contact.

4. Maintain contact with the MFT Director of Internship Training, foster the intern's development as a marriage and family therapist in collaboration with the MFT program, and advise of any difficulties encountered with the intern's performance.

5. Provide adequate facilities and training to the intern relevant to the performance of assigned responsibilities.

6. Provide documentation of the intern's client contact and supervision hours to the MFT Director of Internship Training.

7. Provide written evaluations (at least two over the course of the internship) of the intern's performance to the MFT Director of Internship Training.

Intern Responsibilities:

1. Maintain responsibility for assigned cases throughout the internship.

2. Adhere to the policies and standards of professional practice set forth by the MFT program and internship site.

3. Complete a sufficient number of on-site, direct client contact hours, of which at least 50% must be with couples and families.

4. Complete a minimum of nine (9) months of internship experience.

5. Complete a minimum of 100 hours of on-site supervision with an AAMFT Approved Supervisor, supervisor-In-Training, or alternate Supervisor approved by the MFT faculty.

6. Maintain regular contact (no less than monthly) with the MFT Director of Internship Training and advise of any difficulties encountered associated with the internship experience.
7. Maintain availability for supervision and other necessary appointments with the MFT Director of Internship Training as requested.

8. Complete written evaluations regarding the internship experience as specified in the course syllabus.

9. Ensure that adequate malpractice coverage is maintained throughout the internship.

We the undersigned have read and agree to the conditions of internship delineated in this contract.

__________________________________ Date:_________________
(Student)

_________________________________ Date:________________
(Internship Agency Director)

_________________________________ Date:________________
(Internship Site Supervisor)

___________________________________ Date:_________________
(MFT Director of Internship Training)

___________________________________ Date:_________________
(MFT Program Director)
CERTIFICATION OF INTERNSHIP COMPLETION

This letter certifies that ___________________________ has successfully fulfilled the doctoral internship requirements of The Marriage and Family Therapy Program at Texas Tech University by completing the clinical training, supervision, and therapeutic activities specified in the letter of agreement dated _________ with ________________________________ for the period _________________ to _________________.

____________________________________________ Date: ______________
(MFT Director of Internship Training)

____________________________________________ Date: ______________
(MFT Program Director)
Texas Tech University  
Marriage and Family Therapy Program  

INTERN EVALUATION OF SUPERVISION

Date: ___________________   Intern’s Name: __________________________________

Name of Agency: ____________________________________________________________

Address: ________________________________________________________________

Type of Agency: ____________________________________________________________

Length of Internship: _______________________________________________________  
   (beginning and ending dates)

Name of Primary On-Site Supervisor: ________________________________________
   (if you had a secondary supervisor please complete a separate evaluation for that individual)

Frequency (per week) and Duration of Supervision: _____________________________

Please indicate the time proportions (1/2, 1/3, ¼, etc.) for your supervisor’s use of the 
following modalities:

_____ case discussion   _____ videotape review

_____ co-therapy   _____ live observation

_____ chart review   _____ audiotape review

_____ other (specify)  __________________________  

Please describe your supervisor’s style and approach to supervision:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please describe the quality of your relationship with your supervisor:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Please indicate your perceptions of your internship supervisor by responding to the remaining questions using the following six-point scale:

1. completely inadequate
2. primarily inadequate
3. slightly inadequate
4. slightly adequate
5. primarily adequate
6. completely adequate

____ Availability/Approachability
____ Investment in intern training and development
____ Identification with an MFT orientation
____ Flexibility
____ Acceptance and respect for intern
____ Recognition of intern’s strengths
____ Recognition of intern’s weaknesses
____ Consistency of feedback
____ Clarity of feedback
____ Relevance of feedback
____ Utility/timeliness of feedback
____ Utility/timeliness of suggestions
____ Listening ability
____ Empathic ability
____ Conceptual and case planning ability
____ Clinical intervention ability
____ Ability to promote intern development
____ Recognition and respect for individual differences
____ Expectations for intern
____ Rapport with intern
____ Ethical sensitivity
____ General professional conduct
____ Recognition of personal limitations
____ Fairness in evaluations
____ Avoidance of duality in relationship with intern
____ Overall influence of supervision

What was most helpful in supervision? ______________________________________
________________________________________________________________________
________________________________________________________________________

Would you recommend this supervisor to others? ______ Please explain: ____________
________________________________________________________________________
________________________________________________________________________

What would have improved your supervision? __________________________________
________________________________________________________________________
Texas Tech University
Marriage and Family Therapy Program

INTERNSHIP SITE EVALUATION

Date: ___________________   Intern’s Name: __________________________________

Name of Agency: _________________________________________________________

Address: ________________________________________________________________

Type of Agency: _________________________________________________________

Length of Internship: ______________________________________________________
                        (beginning and ending dates)

Name of On-Site Supervisor: ______________________________________________

Clinical Services Provided During Internship:

    Total Hours in Each Area

Inpatient therapy       ______________
Outpatient therapy      ______________
Addictions therapy      ______________
Individual therapy      ______________
Child therapy           ______________
Group therapy           ______________
Couples therapy         ______________
Family therapy          ______________
Other ________ ______________
Other ________ ______________

Which clinical activities were most beneficial in your training and development during
the internship? ____________________________________________________________
                                                                                   ____________________________________________________________
                                                                                   ____________________________________________________________

What percentage was co-therapy? _____  With who? ________________________________
Please indicate your perceptions of your internship experience by responding to the remaining questions using the following six-point likert scale:

1. completely inadequate
2. primarily inadequate
3. slightly inadequate
4. slightly adequate
5. primarily adequate
6. completely adequate

_____ Number and availability of cases
_____ Types of cases/presenting concerns
_____ Treatment population
_____ Treatment modalities emphasized/encouraged
_____ On-site training/lectures/seminars
_____ Agency emphasis on intern development
_____ Agency conduciveness to MFT orientation
_____ Workload
_____ Relationships with fellow interns/students
_____ Relationships with agency staff
_____ Availability of agency staff
_____ Work environment
_____ Diversity of clinical activities/opportunities
_____ Appropriateness of agency expectations
_____ Time/schedule management
_____ Agency sensitivity to individual differences
_____ Facilities and physical resources
_____ Overall influence of internship

Would you recommend this internship site for future placements? ________
Please explain:

________________________________________________________________________
________________________________________________________________________

What would have improved your internship? ________________________________
________________________________________________________________________
________________________________________________________________________
Texas Tech University
Marriage and Family Therapy Program

INTERN SELF EVALUATION

Date: ___________________   Intern’s Name: __________________________________

Name of Agency: ____________________________________________________________

Address: _________________________________________________________________

Type of Agency: _____________________________________________________________

Length of Internship: ______________________________________________________

(beginning and ending dates)

Name of Primary On-Site Supervisor: _________________________________________

Please describe the personal goals you established for the internship experience:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please discuss how successful you have been in accomplishing these goals:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

What aspect of your internship experience (if any) would you prefer to have handled differently?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please explain: _____________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please offer recommendations for improving the overall quality and effectiveness of the internship experience:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

________________________________________________________________________
Please assess your personal development occurring in relationship to the internship experience by responding to the remaining questions using the following six-point scale:

1. deterioration in development
2. no development
3. slight development
4. moderate development
5. significant development
6. very significant development

____ Case management
____ Case conceptualization/theoretical application
____ Treatment planning
____ Treatment implementation/clinical technique
____ Empathic ability
____ Listening ability
____ Ability to provide feedback and suggestions
____ Ability to develop rapport
____ Ability to join with a family
____ Sensitivity to individual differences
____ Sensitivity to gender issues
____ Sensitivity to racial issues
____ Sensitivity to ethnic issues
____ Sensitivity to personal issues
____ Openness to supervision
____ Ability to collaborate with other professionals
____ Ability to promote client growth/change
____ Sensitivity to ethical issues
____ Relationships with other interns/students
____ Relationships with supervisors
____ Record keeping
____ General professional conduct
____ Recognition of personal limitations
____ Self confidence
____ Personal identification as an MFT
____ Overall growth and development

What aspects of internship were/are most influential in your development?
________________________________________________________________________
________________________________________________________________________

Please discuss any areas of personal limitation that remain:
________________________________________________________________________
________________________________________________________________________

How do you plan to address these areas?
________________________________________________________________________
________________________________________________________________________
INTERNSHIP ON-SITE EVALUATION

Date of on-site evaluation: _______________________

Internship site: ______________________________________________________

Internship Agency Director: ___________________________________________

Internship Site Supervisor: ___________________________________________

Student Intern: ______________________________________________________

Check all that apply:

_____ Charter or license is up to date.

_____ Activities of the intern are documented.

_____ Facilities and equipment are adequate for the intern to carry out designated responsibilities.

_____ Site publishes and adheres to policies prohibiting discrimination on the basis of age, culture, ethnicity, gender, physical ability, race, religion, sexual orientation, and socioeconomic status.

_____ Caseload is sufficient to fulfill the intern’s client contact requirements.

Average hours of client contact per week __________

Areas of concern:

Additional comments:

__________________________________    ____________________

Director of Internships      Date
Texas Tech University
Marriage and Family Therapy Program

INTERN EVALUATION

Date: ___________________   Intern’s Name: __________________________________

Clinical Internship Supervisor: ______________________________________________

(1) Excellent    (2) Very Good    (3) Good    (4) Adequate    (5) Poor    (6) Very Poor

I.   Case Management

_____ Attendance
_____ Punctuality
_____ Case Conceptualization
_____ Treatment Planning
_____ Caseload Maintenance
_____ Interaction with Collateral Parties/Agencies
_____ Interaction with Clinic Personnel
_____ Adherence to Clinic Procedures and Policies
_____ Record Keeping/Case Notes

II.  Clinical Skills

_____ Listening Skills
_____ Expressive Skills/Feedback/Suggestions
_____ Assessment
_____ Joining
_____ Empathic Ability
_____ Facilitation of Rapport
_____ Regard for Client Welfare
_____ Congruence/Consistency
_____ Genuineness
_____ Sensitivity to Individual Differences
_____ Promotion of Client Autonomy
_____ Facilitation of Client Participation
_____ Differentiation/Clarity of Boundaries
_____ Flexibility
_____ Emotional Sensitivity
_____ Emotional Availability
_____ Goal Setting
_____ Intervention Implementation
_____ Intervention Congruence With Goals
_____ Technical Sophistication
_____ Facilitation of Change/Growth
_____ Crisis Management
_____ Theoretical Application

(1) Excellent    (2) Very Good    (3) Good    (4) Adequate    (5) Poor    (6) Very Poor
III. **Collegial Relations**

- Receptivity to Feedback
- Solicitation of Feedback
- Response to Feedback
- Expressing Feedback
- Investment in Collegial Relationships
- Facilitation of Collegial Rapport
- Facilitation of Colleagues’ Development
- Response to Group Process
- Participation in Group Process
- Respect for Individual Differences
- Sensitivity to Group Dynamics

IV. **Response to Supervision**

- Receptivity to Feedback
- Solicitation of Feedback
- Response to Feedback
- Expressing Feedback
- Investment in Supervisory Relationship
- Response to Supervision
- Openness to Supervision
- Integration of Feedback with Clinical Practice

V. **Global**

- Case Presentation
- Gender Sensitivity
- Racial Sensitivity
- Ethnic Sensitivity
- Sensitivity to Personal Issues/Values/Conflicts
- Sensitivity to Personal Limitations
- Sensitivity to Personal Strengths
- Response to Sexual Issues
- Response to Substance Abuse/Use Issues
- Response to Clients at Risk
- Ethical Standards
- Professional Identity
- Motivation to Learn/Develop
- General Professional Conduct

Comments: ________________________________________________________________
________________________________________________________________________
________________________________________________________________________
According to standard 152.02, programs are required to prepare a written statement describing the criteria used to determine supervisor equivalency for those supervisors who are not Approved Supervisors or Supervisors-In-Training. Criteria should include: 1) Demonstrated training, education and experience in marriage and family therapy and, 2) Demonstrated training, education and experience in MFT supervision. Use the space provided below to list the program's current criteria for determining supervisor equivalency (please type and attach additional pages if necessary). (See Standards Clarification for Standard 152.02 for further information).

Standard 152.02. Written statement of criteria used to determine supervisor equivalency for those supervisors who are not Approved Supervisors of Supervisors-In-Training.

The MFT Program at Texas Tech University uses the following criteria to determine supervisor equivalency:

Training, education, and experience in marriage and family therapy will be demonstrated by one or more of the following: Successful completion of a master’s, doctorate, or certificate in marriage and family therapy; or Clinical Membership in the American Association of Marriage and Family Therapy; or holding current status as Licensed Marriage and Family Therapist in the State of Texas or current state of residence.

Training, education and experience in marriage and family therapy supervision will be demonstrated by one or more of the following: Successful completion of a COAMFTE approved course in supervision, or continuing education courses in supervision; or significant MFT supervised supervision experience; or recognition as an approved supervisor by the Texas State Licensure Board in Marriage and Family Therapy or current state of residence.

Any application for supervisor equivalency must be approved by the MFT faculty.
SECTION XI

SUPERVISION OF SUPERVISION
**Required Supervision Courses.** In order to complete the doctoral program in MFT and begin the process of becoming an AAMFT Approved Supervisor, each student must successfully complete MFT 6396 (Supervision in MFT) and MFT 6397 (Practicum in Supervision in MFT) or their equivalents.

1. Requirements to enroll in MFT 6396:
   a. *For all MFT doctoral students:* To enroll in MFT6396, students MUST have completed a minimum of 500 hours of therapy. At least half of these hours must be relational—direct service to couples and/or families—under the supervision of an AAMFT Approved Supervisor (or equivalent).
   b. Students who enter the MFT program with a master’s degree from a COAMFTE-accredited program may enroll in MFT 6396 at the beginning of their second year, but not before. Because all such students must complete additional clinical work, they will have more than the required 500 hours. Again, exceptions to this rule must be approved by the course instructor in advance.
   c. Students who enter the MFT program with a master’s degree from a non-COAMFTE accredited program (MFT or other discipline) are required to complete the 500 hours before being allowed to take MFT 6396. However, such enrollment will not be allowed before the beginning of the third year in the doctoral program. Again, exceptions to this rule must be approved by the course instructor in advance.
   d. Students who enter the MFT program with a bachelor’s degree, complete the master’s degree, and enter the MFT doctoral program are also required to meet the 500-hour requirement and be in the PhD program for at least 2 years before enrolling in MFT 6396. Again, exceptions to this rule must be approved by the course instructor in advance.

2. Requirements to enroll in MFT 6397
   a. Successful completion of MFT 6396.
   b. Demonstration of an understanding of the specific requirements for Approved Supervisor status including:
      i. Number of trainees and period of supervision required
      ii. Hours of supervision of trainees required
      iii. Hours of supervision-of-supervision required
      iv. Hours of clinical experience or years of full MFT licensure required
      v. Overall process of applying for Approved Supervisor status.

3. Supervision experiences
   a. Beginning in the Fall term each year (MFT 6396), each Supervisor in Training (SIT) will be assigned as a “mentor” for one or more junior MFT students. The mentor will provide consistent and regular supervision to the supervisee across the 9-month school year or beyond. The term “mentor” is used to distinguish between SIT supervision and Approved Supervisor supervision.
   b. The mentor will receive a minimum of 18 hours of supervision-of-supervision from the course instructor over the 9-month school year.
c. The mentor will provide a minimum of weekly supervision of the supervisee over the same period. Typically, supervision will include at least an hour of face-to-face individual supervision with the supervisee, along with additional sessions spent observing and assisting the supervisee in therapy sessions.

d. The supervisee cannot count the supervision time with the mentor. Under AAMFT rules, students may provide supervision to other students; however, that supervision may not be counted toward the requirement of a 5:1 ratio of hours of therapy to hours of supervision.

Requirements for becoming an AAMFT Approved Supervisor (www.aamft.org for current rules).

a. Assuming you are working in a state, such as Texas, that has a licensure or certification process for MFTs:
   i. You must be fully licensed as a MFT for two years (i.e., becoming licensed as aMFT Associate does not count) before applying.
   ii. Texas currently requires 1500 hours of direct client contact (750 hours relational) after the Associate license is granted.
   iii. You must have the Associate license for the hours to count unless you are transferring a license from another state.

b. Assuming you are working in one of the few states that does not have licensure or certification
   iv. You must meet the criteria for clinical membership
   v. 1000 hours of direct clinical contact (500 hours must be relational)
   vi. You must have held clinical membership for at least 2 years

c. Specific requirements
   vii. You must have supervised at least two supervisees on a regular schedule (approximately every two weeks) for at least 9 months each
   viii. You must have provided at least 180 hours of supervision (live, video, case note) over a period of at least 18 months and no more than 3 years
   ix. You must have been supervised in your supervision for at least 36 hours over a period of at least 18 months and no more than 3 years
      a) You may have one supervisor for 36 hours
      b) You may have two supervisors for a minimum of 18 hours each
   x. You must submit three papers to your supervisor(s)
      a) Description of the supervision experience (who, when, where)—1 single spaced page
      b) Statement of Philosophy of Supervision (personal theory, how applied)—3 single spaced pages with additional page for reasonably current references
      c) Supervision Case Study (who, process of supervision)—3 single spaced pages with appropriate references added
   xi. The supervisor(s) will review the papers and evaluate them in regard to specific criteria (see following pages)
   xii. Assuming the evaluation is positive, you will submit the Approved Supervisor application to AAMFT
APPROVED SUPERVISOR’S EVALUATION

The Approved Supervisor mentor uses this form to evaluate the supervisor candidate’s knowledge and skill, and the candidate's readiness to receive the Approved Supervisor designation. Once complete, the Approved Supervisor should return this rating sheet to the supervisor candidate for inclusion in the Approved Supervisor application packet that will be sent to AAMFT. Please DO NOT submit this form to the AAMFT separately from the Approved Supervisor application packet.

Supervisor candidate: ________________________________

Approved Supervisor: ______________________________

The evaluation is broken into three sections:

I. The Approved Supervisor mentor’s assessment of how well the supervisor candidate has integrated the nine learning objectives during his/her training process.

II. The supervision candidate’s philosophy of supervision, as described in his/her Philosophy of Supervision paper written during the MFT supervision fundamentals course;

III. The Approved Supervisor mentor’s evaluation of the supervisor candidates skill as a supervisor, based on the 36 hours of observation/supervision mentoring sessions; and

In order to be considered for the Approved Supervisor designation, the candidate should achieve a score of at least “acceptable” (2) in every category listed, and an overall average of “excellent” (3) or better in each of the sections. For evaluation scores of “minimal” (1) or lower, the Approved Supervisor mentor and supervisor candidate should discuss the issue and develop a plan for remediation before the Approved Supervisor application packet is submitted to the AAMFT.

Scoring: Use the following scale to rate the supervisor candidate:

<table>
<thead>
<tr>
<th>Number</th>
<th>Rating</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Insufficient</td>
<td>The candidate does not demonstrate an understanding of this concept or learning objective. With regard to the candidate’s Philosophy of Supervision paper, he/she does not address the issue.</td>
</tr>
<tr>
<td>1</td>
<td>Minimal</td>
<td>The candidate can discuss the concept or issue, but does not integrate it within his/her overall framework. In the candidate’s Philosophy of Supervision paper, he/she names the concept or issue, but does not provide a basic definition of the concept or issue.</td>
</tr>
<tr>
<td>2</td>
<td>Acceptable</td>
<td>The candidate has an adequate grasp of the concept or issue and sometimes integrates it within his/her overall framework. Regarding the Philosophy of Supervision paper, he/she names and provides a basic definition of the concept or issue, but does not provide an explanation of the concept or issue.</td>
</tr>
<tr>
<td>3</td>
<td>Excellent</td>
<td>The candidate is familiar with the concept or issue and often integrates it within his or her overall framework. Regarding the Philosophy of Supervision paper, the candidate names, defines and explains the concept or issue.</td>
</tr>
<tr>
<td>4</td>
<td>Exceptional</td>
<td>The candidate exhibits an excellent grasp of the concept, and consistently integrates it within his/her overall framework. Regarding the Philosophy of Supervision paper, the candidate names, defines, and explains and integrates the concept or issue.</td>
</tr>
</tbody>
</table>
# APPROVED SUPERVISOR’S EVALUATION

Please score each objective and place the average score for the section in the last box:

<table>
<thead>
<tr>
<th>I. Integration of Nine Learning Objectives for Prospective Approved Supervisors</th>
<th>Scoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the supervisor candidate familiar with the major models of MFT supervision in terms of their philosophical assumptions and pragmatic implications?</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>2. Can the candidate articulate a personal model of supervision, drawn from existing models of supervision and from her/his preferred styles of therapy?</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>3. Does the candidate facilitate the co-evolving therapist-client and supervisor-therapist-client relationships?</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>4. Can the candidate evaluate and identify problems in therapist-client and supervisor-therapist-client relationships?</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>5. Can the candidate structure supervision, solve problems, and implement supervisory interventions within a range of supervisory modalities (for example, live and videotaped supervision)?</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>6. Is the candidate able to address distinctive issues that arise in supervision mentoring?</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>7. Is the candidate sensitive to contextual variables such as culture, gender, ethnicity and economics?</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>8. Is the candidate knowledgeable of ethical and legal issues of supervision?</td>
<td>0 1 2 3 4</td>
</tr>
<tr>
<td>9. Is the candidate aware of the requirements and procedures for supervising applicants for AAMFT Clinical Membership?</td>
<td>0 1 2 3 4</td>
</tr>
</tbody>
</table>

Average Score on Learning Objectives

Please score each item and place the average score for the section in the last box:

<table>
<thead>
<tr>
<th>II. Evaluation of Supervisor Candidate’s Evolving Philosophy of Supervision, as Written in the Candidate’s Philosophy of Supervision Paper.</th>
<th>In the paper:</th>
<th>Scoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the supervisor candidate think about treatment and supervision in relational terms (for example, in terms of patterns, sequence, context)?</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>2. Does the supervisor candidate have an awareness of patterns and sequences of replication at various system levels (for example, interconnection and interrelationships of the individual, family, therapist, supervisor, and context of training)?</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>3. Does the supervisor candidate demonstrate knowledge of the MFT supervision literature by citing recent articles, chapters, and/or books, and how his/her supervision philosophy and methods relate to the current MFT supervision literature?</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>4. Does the supervisor candidate demonstrate a clear theoretical orientation by articulating his/her philosophies of therapy and supervision as well as the clear connection between them?</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
</tbody>
</table>
SECTION XII

DISSERTATION
I. **Committee**
The student is responsible for forming his/her dissertation committee with the advice and consent of her/his Dissertation Advisor. The Dissertation Advisory Committee shall be composed of at least three members of the graduate faculty from within MFT and ADRS and at least one graduate faculty member outside MFT and ADRS (either within or outside of the college). The Dissertation Advisor (Chair) must be a member of the full-time MFT or ADRS graduate faculty. On all committees there must be at least one MFT faculty. For the dissertation, students should sign up for 9 credits of MFT 8000 under the major advisor and for 1 hour under each of the three committee members, for a total of 12 hours.

II. **Proposal**
The dissertation proposal is prepared in consultation with the advisor. Guidelines for the formatting of the dissertation should be obtained by the student from the Graduate School or the Texas Tech Bookstore. Guidelines for the content of the dissertation is on the document “Dissertation Components for TTU MFT Doctoral Students” which should be followed carefully. Because the TTU MFT program has adopted an “Article” dissertation format, students should consult with their advisor and dissertation committee about how the proposed study will be developed into a two or three article dissertation and the plan should be clearly articulated in the proposal. Students may also choose a “traditional” format dissertation.

When the advisor has approved the proposal, it is submitted to the other members of the committee, and a proposal meeting is scheduled. The committee MUST have a minimum of two weeks between the time they receive the proposal and time of the meeting. If the committee members do not receive the document within two weeks, the meeting must be rescheduled. If the committee approves the proposal, the student may proceed with the project; if the proposal is not approved during this meeting, the student will be asked to work with the committee in revising the document. When the proposal is approved, the student must fill out the “Approval of Dissertation Proposal Form” and acquire the signature of all committee members. The original completed form must then be turned into the MFT secretary. This form will be placed in the student’s permanent file. Committee signatures on a proposal form are an important safeguard for the student and should be obtained prior to proceeding with the research. Once the proposal is approved, the appropriate human subject forms must be submitted and approved before data collection can begin. (See section on Human Subjects.)
III. Defense
The student works with his/her advisor in preparing the final document. When the advisor has approved the document, copies are submitted to each member of the committee. The committee members MUST have at least two weeks to review the document and make suggestions. At this stage, the student may spend several months working with committee members. When all committee members have agreed that the dissertation/thesis is ready to defend, the defense may be scheduled. Because of Graduate School deadlines, the committee approval must be obtained at least three weeks prior to the scheduled defense. The student is responsible for meeting the deadlines of the Graduate School for scheduling of the defense. Prior to the defense, the student should fill out the “Approval of Dissertation” form to be signed by committee members upon approval of the final dissertation. The original signed copy of the final approval of the dissertation must be turned in to the MFT Secretary to be placed in the student’s permanent file. Students must provide a bound copy of the final dissertation document to each committee member and to the department.
ORAL DEFENSE FOR THE DISSERTATION

List of Major Steps as Required by the Graduate School

The Semester you plan to Graduate, do the following FIRST.

1. File your "Statement of Intention to Graduate" with official title of dissertation listed with the Graduate Dean.
2. Pay your Dissertation Fee at Student Business Services.
3. As is the case with every other semester, be sure that you are enrolled for dissertation hours with each committee member (12 hours, or 9 hours if you hold a half-time assistantship).

After Completing your Dissertation Draft

At least FIVE WEEKS before you plan to defend:

1. After first obtaining approval from your advisor, circulate copies of your draft to the other members of your advisory committee.
2. Allow two weeks for your committee to review your draft. During the second week, your committee should have feedback concerning your draft.
3. You may set the date for the defense ONLY after having the approval of all members of the advisory committee to do so.

Setting your Dissertation Defense Date

At least THREE WEEKS before you plan to defend:

1. Set a time and day for the defense. The MFT faculty generally require that dissertation defenses be scheduled for Friday afternoon to allow all faculty and students possible to attend (12-2, 1-3, 2-4, or 3-5). Exceptions must be approved by the Program Director.
2. The student and faculty should work together to assure that faculty are available to review written documents according to the policy stated here. (Sometimes faculty have out-of-town professional obligations).
3. Reserve a room for your defense. The MFT Secretary can help you with this or you may make reservations through the Dean's office. The examination is a formal public affair, and should be scheduled in a room conducive to general attendance by faculty members and students.
4. Write your defense announcement and obtain approval from your advisor. Take one (1) copy to the MFT Secretary for posting.
5. Obtain the "Dissertation Packet" containing your title page from the Graduate School.
6. Submit your signed notification form and UMI abstract.
7. Suggest a Dean’s representative to the Graduate School. Provide a copy of the dissertation to this representative.

After Your Defense

1. Submit three copies of the dissertation and two copies of the abstract to the Graduate School. Provide a bound departmental copy and bound copies to your committee members.

2. Articles based upon the dissertation should be written and submitted. Except under extraordinary circumstances, the student is first author and the advisor is second author on the main article to come from the dissertation research. Authorship follows APA guidelines.
Dissertation Components for TTU MFT Doctoral Students

Adapted from guidelines from the Santa Barbara Graduate Institute and the book “How to prepare a dissertation proposal” by Krathwohl and Smith (2005).

The rubric on the following pages is meant to help PhD students understand what constitutes a quality dissertation in the MFT program at TTU. The dissertation is a key component of meeting our student learning outcomes. Specifically, the dissertation will demonstrate proficiency in the candidate’s ability to conduct original research in the profession. See also Chapter 2 of the APA Sixth Edition Publication Manual for components and examples of research manuscripts.

Students should see TTU’s guidelines for formatting and submitting dissertations for additional technical information. It is also helpful to review other completed dissertations to see their formatting and content. In regard to components, there is some flexibility, especially for qualitative studies, which may deviate from the format below in presentation of results. However, in general students will do well to follow carefully these guidelines.

The TTU MFT Program has adopted an “article” format for the dissertation. The advantages of this include an accelerated transition to publishing one’s work, and a quicker move into building a research program. In the article dissertation format, the middle chapters are formatted as stand-alone works that will be ready for submission. Students will work with their advisor and committee to determine if two or three articles are appropriate for the dissertation. A minimum of two articles must be empirical. If, in collaboration with the chair and the committee, the student decides to include a third article, it may be conceptual in nature or a traditional narrative review of the literature. This dissertation will also require introductory and concluding chapters that are substantive, and the articles need to be integrated by a theme.

Although some overlap or building upon the student’s previous independent work is acceptable (e.g., there may be similar areas of literature review in the articles), self-plagiarism is not. Students must be first author on all articles, and other students should not be co-authors. The chair or other committee members may be authors on some or all of the eventual submissions.

In consultation with the dissertation chair and committee, students may decide to complete a “traditional” dissertation. The traditional format usually consists of the elements described below, arranged in five chapters: Introduction, Literature Review, Methods, Results, and Discussion. Variations on the traditional format may be warranted by the study design (e.g. qualitative study) and approved by the dissertation committee.
Title Page

_____ **Layout:** The student has precisely followed the title page layout requirements that are stipulated in the TTU dissertation guidelines.

_____ **Title:** The title is succinct and descriptive of the research. If a quantitative study is proposed, the title includes the primary independent and dependent variables (e.g., *The Impact of Structural Family Therapy on Generalized Anxiety Disorder*).

**Other Dissertation Pages.** These will consist of pages as designated by the TTU formatting guidelines (e.g., signature pages).

**Abstract.** The abstract is a short overview of the proposed research. It should include the following items.

_____ **Pagination:** The abstract starts on a new page.

_____ **Word count:** The abstract does not exceed 250 words.

_____ **Tense:** The abstract is written in the past tense (except for the proposal abstract).

_____ **Content:** The abstract summarizes the study:

______ The abstract indicates what the dissertation's research questions (if a qualitative or mixed-methods study) or hypotheses (if a quantitative or mixed-methods study) were.

______ The abstract describes the participants (e.g., “30 post-menopausal women in their 40s who suffer from clinical depression and live in the Denver area”).

______ The abstract summarizes what methods were used to collect and analyze the data.

______ The abstract summarizes the study’s key findings.

_____ **Clarity:** The abstract is readable, coherent, well-organized, concise, and self-contained.

_____ **Key words:** Because the abstract is often indexed in research databases, the student may wish to embed key words in it so that researchers searching computerized databases can access it easily.
Table of Contents (TOC)

_____ **Pagination:** The TOC starts on its own page and is labeled Table of Contents.

_____ **Headings:** The TOC lists all of the headings and subheadings that appear in the dissertation with their accompanying page numbers which are printed with a dot leader and are justified flush right.

_____ **Heading Structure:** The TOC shows that the hierarchical organization of headings and subheadings in the manuscript is correct. That is, the manuscript does not have any instances of a single subheading within a section. This is shown in the TOC by there being at least two entries of the same level below any entry of a higher level. (If there is only one entry below an entry of a higher level, the student has not structured the sections and subsections of the manuscript correctly and needs to fix this in the body of the document.)

**Introductory Chapter (One).** The introduction needs to address each of the elements stipulated below (except where otherwise noted). The order in which the student incorporates the elements is up to his or her discretion, provided that there is a logical flow. The aim of the introduction is to provide an overview of the study and to engage the reader by why this research is interesting, important, and necessary.

_____ **Pagination:** Like all chapters in the dissertation, the introduction starts on the top of a new page.

_____ **Headings:** The introduction, like all chapters in the dissertation, is divided into meaningful subsections each with its own heading. (The only exception to this is that the very first section of the introduction should NOT have any heading.)

_____ **Study Focus:** The introduction elucidates what the focus of the study is. The topic should be focused but not trivial.

_____ **Study Importance:** The introduction explains why the focus of the research is a significant problem worthy of study. Specifically, it draws on the literature to provide a brief, well articulated, and engaging argument for the need for the research. (Please bear in mind that the fact that something has not been studied before is not a sufficient argument for why it should be studied. Also, it is generally preferable to study a topic that is important in its own right and not just a narrow issue about the MFT profession. For example, clinical research on a juvenile anxiety is preferred to just studying MFT supervisor stressors).

_____ **Inquiry Framework:** The introduction clarifies what theoretical issue(s) the research will draw upon or illuminate. The dissertation research needs to be driven by, grounded in, and make a contribution to theory.
Terms: If technical or other specialized terms are used (e.g., psychological or family systems concepts), it is helpful to have a section defining them (by drawing on the literature, NOT the dictionary). This is often done in a subsection at the end of this chapter.

Inquirer’s stake: The introduction may (but is not required to) include a brief discussion on what the author’s personal stake is in the research, that is, why this project is personally meaningful to him or her. This is particularly relevant for qualitative work.

Study Boundaries: Statement of study boundaries, presuppositions, trade-offs, and limitations, including what the study will not do.

Summary: By the end of the introductory chapter, the reader knows what the author studied (or is proposing to study). This is usually established by a Purpose of Study subheading that lists the research questions and/or hypotheses. Sometimes these complete hypotheses are placed at the end of the Literature Review chapter. If so, give a shorter version here and a more thorough version there.

Inquiry Statement(s): (For quantitative and mixed-methods studies): The hypotheses are clearly stated by indicating what the study’s variables are and what the proposed relationship is between or among them (e.g., I hypothesize a negative correlation between developmental trauma and capacity for intimacy).

Inquiry Clarity: The research questions and/or hypotheses make clear sense in light of the introduction.

Review of the Literature or Manuscript #1 Chapter(s) (Two). The literature review places the study in the context of previous research. As noted in the Publication Manual of the American Psychological Association (6th ed.), a scholarly review of earlier work provides an appropriate history and recognizes the priority of the work of others. Citation of and specific credit to relevant earlier works is part of the author’s scientific and scholarly responsibility (2009). Students who choose a two article format will include a traditional literature review as the second chapter. For student who choose a three article dissertation, Chapter 2 will be a modified lit review that can likely be submitted as a stand-alone article (conceptual, theoretical, or position paper).

Structure: The literature review is broken into subsections, each with its own heading. These usually correspond to the organization of the research questions/hypotheses.

Sections: The subsections are ordered in a logical fashion and have a clear relationship to each other (rather than reading as discreet, disconnected blocks of text).

Justification: The literature review, like the introduction, draws on select literature to build a case for why this particular study needs to be conducted.
Selection Process: The review focuses only on literature directly pertinent to the problem addressed in the research (e.g., is attached to the research questions/hypotheses). Chosen based on assessment of scope, relevance, and methodological quality of literature reviewed.

Major Works: The research discussed in the literature review is drawn from recent peer-reviewed journals (refereed journals), dissertations, and books published by university presses (e.g., Univ. of Washington Press) or academic publishers (e.g., Sage, Routledge, Oxford). The balance weighs most heavily on journals because this is where the most up-to-date empirical findings are published. Secondary source citations are avoided where possible (e.g., According to Smith, Minuchin argued that . . . ).

Implications: Summary of implications from the literature review (including theoretical positions and their support, empirical evidence, policy statements, and practical knowledge and experience) for (a) understanding the phenomena of interest, and (b) studying the phenomena of interest.

Quality: The literature review is interesting: it tells a story, rather than reads like a laundry list of previous research. Do not just review previous works, but organize literature conceptually.

Summary: Summary of literature review and transition to Method Statement.

Empirical Manuscripts or Methods and Results Chapters (Three and Four). Chapters three and four will consist of completed individual manuscripts ready for submission to a scholarly journal with significance in the profession of MFT. In addition to the elements of the introduction and literature review, the manuscripts will contain well developed methods, results, and discussion sections:

Theoretical and Epistemological Influences and Research Design

Cohesion: The methodology should connect to the questions asked, and should also indicate the researcher’s theoretical and epistemological assumptions about the knowledge being proposed and generated.

Methodological Orientation: (For qualitative or mixed-methods studies.) The student indicates in which qualitative paradigm the study was grounded (e.g., phenomenology, grounded theory, feminist, ethnography) and why. (In addition to the student’s theoretical justification, he or she is invited to note any personal, political and/or epistemological rationales for his or her choice of qualitative paradigm.)

Methodological Findings: This section cites literature to support the use of the above design or orientation. (Optional: Other designs or orientations the student considered but rejected are discussed and why he or she determined these would be less effective is explained.)
Research Design: (For quantitative or mixed-methods studies.) The student indicates what research design he or she used—that is, what his or her logic of your inquiry was (e.g., experimental, quasi-experimental, comparative case study, cross sectional, longitudinal) and why. (In addition to the student’s theoretical justification, he or she is invited to note any personal, political and/or epistemological rationales for his or her choice of design.)

Participants and Sampling

Participants: The student describes who he or she studied—that is, who his or her participants were—and indicates why. All characteristics of the sample that are relevant to the study are specified.

Selection Process: The student indicates the method he or she used to select participants (e.g., purposive sampling, random sampling, convenience sampling, snowball sampling) and why he or she used this method.

Recruitment: The student indicates how he or she gained access to participants (e.g., through a professional organization’s mailing list, posters advertising the study).

Sample Size: The student indicates how many people participated in the study and provides a rationale for his or her sample size (whether large or small).

Support of Selection: This section cites literature to support the use of the above participant selection methods.

Data Collection

Data Collection Method

The student indicates what data collection method(s) he or she used (e.g., interviews, diaries, psychological tests, participant observation, archival research) and why.

Measures. (For quantitative or mixed methods studies.)

The student indicates the quality of the measure (e.g., reliability, validity)

The student indicates how he measured the predictor (independent) and outcome (dependent) variables.

The student explains why he or she chose these specific operational measures if this has not been explained earlier and the rationale for their use is not self evident.
The student indicates which research instruments (e.g., specific psychological tests), if any, were used. (The student provides citations for the instruments and includes them in the appendices).

This section cites literature to support the use of the above measures.

Data Collection Procedures. (Required for experiments, otherwise optional.) Students who employed an experimental design need to describe in precise detail how the experiment was conducted. Those who conducted qualitative research or used a quantitative design other than an experiment may opt to include a data collection procedures section if the data collection methods section does not clarify all of the steps that were undertaken to gather the data.

The student indicates all of the steps that were undertaken to conduct the experiment/collect the data.

(For experiments): The procedures section is sufficiently detailed to allow another researcher to replicate the experiment.

Data Analysis Methods.

Analysis: The student describes methods (e.g., constructivist grounded theory analysis of interviews, examination of field notes, structural equation modeling, dyadic data analysis) and procedures he or she undertook to analyzed the data and indicates why he or she employed these methods and procedures.

Ethical Protection of Participants

Implications: The student provides a meaningful reflection on the ethical implications of his or her study.

Anticipated Risk: The student assesses what the level of risk (physical and psychological) was for those who participated in the study and states how he or she minimized this risk if its level was moderate to high.
Results

For quantitative studies:

____ **Structure:** The results section is structured around the hypotheses.

____ **Components:** For each hypothesis, the student provides the following information:

_____ The hypothesis

_____ The data analysis method used to test it (e.g., a Student’s t-test, ANOVA)

_____ The outcome of the analysis (e.g., At p < .05, the analysis supports [or fails to support] the hypothesis that....), including the relevant statistics (e.g., the t-statistic, the p-value).

____ **Table content:** Tables and figures are self-descriptive and informative.

____ **Table relation:** The tables and figures are clearly related to the narrative in the chapter.

For qualitative studies:

____ **Structure:** The results section is structured around the research questions. Each question may be examined in its own section of the results.

____ **Supporting Themes:** Patterns, relationships, and themes reported as findings are supported by appropriate and sufficient evidence that is included in the body of the section. Additional evidence should be included in appendices (e.g., sample transcripts, researcher logs, field notes/memos, etc.).

____ **Reporting Data:** The section reports on all salient findings, including (and especially) discrepant cases and disconfirming data.

Discussion. The discussion section is where the student explains what they believe their findings mean and why their findings matter. In addition, limitations of the study are discussed as are recommendations for future research.

____ **Overview:** The discussion section begins with an overview of the results, which are summarized, evaluated, and interpreted with respect to the original research questions and/or hypotheses. (A table may be used to organize the findings.)

____ **Study Contributions:** The section addresses how the study contributes to scientific knowledge in the student’s area of interest. More specifically, the section addresses the *theoretical* consequences of the study’s results, that is, how the findings inform one or more specific bodies of theory.
Study Implications: The section addresses the practical consequences of the study’s results—that is, what practitioners (e.g., therapists, health care workers, policy makers) may take away from the research in order to improve practice or create beneficial social change.

Limitations: The section provides a thoughtful reflection on the limitations of the study by indicating what methodological trade-offs were made in designing the research and the implications of those trade-offs.

Future Research: The section provides prescriptions for future research. To identify avenues for future research, you may want to consider what questions your study has raised, what remains unanswered or unclear, and what you are curious about now. Further, you may want to consider the following: Knowing what you know now, what might you do differently if you were to design the study now?

Discussion Chapter (Five). Chapter five will consist of a global discussion intended to integrate the articles presented in the dissertation. The section should relate the findings/Assertions of the individual manuscripts back to the global unifying themes of the dissertation research.

References. Reference lists can either be done separately for each manuscript, or as a complete list at the end.

Pagination: The reference list starts on its own page and has the heading References.

Format: The references follow APA specifications.

Citations: The list includes all works cited in the dissertation.

References: All items listed as references are cited in the paper.

Appendices

Pagination: Each appendix starts on its own page and is labeled. If there is only one appendix, it has the heading Appendix. If there is more than one, each appendix is labeled with a letter (i.e., Appendix A, Appendix B, etc.).

Copies of Key Documents: Appendices include additional information or documentation relevant to the research (e.g., psychological instruments used, interview schedules, a blank copy of an informed consent form, interview transcripts).
Global Criteria

Writing, APA Style, and Organization. In addition to the elements described above, the dissertation is evaluated on how well written it is and the degree to which the student follows APA style guidelines.

_____ Writing Standard: The document is written with a polished scholarly style.

_____ All sentences are grammatically correct.

_____ All paragraphs are self-contained and focused on a single topic or point.

_____ The document’s tone is appropriately formal.

_____ Organization: The manuscript is organized logically.

_____ All sentences follow each other logically.

_____ All paragraphs follow each other logically.

_____ Each section is limited to a single global concept.

_____ Logical Flow: The sections add up to an integrated “whole.”

_____ Subheadings are used to identify the logic and movement of the document.

_____ Transitions between sections are smooth and coherent.

_____ Quotations: Excessive use of scholarly quotations is avoided (especially long quotes) because the student primarily relies on his or her own words to explain others’ ideas.

_____ Format: Correct APA style is used throughout the manuscript.

_____ In-text citations are formatted correctly.

_____ Citations for paraphrased ideas are formatted correctly.

_____ Citations for short quotes are formatted correctly.

_____ Citations for long quotes are formatted correctly.

_____ Headings are formatted correctly.
Scholarly Contribution Learning Outcomes. Finally, the dissertation is evaluated by the committee on its scholarly value. The four learning outcomes are as follows:

- **Congruency:** The dissertation’s research question, research design, data collection methods, data analysis methods, and interpretation of findings are congruent with one another.

- **Contribution:** The dissertation makes a significant contribution to the knowledge of the discipline.

- **Research Skill:** The dissertation demonstrates the student’s capacity to carry out independent research.

- **Publication:** The dissertation contains material worthy of scholarly publication.

### Comparison of Dissertation Components

<table>
<thead>
<tr>
<th>Traditional (5 Chapter) Dissertation</th>
<th>Three Journal Article Dissertation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preliminary Materials (Title, abstract, Acknowledgments, Table of Contents. Etc)</td>
<td>Preliminary Materials (Title, abstract, Acknowledgments, Table of Contents. Etc)</td>
</tr>
<tr>
<td>Chapter 1 – Introduction</td>
<td>Chapter 1 – Introduction</td>
</tr>
<tr>
<td>Chapter 2 – Literature Review</td>
<td>Chapter 2 – Manuscript #1 (may be conceptual)</td>
</tr>
<tr>
<td>Chapter 3 – Methods</td>
<td>Chapter 3 – Manuscript #2</td>
</tr>
<tr>
<td>Chapter 4 - Results</td>
<td>Chapter 4 – Manuscript #3</td>
</tr>
<tr>
<td>Chapter 5 – Discussion / Conclusion</td>
<td>Chapter 5 – Discussion / Conclusion</td>
</tr>
<tr>
<td>References</td>
<td>References</td>
</tr>
<tr>
<td>Appendices</td>
<td>Appendices (may include extended literature review, theory development, or extended results)</td>
</tr>
</tbody>
</table>
APPROVAL OF DISSERTATION PROPOSAL

Name __________________________ Date __________________________

Title of dissertation proposal:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Committee Approval:

Chair __________________________ __________________________

________________________________________________________________________

xc:  Student File
SECTION XIII

STUDENT EVALUATION OF PROGRAM
Texas Tech University
Marriage and Family Therapy Program

COURSE AND PRACTICUM EVALUATION

Please put the complete form in the envelope provided. The MFT secretary will type a summary of all responses and then destroy the individual handwritten forms. A copy of the summary will be given to all MFT Faculty.

Course _________________________ Instructor ___________________________

Semester and Year ___________________________ Date ___________________

1. What were the most positive aspects of this course/practicum?

2. What are the most important things that could be changed in order to improve this course/practicum?
EVALUATION OF INDIVIDUAL SUPERVISION

Supervisor: ___________________________  Agency: ___________________________
Name (student): _____________________  Date: ___________________________

1. Please indicate the typical frequency _____/month and duration _______ hours of your supervisory meetings.

2. Please indicate the % time a particular modality of supervision was used:
   ______% case discussion    ______% review of videotapes
   ______% joint therapy with supervision    ______% live supervision
   ______% other, specify ___________________________________________

3. Rate your supervisory experience using the following scale
   1=inadequate  2=partly adequate  3=adequate  4=good   5=outstanding
   a. ______ Overall Supervisory Experience
   b. Supervisor’s ability to:
      ______(1) Recognize my anxiety
      ______(2) Assist me with personal anxiety
      ______(3) Identify problems in my performance
      ______(4) Make effective recommendations
      ______(5) Convey interest in my learning
      ______(6) Contribute to development of my clinical judgment
      ______(7) Contribute to my development as a family therapist

4. Comment generally about what was most helpful, problems with the experience and how it may be improved, plus other items as you desire.

FORM DEVELOPED BY THE FAMILY THERAPY PROGRAM AT HAHNEMANN UNIVERSITY
SECTION XIV

ANNUAL STUDENT EVALUATIONS
**TEXAS TECH UNIVERSITY – MFT PROGRAM**  
**STUDENT PROGRESS REPORT**

**Student:** _____________________________________   **Year:** ______________

**Overall Level of Concern:** (Circle One)   **No Concern**  **Some Concern**  **Serious Concern**

<table>
<thead>
<tr>
<th>Particular Strength</th>
<th>Demonstrated Competence</th>
<th>Needs Improvement</th>
<th>Some Concern</th>
<th>Serious Concern</th>
<th>No Basis for Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Knowledge/Mastery of General Courses</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>B. Skills/Application of Knowledge/Clinical Insight</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>C. Research Courses/Research Skills</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>D. Written Presentation</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>E. Oral Presentation</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>F. Class Participation (includes attendance, maturity of behavior in class, motivation and attitude)</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>G. Professionalism: Behavior/Attitude Clinical/Academic</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
</tbody>
</table>

**Strengths:**

Areas for improvement (with specific suggestions):

**Overall Clinical Performance for Developmental Level:** (Circle One)   **Outstanding**  **Very Good**  **Good**  **Marginal**  **Poor**

**Overall Academic Performance:** (Circle One)   **Outstanding**  **Very Good**  **Good**  **Marginal**  **Poor**

**Other Comments**

________________________________________  Date  __________________________________  Date

**MFT Program Director**  **Date**  **Student Signature**  **Date**

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SECTION XV

AAMFT MEMBERSHIP
It is expected that all students become student members of AAMFT within their first semester of joining the TTU MFT program (if they are not already). Guidelines for applying are found on the website at www.aamft.org.

It is also expected that students will be active in the TTU SAMFT student organization of AAMFT here.
SECTION XVI

TEXAS LICENSURE LAW
MFT LICENSURE IN TEXAS

AS SOON AS YOU ARE ELIGIBLE (See attached table) YOU MUST APPLY FOR LICENSURE AT THE STATUS FOR WHICH YOU ARE ELIGIBLE (Licensure, Associate Intern License, Provisional License)

You can practice MFT without a license as long as you practice MFT only as part of your doctoral program. Practice as part of your program is defined as (a) practice in the Family Therapy Clinic, (b) practice in service contracts accepted as a part of the program, e.g., LCYC, PEP, (c) practice as part of an official external practicum placement or internship. For the last category, you would have an external practicum agreement or internship agreement on file that was approved by the program director and all other relevant parties. These are, of course, the same hours the program “counts” towards program requirements.

The appropriate forms are available on-line at http://www.dshs.state.tx.us/mft. For the supervision report, ask the Clinic Coordinator for a summary of contact and supervision hours, complete the form, attach the relevant computer printout and give to the MFT Program Director for verification and signature. For hours earned outside the program, send another supervision form to each of your old supervisors. The hours “in the computer” are our official records. As always, it is your responsibility to make sure they are accurate and up-to-date. The Clinic Director must approve any changes. The MFT secretary is a notary and can witness your forms. A model “Supervisory Agreement Form” is included in your Program Manual.

The MFT secretary keeps a copy of all licensure rules and forms.
## Comparison of Requirements for MFT Credentials

<table>
<thead>
<tr>
<th>Qualifying Degree</th>
<th>MASTERS IN MFT (Accredited Program)</th>
<th>MASTERS IN OTHER MENTAL HEALTH PROFESSION</th>
<th>NON-QUALIFYING MASTERS DEGREE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of Contact Hours at Start of Ph.D.</strong></td>
<td>500</td>
<td>0 – 500</td>
<td>0</td>
</tr>
<tr>
<td><strong>When to Apply for Texas Associate License</strong></td>
<td>At entry to Ph.D. Program</td>
<td>When complete Master's equivalent MFT coursework + Practicum</td>
<td>At completion of Ph.D. degree</td>
</tr>
<tr>
<td><strong>Practicum Contact Hours in Ph.D. Program</strong></td>
<td>250</td>
<td>500</td>
<td>500</td>
</tr>
<tr>
<td><strong>When to Apply for Supervisor Intent To Train</strong></td>
<td>At entry into Ph.D. Program</td>
<td>At completion of 500 hours in Ph.D. Program</td>
<td>At completion of 500 hours in Ph.D. Program</td>
</tr>
<tr>
<td><strong>Required Contact Hours in Internship</strong></td>
<td>500</td>
<td>500</td>
<td>500</td>
</tr>
<tr>
<td><strong>When to Apply for AAMFT Clinical Membership</strong></td>
<td>Upon receipt of LMFT licensure</td>
<td>Upon receipt of LMFT licensure</td>
<td>Upon receipt of LMFT licensure</td>
</tr>
<tr>
<td><strong>When to Apply for Texas Full Licensure</strong></td>
<td>Two years post masters + 1500 direct &amp; 1500 indirect + exam</td>
<td>Two years post masters + 1500 direct &amp; 1500 indirect + exam</td>
<td>Two years post Ph.D. + 1500 direct &amp; 1500 indirect + exam</td>
</tr>
<tr>
<td><strong>When to Apply for Licensure in Other States</strong></td>
<td>[Issue here is whether other states will take clinical membership or must document hours past the qualifying degree]</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>When to Apply for Approved Supervisor</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Minimum Hours to Texas Licensure</strong></td>
<td>1500</td>
<td>1500</td>
<td>2000</td>
</tr>
</tbody>
</table>

**Note.** AAMFT and the Texas Licensure Board have been taking masters degrees in HDFS, Sociology, Psychology, Counseling, Social Work, etc. as "mental health degree." The problem has been in degrees like history and English, and some MDiv's. The appropriateness of the degree will be evaluated at the time of application.
SECTION XVII

HUMAN SUBJECT FORMS
HUMAN RESEARCH PROTECTION PROGRAM

All research involving human subjects, whether led by faculty or independently pursued by students is governed by the Human Research Protection Program (HRPP) and the Institutional Review Board. All students must be familiar with and follow the requirements for proposal submission and reporting established by the HRPP, BEFORE starting any research that involves human subjects or data collected from human subjects. It is expected that you will work in conjunction with faculty to ensure that you are following appropriate HRPP protocols. The policies and procedures for human subject research are available at:

http://www.depts.ttu.edu/vpr/irb/policies.php
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  Confidentiality of Information 7
  Collegial Relationships
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    Co-therapy 8
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Purpose and Philosophy of the Family Therapy Clinic

The Texas Tech University Family Therapy Clinic (FTC) was established to provide training opportunities for graduate students in the Marriage and Family Therapy (MFT) Program. The FTC student therapists provide direct services for couples, families, individuals, or groups and serve as a resource for other agencies in the Lubbock and South Plains area. The focus of all services, direct and indirect, is on assessing and improving the way relational systems work—whether the system is a couple, family, group, classroom, or agency. The FTC works within compliance of the American Association for Marriage and Family Therapy (AAMFT) Code of Ethical Principles for Marriage and Family Therapists in the provision of direct and indirect services.

The Family Therapy Clinic (FTC) serves as the primary clinical training facility for the MFT graduate Program at Texas Tech. Each entering student therapist is required to obtain a portion of their clinical training and supervision in the FTC. The exact number of hours of client contact and supervision that is required is dependent upon how many hours of previous clinical experience (if any) the student therapist is allowed to transfer into the Texas Tech program. The Texas Tech University Marriage and Family Therapy Program Manual addresses this issue in detail in the “Practicum” chapter.

Clinical training is obtained first through on-site practicum (MFT 6395), participation in community grant opportunities, and later through internship (MFT 7395). All entering students, regardless of their previous clinical experience, will spend a portion of their first semester becoming acquainted with the program, specific clinical requirements, and protocol prior to serving clients. Most students will begin accumulating client contact hours in the FTC during their second semester. Occasionally, other opportunities exist to accrue hours before the second semester. Students are encouraged (and sometimes required) to observe other student therapists working with clients in the FTC during their first semester in order to become better acquainted with the FTC and its operating protocol.

In addition to being a training facility for the MFT Program, the FTC is also a service facility for the community. The vast majority of the clientele in the FTC is comprised of residents of Lubbock and the surrounding communities, not only students, faculty, and staff of Texas Tech. With that in mind, the FTC operates much like any other mental health related business. At this time, the clinic is a self-funded facility in that all operating costs must be paid from the fee revenues collected from clients.

As a service facility, the student therapists and supporting staff of the FTC have an obligation to clients to conduct themselves in a professional manner including, but not limited to, the way one dresses, one’s attitude and behavior toward clients, and one’s focused attention to the details of how the business portion of the FTC is conducted. Regardless of how much a client may be paying, $10.00 or $50.00 per session, each and every one of them deserves to be treated with the utmost respect.
Requirements to Enter Practicum

To ensure that the potential student therapist is ready to begin practicum, the following steps will be taken:

1. The student will review the material contained in the Texas Tech MFT Program Manual, including the sections on MFT Program Objectives, Grievance Procedures, Practicum and Internship Experiences, and Family Therapy Clinic Procedures. All incoming students and mentors must attend an orientation, led by the Clinic Director for a further review of the contents of the Clinic Manual, the AAMFT Code of Ethics, confidentiality issues, and emergency procedures.

2. The student will meet with the Clinic Director and/or Clinic Coordinator to review FTC policies and procedures, and to receive training on completing all required forms and documents correctly, in addition to efficient operation of all FTC recording equipment and use of Advanced MD software.

3. The student will schedule a meeting with designated members of the MFT Faculty and the student’s assigned faculty advisor to review prior therapy experiences and to determine the level of supervision (live or videotape, each session to occasional sessions) that will be required for each client constellation (families, couples, individuals, groups).

4. When the MFT faculty is satisfied that the student is ready to begin supervised practicum experience, cases will be assigned to the student in accordance with the Clinic Director's recommendations regarding level of supervision required and client constellation.

5. The Agreement to Abide by Procedures, Policies, and Ethical Standards must be signed by the therapist, initial supervisor, and Clinic Director and placed in the therapist's MFT file. A copy of this form, and all other forms referenced in the manual, are included in the Appendix with a reference to where the form can be located.
Administrative Policies

The Role of the Supervisor

An important part of training in marriage and family therapy is the experience of being
supervised by an experienced therapist and supervisor. In the FTC, MFT faculty provide both
live supervision of sessions, and review of recorded sessions and case records. Supervision will
occur in a group format and individually (one or two students) in accordance with the AAMFT
Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE). By
policy, the practicum supervisor is responsible for all cases seen by therapists under her/his
supervision. Therefore, the therapist must ensure that the supervisor is aware of each case being
seen and that the supervisor is involved in decisions regarding the course of therapy, including
fee setting, contact with other agencies and professionals, decisions to transfer a case or to
terminate a case, and interventions.

The relationship between supervisor and student therapist is intended to be collegial, with each
party contributing to the enhancement of therapy for the client. However, differences in
experience between student therapists necessarily lead to differences in the degree of control that
a supervisor must have in a particular case. Some student therapists will have considerable
latitude in deciding on case matters; others will be expected to consult the practicum supervisor
on what may appear to be minor matters until the supervisor is convinced that the student can act
alone. Disputes that may arise between the student therapist and the supervisor are best settled
between the two parties. If a satisfactory resolution cannot be reached, grievance procedures are
available to either party.

Confidentiality of Information

Client information must be protected by the therapist, FTC staff, and practicum supervisor. All
information about clients should be considered confidential—names, personal information (age,
sex, occupation, marital status, etc.), topics discussed in therapy, etc. Information regarding
clients should only be discussed in private with other therapists or with the practicum supervisor.
All client information including case records must be secured at all times. This means that
client files and flash drives with digital recordings must remain within the locked areas of
the FTC administrative offices. All client calls must be returned from a confidential area.
If information is to be released or obtained from another agency or professional, a properly
completed and signed Release of Information Form must be obtained from the client.

At the very least protecting the confidentiality of our clients entails:

• refraining from discussing anything about a client anytime you are outside the clinic
  that could possibly identify that client
• all correspondence to and from office staff, therapists and/or supervisors regarding
  clients should be done using the AdvancedMD messaging system. On the rare
  occasion that is not an option, be certain to only use case numbers and never use
  client’s names.
• if, while observing a session, you recognize the clients from some other realm of
your life (i.e., a neighbor, a current student in a class you are teaching) you must excuse yourself from observing that particular session immediately

- you must resist any behavior that might be in conflict with the AAMFT Code of Ethics regarding confidentiality
- only FTC staff, students, and faculty are allowed into the clinic, including the administrative offices and therapist work room, without prior approval of the Clinic Director. Do not bring friends, spouses, students, etc. into the facilities.

Collegial Relationships

Supervision of students by Supervisor Candidates (mentors)

Towards partial fulfillment of the requirements for becoming an AAMFT Approved Supervisor, Supervisor Candidates (student supervisors-in-training) are required to accumulate a certain number of hours spent supervising student therapists. However, the AAMFT COAMFTE standards do not allow student therapists of an AAMFT accredited MFT program to count any hours of supervision with a student supervisor-in-training toward the 200-hour requirement for supervision. In addition, only those hours of direct client contact which are supervised by an AAMFT Approved Supervisor or Supervisor Candidate who is not a student in the same program as the student therapist may count toward the student therapist’s required 1000 hours of direct client contact. In spite of these limitations, the MFT Program faculty wish to encourage students to supervise each other's sessions. Such experiences are helpful to the student being supervised and to the supervising student, broadening repertoires of interventions, building confidence, and giving each party an opportunity to learn more about therapy.

To maximize the positive outcomes of peer mentoring, mentors are strongly encouraged to construct a supervision agreement to guide their work as peer supervisors, in accordance with the Supervision in MFT courses (MFT 6396, 6397). For more information, see the “Supervision of Supervision” section in the program manual.

Co-therapy

AAMFT COAMFTE regulations dictate what can be counted as co-therapy hours. To have a session count as co-therapy, it is necessary that each therapist be in the room with the client(s) for the majority of the session. Co-therapy can be especially useful in dealing with couples, families, and groups. Students are encouraged to engage in co-therapy when it is appropriate. To avoid confusion, one therapist must be declared the primary therapist; the other will be the co-therapist. The supervisor who supervises the primary therapist will provide supervision for the case.
**Professional Dress Code**

Although the FTC is located on an academic campus, the clinic functions more like a business or community agency. Please be aware of how you are dressed whenever you are in the clinic and may come into contact with a client who might identify you as a therapist of the FTC. Sometimes a therapist may request assistance from a reflecting team made up of all those observing the session. If you are observing, you may be asked to participate in this way, and the way you are dressed must be congruent with your role as a professional.

Since practicum night often entails several people sharing a small space to observe cases, please do your best to make sure this is a pleasant experience for everyone. Beyond being respectful in your interactions with colleagues, please avoid strong perfume/cologne and pay attention to personal hygiene. Taking care of these items on your own prevents the somewhat awkward situation of having them addressed by your peers or supervisor.

All FTC therapists and supervisors are expected to ensure that their dress and grooming projects a positive image of our clinic to all our clients and potential clients. Choice of dress should convey respect, competence, and caring to our clients and sister organizations throughout the community.

Therapists should follow a [business-casual dress code](#) whenever they will be in the clinic, regardless of whether or not you have clients scheduled. Clothing should be clean and neat in appearance at all times.

For clinic purposes, business casual dress is defined as the following: a dress shirt (button-down or polo), nice sweater, pants or skirt (no jeans), and nice shoes.

Skirts should be no shorter than five inches above the knee when seated; likewise, slit skirts or dresses should not exceed this guideline. Sleeveless shirts or sweaters are appropriate in warmer weather on the condition that they are not excessively bare. Shoes should be of a professional style (no tennis shoes or flip-flops). Dressy sandals are acceptable as long as they are appropriate for the outfit and season. If sandals are worn, feet should be properly groomed and maintained.

**Exceptions to the business casual dress policy include public presentations or workshops, health fairs, or any other public event in which you are promoting the clinic. During these times, therapists are expected to dress in traditional business attire unless other dress is deemed appropriate by the clinic director.**

The following items are considered **unacceptable** clinic dress:
- muscle shirts, tank tops, halter tops, spaghetti strap tops, or shirts that reveal the midriff
- torn clothing, cutoffs, and beach attire
- very low cut pants or jeans
- mini-skirts
- sheer or “see through” clothing
- plunging necklines
- tee-shirts, sweatshirts, sweatpants
- slippers, flip-flops, tennis shoes, or work boots
- clothing that is excessively revealing, distracting, provocative or tight

Students who do not follow the dress code are subject to a disciplinary counseling record being placed in their program file.

**Facility Maintenance**

Although the University has a janitorial staff that takes care of certain cleaning responsibilities, the overall cleanliness and general maintenance of the clinic is the responsibility of the therapists who use the facility. Please do not leave any paper, food wrappers, play therapy items, etc. on the floors or the cabinets of the rooms in the clinic. **Return chairs to their usual place if you rearrange them during session.** Clinic rooms and the waiting room should be picked up and prepared for the next client every evening.

Eating before, during, or after practicum is allowed, at the discretion of the practicum supervisor. Eating anything beyond light snacks while observing a session is discouraged; we don’t want clients to feel like they are in dinner theater. Please be aware of how food smells can linger, and always clean up afterwards. Food crumbs invite roaches and other pests that we don’t want to share our space with.

**Please be conscious of loud talking, coughing, or laughter while you are observing a session from one of the observation rooms.** It can be very disconcerting to a client, who may already be anxious about cameras and two-way mirrors, to hear this type of activity coming from the observation room. In addition, a respectful attitude toward all clients requires that we refrain from rude or condescending comments made to other therapists about a client, regardless of how we may be feeling personally about that client and/or the therapist who is working with them.

**Recording Equipment**

The FTC is fortunate to have excellent facilities for recording and editing recorded therapy sessions. All therapists will be instructed on how to properly operate the equipment for successful recording of each session. Instructions are posted in each observation room for operating and shutting down the recording equipment. Please be gentle with the equipment and **report any problems to the Clinic Director.** Therapists are responsible for ensuring that equipment is logged out of according to the posted instructions and observation room doors are locked when sessions are complete. If another therapist has scheduled the room and has not arrived, it is the responsibility of the previous therapist to lock up.
Keys/Keypads

All practicum students will be issued a door code which unlocks the FTC Waiting Room, Admin. Office/Mailroom, and the Student Therapist work area in Room 168. Given that valuable equipment might be stolen if the keys/codes are lost, a fine will be assessed to cover any lock/code changes that might be necessary. It is also the therapist's responsibility to ensure that all doors in the area are locked at the end of each session. Locked doors help maintain the safety of our therapists and clients as well as the security of equipment and confidentiality of records. Therapists must be responsible in keeping FTC areas (including the student work area) locked at all times. Also, please use the “occupied” signs on clinic room doors to prevent your sessions being interrupted.

The external door to the waiting room must be open during regular business hours (8:00 a.m. to 5:00 p.m.), as well as during evening hours. If you find the door unlocked on a weekend, or at an odd time, use the allen wrench that is stored in the clinic director’s mailbox in 164, or the allen wrench kept in the therapists’ workroom to lock it, or call the campus police on the non-emergency number (742-3931). Normally, the janitorial staff will lock the external door after cleaning the clinic and security staff opens it on weekday mornings.

Clinic Copy Machine

The FTC has a copier for your personal use with 100 complimentary copies beginning each semester and additional copies at the cost of 5 cents per copy. You will be assigned a copy login number to gain access to the clinic copier, usually a 00 followed by your therapist phone extension number (i.e., 00999). If you use the initial copy allotment, you can pre-purchase additional copies. We ask that you pay in cash. Use of the clinic copier is a privilege; misuse or nonpayment may result in a loss of copier privileges.

Completing the Practicum Requirement

The MFT Program Manual outlines the specific requirements for completing practicum, depending on the type of degree you hold when entering the program. Please be familiar with your requirements. Once you have completed the necessary number of hours and semesters of supervised experience, first discuss your plans with your practicum supervisor, then with the FTC Director to elicit feedback on your readiness to leave the clinic. Beyond a set number of hours, you must demonstrate the ability to practice independently and must be able to articulate your theoretical approach to therapy and strategies for creating therapeutic change. Leaving the FTC is much more a function of readiness as determined by the MFT faculty rather than a set number of hours and/or semesters spent in the clinic. Once you have received permission to start an internship and/or leave the FTC, you must complete the Final Report of Client and Supervision Hours form. This form is to be completed by the student therapist, signed by the FTC Director, and submitted to the MFT Program Director for final approval. The form must be accompanied by appropriate documentation of hours, usually print-outs from the MCSR database. Once the form is approved by the Program Director, it will be placed in the student’s program file in the department administrative offices.
Clinical Procedures

Case Assignment and Scheduling of New Clients

Case Assignments

New cases will be assigned based primarily on a rotation basis. When new clients call the clinic to schedule an intake, they will be assigned to the next therapist in the rotation. The rotation will be followed unless: 1) the client requests a specific therapist or type of therapist (male/female, religious orientation), 2) a therapist indicates they are not accepting new clients, or 3) the client’s availability completely conflicts with the therapist’s availability. Keep in mind that new clients who call for individual concerns can often become couple or relational cases. All students enrolled in practicum (MFT 6395) are expected to keep an active caseload and schedule 8-10 clients per week, provided that the clinic caseload is sufficient to do so. The current ‘no show’ rate for intake appts. is 25%; thus scheduling 8-10 appts. per week will likely result in ~6 direct contact hours per week.

Scheduling New and Existing Clients

All telephone intakes and case assignments for practicum will be handled through the FTC staff, under the supervision of the Clinic Director. A professional relationship begins at the time of a client’s or referral source’s first call. From this perspective, the intake process is much more than a clerical activity. The intake call and any follow-up calls play a vital role in whether or not clients have a positive or negative experience with the Family Therapy Clinic.

In the Spring of 2011, the FTC purchased electronic software for scheduling and chart file management. The software is internet explorer based and called Advanced MD (AMD). You will be trained as to how to login, access the calendar and utilize the software for chart file purposes.

Most intake calls will be handled by the FTC staff. During the initial phone call, the FTC staff member will complete a Phone Intake Form to obtain basic information about the client and the nature of their concern. The FTC staff member will then access the next therapist in rotation and his/her availability on the Advanced MD Calendar. A 1.5-hour intake appointment will be scheduled for the client. All therapists actively seeing clients in the FTC are required to indicate at least one 3-hour block of time per week in which they can see new clients. This block of time should stay as consistent as possible throughout the semester. The more availability you provide on your calendar, the greater the chances of being assigned new intakes. Normally, clients will not be scheduled for the same day as the intake call unless it is determined by the Clinic Director and Coordinator that to do so is critical, and the therapist gives approval. Generally, the FTC does not take cases that are deemed to be of a suicidal emergency nature at the onset. Such cases are referred first to a local hospital emergency room or MHMR.

Once a case assignment and initial appointment is scheduled, the Clinic Coordinator will prepare a case folder. The folder will contain the necessary forms to open the case and the original FTC Phone Intake Record. In addition, each case folder will have a blank label for the client's name, therapist's name, and case number. The therapist should fill in this information AFTER the
client has attended the first appointment. A message will be left in the Advanced MD messaging center for the therapist and/or an email will be sent informing the therapist that a new case has been assigned. The office staff will reserve a clinic room for you to accommodate the intake (see below). The therapist will be responsible for contacting the client to confirm the scheduled appointment, preferably 24 to 48 hours before the appointment, and to make sure the client knows how to find the clinic. A map to the clinic and written directions are available on the clinic web site (www.depts.ttu.edu/hs/mft/clinical_services.php), or a hard copy can be mailed to the client. **Any phone contact with the client PRIOR to the first appointment should be noted on the Phone Intake form within AdvancedMD.** Once therapy has begun, use the Phone Contact Record described later in the manual. If a client fails to attend the intake appt. after two scheduled appointments, **return the Phone Intake form to the Clinic Coordinator.**

### Using Park-and-Pay Areas

Several parking lots on the Texas Tech campus use park-and-pay spaces for those without ePermits or ePermits specific to the lot. Some lots are park-and-pay Monday through Friday from 7 a.m. to 8 p.m., and others become park-and-pay Monday through Friday from 5:30 to 8 p.m. Signs will indicate the usage. Parking and paying can be accomplished in one of two ways:

**Pay by Cell Phone**
1. Park in a park-and-pay lot, and call 1-877-320-7275.
2. If you are a new user, you will be prompted to enter your vehicle’s information. Returning users will automatically be logged in by cell phone number.
3. The recording will ask for the location number of the lot (posted on a sign next to a pay machine) and the desired amount of time.
4. A text reminder will be sent before time runs out. Time may be added by text or call.

**Pay at a Pay Machine**
1. Park in a park-and-pay lot, and locate the pay machine.
2. Enter in your vehicle’s license plate number, and press enter. Make sure your plate number is correct.
3. Insert your credit card or coins.
4. Select the desired time by using the blue buttons.
5. Press the “Valid” button to complete the transaction. The receipt does not need to be displayed and is for your records.

**Cost**

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<tbody>
<tr>
<td>Hour</td>
<td>$1.50</td>
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<tr>
<td>Daily</td>
<td>$9.00</td>
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407 Flint Avenue │ Administrative Support Center, Suite 145
www.parking.ttu.edu │ (806) 742-PARK │ parking@ttu.edu
Phone Protocol with Clients

If you call clients from your personal cell phone, use *67 to block caller ID of your cell phone number. Do NOT give clients your cell phone #!! Direct them to call the clinic number for all scheduling needs (742-3074).

When a therapist calls to confirm the first appointment, he/she should determine who will be coming for services, verify that any minors will be accompanied by adults who can provide consent, give directions to the FTC, and remind the clients that the first appointment will last approximately 1.5 - 2 hours. Thereafter, sessions are usually 50 minutes in length (the FTC fee schedule assumes 50 minute sessions).

Sessions may be scheduled with beginning times from 8 AM to 8 PM Mondays through Thursdays, and with beginning times from 8 AM to 4 PM on Fridays. Friday evening appointments are strongly discouraged. Weekend appointments and/or appointments during clinic holidays are NOT ALLOWED. Many clients prefer evening appointments, and the FTC is busiest between 4 PM and 9 PM. Every attempt should be made by the therapist to schedule as many of her/his clients’ appointments during practicum to take advantage of the opportunity for live supervision by the practicum supervisor.

Room Reservations:
The clinic staff will manage the room assignments. If you need a specific room because of constellation or supervision purposes, contact the staff to make the appropriate change. Other than on evenings when practicum classes are meeting, or during your assigned cohort block(s), therapy rooms are available on a first-come, first-serve basis. Review the Advanced MD Calendar to determine which room your case has been assigned to.

On practicum evenings, students registered for that practicum receive preferential consideration for therapy rooms in the clinic. However, practicum students should still have their appts. on AMD. It is assumed that therapists will be flexible in changing room assignments to meet the space needs of practicum supervisors and/or other therapists.
The rooms are best utilized in the following manner:

**Practicum Rooms:**
- **Bay** – large families, Pinnacle/Studio Launcher
- **Raiderbugs** – children, Live Cam - webcam
- **Garden** – individuals and/or couples, Live Cam - webcam

**Non-practicum Rooms:**
- **Callie’s Cove** – individuals and/or couples, Live Cam - webcam
- **Windows** – couples or families, Live Cam - webcam
- **Cabinet** – individuals or couples, Live Cam – webcam

**Overflow Room Options:**
- **PFP Overflow** – ‘Red to Black’ room, Live Cam - webcam
- **Clinic Director office** – NO recording or observation
- **Clinic Coordinator office** – NO recording or observation

**Intake Calls and Scheduling by a Third Party**

When a caller wishes to schedule an appointment for a third party (e.g., a probation/parole officer, a social worker), the Coordinator will ask if the caller intends to accompany the other person(s) to the appointment. *If the caller does not plan on attending, the Coordinator requests that the client(s) call the clinic in order to schedule an appointment.*

Occasionally, the caller wants us to inform an agency mandating the counseling that an appointment has been made. Because of rules protecting confidentiality, FTC personnel may not give such a confirmation without a Release of Information Form from the client. The Release of Information Form can be completed and thoroughly explained during the intake process. Upon receipt of the signed release of information, the therapist may then call and confirm the appointment with the appropriate representative of the agency.

**Referral sources**

A substantial number of clients are referred to our clinic by agencies, other professionals, etc. Consequently, it is essential that we maintain good communication between ourselves and our referral sources. If a client was referred by a particular agency or professional, please let the Clinic Director know of the referral so that a thank-you card/email for the referral (without client names) can be sent. Most referral sources have an investment in the clients they refer and will want to know if their client contacted the FTC and attended the initial session. In some cases, a follow-up call may be requested. We cannot release any information until a Release of Information Form is completed and signed by the client or parent/guardian and a witness. If there is any question about the procedure for releasing information to other agencies or other professionals, the therapist should consult with his/her practicum supervisor.
General Information

Clinic Operating Schedule

The practicum experience is intended to match the functioning of a public service agency. Therefore, appointments are scheduled year-round. Semester breaks, summer sessions, and regular school holidays should have a minimal effect on the operation of the FTC. MFT students and practicum supervisors are expected to be available for new cases during semester breaks. The FTC will be closed over the Thanksgiving holiday, Christmas Holiday, New Year’s Day, Martin Luther King Day, Memorial Day, Independence Day, and Labor Day. Vacations for practicum supervisors and practicum students should be scheduled well in advance, and backup services for clients should be arranged. Student therapists are expected to take ‘normal’ vacation periods (7-10 days off, 2-3 times per year, with additional time at the Christmas-New Years holidays) with the permission of and coordination with the practicum supervisor and the FTC Director. A Vacation/Leave of Absence form must be completed and approved, preferably BEFORE travel arrangements are made. Additionally, therapists must inform their active clients of their leave and identify who will be covering for them during the absence. Therapists must also change their outgoing voicemail message to reflect this same information. To change the outgoing message, see Therapist Voicemail System on page 24.

Security and Safety Issues

Therapists and supervisors need to stay alert to security issues. It is unwise for therapists to be alone in the clinic in the late evening. As a general rule, therapists who must be in the clinic alone or who are concerned in any way about safety issues are responsible for arranging for another therapist or a supervisor to be available during such appointments. In turn, FTC personnel and students need to be willing and flexible about providing such security services for their colleagues.

Fee Schedule and Collection

Texas Tech University provides partial underwriting of the costs of maintaining the FTC. This allows the FTC to provide services at reduced fees for clients who cannot afford to pay the full fee of $70.00 per session. Fees for services from $10.00 - $70.00 per 50 minute session are negotiated between the therapist and the client during the first session (which is free to all clients), and are set based on the current FTC Fee Schedule. If a client indicates they are unable to pay the designated fee based on their income and number of dependents, the therapist must consult with their supervisor and/or the FTC Director for fee reductions. Upon final fee determination, the client must sign the Fee Agreement form. Any fee request for under the $10.00 minimum must receive the permission of the FTC Director before a fee agreement can be entered between the therapist and her/his client. On occasion limited “no fee” arrangements are made for those clients needing special consideration due to the client’s inability to pay.

Clients must pay for services at the time of their appointment, using check or cash. Checks are to be made payable to the "TTU Family Therapy Clinic." A receipt (titled Clinical Service Record) is to be completed in triplicate by the therapist. The original (white) copy is given to the client,
the second (yellow) copy is to be paper-clipped to the check or cash and deposited in the safe located in the therapist workroom. The third (pink) copy is kept in the case file on the right side of the file.

Clients must be told explicitly that missing an appointment without notifying the therapist 24 hours in advance will result in the session fee being charged for the missed appointment. The client must sign the bottom of the Fee Agreement form to indicate that she/he has been informed of this policy. Waiving the fee for a missed appointment is the prerogative of the FTC Director. If a client does not pay for a session, the missed fee must be collected prior to the following session. Write a receipt for ‘no shows’ unless it is an intake appt.!!!

Issues about fees and billing procedures should be explained to the client by the therapist during the first session. Research indicates that clients who are most likely to sue for malpractice or unprofessional behavior are those who have been allowed to run up considerable bills with the therapist. Therefore, it is a wise general policy to collect fees in a timely fashion. If a client fails to pay his or her fee for more than two weeks in a row, this needs to be discussed with the supervisor.

Insurance Claims

At this time, the FTC does not accept third-party payment from insurance companies for any services rendered in the clinic, nor will FTC personnel assist clients in filing for insurance plan reimbursement for services rendered in the FTC. Most insurance carriers require that the therapist providing services to clients MUST be a licensed mental health provider in the state in which they are practicing. Most student therapists in the MFT program do not meet this requirement for practicing marriage and family therapy in the State of Texas, and therefore are ineligible to file insurance claims.

Facebook Policy

Remember that you are functioning in a professional role as a therapist-in-training. How you handle yourself in public or online is an extension of your professional identity, the MFT program, and the FTC. Do NOT ‘friend’ yourself with clients, past or current, on your Facebook account. It is your discretion as to what pictures or status updates you attach to your Facebook account, but keep in mind that employers/internship site directors might seek out your information online in determining placement and/or hiring decisions. Do NOT make status posts which reference any session information, even if the information doesn’t seem to violate confidentiality/anonymity of clients (e.g. I just had the worst family therapy session EVER!).
Client Records and Therapist Files

All MFT practicum students will maintain and store active client records in the therapist workroom. Case records contain confidential information, and care must be taken to preserve client privacy. The file cabinet(s) housing case records must be kept locked when not in use. *Case records (including digital recordings) should not be taken from the FTC administrative offices except for use in therapy rooms or to meet with a supervisor.* Files must be returned immediately after use.

In the case of “off-campus” clinical sites where the sessions are videotaped with portable camcorders, the student must keep all recorded material in their possession at all times until she/he can return to the FTC facilities and lock up all recorded material in the filing cabinet/storage areas designated for such purposes.

Session recordings and client records are the property of the FTC, and are not to be removed from a secure area without permission from the FTC Director. To protect client privacy, MFT faculty, student therapists, and FTC staff must make every effort to keep file cabinets locked, to keep the office, therapist workroom, and clinic rooms locked when not in use, and to exercise care when moving confidential materials from one area to another.

It is important that case record information be as accurate and complete as possible. Update the client's current address, telephone number, and other personal information whenever they report changes, and/or verify that the information we have is still current when therapy extends beyond three months.

**Case notes for each session should be completed immediately after a session to obtain the greatest accuracy; however, case notes must be completed within 24 hours.** Be sure to complete the case note for any client seen on a Friday before leaving for the weekend. Case notes should be typed within AMD located in the client’s electronic file under the Chart File tab. Case notes are discussed in detail on page 25. The practicum supervisor is responsible for monitoring records to ensure that information is timely and accurate. Be prepared for your supervisor to audit your electronic chart files to verify that case notes are complete and up to date. There is a mechanism within AMD which documents the date in which the case note was created.

It is not unusual for the FTC to receive legitimate inquiries from outside agencies and other professionals years after services were delivered and the case closed. Without accurate records of sessions and case notes for each session, we have no way of supplying the information required. Similarly, if a client returns for additional services 2-3 years after an initial round of therapy, it is unlikely that the original therapist will be seeing that client. It can be of immense value to the new therapist to have access to client information and complete case notes. For these reasons, the FTC will archive all case records for at least seven years. Client records are kept for seven (7) years, after which the paper file will be destroyed. Digital recordings of therapy sessions are deleted on a monthly basis unless they are intended for use for quals.
Recording Therapy Sessions

The FTC furnishes recording equipment for use in the clinic. While a case is open, the therapist will be responsible for recording each session. When a case is closed, all paper case files will be given to the Clinic Coordinator who will set up and archive the paper file within AMD.

Digital recordings of sessions contain confidential information and are to be treated like the case file. Editing of recorded therapy sessions should be done on campus and flash drives containing quals-related sessions should be stored in the student room.

Obtaining and Releasing Client Information

The exchange of information between professionals and agencies is often a critical part of therapy services. Appropriate Release of Information Forms must be obtained by the therapist to give or obtain ANY information about a client. To share information with another agency/professional, the Release of Information form must be completed by the therapist and signed by the client (or parent/guardian if the client is a minor). If you are seeking information, the release should then be sent to the agency with a cover letter signed by the student and his/her supervisor. Be specific about the information you are requesting—test results, diagnosis, prior therapy history, etc. In general, do not request an entire case file. Keep a copy of the letter and completed Release form in the client’s folder.

If you will be releasing information to a third party, the same Release of Confidential Information form must be completed by the therapist and signed by the client(s) (or parent/guardian if the client is a minor). Be specific about what information will be sent to the other agency/professional—a list of sessions attended, a general summary of progress in therapy, etc. In general, we do not release the client’s entire case file. If an entire file is requested, first offer to share a written case summary. In the event that any information is requested from an outside agency, see your practicum supervisor for assistance.

It is not uncommon for the ‘client’ to be a couple or family. An appropriate Release of Information Form must be obtained for each individual who is named in the record. Both members of a couple must consent to the release of information regarding conjoint therapy. From time to time, attorneys or judges request information from Clinic files. NO INFORMATION IS TO BE RELEASED WITHOUT THE EXPRESS CONSENT OF THE SUPERVISOR AFTER CONSULTATION WITH THE TTU ATTORNEYS.
Terminating a Case

A case may be closed by either terminating the case (i.e., active therapy is discontinued) or by transferring the case to another therapist. The Termination Sheet should be completed by the therapist and signed by the supervisor before being placed in the client folder on top of the case notes. The folder is then turned into the Clinic Coordinator for archiving. Clinical procedures for terminating a case are discussed on page 30, Closing a Case. Archived cases will be maintained by the FTC for a minimum of seven (7) years.

Transferring a Case to Another Therapist

The Transfer Sheet should be completed when a case is to remain open and is being transferred from one therapist in the clinic to another. This sheet is to be signed by both sets of therapists and supervisors. A copy of the form is to be given to the Clinic Coordinator so the new therapist can be noted in the database; place the original in the case folder on top of the receipts. All subsequent receipts will be placed on top of the form that will act as a divider between the work of the therapists.

Please note: Each opened case in which one or more therapy sessions occurred must be reviewed by a supervisor before it is closed. If a case is closed prior to any sessions occurring, attempts to engage the client in therapy must be reflected on the Phone Intake form or Phone Contact Record.

Case Constellation Changes

Opening a new file from an existing file constellation (e.g., IT > CT, CT>IT), requires prior approval of the practicum supervisor and contact with the Clinic Coordinator for documentation purposes in the client database. Individual session notes should NOT be included within a ‘couple’ constellation file or vice versa!! In the event you have documented a session note within a chart of the wrong constellation, see the Clinic Director to make the correction to the chart file.

Managing Client Absences

Client absences are a matter to be dealt with by the therapist and the practicum supervisor. The supervisor may establish a general policy or choose to deal with client absences on a case by case basis. The therapist needs to keep her/his supervisor informed of client absences so that appropriate action can be taken.

When a client fails to arrive for the initial session, the therapist should consult her/his supervisor. The therapist should make a reasonable attempt to contact the client to verify whether or not he/she still wants to engage in therapy. Such attempts should be documented on the Phone Intake in Advanced MD.

Established clients should not be allowed to terminate therapy by 'disappearing' after several failed appointments. It is a sound policy, in general, to make several attempts to contact the client by telephone before sending a final letter stating that their file will be closed unless they
contact the therapist. **Attempts to contact the client must be documented in the case record.** Clients not seen for 60 days are considered inactive and should be terminated following the procedures outlined in the manual.
Monthly Clinical Service Report (MCSR)

Client contact hours and supervision hours are documented in two ways to ensure that students get proper credit for their work:

1. The Clinical Service Report ('receipt'). Client contact hours and payments are documented using this form. Fill one out for every session, even if the client does not pay. Use the bottom of the receipt to schedule the next appointment. For further instructions on completion of receipts, see page 28.

2. Monthly Clinical Service Report (MCSR) form. Client contact hours and supervision hours are documented on the MCSR. There are separate versions of this form for practicum hours, internship hours, and alternate hours. This form should list contact hours for each case, hours of individual supervision, and hours of group supervision for the month. Except when the FTC is closed, a MCSR must be filed for each month, even if no cases were seen. Bring this completed form to your weekly individual supervision meeting to review with your supervisor. After the practicum supervisor reviews and signs the report, the student makes a copy of the report for herself/himself, giving the original to the FTC Director for processing. The FTC Director will review and sign the form, and will forward it to the FTC clinic coordinator who will enter the hours into a computer database and file the original. Every site at which the therapist accumulates client contact and supervision hours (FTC, contract/grant practicum, alternative experiences, and internship sites) MUST be documented via its own MCSR with all appropriate signatures in order for the hours to count toward program completion. Electronic copies of the practicum MCSR, internship MCSR, and alternate hours MCSR are available on the M:Drive under ‘Manuals and Forms’ folder. Students are strongly encouraged to use the electronic form and personalize it with their name and the name of their current practicum supervisor. Typing in as much information saves time and prevents possible mistakes due to poor handwriting.

Keep up with your MCSR’s. MCSR’s that are excessively late (more than one month) may be rejected at the discretion of the practicum supervisor and/or FTC Director, which means the hours will not be counted towards the program requirements for graduation.

Alternative Hours Policy

Up to 60 hours (MA) or 100 hours (Doc) of your 150 (MA) or 250 (Doc) practicum hours; may be counted as alternative therapeutic contact hours. Teaming hours accrued during your designated practicum do NOT require prior approval and are recorded on the Alternative MCSR. Leading a therapeutic or psychoeducation group OR following a case that is NOT within your practicum cohort are examples of hours that require approval by your faculty supervisor prior to the experience. These alternative hours must be systemic, interactional, and add diversity to your experience. (see Alternative Hours Activity Proposal form-located on M:drive under Manuals & Forms folder; Supv related forms)
Therapist Vacations and Absences from the Clinic

Vacations, illnesses, attendance at professional meetings, and other absences from FTC duty should be handled in a professional manner to ensure that proper care is provided to clients. If possible, the therapist’s supervisor should be notified of any absence well in advance, a backup therapist should be identified, and clients should be notified of the therapist's impending absence and informed of who will be covering their calls during the absence.

For any scheduled absences:

a. Obtain the practicum supervisor's approval for the time away in advance, preferable before finalizing travel plans.

b. Make arrangements for one of the other students to cover cases for the period of the absence, including checking your voicemail daily and responding to any messages. Provide the back-up therapist with a phone contact record to document any messages and how they were handled.

c. Complete the Vacation/Leave of Absence form, have the supervisor sign, and return to the Clinic Director, giving the dates of the absence, the name of the therapist providing backup coverage, and telephone numbers where the therapist can be reached for emergency consultations.

d. Notify each active client of the expected absence, telling the client who will be providing backup coverage, and ensuring that each client has the FTC phone number.

e. Before leaving, remind the backup therapist of the impending absence, making sure she/he also has emergency telephone numbers, and making sure that she/he and the practicum supervisor are aware of any clients who may be calling in with emergencies.

Case Assignment Suspension Form

If a therapist has an active, consistent caseload and does not wish to receive new intakes, the Case Assignment Suspension Form must be completed and turned in to the Clinic Director. There are numerous reasons that a therapist may wish to suspend case assignment, all of which must be discussed with their current practicum supervisor and/or the Clinic Director.
Therapist Voicemail System

The FTC utilizes a voicemail system to ensure proper coverage for clients and staff. Each client should be given the clinic business card with the FTC number (806-742-3074) and the therapist’s name and extension number. Supervisors and FTC staff will use the voicemail system to leave messages for therapists. New students will be assigned a voicemail extension when they become active in the clinic. Once a voicemail extension has been assigned, therapists must set up their voicemail with an outgoing message that includes their name, extension number, normal times for returning messages, and emergency procedures. New voicemail boxes are usually set up with a password of 0000; you will be prompted to change the password when you access it the first time. Please make note of your password; if you enter the wrong password three times, the phone system will “lock” the mailbox, and only Communication Services can reset it.

Voicemail Instructions

To change your outgoing voicemail message, follow these steps:

Access your voicemail box and enter your password.
Choose #8 (Change your mailbox options)
Choose #2 (Record or select your personal greeting)
Choose #1 (To record a greeting)
Choose #1 (To record your primary greeting, or # 2 to record your alternate* greeting)

Follow the prompts to record your greeting. In your primary greeting, be sure to include your name, extension #, and a directive to 911 if the call is an emergency and/or to go to the emergency room. It is also helpful to clarify when you normally return messages (i.e., at the end of the day).

After recording your greeting, you must go back through the system to choose which greeting to use (primary or alternate).

*Use the alternate greeting for when you are away from the office. Include the same information as the primary greeting, but also indicate when you will return and identify the person covering for you (and their extension #) during your absence if applicable. After recording your alternate greeting, you must go back through the menu system to choose the alternate greeting. Don’t forget to switch back to your primary greeting when you return.

To check your voicemail from off campus:
Call your extension through the main clinic number (742-3074) or back line (742-0421), and press **. This should prompt you to put in your extension number and password, followed by the # sign. Press 2 to hear new messages, 6 to listen to old messages, 8 to erase, etc.

Therapists are responsible for checking their voicemail regularly, at least once every morning and once in the early evening to ensure that non-emergency messages can be addressed in a timely and appropriate manner.
Case File Forms

Forms Required to Open a Case

*Phone Intake Form.* Instructions on completing this form are reviewed on page 12, in the section entitled *Scheduling New Clients.*

Forms to be Completed at the Initial Session

*Informed Consent*

The first form that should be completed with the client is the *Informed Consent,* which is used to obtain agreement from the client for treatment in the FTC. During this time, therapists should review the limits of confidentiality and general policies of the clinic. All participants in session must sign the informed consent in order to receive therapy services. A legal guardian or parent must sign for any minors. Once the informed consent has been signed, digital recording can begin.

Clients should be given a copy of the Informed Consent for their records. Two (2) copies of the Informed Consent form are included in a new case file for this purpose. The copy which includes the signatures of all participants should remain in the case file, on the bottom of the left side of the folder. The *client copy,* which consists only of the text of the consent (i.e., no signatures) should be given to the client for her/his personal safekeeping.

*Research Participant Consent Form*

As a teaching facility, part of the mission of the FTC is to further the program and MFT field through research. In order to include a client’s information in research projects, they must sign the *Research Participant Consent* form. The therapist must explain to the client that donating their information to the research database is voluntary, and that only non-identifying information will be included for study. Ensure clients that they will receive therapeutic services regardless of whether they decide to donate their information to the research archive. Similar to the Informed Consent, there are two copies of the research consent form, one for the case file and one for the client’s records.

*Fee Agreement*

The fee agreement should be negotiated next using the *fee schedule* provided by the FTC Director. Fees in the FTC are based on a “sliding fee” scale, ranging from $10.00 - $70.00 per session. Negotiations with clients for fees less than $10.00 MUST be approved by the FTC Director before a new *Fee Agreement* is signed. Usually fees negotiated below $10.00 are established for a limited number of sessions after which an assessment of financial need is made by the therapist and the director. On occasion, the director may contract with certain parties to provide a limited number of sessions at no charge. You will be informed of these agreements when you receive the Phone Intake from the Clinic Coordinator. Fees should be collected at the
end of each session.

The Fee Agreement form also outlines the clinic cancellation policy. Please review this policy with the client and use this opportunity to discuss procedures for contacting the therapist.

Assessment Packet/Data Collection

For clinical purposes, clients are required to complete the Assessment Packet information during the first session, after the Informed Consent Form, Research Consent Form, and Fee Agreement are completed. The Assessment Packet takes about 20 minutes to complete; remind clients to not discuss their answers with each other. During this time, the therapist should remain in the room with the clients or in the observation room while they complete the packet to answer any questions or clarify the instructions. Once the clients are finished with the Assessment Packet, the therapist should make sure that all of the measures have been completed while also reviewing the client’s concerns and questions regarding harm to self or others. Follow-up assessment packets are also completed during the 5th session, the 10th session, and at termination of services.

Currently, Dr. Smith and Dr. Whiting are conducting a structured IPV protocol research project. All adult couples that present for therapy (whether as a couple or part of a family) are to be screened at the beginning of the first session. The therapist will meet individually with each partner to conduct the screening using the IPV Assessment interview protocol. If a member of a couple or family indicates that physical violence is a concern, the therapist will proceed as follows.

I) This will apply when violence is reported by any couples or parents you see during intake OR if violence is reported at a later date for any ongoing case.

TWO – 2 HOUR SESSIONS WILL BE REQUIRED FOLLOWING REPORTED VIOLENCE. The sessions will be facilitated by the assigned therapist and a co-therapist.

a. When scheduling the 1st 2-HR SESSION, the office will need to assign a co-therapist.
b. The office staff will select a 2-HR BLOCK based on your clients’ schedule and the co-therapist’s schedule.
c. You will drop the Receipt in the designated (IPV) mailbox in the clinic admin office. The 2-HR appt. will be written in the shaded area on the receipt (as usual) and then you SELECT ((IP-1) (or (IP-2) to specify which 2-HR SESSION (1st or 2nd) has been scheduled). The office staff will enter/reserve rooms in AMD for the 2-hr sessions.
d. When completing the receipt for the 2-hr sessions, specify the constellations used during the 2hr block.
   EX. (1) – Individual Therapy and (1) – Couple Therapy OR (2) - Individual Therapy
   NOTE: you will only charge the couple their regular fee for one hour of service total and submit ONLY one receipt for the case file.
e. There will be an ‘appt type’ in AMD to classify these sessions and they will be colored PEACH.
If a client indicates having suicidal thoughts, the therapist should assess the lethality of the thoughts by asking if the client has any previous suicide attempts, a plan, the means/tools to carry out their plan, feelings of hopelessness, etc. A safety plan and emergency procedures should be explicitly reviewed with the client and documented in the session case note. If applicable, a Suicide Prevention Contract should be completed, giving one copy to the client and saving a copy for the case file.

The completed Assessment Packet must be submitted to the Clinic Coordinator for scoring. The packet contains several measures that can be useful in opening conversations with clients about their concerns and formulating therapeutic goals. A guide for interpreting the output of the assessment packet is available through the clinic office.

If a client has difficulty reading, the therapist may verbally administer the assessment packet. Therapists are strongly encouraged to be sensitive to such issues. Having clients complete the Assessment Packet after the session, or sending it home with them, is strongly discouraged.

**LONGITUDINAL DATA COLLECTION:** We are collecting data from ongoing clients at SESSION 5, SESSION 10 AND TERMINATION!

- **a.** In coordination with the office staff, you will need to be attentive to when the 5th and 10th sessions are approaching. There is an ‘INSTRUCTION’ feature within the AMD calendar to serve as a reminder (cursor over appt. to view). The staff will enter the ‘instruction’ reminder for the 5th/10th scheduled session when assessments are due.
- **b.** Tell your clients to arrive 15 minutes early to complete their assessments. Reception staff will administer the assessments to your clients when they arrive, UNLESS reception staff is not available. Packets will be placed in the client paper file, in the event reception staff are not available during your scheduled appt.
- **c.** Turn in completed assessments in the regular ‘assessment’ drop box in the admin office.
- **d.** If that session is a ‘no-show’, cancelled or re-scheduled, you need to message Ashlee or Cody so they can add the ‘INSTRUCTION’ reminder to the newly scheduled 5th/10th session.
- **e.** For TERMINATION sessions, you will be responsible for collecting data b/c you will be the only one who will be aware of the possible termination.
Forms to be Completed after Each Session

Clinical Service Record Form / Receipt

The Clinical Service Record is an important document that provides a receipt for the client and the FTC. It also provides the FTC with information needed to accurately record data for each case and on each therapist (direct client service). Its use permits us to monitor variables necessary to service our contracts and to satisfy the range of reports required by AAMFT. Of great importance to students is that the data compiled from this form will be one of the sources of documentation for their clinical and supervision hours. Completion of practicum is partly based upon the number of hours reflected in the clinic's records derived from these forms and from the MCSR’s. Information recorded on MCSR’s should match the information recorded on the Clinical Service Record / session receipt.

It is important that the information required on the Clinic Service Record / Receipt be accurate and complete. Complete all fields on the receipt as follows:

- **Case #:** enter the correct case number in the box provided
- **Date of Service:** enter the date of the session
- **Name:** enter the client(s) last and first name(s)
- **Therapist's Name:** first and last name of primary therapist
- **Constellation / HRS:** enter the amount of time spent in the session beside the correct constellation (individual, couple, family), usually 1.0
- **FEE:** enter the negotiated fee ($10.00 - $70.00) (there is no charge for the first session)
- **AMOUNT:** enter the total amount calculated for this session (HRS x FEE = AMOUNT)
- **Current due:** this is the total amount due for all constellations of this client seen on this date. This will normally be equivalent to the AMOUNT value calculated above. However, in the unusual event the therapist spent one (1) hour with a couple and a subsequent (1) hour with the couple and their family on the same day, the total for both sessions would be added to become the Current due amount. **Fill in this line whether or not the fee was collected.** Note: FTC fees are based on 1 hour increments. If an agreement is made with the client that the session will go longer than one hour, then the AMOUNT is pro-rated based on the negotiated fee.
- **Previous Balance:** this is the amount the client owes from past appointments or no-shows. Fill in 0 if the client's balance is current. Show a positive (credit) balance in parentheses, e.g., (20.00).
- **Amount Paid:** this is the amount paid by the client. It may be less than (partial payment), equal to (full payment for the session), or greater than (payment for previous session or payment to be put on account for future sessions) the negotiated fee. You must indicate via the checkboxes whether payment was by cash or check. If paid by check, enter the client’s check number where indicated.
- **Balance due:** subtract ‘amount paid’ from ‘current due.’ ‘Balance Due’ will be $0.00 if the client is current on payments and pays for the session at the established rate. ‘Balance Due’ will be a positive dollar amount if the client does not pay for the full amount of the session and has no credit to apply. If the client pays extra for future sessions, write ‘credit’ by Balance Due. Collect fees after every session. If a client has not paid for two
consecutive sessions, the issue must be addressed with the supervisor, including a plan to help the client pay up their account.

- Your next appointment is for: enter the date, time of day, and circle the day of week of the next appointment. In general, it is best to schedule clients for the same day of the week and same time of day for follow-up appointments. Any change in schedule makes it more likely that the client (or therapist) will miss a session.
- Clinicians: Enter your therapist number on the appropriate line. If there is a co-therapist on the case, enter her/his number, and the number of your current practicum supervisor.

The **white** copy of the Client Service Record should be given to the client as a receipt and as a reminder of the next session. The **yellow** copy should be placed in the safe along with any payment. The **pink** copy should be attached inside the case file folder, on top of the case note for the session.

If you make an error on the Clinical Service Record, correct the error on the form and date and initial the correction, or write 'void' across the form and use another. Voided forms should be immediately shredded using the document shredder in the clinic office. **A Clinical Service Record should be completed and turned in for every session with a client, whether or not funds are collected.** The client's payment (cash or check) and the associated Clinical Service Record (yellow copy) should be folded and paper clipped together (NEVER STAPLED!) and slipped into the safe located in the student work area. CASH OR CHECKS SHOULD NEVER BE TAKEN HOME. Deposit the money and yellow copy of the Clinical Service Record in the safe immediately following the session.

**Case Note Template**

Case notes should preferably be completed immediately following the session; however, the form **must** be completed within 24 hours of the session. All notes for Friday sessions should be completed on Friday, before leaving campus for the weekend. A well-written case note allows the therapist to quickly review previous sessions, keep track of tasks, and check up on tasks assigned to clients. Good case notes permit a supervisor to quickly and easily pick up on a case or a subsequent therapist to understand previous interventions. Accurate, complete, and up-to-date case notes are absolutely essential to protect our liability in the case of legal involvement. The Case Note template may be found in the Advanced MD system under the ‘Chart Files’ tab. Additionally, the following guidelines should be used when composing case notes:

1. Case notes should be typed. Other documentation, such as records of phone contact are available within the AMD system.
2. Document the date and session number on the top of each progress note.
3. Exclude any names in the various sections of the progress note; use Ct. to refer to the client or refer to session participants according to the role they play in the family (e.g., wife, husband, daughter).
4. Always select your name from the ‘drop down’ for your electronic signature and include the date.
5. Complete progress notes within 24 hours after a session; case notes from Friday sessions must be completed before leaving for the weekend.
6. All progress notes are located in the ‘Chart Files’ tab within the electronic client file.
7. Do not keep loose papers and post-it notes in the file; remove such items before turning in a case for termination. Copy pertinent information onto appropriate forms for archive purposes.

**Treatment Plans**

*Treatment plans* (located under the Chart Files tab, templates) are required for all clients who attend 3 or more sessions. You are encouraged to work on the treatment plan during the second session with your clients, when possible. Make sure all fields are completed, including the Axis I-V diagnostic criteria. For Axis I-V codes are often applicable when working with couples and families. Axis II – is often noted as 799.9 deferred, except in rare cases. Axis III includes any medical diagnostic information. Axis IV includes all psychosocial stressors including but not limited to: unemployment, CPS involvement, probation or other legal matters, separation/divorce, and other social factors. Axis V is a subjective classification of level of functioning based on a 100 point scale (see DSM V).

**Forms Needed to Close a Case**

*Case Termination Sheet*

The *Termination Sheet* is to be completed when the therapist and practicum supervisor are agreed upon a decision to close the case. A case may be closed because the therapeutic goals are complete, the client has dropped out of therapy, was referred out to another provider, or completed the mandated number of sessions. If a client drops out of therapy, the therapist must make several attempts to re-engage the client in therapy. These attempts must be documented in the file, most likely on the phone contact record. Once the termination form has been completed it must be submitted with the case file to the individual supervisor. He/she will review the case and sign this form if all paperwork is completed. The signed, completed form should be placed on top of the receipts on the right hand side of the paper file folder. Terminated cases should be turned in to the Clinic Coordinator, or placed in the Closed File drop box located in the admin workroom. Corresponding recordings should be deleted from the server.

*Case Transfer Sheet*

In the event a case is transferred from one therapist to another, the *Case Transfer Sheet* is to be completed. The signature of the current supervisor, current therapist, new supervisor and new therapist are mandatory.
Additional Case Record Forms

*Case Review Form*

The *Case Review form* is to be completed by the individual supervisor within Advanced MD under the ‘Custom Tab’ within the client file. The supervisor will be logged into AMD during supervision meetings. **Please note:** Completing the Case Review form is documentation that the case has been reviewed by a supervisor. Insist (remind) the supervisor to complete the form each time the case is observed live or viewed from a digital recording.

*Telephone Contact Record*

Use the *Phone Contact Record*, located under the ‘Custom Tab’ feature, to document attempts to contact the client(s), calls to agencies or other professionals, and any other brief calls made or received regarding the case. Telephone contact of a lengthy manner (more than 10 minutes) or significant content requires a case note to be completed to document the necessary details of the telephone conversation. Additionally, responses to emergency calls should be recorded on a case note. Telephone conversations with clients over 20 minutes in duration should be discouraged and a face-to-face session should be scheduled. **Phone therapy is not an option due to complications regarding confidentiality, supervision and fee collection.**
Outreach and Training

‘Great Start’ Pre-Marital Workshops
The Family Therapy Clinic is an ongoing sponsor of the ‘Great Start’ Pre-marital workshops which are held on a monthly basis (with the exception of May and December). All new students will be trained as a ‘trainer’ to conduct these workshops with a team of peers. The workshops are held on a Saturday from 8am-4pm. Student therapist will be able to accrue 8 relational group hours under the ‘Alternative’ hours category. The curriculum is very interactive and a great experience for learning to work with couples and acquire hours at the same time.

Family Therapy Symposium
Each year the Family Therapy Clinic is the host of a continuing education event for professionals in the community who are licensed as LMFT’s, LPC’s, LCSW’s and Psychologists. Student participation/attendance is strongly encouraged. This is a great opportunity to get to know some of the local agency clinicians who provide mental health services and network with potential future employers.

Community Outreach & Trainings
On occasion, the Clinic Director will organize information sessions to assist students in the clinic with certain clinical training needs (e.g., child abuse reporting, suicide assessment, community referrals, etc.). These mini-trainings are designed to help student therapists to expand their clinical skills. Attendance is voluntary but strongly encouraged when schedules will allow.

In addition, the Family Therapy Clinic is often contacted by community entities to provide information sessions to a particular group/audience. These opportunities might include a general overview of the services provided by the FTC or might address a specific topic area that is aligned with the type of services we provide. This is another way in which students can build community relationships which enhance the referral sources for the FTC and facilitate contact with key agencies for externship/internship placement opportunities.
CRISIS INTERVENTION AND EMERGENCY PROCEDURES

Potential clients who call while in the midst of a crisis (actively suicidal with a plan, or homicidal) should be referred to a hospital emergency room (preferably Covenant because they have an inpatient psychiatric unit), or the police should be notified. It is unwise to attempt to provide more than brief telephone counseling and referral to a service that is equipped to deal with such a crisis.

If an established client calls the FTC requesting immediate services, the client should be advised that the FTC will attempt to reach the client's therapist immediately and have the therapist call the client. However, the FTC is NOT a crisis center and does NOT provide 24-hour response services. Therapists must keep their contact information up-to-date with the clinic, and should identify a back-up person if they will be out of town. If the therapist is not available to handle the crisis, the FTC Director and/or the practicum supervisor will be notified and will respond to the client. The Director / supervisor will assess the situation, and he/she will take whatever action is necessary.

If there is any indication that a client might harm herself/himself or others, or if the situation presents possible ethical/legal concerns, a supervisor is to be contacted immediately.

AT NO TIME SHOULD A THERAPIST GO TO A CLIENT’S HOME, MEET A CLIENT AT THE HOSPITAL OR OTHER LOCATION, OR TRANSPORT A CLIENT.

If a crisis develops in the course of a therapy session, the therapist should contact the practicum supervisor, if available, or the FTC Director. If neither the supervisor nor FTC Director is on-site, the therapist should involve another student to reach the FTC Director. If there is a concern for the physical safety of the therapist, the client, or others, the Texas Tech University Police should be called (9911) at once. All therapists should be familiar with the emergency procedures outlined in the manual.

Except on occasions of absence, the FTC Director is the emergency backup supervisor in situations where the therapist’s supervisor cannot be located. Contact the FTC Director on her personal cell number; which is posted on her office door!
Clinical Emergencies

Certain clinical situations require immediate action from the clinician. The student therapist must be prepared to deal with these situations should they arise in the Family Therapy Clinic. You must act immediately if you have reasonable grounds to suspect or conclude that the following conditions exist:

(A) Current or ongoing sexual or physical abuse of a child, an elderly person, or a disabled person
(B) Current or ongoing relational violence between partners
(C) Intoxication of a client
(D) Suicidal threats or gestures
(E) Client in acute need of psychiatric hospitalization (due to hallucinations, suicidal intent, etc.)
(F) Homicidal intentions or threats of physical violence towards others

There are two general rules to remember:

1. Act to protect any actual or potential victims, including the client and yourself.

2. Involve another person at once—this means,
   (a) your supervisor in the building
   (b) another supervisor in the building
   (c) the FTC Director (CELL: 281-989-8640)
   (d) your mentor or another therapist
   (e) TTU police (9-911 emergency, 742-3931 non-emergency)

Determine if there is an immediate risk of violence or of the client(s) leaving. (See protocol on page 35). If you have been threatened or feel threatened, do not go back into the therapy room by yourself, wait for help. Remember to take your keys when exiting a therapy room for any reason.

Current or Recent Sexual or Physical Abuse

MFTs have an ethical and legal obligation to report physical or sexual abuse. If you question whether or not an incident is reportable, engage your supervisor at once to help make the decision. If you decide that a report must be filed:

1. Explain that a report about the abuse or suspected abuse must be made, as required by law and ethical guidelines.

2. Ask the client(s) if they would like to make a report first; self-reporting empowers the client. Let the client know that you will be reporting regardless of their decision to report. Inform the client of the reporting process.
3. If the perpetrator is in the home, call CPS (1-800-252-5400, Child Abuse Hotline in Austin). You may also file a report online at www.txabusehotline.org.

4. If the perpetrator is not in the home, this becomes a police case. In Lubbock, call the Lubbock Police child abuse specialist, (775-2436, or 9-911) or Lubbock County Sheriff’s Department (Wayne Casey, 767-1441) for persons who live out of the city limits.

5. Explain who you are and either describe the situation or let the client do so.

6. Find out what CPS/Police want to do: come for interview, send family home, wait for immediate investigations, etc.

7. Confirm and document the CPS/Police instructions and plan for the clients. Make a note of the CPS case number and document the number in your case notes.

8. Be prepared to deal with the family's anger and distress. You can still act as therapist, explain likely procedures, and help them prepare for the investigation and what happens later. Use the other therapist or supervisor to help the family process events as they occur and afterward.

9. If client becomes threatening or belligerent, call your supervisor, clinic director, and/or the TTU police (9-911, 742-3931).

**Intoxication**

Similar to relational violence, it is unethical and not helpful to conduct a therapy session if the client is under the influence of a substance. If you suspect that a client is under the influence of a substance, refer to the portion of the Informed Consent form that outlines our policy on such issues and:

1. State that you can see the client is intoxicated, drunk, high, or whatever (i.e., do not ignore), and that you cannot proceed with therapy unless everyone in the room is sober.

2. State that intoxicated client cannot drive him or herself home, i.e., must be driven home by someone (if available, someone at session).

3. Offer to help find someone to pick up intoxicated person, such as a spouse, relative, friend, taxi cab, or the police.

4. If a client threatens to leave anyway, explain that you must call the police.

5. If client does leave, call the police (9-911). Explain who you are, what you have observed, and give any information you have: Name, address, condition, car description, license number (if available), and likely destination.

6. If client becomes threatening or belligerent, call the TTU police (9-911, 742-3931).

7. Carefully document interaction with client and the steps that were taken to ensure everyone’s safety.
Suicidal Ideation

Suicidal ideation is a common symptom of depression, but the lethality of the ideation should always be assessed. Consider all expressions of "wanting to hide," "wanting it all to end," "wanting to run away," "crawl in a hole and die" as carrying the potential for suicide. Check the appropriate Assessment Packet items regarding suicidal ideation and ask questions such as the following to further assess the lethality of the suicidal ideation:

1. "Have you been thinking about hurting yourself or committing suicide?"
2. "On a scale from 1 to 10, how likely are you to hurt yourself?" *(Anything over a 5 suggests a formal evaluation is necessary)*
3. "Do you think about ways to hurt yourself or commit suicide?"
4. "Have you tried to end your life before?"
5. "Do you have a plan?"
6. "When would this happen?"
7. "What would happen then?"
8. "Do you have a gun (or pills) in the house?" (or other tools to carry out the plan)

If the client has been thinking seriously about suicide, has a plan, does not have a plan but has the means to harm themselves, or if there is a timetable, then the situation should be considered an emergency. Have the client complete a Suicide Prevention Contract, and identify at least two people besides the therapist to call for help when suicidal ideation occurs. Develop a safety plan, educate client about the clinic's procedures for responding to emergency calls through voicemail (Director's pager is notified of an urgent message, etc.). If warranted, involve the friend/family member listed on the contract in the current session or call them to verify willingness to be a part of the safety plan.

**For severe suicidal ideation or other acute psychiatric concerns, have the client go for an evaluation for inpatient treatment.** If the client has insurance, refer them to the Covenant emergency room. If the client does not have insurance, refer them to the UMC emergency room or have them call the MHMR / Sunrise Canyon crisis line (740-1414).

1. If the client agrees to go to an emergency room, have a friend or relative drive the person, and obtain a Release of Information Form so that you can confirm the client’s arrival. If a friend or relative is not available, call the TTU Police (742-3931), and explain that you have a client who needs to be transported to an emergency room. Send a FTC business card with your contact information with the client, to facilitate communication between yourself and other care providers.
2. Call FTC Director (281-989-8640) and advise her/him of the situation. DO NOT GO WITH THE CLIENT TO THE HOSPITAL, and DO NOT TRANSPORT THE CLIENT IN YOUR OWN VEHICLE!
3. Explain to any waiting clients, and/or have a colleague call all clients scheduled with you for that day, that an emergency is forcing you to cancel their appointment and that you will contact them to re-schedule.
4. Make it clear to the client that you expect either the client or other care provider to follow up by phone to discuss the outcome of the evaluation and any additional safety plans.
5. The MHMR/Sunrise Canyon emergency team may wish to come to the Clinic and interview the client in person. If so, give directions to the Clinic and wait with the client until
the assessment team arrives.

**If the client refuses all other forms of assistance and will not go to the hospital voluntarily:**
1. Call the police (9-911), explain who you are and what you have observed. The police will only get involved if the client is a danger to him/herself or others.
2. Stick to the facts and request that a police officer be sent to help transfer the client. Stay with the client until the police arrive; tell the officer what you know and the risk to the client.
3. When the officer arrives, have the officer explain to you and the client what will happen when they leave the building.
4. Call FTC Director (281-989-8640) to advise her/him of the situation.
5. Explain to any waiting clients, and/or have a colleague call all clients scheduled with you for that day, that an emergency is forcing you to cancel their appointment and that you will contact them to re-schedule.

**If the client leaves before the police arrive,** provide a description of the person (height, weight, hair color, and clothing). If possible, get a license plate number and a description of their vehicle (color, make, etc.). Call the police at once (9-911); tell them who you are and what has happened.

**Acute Psychiatric Concerns**
Hospitalization is a possibility if a client seems very confused, reports hallucinations, is extremely panicky, reports being intensely and acutely depressed, suicidal (see above), or delusional. The basic rule to consider is the client's safety and well-being. Is the client safe on the streets or at home? If you know the client well and see a radical change in behavior or emotions, think about acute decompensation requiring hospitalization. The following questions may be helpful:

1. "Have you been thinking about hurting yourself or committing suicide?"
2. "Have you been seeing or hearing things that other people may not see or hear?"
3. "Are you afraid that someone or something may hurt you?"
4. "Is there something going on that is hard to talk about?"
5. "Is someone else worried about you or are you worried about yourself?"
6. "Do you feel safe in here?"
7. "When did you last have a good night's rest?"

If your questions lead you to believe that the client needs hospitalization, follow the emergency procedures outlined above addressing suicidal ideation.
**Expression of Homicidal Intent**

If a client expresses a sincere desire to hurt another person, you must assess the level of danger. Explore whether or not the client has a plan, means, or time-table for carrying out their plan (similar to exploring the lethality of a suicide threat). If the client is willing to talk with you, focus on alternative actions, likely consequences, effect of the action on friends or family, effect of action on the client her/himself; in brief, try to deflect the client's anger into other channels. Develop future plans of action.

Talk about your responsibility with such threats. Tell the client you must act to protect the intended victim. You are their supporter, you can understand their anger, but they must not injure another person. Help them identify healthy options.

If the client continues to threaten another person, notify your supervisor and/or Clinic Director to formulate a plan of action, which may involve notifying the police of the threat. If the police need to be contacted (9-911), identify yourself and explain the situation. Tell the police dispatcher that either you or the police must warn the potential victim. If the police take on the responsibility of warning the other party, let them know they must confirm with you that the warning was delivered in an appropriate time frame.

When the threat is violence, not homicide, treat the situation as a potential homicide. If you feel personally threatened or the client is threatening someone in the room, call the TTU police at once, explain the situation, tell them where you are (9-911, 742-3931).

*All of these guidelines assume you have involved your supervisor. If you cannot leave the client, get someone else to locate a supervisor. Call the FTC Director (281-989-8640). Take the client most at risk with you to place the call if no one is around.*

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**Emergency Phone Numbers**

- Police: 9-911
- TTU Police (non-emergency): 742-3931
- Covenant Lakeside: 725-6000
- Lubbock Regional MHMR Intake: 740-1414, 740-1421
- FTC Director CELL: 281-989-8640
- Texas CPS Hotline: (800) 252-5400 / www.txabusehotline.org
MFT Server Information and Guidelines

During the Spring 2008 semester, a 2 TB server was purchased by the FTC for the exclusive use of MFT faculty and students. The primary use of the server is to store therapy session videos for supervision and research purposes. Manuals, forms, and data are also stored on the server; access to certain areas on the server is dictated by your raider username. In order to adequately maintain the server, students, faculty, and staff are required to follow all guidelines related to appropriate use of the server.

• The MFT server can be accessed from computers in the MFT student workroom, FTC clinic, FTC clinic office, and faculty offices. Under “My Computer” the MFT server shows up as the “M” drive.

• Electronic folders are used to organize information saved on the server. Other than creating a folder to save videos, students are not allowed to create extra folders without permission from the Clinic Director. Subfolders and contents include:

  • **Manuals and Forms ALL**: Contains the Clinic Policy & Procedure Manual, MFT Program Manual, and commonly used Clinic Forms, such as case note templates.

  • **MFT Course Materials**: This folder is used to store readings/articles for class purposes.

  • **Miscellaneous**: Helpful information such as genogram symbols, articles, and a lecture on relational violence by Dr. Doug Smith.

  • **Videos**: Contains therapy session videos and more sub-folders for students to save video data for the clinical/theory of therapy portion of qualifying exams.

    - All FTC sessions should be saved to the M: drive or the S:drive.
    - When saving videos, name the file with the case number and date as follows: 5543 7.18.08 (case number month.day.year)

**FTC Staff DOCS**: The files in this folder are for intake tracking and related staff functions.

**MCSR Data & Clinic Data**: use of this folder is restricted to faculty and clinic staff. It contains all data related to student clinical hours and FTC clients.

  - If you need clinical data for a class project or research project, contact the FTC Director with a list of what variables you would like to use, and a separate data file will be created for you.

• Therapy session videos will be deleted at the end of every month, unless they are moved into a sub-folder named with your name and “do not delete.” Only sessions that you wish to save for qualifying exams or pre-approved research or class purposes should be saved. Do not save every session in such a folder. This wastes space and slows the server down unnecessarily.
A new drive ‘S’ has been identified on the server for incoming Masters student to record videos. All Masters students, beginning Fall 2010 will be asked to save their video files to the ‘S’Drive.

• Do not save any of your personal work, completed forms, case notes, or any other files to the server. Only research data and therapy session video should be saved on the server. The FTC Director reserves the right to delete any unnecessary or mis-saved files at any time, without notice to the file author.

• Any problems with the MFT clinic server or digital recording equipment should be reported to the FTC Director immediately.

### Clinical Forms

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<th>Form Name</th>
<th>Location</th>
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<tr>
<td>Agreement to Abide by Procedures, Policies, and Ethical Standards</td>
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<td>Release of Information</td>
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<tr>
<td>AAMFT Code of Ethics</td>
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<tr>
<td>Final Report of Hours Form</td>
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<td>Phone Intake Form</td>
<td>Advanced MD, Chart Files Tab</td>
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<tr>
<td>Voicemail Instructions</td>
<td>M: Drive</td>
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<td>Phone Contact Record</td>
<td>Advance MD, Custom Tab</td>
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<tr>
<td>Therapist Vacation Form</td>
<td>Student Room Document Box</td>
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<tr>
<td>FTC Fee Schedule</td>
<td>Student Room Document Box</td>
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<tr>
<td>FTC Fee Agreement Form/ Cancellation Policy</td>
<td>Client Case File</td>
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<td>Receipt</td>
<td>Student Room Document Box</td>
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<td>MCSR’s: Practicum, Internship and Alternate Hours</td>
<td>Student Room Document Box</td>
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<td>Alternative Hours Activity Proposal</td>
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<td>Case Assignment Suspension Form</td>
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<td>Informed Consent (File Copy)</td>
<td>Client Case File</td>
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<td>Informed Consent (Client Copy)</td>
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<td>Research Participant Informed Consent</td>
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</table>
The **Student Association of Marriage and Family Therapy (SAMFT)** is the graduate student association for the master’s degree and PhD student in the MFT program. While SAMFT does have a faculty advisor who is a member of the MFT faculty, the administration and oversight of the association is handled by the students. In addition to providing a forum for peer mentorship and community service, SAMFT is the primary mechanism for student governance of the MFT programs. The student members of SAMFT elect a master’s degree and PhD student representative. The student representatives participate as part of faculty search committees and are invited to at least one faculty meeting per semester to provide feedback to the faculty.
Constitution
Of
Student Association of Marriage and Family Therapy
Fall 2010

Article I
Name

Section 1 The name of this organization shall be the Student Association of Marriage and Family Therapy (SAMFT).

Article II
Mission

Section 1. The Student Association of Marriage and Family Therapy (SAMFT) is designed, under the leadership of students in the MFT program, to provide opportunities for student networking, further professional development, and exchange with faculty on program issues.

Article III
Membership

Section 1. A member shall be anyone at the Master’s or Doctoral level in the Marriage and Family Therapy program at Texas Tech University.

Section 2. Voting members are those who pay dues and have met all requirements set forth by the organization.

Section 3. A member must hold a 2.0 or higher grade point average.

Section 4. All members have the right to a due process.

Section 5. All active members must pay dues of $10 a semester.

Article IV
Officers

Section 1. The Executive officers of SAMFT shall be: President, Vice-President, Treasurer, and Secretary. They must be active, paying members. Duties exclusive of these positions shall include but not limited to 1) Organizational Documents 2) Creating Budgets 3) Handling of the organizations money 4) Direct communication with the Marriage and Family Therapy program faculty. Committee leaders shall be Service, Social, Faculty/MFT representatives, Fundraising and Outreach.
Section 2. A slate of nominated officers will be presented at a general meeting during the month of August, at the first meeting of the semester. A hand-raised vote by voting members will then be conducted and the candidate with the majority of votes will be awarded the position.

Officers will be elected for one year terms (not to exceed two continuous terms in the same position). Officers will begin term one week after election.

Section 3. The President shall be chief executive officer of the organization.

Section 4. Any officer can have his/her position revoked with due cause during the serving term based on a majority vote of members in a business meeting.

Section 5. The Vice-President shall be vested with full responsibilities upon the absence of the President. He/she will also handle any administrative duties as assigned by the President.

Section 6. All officers should abide by duties outlined for officers of the SAMFT. Individuals running for office should be familiar with all administrative duties upon running for office.

Section 7. Extra chairpersons may be appointed for special reasons and committees with a majority vote from the executive officers.

Section 8. All officers are subject to removal by majority vote of the executive officers if they miss more than two duty related meetings without notifying the secretary or finding a proxy. If an officer misses more than 3 excused absences the committee will hold a meeting to discuss whether outside responsibilities are impeding on the members potential for service. Removal of the officer requires a unanimous vote of the executive committee in good standing. If an officer is removed, there will be another election held to fill the position.

Article V
Meetings

Section 1. Meetings shall be held biweekly as decided upon by the members to discuss current events/issues, fundraising ideas, progress of the organization, and service projects.

Section 2. The meeting shall be open to any member of the organization.

Section 3. Regular meetings for members shall be held every other Friday, except holidays unless specified otherwise.

Section 4. SAMFT may hold planning meetings, yet no vote can be cast without a quorum of executive officers.
Article VI
Affiliation

Section 1. SAMFT is not affiliated with any local, state, or national organization.

Article VII
Proposed activities

Section 1. Every semester, SAMFT will provide at least one service opportunity, a social event, educational/research meetings, and attend faculty meetings. Each year, SAMFT will host interviewees applying to the MFT program and spend time recruiting potential undergraduate students to the program.

Article VIII
Structure

Section 1. The executive committee shall consist of the President, Vice-President, Treasurer, Secretary and Committee Leaders. The above listing of officers is indicative of the hierarchy of responsibilities within the organization.

President
1. Overseeing all activities of the organization.
2. Delegating responsibilities to appropriate executive members.
3. Being available to the faculty advisor, all members, and officers.
4. Create and coordinate all specially appointed committees.
5. Representing SAMFT in a professional manner.
6. Assisting the College of Human Sciences, Texas Tech University, and the Lubbock community however deemed necessary.

Vice President
1. Oversee all activities of the organization in the absence of the President.
2. Work with the Treasurer to keep current membership lists.
3. Create new ideas on increasing membership.
4. Make reports of membership status in biweekly meeting.
5. Oversee that the MFT program is acting in accordance with CO-AMFT.

Treasurer
1. Work with the President on withdrawals, deposits, and other financial matters.
2. Assist the Vice-President in collecting membership dues.
3. Make biweekly budget reports at meetings.
4. Attend Student Government Association meetings, if SAMFT receives funding.
Secretary
1. Take the minutes at each meeting.
2. Create a weekly agenda.
3. Responsible for meeting time and location notification to members.
4. Plan research/educational opportunities.

Section 2. Standing committees shall be formed to help with operations in SAMFT and community service projects. These committees are Service, Social, Faculty/MFT representative, Fundraising and Outreach.

Service Committee Chairperson
1. Generate service ideas.
2. Oversee all service activities.
3. Make biweekly reminders of ongoing service projects at meetings.

Social Committee Chairperson
1. Organize semester socials.
2. Work with Treasurer to determine budget for events.

Faculty/MFT Committee Chairperson
1. Attend Faculty meetings when invited to do so.
2. Act as liaison between faculty and students.

Outreach Committee Chairperson
1. Attend community resource meetings.
2. Organize recruiting of potential clients to Family Therapy Clinic (FTC).
3. Represent SAMFT and FTC in community settings.
4. Organize outreach programs to the community.

Fundraising Committee Chairperson
1. Generate and organize fundraising events.
2. Work with officers and committee chairpersons to determine fundraising needs for each semester.

Section 3. Any additional committees may be formed at the discretion of the executive committee.

Article IX
Advisor

Section 1. The advisor of the organization shall be selected and/or dismissed by a majority of the executive officers at its own discretion.
Section 2. Responsibilities of the advisor shall be assessed and disclosed by a majority of the executive officers at its own discretion.

Section 3. The advisor of the organization must confirm all official decisions of the organization.

Section 4. Advisor must be faculty or staff of the Marriage and Family Therapy program.

Article X

Requirement for adopting amendments.

By-laws

Section 1. The by-laws may be amended at any general meeting or by the executive officers, provided a quorum is present.
APPENDIX G

GRADUATE FACULTY INFORMATION
**GRADUATE FACULTY APPLICATION FORM**  
**TEXAS TECH UNIVERSITY**  
**Confirmation/Reappointment**

**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<td>George Comiskey</td>
<td>Community Family and Addiction Services</td>
<td>Instructor</td>
<td>11-07-2014</td>
<td></td>
</tr>
<tr>
<td>TTU</td>
<td>Email: <a href="mailto:george.e.comiskey@ttu.edu">george.e.comiskey@ttu.edu</a></td>
<td>Phone: (806) 742-2891 ext. 257</td>
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<td>Mailing Address</td>
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364
The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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| Title | Board Member |
III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

IV. Other Service on Graduate Committees in the last six years (excluding III)

V. Graduate Courses Taught in the last six years

VI. Published Research and Creative Activity in the last six years

VII. Current Participation in Professional Associations

   Board Member, Texas Association of Student Assistance Professionals. (February 2006 - Present).

   Vice-Chair, Lubbock Area United Way: Children And Youth Advisory Committee. (March 2004 - Present).

   Member, Lubbock VOICES Coalition. (January 2004 - Present).

   Member, National Association of Alcohol and Drug Addiction Counselors. (August 2003 - Present).

   Member, Texas Association of Addiction Professionals. (January 1998 - Present).

   Member, Internationally Certified Prevention Specialist. (May 1996 - Present).

   Program Coordinator, West Texas Institute, Lubbock, Texas. (October 7, 2009 - Present).


   Committee Member, VOICES Coalition, Lubbock, Texas. (January 2002 - Present).

VIII. Presentations in the last six years

   Invited
Comiskey, G., Service Appreciation Luncheon, SPCAA-South Plains Community Action Association, Catholic Charities 102 Avenue J, "Naming, claiming and moving past Compassion Fatigue" Regional. (December 13, 2013).

Comiskey, G., Texas Behavioral Health Institute, Texas Department of State Health Services, Austin, Texas, "Steps to Stem Substance Abuse on College Campuses," State. (July 19, 2012).


Comiskey, G. (Presenter Only), Addressing Underage Drinking, Texans Standing Tall, First United Methodist Church -- Lubbock Texas, "What are the Kids in our communities using?", Regional. (May 11, 2010).

Comiskey, G. (Presenter Only), Parenting, Family Outreach, Briercroft Office, "Dealing With Sibling Rivalry," Local. (February 2010).

Comiskey, G. (Presenter Only), Teambuilding, Child Development and Research Center, CDRC, "Together We Stand," Local. (August 11, 2009).

Accepted

Comiskey, G. (Presenter Only), Closing the GAP, Texas Tech University, Texas Tech University, "Survival Skills: Dealing With Bullying," Local. (November 2010).


Comiskey, G. (Author Only), Statewide Texas Association of Addiction Professionals Conf, Texas Assn. of Addiction Professionals, San Antonio, Texas,
"Resiliency: Helping Our Clients Bounce Back From Adversity," State. (July 2010).

Comiskey, G. (Presenter Only), United Future Leaders/teambuilding/parenting, Center for Prevention and Resiliency, TTU-CPR, "Parenting your UFLer'," Local. (October 17, 2009).

IX. Grant and Contract Activity for the last six years

**Contract**


X. Other professional activities during the last six years that contribute to graduate education

**Service/Engagement**

Mentor to minority, first-generation student, Mentor Tech. (August 24, 2013 - Present).

Student Org Advisor (Non-Professional Org), Association of Students About Service. (January 2003 - Present).

Guest Speaker, University Student Housing. (August 10, 2012).

Guest Speaker, Department of Family and Community Medicine and Student Health Services. (June 29, 2012).

Guest Speaker, Alpha Phi Omeg. (April 28, 2012).

Guest Speaker. (April 18, 2012).

Guest Speaker. (April 11, 2012).

Guest Speaker, Impact Tech. (February 29, 2012).

Faculty Mentor, Mentor Tech. (August 2008 - June 2011).

Guest Speaker, LISD counselors/parents, Lubbock, Texas. (October 2011 - Present).
Committee Member, The Texas Healthy Adolescent Initiative, Lubbock, Texas. (May 15, 2010 - Present).

Guest Speaker, Stubbs Headstart, Lubbock, Texas. (February 2010 - Present).

Guest Speaker, Stuibbs Head Start, Lubbock, Texas. (February 2010 - Present).

Guest Speaker, Texas School Nurse Organization, Lubbock, Texas. (February 2010 - Present).

Guest Speaker, Ballenger Head Start, Lubbock, Texas. (January 2010 - Present).

Guest Speaker, Martin Head Start, Lubbock, Texas. (January 2010 - Present).

Guest Speaker, New Century Leaders, Lubbock, Texas. (February 2009 - Present).

Committee Member, TX Dept of Prot. and Reg. Serv. Disproportionality Committee, Lubbock, Texas. (January 2009 - Present).

Committee Member, Children and Youth Advisory Council, Lubbock, Texas. (January 15, 2005 - Present).

Guest Speaker, North Lamar High School, Paris, Texas. (March 25, 2012).


Guest Speaker, Drug Court, Lubbock, Texas. (June 26, 2010).

Guest Speaker, Executive Leadership Forum, Lubbock, Texas. (April 2010).

Consulting


K-12 Education, All Saints Episcopal Schools, 3222 103rd Street - Lubbock, Texas 79423. (August 20, 2013 - Present).

K-12 Education, All Saints Episcopal Schools, 3222 103rd St, Lubbock, TX 79423. (January 7, 2013 - Present).

Academic, Region 17 ESC, Paducah ISD. (November 18, 2009 - Present).

Academic, Lubbock ISD. (August 2009 - Present).
Academic, Lubbock ISD. (August 2009 - Present).

Non-Governmental Organization (NGO), Levelland Suicide Prevention Conference, South Plains College 1401 South College Avenue, Levelland, TX 79336. (November 7, 2013).

Pre-K - 12 Education, Lubbock County Alternative Education program, 1323 E. 24th St. : Lubbock, TX 79404. (November 6, 2013).

Pre K - 12 Education, Estacodo High School BIONIC, TTU Student Union Building. (October 30, 2013).

PreK-12 Educational, Regional Middle School Student Council Officers, Irons Middle School Auditorium 5214 79th St, Lubbock, TX 79424. (October 30, 2013).

PreK-12 Educational, Regional High School Students Council Officers, Lubbock Cooper Performing Arts Center - 16302 Rte 493 Loop, Lubbock, TX, 79423. (October 23, 2013).

Non-Governmental Organization (NGO), YWCA Heath Start, 1500 14th Street. (October 8, 2013).

PreK - 12 Education, Hutchingson Middle School, TTU - Student Union Lubbock Room. (September 27, 2013).

Government, Department of State Health Services --Youth Services, 6302 Iola Ave. (September 25, 2013).

Non-Governmental Organization (NGO), Community-wide Suicide Prevention Symposium, International Cultural Center 601 Indiana Avenue | Box 45004 | Lubbock, TX 79409-5004. (September 4, 2013).


Academic, Kansas State University Bi-linqual education program, 002 Bluemont Hall Manhattan, Kansas 66506. (August 16, 2013 - August 18, 2013).

PreK-12 Campus, Roscoe Wilson Elementary School, 2807 25th St, Lubbock, TX 79410. (August 14, 2013).

Academic, Texas Tech University Housing, College of Education 3008 18th Street, (August 13, 2013).
Academic, TTU Early Headstart, 515 N Zenith Ave, Lubbock, TX 79403. (July 11, 2013).

Non-Governmental Organization (NGO), Second Baptist Church, 6109 Chicago Ave, Lubbock, TX 79424. (May 30, 2013).


Non-Governmental Organization (NGO), The Bridge of Lubbock, 1301 Redbud Ave, Lubbock, TX 79408. (February 7, 2013).


Academic, Region 17 ESC, Paducah ISD. (November 18, 2009 - October 2012).

Academic, Lubbock ISD Guidance and Counseling, Lubbock ISD. (October 8, 2012).

Academic, Lubbock ISD Guidance and Counseling, Lubbock ISD. (October 8, 2012).

Community group attempting to address adolescent substance use resources, Ad Hoc parenting group, Lubbock. (October 2011).
GRADUATE FACULTY APPLICATION FORM
TEXAS TECH UNIVERSITY
Confirmation/Reappointment

Instructions: The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

Name: Jared P. Dempsey (Ph.D.)
Department/Unit: Community Family and Addiction Services
Rank/Title: 

Date Submitted: 11-07-2014
Appointment Date: 

TTU Email: jared.dempsey@ttu.edu
Phone: (806) 742-2891 ext. 267
Campus Mail Stop: 1250
Mailing Address: 
City/State: 
Zip: 

372
The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

IV. Other Service on Graduate Committees in the last six years (excluding III)
V. Graduate Courses Taught in the last six years

**Fall TTU 2013**
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

VI. Published Research and Creative Activity in the last six years

**Non-Peer-Reviewed/Refereed**

Other (Accepted)


VII. Current Participation in Professional Associations

VIII. Presentations in the last six years

IX. Grant and Contract Activity for the last six years

**Grant - Pending**

Dempsey, J. (Co-Principal), "A Bio-Behavioral Model of Financial Misbehavior Drawing from Behavioral Theories of Incentive Salience and Personality Theories of Empathy.,” Sponsored by National Science Foundation, Federal, $45,000.00.

X. Other professional activities during the last six years that contribute to graduate education

**Service/Engagement**

Committee Member, Faculty Search Committee. (December 12, 2013 - Present).
GRADUATE FACULTY APPLICATION FORM
TEXAS TECH UNIVERSITY
Confirmation/Reappointment

Instructions: The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

Name: Kitty S. Harris (Ph. D)
Department/Unit: Community Family and Addiction Services
Rank/Title: Professor
Date Submitted: 11-07-2014
Appointment Date: 
TTU Email: kitty.s.harris@ttu.edu
Phone: (806) 742-2891
Campus Mail Stop: 1160
Mailing Address: 
City/State: 
Zip: 

375
The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

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II. Professional Experience, Academic and Nonacademic

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<th>Title</th>
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<tr>
<td>Institution/Agency</td>
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<tbody>
<tr>
<td>Institution/Agency</td>
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<thead>
<tr>
<th>Title</th>
<th>Professor, Department of Community, Family Addiction Studies</th>
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<tr>
<th>Title</th>
<th>Executive Director, Ranch at Dove Tree</th>
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<tr>
<th>Title</th>
<th>Associate Dean for Outreach and Engagement, College of Human Sciences</th>
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<tr>
<td>Director, Center for the Study of Addiction and Recovery</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Director, Center for Prevention and Resiliency</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Associate Professor, Department of Applied and Professional Studies</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Co-director, Center for the Study of Prevention and Resiliency</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Associate Dean of Academics, College of Human Sciences</td>
<td>Texas Tech University</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

IV. Other Service on Graduate Committees in the last six years (excluding III)

<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Involvement</th>
<th>Year Completed</th>
<th>Institution</th>
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<tbody>
<tr>
<td>EmmyLu Trammell</td>
<td>Dissertation Committee Member</td>
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<tr>
<td>McKenzie Tabor</td>
<td>Dissertation Committee Member</td>
<td></td>
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</tr>
<tr>
<td>Spencer Bradshaw</td>
<td>Dissertation Committee Member</td>
<td></td>
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<tr>
<td>Ali Pohlmeier</td>
<td>Dissertation Committee Member</td>
<td></td>
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<tr>
<td>Student's Name</td>
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</tr>
<tr>
<td>Cynthia D'Sauza</td>
<td>Dissertation Committee Member</td>
<td>2013</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Greg Johnston</td>
<td>Dissertation Committee Member</td>
<td>2012</td>
<td>Texas Tech University</td>
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<tr>
<td>Kimberly Corson</td>
<td>Dissertation Committee Member</td>
<td>2011</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Matthew Russell</td>
<td>Dissertation Committee Member</td>
<td>2011</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Katy Taylor</td>
<td>Master's Thesis Committee Member</td>
<td>2011</td>
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<tr>
<td>Kimberly Kerksiek</td>
<td>Dissertation Committee Member</td>
<td>2010</td>
<td>Texas Tech University</td>
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<tr>
<td>Tiffany Brown</td>
<td>Dissertation Defense Committee Member</td>
<td>2009</td>
<td>Texas Tech University</td>
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<tr>
<td>Carol Johnston</td>
<td>Master's Thesis Committee Member</td>
<td>2009</td>
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<tr>
<td>Jacquelyn Wiersma</td>
<td>Dissertation Committee Member</td>
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V. Graduate Courses Taught in the last six years

**Fall TTU 2014**
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Summer II TTU 2014**
MFT 8000 Doctor's Dissertation

**Spring TTU 2014**
ADRS 6329 Eating Disorders: An Overview of Advanced Topics
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Spring TTU 2013**
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Spring TTU 2012**
ADRS 6329 Eating Disorders: An Overview of Advanced Topics

**Summer I TTU 2011**
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Spring TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Fall TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Summer II TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research

**Summer I TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
Spring TTU 2010
MFT 8000 Doctor's Dissertation
MFT 7000 Research
ADRS 6329 Eating Disorders: An Overview of Advanced Topics
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

Spring TTU 2009
ADRS 6915 Systemic Treatment of Addictive Disorders

VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed

Journal Articles (Accepted)


Cleveland, H. H., Harris, K. (2010). Conversations about recovery at and away from a drop-in center among members of a collegiate recovery community. Alcoholism Treatment Quarterly, 28(1), 78-94.


**Non-Peer-Reviewed/Refereed**

**Journal Articles (Accepted)**


Shumway, S., Dakin, J. B., Smock, S., Kimball, T., Harris, K. The Development of the Hope and Coping in Recovery Scale (HCRS).


**Books (Accepted)**


**Book Chapters (Accepted)**


**Other (Accepted)**


**VII. Current Participation in Professional Associations**

Member, Association of Recovery in Higher Education. (2011 - Present).

Member, Faces and Voices of Recovery. (2007 - Present).

Member, Phi Upsilon Omicron. (2004 - Present).

Member, Association of Recovery Schools. (2003 - Present).

Member, Association of Recovery Schools. (2003 - Present).

Member, Texas Association of Student Assistance Professionals. (2003 - Present).
Member, National Association of Alcohol and Drug Abuse Counselors. (1981 - Present).

Member, National Association of Alcohol and Drug Abuse Counselors. (1981 - Present).

Member, Texas Association of Alcohol and Drug Abuse Counselors. (1980 - Present).

Committee Member, Association of Recovery in Higher Education. (2011 - Present).


VIII. Presentations in the last six years

Invited


Harris, K., Texas Tech University Health Sciences Center Workshop, Texas Tech University Health Sciences Center, Lubbock, TX, "Ethics Series: Women and recovery: A personal and professional reflection.," Local. (July 2013).


Harris, K., Betty Ford Women’s Symposium: Journey to Wholeness, Betty Ford Center, Los Angeles, CA, "Woman unbroken: Putting the pieces together through recovery.," National. (March 2013).

Harris, K., Texas Tech University Health Science Center/Faculty Retreat, Texas Tech University Health Science Center, Lubbock, TX, "Civility in the Classroom," Local. (August 2012).


Harris, K., 3rd National Collegiate Recovery Conference. Understanding and responding to young adult addiction and recovery, Kennesaw State University, Kennesaw, GA, "Collegiate Recovery Data: How to make what we've Learned Work for Your Campus," National, Peer Reviewed/Refereed. (March 2012).


Harris, K., Invited Expert Panel Member, Department of Education "Recovery Summit", Washington, DC, National. (October 2010).
Harris, K., Invited Expert Panel Member, Office of National Drug Control Policy / Substance Abuse and Mental Health Services Administration "Recovery Summit", Washington, DC, National. (September 2010).


Accepted


Harris, K., Kimball, T. (Presenter & Author), National Outreach Scholarship Conference, National Outreach Scholarship Association, Tuscaloosa, Alabama,


Harris, K. (Author Only), Walker, L. (Author Only), Smock, S. (Presenter & Author), Rushing, S. (Presenter & Author), Tabor, M. (Author Only), National
Youth At-Risk Conference, Georgia Southern University, Savannah, Georgia, "BodyMind Initiative," National, Peer Reviewed/Refereed. (March 2010).


**General**

Phy, J. (Presenter & Author), Ali, P. (Author Only), Cooper, J. (Author Only), Harris, K. (Author Only), Watkins, P. (Author Only), Boylan, M. (Author Only), Conjoint Meeting of the International Federation of Fertility Societies and the American Society for Reproductive Medicine, Conjoint Meeting of the International Federation of Fertility Societies and the American Society for Reproductive Medicine, Boston MS, "Polycystic ovary syndrome patients achieve successful weight loss and decreased waist and hip ratio after 8-week low starch/low dairy diet (Poster #655).," International, Peer Reviewed/Refereed. (October 2013).

Phy, J. (Presenter & Author), Pohlmeier, A. (Author Only), Cooper, J. (Author Only), Harris, K. (Author Only), Watkins, P. (Author Only), Boylan, M. (Author Only), Conjoint Meeting of the International Federation of Fertility Societies and the American Society for Reproductive Medicine, Conjoint Meeting of the International Federation of Fertility Societies and the American Society for Reproductive Medicine, Boston MS, "Reduction of clinical hyperandrogenism in polycystic ovary syndrome after 8-week low starch/low dairy diet (Poster #698).," International, Peer Reviewed/Refereed. (October 2013).

Harris, K., Recovery 360, Recovery 360, Dallas, TX, "Women and Recovery; Finding Hope," State. (October 2012).


Harris, K., StepUP Gala, StepUP Program, Augsburg College, Minneapolis, MN, "Believe in Yourself," State. (February 2011).

**IX. Grant and Contract Activity for the last six years**

**Contract**


Grant

Cooper, J. (Supporting), Phy, J. L. (Principal), Pohlmeier, A. (Supporting), Boylan, M. (Supporting), Harris, K. (Supporting), "Effect of Dietary Reduction of Carbohydrates from Starch on Clinical and Biochemical Symptoms of Polycystic Ovary Syndrome," Sponsored by Laura W. Bush Institute for Women's Health, Private, $139.00. (March 2012 - June 2014).

Harris, K. (Principal), "National Recovery Student Database," Sponsored by John P. McGovern Foundation, Private, $100,000.00. (September 1, 2011 - August 31, 2012).

Harris, K. (Principal), "Center for the Study of Addiction and Recovery Replication," Sponsored by Mickey & Barbara McKenzie, Private, $400,000.00. (August 1, 2011 - Present).

Harris, K. (Principal), Kimball, T. (Co-Principal), Baker, A. K. (Co-Principal), Smock, S. (Co-Principal), "Methodology for Effectively Meeting the Needs of Recovering Students," Sponsored by U.S. Department of Education, Federal, $95,000.00. (September 1, 2009 - August 31, 2010).

Harris, K. (Principal), "Supportive Adolescent Services," Sponsored by Lubbock Independent School District, Local, $50,000.00. (September 1, 2009 - August 31, 2010).


Kimball, T. (Co-Principal), Harris, K. (Co-Principal), Baker, A. (Co-Principal), "Best Practices in Collegiate Recovery Conference," Sponsored by Department of Health and Human Services, Local, $49,920.00. (October 1, 2008 - Present).

Harris, K. (Co-Principal), Bell, N. (Co-Principal), "6th Grade Transition Project," Sponsored by Lubbock Mental Health Mental Retardation, Local, $45,984.00. (September 1, 2006 - August 31, 2008).
Harris, K. (Co-Principal), Bell, N. (Co-Principal), "7th Grade Transition Project," Sponsored by Lubbock Mental Health Mental Retardation, Local, $200,122.00. (September 1, 2002 - August 31, 2008).

Harris, K. (Co-Principal), Bell, N., "Supportive Adolescent Services," Sponsored by Lubbock Independent School District, Local, $550,000.00. (September 1, 1997 - August 31, 2008).

**Sponsored Research**


Harris, K. (Co-Principal), Dodd, S. (Co-Principal), "Healthiest Communities and Childhood," Sponsored by Covenant Health System, Local, $250,000.00. (July 14, 2011 - 2012).


Harris, K. (Principal), "Ranch at Dove Tree Program Evaluation," Sponsored by The Ranch at Dove Tree, Private, $50,000.00. (September 1, 2011 - Present).

Harris, K. (Principal), Smock, S. (Supporting), Baker, A. (Supporting), "Creating Recovery Support Communities on College Campuses," Sponsored by Health Resources & Services Administration, Federal, Federal, $247,500.00. (September 2010 - August 2011).

Harris, K. (Principal), Smock, S. (Supporting), Kimball, T. (Supporting), "Healthiest Communities and Childhood," Sponsored by Covenant Health System, Local, $1,000,000.00. (July 15, 2008 - July 13, 2011).

Harris, K. (Principal), "United Future Leaders," Sponsored by United Supermarkets, Private, $1,000,000.00. (January 2007 - December 2010).

**Contract**

Bell, N. (Co-Principal), Harris, K. (Principal), "Supportive Adolescent Services," Sponsored by Lubbock Independent School District, Local, $50,000.00. (September 2008 - June 2009).

**Contract - Not Funded**
Huffman, L. (Supporting), Colwell, M. (Principal), Durband, D. (Supporting), Harris, K. (Supporting), Velikova, N. (Supporting), Springer, N. (Supporting), Wherry, J. (Supporting), Zvonkovic, A. (Supporting), Collier, D. (Supporting), Curry, Z. (Supporting), "TTU Human Behavioral Sciences Research Complex," Sponsored by NIH (R06), Federal, $15,000,000.00. (November 2009).

Huffman, L. (Supporting), Colwell, M. (Principal), Durband, D. (Supporting), Harris, K. (Supporting), Velikova, N. (Supporting), Springer, N. (Supporting), Wherry, J. (Supporting), Zvonkovic, A. (Supporting), Collier, D. (Supporting), Curry, Z. (Supporting), "TTU Human Behavioral Sciences Research Complex," Sponsored by NIH (R06), Federal, $15,000,000.00. (November 2009).

Grant - Not Funded

Harris, K., Smock, S., Rushing, S., "Champions for Healthy Kids Grant," Sponsored by General Mills, Private, $10,000.00. (2010).


Harris, K. (Principal), Smock, S. (Supporting), Baker, A. K. (Supporting), "The Body Mind Initiative- Tarrant County Expansion," Sponsored by The Dannon Corporation, Private, $30,000.00. (2010).

Grant - Pending

Rodgers, B. (Co-Principal), Smock, S. (Co-Principal), Harris, K. (Supporting), "Genetic & Social Support markers in Substance Dependence Disorders relapse prevention," Sponsored by NIDA - National Institutes on Drug Addiction, Federal, $299,974.00.

Harris, K., Smock, S., Rushing, S., "Obesity/Weight Related Prevention in Minority and Underserved Children," Sponsored by National Institutes of Health R21, Federal, $274,961.00.

Sponsored Research

Harris, K. (Principal), "The Ranch at Dove Tree Extension Project," Sponsored by The Aberdeen Foundation, Private, $1,575,000.00. (September 2006 - August 2010).

Sponsored Research - Not Funded
Harris, K. (Co-Principal), Laudet, A. (Co-Principal), "Relapse Prevention on College Campus: Current Models and Student Characteristics," Sponsored by NIDA, Federal, $43,378.00.

Hardin, E. (Principal), Harris, K. (Co-Principal), "Teaching Students to Expect and Value Success: Developing an Intervention to Change Beliefs about Intelligence and Work," Sponsored by Institute of Education Sciences, Federal, $1,488,010.00. (2010).

X. Other professional activities during the last six years that contribute to graduate education

Fellowships, Scholarships and Awards

Texas Tech University Human Sciences Nominee for the Faculty Distinguished Leadership Award. (2013).

Lifetime Achievement Award, Association of Recovery in Higher Education. (2012).

Bob Knowlton Service Award (First Recipient), Cornerstone Recovery. (2011).


Honors College Faculty Member of the Year, Honors College, Texas Tech University. (2009).

Integrated Scholar, Office of the Provost, Texas Tech University. (2009).

Outstanding Faculty Award, Mortar Board, Texas Tech University. (2009).

Creativity in Teaching Award, Applied and Professional Studies, College of Human Sciences, Texas Tech University. (2008).


Service/Engagement

Committee Chair, Faculty Search Committee. (October 2010 - 2013).

Committee Member, CFAS Dept. 3rd. Year and Post Tenure Reviews. (2012).

Committee Member, Excellence in Teaching Award Selection Committee. (2011 - 2012).
Committee Member, Administrative Team. (2007 - 2013).
Committee Member, Executive Team. (2007 - 2013).
Committee Member, Distinguished Alumni Award. (2012).
Committee Member, Graduate Faculty Application Committee. (2009).
Committee Chair, College of Human Sciences Curriculum Committee. (2007 - 2009).
Committee Member, Departmental Excellence in Teaching Award Selection Committee. (2011).
Faculty Advisor, Mortar Board. (2008 - 2010).
Committee Member, Academic Council. (2007 - 2008).
Committee Member, Associate Deans’ Council. (2007 - 2008).
Committee Member, Enrollment Management Council. (2007 - 2008).
Committee Member, Student Life Council. (2007 - 2008).
Committee Member, Teacher Education Council. (2007 - 2008).
Board Member, Covenant Hospital System, Lubbock, Texas. (2011 - Present).
Board Member, LISD Talkington School for Young Women Leaders Advisory Board, Lubbock, Texas. (2011 - Present).
Board Member, Advisory Council of the George W. Bush Institute Women’s Initiative. (November 1, 2009 - Present).
Guest Speaker, Lubbock Young Women’s Leader Foundation, Lubbock, Texas. (2008 - Present).
Board Member, Lubbock National Bank Board Member, Lubbock, Texas. (2004 - Present).
Board Member, Talkington Foundation Board Member, Lubbock, Texas. (2004 - Present).

Mentor, Host, Big XII Faculty Fellowship Awardee, Lubbock, TX. (2013).


Discussant, BRSS TACS Task 15 National Symposium on Youth Leadership. (March 2012).

Committee Member, Covenant Health System CEO Search Committee, Lubbock, TX. (2009 - 2010).

Guest Speaker, Lubbock Partners for Parenting Coalition. (October 2010).

Committee Member, Advisory Council of the George W. Bush Institute Women’s Initiative, Dallas, TX. (April 18, 2010 - April 21, 2010).

Board Member, Junior League of Lubbock, Lubbock, Texas. (2009).

**Consulting**

**GRADUATE FACULTY APPLICATION FORM**  
**TEXAS TECH UNIVERSITY**  
**Confirmation/Reappointment**

**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<tr>
<th>Name</th>
<th>Department/Unit</th>
<th>Rank/TITLE</th>
<th>Email</th>
<th>Phone</th>
<th>Campus Mail</th>
<th>City/State</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steve Harris</td>
<td>Applied &amp; Professional Studies</td>
<td>Professor</td>
<td><a href="mailto:steve.harris@ttu.edu">steve.harris@ttu.edu</a></td>
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</table>

**Date Submitted:** 11-07-2014

**Appointment Date:**

**Mailing Address:**

---

394
The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

II. Professional Experience, Academic and Nonacademic

III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

IV. Other Service on Graduate Committees in the last six years (excluding III)

V. Graduate Courses Taught in the last six years

VI. Published Research and Creative Activity in the last six years

VII. Current Participation in Professional Associations

VIII. Presentations in the last six years

IX. Grant and Contract Activity for the last six years

X. Other professional activities during the last six years that contribute to graduate education
**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<th>Rank/Title</th>
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<th>Appointment Date</th>
<th>Email</th>
<th>Phone</th>
<th>Campus Mail Stop</th>
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<tbody>
<tr>
<td>David C. Ivey</td>
<td>Community Family and Addiction Services</td>
<td>Professor</td>
<td>11-07-2014</td>
<td></td>
<td><a href="mailto:david.ivey@ttu.edu">david.ivey@ttu.edu</a></td>
<td>(806) 742-5050</td>
<td></td>
</tr>
<tr>
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</table>
The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

<table>
<thead>
<tr>
<th>Degree</th>
<th>Field</th>
<th>Institution</th>
<th>Year Awarded</th>
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<tbody>
<tr>
<td>Ph D</td>
<td>Psychological and Cultural Studies - Counseling Psychology</td>
<td>University of Nebraska</td>
<td>1993</td>
</tr>
<tr>
<td>MS</td>
<td>Counseling</td>
<td>Arizona State University</td>
<td>1987</td>
</tr>
<tr>
<td>BS</td>
<td>Health Science</td>
<td>Arizona State University</td>
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II. Professional Experience, Academic and Nonacademic

<table>
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<tr>
<th>Title</th>
<th>Institution/Agency</th>
<th>Year(s)</th>
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<tbody>
<tr>
<td>Psychologist &amp; Sole Proprietor</td>
<td>Dr. Ivey &amp; Associates</td>
<td>August 31, 1994 - Present</td>
</tr>
<tr>
<td>Visiting Instructor</td>
<td>Mexico City Campus Alliant University</td>
<td>February 12, 2009 - February 24, 2009</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

<table>
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<tr>
<th>Student's Name</th>
<th>Involvement</th>
<th>Year Completed</th>
<th>Institution</th>
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<tbody>
<tr>
<td>Alyssa Banford</td>
<td>Doctoral Advisory Committee Chair</td>
<td>August 2011</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Marika Martin</td>
<td>Doctoral Advisory Committee Chair</td>
<td>May 2011</td>
<td>Texas Tech University</td>
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</table>
IV. Other Service on Graduate Committees in the last six years (excluding III)

<table>
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<tr>
<th>Student's Name</th>
<th>David Servino</th>
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<tbody>
<tr>
<td>Involvement</td>
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<td>Year Completed</td>
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<tr>
<th>Student's Name</th>
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<thead>
<tr>
<th>Student's Name</th>
<th>Rob Porter</th>
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<tr>
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V. Graduate Courses Taught in the last six years

**Fall TTU 2014**
- MFT 8000 Doctor's Dissertation: Research in Marriage and Family Therapy
- MFT 7000 Research: Research and Publication in Marriage and Family Therapy
- MFT 6395 Practicum in Marriage and Family Therapy: Clinical Practicum in Marriage and Family Therapy
- MFT 5370 Issues in Professional Development

**Summer I TTU 2014**
- MFT 7000 Research
- MFT 6395 Practicum in Marriage and Family Therapy

**Spring TTU 2014**
- MFT 8000 Doctor's Dissertation
- MFT 7000 Research
- MFT 6395 Practicum in Marriage and Family Therapy
- MFT 6000 Master's Thesis
- MFT 5304 Systemic Evaluation in Couple and Family Therapy

**Fall TTU 2013**
- MFT 8000 Doctor's Dissertation
- MFT 7000 Research
- MFT 5370 Issues in Professional Development
- MFT 5351 Research Methods in Marriage and Family Therapy

**Summer II TTU 2013**
- MFT 8000 Doctor's Dissertation
- MFT 7000 Research
Summer I TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6000 Master's Thesis

Spring TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6000 Master's Thesis
MFT 5370 Issues in Professional Development

Fall TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 5351 Research Methods in Marriage and Family Therapy

Summer I TTU 2012
MFT 6395 Practicum in Marriage and Family Therapy

Spring TTU 2012
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 5304 Systemic Evaluation in Couple and Family Therapy

Fall TTU 2011
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 5351 Research Methods in Marriage and Family Therapy

Summer II TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Summer I TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research

Spring TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed

Journal Articles (Accepted)


Non-Peer-Reviewed/Refereed

**Journal Articles (Accepted)**


VII. Current Participation in Professional Associations

Commissioner, American Association for Marriage and Family Therapy. (2006 - Present).

Member, American Psychological Society. (January 1994 - Present).

board member, Texas Association for Marriage and Family Therapy. (August 1993 - Present).

Member, Texas Psychological Association. (August 1993 - Present).

Member & Approved Supervisor, AAMFT.

Member of the Board of Directors, Texas Association for Marriage and Family Therapy. (February 2014 - Present).

Reviewer, Ad Hoc Reviewer, journal of child and family studies. (October 2013 - Present).


Reviewer, Panel Under. (August 2001 - Present).

Reviewer, Ad Hoc Reviewer, Family Relations. (September 1998 - Present).

Reviewer, Ad Hoc Reviewer, Sex Roles. (September 1995 - Present).

Reviewer, Ad Hoc Reviewer, Contemporary Family Therapy. (August 1993 - Present).

Committee Chair, TAMFT. (November 1993 - December 2012).

VIII. Presentations in the last six years

Invited


Accepted


Ivey, D. (Chair), bradley, p. (Presenter & Author), oliver, m. (Presenter & Author), nelson, k. (Presenter & Author), Annual Conference for the American Association for Marriage and Family Therapy, American Association for Marriage and Family Therapy, dallas texas, "ethical and legal issues in MFT


zubatsky, j. (Presenter & Author), harris, s. (Presenter & Author), busby, d. (Presenter & Author), Ivey, D., Annual Conference for the American Association for Marriage and Family Therapy, American Association for Marriage and Family Therapy, "perspectives of finances in premarital couples," International, Peer Reviewed/Refereed. (October 2010).

Anderson, A. (Presenter & Author), Ivey, D. (Presenter & Author), Smith, D. (Presenter & Author), Dial, S. (Presenter & Author), Banford, A. J. (Presenter & Author), AAMFT, Atlanta, GA, "Gender and violence in relationship to dyads and individuals.," National, Peer Reviewed/Refereed. (September 2010).

Ivey, D. (Chair), crane, r. (Presenter & Author), piercy, f. (Presenter & Author), wampler, k. (Presenter & Author), weiling, e. (Presenter & Author), stith, s. (Presenter & Author), karakurt, g. (Presenter & Author), Annual Conference for the American Association for Marriage and Family Therapy, American Association for Marriage and Family Therapy, "the essential elements of doctoral education in marriage and family therapy," International, Peer Reviewed/Refereed. (September 2010).


crane, r. (Presenter & Author), davenport, r. (Presenter & Author), wood, n. (Presenter & Author), Ivey, D. (Presenter & Author), Annual Conference for the American Association for Marriage and Family Therapy, American Association for Marriage and Family Therapy, "research within the context of political and financial advocacy for marriage and family therapists," International, Peer Reviewed/Refereed. (October 2009).

General


IX. Grant and Contract Activity for the last six years

Contract

Kimball, T. (Co-Principal), Ivey, D. (Co-Principal), "Medical Family Therapy: A Collaboration between the Covenant Children's Hospital and the TTU Accredited Graduate Programs in Marriage and Family Therapy," Sponsored by CH Foundation, Lubbock Texas, Local, $150,000.00. (August 1, 2009 - December 31, 2011).

Grant

Ivey, D., Prouty, A., "Medical Family Therapy with Pediatric Oncology," Sponsored by College of Human Sciences, Texas Tech University, $15,000.00. (January 1, 2013 - May 1, 2013).

Grant - Not Funded


Colwell, M. (Supporting), Fitzpatrick, J. (Principal), Ivey, D. (Supporting), Lauderdale, M. (Supporting), "Case Studies as an Active Learning Tool: 3-D Animation Technology to Enhance Education Practice," Sponsored by Institute of Education Sciences, $158,200.00.

Grant - Pending

Ivey, D.
X. Other professional activities during the last six years that contribute to graduate education

**Service/Engagement**

Faculty Mentor, Sponsor TTU MFT Student Organization. (January 2011 - Present).

Committee Member, MFT qualifying exams Committee. (August 1993 - Present).

Committee.

Committee.

Allied Staff.
GRADUATE FACULTY APPLICATION FORM
TEXAS TECH UNIVERSITY
Confirmation/Reappointment

Instructions: The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

Name: James Morris
Department/Unit: Applied & Professional Studies
Rank/Title: Associate Professor
Date Submitted: 11-07-2014
Appointment Date: 
Email: James.morris@ttu.edu
Phone: (806) 742-5050 ext. 256
Campus Mail Stop: 
Mailing Address: 
City/State: 
Zip: 


The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<tr>
<th>Degree</th>
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<tr>
<td>Field</td>
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</tr>
<tr>
<td>Institution</td>
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</tr>
<tr>
<td>Year Awarded</td>
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<tr>
<td>Institution</td>
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<td>Year Awarded</td>
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<th>Degree</th>
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<td>Institution</td>
<td>McMurry University</td>
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<td>Year Awarded</td>
<td>1976</td>
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II. Professional Experience, Academic and Nonacademic

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<th>Title</th>
<th>Associate Professor</th>
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<tbody>
<tr>
<td>Institution/Agency</td>
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<td>Year(s)</td>
<td>September 1, 2003 - Present</td>
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<table>
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<tr>
<th>Title</th>
<th>President</th>
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<tr>
<td>Institution/Agency</td>
<td>Texas Association for Marriage and Family Therapy</td>
</tr>
<tr>
<td>Year(s)</td>
<td>March 15, 2011 - March 15, 2012</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

IV. Other Service on Graduate Committees in the last six years (excluding III)

V. Graduate Courses Taught in the last six years

**Fall TTU 2011**
MFT 6395 Practicum in Marriage and Family Therapy

**Summer II TTU 2011**
MFT 6395 Practicum in Marriage and Family Therapy

VI. Published Research and Creative Activity in the last six years
Peer-Reviewed/Refereed

Journal Articles (Accepted)

James, M. MFT doctoral dissertations: A brief report. *Journal of Marital and Family Therapy.*


James, M. Reflections on therapy and the responsibility for outcome.. *Journal of Family Psychotherapy.*

VII. Current Participation in Professional Associations

Former President and Board Member, American Association for Marriage and Family Therapy. (August 1978 - Present).

Editor, Journal Editor, Texas Association for Marriage and Family Therapy, Austin, TX. (April 1, 2003 - Present).

Committee Chair, American Association for Marriage and Family Therapy, Alexandria, VA. (February 4, 2009 - February 4, 2011).

VIII. Presentations in the last six years

Accepted

James, M., Annual Meeting, American Association for Marriage and Family Therapy, Sacramento, CA, "It makes a difference: Systems or medical model approaches.." International, Peer Reviewed/Refereed. (October 1, 2009).

IX. Grant and Contract Activity for the last six years

Grant

James, M. (Principal), Hickerson, B. (Co-Principal), "Distance Learning and Telemedicine," Sponsored by USDA, Federal, $281,475.00. (February 10, 2009 - February 10, 2012).

X. Other professional activities during the last six years that contribute to graduate education

Service/Engagement

Committee Member, Search Committee. (January 19, 2010 - April 1, 2010).
University College representative, Graduate Council. (September 1, 2008 - Present).

Consulting

For Profit Organization, Austin Family Institute, Austin, TX. (June 12, 2009).
**GRADUATE FACULTY APPLICATION FORM**  
**TEXAS TECH UNIVERSITY**  
**Confirmation/Reappointment**

**Instructions:**  The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<th>Department/Unit</th>
<th>Rank/Title</th>
<th>Date Submitted</th>
<th>Appointment Date</th>
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<tbody>
<tr>
<td>Gunnur Karakurt</td>
<td>Applied &amp; Professional Studies</td>
<td></td>
<td>11-07-2014</td>
<td></td>
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<table>
<thead>
<tr>
<th>TTU Email</th>
<th>Phone</th>
<th>Campus Mail Stop</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="mailto:gunnur.karakurt@ttu.edu">gunnur.karakurt@ttu.edu</a></td>
<td>(765) 532-9429</td>
<td></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Mailing Address</th>
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The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<th>Field</th>
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<tr>
<td>Ph D</td>
<td>Department of Child Development and Family Studies</td>
<td>Purdue University</td>
<td>2008</td>
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<tr>
<td>MS</td>
<td>Department of Psychology</td>
<td>Middle East Technical University</td>
<td>2001</td>
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<tr>
<td>BS</td>
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<td>Middle East Technical University</td>
<td>1999</td>
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II. Professional Experience, Academic and Nonacademic

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<th>Title</th>
<th>Institution/Agency</th>
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<tr>
<td>Assistant Professor, Marriage &amp; Family Therapy</td>
<td>Texas Tech University, College of Human Sciences, Department of Applied and Professional Studies</td>
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<tr>
<td></td>
<td>August 2008 - Present</td>
</tr>
<tr>
<td>Facilitator</td>
<td>Parent-Child Connection Workshop, Purdue University, West Lafayette, IN</td>
</tr>
<tr>
<td></td>
<td>2004 - Present</td>
</tr>
<tr>
<td>Facilitator</td>
<td>Relationship Strengthens Couples Workshop, Purdue University, West Lafayette, IN</td>
</tr>
<tr>
<td></td>
<td>2004 - Present</td>
</tr>
<tr>
<td>Therapist</td>
<td>Juvenile Correctional Facility (Boys School), Plainfield, IN, EFFT with Sex Offender Adolescents</td>
</tr>
<tr>
<td></td>
<td>2003 - Present</td>
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</table>

Title: Therapist
Institution/Agency: Juvenile Correctional Facility (Girls School), Plainfield, IN, EFFT with Adolescents with Conduct Disorder and their Families
Year(s): 2003 - Present

III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

IV. Other Service on Graduate Committees in the last six years (excluding III)

<table>
<thead>
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<th>Student's Name</th>
<th>Involvement</th>
<th>Year Completed</th>
<th>Institution</th>
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<tr>
<td>Astin Houghtaling</td>
<td>Dissertation Committee Member</td>
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<tr>
<td>Erin Murphy</td>
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<tr>
<td>Megan Oka</td>
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<tr>
<td>Chad Graff</td>
<td>Dissertation Committee Member</td>
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V. Graduate Courses Taught in the last six years

**Summer I TTU 2010**
MFT 7000 Research

**Spring TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis

VI. Published Research and Creative Activity in the last six years

**Peer-Reviewed/Refereed**

**Journal Articles (Accepted)**


**Book Chapters (Accepted)**


**Non-Peer-Reviewed/Refereed**

**Journal Articles (Accepted)**


**VII. Current Participation in Professional Associations**

Reviewer, Grant Proposal, NIH Challenge Grants in Health and Science Research. (June 2009 - Present).


**VIII. Presentations in the last six years**
Accepted

Oka, M. (Presenter & Author), Whiting, J. (Author Only), Smith, D. (Author Only), Karakurt, G. (Author Only), Reifman, A. (Author Only), American Association for Marriage and Family Therapy, Atlanta, GA, "Negative communication and couple conflict: A process research study," National, Peer Reviewed/Refereed. (September 2010).


General


Karakurt, G., Cumbie, T., Bacon, A., Texas Tech University Human Sciences Week, Texas Tech University Human Sciences Week, Lubbock, Texas, "Interplay Among Romantic Jealousy, Gender, Attachment Anxiety, and Avoidance Among Turkish and American Adolescents." (October 2008).

IX. Grant and Contract Activity for the last six years

Grant
Karakurt, G., "Longitudinal study on intimate relationship violence via the lenses of individual, context and relationship factors," Sponsored by College of Human Sciences, Texas Tech University, Texas Tech University, $6,500.00. (September 2008 - August 2009).

**Grant - Pending**

Karakurt, G., "Emotionally Focused Couple Therapy for Intimate Partner Violence," Sponsored by National Institutes of Health, NIH Challenge Grants in Health Science Research (RC1), Other, $607,000.00.

X. Other professional activities during the last six years that contribute to graduate education

**Fellowships, Scholarships and Awards**

Excellence in Diversity and Equity Award, College of Human Sciences, Texas Tech University. (2009).

Extramural Research Promotion Award, Office of Research Services, Texas Tech University. (2009).

Outstanding Student/New Professional Abstract Award, 17th World Congress of International Family Therapy Association. (2009).
GRADUATE FACULTY APPLICATION FORM
TEXAS TECH UNIVERSITY
Confirmaion/Reappointment

**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<th>Department/Unit</th>
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<td>Tom G. Kimball</td>
<td>Community Family and Addiction Services</td>
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**TTU**

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<tr>
<td><a href="mailto:thomas.kimball@ttu.edu">thomas.kimball@ttu.edu</a></td>
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<td>1160</td>
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The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

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<td>Field</td>
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<tr>
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<tr>
<td>Institution</td>
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<td>Family Science</td>
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<td>Institution</td>
<td>Brigham Young University</td>
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<td>Year Awarded</td>
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II. Professional Experience, Academic and Nonacademic

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<th>Title</th>
<th>Director &amp; George C. Miller Family Regents Professor</th>
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<td>Center for the Study of Addiction and Recovery</td>
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<td>Year(s)</td>
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<td>Center for the Study of Addiction and Recovery</td>
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<td>Center for the Study of Addiction and Recovery</td>
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<th>Title</th>
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<td>Institution/Agency</td>
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<td>Year(s)</td>
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<td>Institution/Agency</td>
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<tr>
<td>Year(s)</td>
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<tr>
<th>Title</th>
<th>Assistant Dean</th>
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### Program Director

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<th>Year(s)</th>
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<tr>
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<td>Institution/Agency</td>
<td>Addictive Disorders and Recovery Studies Program</td>
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### III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

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<th>Involvement</th>
<th>Year Completed</th>
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<tbody>
<tr>
<td>Sara Arbonowski</td>
<td>Master's Thesis Committee Chair</td>
<td></td>
<td>Texas Tech University</td>
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<tr>
<td>Scott Walker</td>
<td>Dissertation Committee Chair</td>
<td></td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Will Young</td>
<td>Dissertation Committee Chair</td>
<td></td>
<td>Texas Tech University</td>
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<tr>
<td>Michael Negretti</td>
<td>Dissertation Committee Chair</td>
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<tr>
<td>David Servino</td>
<td>Dissertation Committee Chair</td>
<td>December 2011</td>
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<tr>
<td>Brandi Lucas</td>
<td>Dissertation Committee Chair</td>
<td>August 2010</td>
<td></td>
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<tr>
<td>Kim Kerksiek</td>
<td>Dissertation Committee Chair</td>
<td>August 2010</td>
<td></td>
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<tr>
<td>Amanda Harrington</td>
<td>Dissertation Defense Committee Chair</td>
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| Student's Name   | Kim Simon   |
| Involvement      | Dissertation Committee Chair |
| Year Completed   | December 2009 |
| Institution      |             |

| Student's Name   | Mark White  |
| Involvement      | Dissertation Committee Chair |
| Year Completed   | December 2009 |
| Institution      |             |

| Student's Name   | Tiffany Brown |
| Involvement      | Dissertation Committee Chair |
| Year Completed   | December 2009 |
| Institution      |             |

| Student's Name   | Kim Simon   |
| Involvement      | Doctoral Advisory Committee Chair |
| Year Completed   | 2009       |
| Institution      |             |

| Student's Name   | Faith Drew  |
| Involvement      | Dissertation Committee Chair |
| Year Completed   | 2008       |
| Institution      |             |

IV. Other Service on Graduate Committees in the last six years (excluding III)

| Student's Name   | John Dakin  |
| Involvement      | Dissertation Committee Member |
| Year Completed   | October 2012  |
| Institution      | Texas Tech University |

| Student's Name   | Ann Cassaraghi |
| Involvement      | Master's Thesis Committee Member |
| Year Completed   | June 2012  |
| Institution      | Texas Tech University |

| Student's Name   | Anandita Das  |
| Involvement      | Dissertation Committee Member |
| Year Completed   | 2008       |
| Institution      |             |

| Student's Name   | Jason Northrop |
| Involvement      |                 |
| Year Completed   |                 |
| Institution      |                 |
Involvement: Dissertation Committee Member
Year Completed: 2008
Institution

Student's Name: LynnAnne Joiner
Involvement: Dissertation Committee Member
Year Completed: 2008
Institution

V. Graduate Courses Taught in the last six years

Fall TTU 2014
MFT 8000 Doctor's Dissertation: Research in Marriage and Family Therapy
MFT 7000 Research: Research and Publication in Marriage and Family Therapy
ADRS 6301 Couple and Family Dynamics of Addiction
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

Summer II TTU 2014
MFT 8000 Doctor's Dissertation

Summer I TTU 2014
MFT 8000 Doctor's Dissertation

Spring TTU 2014
MFT 8000 Doctor's Dissertation
MFT 7000 Research
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

Fall TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
ADRS 6301 Couple and Family Dynamics of Addiction
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

Summer II TTU 2013
MFT 8000 Doctor's Dissertation

Summer I TTU 2013
MFT 8000 Doctor's Dissertation

Spring TTU 2013
MFT 8000 Doctor's Dissertation
ADRS 5311 Problems in Addictive Disorders and
Recovery Studies

**Fall TTU 2012**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
ADRS 6301 Couple and Family Dynamics of Addiction

**Summer I TTU 2012**
MFT 8000 Doctor's Dissertation

**Spring TTU 2012**
MFT 8000 Doctor's Dissertation

**Fall TTU 2011**
MFT 8000 Doctor's Dissertation
ADRS 6301 Couple and Family Dynamics of Addiction
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Summer II TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7000 Research

**Summer I TTU 2011**
MFT 8000 Doctor's Dissertation

**Spring TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Fall TTU 2010**
MFT 8000 Doctor's Dissertation
ADRS 6301 Couple and Family Dynamics of Addiction

**Summer II TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis

**Summer I TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis
VI. Published Research and Creative Activity in the last six years

**Peer-Reviewed/Refereed**

**Journal Articles (Accepted)**


Non-Peer-Reviewed/Refereed

Journal Articles (Accepted)

Shumway, S., Dakin, J. B., Smock, S., Kimball, T., Harris, K. The Development of the Hope and Coping in Recovery Scale (HCRS).


Books (Accepted)


VII. Current Participation in Professional Associations

Founding Board Member, Association of Recovery in Higher Education (ARHE). (July 2011 - Present).

member of association, Association or Recovery Schools (ARS). (2008 - Present).

Clinical Member, American Association for Marriage and Family Therapy. (October 2001 - Present).

Professional Member, Texas Association for Marriage and Family Therapy. (October 2001 - Present).

Member, Association for Psychological Sciences. (2010 - 2011).

Hopeful Way Foundation. (May 2012 - Present).

Board Member/Foundation, Association of Recovery In Higher Education. (July 2011 - Present).

Medical Family Therapy, Covenant Children's Hospital. (2005 - 2010).

VIII. Presentations in the last six years

Invited


Kimball, T. (Presenter & Author), Shumway, S. (Presenter & Author), American Association for Marriage and Family Therapists Spring Institute, AAMFT, Santa Fe, New Mexico, "Substance Use Disorders and Adolescents," National. (March 2013).


Kimball, T. (Presenter & Author), Workshop presented at the annual Grant Halliburton Foundation conference, Grant Halliburton Foundation, Dallas, Texas, "Back to the real world: Creating an environment for," State, Published Elsewhere. (September 2011).


Accepted


**General**


IX. Grant and Contract Activity for the last six years

Contract

Kimball, T. (Co-Principal), Ivey, D. (Co-Principal), "Medical Family Therapy: A Collaboration between the Covenant Children's Hospital and the TTU Accredited Graduate Programs in Marriage and Family Therapy," Sponsored by CH Foundation, Lubbock Texas, Local, $150,000.00. (August 1, 2009 - December 31, 2011).

Grant

Harris, K. (Principal), Kimball, T. (Co-Principal), Baker, A. K. (Co-Principal), Smock, S. (Co-Principal), "Methodology for Effectively Meeting the Needs of Recovering Students," Sponsored by U.S. Department of Education, Federal, $95,000.00. (September 1, 2009 - August 31, 2010).


Kimball, T. (Co-Principal), Harris, K. (Co-Principal), Baker, A. (Co-Principal), "Best Practices in Collegiate Recovery Conference," Sponsored by Department of Health and Human Services, Local, $49,920.00. (October 1, 2008 - Present).

Sponsored Research


Harris, K. (Principal), Smock, S. (Supporting), Kimball, T. (Supporting), "Healthiest Communities and Childhood," Sponsored by Covenant Health System, Local, $1,000,000.00. (July 15, 2008 - July 13, 2011).
Grant - Not Funded


X. Other professional activities during the last six years that contribute to graduate education

Fellowships, Scholarships and Awards

Professing Excellence Award, Texas Tech University, University Student Housing. (May 2013).

College of Human Sciences Chancellor’s Distinguished Teaching Award, Texas Tech University College of Human Sciences. (2012).

Inductee to the Texas Tech Teaching Academy, Texas Tech Teaching Academy. (2010).

Spencer A. Wells Award, College of Human Sciences. (2009).

New Format for existing course

Fall TTU 2010

"Couple and Family Dynamics of Addiction," ADRS 6301-001. New lecture and reaction writing format to class.

Service/Engagement

Committee Member, Scholarship Committee. (August 2009 - Present).

Committee Member, Faculty Council. (September 2012 - Present).

Committee Member, Teaching Effectiveness. (September 2012 - Present).

Committee Member, Promotion and Tenure Committee. (August 2011 - Present).


Committee Chair, College Curriculum Committee. (August 2008 - August 2010).

Committee Chair, Dean's Executive Team. (August 2008 - August 2009).

Committee Member, Tenure Hearing Committee. (August 2011 - Present).

Core Communication Committee. (August 2008 - Present).

RUMP. (2008 - 2010).


Medical Family Therapy, Covenant Children's Hospital, Lubbock, Texas. (2005 - 2010).

**Consulting**


For Profit Organization, The Ranch at Dove Tree, Lubbock, Texas. (September 2006 - February 2012).
**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<th>Department/Unit</th>
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<tr>
<td>Mei-Ju (Meryl) Ko</td>
<td>Community Family and Addiction Services</td>
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<tr>
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<tr>
<td>Assistant Professor</td>
<td>11-07-2014</td>
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<tr>
<th>Email</th>
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<th>Campus Mail Stop</th>
</tr>
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<tbody>
<tr>
<td><a href="mailto:meryl.ko@ttu.edu">meryl.ko@ttu.edu</a></td>
<td>(806) 742-5050</td>
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The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<th>Field</th>
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<tr>
<td>Ph D</td>
<td>Child Development and Family Studies</td>
<td>Purdue University</td>
<td>2010</td>
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<tr>
<td>M Ed</td>
<td>Counseling, Family and Human Services</td>
<td>University of Oregon</td>
<td>2004</td>
</tr>
<tr>
<td>BS</td>
<td>Applied Psychology</td>
<td>Fu-Jen Catholic University</td>
<td>2001</td>
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II. Professional Experience, Academic and Nonacademic

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<th>Title</th>
<th>Institution/Agency</th>
<th>Year(s)</th>
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<tr>
<td>Assistant Professor</td>
<td>Texas Tech University, Department of Applied and Professional Studies (Lubbock, TX)</td>
<td>2009 - Present</td>
</tr>
<tr>
<td>Family Therapist Intern</td>
<td>Clarian Arnett Cancer Care Center (Lafayette, IN)</td>
<td>2008 - 2009</td>
</tr>
<tr>
<td>Research Assistant; ITSI</td>
<td>Purdue University (West Lafayette, IN)</td>
<td>May 2006 - September 2008</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

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<tbody>
<tr>
<td>Amanda Szarzynski</td>
<td>Dissertation Committee Chair</td>
<td>May 31, 2013</td>
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IV. Other Service on Graduate Committees in the last six years (excluding III)

<table>
<thead>
<tr>
<th>Student's Name</th>
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<td>Involvement</td>
<td>Dissertation Committee Member</td>
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<tr>
<th>Student's Name</th>
<th>Josh Novak</th>
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<tr>
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<td>Master's Thesis Committee Member</td>
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<td>Year Completed</td>
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<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Hye-Jin Kim</th>
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<table>
<thead>
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<th>Student's Name</th>
<th>Hsing-Hui Lin</th>
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<td>Involvement</td>
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<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Bradshaw Spenser</th>
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<tr>
<td>Involvement</td>
<td>Doctoral Advisory Committee Member</td>
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<td>May 31, 2011</td>
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<td>Institution</td>
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V. Graduate Courses Taught in the last six years

**Spring TTU 2014**
- MFT 8000 Doctor's Dissertation
- MFT 7000 Research
- MFT 6370 Diversity in Marriage and Family Therapy

**Fall TTU 2013**
- MFT 8000 Doctor's Dissertation
- MFT 7000 Research
- MFT 6395 Practicum in Marriage and Family Therapy
- MFT 6342 Advanced Family Therapy Topics: Child/Adolescent

**Summer II TTU 2013**
- MFT 8000 Doctor's Dissertation
- MFT 6395 Practicum in Marriage and Family Therapy

**Spring TTU 2013**
- MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6370 Diversity in Marriage and Family Therapy

**Fall TTU 2012**
MFT 8000 Doctor's Dissertation
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6342 Advanced Family Therapy Topics: Child/Adolescent

**Summer II TTU 2012**
MFT 6395 Practicum in Marriage and Family Therapy

**Summer I TTU 2012**
MFT 8000 Doctor's Dissertation
MFT 7000 Research

**Spring TTU 2012**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6370 Diversity in Marriage and Family Therapy

**Fall TTU 2011**
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6342 Advanced Family Therapy Topics: Child/Adolescent

**Summer II TTU 2011**
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

**Summer I TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7000 Research

**Spring TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6370 Diversity in Marriage and Family Therapy
MFT 6000 Master's Thesis

**Summer II TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6000 Master's Thesis

**Summer I TTU 2010**
VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed

Journal Articles (Accepted)


Non-Peer-Reviewed/Refereed

Conference Proceedings (Accepted)

Member, Society for Research in Child Development. (November 15, 2010 - Present).

Member, National Council on Family Relations. (November 2004 - Present).

Member, American Association for Marriage and Family Therapy. (December 2003 - Present).

Member, Indiana Association for Marriage and Family Therapy. (2004 - 2009).

Reviewer, Ad Hoc Reviewer, Journal of Marriage and Family Therapy. (September 2011 - Present).


VIII. Presentations in the last six years

Invited

Ko, M.-J. (Presenter & Author), Yang, I. (Presenter Only), International Faculty Development Fellowship in Family Medicine, Baylor College of Medicine, Department of Family & Community Medicine, Houston, Texas, "Tools for Breaking Bad News to Patients," International. (November 1, 2012).

Prouty, A. (Presenter & Author), Helmeke, K. B. (Presenter & Author), Bermudez, J. Maria (Presenter & Author), Ko, M.-J. (Presenter & Author), 2011 AAMFT Conference, American Association for Marriage and Family Therapy, Fort Worth, TX, "Intersections of Human Diversity within MFT Supervision," International, Peer Reviewed/Refereed, Published in Proceedings. (September 25, 2011).

Accepted


Prouty, A. (Presenter & Author), Bermudez, J. Maria (Presenter & Author), Helmeke, K. B. (Presenter & Author), Ko, M.-J. (Presenter & Author), 2012 Annual AAMFT Conference, American Association for Marriage and Family Therapy, North Carolina, "Intersections of Human Diversity within MFT Training & Supervision," International, Peer Reviewed/Refereed, Published in Proceedings. (September 2012).


Kose, O. (Presenter & Author), Karakurt, G. (Presenter & Author), Ko, M.-J. (Presenter & Author), American Association for Marriage and Family Therapy Conference, AAMFT, Dallas, "Attachment styles and substance abuse in a high-risk sample.," Peer Reviewed/Refereed. (September 24, 2011).

Bradshaw, S. (Presenter & Author), Ko, M.-J. (Presenter & Author), American Association of Marriage and Family Therapy Conference, AAMFT, Dallas, Texas, "Stress, depression, and parental psychological control.," Peer Reviewed/Refereed. (September 24, 2011).

Ko, M.-J. (Presenter Only), American Association of Marriage and Family Therapy 2010 Annual Conference, American Association of Marriage and Family Therapy, Atlanta, "Associations among Coparenting, Parenting, and Child Outcome," National, Peer Reviewed/Refereed, Published in Proceedings, Published Elsewhere. (September 24, 2010).


General


IX. Grant and Contract Activity for the last six years

Grant

Ko, M.-J. (Principal), Prouty, A. (Co-Principal), "Couples' Coping with Cancer," Texas Tech University, $5,000.00. (October 1, 2011 - July 31, 2013).

Ko, M.-J., "Family Adjustment to Childhood Cancer," Sponsored by College of Human Science, Texas Tech University, $5,000.00. (October 1, 2010 - May 31, 2011).

Grant - Not Funded

Ko, M.-J. (Principal), "Co-parenting Experiences in Same-Sex Parents," Sponsored by The William Institute, Private, $2,600.00. (July 1, 2013 - Present).


Ko, M.-J., "Trauma Focused-Cognitive Behavioral Therapy for Children Exposed to Domestic Violence," Sponsored by The Hogg Foundation, State, $15,000.00.

X. Other professional activities during the last six years that contribute to graduate education

New Format for existing course
Fall TTU 2012

"Advanced Family Therapy Topics: Child/Adolescent," MFT 6342-001.

Spring TTU 2012

"Diversity in Marriage and Family Therapy," MFT 6370-001.

Summer II TTU 2010

"Practicum in Marriage and Family Therapy," MFT 6395-001.

Spring TTU 2010

"Practicum in Marriage and Family Therapy," MFT 6395-001.

New Course Preparation Work

Spring TTU 2010

"Diversity in Marriage and Family Therapy," MFT 6370-001.

Service/Engagement


Committee Member, MFT Faculty Search Committee. (January 15, 2010 - March 1, 2010).

Committee Member, Technology Committee. (September 1, 2012 - Present).

Faculty Advisor, Institute for Child and Family Studies in HDFS. (October 2012 - Present).

Member, Taiwan Psychology Network.

Student Consultant, Texas Tech Chinese Student Association, Lubbock, TX.

Consulting

Academic, Dr. Bonnie Lee/ University of Lethbridge, Alberta, Canada. (March 20, 2012 - April 1, 2012).
**GRADUATE FACULTY APPLICATION FORM**  
**TEXAS TECH UNIVERSITY**  
**Confirmation/Reappointment**

**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<tr>
<th>Name: Nichole N. Morelock</th>
<th>Department/Unit: Community Family and Addiction Services</th>
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<tbody>
<tr>
<td>Rank/Titel: Assistant Professor</td>
<td>Date Submitted: 11-07-2014</td>
</tr>
<tr>
<td>TTU Email: <a href="mailto:catherine.morelock@ttu.edu">catherine.morelock@ttu.edu</a></td>
<td>Phone: (806) 742-3060 ext. 245</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>Campus Mail Stop: 1250</td>
</tr>
<tr>
<td>City/State</td>
<td>Zip</td>
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Appointment Date: 2007
The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<tr>
<th>Degree</th>
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<td>Field</td>
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<tr>
<td>Institution</td>
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<td>Year Awarded</td>
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<thead>
<tr>
<th>Degree</th>
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<td>Institution</td>
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<td>Field</td>
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<td>Institution</td>
<td>Missouri State University</td>
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<td>1995</td>
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II. Professional Experience, Academic and Nonacademic

| Title | Assistant Professor, Associate Chair, CFAS Program Director |
| Institution/Agency | Texas Tech University College of Human Sciences |
| Year(s) | January 2012 - Present |

| Title | Associate Chair, Program Director, Instructor |
| Institution/Agency | Texas Tech University College of Human Sciences, Department of Applied and Professional Studies |
| Year(s) | September 2008 - Present |

| Title | Director, Family Therapy Clinic |
| Institution/Agency | Texas Tech University College of Human Sciences, Department of Applied and Professional Studies |
| Year(s) | September 2006 - August 2008 |

III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

IV. Other Service on Graduate Committees in the last six years (excluding III)

<p>| Student's Name | Nicole Mayo |
| Involvement | Dissertation Committee Member |</p>
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<td>Mark White</td>
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V. Graduate Courses Taught in the last six years

**Fall TTU 2014**
MFT 6000 Master's Thesis: Research in Marriage and Family Therapy

**Summer I TTU 2014**
MFT 8000 Doctor's Dissertation

**Spring TTU 2011**
MFT 8000 Doctor's Dissertation

**Summer II TTU 2010**
MFT 8000 Doctor's Dissertation

**Summer I TTU 2010**
MFT 8000 Doctor's Dissertation

**Spring TTU 2010**
MFT 8000 Doctor's Dissertation

VI. Published Research and Creative Activity in the last six years

VII. Current Participation in Professional Associations
Member, Texas Association for Marriage and Family Therapy. (February 24, 2006 - Present).

Clinical Member, American Association for Marriage and Family Therapy. (February 2006 - Present).

Reviewer, Conference Paper, American Association for Marriage and Family Therapy. (December 29, 2013).

Committee Member, Ethics Committee, Texas Association of Marriage & Family Therapists, Texas. (September 2010 - December 2012).

Reviewer, Conference Paper, American Association for Marriage and Family Therapy. (December 2011).

VIII. Presentations in the last six years

Accepted


IX. Grant and Contract Activity for the last six years

X. Other professional activities during the last six years that contribute to graduate education

Service/Engagement

Committee Chair, CFAS Department Scholarship Committee. (September 1, 2012 - Present).

Emergency Action Back-up Coordinator, Emergency Action Coordinator. (September 1, 2012 - Present).
Committee Member, CFAS Executive Committee. (September 1, 2011 - Present).

Degree Program Coordinator. HS - Community, Family, and Addiction Services (BS). (September 2008 - Present).

Recruitment Activity, University Day Participant. (October 15, 2012).

Committee Member, APS Scholarship Committee, CFAS Subgroup. HS - Community, Family, and Addiction Services (BS). (August 31, 2012).

Committee Chair, Scholarship Committee. (August 2008 - August 31, 2012).

Committee Member, APS Executive Committee. (January 1, 2011 - August 31, 2011).

Committee Member, COHS Faculty Council. (September 2013 - Present).

Committee Member, COHS Scholarship Committee. (September 2009 - Present).

Committee Member, COHS Curriculum Committee. (September 2008 - Present).

Committee Member, Grade Appeal Committee. (October 18, 2013).

Committee Member, Distinguished Alumni Nominating Committee. (September 1, 2011 - August 2012).

Committee Member, SACSCOC Reaffirmation Team 5: Student Services. (February 2013 - Present).

Attendee, Meeting, Tech Assessment Network (TAN). (September 2010 - Present).

Participant, Inauguration of President Nellis. (December 11, 2013).

Participant, Majors and Minors Fair. (October 31, 2013).

Participant, University Day. (October 14, 2013).


Attendee, Graduation. (May 18, 2013).

Portfolio Reviewer, TEACH Fellowship Program Portfolio Review. (May 8, 2013).
Attendee, Award Ceremony, Tech Parents Association Awards Breakfast. (April 6, 2013).

Committee Member, University Assessment Committee. (August 2009 - May 2010).

Officer, Secretary, Children's Advocacy Center of the South Plains, Lubbock, Texas. (July 2013 - Present).

Board Member, Children's Advocacy Center, Lubbock, Texas. (December 2011 - Present).


Participant, South Plains Career Expo, Lubbock, Texas. (October 30, 2013).

Guest Speaker, United Way Speakers Bureau, Lubbock, Texas. (October 2012 - November 2012).

Consulting

For Profit Organization, Private Practice in MFT. (August 2006 - November 2013).
Instructions: The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

Name: Anne Prouty
Department/Unit: Community Family and Addiction Services
Rank/TITLE: Associate Professor
Date Submitted: 11-07-2014
Appointment Date:
Email: anne.prouty@ttu.edu
Phone: 
Campus Mail Stop: 41210
Mailing Address: 
City/State Zip: 

The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<th>Degree</th>
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<th>Year Awarded</th>
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<tr>
<td>MS</td>
<td>Marriage and Family Therapy</td>
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<td>Medicine Courses (all courses for the M.D., not 2nd or 3rd year rotations)</td>
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<td>BS</td>
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II. Professional Experience, Academic and Nonacademic

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<td>Full Professor</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

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<tr>
<td>Olivia Hamlin</td>
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<td>2010</td>
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<td>Student's Name</td>
<td>Joslyn Armstrong</td>
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<th>Shannon Dial</th>
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<th>Hye Jin Kim</th>
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<th>Student's Name</th>
<th>Yudum Akyil</th>
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### IV. Other Service on Graduate Committees in the last six years (excluding III)

<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Kruti Bhakta</th>
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<td>Dissertation Committee Member</td>
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<tr>
<th>Student's Name</th>
<th>Hannah Korkow</th>
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<td>Institution</td>
<td>Texas Tech University</td>
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</table>
Student's Name  Timothy Parker
Involvement   Dissertation Committee Member
Year Completed  
Institution   Texas Tech University

Student's Name  Amber Anderson
Involvement   Dissertation Committee Member
Year Completed  June 16, 2014
Institution   Texas Tech University

Student's Name  Cody Heath
Involvement   Master's Thesis Committee Member
Year Completed  December 2013
Institution   Texas Tech University

Student's Name  Nicolle Mayo
Involvement   Dissertation Committee Member
Year Completed  June 2013
Institution   Texas Tech University

Student's Name  Alyssa Banford
Involvement   Dissertation Committee Member
Year Completed  August 2011
Institution   Texas Tech University

V. Graduate Courses Taught in the last six years

Fall TTU 2014
MFT 8000 Doctor's Dissertation: Research in Marriage and Family Therapy
MFT 7000 Research: Research and Publication in Marriage and Family Therapy
MFT 6311 Contemporary Directions in Marriage and Family Therapy
MFT 6000 Master's Thesis: Research in Marriage and Family Therapy
MFT 5300 Introduction to Marriage and Family Therapy Practice

Summer II TTU 2014
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Summer I TTU 2014
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Spring TTU 2014
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6397 Supervision Practicum in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy

Fall TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 5300 Introduction to Marriage and Family Therapy Practice

Summer II TTU 2013
MFT 8000 Doctor's Dissertation

Summer I TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Spring TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6397 Supervision Practicum in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy

Fall TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6311 Contemporary Directions in Marriage and Family Therapy
MFT 5300 Introduction to Marriage and Family Therapy Practice

Summer II TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Summer I TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6342 Advanced Family Therapy Topics

Spring TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6397 Supervision Practicum in Marriage and Family Therapy
Fall TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 5300 Introduction to Marriage and Family Therapy Practice

Summer II TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research

Summer I TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Spring TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis

VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed

Journal Articles (Accepted)


Prouty, A. Co-constructing Courses with MFT Graduate Students.


**Book Chapters (Invited)**


**Book Chapters (Accepted)**


**Non-Peer-Reviewed/Refereed**

**Book Chapters (Accepted)**

VII. Current Participation in Professional Associations

Member, American Family Therapy Academy. (June 2010 - Present).


Member, Groves Conference on the Family. (2004 - Present).

Clinical Fellow & Approved Supervisor, American Association for Marriage & Family Therapy. (September 1991 - Present).

Member, National Council on Family Relations. (2009 - 2013).

Member, Medical Family Therapy Competencies Development Group, on-line, conference calls. (July 2013 - Present).


Academic Program Reviewer, Commission on Accreditation for Marriage & Family Therapy Education. (November 2010 - Present).

Reviewer, Ad Hoc Reviewer, Journal of Marital and Family Therapy. (October 2004 - Present).


Editor, Senior Editor, Journal of Feminist Family Therapy, PA. (June 1, 2001 - December 31, 2013).

Reviewer, External Tenure, Lewis and Clark University, Portland, OR. (July 2013 - August 2013).

Committee Member, Editor Search Committee, JFFT. (September 2011 - February 2013).

Reviewer, External Tenure, Alliant University's California School of Professional Psychology, California. (December 15, 2012 - January 15, 2013).


Reviewer, External Tenure, Kansas State University, Manhattan, KS. (July 2011 - August 2011).


VIII. Presentations in the last six years

Invited

Prouty, A. (Presenter & Author), Helmeke, K. B. (Presenter & Author), Bermudez, J. Maria (Presenter & Author), Ko, M.-J. (Presenter & Author), 2011 AAMFT Conference, American Association for Marriage and Family Therapy, Fort Worth, TX, "Intersections of Human Diversity within MFT Supervision," International, Peer Reviewed/Refereed, Published in Proceedings. (September 25, 2011).


Accepted


Yang, I. (Presenter & Author), Ko, M.-J. (Presenter & Author), Prouty, A. (Presenter & Author), 2013 Annual AAMFT Conference, American Association


Prouty, A. (Presenter & Author), Bermudez, J. Maria (Presenter & Author), Helmeke, K. B. (Presenter & Author), Ko, M.-J. (Presenter & Author), 2012 Annual AAMFT Conference, American Association for Marriage and Family Therapy, North Carolina, "Intersections of Human Diversity within MFT Training & Supervision," International, Peer Reviewed/Refereed, Published in Proceedings. (September 2012).

Kadieva, V. (Presenter & Author), Kuehl, B. (Author Only), Prouty, A. (Author Only), TTU Graduate Student Research Fair, TTU, TTU Library, "Types of Praise Used by MFT Supervisors and their Influences on MFT Supervisees," Local. (April 2012).


**General**


IX. Grant and Contract Activity for the last six years

Grant

Whiting, J. (Co-Principal), Smith, D. (Principal), Prouty, A. (Co-Principal), "Neuroimaging of female victims of intimate partner violence.," Sponsored by College of Human Sciences, Texas Tech University, $10,000.00. (June 2013 - September 2013).


Ko, M.-J. (Principal), Prouty, A. (Co-Principal), "Couples' Coping with Cancer," Texas Tech University, $5,000.00. (October 1, 2011 - July 31, 2012).

Ivey, D., Prouty, A., "Medical Family Therapy with Pediatric Oncology," Sponsored by College of Human Sciences, Texas Tech University, $15,000.00. (January 1, 2013 - May 1, 2013).


Prouty, A. (Principal), "New Faculty Start-up Funding," Texas Tech University, $41,000.00. (September 1, 2011 - July 30, 2012).
Prouty, A. (Principal), "New Faculty Start-up Funding," Texas Tech University, $41,602.00. (September 1, 2010 - July 30, 2011).

Prouty, A. (Co-Principal), "Private foundation grant for Antioch Clinic," Sponsored by C & S Nourishing Change, Private, $850.00. (February 2010 - June 2010).

Prouty, A. (Supporting), "Vision 2020 Evaluation and Assessment," Sponsored by Cheshire Medical Center, Keene, NH, Private, $77,819.00. (January 2010).


**Grant - Not Funded**


Prouty, A., Cobos, E., Purdom, A., "Families & Survivorship: Associations Among Relationship Health, Patient's Quality of Life, and Family Communication," Sponsored by TTU and TTU HSC, Texas Tech University, $25,000.00.

X. Other professional activities during the last six years that contribute to graduate education

**Fellowships, Scholarships and Awards**

TeMPO Fellow, TTU Teaching Academy and the TLPDC. (August 11, 2014).

TTU Alumnae COHS New Faculty Award, TTU Alumnae. (August 2013).

Legacy of Leadership Award, College of Human Ecology, East Carolina University. (2009).

**New Format for existing course**

**Fall TTU 2014**
"Contemporary Directions in Marriage and Family Therapy," MFT 6311-001. Change topics of study completely to update the course and add teaching elements to it for our future accreditation

Spring TTU 2014

"Supervision Practicum in Marriage and Family Therapy," MFT 6397-001. Update readings to include theories of adult learning (andragogy), especially experiential adult learning. Since 6395 required two practica, I split the 6397 students between the two sections of 6395 students to supervise - so I attend both 6395 nights in the clinic to provide live sup of sup equally among 6397 students. book chapters and a few new articles including one of mine on using Kolb's model of adult learning with MFT new therapists. Live observation of these students' supervision of masters level new therapists.

Fall TTU 2013

"Introduction to Marriage and Family Therapy Practice," MFT 5300-001. Added more LGBT family and more plural family examples Used a new Sue Johson EFT video - students really liked it Added new section on how to conceptualize and write treatment plans and case notes

Spring TTU 2013

"Practicum in Marriage and Family Therapy," MFT 6395-002. We have merged two sections into one for an extremely large clinic load for me. We have rearranged course delivery to accommodate, but this is a trial semester. All 6397 students will be attending 6395 clinic night. I will have to provide live supervision to 6395 therapists and live sup of sup to 6397 students, also. Have constructed a new "theme of the week" to prioritize particular clinical themes that are essential for the 6395 students to learn and the 6397 students to teach. I hope this will prevent masters students from feeling like they are doing something wrong if everyone is focusing on the same theme. For example, theme one is the process of helping clients to rule out medical conditions that might be contributing to mental health difficulties. Thus also reminding all to get Release of Information forms completed during first sessions. The entire overlap of 6397 students with 6395 students and not only assigning one 6397 to each, but allowing 6395 students to experience another doctoral student's supervision on practicum night should enhance their experience of system theory principles. Our service to community citizens remains central to our clinical mission. One of the masters students is helping me to update our community resource list and one of our alumnae is helping our clients get into psychiatric consultation appointments faster.

"Supervision Practicum in Marriage and Family Therapy," MFT 6397-001. Totally reconfigured course delivery and schedule. I also am strongly encouraging all 6397 students to attend as many of the 6395 practica nights as they can. This
should greatly enhance their confidence and skills as I will allow them to supervise 6395 students other than their own. I have added "theme of the week" to 6395 and 6397. In 6397 we talk about how this theme could be taught differently in different clinical settings, with therapists at different developmental levels and using each of the 6397 supervision models. I am emphasizing the adult learner and how to teach more in this year's 6397 course. Service to the community's citizens and families remains our most sincere mission. I believe providing all of the beginning 6395 therapists with live supervision from both me and the 6397 doctoral beginner supervisors enhances the quality of our services and provides a much more fun learning environment for both 6395 and 6397 students.

**Summer II TTU 2012**

"Practicum in Marriage and Family Therapy," MFT 6395-002.

**Spring TTU 2012**

"Doctor's Dissertation," MFT 8000-D04.

**Fall TTU 2011**

"Introduction to Marriage and Family Therapy Practice," MFT 5300-001. Used student directed learning ala Weimer instead of pre-choosing the reading schedule. Required much more preparation but it generated more student buy-in and more personally meaningful learning for graduate level adult learners. new textbooks and journal articles Role plays in the FTC clinic, mentorship from doctoral students in the FTC.

**New Course Preparation Work**

**Fall TTU 2013**

"Research:Special Independent Study," MFT 7000-020. Doctoral student was involved in course preparation and co-construction process with masters students and me. Then I used live course co-teaching and post-class feedback discussion about "how it went". Student completed a summarative teaching portfolio.

**Fall TTU 2012**

"Contemporary Directions in Marriage and Family Therapy," MFT 6311-001.

**Summer I TTU 2012**

"Advanced Family Therapy Topics," MFT 6342-001. International policies and current cutting edge topics and their intersections with gender Many new videos
and video clips; new small group and individual exercises; doctoral student mini-teaching opportunities

**Spring TTU 2012**

"Doctor's Dissertation," MFT 8000-004. Will graduate three doctoral students this summer. The first doctoral MFT to graduate from Antioch University and two Doctoral MFTs from our TTU program. Three new topics for me - so all required a lot of new work. Taught two of them Interpretive Phenomenology.

"Supervision Practicum in Marriage and Family Therapy," MFT 6397-001.

**Summer I TTU 2011**

"Practicum in Marriage and Family Therapy," MFT 6395-003.

**Service/Engagement**

Committee Chair, Scholarship Committee - MFT Section. (March 2011 - Present).

Committee Chair, CFAS - MFT Faculty Search Committee. (August 2013 - May 2014).

Committee Member, Faculty Promotion Review. (September 2011 - December 2013).

Committee Member, CFAS Department Journal Ranking Committee. (May 2012 - March 2013).

Committee Chair, ANE Search Committee for MFT Clinic Admin Director. (2009).

Committee Member, COHS Faculty Council. (September 2013 - Present).

Committee Member, COHS Commencement Committee. (September 2012 - Present).

Committee Member, Teaching Effectiveness. (September 1, 2011 - August 2013).

Dean's Representative to Dissertation Defense, HDFS Frederick Dissertation. (June 24, 2011).

Faculty Mentor, TLPDC TEACH Program. (November 2012 - December 2012).

Committee Member, Antioch NE Committee to Establish Campus IRB. (2008).

**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<td>Sterling Shumway</td>
<td>Community Family and Addiction Services</td>
<td>Professor</td>
<td>11-07-2014</td>
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<td><a href="mailto:sterling.shumway@ttu.edu">sterling.shumway@ttu.edu</a></td>
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The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform. Please make any additions or corrections in DigitalMeasures and reprint the application. If being reconsidered after three years of probation, please use the “provisional” application.

I. Academic Background

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<td>BA</td>
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<td>Chairperson</td>
<td>Community, Family, and Addiction Services</td>
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<td>Family Program Director</td>
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<td>January 2011 - Present</td>
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<th>Year(s)</th>
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<tr>
<td>Co-Creator and Co-Facilitator of Multi-Family Groups</td>
<td>The Ranch at Dove Tree, Lubbock, Texas</td>
<td>August 2006 - Present</td>
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<tr>
<td>Evelyn M. Davies Regent's Professor and Director of Research</td>
<td>College of Human Sciences, Department of Applied and</td>
<td>2006 - Present</td>
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<td></td>
<td>Professional Studies, Center for the Study of Addiction,</td>
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<tr>
<td>Associate Professor</td>
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Institution/Agency: Department of Applied and Professional Studies, Center for the Study of Addiction and Recover, Texas Tech University
Year(s): January 2004 - Present
Title: AAMFT Approved Supervisor
Institution/Agency: Texas Tech University Health Sciences Center, Department of Neuropsychiatry
Year(s): 1999 - Present
Title: Therapist
Institution/Agency: Private Practice, Lubbock, Texas
Year(s): 1996 - Present
Title: ADRS Program Director
Institution/Agency: Texas Tech University
Year(s): September 2009 - September 2014
Title: Program and Marketing Director
Institution/Agency: The Ranch at Dover Tree, Lubbock, Texas
Year(s): August 2006 - December 2010
Title: Ex Officio Voting Member
Institution/Agency: Council of Portfolio Management Fellows, PFP
Year(s): 2007 - 2009
Title: Department Chair
Institution/Agency: Department of Applied and Professional Studies, Texas Tech University
Year(s): July 2007 - August 2009

III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

Student's Name: Spencer Bradshaw
Involvement: Dissertation Committee Chair
Year Completed: 2007
Institution: Texas Tech University

Student's Name: Spencer Bradshaw
Involvement: Doctoral Advisory Committee Chair
Year Completed: 2010
Institution: Texas Tech University

Student's Name: John Dakin
Involvement: Dissertation Committee Chair

Year Completed 2013
Institution
Student's Name Jason Northrup
Involvement Dissertation Committee Chair
Year Completed 2009
Institution

IV. Other Service on Graduate Committees in the last six years (excluding III)

Student's Name Terrance Martin
Involvement Dissertation Committee Member
Year Completed 2013
Institution Texas Tech University

Student's Name Benjamin Cummings
Involvement Dissertation Committee Member
Year Completed 2013
Institution Texas Tech University

Student's Name Terrance Martin
Involvement Dissertation Committee Member
Year Completed 2012
Institution Texas Tech University

Student's Name David Servino
Involvement Dissertation Committee Member
Year Completed 2011
Institution

Student's Name Chad Graff
Involvement Dissertation Committee Member
Year Completed 2009
Institution

Student's Name Kim Bridges
Involvement Dissertation Committee Member
Year Completed 2008
Institution

Student's Name Sonja Britt
Involvement Dissertation Committee Member
Year Completed 2008
Institution

V. Graduate Courses Taught in the last six years
Fall TTU 2014
MFT 7000 Research: Research and Publication in Marriage and Family Therapy

Summer II TTU 2014
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

Summer I TTU 2014
MFT 8000 Doctor's Dissertation

Spring TTU 2014
MFT 8000 Doctor's Dissertation

Fall TTU 2013
MFT 8000 Doctor's Dissertation

Summer II TTU 2013
MFT 8000 Doctor's Dissertation

Summer I TTU 2013
MFT 8000 Doctor's Dissertation

Spring TTU 2013
ADRS 6315 Systemic Treatments and Addictions

Fall TTU 2012
MFT 8000 Doctor's Dissertation

Spring TTU 2012
MFT 8000 Doctor's Dissertation

Summer I TTU 2011
MFT 8000 Doctor's Dissertation

Spring TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis
ADRS 6315 Systemic Treatments and Addictions
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

Summer II TTU 2010
MFT 8000 Doctor's Dissertation
MFT 7000 Research
VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed

Journal Articles (Accepted)


Non-Peer-Reviewed/Refereed

Journal Articles (Accepted)

Shumway, S., Dakin, J. B., Smock, S., Kimball, T., Harris, K. The Development of the Hope and Coping in Recovery Scale (HCRS).


**Books (Accepted)**


**VII. Current Participation in Professional Associations**

Member, Texas Tech Teaching Academy.

Member, Association of Recovery Schools. (January 2008 - Present).

Member, American Association of Marriage and Family Therapy. (1997 - Present).

Member, Texas Association of Marriage and Family Therapy. (1996 - Present).


**VIII. Presentations in the last six years**

**Invited**


Kimball, T. (Presenter & Author), Shumway, S. (Presenter & Author), American Association for Marriage and Family Therapists Spring Institute, AAMFT, Santa

468
Fe, New Mexico, "Substance Use Disorders and Adolescents," National. (March 2013).


Accepted


General

Shumway, S., AAMFT Annual Conference, "A phenomenological look at the effects of gaming on marriage.," National, Peer Reviewed/Refereed. (September 2010).


Shumway, S., Texas Association of Marriage and Family Therapy Annual Conference, Texas Association of Marriage and Family Therapy, Fort Worth, Texas, "Using multi-family groups in treatment and recovery," State, Peer Reviewed/Refereed. (January 2009).
IX. Grant and Contract Activity for the last six years

Grant

Korb, B. (Principal), Durband, D. (Co-Principal), Shumway, S. (Co-Principal), Smith, D. (Co-Principal), "Ft. Hood Army enlisted servicemember quality of life," Sponsored by College of Human Sciences, Texas Tech University, $5,000.00. (September 1, 2009 - August 1, 2010).

Korb, B. (Principal), Durband, D. (Co-Principal), Shumway, S. (Co-Principal), Smith, D. (Co-Principal), "Ft. Hood Army enlisted servicemember quality of life," Sponsored by College of Human Sciences, Texas Tech University, $35,000.00. (September 1, 2008 - August 1, 2009).

Korb, B. (Principal), Durband, D. (Co-Principal), Shumway, S. (Co-Principal), Smith, D. (Co-Principal), "Ft. Hood Army enlisted servicemember quality of life," Sponsored by College of Human Sciences, Texas Tech University, $5,000.00. (September 1, 2008 - August 1, 2009).

Sponsored Research


X. Other professional activities during the last six years that contribute to graduate education

Fellowships, Scholarships and Awards

•Doctoral Level Student Achievement Award, Texas Association of Marriage and Family Therapy, Texas Association of Marriage and Family Therapy.

Inductee to the Texas Tech Teaching Academy, Texas Tech University. (2011).

•College of Human Sciences Spencer A. Wells Award for Creativity in Teaching, Texas Tech University and the College of Human Sciences. (2011).

•College of Human Sciences Mace Bearer, Texas Tech Graduation, Texas Tech University. (2008).

New Course Preparation Work

Spring TTU 2013

"Systemic Treatments and Addictions," ADRS 6315-001.
Service/Engagement

Degree Program Coordinator. (2009 - Present).

Committee Member, Department Executive Committee. (2009 - Present).

Department Chair. (2007 - 2009).

Committee Chair, Teaching Effectiveness Committee. (September 2011 - Present).

Committee Member, Curriculum Committee. (August 2011 - 2012).

Committee Member, Distinguished Awards Committee. (March 2010 - 2012).


Academic Program Sub Committee (Graduate Council). (May 2012 - Present).

Graduate Council. (May 2012 - Present).

Active member of teaching academy, Teaching Academy Member. (May 2011 - Present).


Consulting

For Profit Organization, Dove Tree Ranch, Lubbock, Texas. (September 2006 - Present).

**GRADUATE FACULTY APPLICATION FORM**
**TEXAS TECH UNIVERSITY**
**Confirmation/Reappointment**

**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<td>Doug B. Smith</td>
<td>Community Family and Addiction Services</td>
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<th>Rank/Title</th>
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<td>Associate Professor</td>
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<td>2007</td>
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<th>Campus Mail Stop</th>
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<tr>
<td><a href="mailto:douglas.smith@ttu.edu">douglas.smith@ttu.edu</a></td>
<td>(806) 834-7606</td>
<td>1250</td>
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The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<th>Degree</th>
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<td>Ph D</td>
<td>Family Studies &amp; Human Service</td>
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<tr>
<td>MS</td>
<td>Human Development</td>
<td>Virginia Polytechnic Institute and State University</td>
<td>1999</td>
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<tr>
<td>BS</td>
<td>Family &amp; Child Development</td>
<td>Virginia Polytechnic Institute and State University</td>
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II. Professional Experience, Academic and Nonacademic

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<th>Title</th>
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<tr>
<td>Marriage and Family Therapist</td>
<td></td>
<td>June 2012 - Present</td>
</tr>
<tr>
<td>Associate Professor</td>
<td>Texas Tech University</td>
<td>August 2007 - Present</td>
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<tr>
<td>Mental Health Consultant</td>
<td>South Plains College</td>
<td>September 2009 - May 2014</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Involvement</th>
<th>Institution</th>
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<tbody>
<tr>
<td>Hannah Korkow</td>
<td>Dissertation Committee Chair</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Michael Pounds</td>
<td>Dissertation Committee Chair</td>
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473
<table>
<thead>
<tr>
<th>Year Completed</th>
<th>Institution</th>
<th>Student's Name</th>
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<th>Institution</th>
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<tbody>
<tr>
<td>June 2014</td>
<td>Texas Tech University</td>
<td>Mathew Jordan</td>
<td>Dissertation Committee Chair</td>
<td></td>
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<tr>
<td>June 2014</td>
<td>Texas Tech University</td>
<td>Kaitlin Leckie</td>
<td>Dissertation Committee Chair</td>
<td></td>
</tr>
<tr>
<td>June 2014</td>
<td>Texas Tech University</td>
<td>Amber Anderson</td>
<td>Dissertation Committee Chair</td>
<td></td>
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<tr>
<td>May 2014</td>
<td>Texas Tech University</td>
<td>Lindsay Huffhines</td>
<td>Master's Thesis Committee Chair</td>
<td></td>
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<tr>
<td>July 2013</td>
<td>Texas Tech University</td>
<td>Amanda Szarzynski</td>
<td>Dissertation Committee Chair</td>
<td></td>
</tr>
<tr>
<td>June 2013</td>
<td>Texas Tech University</td>
<td>Cynthia D'Sauza</td>
<td>Dissertation Committee Chair</td>
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<tr>
<td>March 2012</td>
<td>Texas Tech University</td>
<td>Josh Novak</td>
<td>Master's Thesis Committee Chair</td>
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<tr>
<td>September 2010</td>
<td>Texas Tech University</td>
<td>David Servino</td>
<td>Dissertation Committee Chair</td>
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<tr>
<td>August 2010</td>
<td>Texas Tech University</td>
<td>Erin Murphy</td>
<td>Dissertation Committee Chair</td>
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<td>Institution</td>
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<tr>
<td></td>
<td>Austin Hotaling</td>
<td>Dissertation Committee Chair</td>
<td>July 2010</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adam Munk</td>
<td>Dissertation Committee Chair</td>
<td>December 2008</td>
<td></td>
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### IV. Other Service on Graduate Committees in the last six years (excluding III)

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<tr>
<th>Student's Name</th>
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<th>Institution</th>
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<tbody>
<tr>
<td>Lisa Merchant</td>
<td>Dissertation Committee Member</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Devon DuPree</td>
<td>Dissertation Committee Member</td>
<td>Texas Tech University</td>
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<tr>
<td>Carmen Aguirre</td>
<td>Dissertation Committee Member</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Spencer Bradshaw</td>
<td>Dissertation Committee Member</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Jeehee Sung</td>
<td>Dissertation Committee Member</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Shannon Dial</td>
<td>Dissertation Committee Member</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Cody Heath</td>
<td>Master's Thesis Committee Member</td>
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</tr>
<tr>
<td>Year Completed</td>
<td>Institution</td>
<td>Student's Name</td>
</tr>
<tr>
<td>---------------</td>
<td>---------------------</td>
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</tr>
<tr>
<td>December 2013</td>
<td>Texas Tech University</td>
<td>Jaclyn Cravens</td>
</tr>
<tr>
<td>May 2013</td>
<td>Texas Tech University</td>
<td>Haley Pettigrew</td>
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<tr>
<td>July 2012</td>
<td></td>
<td>Hye Jin Kim</td>
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<tr>
<td>June 2011</td>
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<td>Erika Wilkens</td>
</tr>
<tr>
<td>July 2010</td>
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<td>Megan Oka</td>
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</table>
Institution

Student's Name  Kimberly Simon
Involvement  Dissertation Committee Member
Year Completed  December 2009

Institution

Student's Name  Tiffany Brown
Involvement  Dissertation Committee Member
Year Completed  December 2009

Institution

Student's Name  Adam Froerer
Involvement  Dissertation Committee Member
Year Completed  May 2009

V. Graduate Courses Taught in the last six years

Fall TTU 2014
MFT 8000 Doctor's Dissertation: Research in Marriage and Family Therapy
MFT 7000 Research: Research and Publication in Marriage and Family Therapy
MFT 6396 Supervision of Marriage and Family Therapy
MFT 5322 Family Systems

Summer II TTU 2014
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Summer I TTU 2014
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis

Spring TTU 2014
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6342 Adv Family Therapy Topic: Violence
MFT 6322 Family Systerms II: Research
MFT 6000 Master's Thesis

Fall TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6396 Supervision of Marriage and Family Therapy
MFT 6000 Master's Thesis
MFT 5322 Family Systems

**Summer II TTU 2013**
MFT 8000 Doctor's Dissertation
MFT 6395 Practicum in Marriage and Family Therapy

**Summer I TTU 2013**
MFT 8000 Doctor's Dissertation
MFT 7000 Research

**Spring TTU 2013**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6322 Family Systems II: Research
MFT 6000 Master's Thesis

**Fall TTU 2012**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6396 Supervision of Marriage and Family Therapy
MFT 6000 Master's Thesis
MFT 5322 Family Systems

**Summer II TTU 2012**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

**Summer I TTU 2012**
MFT 8000 Doctor's Dissertation

**Spring TTU 2012**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6322 Family Systems II: Research
MFT 6000 Master's Thesis

**Fall TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6396 Supervision of Marriage and Family Therapy
MFT 5322 Family Systems

**Summer II TTU 2011**
MFT 8000 Doctor's Dissertation

**Summer I TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 6395 Practicum in Marriage and Family Therapy

**Spring TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6322 Family Systems II: Research
MFT 6000 Master's Thesis

**Summer II TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6000 Master's Thesis

**Summer I TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6000 Master's Thesis

**Spring TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6397 Supervision Practicum in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6000 Master's Thesis

**Fall TTU 2009**
6396 Supervision in MFT
5322 Family Systems

**Summer II TTU 2009**
6395 Practicum in MFT

**Spring TTU 2009**
6397 Practicum in Supervision of MFT
6395 Practicum in MFT

**Fall TTU 2008**
6396 Supervision in MFT
5322 Family Systems
VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed

**Journal Articles (Invited)**


**Journal Articles (Accepted)**


**Non-Peer-Reviewed/Refereed**

**Journal Articles (Accepted)**


**VII. Current Participation in Professional Associations**

Clinical Fellow, American Association for Marriage and Family Therapy. (2007 - Present).

Clinical Fellow, Texas Association for Marriage and Family Therapy. (2007 - Present).

Reviewer, Journal Article, Contemporary Family Therapy. (September 2012 - Present).

Reviewer, Journal Article, Journal of Marital and Family Therapy. (September 2012 - Present).


Reviewer, Conference Paper, AAMFT. (December 2007 - Present).


VIII. Presentations in the last six years

Invited

Smith, D. (Presenter & Author), Family Therapy Symposium, TTU MFT Program, Lubbock, TX, "Ethics in the movies, too," Regional. (January 27, 2012).


Accepted


Korkow, H. (Presenter & Author), Ivey, D. (Author Only), Smith, D. (Author Only), 2011 Annual AAMFT Conference, American Association for Marriage
and Family Therapy, Ft. Worth, TX, "Gender and childhood abuse with clinical cases," International, Peer Reviewed/Refereed. (September 23, 2011).

Anderson, A. (Presenter & Author), Ivey, D. (Presenter & Author), Smith, D. (Presenter & Author), Dial, S. (Presenter & Author), Banford, A. J. (Presenter & Author), AAMFT, Atlanta, GA, "Gender and violence in relationship to dyads and individuals.," National, Peer Reviewed/Refereed. (September 2010).

Oka, M. (Presenter & Author), Whiting, J. (Author Only), Smith, D. (Author Only), Karakurt, G. (Author Only), Reifman, A. (Author Only), American Association for Marriage and Family Therapy, Atlanta, GA, "Negative communication and couple conflict: A process research study," National, Peer Reviewed/Refereed. (September 2010).


General


Smith, D., Whiting, J., Karakurt, G., AAMFT, Atlanta, GA, "Intimate partner violence and PTSD: Dyadic analysis.," Peer Reviewed/Refereed. (September 2010).


IX. Grant and Contract Activity for the last six years

Grant

Smith, D. (Principal), Whiting, J. (Co-Principal), "A brief intervention for situational IPV in clinical couples.," Sponsored by Hogg Foundation, Private, $17,222.00. (June 1, 2012 - May 31, 2014).

Whiting, J. (Co-Principal), Smith, D. (Principal), Prouty, A. (Co-Principal), "Neuroimaging of female victims of intimate partner violence.," Sponsored by College of Human Sciences, Texas Tech University, $10,000.00. (June 2013 - September 2013).


Smith, D. (Principal), "Safety in intimate partner relationships," Texas Tech University, $5,000.00. (October 2008 - August 2009).


Grant - Not Funded

Smith, D. (Principal), "Trauma and changes in PTSD, depression, and anxiety for female victims of intimate partner violence in a Texas women’s shelter," Sponsored by The Hogg Foundation, Private, $16,933.00. (June 1, 2011 - May 31, 2012).


X. Other professional activities during the last six years that contribute to graduate education

Fellowships, Scholarships and Awards

Hemphill-Wells New Professor Excellence in Teaching Award, College of Human Sciences. (April 2011).
New Format for existing course

Fall TTU 2011

"Supervision of Marriage and Family Therapy," MFT 6396-001.

Spring TTU 2010

"Supervision Practicum in Marriage and Family Therapy," MFT 6397-001.

New Course Preparation Work

Spring TTU 2011


Fall TTU 2008


Spring TTU 2008

"Practicum in MFT," 6395.

"Practicum in Supervision," 6397.

Service/Engagement

Committee Member, Promotion and tenure committee. (August 2014 - Present).

Committee Member, CFAS Executive Committee. (September 2012 - Present).

MFT Program Director. (September 2012 - Present).

Committee Member, Personnel Committee. (August 2008 - January 2013).

Committee Chair, Faculty Search Committee. (August 2008 - January 2011).

Committee Chair, Merit Policy review Committee. (2009 - 2010).

Committee Member, Graduate Coordinating Committee. (September 2012 - Present).

Committee Member, Faculty Council. (September 2010 - September 2012).
Committee Member, Graduation Committee. (September 2007 - September 2012).

Lubbock Disaster Action Team Member, American Red Cross. (April 2013 - Present).

Disaster Mental Health Volunteer, American Red Cross. (September 2012 - Present).

Family Therapist. (May 2012 - Present).

Member, Graduate School Consortium. (September 2010 - Present).

Board Member, Women's Protective Services, Lubbock, TX. (July 2008 - October 2014).

Mental Health Consultant, South Plains College. (September 2009 - May 2014).

Consulting

Academic, South Plains College, Levelland, TX. (September 2009 - May 2014).
**GRADUATE FACULTY APPLICATION FORM**  
**TEXAS TECH UNIVERSITY**  
**Confirmation/Reappointment**

**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<th>Department/Unit</th>
<th>Rank/TITLE</th>
<th>Date Submitted</th>
<th>Appointment Date</th>
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<tbody>
<tr>
<td>Sara A. Jordan</td>
<td>Community Family and Addiction Services</td>
<td>Associate Professor</td>
<td>11-07-2014</td>
<td>2006</td>
</tr>
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</table>

**TTU Email:** sara.smock@ttu.edu  
**Phone:** (806) 742-3060  
**Campus Mail Stop:** 1210

**Mailing Address:**

__________________________  
City/State:_________________  
Zip:_______________________
The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<th>Field</th>
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<tr>
<td>Ph D</td>
<td>Marriage and Family Therapy</td>
<td>Virginia Polytechnic Institute and State University</td>
<td>2006</td>
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<tr>
<td>MS</td>
<td>Child Development and Family Studies</td>
<td>Purdue University</td>
<td>2003</td>
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<tr>
<td>BS</td>
<td>Psychology</td>
<td>Olivet Nazarene University</td>
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II. Professional Experience, Academic and Nonacademic

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<th>Year(s)</th>
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<tr>
<td>Associate Professor</td>
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<td>September 2012 - Present</td>
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<td>Tenured</td>
<td>Texas Tech</td>
<td>September 2012 - Present</td>
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<tr>
<td>Assistant Professor</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

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<tr>
<td>Ashlee Miller</td>
<td>Doctoral Advisory Committee Chair</td>
<td>Texas Tech University</td>
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<td>Michael Olsen</td>
<td>Master's Thesis Committee Chair</td>
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Year Completed | 2011
---|---
Institution | Cynthia Dsauza
Student's Name | Master's Thesis Committee Chair
Involvement | 2011
Year Completed | Jonathyn Piper
Institution | Doctoral Advisory Committee Chair
Student's Name | 2010
Involvement | Charolette Lancaster
Year Completed | Adam Froerer
Institution | Master's Thesis Committee Chair
Student's Name | August 2009
Involvement | McKenzie Tabor
Year Completed | Dissertation Committee Chair
Institution | Doctoral Advisory Committee Chair
Student's Name | August 2009
Involvement | Amanda Parkey Jackson
Year Completed | 2012
Institution

IV. Other Service on Graduate Committees in the last six years (excluding III)

Student's Name | Violetta Kadieva
Involvement | Dissertation Committee Member
Year Completed | Texas Tech University
Institution

Student's Name | Ken Griffith
Involvement | Dissertation Committee Member
Year Completed
Institution

Student's Name | Elliott Connie
Involvement | Dissertation Committee Member
Year Completed | 2012
Institution

Student's Name | Amanda Parkey Jackson
V. Graduate Courses Taught in the last six years

**Fall TTU 2014**
MFT 6395 Practicum in Marriage and Family Therapy: Clinical Practicum in Marriage and Family Therapy
ADRS 5310 Issues of Addiction and Recovery

**Spring TTU 2014**
MFT 7000 Research: Solution Focussed Therapy
MFT 6395 Practicum in Marriage and Family Therapy

**Spring TTU 2013**
MFT 7000 Research

**Fall TTU 2012**
MFT 7000 Research
ADRS 5310 Issues of Addiction and Recovery

**Summer II TTU 2012**
MFT 8000 Doctor's Dissertation

**Spring TTU 2012**
MFT 6395 Practicum in Marriage and Family Therapy

**Fall TTU 2011**
MFT 8000 Doctor's Dissertation
ADRS 5310 Issues of Addiction and Recovery

**Summer II TTU 2011**
MFT 8000 Doctor's Dissertation

**Spring TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis

**Summer II TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis

**Summer I TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis

**Spring TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis
ADRS 5311 Problems in Addictive Disorders and Recovery Studies

**Fall TTU 2009**
8000 Doctor's dissertation
7000 Research in MFT
5311 Problems in ADRS
5310 Issues of Addiction & Recovery
VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed

Journal Articles (Accepted)


Other (Invited)


Non-Peer-Reviewed/Refereed

Journal Articles (Accepted)

Smock, S., Baker, A. K., Harris, K., Dsauza, C. The role of social support in collegiate recovery communities: A review of the literature. 29(1), 35-44.


Shumway, S., Dakin, J. B., Smock, S., Kimball, T., Harris, K. The Development of the Hope and Coping in Recovery Scale (HCRS).


**Books (Accepted)**


**Book Chapters (Invited)**


**Book Chapters (Accepted)**


Conference Proceedings (Accepted)


Other (Accepted)


Other (Accepted)


VII. Current Participation in Professional Associations

Board Member, Solution-Focused Brief Therapy Association. (December 2011 - Present).

Associate member, American Association of Marriage and Family Therapy. (2006 - Present).

Member, Founders Group for the Solution-Focused Brief Therapy Association. (2006 - Present).
Member, Solution-Focused Brief Therapy Association. (2002 - Present).


Officer, President/Elect/Past, Solution Focused Brief Therapy Association. (November 2012 - Present).


Board Member/Foundation, SFBTA. (December 2011 - Present).

Reviewer, Ad Hoc Reviewer, Alcoholism Treatment Quarterly. (2011 - Present).


Committee Member, Solution Focused Brief Therapy Association Research Committee. (2008 - Present).

Member, AAMFT. (2006 - Present).


Member, SFBTA Founder's Group. (2002 - Present).

Member, Solution-Focused Brief Therapy Association. (2002 - Present).


Reviewer, Conference Paper, SFBTA, Minneapolis, MN. (January 2012 - November 2012).


Program Coordinator, Coordinator of the SFBTA pre-conference research day in Albany, NY, Albany, NY. (November 2008 - November 2009).

Program Organizer, SFBTA pre-conference research day. (January 2008 - November 2008).

VIII. Presentations in the last six years

Invited


Accepted


Harris, K. (Author Only), Walker, L. (Author Only), Smock, S. (Presenter & Author), Rushing, S. (Presenter & Author), Tabor, M. (Author Only), National Youth At-Risk Conference, Georgia Southern University, Savannah, Georgia, "BodyMind Initiative," National, Peer Reviewed/Refereed. (March 2010).


General


Smock, S., A workshop for the solution-focused institute, Solution-Focused Institute, Arlington, TX, "Ethics and Research in SFBT." (April 2010).


Smock, S., A workshop for the solution-focused certificate program, University of Texas Arlington, Arlington, TX, "Solution-focused brief therapy skills." (April 2009).

IX. Grant and Contract Activity for the last six years

Contract

Smock, S., L. M., E. C., "Solution-Focused Brief Therapy Program for At-Risk Substance Abusing Youth and Their Families (SFARY)," Sponsored by Tarrant Co. Juvenile Drug Court Services for Juvenile Services, Private, $30,000.00. (September 2010 - August 2011).
Grant

Harris, K. (Principal), Kimball, T. (Co-Principal), Baker, A. K. (Co-Principal), Smock, S. (Co-Principal), "Methodology for Effectively Meeting the Needs of Recovering Students," Sponsored by U.S. Department of Education, Federal, $95,000.00. (September 1, 2009 - August 31, 2010).


Sponsored Research

Harris, K. (Principal), Smock, S. (Supporting), Baker, A. (Supporting), "Creating Recovery Support Communities on College Campuses," Sponsored by Health Resources & Services Administration, Federal, Federal, $247,500.00. (September 2010 - August 2011).

Harris, K. (Principal), Smock, S. (Supporting), Kimball, T. (Supporting), "Healthiest Communities and Childhood," Sponsored by Covenant Health System, Local, $1,000,000.00. (July 15, 2008 - July 13, 2011).

Contract - Not Funded


Grant - Not Funded


Harris, K., Smock, S., Rushing, S., "Champions for Healthy Kids Grant," Sponsored by General Mills, Private, $10,000.00. (2010).

Harris, K. (Principal), Smock, S. (Supporting), Baker, A. K. (Supporting), "The Body Mind Initiative- Tarrant County Expansion," Sponsored by The Dannon Corporation, Private, $30,000.00. (2010).

Smock, S., "Mechanisms of Behavior Change in Alcohol Dependence Treatment," Sponsored by National Institute on Health, Texas Tech University, $275,000.00.

Rodgers, B. (Co-Principal), Smock, S. (Co-Principal), "Genotype, Social Support and Relapse Susceptibility," Sponsored by Department of Defense, Federal, $904,997.00.

Rodgers, B. (Principal), Smock, S. (Co-Principal), "Characterizing the role of SNCA gene variants in the alcohol-preferring phenotype," Sponsored by National Institutes of Health, Federal, $252,786.00.

Grant - Pending

Rodgers, B. (Co-Principal), Smock, S. (Co-Principal), Harris, K. (Supporting), "Genetic & Social Support markers in Substance Dependence Disorders relapse prevention," Sponsored by NIDA - National Institutes on Drug Addiction, Federal, $299,974.00.

Harris, K., Smock, S., Rushing, S., "Obesity/Weight Related Prevention in Minority and Underserved Children," Sponsored by National Institutes of Health R21, Federal, $274,961.00.

Smock, S. (Principal), Froerer, A. (Co-Principal), "Microanalysis on SFBT," Sponsored by EBTA, Other, $5,000.00. (January 2009 - December 2009).

X. Other professional activities during the last six years that contribute to graduate education

Fellowships, Scholarships and Awards

Awarded the College of Human Sciences’s Chancellor’s Distinguished Research Award, TTU. (2011).

Awarded the Solution-Focused Brief Therapy Association’s Steve de Shazer Memorial Award for significant contributions to the field of Solution-Focused Brief Therapy, Solution-Focused Brief Therapy Association (North American). (November 2011).
New Faculty Award, Alumni Association. (2008).

Outstanding New Faculty Award, College of Human Sciences. (2008).

**New Format for existing course**

**Spring TTU 2014**

"Research: Solution Focussed Therapy," MFT 7000-007.

**Fall TTU 2009**

"Issues of Addiction & Recovery," 5310-001. Guest speakers

**Spring TTU 2008**

"Family Systems II," 6322.

**New Course Preparation Work**

**Spring TTU 2014**

"Research: Solution Focussed Therapy," MFT 7000-007.

**Fall TTU 2008**


**Spring TTU 2008**

"Family Systems II," 6322.

**Service/Engagement**

Committee Member, Annual Faculty Review Executive Committee. (January 2013 - Present).

Committee Member, Community, Family, and Addiction Services Scholarship Committee. (January 2012 - Present).

Committee Member, Personnel Committee. (August 2008 - February 2011).

Committee Member, Annual Faculty Review Executive Committee. (January 2008 - January 2010).
Coordinator of Program, Coordinator of the MFT Master's Program. (August 2008 - December 2009).

Interviewed MS students, MFT MS Student Interviews. (January 2009 - February 2009).

Committee Member, COHS Grade Appeal Committee, Texas Tech. (September 2012 - Present).

Committee Member, Facilities Committee. (August 2007 - Present).

at Large Contributor, Teaching Evaluation Committee at Large Contributor, Texas Tech University. (January 2012 - May 2012).

Committee Member, Code of Student Conduct Review Committee. (September 2010 - Present).

Personnel Committee member for APS. (2008 - 2011).


Board Member, Legal Aid Society of Lubbock. (2007 - Present).

Secretary, Legal Aid Society of Lubbock - Secretary. (September 2008 - August 2009).

**Consulting**

Private Clinical Practice, Private Clinical Practice, Lubbock, TX. (September 2011 - Present).

GRADUATE FACULTY APPLICATION FORM
TEXAS TECH UNIVERSITY
Confirmation/Reappointment

Instructions: The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

Name: Nicole P. Springer
Department/Unit: Community Family and Addiction Services
Rank/TITLE: Associate Professor
Date Submitted: 11-07-2014
Appointment Date: 
TTU Email: nicole.springer@ttu.edu
Phone: (806) 834-1643
Campus Mail Stop: 1250
Mailing Address: 
City/State Zip: 

507
The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<tr>
<td>Institution</td>
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<tbody>
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<td>Field</td>
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<td>Institution</td>
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<td>Year Awarded</td>
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II. Professional Experience, Academic and Nonacademic

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<tr>
<th>Title</th>
<th>Director: Family Therapy Clinic</th>
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<tr>
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<td>Year(s)</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Timothy Parker</th>
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<td>Dissertation Committee Chair</td>
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<tr>
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<table>
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<tr>
<th>Student's Name</th>
<th>Gail Bentley</th>
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<tr>
<td>Involvement</td>
<td>Dissertation Committee Chair</td>
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<tr>
<td>Student's Name</td>
<td>Devin Dupree</td>
</tr>
<tr>
<td>-----------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>Involvement</td>
<td>Dissertation Committee Member</td>
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<td>Year Completed</td>
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<tr>
<th>Student's Name</th>
<th>Kaitlin Leckie</th>
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<td>October 13, 2014</td>
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<tr>
<th>Student's Name</th>
<th>Jeehee Sung</th>
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<tr>
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<tr>
<th>Student's Name</th>
<th>I-Shan Yang</th>
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<tr>
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<td>Year Completed</td>
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<tr>
<th>Student's Name</th>
<th>Lindsay Huffhines</th>
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<tr>
<td>Involvement</td>
<td>Master's Thesis Committee Member</td>
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<tr>
<td>Year Completed</td>
<td>May 27, 2014</td>
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<tr>
<th>Student's Name</th>
<th>Jaclyn Cravens</th>
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<td>Year Completed</td>
<td>August 10, 2013</td>
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<tr>
<th>Student's Name</th>
<th>Carlos Perez</th>
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<tr>
<th>Student's Name</th>
<th>Matthew Brown</th>
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<table>
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<tr>
<th>Student's Name</th>
<th>Brandy Lucas</th>
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Involvement  Dissertation Committee Member
Year Completed  May 4, 2010
Institution

V. Graduate Courses Taught in the last six years

**Fall TTU 2014**
MFT 8000 Doctor's Dissertation: Research in Marriage and Family Therapy
MFT 7395 Internship in Marriage and Family Therapy

**Summer II TTU 2014**
MFT 7395 Internship in Marriage and Family Therapy

**Summer I TTU 2014**
MFT 8000 Doctor's Dissertation
MFT 7395 Internship in Marriage and Family Therapy
MFT 6342 Advanced Family Therapy Topics: Grief and Loss

**Spring TTU 2014**
MFT 7395 Internship in Marriage and Family Therapy
MFT 7000 Research
MFT 6303 Family Therapy III: Couple/Sex

**Fall TTU 2013**
MFT 7395 Internship in Marriage and Family Therapy

**Summer II TTU 2013**
MFT 7395 Internship in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy

**Summer I TTU 2013**
MFT 7395 Internship in Marriage and Family Therapy

**Spring TTU 2013**
MFT 8000 Doctor’s Dissertation
MFT 7395 Internship in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy

**Fall TTU 2012**
MFT 7395 Internship in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy

**Summer II TTU 2012**
MFT 7395 Internship in Marriage and Family Therapy

**Summer I TTU 2012**
MFT 7395 Internship in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy

**Spring TTU 2012**
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6303 Family Therapy III: Couple/Sex

**Fall TTU 2011**
MFT 7395 Internship in Marriage and Family Therapy

**Summer II TTU 2011**
MFT 7395 Internship in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy

**Summer I TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7395 Internship in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6342 Advanced Family Therapy Topics

**Spring TTU 2011**
MFT 8000 Doctor's Dissertation
MFT 7395 Internship in Marriage and Family Therapy
MFT 7000 Research
MFT 6397 Supervision Practicum in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy

**Fall TTU 2010**
MFT 8000 Doctor's Dissertation
MFT 7395 Internship in Marriage and Family Therapy
MFT 7000 Research

**Summer II TTU 2010**
MFT 7395 Internship in Marriage and Family Therapy

**Summer I TTU 2010**
MFT 7395 Internship in Marriage and Family Therapy

**Spring TTU 2010**
MFT 7395 Internship in Marriage and Family Therapy
MFT 7000 Research
MFT 6303 Family Therapy III: Couple/Sex

**Spring TTU 2009**
MFT 6342 MFT 6342 Seminar in MFT
VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed

Conference Proceedings (Accepted)


Non-Peer-Reviewed/Refereed

Book Chapters (Invited)


VII. Current Participation in Professional Associations

Member, American Association of Marriage and Family Therapy. (1997 - Present).

Member, Texas Association of Marriage and Family Therapy. (1997 - Present).

Program Organizer, The Hideaway Experience, Lubbock, TX. (June 27, 2012).


VIII. Presentations in the last six years

Invited

512
Springer, N., Children's Advocacy Center of the South Plains, "Suicide Assessment and Intervention," Local. (July 9, 2014).

Springer, N., GOCoPS, COCoPS, Lubbock, TX, "10 Things I Wish I had Known...BEFORE doing couples therapy!," Local. (June 13, 2014).

Springer, N., PFP Course/Guest Lecture, Overton Hotel, Lubbock, TX, "What every financial planner should know...about Down syndrome and working with special needs families!," Local. (May 22, 2014).


Bentley, G. (Presenter & Author), Springer, N. (Presenter & Author), South Plains Association for the Education of Young Children (SPAEYC), Christ The King Early Childhood Development Center, Lubbock, TX, "The up side of Down syndrome and fathering," Regional. (April 13, 2013).


Springer, N. (Presenter Only), Building Strong Families, Multi-sponsored, Lubbock, TX, "Resiliency and hope in parenting a child with special needs.," Local. (October 27, 2011).


Springer, N., NAMI support group, National Alliance of Mentally Ill (NAMI), Lubbock, TX, "Grief in the family," Local. (May 26, 2009).


Accepted


General


IX. Grant and Contract Activity for the last six years

Contract

Springer, N. (Principal), "Mental Health Service Contract with the Lubbock County Juvenile Justice Center," Sponsored by Family Therapy Clinic, Other, $70,000.00. (September 2013 - August 2014).
Springer, N. (Principal), "Mental Health Services for the Lubbock County Juvenile Justice Center," Sponsored by Family Therapy Clinic, Other, $140,000.00. (September 1, 2010 - August 30, 2011).

**Grant**


**Contract**


Springer, N., "Mental Health Services for the Lubbock County Juvenile Justice Center." (September 1, 2012 - August 30, 2013).


**Contract - Not Funded**

Huffman, L. (Supporting), Colwell, M. (Principal), Durband, D. (Supporting), Harris, K. (Supporting), Velikova, N. (Supporting), Springer, N. (Supporting), Wherry, J. (Supporting), Zvonkovic, A. (Supporting), Collier, D. (Supporting), Curry, Z. (Supporting), "TTU Human Behavioral Sciences Research Complex," Sponsored by NIH (R06), Federal, $15,000,000.00. (November 2009).

Huffman, L. (Supporting), Colwell, M. (Principal), Durband, D. (Supporting), Harris, K. (Supporting), Velikova, N. (Supporting), Springer, N. (Supporting), Wherry, J. (Supporting), Zvonkovic, A. (Supporting), Collier, D. (Supporting),
Curry, Z. (Supporting), "TTU Human Behavioral Sciences Research Complex," Sponsored by NIH (R06), Federal, $15,000,000.00. (November 2009).

X. Other professional activities during the last six years that contribute to graduate education

**New Format for existing course**

**Summer I TTU 2014**

"Advanced Family Therapy Topics: Grief and Loss," MFT 6342-001. The course included a webinar with the ADEC organization and two guest speakers.

**Fall TTU 2012**

"Practicum in Marriage and Family Therapy," MFT 6395-004. Doctoral level students are serving as supervisor candidates over the masters students.

**Spring TTU 2012**

"Family Therapy III: Couple/Sex," MFT 6303-001.

**New Course Preparation Work**

**Spring TTU 2011**

"Supervision Practicum in Marriage and Family Therapy," MFT 6397-001.

**Spring TTU 2010**

"Family Therapy III: Couple/Sex," MFT 6303-001.

**Spring TTU 2009**

"Seminar in MFT (Grief and Loss)," 6342-001.

**Service/Engagement**

Committee Member, CFAS - MFT Faculty Search Commitee. (November 2013 - Present).

Committee Member, Student Scholarship Committee. HS - Community, Family, and Addiction Services (BS). (April 1, 2010 - May 30, 2010).

Attendee, Meeting, Mentor Tech. (September 25, 2012).
Member, Victims Services Networking Group, Lubbock, TX. (August 1, 2009 - August 1, 2011).

Board Member, Better Understanding of Down Syndrome (BUDS), Lubbock, TX. (July 2009 - July 2010).
**GRADUATE FACULTY APPLICATION FORM**  
**TEXAS TECH UNIVERSITY**  
**Confirmation/Reappointment**

**Instructions:** The Graduate Faculty Application Form is to be generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application.

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<tr>
<th>Name</th>
<th>Jason B. Whiting</th>
<th>Department/Unit</th>
<th>Community Family and Addiction Services</th>
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<tbody>
<tr>
<td>Rank/Title</td>
<td>Assistant Professor</td>
<td>Date Submitted</td>
<td>11-07-2014</td>
</tr>
<tr>
<td>TTU Email</td>
<td><a href="mailto:jason.whiting@ttu.edu">jason.whiting@ttu.edu</a></td>
<td>Phone</td>
<td>(806) 742-5050 ext. 241</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>__________________________</td>
<td>City/State</td>
<td>__________________________ Zip</td>
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The Graduate Faculty Application Form is to generated in the DigitalMeasures software platform, please make any additions or corrections in DigitalMeasures and reprint application. If being reconsidered after three years probation, please use the “provisional” application.

I. Academic Background

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<th>Degree</th>
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<td>Ph D</td>
<td>Child &amp; Family Ecology - MFT</td>
<td>Michigan State University</td>
<td>2001</td>
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<td>MS</td>
<td>Marriage &amp; Family Therapy</td>
<td>Brigham Young University</td>
<td>1997</td>
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<td>BS</td>
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<td>Brigham Young University</td>
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<td>A.A.S.</td>
<td>Psychology</td>
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II. Professional Experience, Academic and Nonacademic

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<td>Associate Professor</td>
<td>Texas Tech University</td>
<td>2010 - Present</td>
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<td>MFT</td>
<td>Private Practice-MFT</td>
<td>2003 - Present</td>
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<tr>
<td>Program Director</td>
<td>Texas Tech University, Marriage and Family Therapy Programs</td>
<td>2007 - 2012</td>
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<tr>
<td>Assistant Professor</td>
<td>Department of Applied and Professional Studies, Texas Tech University</td>
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III. Direction of Graduate Students (completed theses and dissertations directed in the last six years)

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<tr>
<td>Haley Pettigrew</td>
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<td>Luke Einerson</td>
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<td>Jenna Chang</td>
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<td>Devin DuPree</td>
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<td>Lisa Merchant</td>
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<td>Ty Mansfield</td>
<td>Dissertation Committee Chair</td>
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<td>Jaclyn Cravens</td>
<td>Dissertation Committee Chair</td>
<td>June 2013</td>
<td>Texas Tech University</td>
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<td>Carlos Perez</td>
<td>Dissertation Defense Committee Chair</td>
<td>June 2013</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Matthew Brown</td>
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<tr>
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<td>Institution</td>
<td>Student's Name</td>
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<tr>
<td>August 2012</td>
<td></td>
<td>Rob Porter</td>
<td>Dissertation Defense Committee Chair</td>
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<tr>
<td>2011</td>
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<td>Erica Wilkins</td>
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<td>Alice Koech</td>
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<td>2010</td>
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<td>Brandy Lucas</td>
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<td>Kelly Hesse</td>
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<td>Martha Morgan</td>
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<td>Megan Oka</td>
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<td>Sara Blakeslee</td>
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<td>2009</td>
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<td>Greg Thompson</td>
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### IV. Other Service on Graduate Committees in the last six years (excluding III)

<table>
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<tr>
<th>Student's Name</th>
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<th>Institution</th>
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<tr>
<td>Paul Huber</td>
<td>Dissertation Defense Committee Chair</td>
<td>2008</td>
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</tr>
<tr>
<td>Hannah Korkow</td>
<td>Dissertation Committee Member</td>
<td></td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Amber Anderson</td>
<td>Dissertation Committee Member</td>
<td>2014</td>
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</tr>
<tr>
<td>Amanda Szarzynski</td>
<td>Dissertation Committee Member</td>
<td>June 2013</td>
<td>Texas Tech University</td>
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<tr>
<td>Matthew Jordan</td>
<td>Dissertation Defense Committee Member</td>
<td>2012</td>
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<tr>
<td>Josh Novak</td>
<td>Master's Thesis Committee Member</td>
<td>April 2012</td>
<td>Texas Tech University</td>
</tr>
<tr>
<td>Amanda Harrington</td>
<td>Dissertation Defense Committee Member</td>
<td>2010</td>
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<tr>
<td>Austin Houghtaling</td>
<td>Dissertation Defense Committee Member</td>
<td>2010</td>
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<tr>
<td>Vidan Gonthier</td>
<td>Dissertation Committee Member</td>
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</table>
Year Completed 2009
Institution
Student's Name Adam Froerer
Involvement Dissertation Defense Committee Member
Year Completed 2009
Institution
Student's Name Damon Rappleyea
Involvement Dissertation Defense Committee Member
Year Completed 2009
Institution
Student's Name Mark White
Involvement Dissertation Defense Committee Member
Year Completed 2009
Institution
Student's Name Adam Munk
Involvement Dissertation Defense Committee Member
Year Completed 2008
Institution

V. Graduate Courses Taught in the last six years

Fall TTU 2014
MFT 8000 Doctor's Dissertation: Research in Marriage and Family Therapy
MFT 7000 Research: Research and Publication in Marriage and Family Therapy
MFT 6395 Practicum in Marriage and Family Therapy: Clinical Practicum in Marriage and Family Therapy
MFT 6342 Advanced Family Therapy Topics: DSM IV
MFT 6000 Master's Thesis: Research in Marriage and Family Therapy

Summer II TTU 2014
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Summer I TTU 2014
MFT 8000 Doctor's Dissertation
MFT 6395 Practicum in Marriage and Family Therapy

Fall TTU 2013
MFT 8000 Doctor's Dissertation
MFT 6342 Advanced Family Therapy Topics: DSM IV
MFT 6323 Qualitative Research Methods in Marriage and Family Therapy
Summer II TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research

Summer I TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6342 Adv Family Therapy Tpcs:Grounded Theory
MFT 6000 Master's Thesis

Spring TTU 2013
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6342 Adv Family Therapy Topic: Mindfulness
MFT 6000 Master's Thesis
MFT 5302 Family Therapy II

Fall TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6342 Advanced Family Therapy Topics

Summer II TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research

Summer I TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Spring TTU 2012
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6342 Adv Family Therapy Topic: Mindfulness

Fall TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6323 Qualitative Research Methods in Marriage and Family Therapy

Summer II TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
Summer I TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy

Spring TTU 2011
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis
MFT 5302 Family Therapy II

Fall TTU 2010
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6311 Contemporary Directions in Marriage and Family Therapy

Summer II TTU 2010
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6000 Master's Thesis

Summer I TTU 2010
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6395 Practicum in Marriage and Family Therapy
MFT 6000 Master's Thesis

Spring TTU 2010
MFT 8000 Doctor's Dissertation
MFT 7000 Research
MFT 6342 Adv Family Therapy Topic: Violence
MFT 6000 Master's Thesis

2009
7000 Research Experience in Marriage and Family Therapy
6393 Clinical Practicum in Marriage and Family Therapy
6323 Qualitative Research Methods in Marriage and Family Therapy
5302 Family Therapy II - Intergenerational Theories

2008
6311 Contemporary Theories in Marriage and Family Therapy

VI. Published Research and Creative Activity in the last six years

Peer-Reviewed/Refereed
Journal Articles (Accepted)


**Book Chapters (Invited)**


**Book Chapters (Accepted)**


**Other (Accepted)**


**Non-Peer-Reviewed/Refereed**

**Journal Articles (Accepted)**


**Books (Accepted)**


**Book Chapters (Accepted)**


**Other (Invited)**

Whiting, J., Merchant, L. Intimate partner violence: The role of distortion and desistance.. *NCFR Family Focus*. NCFR Family Focus.

**VII. Current Participation in Professional Associations**

Member, Phi Kappa Phi National Honor Society.

Member, American Association for Marriage and Family Therapy. (1996 - Present).

Member, National Council on Family Relations. (1996 - Present).

Editorial Review Board Member, Contemporary Family Therapy. (September 2012 - Present).


Reviewer, External Tenure, Michigan State University. (June 2014 - July 2014).

University of Minnesota. (2012).


Program Organizer, MFT Doctoral Educator's, Fort Worth, Texas. (2010 - 2011).


**VIII. Presentations in the last six years**
Invited


Whiting, J., Texas Council on Family Violence, Summit, Dallas, TX, "Research and Education on Domestic Violence." (September 2008).


Accepted


Oka, M. (Presenter & Author), Whiting, J. (Author Only), Smith, D. (Author Only), Karakurt, G. (Author Only), Reifman, A. (Author Only), American Association for Marriage and Family Therapy, Atlanta, GA, "Negative communication and couple conflict: A process research study," National, Peer Reviewed/Refereed. (September 2010).


General


Smith, D., Whiting, J., Karakurt, G., AAMFT, Atlanta, GA, "Intimate partner violence and PTSD: Dyadic analysis.," Peer Reviewed/Refereed. (September 2010).


Blakeslee, S., Whiting, J., Bitar, G., AAMFT, "Relational Components of Women’s Recovery in Aftercare," Peer Reviewed/Refereed. (September 2010).


IX. Grant and Contract Activity for the last six years

Grant


Whiting, J. (Co-Principal), Smith, D. (Principal), Prouty, A. (Co-Principal), "Neuroimaging of female victims of intimate partner violence.," Sponsored by College of Human Sciences, Texas Tech University, $10,000.00. (June 2013 - September 2013).


Contract

Whiting, J., "Growing Graduate Programs for TTU," Sponsored by TTU Graduate School, Texas Tech University, $15,650.00. (2008 - 2011).

Whiting, J., "Team Building for the MFT Program," Sponsored by College of Human Sciences, Texas Tech University, $4,316.00. (2008).

Grant

Whiting, J. (Principal), "Texas Tech Relationship Education Initiative (TTREI): Partnering with the Legacy Group "Twogether in Texas" Lubbock Region," Sponsored by Texas Department of Health and Human Services Commission, Texas Tech University, $90,000.00. (2008 - 2009).


Grant - Not Funded


Whiting, J. (Co-Principal), Vail, A. (Principal), Bradford, K. P. (Co-Principal), "The Bluegrass Healthy Marriage Initiative (BHMI)," Sponsored by Kentucky Cabinet for Families and Children, $1,000,000.00. (2005 - 2008).

Sponsored Research


X. Other professional activities during the last six years that contribute to graduate education

Fellowships, Scholarships and Awards

Distinguished Research Award (Barnie Rushing), College of Human Sciences/TTU. (March 2012).

Nominee for the Chancellor’s Research Fellowship, College of Human Sciences. (September 2009).

New Course Preparation Work
Fall TTU 2013

"Advanced Family Therapy Topics: DSM IV," MFT 6342-001. In 2013, the DSM underwent its first major revision in 20 years. This has required an overhaul of the whole course.

Fall TTU 2012

"Advanced Family Therapy Topics," MFT 6342-002.

Spring TTU 2012


Service/Engagement

Committee Member, Tenure Review Committee. (2011 - Present).

Committee Member, Scholarship Committee. (2008 - Present).

Committee Member, Graduate Coordinating Committee. (2007 - Present).

Degree Program Coordinator, Program Director. HS - Marriage & Family Therapy (PHD). (2007 - September 2012).

Committee Member, Executive Committee. HS - Marriage & Family Therapy (MS). (2007 - August 2012).

Committee Member, Search Committees. (2007 - 2010).

Committee Member, Promotion and Tenure. (2012 - Present).

Committee Member, Research Committee. (2012 - Present).

Committee Member, Curriculum Committee. (2007 - Present).

Committee Member, Teaching Effectiveness. (2010 - 2012).

Committee Member, Tenure Hearing Committee. (2011 - Present).

Committee Member, Graduate Program Review - Ed Psych and Leadership. (2011).

Committee Member, Texas Council on Family Violence, Dallas, TX. (2008 - Present).
Licensed Marriage and Family Therapist, TX. (2002 - Present).

Instructor, Marriage Enrichment courses for church/community. (1997 - Present).

**Consulting**

Marriage and Family Therapy Private Practice. (2008 - Present).
APPENDIX H

Faculty Awards and Honors
Awards and Honors
Texas Tech University
September 1, 2008 - August 31, 2014

Community Family and Addiction Services

Harris Ph. D, Kitty S. (Professor)

Texas Tech University Human Sciences Nominee for the Faculty Distinguished Leadership Award (2013)

Lifetime Achievement Award, Association of Recovery in Higher Education (2012)

Bob Knowlton Service Award (First Recipient), Cornerstone Recovery (2011)

Center Fellow, U.S. Department of Education's Higher Education Center for Alcohol, Drug Abuse, and Violence Prevention (2011)

Woman of Excellence - Education, YWCA of Lubbock (2011)

Honors College Faculty Member of the Year, Honors College, Texas Tech University (2009)

Integrated Scholar, Office of the Provost, Texas Tech University (2009)

Outstanding Faculty Award, Mortar Board, Texas Tech University (2009)

Creativity in Teaching Award, Applied and Professional Studies, College of Human Sciences, Texas Tech University (2008)

Distinguished Service Award, Texas Tech Alumni Association (2008)

Kimball, Tom G. (Associate Professor)

Professing Excellence Award, Texas Tech University, University Student Housing (May 2013)

College of Human Sciences Chancellor’s Distinguished Teaching Award, Texas Tech University College of Human Sciences (2012)

Inductee to the Texas Tech Teaching Academy, Texas Tech Teaching Academy (2010)

Spencer A. Wells Award, College of Human Sciences (2009)

Prouty, Anne (Associate Professor)

TeMPO Fellow, TTU Teaching Academy and the TLPDC (August 11, 2014)

TTU Alumnae COHS New Faculty Award, TTU Alumnae (August 2013)

Legacy of Leadership Award, College of Human Ecology, East Carolina University (2009)
Shumway, Sterling (Professor)

Doctoral Level Student Achievement Award, Texas Association of Marriage and Family Therapy, Texas Association of Marriage and Family Therapy

Inductee to the Texas Tech Teaching Academy, Texas Tech University (2011)

College of Human Sciences Spencer A. Wells Award for Creativity in Teaching, Texas Tech University and the College of Human Sciences (2011)

College of Human Sciences Mace Bearer, Texas Tech Graduation, Texas Tech University (2008)

Smith, Doug B. (Associate Professor)

Hemphill-Wells New Professor Excellence in Teaching Award, College of Human Sciences (April 2011)

Jordan, Sara A. (Associate Professor)

Awarded the College of Human Sciences’s Chancellor’s Distinguished Research Award, TTU (2011)

Awarded the Solution-Focused Brief Therapy Association’s Steve de Shazer Memorial Award for significant contributions to the field of Solution-Focused Brief Therapy, Solution-Focused Brief Therapy Association (North American) (November 2011)

New Faculty Award, Alumni Association (2008)

Outstanding New Faculty Award, College of Human Sciences (2008)

Whiting, Jason B. (Assistant Professor)

Distinguished Research Award (Barnie Rushing), College of Human Sciences/TTU (March 2012)

Nominee for the Chancellor’s Research Fellowship, College of Human Sciences (September 2009)
APPENDIX I

Institute and Center Structure
Institute for the Study of Addiction, Recovery and Families

Director: Sterling T. Shumway, Ph.D.

Center for Family Systems Research and Intervention
Directors: Nicole Springer, Ph.D. & Douglas B. Smith, Ph.D.
- Clinical Couple and Family Data Supporting Theses, Dissertations, and Peer Reviewed Research
- Neuroimaging and Violence Research
- Community Resource for Affordable Clinical Services through the Couple, Marriage and Family Therapy Clinic
- Clinical Support for Collegiate Recovery Communities
- Training Licensed Clinicians with Focus on Addiction and Recovery
- Family Therapy Symposium for Continuing Education
- Expand International Presence through Research, Study Abroad, and Clinical Training
- Community Contracts, Funding, and Outreach
- Medical Family Therapy

Center for Collegiate Recovery Communities
Director: Thomas G. Kimball, Ph.D.
- Provide Needed Support for Students in TTUs Collegiate Recovery Community (CRC)
- Provide Guidance, Information, Research and Curriculum for Universities Seeking to Start and support CRCs Nationwide
- Expand International Presence through Research, Study Abroad and Service Trips
- Offer Continuing Education through the McKenzie Lectureship Series and other offerings
- Continue Outreach and Service Via the Center and the Association of Students About Service (ASAS)
- Collaborate with other CRCs across the nation and globally

Center for Addiction Recovery Research
Director: Kitty Harris-Wilkes, Ph.D.
- Clinical Addiction and Recovery Data Supporting Theses, Dissertations, and Peer Reviewed Research
- Foster Collaborative Research with TTU Systems and National Researchers
- Lead the National Dialogue of Recovery
- Pursue Federal Funding for Recovery Research Related to (1) Neuroimaging, (2) the Definition of Recovery, (3) Identifying Factors Influencing Long-Term Recovery, (4) Eating Disorders, and (5) Family Violence and Addiction
- Collaborate with researchers associated with the COHS recovery and obesity clusters

International Engagement
2010
Texas Tech University
College of Human Sciences
Department of Applied and Professional Studies
Marriage and Family Therapy
Doctor of Philosophy Program

[SELF STUDY & APPLICATION FOR RE-ACCREDITATION]

Submitted to The Commission on Accreditation for Marriage and Family Therapy Education
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Commission on Accreditation for Marriage and Family Therapy Education

Application for Accreditation
Graduate & Post-Graduate Marriage and Family Therapy Training Programs

Date: 01/20/2010

Program Information
Exact Title of MFT Program Seeking Accreditation: Texas Tech University – Maringhe and Family Therapy
Doctoral Program (Currently Accredited)
Degree / Certificate Offered: M.A. M.S. M.F.T. PH.D. ED.D. OTHER
Address I: Broadway & Akron 260 College of Human Sciences
Address II: Texas Tech University
City: Lubbock State: TX Zip Code: 79409-1210 Phone: (806) 742-5050 x.241
Fax: (806) 742-5033 Email: jason.whiting@ttu.edu Website: http://www.depts.ttu.edu/hs/mft

# of SDU’s to complete program (1 SDU = 3 credit hours): 21
Is any portion of the program offered via Distance Education? Yes No

If Yes, Please Explain (attach additional documents if necessary):

External Recognition
The COAMFTE is recognized by the U.S. Department of Education (USDOE) and the Council for Higher Education
Accreditation (CHEA) and abides by these organizations’ guidelines. Please list the following information about the
Institution's regional accreditation:
Name of Regional Accreditation (if applicable): Southern Association of Colleges and Schools Commission on
Colleges
Is the Institution currently under any adverse action (action potentially leading to suspension, revocation or
termination) by this regional accrediting agency? No

Is the program accredited by any other accrediting agency? Yes No
Name: N/A
Is the Institution currently under any adverse action (action potentially leading to suspension, revocation or
termination) by this accrediting agency? N/A

Program Requirements
How many Client Contact Hours does the program require? 1000 (may transfer in up to 500 hours from MS)
How many Supervision Hours does the program require? 200 (may transfer in up to 100 from MS)
What is the advertised duration of the program? 3-5 Years
What is the maximum amount of time a student can take to complete the program? 8 Years

Guy Bailey, PhD, President, TTU

Jason B. Whiting, PhD, LMFT
Name and Title of Program Director

Signature of Institution CEO 12/7/10
Date

Signature of Program Director 1/10/10
Date

Please return application to: Director of Accreditation Services • AAMFT • 112 S. Alfred St. Alexandria, VA 22314
Marriage and Family Therapy Doctoral Program
Texas Tech University

I. Introduction
The Texas Tech doctoral program in Marriage and Family Therapy was created in 1979. Since that time, the program has gone through many changes in faculty and structure, and has become well-known and regarded for its rigorous and supportive training. Throughout the three decades of its existence, the TTU MFT program has trained over 150 professionals, many of whom have gone on to other MFT programs or clinical settings. Within the AAMFT community at large, there are many others who have at one time been associated with TTU or have come to be familiar with it through its reputation. Although the philosophy of the program has evolved over time, it has consistently emphasized scholarly engagement as well as clinical excellence. Texas Tech students and faculty have consistently been active in presenting and publishing research in the profession (e.g., See the DuPree et al., 2009 article in JMFT vol. 35 on productivity in MFT PhD programs), and many of our graduates hold positions at other academic institutions around the country. The TTU MFT program also places a high value on clinical training. Students receive on-site practicum supervision and experience in community clinical placements. Doctoral interns are valued in the community for their clinical skills and are working in numerous clinical and administrative settings.

Students are selected for admission to the program based on their potential in these scholarly and clinical domains. In January the applicant files are first evaluated on several criteria: GPA, GRE scores, recommendation letters, as well as a statement of their professional interests and potential contributions to diversity. Those who are deemed promising are invited to a day-long interview process (in February) that involves all clinical faculty and various staff and students. Faculty make decisions and invitations for a fall incoming group, after which the new students are admitted to a close-knit cohort and assigned to a faculty member who advises and mentors them throughout their courses, internship and dissertation.

The program is managed by a Program Director who has primary responsibility over the academic functioning of the students. There is also a Clinic Director who manages the on-site Family Therapy Clinic, as well as oversees the student’s clinical progress, record-keeping, and external placements and internships. A Senior Business Assistant is assigned to the MFT program to help with coordination of the student records, finances, course scheduling, admissions, coordination with the graduate school, and other issues. The current personnel include Dr. Jason Whiting (Program Director), Drs. David Ivey, Gunnur
Karakurt, Meryl (Mei-Ju) Ko, and Doug Smith (core faculty). Also included are Drs. Nicole Springer (Clinic Director/Instructor), Nichole Morelock (Instructor), and James Morris (off-site faculty), as well as Lori Minner (Business Assistant). The Addiction Disorders and Recovery Studies (ADRS) faculty are part of the APS department, are all LMFTs and Approved Supervisors, and play a role with our students in sitting on or chairing doctoral committees, as well as teaching classes that some of our students take. This group of faculty includes Drs. Kitty Harris, Tom Kimball, Sterling Shumway, and Sara Smock. Other LMFTs and Approved Supervisors play a role with our students in adjunct roles, such as in internships or clinical positions in the area.

II. Accreditation History
The Ph.D. Program has been accredited continuously by the Commission on Accreditation for Marriage and Family Therapy Education since 1981. It began its accreditation candidacy in 1979. The current accreditation period is effective through 2010. The MFT Master’s Program is not accredited.

III. Description of Program

The MFT program at TTU fits within a supportive department (Applied and Professional Studies) and college (Human Sciences). The department also contains the following programs: Addiction Disorders and Recovery Studies, Personal Financial Planning, and Family and Consumer Sciences Education. The college is one of the largest on campus, and the MFT program is well-regarded within the college and by the university system in general.

Texas Tech University is one of the major academic institutions in Texas, and is poised to soon achieve Tier I status in the state. The TTU website offers the following description: “Texas Tech University prides itself on being a major comprehensive research university that retains the sense of a smaller liberal arts institution. Although enrollment is over 28,000, Texas Tech students boast of one-on-one interaction with top faculty and an environment that stresses student accomplishment above all else. We’re large enough to provide the best in facilities and academics, but small enough to focus on YOU.” For more information on the mission and vision of TTU see Standard I-A, the TTU website, and the Supplemental Material.

Like other major universities, TTU houses many programs related to mental health/social services, although there are no others in the college of Human Sciences. There is a large medical school, psychology department (with counseling and clinical programs), counselor education program as well as a social work undergraduate program. All of these are accredited by their respective accrediting bodies.

IV. Plans for Improvement
Although we are pleased with the continuing success of the doctoral program, we continually seek to evaluate our processes and improve as well. One of our recent areas of
greater emphasis pertains to the training of our students to become educators. This is an outcome we will monitor and refine. Our plan to improve this outcome is to add oversight and energy to a new teaching portfolio process (implemented in 2009), and to measure this through the portfolio quality and through alumni surveys which now assess this.

Our program, like a many others, has experienced significant turnover in faculty over the last several years. Although this doesn’t seem to be attached to specific program deficiencies (e.g., the reasons seem to be varied and external), it is still potentially disruptive to the students and to the program. This has resulted in many new faculty members (several at non-tenure or junior level) who have been here less than three years. However, it is anticipated that over time the faculty will largely remain intact, and will advance into more senior positions. (For further discussion see Program Strengths and Areas of Concern Form).

The organization of this self study is as follows: After the Cover Pages and Introduction, we have the Mission Statement and Learning Outcomes document, which outlines the core components of who we are and what outcomes we expect from our students, faculty, and the program in general. Then several of the primary forms for commission will be found, including the doctoral program Plan of Study, Student Composition and Achievement, Faculty and Supervisor Summaries, and the Strengths and Areas of Concern form. The next section is the Narrative Response to the standards. This is where we describe how we address each of the standards in Version 11. We summarize our process and evidence here, and then provide additional evidence in the Appendices.

For clarity, we define the components herein as follows: The Appendices are found at the end of the self study and are labeled in the Table of Contents. These include material that is deemed helpful to demonstrate our compliance with our own learning outcomes. Supplemental material will be available on site, and consists of longer or more in depth material (e.g., the full program manual, the clinic manual). Forms are referenced throughout, and refer to the COAMFT forms that request specific information. These are found at various places in the document.
The Marriage and Family Therapy graduate programs at TTU provide systemic clinical training to prepare students for clinical licensure and scholarly achievement. TTU is known for its supportive and rigorous programs, and is one of the largest MFT programs in the country. Our graduates have found success in a wide variety of academic, clinical and other professional settings. There are two graduate programs in MFT at TTU: a doctoral and a master’s program.

The MFT doctoral program has a long and distinguished history of preparing students for contributions in academics, administration and clinical work. There is a strong emphasis on training in research methodology as well as theoretical and clinical sophistication. Many of TTU’s doctoral graduates can be found in academic institutions around the country. The doctoral program has been accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) since 1981.

The master’s program at TTU is a clinically-focused program that includes an emphasis in the treatment of addictions within a relational context. The MFT faculty provide training that prepares students for licensure as an MFT, LCDC, or for future doctoral work.
TTU MFT Doctoral Program

Educational Outcomes and Mission Statement
The mission of the Texas Tech Marriage and Family Therapy Doctoral Program is to provide academic and clinical training to students who will function as marriage and family therapists at the highest level of scholarly and clinical competence. The doctoral program is conceptually grounded by the scientist-practitioner model, preparing students who will be capable of making unique contributions to the field of marriage and family therapy through: a) quality research, b) clinical supervision and therapy, and c) academic instruction. This training is done in a context that is supportive of diversity, student-faculty mentoring and support, and authenticity. The following outcomes are nested within this broad educational mission.

Student Learning Outcomes
These learning outcomes are expected for all graduates of the doctoral program. They are divided into three primary areas that correspond to our mission. Each contains sub areas that are demonstrated by specific measures.

Upon graduating from the TTU MFT doctoral program, students will:

1. Be qualified to conduct high-quality independent research that is accepted for national presentation and publication to peer-reviewed audiences. They will demonstrate an ability to:
   a. Write clearly and professionally for a scholarly audience.
      i. Specific class assignments
      ii. 7000 Research project (first author on a submitted empirical article)
      iii. Quals written portion (passing)
      iv. Dissertation (proposal and defense)
   b. Understand and apply quantitative and qualitative research methodology.
      i. Assignments and grades in the research courses (MFT 6322, 6323)
      ii. Quals methods portion
   c. Conceptualize and design independent research.
      i. Research proposals written in the research courses (MFT 6313, MFT 6322).
      ii. Dissertation (proposal)
      iii. Quals Methods (passing)
   d. Complete and present a research project.
      i. Presenting research at state or national settings
      ii. Dissertation (defense)

2. Provide competent and ethical clinical services and supervision with a variety of relational systems and presenting problems, and practice as a licensed Marriage and Family Therapist. They will demonstrate an ability to:
   a. Understand and critically apply MFT theory with relational and individual systems.
      i. Quals Theory Paper (passing)
ii. Practicum evaluation forms
   iii. Theory class assignments (e.g., for MFT 6311)

b. Maintain professional records for clinical use.
   i. Case file management
   ii. Internship Evaluation

c. Have clinical and ethical competence:
   i. Practicum evaluations and grades
   ii. Quals Theory Paper
   iii. Internship Evaluation

d. Supervise MFTs in a competent manner.
   i. Grades in supervision practicum (MFT 6395)
   ii. Development of a clearly articulated theory of supervision

3. Have the ability to prepare curriculum and instruct students at the university level in principles and content related to Marriage and Family Therapy. They will demonstrate an ability to:
   a. Competently teach an undergraduate course and prepare a teaching portfolio.
      i. Student evaluations
      ii. Teaching reviews conducted by fellow students and teaching academy
   b. Articulate their philosophy of teaching.
      i. Teaching philosophy reviewed by their advisor
   c. Lead students in discussion and lecture of MFT content:
      i. Class presentations in various doctoral classes

Faculty Outcomes
All TTU MFT faculty are expected to contribute to the program and to the profession. It is expected that faculty will:

1. Be active in producing and sharing high quality research. They will:
   a. Publish in professional journals and present research at national conferences.
      i. Faculty vita
   b. Participate in funded research, including grants and contracts, and submit proposals for these projects.
      i. Faculty vita
   c. Mentor students in research projects including class papers, qualifying exams, small groups, 7000 article, and the dissertation.
      i. Co-authored publications on vita
      ii. Student feedback on class papers
      iii. Ongoing research meetings with students (e.g., small group, individual meetings)

2. Be active contributors to the development of the profession of MFT. This occurs through clinical practice, supervision of interns, and service in their professional spheres. Faculty will:
   a. Be involved in clinical activity.
      i. Private practice, co-therapy with students, etc.
b. Provide clinical supervision of students and interns.
   i. Evaluations for practicum (MFT 6395)
c. Serve in departmental, university, and national roles.
   i. Faculty vita

3. Teach high quality graduate and undergraduate courses and socialize doctoral students in teaching and instruction. Faculty will:
   a. Teach doctoral curriculum and provide examples and mentoring for instructors.
      i. Course instruction and student feedback
      ii. Accomplished student learning outcomes

Program Outcomes
The following are outcomes expected from the MFT Doctoral Program in general, and may consist of items that the faculty, staff, students and graduates of the program contribute in their various spheres of influence. These TTU MFT associates will:

1. Contribute to MFT scholarship. Through:
   a. Research presentations and publications.
      i. Measured by: activity in the scholarly community

2. Provide professional clinical services. The students, faculty and alumni will:
   a. Provide clinical services to the community locally and in other sectors.
      i. Measured by: client evaluations of therapy in our Family Therapy Clinic
      ii. Measured by: activity as therapists in various professional settings including internship sites and external placements
      iii. Measured by: licensure rates and job descriptions of alumni

3. Contribute service and instruction to the profession. Through:
   a. Alumni securing jobs in their chosen area of work.
      i. Measured by: Alumni Surveys
      ii. Measured by: Activity (e.g., service) in various professional domains from current TTU faculty and students, as well as alumni

4. Foster an environment that is respectful of diversity in others. Through:
   a. Creating an environment in our courses, faculty-student interaction, research and clinic services that honors the rights, safety, dignity, and well being of all members no matter their race, gender, religion, sexual orientation, socioeconomic status, national origin, religious beliefs, or physical and cognitive ability. The concept of diversity encompasses acceptance and respect that each individual is unique. To the extent possible and appropriate, interactions will be healthy and authentic, while still welcoming of differences.
      i. Meeting program benchmarks for diversity
      ii. Feedback from alumni, current students, clients, and each other
Transfer hours may be applied toward a graduate degree (Up to 6 hours toward the M.S. and up to 30 hours toward the Ph.D.) on a course-by-course substitution basis upon approval of the MFT faculty and the Graduate School.

<table>
<thead>
<tr>
<th>RESEARCH (15 hours)</th>
<th>Semester</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HDFS 6352 Quantitative Methods II-ANOVA</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>HDFS 6364 Quantitative Methods III-MANOVA</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>HDFS 6365 Quant Methods IV – SEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MFT 6322 Family Systems II – RESEARCH</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6323 Qualitative Methods in MFT</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 7000 Research</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MARRIAGE AND FAMILY THERAPY (15 hours)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 6370 Diversity in MFT</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6311 Contemporary Directions in MFT</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6342 MFT Seminar – Child/Adolescent</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6342 MFT Seminar – (e.g., violence)</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MFT 6396 MFT Supervision</td>
<td></td>
<td>3</td>
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</table>

<table>
<thead>
<tr>
<th>ADDITIONAL COURSES (12 hours)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 6307 Supervision Practicum</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

| 3 Electives (e.g., HDFS 6365-SEM; HDFS 5353-Grantwriting-  |          | 3     |
| Writing for Publication; ADRS 6301-Addictions & the Family;|          |       |
| ADRS 6315 – Treatment of Addictions;                      |          | 3     |
| MFT Seminar: gender, violence, grief/loss;                |          | 3     |
| PSY 5335: Psych of Trauma & Abuse;                        |          |       |
| PSY 5331 – Small Group Behavior)                          |          |       |

<table>
<thead>
<tr>
<th>OTHER PROGRAM REQUIREMENTS (9 hours minimum)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 6395 Practicum</td>
<td></td>
<td>3 min.</td>
</tr>
<tr>
<td>MFT 7395 Internship</td>
<td></td>
<td>3 min.</td>
</tr>
<tr>
<td>MFT 7000 Advisor</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>MFT 7000 Cohort Group</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DISSERTATION (12 hours minimum)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MFT 8000 Dissertation</td>
<td></td>
<td>12 min</td>
</tr>
</tbody>
</table>

| TOTAL Ph.D. HOURS                                         |          | 63    |

<table>
<thead>
<tr>
<th>PROJECTED DATE FOR QUALIFYING EXAMINATION:</th>
<th>Fall</th>
<th>Spring</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROJECTED DATE FOR GRADUATION:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

555
DOCTORAL CURRICULUM
DOCTORAL STUDENTS ENTERING THE PROGRAM (FALL 2009)
USUAL COURSE SEQUENCE

Doctoral degree: students usually take 9-12 hours a semester and 6 hours during the combined Summer I and II sessions. Students entering with a master’s degree from a non-accredited MFT program may need to take leveling curriculum (Masters level courses). Course transfers are done on a course-by-course basis, as evaluated and approved by the instructor for the course. When a student is not eligible for exclusion from one or more of the above listed courses, the student will be required to take these classes and some modification may be necessary to follow the course sequence listed below. Students are encouraged to discuss the most appropriate course sequence with their advisor.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>FALL</th>
<th>SPRING</th>
<th>SUMMER I</th>
<th>SUMMER II</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>Qualitative Methods – MFT 6323&lt;br&gt;PRACTICUM – MFT 6395&lt;br&gt;MFT 7000 (specialization cohort)&lt;br&gt;Intro to State - HDFS 5349 or&lt;br&gt;Research Methods – MFT 5351&lt;br&gt;Child/Adolescent – MFT 6342</td>
<td>*Seminar/Elective - MFT 6342 (violation&lt;br&gt;or grief/loss)&lt;br&gt;Diversity – MFT 6330&lt;br&gt;PRACTICUM – MFT 6395&lt;br&gt;Quant. Methods II - HDFS 6352</td>
<td>PRACTICUM – MFT 6395</td>
<td>PRACTICUM – MFT 6395&lt;br&gt;*Seminar/Elective - MFT 6342</td>
</tr>
<tr>
<td>3rd</td>
<td>*Seminar/Elective – e.g., Addictions&lt;br&gt;6301( if needed)&lt;br&gt;Internship – MFT 7395&lt;br&gt;Dissertation – MFT 8000</td>
<td>Dissertation – MFT 8000</td>
<td>Dissertation – MFT 8000</td>
<td>Dissertation – MFT 8000 COMPLETE PH.D.</td>
</tr>
</tbody>
</table>

*Doctoral students are required to take three electives. Electives may be selected among the following courses: HDFS 6365 - Quant. Methods IV (SEM); MFT 6342 - gender, business, or money; Addictions, HDFS 5553 - Proposal Grant Writing, ADRS 6301 – Addictions & the Family, ADRS 6315 – Treatment of Addictions, PSY 5335 – Psych of Trauma & Abuse, PSY 5331 – small group behavior, SOC 5335 - Violence) and/or outside the department college.

Students should be enrolled in MFT 7395 (Internship) during the semester they begin their internship. This may or may not be the fall semester of their third year and will vary by student and internship site. It is also important to remember that once students register for dissertation credits, they must continue to be enrolled for those credits each semester until they graduate.
<table>
<thead>
<tr>
<th>Item</th>
<th>Current Students</th>
<th>Graduates</th>
<th>Faculty</th>
<th>Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1st</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th +</td>
<td>16</td>
<td></td>
<td></td>
<td>Not Applicable</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>16</td>
<td>22 (since 03)</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Male</td>
<td>14</td>
<td>24 (since 03)</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nonresident</td>
<td>0</td>
<td>6</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Black, non-Hispanic</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Hispanic</td>
<td>3</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>White, non-Hispanic</td>
<td>20</td>
<td>3</td>
<td>6</td>
<td>12</td>
</tr>
</tbody>
</table>
### Student Achievement

<table>
<thead>
<tr>
<th>Year</th>
<th># of Students in Cohort</th>
<th># of Students in Cohort that Graduated</th>
<th># of Graduates that Sat for the National Exam</th>
<th># of Graduates that Passed the National Exam</th>
<th># of GraduatesLicensed</th>
<th># of Graduates Working in the MFT Field</th>
<th># of Graduates that are Members in AAMFT</th>
<th># of Graduates in Other Mental Health Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2002 – Spring 2003</td>
<td>8</td>
<td>5</td>
<td>4</td>
<td>4</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Fall 2003 – Spring 2004</td>
<td>7</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>5</td>
<td>6</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Fall 2004 – Spring 2005</td>
<td>8</td>
<td>7</td>
<td>7</td>
<td>7</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>Fall 2005 – Spring 2006</td>
<td>6</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Fall 2006 – Spring 2007</td>
<td>7</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Fall 2007 – Spring 2008</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Fall 2008 – Spring 2009</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Fall 2009 – Spring 2010</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Comments:**

- Of those who have not yet graduated:
  - Spring 2003: 3 students are ABD.
  - Spring 2004: 1 student is ABD.
  - Spring 2005: 1 student is ABD.
  - Spring 2006: 1 student did not pass qualis (after 3 attempts) and left the program, 1 student still ABD.
  - Spring 2007: 5 students are on track to graduate in summer or fall of 2010.
  - Spring 2008: 2 students on track to graduate in 2010.
  - Spring 2009: 2 are on leave and 1 left the program to pursue a HDFS doctorate. Others are on track.
  - Spring 2010: all are doing well.
### Commission on Accreditation for Marriage and Family Therapy Education

#### FACULTY SUMMARY

(Commission on Accreditation for Marriage and Family Therapy Education Form)

In the table below, summarize information from each faculty member's current vita. Please provide information on each faculty member currently teaching in your program, including adjunct faculty, but only if they teach on an annual basis. If the program is submitting a self-study, value for ALL faculty members must be included but may be located in the on-site resource room.

<table>
<thead>
<tr>
<th>Faculty Member’s Name</th>
<th>Gender</th>
<th>Ethnicity</th>
<th>Highest Degree &amp; Field</th>
<th>State License #</th>
<th>MFT Credential (Check all that apply)</th>
<th>Experience</th>
<th>Role in Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Ivey</td>
<td>M</td>
<td>White</td>
<td>Ph.D. Couns. Psych</td>
<td>TX</td>
<td>X X</td>
<td>17 23 Yes</td>
<td>FAC, SUPER F</td>
</tr>
<tr>
<td>Gunnur Karakurt</td>
<td>F</td>
<td>Turkish</td>
<td>Ph.D. MFT</td>
<td>OH</td>
<td>X X</td>
<td>6 7 No</td>
<td>FAC, SUPER F</td>
</tr>
<tr>
<td>Meryl (Mei-Ju) Ko</td>
<td>F</td>
<td>Asian</td>
<td>Ph.D. MFT</td>
<td></td>
<td>X X</td>
<td>1 5 No</td>
<td>FAC, SUPER F</td>
</tr>
<tr>
<td>Nichole Morelock</td>
<td>F</td>
<td>White</td>
<td>Ph.D. MFT</td>
<td></td>
<td>X X</td>
<td>5 9 FAC, SUPER OTH (undergrad coordinator)</td>
<td>F</td>
</tr>
<tr>
<td>James Morris</td>
<td>M</td>
<td>White</td>
<td>Ph.D. MFT</td>
<td>TX</td>
<td>X X</td>
<td>13 25 Yes</td>
<td>FAC, SUPER OTH (off-site administrator)</td>
</tr>
<tr>
<td>Name</td>
<td>Sex</td>
<td>Race</td>
<td>Highest Degree</td>
<td>State</td>
<td>Year</td>
<td>Certified</td>
<td>Notes</td>
</tr>
<tr>
<td>-----------------</td>
<td>-----</td>
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<td>----------------</td>
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<td>------</td>
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<td>---------------------------------</td>
</tr>
<tr>
<td>Douglas Smith</td>
<td>M</td>
<td>White</td>
<td>Ph.D in MFT</td>
<td>TX</td>
<td>6</td>
<td>Yes</td>
<td>FAC, SUPER</td>
</tr>
<tr>
<td>Nicole Springer</td>
<td>F</td>
<td>White</td>
<td>Ph.D in MFT</td>
<td>TX</td>
<td>10</td>
<td>Yes</td>
<td>FAC, SUPER, OTH-clinic director</td>
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<tr>
<td>Jason Whiting</td>
<td>M</td>
<td>White</td>
<td>Ph.D in MFT</td>
<td>TX</td>
<td>9</td>
<td>Yes</td>
<td>PD, FAC, SUPER</td>
</tr>
</tbody>
</table>

- **TFM** = AAMFT Approved Supervisor
- **AC** = AAMFT Supervisor Candidate
- **T** = Teaching MFT - educating students about marriage and family therapy
- **C** = Experience as an MFT - practicing as a marriage & family therapist
Commission on Accreditation for Marriage and Family Therapy Education

SUPERVISOR SUMMARY
(COAMFTE Form XI)

In the table below, summarize information from each supervisor's current vita. Please provide information on each supervisor currently supervising in your program, including supervisors at off-site practicum and internship placements. If the program is submitting a self-study, vitae for all supervisors must be included but may be located in the on-site resource room.

<table>
<thead>
<tr>
<th>Supervisor's Name and Location</th>
<th>Gender</th>
<th>Ethnicity</th>
<th>State License</th>
<th>CMF (Y/N)</th>
<th>All (Y/N)</th>
<th>SC (Y/N)</th>
<th>Expiration Date (ASSC)</th>
<th>State Approved (Yes/No)</th>
<th>Years of experience as AAMFT Supervisor (Y/N)</th>
<th>Years of experience as MFT</th>
<th>Currently engaged in clinical practice (Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: Jamie Whiting Placement Site, FTO</td>
<td>M</td>
<td>W</td>
<td>TX</td>
<td>Yes</td>
<td>Yes</td>
<td>2013</td>
<td>Yes</td>
<td>8</td>
<td>13</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Name: Douglas Smith Placement Site, FTO</td>
<td>M</td>
<td>W</td>
<td>TX</td>
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<td>Yes</td>
<td>2015</td>
<td>Yes</td>
<td>3</td>
<td>11</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Name: David Jew Placement Site, FTO</td>
<td>M</td>
<td>W</td>
<td>TX</td>
<td>Yes</td>
<td>Yes</td>
<td>2011</td>
<td>Yes</td>
<td>16</td>
<td>23</td>
<td>Yes</td>
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<tr>
<td>Name: Donna Johnson Placement Site, FTO</td>
<td>F</td>
<td>Turkish</td>
<td>OH</td>
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<td>Yes</td>
<td>2012</td>
<td>Yes</td>
<td>7</td>
<td>No</td>
<td>Yes</td>
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1 State License = LMFT, LCSW, LPC, etc.
2 CM = AAMFT Clinical Member
3 AS = AAMFT Approved Supervisor
4 SC = AAMFT Supervisor Candidate
5 MFT = Supervisor supervising students in their work as MFTs
6 Experience as an MFT = practicing as a marriage & family therapist
<table>
<thead>
<tr>
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<th>Credentials</th>
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<td>Name: Ann North</td>
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<td>Name: James Morris</td>
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<td>Nicholas Wilson</td>
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Commission on Accreditation for Marriage and Family Therapy Education
(COAMFTE Form XII)

PROGRAM STRENGTHS AND AREAS OF CONCERN FORM

In the space provided below, please summarize the programs continuing strengths and areas of concern. Briefly outline plans for improvement during the coming year (please type and attach additional pages if necessary).

These strengths and areas of concern are imbedded throughout the self study, and are summarized briefly here.

Strengths:

- There exists a climate of research activity among both faculty and students. This scientist-practitioner philosophy is important to us and includes several things:
  - Regular publishing of scholarly material as well as presentations at national conferences (see vitae and Appendix V).
  - Ongoing grants and contracts that have involved students as graduate assistants and collaborators.
  - Rigorous statistics and research methods classes.
  - Research collaboration among the core faculty.
  - A mentoring model of scholarly training.

- We provide funding for all doctoral students, which includes professional experiences such as teaching, research, or administration.

- There is strong support for the program from the department and college administration.

- We have a full time staff (Senior Business Assistant) and full time Clinic Director.

- We value clinical work, and provide students with advanced clinical training including:
  - Diverse supervision styles and theoretical training.
  - A large on site clinic as well as numerous regular internship sites locally.
  - Our clinic serves a diverse clientele.
  - We have Clinic Assistants (undergraduate interns~1000 hrs/year)

- We work in Partnership with the Center for the Study of Addiction and Recovery (CSAR) faculty, which provide courses and assistantship opportunities, as well as additional faculty to serve on committees.

- We foster a climate that values diversity and openness and tolerance.

- We have a growing body of graduate students, including a newly reconfigured Master’s program.

- The faculty come from diverse backgrounds in terms of training, research methodological and topical specialization, and experience.

- There is a healthy working relationship among the faculty, and regular meeting and collaboration occurs in the MFT faculty group.

- The program has strong ties to the community with many of our interns and graduates in local placements.
• Through our graduates and colleagues we have strong ties to other MFT programs.
• Our faculty provide substantial professional service in state and national MFT roles.
• We work with a growing undergraduate program (the Community Family and Addiction Services major and the Addiction Disorders and Recovery Studies minor). These classes are taught in part by MFT faculty and provide assistantships and teaching opportunities for our doctoral students. We also have been successful in recruiting for our graduate programs from these undergraduates.

Areas of Concern, along with plans for addressing these Areas:
• Faculty turnover in the last several years. This has resulted in more junior level faculty than senior faculty.
  o We anticipate this settling down as faculty get established.
  o We have successfully conducted a search for 2010.
  o There will be more senior level faculty in 2010 due to hires and promotions.
  o We are getting a departmental faculty mentoring program established which may also help with stabilizing and mentoring new faculty.
• There has been a lack of focus on teaching skills training for doctoral students.
  o We have a new qual process with teaching portfolio component (implemented 2009)
• There is a limited integration with the Core Competencies.
  o We have a new process for adapting syllabi to reflect Core Competencies and we will reevaluate this process as it rolls out in 2010.
• We have lower graduation rates among some who move beyond year 5 without a dissertation proposal in place.
  o We have a graduate school form to track this that we will now use.
  o We have increased our follow up of ABD students this last year.
  o As faculty become stabilized this will help keep contact with students.
• Increased numbers of students may bring increased competition for resources.
  o This is primarily an issue at the Master’s level (not having assistantships), but this impacts the doctoral program through busier faculty (trying to run two large programs).
• The students often seem to not be familiar with the Program Manual and associated policies and procedures for the Family Therapy Clinic.
  o We have begun discussions about how to address this through formal or informal means, including modifying our annual orientation meeting.
• The Student Organization (SAMFT) has become less organized and active over the last 2-3 years.
  o A current student is heading up the initiative to survey and gather support for this organization.
• The University is changing its focus and management structure (to be more focused on research dollars and graduate programs, and Tier I status).
  o We are fairly well positioned for this, but may experience challenges and changes as it is implemented.
TTU MFT’s Outcomes and Evidence for Compliance with Version 11 Standards  
Narrative Summary

Standard I: Program Quality:  
Mission and Philosophy

I-A: The program will have clearly specified educational outcomes congruent with the institution and program’s mission and appropriate to the profession of marriage and family therapy.

The Mission Statement and Learning Outcomes document (pages 8-11) guides the operations and policies of the doctoral program. Although the specific procedures and policies are found in the Program and Clinic Manual (See Supplemental Material), the overarching outcomes are contained in the Mission Statement and Learning Outcomes document. This document is on our website and is also found in the Doctoral Program Manual. We interpret the Educational Outcomes as the broad goals that emerge from the program and those associated with it. These outcomes are broken down into more specific Student Learning Outcomes, Faculty Outcomes, and Program Outcomes.

The Mission Statement and Learning Outcomes document was created through input from the faculty, staff and students. It has clear standards of achievement and provides measurable outcomes. These outcomes are congruent with the mission of the Institution, College, and Department. For example, TTU promotes excellence in three primary areas: research, service and instruction, which correspond generally to our three primary learning outcomes (research, clinical, and teaching). The University, College and Department’s missions are described below.

Texas Tech University
The mission of Texas Tech University is “to provide the highest standard of excellence in higher education” and is published in the university’s strategic plan and in the welcome section of the campus web page. The following is taken from the TTU mission statement: “[Texas Tech is] committed to teaching and the advancement of knowledge. Texas Tech University, a comprehensive public research university, provides the highest standards of excellence in higher education, fosters intellectual and personal development, and stimulates meaningful research and service to humankind.” The Vision of TTU is: “Texas Tech University will be a national leader in higher education—manifesting excellence, embracing diversity, inspiring confidence, and engaging society. The university aspires to a national recognition of excellence and performance in scholarship through teaching, research, and service.” These goals and vision are consistent with our MFT program.
**Human Sciences**
The College of Human Sciences is comprised of a diverse group of scholars that include the Marriage and Family Therapy Program. The college has a mission to "provide multidisciplinary education, research, and service focused on individuals, families, and their environments for the purpose of improving and enhancing the human condition." The college website offers this description: "From our health to our families, from the way we dress to the environments in which we live, work and play, COHS students make an impact on how we experience the world around us. The COHS offers nationally recognized programs from award-winning faculty – all in an intimate, supportive and collaborative environment. Through hands-on experience, top-ranked curriculums, extensive research opportunities and community outreach programs, COHS students are ready to succeed not only in their careers, but in making the world a better place. The College of Human Sciences offers a variety of options in Graduate Studies in the following departments: Applied & Professional Studies, Department of Design, Human Development and Family Studies, and Nutrition, Hospitality, & Retailing." The college has been supportive of the MFT program and regards the program as a key player in achieving its mission.

**Applied and Professional Studies**
The Department of Applied and Professional Studies was created in 2004 as a way to bring together programs with an emphasis on application and practice. The mission statement of APS (see supplemental material for complete strategic plan) is: "The Department of Applied and Professional Studies provides the highest standards of excellence in higher education in the fields of addiction and recovery, family and consumer sciences education, marriage and family therapy, and personal financial planning while contributing to new knowledge in these areas through meaningful research and community outreach."

Within APS, MFT is well positioned, having the largest PhD program and a growing Master’s program. The undergraduate Community, Family and Addiction Services (CFAS) major is served by faculty and graduate students from the MFT program and has grown every year since its inception in 2006.

**I-B: Educational outcomes reflect an understanding and respect for cultural diversity.**

As stated in the Statement of Human Dignity in the MFT Program Manual [see Appendix XIII], the Texas Tech Marriage and Family Therapy program adopts a posture of respect with regard to understanding and accepting the variability among social, religious, cultural, and other groups with regard to the worth and uniqueness of each individual. We endorse and uphold the anti-discrimination and affirmative stance of our University and embrace the plurality of the human experience as an invaluable resource to the quality and vitality of our program and profession. We define diversity in terms of the variability and differences between people according to a wide and potentially inexhaustible set of concepts including but not limited to: race, ethnicity, religious affiliation, sexual orientation, gender and gender identity, physical
disability, and socio-economic status (See Mission Statement and Learning Outcomes document: Program Outcomes number 3).

Our rationale for establishing this definition rests in our philosophy that all humans must be afforded dignity and respect and that the oppression of any member or group within a society occurs to the detriment of all members of that society. Also, we believe that without intentional intervention to resolve sources of discrimination and oppression, all social systems contribute to the continuation of the oppression of underprivileged individuals and groups.

We recognize that our goal of achieving a more diverse program entails accepting that our goals are aspirations that will not be completely fulfilled. Nevertheless, we value the process of seeking human dignity and we attempt this in many ways, including: prioritizing program resources to recruit and maintain a diverse faculty and student body, promoting an atmosphere conducive to mutual respect for individual and group differences, identifying aspects of the program which promote disadvantages for marginalized groups or individuals, and implementing interventions to resolve and eliminate identified problem areas.

This process involves efforts to value diversity in ways that are not always easily measured (e.g., beyond ethnic breakdown of students). For example, we try to teach and emulate respect for various viewpoints, and infuse this type of instruction and content into all of our classes. However, even though it is not always adequate or measureable, we do take specific steps to help make this happen.

Our benchmarks for achieving diversity include the following:

1. We assess the composition of the faculty, supervisors, student body, and clinical populations in terms of diversity definition of the program (see Form VIII). This is done with our annual report to COAMFTE as well as faculty reviews during meetings and yearly retreats.
2. During recruitment we do several things in regard to our goals for diversity:
   a. We invite applicants to speak to “unique contributions to diversity” in their application statements (e.g., first to go to college, unique background, etc. See Appendix II).
   b. We calculate the number of applications of diverse status, as well as the numbers accepted and enrolled in the program.
   c. When appropriate, we use department and graduate school funds to help bring in diverse students out for interviews where financial concerns exist.
   d. We ask questions of our interviewees regarding their appreciation and comfort with diverse individuals in potential clinical settings.
   e. We attempt to connect with diverse faculty and potential students at national conferences.
3. In general we try to help diverse students identify appropriate financial or scholarly support (e.g., scholarships, research opportunities). Specific scholarships are targeted for improving diverse representation among our cohorts, and we seek to
keep students aware of opportunities such as the minority student awards from AAMFT. We have so far been successful in securing the new AAMFT/SAMHSA Minority Fellowships, with four of our students joining this elite group in 2008, and more applying this year.

4. We discuss in practicum and other classes issues of diversity, which generates an openness regarding this topic that can lead to further in- and out-of-class discussions.

5. We have a doctoral class on diversity (MFT 6370) that focuses on cross-cultural research and diversity in clinical populations.

6. We have encouraged members of the MFT faculty to act as official Texas Tech University mentors for students of color at the undergraduate level.

7. All faculty are required to complete Employee Non-Discrimination training every two years at TTU.

8. In general we try to foster a spirit of respect and tolerance for others and take corrective action when we feel like an individual’s rights or dignity are not being protected. This has happened with individual meetings with the Program Director as well as meetings between faculty and students. When significant problems arise, policies are in place for the filing of complaints or grievances (see Appendix XIII and Program Manual in the Supplemental Material).

**I-C:** Educational outcomes are reviewed periodically and revised to reflect professional marriage and family therapy principles, educational guidelines, the communities of interest, and the advancement of the program.

The program solicits evaluations and recommendations on educational outcomes and general process from several sources:

- The faculty discuss issues that arise during their regular weekly meetings which may affect our educational outcomes. When needed, these are reviewed and modified.
- The faculty also attend an annual retreat to discuss educational outcomes and to plan for the academic year.
- Current students provide feedback informally as well as formally in their first year during their preliminary review process (Spring semester of their first full year).
- Alumni provide survey data that include professional involvement, employment status, overall satisfaction with their program experience, as well as their specific experiences with the educational outcomes (see Appendix IX).
- The program is internally reviewed by the University every six years during which program outcomes, academic rigor and student and faculty experience are reviewed by internal committee and one specific external MFT reviewer (a faculty member from another accredited MFT doctoral program). This recently took place in Spring 2009, which resulted in helpful feedback regarding our strengths and growth areas.
I-D: The program will be clearly identifiable as training students in the profession of marriage and family therapy.

The program is clearly identified as a training program in marriage and family therapy in all departmental and graduate school materials and in program recruitment literature (See brochures etc. in Appendix XIII). Students in the program follow a distinct MFT curriculum that is designed and administered by the MFT faculty in alignment with COAMFTE standards. The prefix “MFT” is used for marriage and family therapy courses. Students are admitted at the doctoral level within the department, and MFT students are identified as such by departmental faculty. Students maintain identification in the marriage and family therapy program throughout their studies and foster professional identities as marriage and family therapists through affiliation with state and national MFT associations and the pursuit of MFT licensure. The program maintains an on-campus clinic that is expressly identified as a Family Therapy Clinic (FTC).

I-E: Roles of faculty and students in the governance of the program are clearly defined and enable the program to meet stated educational outcomes.

As reflected in the departmental policies and procedures manual, the conduct and administration of the MFT program and curriculum falls under the responsibility of the full-time MFT program faculty. Matters pertaining to program operations are addressed within MFT faculty meetings (usually held 2-3 times per month). New student admissions, student reviews, curriculum changes, and other similar issues are determined by the MFT faculty as led by the Program Director (See section II-D for further Program Director responsibilities). The primary means of communicating all program policies and procedures is through the Program Manual, which is given to all students electronically when they enter the program in the fall. They are given a Flash Drive with this manual, as well as the Clinic Manual at an orientation meeting that occurs the week that classes start in August. These manuals are also on a server that is restricted to all MFT students and faculty. Policy changes of note are communicated via email to the students. In general, changes in program policies are enacted in the fall, when they can be incorporated into the incoming cohort’s manual.

Student’s roles in governance usually involve providing feedback to faculty, and this occurs in various informal (such as during class or small group discussions) as well as formal ways (via a meeting with the program director). At times, a student representative has been involved in faculty meetings where concerns or issues are brought to the faculty. When this occurs, it usually arises from the student organization. Individual students are welcome to bring questions or concerns to the Program Director at any time.

I-F: Documents and publications accurately reflect the program. Any references to published or promotional materials to the program’s offerings, faculty and student learning outcomes, accreditation/approval status, academic calendar,
admission policies, grading policies, racial and cultural composition of the faculty, students, and supervisors, degree completion requirements, tuition, and fees are accurate.

Documents and publications are updated yearly (usually in the late summer). When significant changes occur the documents may be updated as needed. These documents and publications include the website, the program flyers and updated Program Manual (including degree completion requirements, policies, etc.). Outside of the MFT program and policies, The Texas Tech University website is the source for much of the student’s information (e.g., academic calendar, fees and tuition information, etc.) (See Websites and Supplemental Material).

I-G: Policies of the program are fair, equitable, published, and are reviewed, and revised as necessary. These policies include but are not limited to those relative to student recruitment, anti-discrimination, admission, retention, and graduation.

Admissions criteria to Texas Tech University are published within the Graduate Catalogue. In addition, prospective students can find information describing the application process, program admissions criteria, program requirements, and the selection process on the website or directly from the Program Director (who regularly gets emails from interested parties). The program assesses the recruitment procedures on an annual basis and periodically at regularly scheduled faculty meetings. Recruitment is evaluated based on the success of admitting desired candidates and the success of admitted students. The program faculty invite current student input throughout the recruitment process and involve them before and after it occurs each year. The faculty also consider their strategies for enhancing recruitment of a diverse student group. In addition, the program maintains a policy pertaining to the protection of applicant personal information that is based on the university and graduate school’s policies and operating procedures (for example, the current students do not have access to applicant files). The policy of the institution is to treat applicant personal information as sensitive and confidential, and not disclosable without proper consent from the applicant.
Standard II: Program Quality:
Organizational Alignment and Support

II-A: The program resides in an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the educational outcomes of the program.

The MFT program is housed as one of the areas of graduate study within the Department of Applied and Professional Studies, which is located with the College of Human Sciences. The overall structure of the system and the University as a whole remains strong and stable. Texas Tech University is a state-supported educational and research institution with consistently high levels of undergraduate and graduate student enrollment. It is anticipated that TTU will be the next university in Texas to be designated Tier I status, and the goals of the University administration are currently aligned with this mission. The College of Human Sciences is one of the original Texas Tech University Colleges and one of the largest units on campus. The college is supportive of the MFT program, which is housed in the Department of Applied and Professional Studies (APS).

TTU
The University has many offices and services that support the mission and outcomes of the MFT program. Here are some of the primary services offered:

- **Office of Research Services.** This office provides centralized administrative and management services for sponsored projects. ORS provides information on funding opportunities to faculty, assists with proposal development, maintains records and provides reports of proposal and award activity, represents the University in the negotiation and award of grants and contracts, assists with post-award project management, and ensures that the administration of sponsored projects at TTU complies with federal and state regulations, ethical principles, and generally accepted practice. The Office of Research Services has supported the mission and outcomes of the MFT program by its support of our grants and contracts, which has involved many of our faculty and students getting help with grant preparation, budgeting, and the record keeping for those awards.

- **Sponsored Programs Accounting & Reporting (SPAR).** This office helps manage awards after they are given. The grants held in the MFT program have students and faculty who are in regular contact with SPAR personnel, and these staff help by providing fiscal management and business support services for all grant and contract funds. They are committed to serve as a resource to departmental administrators and researchers in all aspects of the post-award financial administration.
• **Institutional Review Board (IRB).** The Institutional Review Board (IRB) at Texas Tech University reviews all proposals for human research carried out at Texas Tech University. The mission of the IRB is to protect the rights and welfare of human subjects who participate in research involving Texas Tech University personnel, resources, and/or facilities. The IRB is directed by federal regulations and policies of the Department of Health and Human Services. Each proposal for human research is reviewed by one or more IRB reviewers.

• **Teaching Learning and Technology Center (TLTC).** The Teaching, Learning, and Technology Center provides instructional development opportunities, pursues continuous quality improvement, stimulates the greatest degree of meaningful research related to instructional development, develops and applies appropriate technology to teaching, and supports faculty and other instructional staff. The TLTC works with the MFT program in providing training and evaluations for our doctoral teachers and their portfolios (e.g., helping with teaching philosophy construction).

• **The Graduate School.** This office supports more than 160 different Master’s and Doctoral degree programs and keeps track of the students’ overall progress toward their degree plan. The Graduate School values the students’ interests, personal research aims, and career goals. In keeping with that spirit, they provide some funding for student travel to present research. They are in regular communication with the MFT program (primarily through the business manager) in regard to these matters.

• **The Provost’s Office.** As the primary academic administrator, the Provost is charged with developing, implementing, and reviewing academic policies and programs. This office coordinates activities of academic deans and directors and informs and advises the President on academic matters. The office is responsible for personnel and budgetary matters in the academic areas, including supportive areas such as the Libraries; the Teaching, Learning, and Technology Center; Teaching Academy; Service Learning; International Affairs; and many others. Also, this office provides start-up money for new MFT hires, which includes money for a research assistant, equipment, research incentive monies, and travel.

**Human Sciences**

The College of Human Sciences has been supportive of the MFT program, and recognize it as a strong contributor to the vitality of the graduate programs within the college. The college has an Associate Dean for Research, who is responsible for supporting all HS faculty in their research process, including identifying grant possibilities, reviewing proposals, reviewing IRB submissions, doing workshops, and overseeing a seed grant mechanism which is made available to all new faculty when hired for their first two years (currently providing $5000 per year to support research). They have a yearly conference where supported faculty come along with graduate students to present their research. This office also helps to support MFT graduate students in their travel to present at national conferences.
Applied and Professional Studies
The department is supportive of the MFT program, and provides office staff and funds to support its operations. There are six full-time lines for tenure-track faculty, two instructors, an off site faculty, and a full-time MFT staff as well as funding for two full time graduate assistants (the program and clinic director assistants). The department staff helps with fiscal management, photocopies, and supplies.

The department chair is supportive of the MFT program, and in general, the departmental faculty are evaluated along the dimensions in our educational outcomes. For example, the annual faculty evaluations review three dimensions: scholarship/research, service, and teaching.

II-B: Fiscal and physical resources are sufficient to enable the program to meet educational outcomes. These resources are reviewed, revised, and improved as needed.

Physical facilities on campus for research and a clinical internship/practicum site are adequate and conducive to clinical research and practice. TTU is a major university with the typical physical and fiscal infrastructure. The program and Family Therapy Clinic are housed primarily in the Human Sciences building, which provides adequate physical space and support.

The Texas Tech Library is a major research library. As such, it is well equipped with relevant books, journals, and other media. All MFT students and faculty have Internet access to library databases including ERIC, PsychInfo, Social Science Citation Index, etc. The library is a member of several consortia, including interlibrary loan. No charge is made for journal articles sent through interlibrary loan, nor is there any cost for books sent through interlibrary loan. Faculty are permitted to order journal articles and books in the library to be delivered to the departmental office. The library is a Federal Document Repository. The TTU International Center maintains a substantial cross-cultural video collection. Students and faculty also have access to the extensive journal and book collection of the Texas Tech Health Sciences Center.

The Family Therapy Clinic (FTC)
The MFT Program has sole responsibility for the TTU Family Therapy Clinic, an on-campus facility that is the primary training site for the program. The Family Therapy Clinic was established to provide training opportunities for graduate students in the Marriage and Family Therapy (MFT) Program. The FTC student therapists provide direct services for couples, families, individuals, or groups and serve as a resource for other agencies in the Lubbock and South Plains area. The focus of all services, direct and indirect, is on assessing and improving the way relational systems work—whether the system is a couple, family, group, classroom, or agency. The FTC works within compliance of the American Association for Marriage and Family Therapy (AAMFT) Code of Ethical Principles for Marriage and Family Therapists in the provision of direct and indirect services.
The FTC was expanded several years ago, and refurbished again this last year. There are six rooms in total and one room (Soft Iris) is especially dedicated to play therapy. All rooms have video cameras, observation rooms with audio and video recording equipment, comfortable chairs, lighting, carpeting, etc. The FTC has a separate entrance and waiting room. Care is taken to ensure that sessions are private, that records are kept securely, and that precautions for confidentiality are observed. Although this space can become crowded during peak hours (early-mid evening on weekdays), we have not had any major concerns about meeting our client needs as far as adequate FTC space.

Referrals to the FTC come from many sources: former clients, physicians, agencies, and others via advertising or website presence. The facility is advertised in the Yellow Pages and brochures are available to the public. Because the FTC is also a research facility, the intake assessment package and statement for informed consent are reviewed and approved by the TTU Institutional Review Board. The FTC Manual describes the policies and procedures regarding safety, privacy, and confidentiality. The FTC has a client satisfaction survey to evaluate the services received by clients.

The Family Therapy Clinic operates on a year-round basis, closing for a week to 2 weeks around the Christmas/New Year’s holidays. Students are informed that the FTC is a 12-month operation and must have permission from their supervisor to be absent from the FTC. The clinic is busy, and clients are seen every work day except for holidays. As an example, from September 2008 to August 2009 there were 1,483.5 total client hours. Of those, 801.5 were individual hours, 349 were couple hours, and 333 were family hours. There were 249 new intakes in the 2008-2009 school calendar year. The number of aftercare cases in the FTC for the 2008-2009 school calendar was 76. The number of client sessions (non aftercare) totaled 1,059 from September 2008 to August 2009. Many of the clients served are from diverse backgrounds in terms of SES, Education, Religion, and Ethnicity (See Following Chart of Racial/Ethnic Origin of FTC clients).
The FTC is a self-funded facility in that all operating costs must be paid from the fee revenues collected from clients. Texas Tech University provides partial underwriting of the costs of maintaining the FTC. This allows the FTC to provide services at reduced fees for clients who cannot afford to pay the full fee of $50.00 per session. Fees for services from $10.00 - $50.00 per 50 minute session are negotiated between the therapist and the client during the first session (which is free to all clients), and are set based on the current FTC Fee Schedule (see below). If a client indicates that he/she is unable to pay the designated fee based on their income and number of dependents, the therapist must consult with his/her supervisor and/or the FTC Director for fee reductions. Upon final fee determination, the client must sign the Fee Agreement form. Any fee request for under the $10.00 minimum must receive the permission of the FTC Director before a fee agreement can be entered between the therapist and her/his client. On occasion, “no fee” arrangements are made for those clients needing special consideration due to the clients’ inability to pay.
## Texas Tech University Family Therapy Clinic

### Fee Scale

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**NOTE:** Any fee below the $10.00 minimum session charge must be approved by the Clinic Director BEFORE any agreement is reached with the client.

The FTC began a continuing education conference in 2009 that was successful in generating income and visibility for the program, and other contracts exist that generate revenue for the operations of the clinic. These initiatives will continue in upcoming years. The college assists by paying the Clinic Director salary and an administrative assistantship as previously mentioned.

### Other Office Space

Work space is provided for faculty and student graduate assistants. Each faculty member has his/her own office within the Human Sciences building. Graduate students are assigned a personal carrel for the academic year for personal belongings and study space. There exists separate workspace for some of the funded initiatives in the MFT program, with desks and computers, printers, etc., for these projects. For example, the Texas Healthy Marriage Initiative Evaluation (Dr. Whiting's project) is housed in a cottage building behind the Human Sciences building, and the students working on the Medical Family Therapy Initiative use space at...
Covenant Hospital. The MFT students have a general student area that has a camera to the waiting room for the clinic, as well as computers/printers, and other clinic support items such as paperwork and books.

Financial Support
The MFT program has been successful in funding all doctoral students with assistantships over the last several years. Many students teach undergraduate level courses (in the CFAS or the Addiction Disorders and Recovery Studies areas). Other students have had assistantships through the grant projects of the faculty (e.g., the Relationship Education Initiatives of Drs. Whiting and Harris, the medical family therapy initiative of Drs. Ivey and Kimball, or the Parent Empowerment Program of Drs. R. Wampler and Smith). Some students serve as research assistants funded by start up money, and others through department funded assistantships such as the administrative assistants for the Program and Clinic Directors. These assistantships are almost always for 20 hours a week (half-time), and many students have more than half-time assistantships when there has been extra work to go around. These funding sources are reviewed every year in an effort to be equitable for students. Also, priority is given to students in their first 2-3 years of doctoral study, with more advanced students being funded as available. The graduate assistantships are an important part of achieving our educational outcomes because they allow students to become involved in the educational process in multiple ways (research, teaching and clinical) that helps to develop skills and professional competence (See Section on Assistantship Priorities in Supplemental Material).

Travel funding is available to all faculty through the APS department, and graduate students are similarly supported through a combination of department, college, and graduate school funding. The Family Therapy Clinic also funds national and international student travel for presentations at academic conferences. Priority goes for those giving research presentations. Grant monies also support some student and faculty travel. The College also supports some travel for other research-oriented initiatives (e.g., grant opportunities or training).

II-C:  **Academic support services** are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.

Students receive an orientation to the program and to the department during the first week of classes following their entry into the program. During their orientation, students are informed of various support services including the student counseling center, writing center, libraries, recreational center, registrar, ombudsman and student advocacy resources. For students employed at least half-time, the benefits options are reviewed, as well as the TTU employee assistance programs. Students who are assigned as Teaching Assistants receive an additional training at the beginning of the year before they begin classes. Students are informed by MFT faculty of the requirements for licensure and clinical membership and of other professional resources.
II-D: The program director is academically, professionally, and experientially qualified and is vested with the authority necessary to accomplish the educational outcomes of the program. The program director provides effective leadership to the program in achieving its educational outcomes.

The current Program Director (PD) at TTU is Dr. Jason Whiting. He has been at TTU since the Fall of 2007 and has been a faculty member in accredited programs since 2001, when he joined the faculty at an MFT Master’s program. He has been actively involved in the profession since 1995, has taught many MFT graduate courses, has published extensively within MFT research, presented regularly at national and state conferences, and is externally funded with grants. He has been a Program Director for 5 years (2 at his previous institution — see vita).

Dr. Whiting oversees all aspects of the program, clinical training, facilities, and services associated with the program, although some of these responsibilities are delegated to the Clinic Director (Dr. Nicole Springer) or Senior Business Assistant (Lori Minner - see organizational chart, Appendix VI, as well as program director responsibilities, Appendix III). The Program Director directs MFT faculty meetings and program decisions and policies. He is a member of the departmental executive committee which meets bi-monthly with the department chair, and has programmatic authority.

One of the evidences of the Program Director’s leadership is the support of the Department Chair (see annual reviews) and the Dean, who gave full support for his going up early for tenure and promotion in 2010.

II-E: The program director, or whoever has or shares ultimate program responsibilities, will be an AAMFT Approved Supervisor or a State Approved Supervisor. Supervisory candidacy status or equivalency does not satisfy this element.

The Program Director is an AAMFT Approved Supervisor (# TX 275). The Clinic Director is also an AAMFT Approved Supervisor (#75724).

II-F: Program director responsibilities include oversight of the curriculum, clinical training program, facilities, services, and the maintenance and enhancement of the program's quality.

The Program Director is responsible for the curriculum and the policies and procedures that guide the academic programs (see MFT Program Manual). He is also responsible for overseeing the clinical training program and facilities through the Clinic Director (see respective roles in Appendices III and IV). He works with the faculty to review and change policies and procedures for the betterment of the program. This generally occurs through the faculty meetings (held 2-3
times monthly) and retreats. He also works directly with the Department Chair to meet
departmental needs, such as assigning courses that will be taught by faculty and graduate
assistants. The Program Director is ultimately responsible for the clinical training, facilities,
services, and the maintenance of program quality. Although the administrative structure of the
program encourages a collaborative model for program decision-making and operations, the
director’s responsibilities are not shared by other individuals. During times of leave, a pro tem
program director can be appointed.

II-G: Faculty members are academically, professionally, and experientially qualified
and sufficient in number to achieve educational outcomes of the program.

The program is staffed by 6 full-time, tenure-track faculty (new hire occurring in the Fall of
2010), as well as the Clinic Director and the Undergraduate CFAS coordinator (both instructor
lines). In addition, there is an off-site faculty assigned to the MFT program who works at a
satellite campus as an administrator and teaches one class per year for the MFT or CFAS
curricula. All faculty are Approved Supervisors or Supervisor Candidates. They have many varied
experiences and qualifications, which will be discussed in more detail in Section IV-D. See
faculty vitae for more information.

II-H: The faculty roles in teaching, scholarship, service, and practice are identified
clearly and are congruent with the educational outcomes of the program.

The MFT Faculty are actively involved in all aspects of the student’s education and training and
provide extensive and sustained mentoring in both research and clinical work throughout the
program. The primary location where faculty roles are identified is in the MFT Program Manual.
Standard III: Program Quality:
Curriculum and Teaching/Learning Practices

III-A: The curriculum is based on and developed, implemented, and revised to reflect clear statements of expected student learning outcomes that are consistent with Professional Marriage and Family Therapist Principles and congruent with the program’s educational outcomes.

Our curriculum is grounded within the AAMFT six learning domains that have traditionally guided MFT doctoral education. However, we put special emphasis in the areas in our mission that relate to our specific learning outcomes. For example, our students take more advanced statistics and research methodology classes than might be found in other doctoral programs. Although our learning outcomes are in part achieved by mechanisms beyond the course curriculum (e.g., the quals process or internship), many of the outcomes are accomplished through the courses they take. Upon completion of the Ph.D. coursework we expect the students to have obtained a comprehensive knowledge of:

- Research methodology
- Statistics appropriate for use with research methodology
- The current state of MFT research
- The major theoretical approaches in MFT and a sophisticated understanding of the critiques and philosophical underpinnings of those approaches
- How to instruct others effectively in marriage and family therapy literature and theory
- Current supervisory models and research on those approaches
- How to evaluate his/her own strengths and limitations as a clinician
- One’s own philosophy of therapy

In an effort to evaluate our doctoral curriculum with the current Core Competencies of AAMFT, we have engaged in a process of reviewing the core competencies and our own learning outcomes. We have added tables to all of the doctoral syllabi to identify which of the competencies they are covering in that specific course. As a doctoral program, we anticipate that we are building upon the competencies developed in each student’s master’s curriculum so we assume that students will enter our program at a reasonably competent level. However, it is important to us to continue to advance student learning in areas previously developed (e.g., clinical theory and competence) while adding new competencies specific to our doctoral curriculum and process (e.g., in statistics and supervision pedagogy). There is a summary table (see Supplemental Material) that shows which competencies are covered in the classes (see also the Syllabi).

III-B: The curriculum is based upon a comprehensive and substantive understanding and foundation of human development, family dynamics, systemic thinking,
interactional theories, traditional and contemporary marriage and family therapy theories, research, and the cultural context in which they are embedded.

As mentioned, our doctoral curriculum remains focused on the learning domains that have traditionally been emphasized, which include “a comprehensive and substantive understanding and foundation of human development, family dynamics, systemic thinking, interactional theories, traditional and contemporary marriage and family therapy theories, research, and the cultural context in which they are embedded.” Infused into these classes are specific emphases that are important to our learning outcomes. For example, diversity issues are covered by a specific class (MFT 6370), but these topics are also covered by specific assignments in many other classes (e.g., seminar classes on gender, violence) and in the clinical practicum (MFT 6393). Also, there are many courses on research methods and statistics, but research is emphasized in many classes (e.g., the Diversity class has a focus on cross-cultural research approaches, and the seminar classes sometimes require papers on current research on certain topics). The classes have been modified over time as we have clarified our mission and outcomes, and as different faculty have chosen to focus on certain areas in their courses and research. For the full list of classes offered in each area, see attached curriculum in Form IX.

The faculty view the academic and clinical portions of our program as integrated. Clinical training must proceed from a solid understanding of theory, development, and research. To be meaningful, however, this academic foundation must be applied and tested by a knowledge that comes only by working directly with couples and families. Our move to an applied department (separate from HDFS) in 2004 helped us to make this applied focus more consistent in most of our classes.

The faculty does not teach or adhere to a single theory or school or approach to marriage and family therapy. Rather, they teach all of the major approaches and expect the student to be willing to examine each of these in her/his work with clients. They want the student to understand, compare, and evaluate the major approaches. The student’s task is to integrate them into a personally meaningful and effective approach for the purpose of helping families change, and for the purpose of helping others understand families better through teaching and research. The faculty has a collective interest in helping students understand their role in the clients’ change process. They believe it is vital for students to recognize how their own actions, reactions, and values may facilitate or hinder clients’ change.

The MFT Faculty are actively involved in all aspects of the student’s education and training and provide extensive and sustained mentoring in both research and clinical work throughout the program.

**III-C:** The curriculum is logically structured to meet expected program outcomes.

1. The master’s curriculum is clinically and empirically focused consistent with the educational outcomes of the program.
2. The doctoral curriculum is based
upon a foundation of research and teaching principles as well as advanced clinical and supervision training consistent with the educational outcomes of the program.

Although we have a Master’s degree program that is consistent with typical accredited programs, it is not currently accredited by COAMFTE. The Master’s degree contains curriculum that includes a focus on addiction studies (including several ADRS courses) while preparing students for clinical licensure and future doctoral work in MFT.

The doctoral program is designed to accept students who have the requisite skills from their Master’s Programs that enable them to perform the Core Competencies as established by the AAMFT. If they are seen as deficient in their Master’s education, they will be asked to take classes from our Master’s curriculum to level them up to the doctoral standards. For example, if someone comes to us from a non-clinical Master’s degree, they will need to take most of our Master’s curriculum before entering the doctoral curriculum and clinical phase. If they enter our doctoral program with a different type of clinical master’s degree (e.g., from social work or counseling), they will be able to transfer in more of their curriculum plus some of their clinical hours, while still needing to take some of the master’s curriculum. In general, candidates from these two groups would be more likely considered for entrance into our Master’s program rather than doctoral program. The primary applicants for our doctoral program are usually drawn from accredited or non-accredited MFT programs, and therefore are ready to enter into the main doctoral sequence (The MFT Program Manual has more detail on this, including differences in hours transfers, etc).

III-D: Curriculum and teaching/learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.

All course curriculum practices are evaluated via student evaluations and ongoing faculty dialogue. These take place primarily during the weekly MFT faculty meetings as well as at the annual faculty retreats. Student evaluations are conducted for each class during the long semesters. These evaluations are provided to the department chair and are incorporated into Annual Faculty Reviews. If there is a deficiency noted in individual faculty performance, referrals are made to the Teaching and Learning Technology Center (TLC) on campus, which provides feedback, visiting, syllabi help, and courses designed to improve teaching pedagogy skills (offered throughout the semester). Additionally, the college does a peer evaluation that is factored into the third year review for faculty and the tenure and promotion process.

Another of our feedback mechanisms that is specific to the MFT program is the Supervision Evaluation form (Appendices VII and VIII). This is filled out by the supervisees and their supervisors at the end of their practicum semester.
Informal feedback occurs from students during the year in classes (e.g., mid semester evaluations) and through ongoing dialogue between students, faculty and the program director. For example, during the preliminary reviews that occur at the end of the first year, the faculty ask the students for feedback. Additionally, students often speak to the program director when concerns arise, and this feedback is sought out as well. A recent example of how this affected the curriculum and learning practices is with the diversity class. An ongoing issue for our doctoral students is that many of them have had a typical diversity class as master's students, and they sometimes request to substitute something else for that class. However, an understanding of diversity is one of our primary program outcomes, and we were concerned about the level of sophistication in our student's understanding of diversity issues as they manifest themselves in the quals process. Through a dialogue with our doctoral students, we modified the diversity class to include a strong component on cross-cultural research. Therefore we maintain the focus on diversity as a topical class, but also infuse further research content into the class which is one of our primary outcomes as well.

III-E: The didactic and clinical teaching/learning practices and learning environment support the achievement of expected and actual student learning outcomes.

Although all faculty have the academic freedom to construct courses in the way that they deem most effective, there is regular consultation about the content of those courses. For example, all faculty run practicum at different times and use different methods, but in general they all cover the same core competencies, which tend to produce similar outcomes in the interns. Evidence of the achievement of the student learning outcomes appears as students pass their qualifying exams, and proceed through their doctoral candidacy and complete internships and dissertations. Our students tend to get high marks at their internship sites, and many of these sites have actively sought our interns because of their quality.

Our alumni tend to rate their academic experience here as quite favorable (see Appendix IX), and many of the strongest marks come in regard to what they learned from their courses and clinical training.

The on-site clinic also is a key component of achieving the clinical student learning outcomes. It is overseen by the Clinic Director, who is also the internship coordinator for doctoral students. The clinic itself is equipped with digital cameras and video equipment that can record sessions for replay with supervisors. Also, practicum is run in our clinic, which has many rooms and observation areas for group live supervision.

The classroom settings are also a source of support for the learning outcomes. In general, each classroom contains internet access, projection capabilities with DVD/VCR and powerpoint facilities.
III-F: The **curriculum** and **teaching/learning practices** consider the needs and expectations of the identified **communities of interest**.

The primary community of interest for our teaching/learning practices are our students, who are the focus of most of our learning outcomes. We actively solicit student feedback, and also consider whether what we are doing is helping these students achieve the outcomes we have set. We also include faculty and other staff and supervisors in our decision making, and try to meet their needs as well. Other communities of interest include our alumni, our academic home (department and college), our clients, and the internship sites our candidates go, the AAMFT profession, and those we end up influencing though our various professional activities.
Standard IV: Program Effectiveness:
Student Performance and Faculty Accomplishments

IV-A: Student performance in both coursework and clinical practice is evaluated by faculty and supervisors and reflects and achievement of expected outcomes. Evaluation policies and procedures are defined, published, and consistently applied.

General Student Evaluation
Student performance in coursework and clinical practice occurs through various means throughout the degree program. There are many informal as well as formal procedures in place for evaluation. For example, students receive informal feedback from faculty and supervisors as they interact with them in various settings, which may include classroom discussion, supervision, and assistantship assignments. There may be many opportunities for feedback from the doctoral chair, who likely has more interaction with his/her students in small groups, with the teaching portfolio and especially the dissertation proposal and defense.

Formal evaluations occur in classes as well, but also happen at specified times during the program. For the most part these formal evaluation procedures are clearly defined and applied. Most classes have clear grading policies and rubrics used to define expectations for the student (see examples in Syllabi)

Students are also formally evaluated at the end of their first year in the program. The meeting is considered the candidacy examination for master students and the preliminary examination for doctoral students. This is to file a formal plan of study and to determine if there is adequate progress toward the degree and fulfillment of program requirements. Before this meeting the student is required to have assessment sheets filled out by faculty instructors and supervisors. It also accomplishes the following:

- Evaluate the student’s initial progress in the program
- Determine the degree of fit
- Officially approve the students’ plan of study
- Choose a permanent advisor

The meeting itself consists of a discussion and final approval of the materials submitted by the student (see Program Manual for specific details). Following this meeting, the MFT faculty makes a recommendation regarding continuation in the program. The transfer of courses from another institution is rarely permitted, and exceptions are generally made only in relation to standard curriculum (master’s level) courses and in the case of students who are coming from non-MFT or non-accredited MFT graduate programs. The Graduate School permits the transfer of no more than three courses (nine hours) into the master’s program and up to ten courses (thirty hours) into the Ph.D. program; however, any decisions about course transfers and substitutions will be made by the program faculty and Program Director. The details of this
meeting are discussed and clearly defined in the Program Manual.

The program maintains a file on each student that contains the program form listing courses to be taken, the Graduate School form of the approved degree plan, and a current transcript. The Graduate School monitors whether or not the required courses are taken, and a student cannot graduate without meeting all the requirements.

Another means of evaluating satisfactory progress is a form from the graduate school that inquires whether the student “is making adequate progress” in his/her degree program. This comes out yearly and becomes relevant when students may be lagging in their dissertation progress (typically these are students who have done everything else and are now working in the profession as an ABD).

Research Evaluation
Evaluation of each student’s progress in research skills also occurs through various means, most of which are attached to those classes that are research specific (e.g., MFT 6323, MFT 6322, and their stats classes), as well as the research-related program steps that are taken in sequence for progression as a doctoral student. This includes being assigned an advisor, completing the 7000 project, taking the qualifying exam (quals), and proposing and completing the dissertation.

Faculty advisors are important to the organization of the academic system within the MFT program. The role of the faculty advisor begins during the first few days within the student entering the program. Students are initially assigned a temporary advisor when they enter the program. However, at the time of the Spring Plan of Study/Examination meeting, they must officially name a faculty member as their advisor. This person may be the faculty member originally assigned as a temporary advisor or another MFT or Addiction Disorders and Recovery Studies full-time graduate faculty member. The purpose of this advisor is particularly focused on the qualifying exam (MFT 7000). The Dissertation Committee Chair, however, often serves as a mentor throughout the academic study in the program.

MFT 7000 is an intensive research project, conducted under the supervision of a faculty advisor, chosen by the student. The student signs up for credits with his/her advisor and is required to prepare and submit an empirical article for publication. The research may involve collection of data or analysis of an existing data set. However, the end product must be a manuscript based on the research project and must be submitted to a peer-reviewed scholarly journal after the prior editing and approval of the faculty advisor. The faculty advisor’s role is to negotiate the specific nature and scope of the 7000 project using his/her discretion to make decisions about what constitutes an acceptable MFT 7000 project. This would typically happen in the student’s second year.

The qualifying exam typically happens at the end of the second year, after the majority of coursework is completed. The purpose of the exam is to assess the student’s knowledge of the clinical and research portions of doctoral study, reflecting the program’s emphasis on the scientist-practitioner model of training. The full-time members of the MFT Faculty in residence
serve as the qualifying examination committee for MFT students. The clinical portion will be discussed more in the next section (See Appendix XII on quals requirements), but the second part of the quals process is a research critique. This requires the student to take an empirical article, provide a thorough critique of it, and then propose an improved study. The Quals are graded by the MFT faculty, and after the written portion is passed, an oral presentation is done that involves a formal professional demonstration of the student’s clinical, research, and teaching preparation. This is graded as a pass/fail. Students must have completed the following to take quals: 1. the preliminary examination, the 7000 research project, the majority of coursework, and the required amount of MFT practicum.

The Dissertation Advisory Committee shall be composed of at least three members of the graduate faculty from within MFT and ADRS and at least one graduate faculty member outside MFT and ADRS (either within or outside of the college). The Dissertation Advisor (Chair) must be a member of the full-time MFT or ADRS graduate faculty. At least one of the committee must be a full-time MFT graduate faculty. The dissertation experience is a capstone of the student’s experience as a developing researcher and scholar. In general, our students seem to grow a great deal during their doctoral work in their research skills. For a selected list of publications and presentations of our students, see Appendix V.

Clinical Evaluation
Clinical evaluation begins with the interview for the doctoral program, as students are evaluated on their readiness to see clients as demonstrated by their academic and clinical background, as well as their interpersonal presentation during the interview. For example, as part of the interview process, we ask questions about clinical and personal readiness, and often have the applicants demonstrate their skill in a mock therapy exercise.

Upon admission to the doctoral program, the doctoral students begin clinical practicum within the Family Therapy Clinic (FTC). They receive a mix of individual and group/live supervision and they are required to be clinically active in the clinic for their first year and a half, to two years in the clinic (depending on how many hours they are transferring in). During this time they are evaluated during the process of supervision, and also receive a formal evaluation at the end of the semester. Also, there is a form filled out that is designed to summarize the status of the student for the new supervisor.

Also, as mentioned, the first portion of quals is a Clinical Paper that addresses the student’s ability to integrate and present their own theory of therapy. This requires them to not only report what theory (or theories) of therapy they subscribe to and use, but also to think critically about these theories, and demonstrate that they understand their limitations, as well as how they may address various issues, including those of diverse populations or high risk situations.

Students graduating with a Ph.D. in MFT are required to complete 1000 hours of face-to-face therapy (at least 500 hours with couples or families), which is comprised of hours accumulated in a prior master’s program (assuming these hours meet certain standards), clinical work at the
TTU Family Therapy Clinic, and internship hours. (See Supplemental Material on Practicum and Internship sections for further explanation of hours.)

Documentation of completion of clinical requirements is also maintained in the student file. When the student completes the practicum requirements, the form, “Final report of client and supervision hours,” [in Program Manual] is completed, verified by clinic records, and approved by the Clinic Director, the MFT faculty, and the Program Director. A “Certification of internship completion” [Internship Manual] is completed for the internship and signed by the Director of Internship Training and the MFT Program Director. The internship also requires an evaluation component from their internship supervisor.

Teaching Evaluation
A new component of our program is the requirement of the teaching portfolio. As a faculty we decided that this was important to reflect our value that our students emerge from our program as skilled teachers. Although we believe that most of them already do this, we formalized this in our student learning outcomes, and created the teaching portfolio requirement. This is something that is now required for all doctoral students who were admitted during 2009 and after. The specific requirements are found in the Program Manual (in Supplemental Material) and are as follows:

Teaching Portfolio
The pre-quals requirements (1-4) are discussed in detail in other sections of the manual. However, the teaching portfolio portion is discussed here. It is designed to help prepare you for an academic profession, and will consist of five primary components. These should be turned into your advisor in one folder prior to sitting for the qualifying exams. These should be acquired during the student’s first two years in the program. If you have not been able to work in a teaching role as a graduate assistant during your first two years, you will need to complete this as best as you can based on guest lectures or other presentations you have done or prepared.
1. At least one course evaluation from the TLTC
2. Peer review (supporting letter from peer who has observed your teaching
3. Teaching Philosophy Statement (one page or less)
4. Sample syllabus (from a class you have taught)
5. Letter from advisor concerning consultation/support efforts throughout teaching experience in program

IV-B: Programs will have policies and procedures specifying how to collect information about students, demonstrated achievements of graduates, and employer satisfaction. Student outcome data include, but are not limited to, graduated rates, national (or state) licensing examination pass rates, and job placement rates as appropriate.
The program solicits evaluations and updates from our graduates primarily through an Alumni Survey. The survey has been reconstructed recently to reflect our specific and current learning outcomes. In general we try to keep in touch with our alums, and we keep a master list that shows who they are and what they are doing (see Supplemental Material).

Additionally, the University has a support data system (Banner 8) that manages all student information, including alumni data. This includes length in the program, graduation rates and contact information.

The primary means we have of gauging employer satisfaction is through our internship evaluation form. Our internship placements are one of the main places our doctoral students work, and these sites are required to sign a contract with us, and provide feedback. As for our graduates, we do not formally ask for satisfaction-type surveys from the many employers who have hired TTU MFT doctoral alumni.

**IV-C: Program outcome** data are analyzed to proved evidence of **program effectiveness** and are used to foster ongoing **program improvement**.

As has been discussed, we consider a variety of types of outcome data as we seek to continually evaluate and improve the program. Many of the informal means of gathering data (e.g., through experiences with students, classes and procedures) are influential in our process of improving things on a continual basis. However, the more formal mechanisms also are helpful, and we use these for discussion and ongoing improvement. For example, alumni data are collected, entered into a database and evaluated by Program Director and faculty to determine changes and improvements that should be made to ensure the educational outcomes are effective and being followed by the program objectives. Also, Texas Tech has begun to use an outcome-driven process to determine whether accreditation standards are being met university wide. This program is called Trac Dat. Texas Tech University purchased TracDat in 2008 to document student learning outcomes across the institution. To date, there are 321 degree programs in TracDat, all of whom are required to upload assessment data. Departments must upload assessment data for the following academic years: 2006-2007, 2007-2008, and 2008-2009. To summarize, TracDat allows university administrators to document evidence of assessment in narrative and/or quantitative form in order to meet the assessment requirements for the Southern Association of Colleges and Schools (SACS). The MFT program is required to participate in this process and is accountable through it to be meeting its own educational outcomes.

Other evaluation occurs through a university process of departmental review that occurs every six years. This happened in 2008, and required the MFT program to submit data on its processes and outcomes and undergo a review of our graduate programs.
IV-D: Faculty outcomes demonstrate achievement of the program's educational outcomes, and enhance program quality and effectiveness.

The TTU MFT faculty have generally had respect and recognition for their contributions to the profession through their research, training and service. These contributions follow our educational outcomes, and can be observed in various domains (See Appendix XI for Position Announcement describing the typical expectations for TTU MFT faculty). Although these contributions can be found on the collection of the faculty vitae, a summary of these achievements in research, clinical and professional services, and in teaching will be summarized in these sections.

Research and Scholarship
The faculty are expected to be involved in high quality, peer-reviewed scholarship that contributes to the profession of MFT. All faculty, both current, and those here over the last 7 years have been active in research, and many have been recognized for this through various means. For example, Dr. Karen Wampler was the former editor of the Journal of Marital and Family Therapy, and this involved several doctoral students in its operation. Also, the national conferences of AAMFT regularly feature research by TTU faculty, and there have been various grants and activities that have occurred in the program over the last 7 years. This year Dr. Whiting won the College of Human Sciences Chancellor’s research award, and similar recognition has occurred for others in recent years. For a more complete list of publications, presentations, and awards, see the faculty vitae.

Clinical and Professional Service
The faculty are committed to service within the local, university and academic community. All clinical faculty chair and sit on dissertation committees. In addition, many of the faculty are involved in committees involved with departmental, college, curriculum, and faculty search issues. (See vitae for more information). Most of the faculty are licensed clinicians and provide services within the community. They serve as reviewers on editorial boards and in positions with national organizations within the AAMFT. They also regularly attend national conferences with students and contribute to the MFT community locally.

Instruction
All faculty teach in the MFT program at various levels (graduate and undergraduate) with a diverse group of classes being offered based on course requirements and faculty specializations. The Texas Tech MFT Faculty generally receive good student evaluations and are supported through feedback, both verbal and written, of their classes and teaching styles. Feedback is also received through the involvement in on-campus workshops and trainings through the Teaching Learning and Technology Center (TLTC), which provides instructional guidance and workshops through guest lectures and online flash tutorials. In addition, faculty provide on-site clinical supervision for all MFT students, giving and receiving feedback throughout the learning process.
IV-E: The program has established policies and procedures by which it defines and reviews formal student complaints.

Students are given the opportunity to evaluate through formal course assessments, anonymous evaluations of supervisors, informal feedback opportunities, and post-program evaluation inquiries. An established student association organization also exists whereby complaints and concerns can be addressed and issued through a student representative to the faculty and staff from the students. There is also a grievance procedure that students can follow which is located in the student manual. It covers situations that may arise by which both faculty and students may have concerns, and the steps taken to get them addressed. It reads in part (for full process see Section 4 in the Program Manual):

In almost all cases, it is preferable to handle a grievance informally at the level at which the grievance has arisen. Specifically with regard to students in the MFT Program, the individual with a grievance should attempt to resolve it directly with the other person or persons involved. If satisfactory resolution is not reached, the individual should bring the grievance to the Director of the MFT Program who will attempt to help the parties involved reach a satisfactory resolution.

If the issue still remains unresolved, the individual with the grievance should initiate a formal grievance process by writing a letter to the Department Chair outlining the grievance, summarizing previous attempts to reach resolution, and requesting the initiation of the formal grievance procedure. The appeal is on the basis of whether or not appropriate procedures were followed. The goal of the appeals process is not to resolve the issue, but rather, to ensure that the student was treated fairly following established procedures. At this point, the Department Chair may refer the grievance to the Departmental Executive Committee.

If satisfactory resolution of the grievance is not achieved with the Departmental Executive Committee the individual would next bring the issue to the Associate Dean of Academics, and, if necessary, then to the Dean of the College. The next level of appeal is the Dean of the Graduate School (see appeals process flow chart - Figure 1).
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## Appendix I – Student Roster by Chair

<table>
<thead>
<tr>
<th>YEAR</th>
<th>MFT FACULTY</th>
<th>ADRS FACULTY</th>
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<td></td>
<td>DAVID IVEY</td>
<td>GUINNUR KARAKURT</td>
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<tr>
<td>FIRST 2009</td>
<td>Alyssa Banford</td>
<td>Devin Dupree</td>
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<td></td>
<td>Ty Mansfield</td>
<td>Sarah McCullum</td>
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<tr>
<td>SECOND 2008</td>
<td>Amber Anderson</td>
<td>Shannon Dial</td>
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<td></td>
<td>David Servino</td>
<td>Erin Murphy*</td>
</tr>
<tr>
<td>THIRD 2007</td>
<td>David Servino</td>
<td>Erin Murphy*</td>
</tr>
<tr>
<td>FOURTH 2006</td>
<td>Austin Houghteling</td>
<td>Sara Blakelee*</td>
</tr>
<tr>
<td>FIFTH 2005</td>
<td>Matthew Jordan</td>
<td>Brandy Lucas*</td>
</tr>
</tbody>
</table>

Blue Font = Master’s Student

* = Out of town
Appendix II - Admission Requirements (adapted from website)

Admissions Information
[VISIT THE ONLINE APPLICATION CENTER HERE]

Admissions Criteria
Admission to the Department of Applied and Professional Studies is based on a review of several sources of information. No single criterion is used. Credentials are evaluated according to three sets of criteria:

1. Evidence of ability to perform graduate-level work as documented by:
   a. Scores on the Graduate Record Examination (GRE)
   b. Grade point average in all previous undergraduate and graduate courses
   c. TOEFL scores (international students)
   d. Previous degrees from accredited institutions
   e. Letters of recommendation (preferably from academic sources)
   f. Writing ability

2. Fit of applicant's career goals to those of the departmental graduate programs and personal maturity as indicated by:
   a. The applicant's goals statement
   b. On-campus interview

3. Unique contributions as explained in applicant's statement on:
   a. Special accomplishments
   b. Contributions to diversity:
   c. First in family to go to college/graduate school
   d. Record of overcoming adversity (economic, social, physical)
   e. From a group historically under-represented in graduate education
   f. Knowledge of more than one language
   g. Unusual geographic region of origin
   h. Leadership background and potential
   i. Unique life experiences relevant to the pursuit of a graduate education
   j. Research and creative achievements

Deadline - January 15

Decisions as to who will be invited for an on-campus interview are made in January.

Cost of Study
The cost of education at Texas Tech is one of the lowest in the country. Students with a half-time assistantship or a $1000 scholarship are eligible to pay in-state tuition.

Students in our programs have also been successful in University-wide competitions for the prestigious Chancellor’s Fellowships and the Summer Dissertation Fellowships as well as in scholarships sponsored by national organizations. In recent years, most students who have requested it have received financial aid.
Appendix III – TTU MFT Program Director Description of Duties

2010

Academic Program Director

- Direct weekly faculty meetings addressing issues relative to the MFT program
- Oversees admissions process for doctoral and master’s applicants to the graduate programs
- Receive and distribute messages to students and faculty related to position openings, internships, training opportunities and other pressing matters
- Meet with students from both Master’s and Doctoral programs to address and resolve issues related to program of study, cohort concerns, qualifying exams
- Qualifying exams: coordination of grading, giving written feedback, and presentations (2x yearly)
- Coordinate yearly retreat for MFT faculty and staff
- Field regular inquiries from prospective graduate students and position applicants (national and international)
- Oversees transition issues related to faculty and staff turnover
- Works with all MFT graduate students to coordinate their programs of study, committee formation, internships, and graduation plans

Department, College and University Interaction

- Liaison with the APS Department Chair
  - Oversee faculty searches in MFT
  - Assist with Annual Faculty Reviews
  - Meet as member of the Executive Committee (2x monthly)
- Participate (by invitation) in the monthly TTUHSC presentation of difficult medical cases (Complex Case Consultation)
- Serve as MFT liaison with College and Graduate School
- Respond to immediate needs from Department, College or University
- Works with department chair and CFAS coordinator to manage undergraduate degree

National and State Interaction

- Participate in AAMFT program director’s listserv
- Lead national and state representation at conferences (including research meetings for Texas association of MFT, program director’s meetings at AAMFT, etc.)

Accreditation

- Coordinate continual accreditation of MFT doctoral program
- Correspond with Commission on Accreditation for Marriage and Family therapy Education (COAMFTE) to address ongoing issues related to changes and concerns
• Oversee submission of annual reports and reaccreditation site visits
• Address and fix accreditation concerns with program functioning
• Coordinate shift to new accreditation standards (occurring in 2008-2009)
• Write Self Study and organize all efforts for reaccreditation in 2010
• Begin discussion and plan with faculty of possible accreditation of new master’s program

**Business Management**

• Supervise and work with the Senior Business Assistant – MFT Staff for the following:
  o Coordinate all course content and sequencing
  o Works with clinic graduate assistant to coordinate clinic upkeep, technology improvements, applicant interview days, and program representation at conferences
  o Assists with all Business Assistant duties as needed

**Family Therapy Clinic (FTC)**

• Supervise and work with the Clinic Director in the following responsibilities:
  o Coordinate Clinic data base and research projects (including IRB renewal)
  o Manage clinic finances
  o Supervise graduate and undergraduate students in the clinic
  o Maintain Clinic data base and address issues related to service delivery
  o Update and enforce FTC policies and procedures manual
  o Coordinate community initiatives, (e.g., education groups, aftercare programs, internship placements) outreach, and networking.
  o Assists with clinic emergencies and client concerns
  o Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists
Appendix IV - TTU Family Therapy Clinic Director – Position Description (April 2010)

Clinic Development and Community Liaison (.25 FTE)*
- Manage growth of clinic - explore potential for an agency model
  - Generate contracts (corporate, relationship education, grants)
  - Expand revenue generating sources
- Public Relations/Marketing
  - Participate in health fairs, campus resource events, and other community events
  - Organize annual continuing education training events
  - Community outreach and networking
    - Coordinate outreach and placement of promotional materials
    - Update promotional materials and distribute to referral sources
  - Attend local organizational meetings (e.g., Success by Six, Complex Case/TTUHSC, Victims Services, etc.)

Clinical Director of the Family Therapy Clinic (.50 FTE)

General Operations:
- Maintain FTC recording equipment and clinic facilities
- Update and maintain the FTC Policies & Procedures Manual
- Train incoming students on clinic policies and recording equipment
- Address student concerns when primary supervisor is unavailable
- Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists.

Clinic Finances:
- Submit annual budget revisions (advertising, insurance, student travel, etc.)
- Track clinic income and expenditures
- Deposit clinic fees/process account transfers
- Manage billing for outside contracts (i.e., Aftercare)

Staff Management:
- Clinic Coordinator position
  - Case assignment/intake scheduling
  - Maintain MCSR database and syntax to track student hours
  - Organize program special events
  - Maintain client records/scanned files

Undergraduate HDFS/CFAS practicum students (~250hrs/semester)
- Monitor therapy rooms/supplies and forms
- Room usage/scheduling documentation
- File scanning and storage
- Special projects as assigned
Database Management:
  • Maintain the clinical assessment/research database
    ▪ Purchase software & measurement licenses/renewals
    ▪ Write and maintain syntax to score assessments
    ▪ Facilitate access to data for student and faculty research
    ▪ Implement outcome based procedures/data collection

Internship Coordination:
  Doctoral Internship Coordination
    ▪ Facilitate student documentation/enrollment
    ▪ Audit student files for current internship agreements and evaluations
    ▪ Visit internship sites (year-round activity)
    ▪ Foster relationships with future internship sites
  Masters ‘Externship’ Placement Coordination
    Facilitate student placements
    Process internship documentation
    Maintain contact with site/agency contact
    Provide clinical supervision as assigned

_Instructor for CFAS/MFT (.25 FTE)_
  • Teach 2-3 courses per year (teaching history listed below)
    - CFAS 4380/Program Development & Evaluation (Fall semester, yearly)
    - MFT 7395/Doctoral Internship in MFT (Fall, Spring & Summer semesters)
    - MFT 6395/Practicum (as needed)
    - MFT 6303/Couples/Sex Therapy (Spring semester, rotating years)
    - MFT 6342/Grief & Loss Seminar (Spring semester, rotating years)
    - MFT 7000/Research (as needed)

*These percentages could be shifted (e.g., less development and more instruction, as needed). This would obviously affect what could be accomplished in each sphere.*
Appendix V – Selected Student Publications and Presentations
(These are some of the research publications and presentations from 2009, or those in submission or in press (not including the conference presentation proposals submitted for 2010). For a list of more years, see the supplemental material on site. TTU MFT graduate students are marked with an asterisk)

Peer Reviewed Articles

2009

In Press or In Submission
Haslam, D.K. & Harris, S.M. (In submission). Integrating play and family therapy methods: A Survey of
play therapists’ attitudes in the field. *International Journal of Play Therapy.*

**Presentations from 2009**
Appendix VI – Applied and Professional Studies Organizational Chart

College of Human Sciences
  -- APS Department Chair
    -- Vickie Hampton

  Addictive Disorders and Recovery Studies
    -- E. Gough
    -- B. Allison
    -- E. Alexander
    -- J. Allman

  Family and Consumer Sciences Education
    -- J. Widmer
    -- D. Hays
    -- D. Smith
    -- D. Karakurt
    -- M. Ko
    -- N. Springer
    -- J. Moreau
    -- M. Morek

  Marriage and Family Therapy
    -- L. Suller
    -- C. Gustafson
    -- V. Hampton
    -- D. Dunham
    -- G. Furse
    -- E. Kellar
    -- E. Hardin
    -- L. Gilard
    -- D. Jarrold
    -- G. Lauderback
    -- D. Jepp
    -- R. Trappin (Center)

  Personal Financial Planning
    -- Center for Financial Responsibility

Center for the Study of Addiction and Recovery
  -- W. Harris

Collegiate Recovery Community
  -- T. Kinball
  -- S. Dick

Ranch at Dove Time
Appendix VII – Practicum Evaluation

Texas Tech University
Marriage and Family Therapy Program

EVALUATION OF INDIVIDUAL SUPERVISION

Supervisor: ___________________________ Agency: ___________________________
Name (student): ___________________________ Date: ___________________________

1. Please indicate the typical frequency _____/month and duration _____ hours of your supervisory meetings.

2. Please indicate the % time a particular modality of supervision was used:
   _____ % case discussion
   _____ % review of videotapes
   _____ % joint therapy with supervision
   _____ % live supervision
   _____ % other, specify ________________

3. Rate your supervisory experience using the following scale
   1=inadequate  2=partly adequate  3=adequate  4=good  5=outstanding
   a. _____ Overall Supervisory Experience
   b. Supervisor’s ability to:
      _____ (1) Recognize my anxiety
      _____ (2) Assist me with personal anxiety
      _____ (3) Identify problems in my performance
      _____ (4) Make effective recommendations
      _____ (5) Convey interest in my learning
      _____ (6) Contribute to development of my clinical judgment
      _____ (7) Contribute to my development as a family therapist

4. Comment generally about what was most helpful, problems with the experience and how it may be improved, plus other items as you desire.

FORM DEVELOPED BY THE FAMILY THERAPY PROGRAM AT HAHNEMANN UNIVERSITY
Appendix VIII – Student Evaluation

MFT Program
Texas Tech University
Student Practicum Evaluation Form

Student Name: __________________________ Signature: __________________________

Supervisor Name: __________________________ Signature: __________________________

Semester: __________________________ Date of Evaluation: __________________________

Evaluation based on: Group __________ and/or Individual __________ Supervision

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<th>Exceeds</th>
<th>Appropriate</th>
<th>Adequate</th>
<th>Inadequate</th>
<th>Inappropriate</th>
<th>Unable to Assess</th>
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<td>Knowledge of theory</td>
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<td>Application of Theory</td>
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<td>Case conceptualization</td>
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<td>Develops interventions</td>
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<td>Creativity</td>
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<td>Confidence</td>
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<td>Joining &amp; Connection</td>
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<td>Openness to supervision</td>
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<th>Inadequate</th>
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<th>Unable to Assess</th>
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<td>Implements feedback into action</td>
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<td>Self-reflection</td>
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<td>Group participation</td>
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<td>Sensitivity to Gender and power issues</td>
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<td>Sensitivity to Diversity</td>
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<td>Record keeping</td>
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<td>Substance Abuse knowledge</td>
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<td>Violence/domestic violence knowledge</td>
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<td>Sexual/Physical abuse knowledge</td>
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<td>Ethical Behavior</td>
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<td>Professional relationships</td>
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Additional Comments:

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**Exceeds expected developmental level** (is rarely awarded. Reflects that you are well beyond others at the same developmental level.)

**Appropriate for developmental level** (hopefully most often used category. Reflects that you are right on target developmentally and that the supervisor has every expectation that you will continue to grow and develop in this area.)

**Adequate** (Reflects that supervisor believes clients may benefit from this level of performance but room for improvement is generous)

**Inadequate** (Reflects that supervisor believes that clients' experience of therapy may be hampered by your lack of expertise in this area)

**Inappropriate for developmental level** (unlike a "room for improvement type of category" this reflects serious doubts that you understand this particular concept and how it applies to therapy. Receiving this would indicate a need on your part for serious consideration and further discussion of your problems associated with this category. Your actions in this category may dip into unethical waters.)

**Unable to assess** (reflects a supervisor's inability to properly address the issue)
Appendix IX – Alumni Survey

The TTU MFT program has used a survey to stay in touch with and seek feedback from our alumni. In the process of shifting to outcome driven standards, we modified this survey to ask questions directly related to these outcomes. In our most recent survey solicitation (March 2010) we sent out a link to all of our alumni with emails on file (n = 92) and we received 39 responses (42%). This data is an important part of our meeting our communities of interest and is summarized in the tables and narrative below.

Demographics and Professional Information

How would you characterize your current employment?
Learning Outcomes

Research Preparation
How well did the program prepare you to . . .

Representative Comments about Research Preparation.

[The final] research class was one of the best I had at Tech. Difficult course, but really prepared me academically and professionally.
When I was at TTU the focus was on quantitative research. I wish I had learned more qualitative research too.
Very strong skills and understanding of research. Not being at a Division 1 research school, I find my scholarships skills and attitudes exceed some of those of my more senior peers.

Clinical Preparation Responses
How well did the program prepare you to . . .
Comments about Clinical Preparation.
Would have appreciated more emphasis on diagnosis from DSM perspective and also the practicalities of billing and record keeping.
I came from a clinically strong master’s level program and I must attribute much of my skills in that area to that program, especially in areas of clinical records and ethics. I do believe, however that I continued to learn and grow as a clinician while at Tech, especially in finding my own theory of therapy and receiving greater exposure to relevant research. My advisor was key in helping my find my own theory of therapy.
...I was often behind with my clinical records to the point of forming a habit of poor record keeping, yet I was able to fly under the radar and not be corrected in this area. We did not engage in actual reviews of case files very often, so I was able to get by without learning this lesson.
This program is particularly strong at working with the self of the therapist and the self of the supervisor, which I believe have benefitted my work in both capacities more than I could say.

---

Teaching/Supervision
How well did the program prepare you to...

Comments about Teaching Preparation.
My mentoring as a teacher was excellent.
 Didn’t really get a lot of this from the program. Any teaching hints were provided to me by my mentor. Though that was important, I think the program could do a bit better on the whole preparing MFT doc students on teaching MFT theory. That would be an excellent class!
Teaching abilities were not in the content presented to my cohort.
I got a lot of teaching instruction but that was through outside sources (like the TEACH program). Would have like more support/guidance on teaching especially early on.
In what ways did the MFT program help you to think about or appreciate diversity?
Diversity was addressed regularly in my courses, clinical work, and other program experiences. It was not a lip service approach to the issue, but a consistent effort to be conscientious of others from all backgrounds.
I think increasing the level of education on working with the GLBTI population and individuals with disabilities would be one recommendation that I would offer.
Classmates were from diverse backgrounds and coursework allowed for open discussion about racial, sexuality, and gender based issues.
I was always welcome as a diverse student and my program of research fully focused on ethnic minorities. Faculty were highly aware of diversity issues.

General Comments about Strengths and Weaknesses of the Program
I wouldn’t change any of it; the hard moments were learning moments, and everything I learned prepared me to deal with challenges that are a natural part of faculty life. If the faculty had made everything easy or comfortable for us, I never would have been prepared to be a faculty member. . . and believing students can do so demonstrates our respect for them.
[I liked] the diversity of opportunities. I felt like I had great scholarly opportunities. I was able to connect with good faculty members, work on research with them, do my own research, and get connected to other resources because of the professors.
[there needed to be] better boundaries (less gossiping . . . students, etc).
I felt like these relationships were good for the most part. I felt that some faculty members had favorite students and sometimes those students got extra advantages, but for the most part it was good. I like the emphasis on the mentor relationship. It was helpful.
I have very fond memories of my experience at Tech. Any low scores I have indicated should not be equated with dissatisfaction. I believe some elements were emphasized and others were not. The bottom line for me was that research was important and other elements did not receive the similar level of attention. It was the focus in my classes, mentoring, and small groups. Teaching and clinical work, recognized as important, just never measured up. In retrospect, it’s all I really needed from my Tech. I was not a proficient researcher coming to the University. I feel like I now possess the skills to carry out a research agenda.
[It appreciated] having a cohort with diverse backgrounds, very balanced training (research, clinical, and teaching), and some of the faculty members’ dedication to and support for the students.
I was very pleased with my whole doctoral experience at TTU in general and felt like I had the resources and opportunities to really succeed. I would still highly recommend the program to others. There were times when certain faculty members were hard to get in touch with and sometimes delays in grading. But everything that really mattered in my training was taken care of. I am happy to say that I earned my Ph.D. in MFT at Texas Tech.
I loved my education at Tech. I believe that overall it really prepared me to do my job in all its multiple facets. I appreciate the opportunity to reflect on my education and the fact that you, obviously, are attempting to continue a top rate education at Tech.
Mean Scores for Primary Outcome Questions
How well did the program prepare you to . . . ?

1. conduct research?
2. write for a scholarly audience?
3. understand and apply quantitative and research methodology
4. conceptualize and design independent research?
5. complete and present a research project?
6. be a clinician?
7. apply MFT theory?
8. maintain professional clinical records?
9. be an ethical clinician?
10. supervise MFTs?
11. teach an undergraduate course?
12. articulate a philosophy of teaching?
13. lead discussions and lecture on MFT content?
14. How satisfied are you with the MFT graduate education you received at Texas Tech?
15. be respectful of others of diverse backgrounds and values?
Appendix X – MFT Position Announcement

Texas Tech University

POSITIONS: Tenure Track Professor in Marriage & Family Therapy

EFFECTIVE DATE: August, 2010

RESPONSIBILITIES: Serve as a faculty member in a master’s degree and COAMFTE-accredited doctoral program in Marriage and Family Therapy. Teach graduate (M.S. & Ph.D.) and undergraduate courses. Supervise marriage and family therapy practicum. Establish and maintain an active research program. Engage in service activities with the department, college, university, and community. Maintain clinical activity in accordance with COAMFTE guidelines.

QUALIFICATIONS: The Texas Tech Marriage and Family Therapy Program is seeking experienced applicants for a tenure track position. While applicants qualified for the rank of assistant, associate, or full professor will be considered, preference will be given to applicants with an established record of scholarship and external funding. All applicants should have an earned Doctorate (by time of appointment) in Marriage and Family Therapy or closely-related area. AAMFT Clinical Membership and Approved Supervisor designations preferred.

DESCRIPTION: The MFT Ph.D. Program at Texas Tech University has been accredited by the COAMFTE since 1981. The program has a reputation for emphasizing the Scientist-Practitioner model and is staffed by six full-time faculty members, and a Director of Clinical Training. The program serves approximately 40 doctoral students and 20 master’s students. The program is housed in the Department of Applied and Professional Studies in the College of Human Sciences and offers generous research seed grants and research start-up packages to new faculty. Texas Tech University is located in Lubbock, Texas, in the heart of the South Plains, and has an enrollment of 28,000 students. TTU is the only State assisted university in Texas to house a traditional academic campus, a Law School, and a Medical School.

TO APPLY: Texas Tech University is an Affirmative Action/Equal Opportunity Employer. We strongly encourage applications from women, minorities, veterans and we consider the needs of dual-career couples. All applicants must complete an online job application. Go to http://jobs.texas Tech.edu and click the “Search Postings” link. Enter Requisition No. 79968 and click search. Click the “View” link for the position description and follow the on screen instruction. Attach cover letter and curriculum vitae to the online application. In addition, send three letters of recommendation, reprints, a brief statement of teaching and research interests, and official transcripts to:

Douglas B. Smith, Ph.D., LMFT
Chair, MFT Search Committee
Box 41210
Lubbock, TX 79409-1210
Phone: 806-742-5050 x242
Fax: 806-742-5033
Email: douglas.smith@ttu.edu

DUE DATE: January 10, 2010 or until position is filled.
Appendix XI – Qualifying Exam Overview
(Taken from the Program Manual Section 7 – for full details see the Supplemental Material)

The quals will focus on both clinical and research knowledge and consist of three parts: Research and Theory papers that will be graded by the MFT faculty, and an oral defense of your theory, research, and teaching that is graded on a pass/fail scale. Papers will be identified only with an ID number provided by the MFT Program Secretary. You will be given a cover sheet for the two written exams with your ID on it. Faculty have a responsibility to treat quals answers as confidential documents. Because of the nature of the quals, it is recognized that the use of an ID does not guarantee anonymity, especially on the clinical theory portion. A copy of each paper must be provided for each MFT faculty member along with a file copy. Exams are received from and turned into the MFT Program Secretary. The two written portions must be typed and in APA style. The three parts are:

1. **Clinical Theory.**
   Written 25 page (maximum) paper on your theory of therapy and a written presentation and analysis of a couple or family case that illustrates your theory. Extreme care must be taken to obtain permission to use case information and to protect the confidentiality of the client couple or family. Give a copy of the completed permission form to the MFT secretary when you turn in your theory paper. The secretary will place the form in a confidential file.
   Students must write this portion of their qualifying examination at the earliest point (August or January) following the completion of their clinical hours in the TTU MFT Clinic. In an extremely rare case, a student may not be able to take this portion of quals at the usual time (e.g., religious reasons). The rare request for an exception should be made in writing to the MFT Program Director.

2. **Research.**
   A 25 page (maximum) written critique of a research article along with a research proposal designed to address the concerns you raised in your critique. The article will be chosen by the faculty from the last five years of one of the following journals: Family Process, Journal of Marital and Family Therapy, Journal of Family Psychology, and Journal of Consulting and Clinical Psychology. The article selected may be either qualitative or quantitative. The articles selected in the recent years are available for students to see in the MFT Clinic.

3. **Oral Presentation of Theory, Research, and Teaching.**
   This presentation will cover your professional preparation up to this point in the program and can be based on your theory, research and/or teaching experience. The presentation should last no more than 30 minutes in length and should display your professional skills as you would in a job talk. The time spent on each subject should be negotiated with advisor to be specific to a particular job talk you would be giving for your profession of choice (i.e. a clinical emphasis for clinical position, research emphasis for academic position).
Appendix XII – Appeals Process

The appeals process is covered in some detail in the Program Manual, section 4, under the heading “Grievance and Dismissal Policies and Procedures.” The following are sections taken from that section of the manual (found in full in the Supplemental Material):

In almost all cases, it is preferable to handle a grievance informally at the level at which the grievance has arisen. Specifically with regard to students in the MFT Program, the individual with a grievance should attempt to resolve it directly with the other person or persons involved. If satisfactory resolution is not reached, the individual should bring the grievance to the Director of the MFT Program who will attempt to help the parties involved reach a satisfactory resolution.

If the issue still remains unresolved, the individual with the grievance should initiate a formal grievance process by writing a letter to the Department Chair outlining the grievance, summarizing previous attempts to reach resolution, and requesting the initiation of the formal grievance procedure. The appeal is on the basis of whether or not appropriate procedures were followed. The goal of the appeals process is not to resolve the issue, but rather, to ensure that the student was treated fairly following established procedures. At this point, the Department Chair may refer the grievance to the Departmental Executive Committee.

If satisfactory resolution of the grievance is not achieved with the Departmental Executive Committee, the individual would next bring the issue to the Associate Dean of Academics, and, if necessary, then to the Dean of the College. The next level of appeal is the Dean of the Graduate School (see Figure 1).

With both the informal and formal grievance process, it is crucial to proceed in a timely manner. Normally, the individual with a grievance would initiate the resolution process as soon as possible after the incident or incidents in question occurred, within 60 days of the latest. According to graduate student handbook, grievances of discrimination must be filed within 30 days of the alleged incident. Formal written appeals of grades must be submitted within 45 days of the next long semester. An electronic copy of the student handbook can be found at www.studentaffairs.ttu.edu/publications/SA_handbook_2006-2007.pdf. At each level, every effort should be made to attempt to resolve the grievance within two weeks.

In any grievance procedure, it is imperative that the individual bringing the grievance be protected from any negative consequences arising from the act of bringing a grievance. Fear of negative consequences is one of the reasons it is difficult to begin the grievance procedure at the level at which it must necessarily begin—with the persons directly involved. This is especially difficult when the person with the grievance has less power than the other individual, for example, a student with a grievance against a clinical supervisor or a faculty member. By its very nature, however, a fair grievance procedure requires that difficult issues must be raised and all parties involved must be informed that the grievance exists. Every effort will be made to protect the rights of the person bringing the grievance against retaliation. The MFT Program faculty are committed to insuring that the grievance procedure is a fair one and that mechanisms are in place for protection and appeal.
FIGURE 1

APPEALS PROCESS

GRIEVANCE BY A STUDENT
begins with
Individual Student

DISMISSAL OF GRADUATE STUDENT
begins with
MFT Faculty

MFT Program Director

Department Chair

Departmental Executive Committee

Associate Dean for the College of Human Sciences

Dean of the College of Human Sciences

Vice President for Students Affairs¹

Graduate Dean²

Provost for Academic Affairs

President

¹ Grievance involves access to personal records, sex discrimination, sexual harassment, discrimination based on disability.

² Grievance involves performance in the clinical role, publications and co-authorship, grade appeals, appeals for exceptions to program requirements, assignment to and performance in the assistantship role, suspensions, probation, and dismissal.
ADMISSIONS CRITERIA

Admission to the Department of Applied and Professional Studies is based on a review of several sources of information. Applicants for the MFT programs are evaluated according to three sets of criteria:

Evidence of Ability to Perform Graduate-Level Work:
As Documented By:
1. Scores on the Graduate Record Examination (GRE)
2. Grade point average in previous undergraduate and graduate courses
3. TOEFL scores (international students)
4. Previous degrees from accredited institutions
5. Letters of recommendation (preferably from academic sources)
6. Writing ability

Fit of Applicant’s Career Goals to Those of Departmental Graduate Programs and Personal Maturity as Indicated by:
1. The applicant’s goals statement
2. On-campus interview

Unique Contributions as Explained in Applicant’s Statement On:
1. Special accomplishments
2. Contributions to diversity, such as:
   - First in family to go to college/graduate school
   - Recent of overcoming adversity (economic, social, physical)
   - From a group historically under-represented in graduate education
   - Knowledge of more than one language
   - Unusual geographic region of origin
3. Research and creative achievements
4. Leadership background and potential
5. Other unique life experiences relevant to the pursuit of a graduate education

FACULTY

David E. Inay, Professor
Ph.D., University of Nebraska-Lincoln, 1990
Clinical judgment, medical family therapy, assessment, training, gender and ethnicity, treatment acceptability

Gudmar Karlsdottir, Assistant Professor
Ph.D., Purdue University, 2008
Intimate partner violence, attachment and affect regulation, emotion-focused therapy, gender and culture in therapy

Wei-Ju Chen, Ph.D., Assistant Professor
Ph.D., Purdue University, 2010
Couple’s adjustment in chronic illness, co-parenting and parent-child relationships in diverse settings, Play Therapy, and Gnostic data analysis.

James P. Nance, Associate Professor
Ph.D., Texas Tech University, 1997
Cultural/language and professional issues in MFT, Rural family therapy

Douglas Smith, Assistant Professor
Ph.D., Kansas State University, 2008
Systemic intervention for intimate partner violence and systemic implications of traumatic stress

Nicolás Segovia, Director, Family Therapy Clinic
Ph.D., Texas Tech University, 1999
Medio cultural professionals’ communication and mental coping with infanticide/misconception therapy for trauma/loss

Jason Wilkins, Assistant Professor, Program Director
Ph.D., Michigan State University, 2001
Couple conflict and violence, relationship education, foster care, theory and qualitative inquiry

For Further Information contact:
Laszlo Matus, Assistant Professor
Department of Applied and Professional Studies
Texas Tech University
Box 4120, Lubbock, Texas 79409-1210
940.742.5210 or ext. 344
Laszlo.matus@ttu.edu

www.depts.ttu.edu/mmft
The Marriage and Family Therapy graduate programs at TTU provide systemic clinical training to prepare students for licensure and scholarly achievement. TTU is known for its supportive and rigorous programs, and provides one of the largest groups of MFT faculty in the country. Our graduates have found success in a wide variety of academic, clinical and other settings. There are two graduate programs in MFT at TTU: a doctoral and a master’s program.

DOCTORAL PROGRAM
The MFT doctoral program has a long and distinguished history of preparing students for contributions in academia, administration and clinical work. There is a strong emphasis on training in research methodology as well as theoretical and clinical specialization. Many of TTU’s doctoral graduates can be found in academic institutions around the country. The doctoral program has been accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) since 1981.

MASTER’S PROGRAM
The master’s program at TTU is a clinically-focused program that includes an emphasis in the treatment of addictions within a relational context. The MFT faculty work in conjunction with the Addictions Disorders and Recovery Studies (ADRS) faculty to provide training that prepares students for licensure as an MFT, LCDC, or for future doctoral work.

TEACHING
All doctoral students are required to teach at least one undergraduate class for one semester under the supervision of a faculty member. The majority of our doctoral students receive a teaching assistantship and gain experience for academic positions that require presenting scholarly material to an audience.

CLINICAL TRAINING
All students see clients in the Texas Tech Family Therapy Clinic with live and videotaped individual and group supervision provided by the full-time faculty. All Ph.D. students must accumulate 1000 direct client contact hours by doing therapy at the Clinic, through funded practicum sites, a clinical internship, and/or through transfer of hours from a COAMFTE-accredited MFT Master’s program. The on-site clinic consists of seven large therapy rooms equipped with one-way mirrors, observation rooms, and digital recording equipment, along with a clinic office, a therapist staff office, and an intake area. In addition, all students receive extensive help in locating an appropriate site for the required nine-month clinical internship.

RESEARCH TRAINING & GRANTS
With active mentoring by faculty, students rapidly gain skills, experience, and confidence in research. Students present their research at national and international conferences and will publish in journals prior to graduation. In addition, each student will design a research project with the assistance of her/his faculty advisor. Faculty members are active with a number of sponsored research and service projects. Usually these grants provide assistantship opportunities for students. Projects include healthy marriages/marital initiatives, medical family therapy, early head start, and addiction and recovery programs.

CAREER OPPORTUNITIES
The Marriage and Family Therapy program prepares students for positions as faculty in universities, full-time researchers, faculty or staff in medical schools, human service providers, and marriage and family therapists.

COST OF STUDY
The cost of education at Texas Tech is one of the lowest in the country. Students with a half-time assistantship or a scholarship are eligible for pay-in-state tuition. Students in our programs have also been successful in University-wide competitions for the prestigious Chancellor’s Fellowship and the Summer Dissertation Award as well as in scholarships sponsored by national organizations. In recent years, most students who have requested it have received financial aid.

STUDENTS
Students at TTU have a wide range of academic backgrounds. They come from all over the United States and the world. Texas Tech is committed to the principle that in no aspect shall there be differences in the treatment of persons because of age, race, culture, national origin, age, gender, religion, sexual orientation, social class, or disability.

DEADLINE FOR APPLICATIONS—JANUARY 15TH
Apply on-line at www.depts.ttu.edu/hhs/mft and www.depts.ttu.edu/gradschool
Appendix XIV – Feedback to the Commission (Form XIII)

Commission on Accreditation for Marriage and Family Therapy Education
FEEDBACK TO THE COMMISSION

The COAMFTE is continually gathering information to make improvements in the Accreditation/Candidacy process. The COAMFTE welcomes any discussion or feedback your program can provide regarding the Accreditation/Candidacy process and how it could be improved (i.e., site visits, fees, applications, annual reports, policies and procedures, etc.). In the space below, please provide the COAMFTE with any feedback your program wishes to communicate (please type and attach additional pages if necessary).

Our interaction with the Commission has generally been positive. I have been impressed with Tanya Tamarkin and Alicia Eggen, who both (although new) have been very responsive and knowledgeable in their responses to me as Program Director. Although there were challenges at times in determining the definitions of certain terms used in Version 11 (e.g., the various types of outcomes), I assume that this is typical for most of us who are transitioning to this new way of thinking. We will likely have further feedback as we proceed with the Site Visit, but I am hopeful that this process will be smooth and collaborative.
Appendix XV – Self Study Checklist

Commission on Accreditation for Marriage and Family Therapy Education

SELF-STUDY CHECKLIST - VERSION 11.0 ACCREDITATION STANDARDS

The Program Director is responsible to ensure that all required materials are provided to COAMFTE in a timely and organized manner. The Program Director must complete this form and return it to COAMFTE in conjunction with the program’s Self-Study.

Required Documents
✓ Cover Page for Self-Study
✓ Application
✓ Narrative Response to Standards
✓ Index of Appendices or Table of Contents

Forms Included with Self-Study
✓ Form VII – Cover Page for Self-Study
✓ Form I – Application for Accreditation
✓ Form VIII – Program Composition & Student Achievement
✓ Form IX – Program of Study
✓ Form X – Faculty Summary
✓ Form XI – Supervisor Summary
✓ Form XII – Program Strengths & Areas of Concern
✓ Form XIII – Feedback to the Commission

Documentation Available On-Site
✓ Faculty & Supervisor Vita
✓ All Program Syllabi
✓ All Current Student Files – Academic & Clinical
✓ All Graduate Student Files – Academic & Clinical (last six years worth)

Jason B. Whiting                     Texas Tech University - Doctoral
Program Director’s Name               Program Name

April 29, 2010

Program Director’s Signature                      Date
College: Human Sciences
Department: Community, Family, and Addiction Studies
Conducted by: Institutional Research & Information Management

November 2014
### Faculty Surveys

**Community, Family, and Addiction Studies**

<table>
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<tr>
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<th>N/A</th>
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<td><strong>Strongly Disagree</strong></td>
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</table>

**Q-1** I have adequate access to facilities and equipment needed for my graduate work.

| 7 | 5 | 1 | | | | | 4.46 |

**Q-2** The quality and availability of departmental graduate student office space is adequate for my needs.

| 3 | 5 | 2 | 2 | 1 | | | 3.54 |

**Q-3** Library resources available to me are adequate.

| 7 | 5 | 1 | 1 | | | | 4.29 |

**Q-4** The program offers an adequate selection of graduate courses, sufficient for timely completion of a full graduate program.

| 7 | 4 | 1 | 1 | 1 | | | 4.31 |

**Q-5** The graduate courses available are taught at an appropriate level and are of sufficient rigor.

| 6 | 6 | 1 | | | | | 4.38 |

**Q-6** The graduate teaching assistants available to faculty in the program are of appropriate quality.

| 6 | 5 | 1 | 2 | | | | 3.93 |

**Q-7** Graduate courses in other fields, needed to support your program or minor, are sufficiently available, accepted and recommended.

| 4 | 5 | 4 | | | | | 4.00 |

**Q-8** There is adequate communication from the upper administration regarding policy changes.

| 5 | 5 | 1 | 1 | 1 | 1 | | 3.92 |

**Q-9** I am satisfied with the professional interaction with faculty throughout TTU.

| 7 | 5 | 1 | | | | | 4.46 |

**Q-10** I am receiving the research and professional development support I need from the other faculty.

| 5 | 4 | 3 | | | | | 3.92 |

**Q-11** I am satisfied with the professional interaction with the graduate program coordinator(s).

| 8 | 5 | | | | | | 4.62 |

**Q-12** I am satisfied with the professional interaction with other faculty within the program(s).

| 6 | 4 | 2 | 1 | | | | 3.92 |

**Q-13** I am treated as a respected contributor to the graduate program in which I am involved.

| 8 | 2 | 2 | | | | | 4.23 |

**Q-14** I have been given an opportunity to be engaged in decisions regarding changes in the program(s).

| 7 | 3 | 2 | | | | | 4.42 |

**Q-15** Course and program changes are evaluated by all faculty and voted upon by those faculty.

| 6 | 5 | 1 | | | | | 4.42 |

**Q-16** Sufficient graduate teaching assistantship stipends are available.

| 4 | 5 | 3 | 1 | | | | 3.85 |

**Q-17** The program offers adequate opportunity for its faculty to gain teaching training.

| 7 | 3 | 3 | | | | | 4.31 |

**Q-18** Graduate teaching assistantships assignments are made equitably, based on established criteria.
Q-19 Graduate program policies are clearly defined and readily available to me.  

| 6 | 4 | 2 | 4.33 |

Q-20 Graduate program policies clearly identify petition and appeals procedures available.  

| 8 | 3 | 1 | 4.58 |

### What do you consider to be the strengths of your graduate program(s)?

- Excellent clinical training. Strong research training.
- Student accessibility to professionals in the field.
- Student-faculty relationships are characteristic of a genuine positive regard for the student's success and future career development.
- A broad range of appropriate courses, students from all over the country bring a definite diversity to the program, excellent faculty that have a passion for what they teach and research!
- The ADRS graduate certificate program is unique, in that it is one of the few programs of its kind the country. Having a relationship with the MFT program has allowed for this to be one of the few schools in the country that trains mental health professionals with an in-depth knowledge of addictive behaviors.
- Exceptional mentoring of students with personal involvement by all of the faculty both within didactic courses and within other venues. MFT at TTU stands as a leading program within the entire family therapy field.
- Passionate, caring faculty; engaged students who are willing to stretch and grow. There is a dedication to the mission of the department that is unmatched in other programs.
- Quality of faculty, accreditation.
- Good faculty, good reputation. Usually enough assistantships to support doctoral students, which helps recruiting, but could use more for master's students.
- Good students, strong curriculum, very good training!
- Good opportunities to gain clinical experience in a variety of settings. Rigorous program.
- Collaboration and Great Colleagues. Great oversight and direction from my department chair and the Dean.

I don't teach in the graduate program so I can't accurately answer this question.  

Most of the faculty in the program.

### What changes, if any, could be made to improve the quality of your / graduate program(s)?

- Accreditation of the MS program
- Connect with undergraduates to increase awareness of possibilities of undergrad
- To continue to recruit students who bring diverse experiences and backgrounds to TTU
- As is usually the case more funds to support more graduate assistants in teaching and research and eventually more faculty to grow the program and take more students.
- I think being able to offer more courses would be most helpful to the students in the program, as this would allow instructors to provide the most in depth education.
- Greater diversity among faculty.
More faculty to meet the rising enrollment. We have potential for growth, but not enough faculty to cover. 

**accredit masters program; more international student resources to improve student pool**

More travel money for research and grant training, more scholarships at the master's level. More research assistantships.

More graduate assistantships which would require greater financial resources. We need to add more courses and have more faculty to teach them.

More journals available through the library.

We need to continue to expand our offerings. We will continue to need more faculty lines.

I don’t teach in the graduate program so I can’t accurately answer this question.

More faculty travel money for presenting research.

**Please feel free to add any additional comments or questions in the / space below.**

N/A

Graduate students are a key resource in our college and department.

n/a

I am proud of our graduate programs.

I think being able to get the word out about our program and recruit people from all over the country (and the world) would help strengthen our program by attracting the best and brightest who are interested in ADRS.

additional support to pursing extramural funding for research activities would strengthen the quality of our program

Our faculty and students work hard to maintain the historically strong reputation of our program.

nothing

NA

NA

None

I love my department and college.

I enjoy the interactions with other faculty.

More mentoring of junior faculty members
## Community, Family, and Addiction Studies

### Student Surveys

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
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<th>Strongly Disagree</th>
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<tr>
<td>Q-1 I have adequate access to facilities and equipment needed for my</td>
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<td>Q-2 The quality and availability of departmental graduate student</td>
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<td>sufficient for timely completion of a full graduate program.</td>
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<td>Q-5 The graduate courses available are taught at an appropriate level</td>
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<td>Q-6 Graduate courses in other fields, needed to support my program</td>
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<td>Q-11 I am treated as a respected contributor to the graduate or</td>
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<td>6</td>
<td></td>
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<td></td>
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<td>4.60</td>
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<td>research program in which I am involved.</td>
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<tr>
<td>Q-12 I have been given an opportunity to be engaged in significant</td>
<td>7</td>
<td>4</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td>4.38</td>
</tr>
<tr>
<td>research for my thesis or dissertation.</td>
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<td>Q-13 If I decide to change committee chair, the mechanism for doing</td>
<td>6</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td></td>
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<td>4.06</td>
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<td>so is suitable.</td>
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<td>Q-14 I am informed of opportunities for professional development and</td>
<td>2</td>
<td>4</td>
<td>3</td>
<td>4</td>
<td>2</td>
<td></td>
<td>3.00</td>
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<tr>
<td>contacts outside TTU, such as attendance at professional meetings.</td>
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<td>Q-15 Graduate teaching or research assistantship stipends are</td>
<td>9</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td></td>
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<td>4.29</td>
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<td>adequate.</td>
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<tr>
<td>Q-16 The program offers adequate opportunity for its graduate students</td>
<td>2</td>
<td>5</td>
<td>2</td>
<td>1</td>
<td></td>
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<td>3.70</td>
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<td>to gain teaching experience.</td>
<td></td>
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<tr>
<td>Q-17 Graduate teaching assistantship assignments are made equitably,</td>
<td>8</td>
<td>6</td>
<td>2</td>
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<td>4.38</td>
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<td>based on established criteria.</td>
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<td>Q-18 Program policies are clearly defined and readily available to me.</td>
<td>3</td>
<td>7</td>
<td>4</td>
<td>1</td>
<td></td>
<td></td>
<td>3.80</td>
</tr>
<tr>
<td>Q-19 Graduate program policies clearly identify petition and appeals</td>
<td>4</td>
<td>8</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td></td>
<td>3.81</td>
</tr>
<tr>
<td>procedures available to me.</td>
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</tbody>
</table>

Year(s) in Program

<table>
<thead>
<tr>
<th>Year</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st year</td>
<td>2</td>
</tr>
<tr>
<td>2nd year</td>
<td>9</td>
</tr>
<tr>
<td>3rd year</td>
<td>1</td>
</tr>
<tr>
<td>4th year</td>
<td>4</td>
</tr>
<tr>
<td>5th year</td>
<td></td>
</tr>
<tr>
<td>6th year</td>
<td></td>
</tr>
<tr>
<td><strong>PARTICIPANT TOTAL</strong></td>
<td><strong>16</strong></td>
</tr>
</tbody>
</table>
### Have you ever attended any of the professional development seminars offered through the Texas Tech Graduate School?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
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<tbody>
<tr>
<td>3</td>
<td>12</td>
</tr>
</tbody>
</table>

### Did you find the seminar(s) to be beneficial?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>2</td>
<td>1</td>
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</table>

### What do you consider to be strengths of this program?

They take great care of the students and are concerned about the welfare of the students. The courses are great and help the students to become better at what the student wants to focus on.

The clinical training is excellent. The faculty are all available whenever I need help and I feel like they really care about my education, future career, and personal wellness.

Though resources have been limited to the degree sought, the doctorate students are a crucial resource to learn from. In some cases, the PhD candidates were able to guide me, especially in my clinical development. These students went above and beyond in offering me research and teaching opportunities.

The faculty is one of the most intelligent group of peoples that I have ever been surrounded by. The support they provide is also incredible. My fellow peers are also supportive, and I needed that in this program.

The length, internship, classes and clinical experience, and the involvement of the faculty.

The environment of the faculty and the students has been the best part of my program. I feel fully supported by the faculty and they have been integral in my professional development.

The faculty are experts in their fields and approachable. The curriculum and other degree activities are very applicable to a variety of professional goals.

Well-organized plan of study

Great faculty, accessibility to research projects

The faculty care about their students. Incorporating teaching opportunities into regular coursework is appreciated, as it provides opportunities to teach at a graduate level. The teaching assistantship in CFAS was extremely helpful to my development as a teacher. The opportunity to take the supervision course and to supervise students was awesome and great preparation for work after graduation. The opportunity to practice Medical Family Therapy at Covenant was definitely a strength.

My advisor's moral support and mentoring skills, the positive work environment in the department, positive interactions between colleagues and professors

The faculty is supportive and encouraging. If you are proactive, there are many opportunities available to support whatever professional path is most suitable.

excellent hands on training and the faculty are available for meeting.

### What do you consider to be weaknesses of this program?

None

It isn't accredited by COAMFT.

Definitely research opportunities. Though to be fair, the masters program is identified as more of a clinical strength. Another limitation is the teaching opportunities available to masters students. I had to reach out and ask PhD students if I could guest lecture in their classes to gain any experiences. Lastly, funding opportunities. It seems that with out having a family to provide for, any stipend or assistantships are limited.

The biggest weakness of the TTU MFT program is that it is occasionally unorganized, in terms of paperwork. The paperwork aspect of the program, within the clinic, can be difficult to keep up with and extremely confusing while beginning in the program. Thankfully, the professors are open to assisting the students with paperwork, such as MCSRs, but there is still a lot of confusion about these documents and how they are to be completed.

The lack of help in assisting in completing a masters thesis and the lack of varies internship opportunities.

It would be helpful of the faculty were more willing to be collaborative with their research with the students. Some cultures and genders are socialized to not take the initiative and may need to be asked to collaborate, which could increase the collaboration of research with faculty and students.
<table>
<thead>
<tr>
<th>What changes, if any, could be made to improve the quality of this graduate program?</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
</tr>
<tr>
<td>Full accreditation by COAMFT.</td>
</tr>
<tr>
<td>I would like to see an increase in research and teaching opportunities in the masters program. I would also like to see a change in the structure of the program. That is, more interaction with PhD students and even amongst different masters cohort. This could include courses available and even clinical interactions.</td>
</tr>
<tr>
<td>In the beginning of the Master's program, it would be helpful for students to know what classes they should take if they are hoping to practice therapy in a different state. Also, clarification on how to complete paperwork would also help. Despite these two things, this program is wonderful and I am thankful to be a part of it.</td>
</tr>
<tr>
<td>Offer workshops or seminars or a class for those wanting to complete a masters thesis.</td>
</tr>
<tr>
<td>More collaboration with other departments. We are becoming more collaborated with ADRS but there is a lack of collaboration with HDFS, which I think is incredibly important for our research.</td>
</tr>
<tr>
<td>Research opportunity and support</td>
</tr>
<tr>
<td>Develop coursework in Medical family therapy and/or the relationship of health to family &amp; therapy. Considering the influence of the physical/biological (especially illness) on families &amp; vice versa, as well as the strong interest in MedFT expressed by recent applicants and current students, it would be great to see this &quot;track&quot; developed more fully, especially since it is advertised as part of the program already. Such coursework is beneficial not just to those specifically interested in this area but to all MFTs, as it increases our ability to train MFTs and others to see their valuable place in the rapidly changing healthcare system and to adapt accordingly. Otherwise, we do ourselves a disservice by not better understanding and conveying the pivotal role MFTs play in overall health &amp; healthcare. / Add at least 1 more faculty! It seems our current faculty are already busy to the max. To continue maintaining our high standards, we need to distribute the work more evenly &amp; hire 1 more</td>
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<table>
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<tr>
<th>Please feel free to add any additional comments or questions in the space below.</th>
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<tbody>
<tr>
<td>Overall, my experience in this program has been excellent. Thank you Texas Tech for taking an interest in improving our program. It is already a wonderful program, but no program is perfect. Thank you.</td>
</tr>
<tr>
<td>The MFT program has been amazing and I know form talking to other students at other programs we have one of the most student centered program and the least competitive environment. I think this fosters the students comfort ability with approaching faculty and aids them in getting through the struggles innate in a doctoral degree. Thank you to all the faculty for a wonderful experience despite the stress of the curriculum.</td>
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</tbody>
</table>